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Kumari Beck, Avraham Cohen et Thomas Falkenberg

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Résumé de l'article

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Bridging the Divide between Being and Knowing: In Quest of Care-Ethical Agency

KUMARI BECK
Simon Fraser University
Canada

AVRAHAM COHEN
City University of Seattle
Vancouver, Canada

THOMAS FALKENBERG¹
University of Manitoba
Canada

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Introduction

The theme of this year's Congress², *Bridging communities: Making public knowledge, making knowledge public*, suggests that there is bridging required between those who are in the knowledge making business and those outside. It is our belief that knowledge making and sharing with the public – that is, so-called knowledge production and knowledge mobility/transfer – is better not to be thought of and practiced as separate steps. From the viewpoint of ethics (that looks at responsibility and authenticity) and social relevance (that insists that we don't generate useless academic knowledge), knowledge is best generated and cultivated at sites of learning through practice that is shared with one another. The philosophical basis of the above notion lies in relational epistemology and ethics.

'We live in a knowledge society' is an assessment of the conditions of our contemporary world we often hear and read about. The vocabularies used in describing this knowledge society are the same for a consumer society: 'having', 'producing', 'packaging', 'framing', 'transporting', and 'consuming'. What we are looking at is commodification of knowledge. This conceptualization of knowledge as consumable goods produced elsewhere and subsequently 'transported' for consumption has come into educational discourse. An example is the much valorized idea of 'best teaching practices', which will be discussed below.

In (en)countering the phenomenon of commodification of knowledge, we suggest an alternative conception of knowledge: knowing as a way of being in the world. Unlike the having-mode of knowing

¹ Authors listed in alphabetical order.

² Congress 2007, Annual Conference of the Canadian Federation for the Humanities and Social Sciences, May 26-June 2, 2007, University of Saskatchewan, Saskatoon, Canada.

that reifies knowledge and objectifies it into discrete quanta of information, the being-mode of knowing embeds knowing into being so that knowing and being become integrated parts of a whole. To know is to be, and vice versa. As Erich Fromm (1976/1999) describes: “Optimum knowledge in the being mode is *to know more deeply*. In the having mode it is *to have more knowledge*” (p. 41.; emphasis in original). As being in the world is, however, irreducibly relational and intersubjective, what we need to pay explicit attention to in enacting the being-mode of knowing is “living together . . . creating, maintaining positive relations” (Noddings, 1992, p. 21), which is what ethics of care is about. For us, ethics of care is foundational to being-oriented knowledge-making.

Each of us three panelists explores different aspects of such being-oriented knowledge-making framed within the perspective of the ethics of care.

Discerning the Ethicality of Care Relations: An International Education Perspective

The context for my particular inquiry into the ethics of care is the internationalization of higher education in North America. International education has been eagerly embraced by most Canadian post secondary institutions, and although there is an assumption that it is driven by an academic rationale (Knight, 2000), it would appear that internationalization of higher education in Canada is better connected to economic and political rationales of globalization than to educational needs of students. In fact, international education has been compared very aptly to product branding (Cambridge, 2000).

In this environment of competition, commodification and dehumanization, the ‘other’ is indeed all around us. Students are consumers, knowledge is a product to be packaged and consumed, and teaching is a method of efficient delivery of said product to said consumers. Success and accomplishment, or learning, is determined by measurable outcomes. According to David Smith (2006), teaching is deeply affected by this market orientation – in what he describes as “trying to teach in a season of great untruth”:

The plethora of technical and curricular innovations and recommendations under the rhetoric of globalization has left teachers alienated from what their experience has taught them over time, which is that effective teaching depends most fundamentally on human relationships, that there indeed is a profound connection between knowing and being, and that any severance can only produce a deep cynicism with respect to knowledge itself. (Smith, 2006, p. 26)

Teaching in this season of untruth – where instrumental outcomes are deemed more important than relational experience, indeed, where knowing becomes severed from being – then results in the ‘dehumanization’ of the learning-teaching relationship. Untruth becomes the *extraction* of ‘being’ from the being-knowing connection that we speak of in this panel. This extraction, or suppression of ‘being’ is further confirmed by the acceptance of this situation as inevitable or worse, as learned helplessness.

The ethics of care offers an opportunity to address the ‘untruth,’ and restore relationality and other-orientation as a primary consideration in learning and teaching. Enacting caring relations, however, is not the simple act that it appears to be. For sure no one would profess to be *uncaring*. Most teachers would offer themselves as exemplars of caring. Indeed, everyone professes to care: slogans of “We Care” are used by diverse businesses – from local rock radio stations, to banks, to funeral homes – in the interests of generating consumer attention. This commodification of care itself has led to a devaluation of the possibilities it offers, and even in the academy, to a simplification of what care ethics is. The word ‘care’ itself, as appropriated by the market, is a barrier to understanding the *ethics* of care. I would like to illustrate some of the complexity of enacting care relations with an example from an international teacher education program in which I participated.

