
Nursing and Ethics: Link Between the Ethics of Emmanuel Levinas and The Theory of Jean Watson

¹ Damjan Abou Aldan

¹ High school Koprivnica, Koprivnica, Croatia

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Author for correspondence:

Damjan Abou Aldan
High school Koprivnica
Trg Slobode 7, 48000 Koprivnica, Croatia
E-mail: daboualdan@gmail.com

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Abstract

Introduction. Emmanuel Levinas' ethics had an impact on Jean Watson's 1979 *Theory of Human caring*. Watson suggests that nursing ethics may be closest to the ethics of care as determined by Levinas.

Aim. To establish arguments for and against above-mentioned thinking.

Methods. After an initial comparison of the statements made by Watson and the statements made by Levinas, a review of scientific articles was made to establish the link between nursing ethics and the ethics of Levinas.

Results. About 20 articles and books were analyzed. A dozen references have been singled out to establish a link in argumentation, one paper presented a partial critique, while one suggested that nursing ethics should be based on some other ethical theory.

Conclusion. Watson suggested that nursing ethics could be based on the ethics of Levinas. Since the 1990s some authors have made affirmative claims to this proposal, while others question the real possibility of its application in practice. Most authors agree that nursing ethics should not be based on the virtues of Christian charity, nor on deontological foundations or bioethical principlism. No other theory invokes that level of responsibility to another human being as Levinas does. Critics say his ethics are extremely abstract and as such are difficult to apply in a practical discipline such as nursing.

Introduction

Anyone who has looked into the eyes of a person in pain and suffering at least once knows the message that that look sends, and we can paraphrase it in the words of Emmanuel Levinas "Don't hurt me!"

The development of medical sciences has led to a number of solutions to once unsolvable health problems, but at the same time the solutions offered are often in conflict with thinking about the well-being of the person to whom the health service is provided. People today are looking for individualized comprehensive care, and the health system (in order to provide it) began to adapt by introducing various formal methods of individualized care. The existing ethical practice in the health care system is predominantly realized based on deontological ethics or on principlism in bioethics, which is not in line with the stated expectations. What is according to the code of ethics ethical, and what is stated in contemporary bioethical texts, has become dubious.

With the appearance of *Theory of human caring* by Jean Watson in 1979 the moral dimension of nursing was shown through the ethics of Emmanuel Levinas. Nursing ethics is thus close to the ideas of the ethics of care. Watson argued that the state of illness increases the responsibility of nurses to man just as described by Levinas who emphasizes that responsibility consists in not allowing the Other to be left alone (1).

Although during the 1980s the opinion that nursing should take over the ethics of care as professional ethics began to dominate in the USA, and Watson in her works remains faithful to the views of Levinas, it is not negligible that these opinions hardly reached the general professional public. Thus, a search of the literature reveals only a few dozen articles in which an analysis is made between the ethical settings of Levinas and the ideas of nursing.

The question arises - are the ethical postulates of Emmanuel Levinas appropriate as a foundation on which nursing could build its normative ethics? First of all, Levinas' ethics belongs to descriptive ethics, and thus any transformation of it into norms or guidelines would actually grossly jeopardize fundamental ideas and assumptions. At the same time, it

is extremely abstract, and difficult for the average reader to understand. It is therefore not negligible that as such it could be misinterpreted in its uncritical application (2). It is not negligible that the presentation of Levinas' ethics is actually a strong call for the health system to be directed towards a human as a person and to become ethically grounded which is the ideal on which nursing is based (2).

Methods

For the purposes of this paper, an initial comparison of the statements made by Watson and Levinas were made. The review of scientific articles was made to establish the links between nursing ethics and the ethics of Levinas. About 20 references were found and analysed in which the issue of the nursing ethics in connection with the ethics of Levinas was problematized. In five of them, a link in argumentation between the two authors was found, one paper presented a partial critique, while one suggested that nursing ethics should be based on some other ethical theory.

Ethics of Emmanuel Levinas

The *Ethics of the Other* is one of the synonyms for the ethical theory of Emmanuel Levinas (1906-1995), one of the most influential philosophers of the 20th century. He does not define ethics as one of the philosophical disciplines but as the first philosophical discipline.

