

Beyond Life Skills and Adolescence Education: Conceptualising Mental Health as the Ethic of Care

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Abstract *Adolescence Education, with specific focus on Life Skills Education, has been internationally recognised as a key area of concern in education. Life skills are defined in psychosocial terms to include personal, social, cognitive, and affective domains. In such an approach, the person is understood as a summation of parts and the notion of the 'whole person' is ignored. This paper explores the 'Ethic of Care' as a framework for school education and argues for life skills education to be subsumed within this framework. Further, the paper builds a case for life skills education to be understood within the broad framework of ethic of care. Where educational institutions provide opportunities to students to actualise and grow, life skills will develop simultaneously. The ethic of care will also ensure a more empathetic and humane society.*

Life Skills Education, conceptualised by the World Health Organisation, has been a major concern for the formal education system in India in the last decade. The Central Board of Secondary Education had introduced the concept of life skills education in schools as far back as 2003-2004 and had made it mandatory for all schools to develop and conduct these programmes, as part of their curriculum. In a more recent circular issued to all schools (2012), CBSE reiterated that life skills must continue to be an integral part of school education. The circular also spelt out that the main objective of the life skills education programme in school was to 'empower the affective domain of the learners so that they are able to develop a sense of self-confidence, eco-sensitivity and right approaches to life processes etc'. Likewise, CBSE has made concerted efforts in the last decade for the introduction of adolescence education in schools. In many schools both the programmes have been interwoven and have been introduced as a common programme. In this paper, an attempt is made to move beyond life skills education and adolescence education. However, before an alternate framework is proposed, an attempt will be made to analyse the existing frameworks in which these programmes are couched and discuss some

important issues related to them.

One of the landmark documents in life skills education was the one released by the Department of Mental Health of the World Health Organisation in the year 1999. In its opening stanza it has outlined the key objectives of promoting life skills education. The first and foremost objective is to facilitate the development of psychosocial skills in a culturally and developmentally appropriate manner. Secondly, life skills education must also make contributions to the personal and social development of individuals. Finally, it must also ensure prevention of health related problems, as well as those related to other social issues. Thus what emerges is that the concerns of WHO are not confined only to the adolescents who go to school; rather they include those who are out of school as well. There is thus a need to have a more expansive notion of the nature of life skills programmes and their outreach. School, community and society at large must jointly share the responsibility.

At a conceptual level, life skills have been defined in psychosocial terms to include personal, social, inter-personal, cognitive, affective and universal domains. The major concern in such a conceptualization is that the person gets understood



as a summation of parts and the notion of the 'whole person' gets ignored. By focusing on only the psychosocial aspect, the affective and cognitive get artificially divided. It must be emphasised that the person does not function in parts. In everyday functioning in fact, it is almost impossible to segregate affective from cognitive. Further, the division of the person into different domains, also leads to a misconception that separate sets of activities need to be designed for promoting life-skills in schools and that life skills need a separate place in the curriculum. In the primary life skills document, the arguments given in favour of introducing life skills in schools are that they promote healthy development of children and adolescents. They also help to prevent children and adolescents from vulnerability to mishaps and diseases. Finally, they help in the process of socialisation and prepare children for changes in social circumstances. What needs to be pointed out here is, that these are also the broader aims of education and therefore already subsumed in the educational process. By advocating a separate programme, what comes across is that the proposed life skills programme either finds the existing school programme as inadequate, or it considers school needs, aims and goals as different from those that a life skills education programme is expected to promote.

Further, while discussing teaching of life skills, most documents support an activity based approach. The document by WHO (1999) states that life skills can be taught using experiential learning and a supportive learning environment. It also proposes the use of story-telling, discussion, debates, peer-supported learning as alternate methods. The problem with this proposition is that the activity based approach is assumed to be non-didactic. However, if a non-didactic activity based approach is used for everyday teaching in the classroom, then there will be no need for having a separate curriculum for life skills. So conclusively it may be inferred that inherent in the advocacy for a separate life skills education programme reinforces the view that what schools do in general to facilitate the development of children, is insufficient in fostering the skills that are required for the life and existence of a person.

Understanding the Ethic of Care

Drawing from the issues flagged in the earlier section, this paper explores the 'Ethic of Care' as an appropriate framework for school education and argues that this framework subsumes life skills education. The key idea in this is that life skills education has to be integrated into the everyday teaching learning processes that schools follow and woven into children's experiences of life at school, rather than introducing it as a separate discipline. It does not require a separate curriculum; rather it can be addressed and get inculcated if a care based approach to teaching is used. The basic question then is: What does it mean to care? Milton Mayeroff (1971), in his book 'On Caring' explains care as helping someone to grow and actualise him/herself. 'Caring' focuses on the actualising process, wherein the emphasis is on the whole person. It recognises a person as a physical, cognitive as well as a psychosocial entity, functioning holistically.