The classroom was located outside of Canada, the learners a group of experienced teacher educators, and the instructors represented the Canadian academy. The course was an orientation to North American academic literacies, and the objective was to select candidates for graduate study in Canada. Professor A, proceeded to unleash Academic Literacy 101 with boot-camp-like gusto, with readings and exercises in ‘comprehension’ making known what academic standards were in a Canadian university, and how best to acquire such knowledge. There were a range of products that would be turned in at the end of each week, marking the progress of the ‘learners’. Although there were some in the class who engaged in the battle to keep up, to comprehend, to show evidence of learning, by and large the classroom fell silent: a model of transmission and monologue. In another grand irony, we were convincing them that this was what was needed to gain entry to Canadian graduate study so that they could reform their own ways of teaching and knowing.

Enter Professor B. Two days were spent listening to the backgrounds and stories of each teacher educator in the room, an activity that had been proposed at the inception, but dismissed by Professor A as a waste of students’ time, and as inappropriate for graduate study. With Professor B, the carefully constructed curriculum was let go and new lesson plans were created daily. As space entered the room, so did the presence of the learners, as did the sounds of life itself. The two days of relationship building became foundational to how the learners themselves evaluated their ‘success’ at the end of the course. This is what Smith (2006) would describe as Teaching in the Now: “teaching cannot be [alive] if there is no truth told in its enactment or, more accurately, if the classroom, is not first and foremost a place of truth seeking, truth discovering and truth sharing” (p. 27) – which is how Professor B’s approach can be described. “When the veil of lies, duplicities, and happy delusions that I ordinarily hold up to shield myself from the glare of truth is suddenly or gradually or even momentarily lifted, something happens to me. I feel enlivened, unblocked, ready for life in a new way, more prepared to be open to life as it meets me and I meet it” (Smith, 2006, p. 28).

We can apply several layers of analysis to this scenario, but let’s focus on notions of care and ethical agency. Can we characterize both classrooms as showing caring relationships? If we apply an instrumental application of the description of care ethics, it would appear to be so, which explains how educators justify their self-belief that they are caring. Both professors believed they were paying attention to student needs, and responding to those needs. In each situation, although students had a different experience of how they felt cared for, they were all convinced that they were cared for, because after all, it was “for their own good.” One could even argue that the students were ‘in relationship’ with each of the professors. Professor A sincerely believed that she was caring for the learners by delivering her carefully constructed curriculum, explaining her academic articles, sharing her tips for academic success, including her well meaning class in accent reduction.

But what of the quality of that relationship? It had little mutuality, and the conditions for relationality had been set by the one ‘in charge’ rather than an exchange or negotiated series of interactions. Professor A approached her students via a set curriculum – the students were related to rather than related ‘with.’ In this situation, care in the classroom is experienced as a separation of knowing from being, in a mis-recognition of how the student should matter more than the subject, and this connects to Smith’s (2006) ideas about the *veiling* of truth-seeking, sharing, and discovering. With Professor B, where his actions signaled the primacy of the relationship, every student in the class experienced that she was part of creating a knowing, rather than only those who were good enough. Every student was valued in being, rather than considered as having a knowledge-deficit that had to be filled.

The scenario described in this instance reveals, and represents more generally, a rather widespread lack of understanding of what constitutes an ethically caring relationship *in practice*. Furthermore, it reveals by implication what care ethics theory is perhaps lacking – whether by omission, or lack of explication. Let me elaborate.

One of the more important concepts of care as theorized by Noddings, (1984, 1992) is engrossment, reception, or received attention, an ‘emptying of the soul’ in order to “receive unto itself

the being it is looking at” (Weil, 1951, in Noddings, 1992, p. 16). To perceive need, the carer has the responsibility of ‘receiving’ or attending to the other in order to know better how to meet that need, and to initiate care. Noddings cites Simone Weil to show that indeed, “[o]nly he who is capable of attention can do this” (Noddings, 1992, p. 16). How then do teachers ‘become’ capable of attending in this way, especially when the orientation to teaching is framed around knowledge delivery? How does one develop the capacity ‘to receive,’ the capacity to empty oneself, and thus to move from a realm of superficial or instrumental care, to a place of ethical care?

It appears that this capacity to care is connected to reflexivity. For Professor B, the students were his entire focus, and he understood his main responsibility, and his curriculum, as creating a trusting relationship with his students, from which he could discern the needs of his learners, the needs of the curriculum, and the pedagogy that would facilitate this. In other words, part of attending to the other, is to see one’s own role, and here I particularly refer to the power relations embedded in the teacher-student relationship.

Perception or ways of ‘seeing’ is the critical point. Seeing others is tied to being self aware. A student teacher taking a course in race relations reflected on the interconnectedness of this self-other knowing as follows: “If I cannot see myself I cannot see others clearly; and if I cannot see others clearly, seeing myself becomes more and more difficult” (“Lyn” in James, 2003, p. 104). And so, care relations are grounded in seeing ourselves as well as developing capacities to see inwardly and outwardly. Other-orientation requires a high degree of self-reflexivity, and self-knowledge, and this needs to be both theorized and practiced for greater authenticity of care-ethical agency.

