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My Relational Autonomy and My Relationship with Susan Sherwin

Carolyn McLeod

I want to get both personal and philosophical in this piece. I want to reflect on how my relationship with Sue Sherwin has fostered my own relational autonomy. At the same time, I want to discuss what theories of relational autonomy, like Sue's, add to the bioethics literature on autonomy. With this second objective, I hope to begin clearing up some confusion that I see in this literature about the nature of relational autonomy.

Sue was my PhD supervisor, but more than that, she has been my mentor and my role model. I doubt I would still be part of the discipline of philosophy if it weren't for Sue. I came to Dalhousie University as a PhD student in 1995 with a burning love for philosophy but an intense dislike for the climate of it, as I had experienced the climate up to then. It was too competitive and too dismissive of what I loved most—feminist philosophy—and it rewarded pompous and rude behavior by men. I entered my PhD cautiously, with every intention of leaving if I was going to be made to feel intellectually inferior to most of the people around me. Luckily, that didn't happen; I didn't feel forced to leave, and in fact, would have happily stayed at Dalhousie for my whole career. I was able to continue to do what I loved, and Sue played a big part in that. Not only did she provide me with excellent PhD supervision, but she was instrumental in creating an environment in Dalhousie's department where women could thrive and feminist philosophy was taken seriously. Moreover, she assumed leadership roles in the department so that she could have that positive influence. The result for me was that I was able to do what I was capable of as a graduate student, without the constant interfering self-doubt that is almost inevitable in bad climates in philosophy.

Although we have been in contact only off and on since I left Dalhousie, my relationship with Sue has continued to be important to me. She set an example that has guided me, often without her knowing it. I thought of her being chair of Dalhousie's department when I was deciding whether to do the same in my own department. I think of her when I consider whether to retire early—and really retire—so that I can spend more time with my partner, my children, and

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the rest of my family, as she has done. She has been the voice inside my head that has helped me to make, or contemplate making, difficult career decisions. As a result, she has fostered my autonomy even in her absence.

The story of my relationship with Sue tells us something about what relational autonomy is like and what Sue's pioneering work on relational autonomy in healthcare brought to the bioethics literature on autonomy. My autonomy is relational because it has flourished as a result of my relationship with Sue (among other relationships) and the climate she helped to create at Dalhousie, and also despite the noxious environments that exist elsewhere in philosophy for women and other marginalized folks. The first of these points—the one concerning my positive relationship with Sue—refers to the main insight of relational theories of autonomy: that having relationships that support our autonomy is essential to being autonomous. The second point, about poor climates in philosophy, speaks to another insight of relational theorists: that oppressive or discriminatory relations are a barrier to autonomy. The full importance of relationships that are positive for our autonomy and the full range of relationships that are negative for it had not been recognized in bioethics before Sue published "A Relational Approach to Autonomy in Health Care" (1998)—a paper that is largely responsible for what some call "the relational turn" in thinking about autonomy in bioethics (Gómez-Víseda et al. 2019).

At the same time, the story of my relationship with Sue reveals what relational autonomy is not like, not necessarily anyway. Throughout my career, Sue has contributed greatly to my relational autonomy even though I've seen her very little (much less than I'd like) since I left Dalhousie in 1999. I made important decisions with her in mind but usually without actually consulting her. Such facts indicate that the positive relations supporting our autonomy can be quite distant; they needn't be with people who immediately surround us, some of whom may be much less positive for our autonomy; they needn't be with people to whom we give or from whom we receive substantial care either.

Some work in bioethics conflicts with this broad understanding of the relations that sustain our autonomy. One example is work that conflates relational ethics with care ethics[1] and in turn suggests that providing relational support for autonomy (or the like: e.g., conscience) is equivalent to fulfilling responsibilities of care. I don't think Sue was doing the latter when, unbeknownst to her, she was a role model for me in making decisions about my career.

Another example, where bioethicists define the relations in "relational" autonomy too narrowly, is when they use relational autonomy to justify models of shared decision making in healthcare. Such theories encourage people who are physically with the patient (especially healthcare professionals and relatives) to be heavily involved in decisions about the patient's care (see, e.g., Gómez-Víseda et al. 2019). But, as my relationship with Sue reveals, people can achieve relational autonomy by listening not to voices that immediately surround them but to those that are distant or merely imagined, as Sue's voice often is for me.

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When relational autonomy is best realized through the support of relations like mine with Sue, it does not encourage "shared decision-making" in healthcare. In future work on relational autonomy, I hope to challenge theories in bioethics that tie relational autonomy closely with shared decision-making and also theories that fail to distinguish moral relations of care from relations that foster autonomy.[2]

From Sue, I inherited a philosophical interest in relational autonomy,[3] but I also acquired actual relational autonomy, to a degree that has shaped my whole life. I can only hope to enhance the autonomy of my students as Sue has promoted my own autonomy. My deepest thanks go to her.

NOTES

1. One such article is Buchbinder et al. (2016), which is otherwise excellent.
2. For an article that does the former, see Lewis (2019).
3. My recent work on this topic includes McLeod and Ryman (2020).

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