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Caritas and Communitas : A Caring Science Ethical View of Self and Community *

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Abstract

This paper will explore a model of Caring Science (Watson, J. 2004 Caring Science as Sacred Science, in print) that offers a moral and philosophical foundation of Caring for Self and Community. An expanded worldview and broad theoretical and philosophical context will be offered in which to understand the ethical and moral significance of caring for self and community. The concepts of *Caritas and Communitas* infuse Love into our life and work. This view will be developed through an ethical lens based upon the philosophy of Levinas (2000). "Ethics of Face" is used to convey an ethic of *Other*, as an obligatory ethical relationship one human to another. In "facing" our broader humanity, and ourselves we sustain and help to evolve our humanity and the deeply human dimensions of our Being and Becoming. Such a philosophical view acknowledges our human-infinity oneness and connectedness, across time, space, physicality, and culture. Within this way of understanding caring at multiple levels, Logstrup's philosophy (1997) helps us to gain an appreciation of perennial truths and wisdom traditions that remind us that we literally, morally, and metaphorically "hold another's life in our hands" (Logstrup, 1997). Our caring in a given moment in time never leaves another unaffected. In this view we explore how the nurse is not only *in* the environmental field of other, but *becomes* the energetic vibrational environmental field for Caring for Self and Other (Quinn, 1992). This Caring Science model of self and community arises from deep ethical truths related to **Caritas/Love and Communitas/Connectedness**, as a relational moral way of Being and Becoming more human and humane.

Professional Context Self and Community

It seems that somewhere along the way we have forgotten that one of the greatest honors and privileges one can have is to be able to care for another person. Such personal, intimate connections and relations touch on the holy, as well as the horrific at times. Caring is such a vulnerable place ; first, because we come face to face with our own humanity and ourselves. In this place, we realize that one person's level of humanity reflects back on the other. The other reason this place of caring and healing transcends tra-

ditional medical thinking and science is because, when we locate ourselves in this new space, we are *remembering* our own and others' humanity and our shared belonging to the universal field of infinity, what French philosopher Levinas (2000) referred to an Infinite Field of Cosmic Love. This universal field connects Caring, Love and Spirit, both human and divine to that which is greater than our self. This worldview helps to sustain our own and others' humanity, while contributing to the preservation of humanity at large. The philosophy of Levinas also helps us remember and ethically reinforces our professional covenant with the

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public and humanity.

In this process we awakened to deeper levels of our Being and Becoming connected human-to-human, beyond ego, physical separate self. Thus, in this model we are remembering, and reminded of why we are here and why we are called to this work : *To Love and To Serve*, yielding to the infinity of humanity and mystery of the great sacred circle of life.

When we honor self and other with an awareness of our connectedness and Belongingness to this Infinite field, we realize when we touch another, we are touching the life force, the mystery, and the very soul of another person. Hence, by honoring self and other at this deep level, we mirror the mystery and infinity of the human soul. This worldview of caring and community : *Caritas and Communitas* reminds us of our Oneness with the Infinite, and the sacred nature of caring for self and community ; in caring for Other/community of others, we are caring for and offering profound service to humanity as a whole.

The Danish philosopher Logstrup (1990) used the metaphor of the *Hand*, in that he reminded us that morally and metaphysically, if not scientifically, we literally and metaphorically *hold another person in our hands*. He reminds us that we hold another life in our hands, because life is given to us as a gift with its sovereign expressions of trust, love, and deeper emotions beyond our control. To this gift we are beholden and called to honor and cherish. It is our moral ethical demand as he put it, our obligation to serve and preserve humanity and humankind.

Logstrup's moral, and perhaps sacred reminder, is that "Life has been given to us. We have not ourselves created it" (Logstrup, 1997, p19). And within this framework, we realize that "either we take care of the other person's life or we ruin it" (Logstrup, 1997, p18). He explores this deeply profound meaning for life by his statement, "... the demand is implied by the very fact that a person belongs to the world in which the other person has his or her life, and therefore holds something of that person's life in his or her hands, it is therefore a demand to take care of that person's life" (Logstrup, 1997, p22).

