Introduction

Sacrifice and self-sacrifice by caregivers is either rejected or acknowledged within care ethics, but it is not conceptually thought through. This study aims at retrieving an understanding of self-sacrifice as essential to the concept of care. Its claim is that self-sacrifice is part of the essence of care. Although it is not always noticeable, it is always present underneath the surface of caring practices.

Self: other-directed, attentive, caring, realizing, giving, narrative identity, fragile/permeable, autonomous, sacrificing

Inter-subjectivity: mutuality, reciprocity, attuning, equality, commitment, loyalty, recognition, intrusion, violence/conflict, pity/love

Community: institution, power, position, professionalism, recognition, rules and norms, narratives, morality, beliefs/faith

What has been given: do quia mihi datum est

Disciplines:
Care ethics, philosophy (phenomenology and hermeneutics), theology.

Method: Literature study
Philosophy: J.-L. Marion, E. Housset, A. Honneth, P. Ricoeur
Theology: M.-K. Moser, C. Crysdale, R. Groenhout, A. Van Heijst, E. Lothes Biviano, D. Williams, E. Vacek

Conclusion:
This research criticizes several self-sacrifice concepts and shows how self-sacrifice is an essential layer in care, using a phenomenological as well as a hermeneutic approach. Self-sacrifice in caregiving is often hidden but always present. Thus, self-sacrifice can also include the ambiguities always present in care, can help to avoid misleading stipulations that are unspecific of care, and reveal how care can come to its proper goals.

Results:
- Inge van Nistelrooy, “Self-sacrifice and care-giving”, forthcoming article in J. Duyndam et.al. (eds.), Sacrifice, Leiden: Brill
- Petruschka Schaafisma & Inge van Nistelrooy (eds.), forthcoming special issue on Ricoeur & Care Ethics of Medicine, Health Care & Philosophy (2013)
- English dissertation (2014)

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