Other, one of Levinas' fundamental notions, emerges as face, interlocutor, and transcendence. The Other is a person who has his own dignity. Unlike Kant's ethics, which was based on the principle of duty, Levinas' ethics is based on the principle of responsibility (3). The Other is always marked in Levinas' ethics with the capital letter O. In the act of accepting the Other, I become aware of myself, and by doing good to the Other, I am doing good to myself. The term face of the Other is also a significant notion of his ethics, one that invites us to forget ourselves to care for the Other. From this care, and especially in states of uncertainty, fear of death, arises the ques-

tion of the meaning of life and the desire to find the answer to this question in selfless giving of oneself to another. The Other thus becomes the purpose of our action, the diminution of all ethical egoism, emphasizing that love is a deeper relation of human existence - rational goodness (4).

Levinas does not explain to us who the Other is, and what his relationship is to us and to the totality, but simply emphasizes the importance of striving for the Other. Thus, the two central notions of his ethics are the Other and responsibility. True transcendence is realized only in responsible care for the Other. If we have not achieved transcendence in our relationship with the Other, then this means that the original interpersonal relationship has not actually taken place (5).

His expression is metaphysically demanding. In his definition of good, subjectivity and transcendence he makes very complex comparisons and concepts. He criticizes the assumption that ethics should be reduced to instructions or objective guidelines for doing the right thing, because the idea of good is always present in the uniqueness of each interlocutor. *„Goodness is not spilled on the anonymity of one collective, which is offered panoramically to be absorbed there (...) It has a principle, a beginning, it comes from a self, it is subjective. It is not regulated by the principles that are inscribed in an individual being that manifests it, nor by state codes“* (6).

In ethics, Levinas gives priority to the experience of meeting the Other - it is a privileged phenomenon, the epiphany. In meeting the Other, the individual immediately recognizes the transcendence and heteronomy of the Other. To strive for the Other also means to seek meaning, and the encounter achieved, especially in borderline situations, also means finding meaning. The Other is thus a call - an appeal that directs us towards a pure experience of awareness of the closeness of another person (4).

Getting to know yourself is just as difficult as getting to know another. The only way to achieve this, or at least strive for it, is precisely through an encounter with the Other. His closeness allows us to reach that level of transcendence that Levinas is talking about, and at the same time to know ourselves in it. But that doesn't mean simple addition. *„Absolutely other is the Other. He doesn't add up to me. A community in which I tell you or we is not a plural of me“* (6). Other and other people represent the whole of

humanity that transfers to me the responsibility for each person (4). To aspire to the Other is actually to aspire to humanity. Affirming oneself through serving another does not only mean finding meaning but becoming the realization of meaning.

Although he was a critic of traditional religion, Levinas identifies Holy in moral responsibility to the Other. That responsibility, that moral moment, determines the essence of the relationship from which arises the feeling of togetherness and closeness that is not imposed but desired. The nearness of God is thus in meeting me with another man. It is then a holy commandment without holy authority. Levinas emphasizes that sensitivity to the Other actually allows one to transcend one's own egocentrism in order to elevate oneself ethically and accept the Other (7).

Although it is emphasized that Levinas' ethics is descriptive, the question arises as to how responsibility towards the Other is presented in practice and what caring for the other should mean. The relationship with the Other in care means sending the message "I'm here". The notion of service is emphasized here, which, if we wanted to describe it in one word, then it is love. Service that is transformed into giving is the best testimony because man realizes the deepest and most mysterious connection with the Other (1).

Nursing, ethics, and care

From the period of Florence Nightingale nursing finds its foundation in the ethics of virtue. During the first half of the 20th century, nursing continued to develop its moral views on the principles of Christian ethics. The first code of ethics for nurses was proposed in 1926, and the first international code of ethics was proposed in 1953. With the development of bioethics, begins the debate over whether nursing ethics can be found within the framework of bioethical principles. During the 1950s and 1960s, the development of the first autonomous theories and conceptual models began in the United States. This shift inevitably meant abandoning previous ethical considerations and attempting to determine professional ethics (8,9).

Given that the 1960s and 1970s were marked by the development of nursing theories in which the term *care* was problematized as a fundamental concept, it was clear that establishing professional ethics on the

deontological basis of prescribed rules, or principles of operation, could not be sufficient.

Theorists, among whom Jean Watson stands out, began to build a new approach to the profession in which care, altruism, love, began to dominate not only as professional ideals but also as a paradigmatic basis on which to build the overall power of the reformed profession. Following this, the reorientation of professional ethics to the field of ethics of care began, and Watson will emphasize in her works that in this domain it is closest to the ethics of Emmanuel Levinas: „*Along the temporal and social-historical path, which serves as the backdrop for us to build ourselves as human beings, we need to give care and receive care. However, care is not solely a necessity or an imposition of life, but can be understood as intrinsic to the existence, something that naturally exists before human beings do anything. It is expressed as a way of relating to the Other, but not always conforms comprising the ethical and aesthetic dimensions in this relationship with the Other*” (10).