Logstrup points out that to "have something in one's hand" is a metaphor (p28). This endows the metaphor with a certain emotional power. "The emotional significance of the metaphor grows out of the contrast in the relationship to

which it refers, namely, that we have the power to determine the direction of something in another person's life...or his or her entire destiny" (p28). This kind of thinking parallels the concept of a caring moment (Watson, 1988) whereby a caring moment, as a transpersonal event has been defined as:

- "A transpersonal caring relationship connotes a spirit to spirit unitary connection within a caring moment, honoring the embodied spirit of both..." (Watson, 2002, p458);
- "...the process goes beyond itself, and becomes part of the life history of each person, as well as part of the larger, deeper complex pattern of life" (Watson, 1985, p59).

In considering Caring and Community, as *Caritas and Communitas*, we redefine nursing and patients away from illness-disease focus and away from medicalized-clinicalized views of person, to embracing and honoring the mystery of human spirit. That is, acknowledging that when we care for other, we touch the infinity of humanity itself. Each individual dwells within and Belongs to the Infinite field of Cosmic Love, Spirit, Mystery, the source of all life. When we open to this realization at the highest level of ethical awareness, nursing and nurses begin to realize that our jobs and our practices have been too small and limited with respect to the deeply human nature of caring-healing services to humankind.

This connectedness of caring to human spirit is not new to nursing ; it is the heritage from Nightingale herself regarding nursing practice. For Nightingale, (nursing) involved a sense of presence higher than the human, "a divine intelligence that creates, sustains, and organizes the universe – and our awareness of an inner connection with this higher reality" (Macrae, 1995). She pointed out that the care of the soul could never be separated from the body. She was very clear that nursing, and we might now say, all healing practices, are spiritual practices and a human service connecting us with something greater than ourselves. Perhaps now – the infinity of the human soul, as put forth by Levinas, forces us to 'face our humanity' which is beyond the physical face alone, but a moral invitation responsibility to engage and respond to infinite which we are all apart of.

This ethical location of Caring within the Universal field of Infinity, makes explicit the connection between *Caring and Love : Caritas then becomes Communitas :*

Compassionate Service and Love that is offered to humankind.

Assumptions between Caring and Love in Nursing Literature

Some assumptions between Caring and Love are already in the Nursing Caring literature. For example (Adapted from Watson, 1988, 1999, p32):

- Caring and love are the most universal, the most tremendous, and the most mysterious of cosmic forces : they comprise the primal and universal psychic energy ;
- If our humanness is to survive, however, we need to become more caring and loving to nourish our humanity and evolve as a civilization and live together ;
- As a beginning we have to impose our own will to care and love upon our own behavior and not on others. We have to treat our self with love, gentleness and dignity before we can respect and care for others with love, gentleness and dignity ;
- Human caring can be effectively demonstrated and practiced only interpersonally. The intersubjective human process keeps alive a common sense of humanity ; it teaches us how to be more human by identifying ourselves with others, whereby the humanity of one is reflected in the other ;
- This perspective does not preclude non-physical caring connections emerging through authentic virtual caring connections, which remain as interpersonal, for example, “higher frequency thoughts such as love and caring, even communicated from a distance, carry higher frequency energy into space ; the other has energetic access to the experience that has been communicated to them, even virtually.” (See Watson, 2002, IJHC for more on this point);
- Health professionals’ social, moral, and scientific contributions to human kind and civilization lie in their commitment to sustain human caring ideals in theory, practice, research, and education.

Within a framework of Caring Science, we are reminded once again that compassionate human service and authentic Caring is ultimately motivated by Love, both human and Cosmic. By attending to, honoring, entering into, connecting with our deep humanity, we find the

source and foundation of Loving and Caring. We find the ancient truths of our work. We share the wisdom of mystics-poets-philosophers who capture the Infinity and mystery of the human soul, mirrored through the *Ethics of Face*. The fact remains that we *hold another's life in our hands*.

Nursing has a history and tradition with this moral commitment to caring for self/other and community, but it needs reinforcing during times of major change when there is a threat and decline in human caring. Nursing ultimately sustains itself and humanity by living out its basic values compassionate human service, reflected in concepts of *Caritas/Love and Communitas/Connectedness with all*.

Reconsidering Caring and Love and Community

How can we dare to be so bold to bring Caring and Love and Infinity of Universal energy and soul into our lives and work and world again? Because without returning to this ancient place of cosmic power, energy, beauty, and hope, we are inclined toward what Levinas (2000) 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 caring, healing, and wholeness. A totalizing occurs when there is no relational engagement, no soul connection : thus, no cosmic human field to engage and sustain our shared humanity. This totalizing of self and other, this turning away from the mystery of our shared humanity and Divine connection, can be an act of cruelty to self and others ; an inhumane act toward human civilization itself, perpetuating more inhumane acts, violence and destruction of human spirit and love in our work and world.