The actualising tendency that the ethic of care considers so significant is similar to what Carl Rogers discusses in his theory. According to him, each person is born with an innate ability to become self-actualized. All pathological conditions arise when this actualising tendency is inhibited or blocked. He further states that to help any person out of the pathological conditions, an enabling environment should be created without laying out any conditions of worth and providing unconditional positive regard. Unconditional positive regard keeps the sense of self of the person, buoyant. If we take Rogers theory away from the pathological conditions, then it may be inferred that a person can best grow in an environment that does not place conditions of worth. In his view, learning in its true sense emerges from one's own experiences; it is an act of reflection and self-discovery. So the person has to learn to trust his/her experiences instead of others' experiences. He thus finds direct teaching of little consequence in this regard. (Rogers, 1969)

Mayeroff (1971), distinguishes care from such meanings as wishing well, liking, comforting, or simply having interest in someone's life. He highlights the significance of caring, for the one who cares, by stating that care gives a purpose and



meaning to a person's life. His work describes caring in two domains: one is a general description of caring, its nature and characteristics. The second is about how care gives purpose and meaning to life. He argues that caring gives a meaning and purpose to the life of one who chooses to care. Whatever a person does for the one he/she cares for is out of choice and not compulsion. He states that care becomes the pivot around which the life of a person revolves. He also argues that care helps to harmonise one's self with the world. This harmony is not superficial, rather it is deep-seated and enduring. The basis of this harmony is the recognition that we are related to one another. He goes on to say that coupled with the feeling of care is also an element of submission. What he means by submission is that, when one prioritises things in their life according to what one cares for, a person may exclude some things that are interrupting the process of caring. This submission does not lead to bondage, instead according to Mayeroff, it is liberating. He further explains submission as recognising oneself as one is and accepting life as it is, without any pretensions.

Mayeroff uses the term 'in place' to explicate the significance of caring in one's life. This phrase is very important to understand what caring really means. In reality it means that care for something or someone, helps the one who is caring also. It helps her/him to create a place for themselves in the world. Let us see how this happens. The case of a caring teacher will help to illustrate this. If for instance, a teacher cares for a particular student, she will make the best possible efforts to ensure that her student gets maximum support to realise his/her potential. She is likely to spend extra time, energy and effort to help the student overcome his/her problems and obstacles. This enhances the teacher's involvement in the world. Thus the term 'in place' is not a social position; rather it is about finding one's own place by one's own efforts.

Nel Noddings (1984), in yet another refrain regarding 'caring', suggests that caring is as an 'active virtue' requires two feelings. One feeling is a natural feeling that flows without any effort. This can be the feeling that a mother has for her child. The second feeling emanates from the memory of

the moments in our life when we were cared for. It is this memory of having been cared for, that propels us to care for others. Thus the natural caring sentiment becomes the basis of the second ethical feeling of 'I must'. Ethical caring is similar to what Kant has argued that ethical is duty for the sake of duty and not out of love. But here the notion of ethical caring is not superior to natural caring, because the ethic of care maintains a caring attitude and that depends on natural caring (Noddings, 1984).

The virtue described by the ethical ideal of caring is built up in relation. It is based on reaching out and responding to the needs of others. Noddings sees the initial impulse to care as spontaneous and natural. According to her, each one of us has an 'I must' feeling as an initial response. But we do not often respond to the 'I must' because either we feel we are incapable of doing anything or we remove ourselves from the set of agents, who can actually do something in a given situation. Caring requires that the person responds to the initial impulse with an act of commitment. This act may be overt or the one caring may also abstain from acting if it is in the best interest of the cared for. The most important test of caring is the understanding of the intentions of the one who is caring. It also depends on whether the one who is caring, has in any way assisted the cared for in accomplishing his/her project (Noddings, 1984).

The second question is why should we choose to care? The reason why we choose to care is because of the genuine moral sentiment that arises from evaluation of the caring relations as good or as better than, other forms of relatedness. The person responds with the expectation that his/her response will enhance his/her ethical ideal. This value arises as a product of actual caring and being cared for and one's reflection on the goodness of these concrete caring situations.

Virginia Held (2006), highlights the interdependence of human beings on one another. In her view, the ethic of care thus values emotions such as sympathy, empathy and responsiveness. However, instead of focusing on raw emotions, the ethic of care places importance on emotions that are tempered with education and reflections. She also



states that care alone may not be appropriate because care also can become misguided. Benevolence and empathy may sometimes become overwhelming, leading to problems. Therefore, care has to be subjected to moral scrutiny and analysed.