The terms *nursing*, *care* and *nursing care* are the basic concepts of the nursing profession. Nursing is attempted to be paradigmatically defined by the concept of nursing care. This attempt is a reaction to the realization that care is a universal concept that could not belong to one professional group. But if we were to remove the term care from health care the only thing that would remain are medical interventions that in etymological definition neglect the concept of the person as the one being cared for. There is usually no distinction between *nursing* and *care*, and these terms are often interchangeable (1).

From a logical point of view, the notion of *nursing* adds some specific difference to the general notion of *care*. In other words, the knowledge inherent in the discipline of nursing should be compared to those essential dimensions of care that do not have to be found in everyday “care”, but in *nursing care* receive a moral obligation and ultimate focus on the person. Levinas interprets how to care for the other (s’occuper de l’autre) means to respect humanity portrayed in the face of the Other (1). It is not surprising, therefore, that the conceptualization of nursing care includes values, and ethics in nursing becomes a paradigmatic basis (7).

Ethics of care

The ethics of care is one of the newer ethical theories based on feminist moral theories. The basis of this theory is the principle of doing good for people in need of care. Due to the fact that nursing is based on altruism and emotional support to other people, the ethics of care is often posed as an alternative to deontology (11). Nursing has taken care of ethics as the dominant ethical theory in which a caring relationship during patient care determines the morality of the act. However, the ethics of care in certain segments is not the best choice for nursing because it requires unconditional care for patients, even when this is not possible. By imposing this way of thinking we would often find ourselves in front of our own judgment of conscience because due to a number of factors we would not meet moral expectations.

Theory of human caring by Jean Watson

Jean Watson is the founder of the *Watson caring science institute* and a retired professor and a retired dean of the College of Nursing, University of Colorado. She presented the *Theory of human caring* in 1979 as one of the foundations of the philosophy of the nursing profession in which the central emphasis is on moral action. The basic idea of the theory is contained in the idea that health care is based on joint care and love, which is the basis of the actions of nurses. By combining the idea of care and love, an attempt was made to define a new, deeper interpersonal relationship. Watson, guided by ideas of the ethics of care, defines the transpersonal relationship as the foundation of nursing. To emphasize the meaning of her theory Watson introduces *caritas factors* using the Greek word *caritas* which means nurture, appreciate, pay attention (12).

Today, her theory has three basic features, which are:

1. Caritas processes - initially listed ten caritas factors that were later renamed clinical caritas processes.
2. Transpersonal caring relationship - represent the connection of two individuals on a deep inner level. Transpersonal means transcending the personal ego and reaching the level of the spiritual, even the cosmic, by combining the abilities and potentials of interpersonal action for healing.
3. Caring moments and caring occasions.

The theory of human caring goes beyond the practical guidelines for conducting health care. The importance of connection and transpersonality is more important than physical well-being because cosmic connection represents a certain link to healing and well-being. Such well-being of the individual equally affects the well-being of the nurse as a person and thus nursing as a profession. By doing so, the ultimate benefit extends to the community and beyond (13).

Application of the ethics of Emmanuel Levinas within the *Theory of human caring*

The ethics of Emmanuel Levinas was part of Jean Watson's theory in the 1979 book *Nursing: the Philosophy and Science of Caring*. In her works, Watson emphasizes how Levinas' ethics had a strong influence on her and how she sees its practical value in the ontological and epistemological basis of nursing. In this context, it should be emphasized that Watson is a critic of the dominance of the biomedical model in modern health care, stating that it only diminishes the exceptional therapeutic and healing power of interpersonal relationships (2). Reductionism has reduced a human to a set of constituent parts, and human, lowered to the level of a machine, is brought into the moral status of an object. Although sophisticated medical technology interventions have many advantages, there are dangerous trade-offs, especially in the domain of digitalized health communications. It has become the standard, instead of interpersonal, embodied face-to-face interaction. *"This foremost stumbling block in our healthcare system generates an urgent moral imperative to resuscitate embodied presence in healthcare"* (14).

Instead of looking at a person as a bio-psychological and social being, preference should be given to the person's experience. It then reveals what it means to be a human being, existing through physical, emotional, relational, and spiritual experiences (1). Care whose development is based on reason, guided by established epidemiological-clinical and technical evidence concerning therapeutic intervention, is indispensable. However, it is necessary to create space to integrate indigenous knowledge and practices of health promotion, disease prevention and treatment, and healing practices, since, in order to meet the needs and specificities of a differentiated population group, each knowledge should not be more prevalent

than the other, since both are complementary (10).