So rather than asking *how can we dare to bring Love and Caring together into our lives and work and our science? We can ask : How can we bear not to?*

In this view of ethics and metaphysics and the philosophical use of metaphors of *Love, Face, and Hands*, we bring new consciousness to concepts of *Caritas and Communitas*. We contribute to a higher/deeper order for Caring Science. In a Caring Science model, Love becomes Originary ; Primordial. Love watches over the other demands, such as justice (Norvedt, 2001). The subject as

Other is an incomprehensible, infinite Otherness. The human face is not a concept ; the human heart is not a concept, it is not a figure which message can be captured by conventional knowledge from the head.

In this context, a nursing leader in a hospital project in New York recently told me that the nursing staff was using my work on caring as a theoretical-philosophical foundation for their practice model. She confided in me that she wanted to develop a logo that said “*Caritas is Magnetic*,” in that they were using my concept of *Caritas and Love*, from my publications, as a means to transform nursing within, while also seeking status as a magnet hospital (Elaine O’Neil, personal communication, Elmhurst Hospital, NY). I told her that the logo was appropriate and meaningful for more reasons than one, mentioning to her some of this latest thinking related to Caring and Love and heart-felt practices creating a higher order of cardio-energetics. Within this framework, the model of caring and love indeed serves as a magnetic field attracting more Love/heart-felt energy into the system and can become a framework for not only Caring Science but for caring-healing practices. In this expanded view the nurse “becomes the field” through his/her caring consciousness/presence/ and very Being.

Re-considering Self as THE Caritas-Communitas/Environment

This thinking then moves us to new conceptualizations of the caring-healing practitioner and their very human presence, which becomes part of the healing process, or part of the disruption, depending upon our awakening. Once we relocate ourselves in a Caring Science framework, we are challenged, if not forced, to rethink the significance of the human practitioner and the nature of the consciousness, the authenticity of his/her heart-centered work with self and with others/communities.

This shift toward considering the importance of the practitioner and their human consciousness, and presence, has been addressed by Quinn (1992) in a classic paper. She conceptualized evolving perspectives of the nurse as one who holds “sacred space” as he/she *becomes* the environment. Her view requires rethinking what we mean by environment.

In this evolving perspective (described by Quinn,1992, and modified here), in addition to acknowledging the environment as a functional, physical place for practice (first view) and in addition to thinking of the practitioner as *in* the environment, she and I now invite us to *consider the practitioner and their evolved caring consciousness, presence, intentionality, heart-centered foci and so forth, as the environment!* Now, this evolved view of human practitioner *as the environment*, has powerful implications for the evolved consciousness of the practitioner in any place of practice. To paraphrase Quinn (p27) : In this perspective, the practitioner turns toward her or his understanding of the *practitioner-self* as an energetic, vibrational field, integral with the client.

This view is related to Caring and Love and heart-centered practices described above, acknowledging not only expanded views of science, but new views of the significance of practices that flow from a higher level of consciousness. Love is considered the highest level of consciousness. Nurses working within an evolved model of caring are radiating a high vibration of the energy of love throughout the setting, throughout the community, the world. Thus nursing and nurses in this evolved Caring Science are contributing to an evolved humanity, or a moral community of caring. As we enter this new space of *Caritas and Communitas*, there are questions we can address, as individual nurses, as well as questions for nursing itself.

Reflective Questions for Cultivating *Caritas and Communitas* Consciousness (modified from Quinn, 1992)

- If I am the vibrational energetic field of caring /love through my human presence and consciousness, how do I cultivate this subtle compassionate service?
- If *I am the environment/community*, how can I *be* a more caring-healing environment/*self/community*?
- *How can I become a safe space*, a sacred vessel, a holy space for this client and his/her soul’s inner healing journey?
- In what ways can I look at, into this person, (how am I to *face this Other*) to draw out healing? Wholeness which is already present in the Spirit field of Infinity?

- How can my heart-centered presence and loving/caring consciousness help to align in this moment with energy/infinity of Spirit/Universal love?
- How can I use my heart-centered awareness, my consciousness, my *Being*, my presence, my voice, my touch, my face, my hands for healing?