The 'ethic of care' thus places the ethical ideal of care above principles. It is not that principles are unimportant, but the argument here asserts that they may not be able to say what to do in a given situation.

Life Skills Education and the Ethic of Care

When the aims of education emphasise the development of caring relations, then life skills are automatically subsumed under this umbrella. If we revisit the definition of life skills education, it states that the purpose is to empower the affective domain of the learners so that they develop a sense of self-confidence, eco-sensitivity and right approaches to life processes etc. The ethic of care gives voice, freedom and choice to the learners and thus it places the affective domain in the forefront without creating the cognitive - affective dichotomy. Even during the teaching learning process, Noddings has highlighted that importance be given to the learners instead of the subject that is taught.

The ethic of care also places emphasis on the teacher student relationship. If this relation is driven by compulsion and not by will, it may not lead to establishing a caring relation. So, caring relations are best guided by free will and choice. The obligations that are associated with this relationship are thus not forced, rather there is a convergence between what the teacher feels she is supposed to do and what she wants to do.

Caring for oneself therefore is an important aspect of the care theory. It implies that we become responsive to our own needs and become responsible for our own lives. Caring for oneself has important implications for mental health. By choosing to care for oneself a person will then take their own decision and also bear responsibility for his/her actions. The person will also be able to discipline oneself and strive to achieve what he/she wants.

To care for someone requires that one apprehends the reality of the other. In the school context it can be said that the school understands the social context of every child and then enables him/her to grow fully. There is no fixed direction that is predetermined. By asserting that each person inherently has a tendency to grow and the environment only facilitates the natural growth of a person, this framework rejects any predetermined and fixed objectives. Not everyone is expected to reach the same target. So there is provision for diversity and uniqueness.

Further, the ethic of care does not see teaching as a role; rather it is seen as a special relationship based on caring. The maintenance of this relationship is the primary responsibility of a teacher and every other function is secondary to it.

Every teacher works closely with her students and the caring teacher tries to see the world from the lens of her students. She also takes into account, the feelings and needs of her students and in the process, demonstrates to them how to be caring persons themselves.

Noddings discusses three means of nurturing the ethic of care: dialogue, practice and confirmation.

Dialogue in school would mean that everything that interests students should be brought to the classroom. It can be related to God, killing, sex, loving etc. School is an important site where these issues should be taken up and discussed critically. In fact schools must discuss things that are closer to life including talk about happiness and grief. The dialogue should include both thinking and feeling. This would lead us to move from our own feelings emanating from our deeply held values, towards understanding the feelings of others.

Noddings further extends the notion of 'dialogue' to teaching of subject matter too. She argues that teachers should also listen to their students and respond to them. The teacher should allow them to initiate the discussion. The purpose of dialogue is to come in contact with ideas and understand the other. It also entails engaging parents in dialogue.

As **practice**, schools must provide opportunities for shared efforts. These efforts could be in the



school garden, office, maintaining a clean environment or can be outside school where students can work with some agencies. The purpose here is the development of skills, but these are skills for caring and not for vocational purposes. Work as conceptualised by Noddings (1984) does not equate work for money. She suggests that the association between remuneration and dignity weakens the community based on care. Therefore, every person should be engaged in some form of work so that hierarchies get dissolved. She also feels that sometimes students should be forced to take up some task for which they do not have natural aptitude and talent. The rationale for practice is to enable people to share their success and failures. It should also help people in understanding what others are doing. It helps in developing respect for those who perform those tasks regularly.

The approach argues for cooperative learning and emphasises that students learn better in groups than individually. Thus the entire curriculum could be revisited to make it more experiential and engaging.

Confirmation, within the ethic of care suggests that we attribute the best possible motive to the cared for, even if he/she is found engaging in a task that goes against the rules. An example of this is when a teacher finds a student cheating, she says that 'I know you want to do well in exams' or 'I know you are keen to help your friend' instead of admonishing him/her. The contention is that the ethical ideal is present even in a young child. The

purpose of education is to enhance it. The young child should be treated gently and lovingly even in a situation where the school rules are violated, so that he/she develops a caring attitude towards others. It is not about promoting wrong doings but about the manner in which they are handled, so that the ethic of care builds up.

It is in light of the above discussion that I propose that we reconceptualise life skills education under the broad framework of ethic of care. If schools fashion themselves as institutions that give learners the opportunity to actualise and grow, then life skills will also develop simultaneously. The ethic of care will also ensure a more empathetic and humane society.

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