Watson emphasizes ideals that have moral significance. Referring to Levinas, she presents the concept of man as a person who shows us his wholeness through his face, telling us that he exists. Taking such an interpretation changes the attitude towards man - he as a whole becomes a criterion of performance. In this regard, Watson emphasizes that: *"the philosophy of Emmanuel Levinas and his notion of the Ethics of Face help us connect with this ancient and contemporary truth. Likewise, I acknowledge the work of Knud Logstrup, a Danish philosopher who mirrors views similar to Levinas, but from the metaphor of Hand, in that he reminds us that: Holding another person's life in one's hand, endows this metaphor with a certain emotional power ... that we have the power to determine the direction of something in another person's life ... we're to a large extent inescapably dependent upon on another...we are mutually and in a most immediate sense in one another's power"* (15).

The Other thus confirms my meaning to me. This takes on special value when the human I serve needs my care because without it he disappears. *"When working with others during times of despair, vulnerability, and unknowns, we are challenged to learn again, to reexamine our own meaning of life and death. As we do so, we engage in a more authentic process to cultivate and sustain caring healing practices for self and others. Such care and practices elicit and call upon profound wisdom and understanding, beyond knowledge, that touch and draw upon the human heart and soul"* (15).

The primary value of Levinas' ethics is not dialogue, but service - giving oneself to the Other. Only when a man is ready to serve is he ready to take a share on the principle of responsibility, and that means behaving and acting morally. Watson suggests a reversal and emphasizes that nursing offers a solution versus a mechanistic bio-medical model. It is a solution in the interconnectedness of care, love, and infinity in which we take our humanity as a mystery to be revealed not by neglecting the biomedical approach, but by complementing it (16). Watson even says that if we fail to do that, some new group of professionals will have to show up to do it because patients can't wait any longer. The relation of man's care to man, in every given moment, becomes with all its moral characteristics the foundation of humanity which unites every individual, with every individual through, as

Watson states, the cosmic energy of love. „*How can we dare to be so bold as to bring caring and loving and infinity of souls into our lives and work and world again? Because, without returning to this ancient place of cosmic power, energy, and beauty, we are inclined toward what Levinas referred to as a totalizing of self and other - that is, a congealing of our humanity, separating us from any connection with spirit, with infinity, with the great divine - with no hope for healing and wholeness... So rather than asking how can we dare to bring love and caring together into our lives and work? We can ask: How can we bear not to?*” (15).

She further explains to us that not confronting our humanity can actually be an act of cruelty. So, in these deep ethical philosophical views of Levinas and Logstrup, which unite with the theory of care, we recognize that only through our being, through our human presence towards facing ourselves and others, do we hold others in our hands, whether in good or evil, either opening horizons to infinity. In this respect of ethics and metaphysics, through the metaphors of love, face, and hand, Levinas placed ethics above ontology: he placed ethics as the first principle of philosophy. It is an acknowledgement of ethical responsibility for another, understood through vulnerability and closeness. In this respect, love is original (15). In the introduction to the chapter *Global human caring for a sustainable world*, Jean Watson states: “*Nursing’s practice of human caring is an emergent quality of whole systems, making new connections between the unitary energetic patterns of worldwide human caring practices and peace in our world. This relationship between human caring and peace represents a fundamental path of consciously attending to the pattern of unity and the human-environmental global-universal field of oneness of all*” (17).

Critique

Birgit Nordtug makes several comments and criticisms in which she emphasizes that Watson often uncritically refers to Levinas in order to legitimize his arguments and thoughts. This critique nonetheless focuses more on Watson’s work over the past decade but given that this is a continuity in the development of her theory is not negligible (2). Watson has achieved global readership over the decades and has a significant role to play in raising the science of nursing to the level of an independent disci-

pline within the nursing profession that, she herself claims, is stifled by dominant scientific thinking in medicine. But in emphasizing the criticism, the following stands out: “*Watson underlines that her authorship has developed in the same direction. However, is this the same Holy as Levinas writes about? As already noted, I do not think so - even though she claims otherwise. While Levinas relates the holiness of the Holy to his notion of singularity, arguing for a holiness that breaks with all kinds of ontological thinking, Watson seems to think that she follows Levinas’s footsteps by mixing different kinds of religious and spiritual approaches ... she ignores the pure metaphysical character of Levinas’s Holy and his critique of all kinds of religious and spiritual thinking which applauds the sacred. For Levinas, God exists only as an invisible metaphysical desire that keeps the responsibility for the Other going on*” (2).