Extant Caring Theories and Nurse as *Being* The Field/The Environment

To relate this evolving view of the practitioner *as* the environment, as the magnetic field, now we can make new connections between extant caring theories and the findings reported by Smith (1999) in which she analyzed major caring theories for unified field commonalities. Through her work we can envision the practitioner-client field as one entity. Thus the nurse in a model of *Caritas and Communitas* is connecting with the infinite universal field of energy/spirit/love. In Smith's work, she found the following attributes of Caring, consistent with this line of thinking :

- Caring is a way of manifesting intentions;
- Caring is a way of appreciating (and participating in pattern);
- Caring is a way of attuning to dynamic flow (in the moment, in the universal field);
- Caring is a way of experiencing the Infinite (by working from heart-center and working toward one's own evolving consciousness, becoming more and more aware of the presence of infinity Love/spirit/universal energy);
- Caring is a way of inviting creative emergence – (by practitioner holding sacred/holy space through intentional use of open heart, with consciousness of caring and love, whereby the mystery, infinity can enter into the now).

In this way of considering the evolved human practitioner, we can literally become the healing environment. On another level of understanding this view, Quinn (1992) uses therapeutic touch as exemplar of practitioner consciousness as environment, in that its *modus operandi* is a shift in the consciousness of the practitioner, through which clinical experience and empirical study demonstrate that through this process of centering, there can also be a shift of consciousness of the recipient. (Another interpretation within an exploratory Caring Science context, based upon

Levinas and Logstrup, is that through centering, one is allowing oneself to empty out and become an instrument for cosmic love to flow through one ; thus one opens up to universal field of infinity, a wider cosmology, essentially spiritual and energetic, immanent and transcendent.)

This thinking is based upon a given that we are interconnected to all of life through the universal infinity field. Our consciousness is not separate and apart, but integral with all consciousness. We can knowingly participate in this web of interconnection/oneness toward re-patterning and healing ourselves and others (Quinn, 1992). Therapeutic touch as exemplar is thought of as a re-patterning of her or his own energy field in the direction of expanded consciousness ; a consciousness experienced as unified, harmonious, peaceful...and so forth (Quinn, 1992, p29). Quinn goes on to use the metaphor of sound, suggesting the pattern, vibration of the nurse's higher energetic field of consciousness becomes a tuning fork, resonating at a healing (Love) frequency, in which the client attunes to, resonates, to that frequency.

To repeat previous comments then we see again that the model of caring and love-of *Caritas and Communitas*, indeed serves as a magnetic field attracting more Love/heart-felt energy into the system and can become a framework for not only Caring Science but for caring-healing practices.

It seems that when our heart is open, and we work from a place of caring and love and connectedness, energy pours in from other hearts and energy from this non-local field guides and nurtures us into loving heart-to-heart bonds (Pearsall, 1998). To evolve in our humanity and our science, we "are called to look anew at how we knowingly participate in our interconnected unitary universe. We can no longer view the other, the environment, and community as separate from the practitioner, but one and the same. Because we *Belong to* the universal field of infinite Love and allow ourselves to be one with it, we indeed *Become* the environment for our clients, colleagues, communities, systems, world and ourselves.

So, in entering into this new conceptualization, theorization, actualization, we enter into and hold holy and sacred space for all whom we encounter and touch. In doing so, we are healed. And once again we are reminded, and *remember* once again, our most authentic human ser-

vice. This caring healing work then becomes one of the greatest gifts we can offer to Other, to humanity and to self. In the process, we transcend our limited professional orientations and ourselves.

Together, all who enter into this perspective of Caring Science unite and co-evolve together in our expanding universe. Together we co-create a new reality for sharing our awakening to a higher consciousness. Our movement toward universal Love in turn manifests in our daily work and life. But, this process is not without some personal awakening, re-patterning of consciousness toward this higher unitary field of universal Caring/Love. Each nurse is invited to take this personal journey toward *Caritas and Communitas* as we co-create a new future together.

I close with the Chinese proverb I frequently recite because it captures the relationship between our light, caring and peace in the world.

*If there is light in the soul,
There is beauty in the person.
If there is beauty in the person,
There is harmony in the house.
If there is harmony in the house,
There is order in the nation.
If there is order in the nation,*

There will be peace in the world.

(Ancient Chinese Proverb : Anonymous, from Watson, 1999)

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