It should also not be overlooked that for Levinas, vulnerability is actually the first presumption of responsibility. However, if we were to build ethics on these foundations, we should quickly be reminded that exposure to other people’s vulnerabilities causes other side effects such as emotional burnout and numerous mental difficulties of those who are part of the helping professions in the most challenging emotional relationships. In his conclusion, analyzing why Watson opted for Levinas Nordtug states: “*Levinas’s ethical perspective has in the last decades acquired a significant popularity in a number of academic fields - not only in Nursing and Caring Science. It is hard to say what makes a particular perspective popular. There is a tendency that popular perspectives become popular simply because they are popular*” (2). While Nordtug expresses fear that the uncritical application of any ethical teaching may do more harm than good if applied only for its popularity, it still fails to prove that that harm is real or greater than any possible neglect of man as a person.

Conclusion

Since the Theory of Human Care was introduced in 1979, the nursing public has also been offered the ethics of Emmanuel Levinas as the ethical frame-

work on which nurses could build their professional ethics. Jean Watson emphasizes that we still do not have a better ethical basis for the development not only of ethics but also the ontological basis of the whole profession. The core of Levinas' ethics – his analysis of establishing our subjectivity in an ethical encounter with our neighbour or Other – applies to both health practice and the identity-building project of nursing science and science of care.

Through the idea of the Other, in fact, Levinas offers us the knowledge of our own transcendence, considering that only through caring for the Other we realize our own meaning and reach the level of the sacred.

No profession is as close to a human in need as nursing is. Yet, after 150 years of professional development, nursing has probably not yet achieved the status of discipline and profession it desires. That is why it is important to determine a theoretical basis on which to build it, and theorists have undoubtedly agreed that a single profession could be found in a moral dimension that is unquestionably more pronounced than in all other health professionals. Precisely because of this unique relationship, Watson suggested that instead of a deontological or utilitarian approach (the bioethical approach is not even considered), it should be approached through the ethics of care, according to the ethical teachings of Emmanuel Levinas. It is impossible to ignore its contribution and define it as irrelevant, moreover, it should be accepted and studied even more intensively. The objections raised by certain authors are worth considering and it remains to be seen whether it is possible to find another, more autonomous ethical path. But until then, patient care based on Watson's theory and Levinas ethics has been shown to have significantly better outcomes for patients themselves who are offered alternatives between cold mechanistic medicine and the emotionally caring, ethical basis of human care.

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SESTRINSTVO I ETIKA: POVEZNICE IZMEĐU ETIKE EMMANUELA LEVINASA I TEORIJE JEAN WATSON

Sažetak

Uvod. Etika Emmanuela Levinasa imala je znatan utjecaj na *Teoriju skrbi o čovjeku* Jean Watson iz 1979. Watson predlaže da etika sestriinstva može biti najbliže etici skrbi kako je to odredio Levinas

Cilj. Utvrditi argumente za i protiv navedenog razmišljanja.

Metode. Nakon početne poredbe postavki koje iznosi Watson i tvrdnji koje određuje Levinas, učinjen je pregled stručnih i znanstvenih članaka kojima se utvrđuje poveznica između etika u sestriinstvu i etike Levinasa.

Rezultati. Analizirano je oko 20 članaka i knjiga u kojima se problematizira pitanje etike sestriinstva u vezi s etikom Levinasa. Izdvojeno je desetak referencija u kojima se utvrđuje poveznica u argumentaciji, u jednom radu iznosi se djelomična kritika, dok se u jednom predlaže kako bi se etika sestriinstva trebala utemeljiti na nekoj drugoj etičkoj teoriji.

Zaključak. Watson je predložila da se sestriinstvo može bazirati na etici Levinasa. Od 1990-ih neki autori iznose afirmativne tvrdnje tom prijedlogu, dok drugi propituju stvarnu mogućnost primjene u praksi. Većina se autora slaže da etika medicinskih sestara ne bi smjela biti utemeljena na vrlinama kršćanskog milosrđa ni na deontološkim osnovama ili bioetičkom principalizmu. Nijedna druga teorija ne zaziva tu razinu odgovornosti prema drugom čovjeku kako to čini Levinas te se može razmatrati kao alternativa. Kritičari navode kako je njegova etika iznimno apstraktna te ju je kao takvu teško primijeniti u praktičnoj disciplini kao što je sestriinstvo.

Ključne riječi: Levinas, Drugi, Watson, sestriinstvo, skrb