Kumari Beck

Caring as Practice of Deep Democracy: Autobiographical Notes

Who could possibly be against caring? It is like motherhood and apple pie. Yet, there is a paucity of authentic caring, which I will conceptualize later. First I will briefly illustrate this lack from my own experience. When I was attending grades 1-12, I don’t know that care ethics was a predominant part of teacher education. I do know that I was often frightened in school. I was frightened by teachers, the principle, and other kids, not that they had me as the focus of their attention most of the time. No, it was more than that. I had somehow learned to fear other kids, bigger kids, eventually girls – who were a complete mystery to me – and anyone in authority.

I was very isolated at school and looking back I can see clearly all the ways I was oppressed and controlled by adult intimidation, overt and panoptic. I believe that my schooling was a persistent, consistent, and relentless exercise to remove me from my experience, train me to behave, and turn me into an automaton-like member of society. Well, it didn’t work. I couldn’t handle the pressure. I was troubled and troubling to my parents. My body couldn’t take the pressure and I became chronically ill. Now, of course this wasn’t all a result of school. My parents were not optimally equipped to be parents. They were certainly well-meaning, concerned, and caring. However, like many parents, they did not know how to create the conditions of existential security and bonding that I and any child require. To elaborate on this latter point is beyond the scope of this paper. For that elaboration, I refer you to Winnicott (1957, 1965) and Bowlby (1982). An important aspect of caring is noting what condition and need the potential recipient actually has. Caring that is to meet the needs of the care-giver is not really care at all, even though the intent is good. Such well-intended, but misguided, activity actually adds to the burden of the recipient.

Other kids were tough and scary for me. I was being prepared for participation in a world for which I was grossly under-equipped. I was emotionally vulnerable and physically fragile. My consciousness was filled with thoughts and feelings that I as a young person did not know how to deal with. The idea and experience of deep and sensitive caring was not part of my known experience in the

world. I was not well enough attached anywhere. I needed connection, love, and advocacy. In particular, school did not provide this.

Currently we talk about holistic education and caring, but this is not the reality in school. The reality is that schools are tougher, scarier places than when I attended. Children are being rushed towards their spots on the assembly line. They are breaking down. The pharmaceutical industry is gaining an exponentially increasing market for their products for diseases of the body and dis-eases of the mind. Really, these dis-eases are accompanied by the sound of something breaking. That something is the hearts and souls of the young people who used to be vulnerable, open, and full of wonder and awe, and who are now exhausted, fragile, and breaking/broken.

I am and have been a psychotherapist in private practice for over twenty years. I also teach graduate students. My psychotherapy clients are, of course, wounded. Their wounds have many sources. Their educational experiences are core to their wounding. The woundings in the graduate students I teach while not always overtly expressed are also present. There is a crisis of caring that is of immense proportions. Children, adolescents, and their teachers are falling by the wayside at an increasingly rapid rate. The crisis is showing up in adolescents through increased levels of violence, drug and alcohol use, and suicide (2002, Langois & Morrison) in 10-19 year-olds with boys in this group leading the way.

The problem will not be solved by better diagnostic methods, improved levels of critical thinking, or more innovative teaching methods. Nothing short of a revolution in consciousness that includes a radical turn back to addressing human subjectivity, intersubjectivity, and community will have any meaningful impact on this human and ecological disaster. I believe that the ethics of care that our panel discusses is what the revolution of consciousness is about, but I don't think we can propose ethics of care as this kind of revolution unless and until we understand caring in a deep way, and move away from the usual superficial way. Towards such understanding, I suggest here a brief primer on caring. I propose that there are two aspects that must be considered when we talk about caring: 1) a way of being; and 2) caring-in-action. To talk about caring as a way of being, let me introduce the concept of *metadimensions*: "Metadimensions are the in-the-moment expressions of feelings and attitudes that are reflective of the most deeply held values and beliefs of [a person] and are superordinate to what might be rightly seen as skill" (Cohen & Porath, 2007, p. 16). Another relevant concept in this context is '*wu-wei*', a Daoist term that means no (*wu*) forced effort (*wei*) or achievement. When we practice *wu-wei*, then we are naturally and in an unblocked way manifesting our metadimensions. Caring as manifesting the metadimensions of one's being in the manner of *wu-wei* is a part of the fiber of who the person is, and does not imply any particular category or type of action. Thus, caring-in-action refers to a helpful action that is accompanied by authentic and congruent metadimensions that fit the person receiving care, the care-giver, the moment, and the context – that is shifting moment-by-moment to fit the circumstances as they occur. The care-giver's presence and awareness in-the-moment is crucial. See (Cohen, & Porath, 2007) for a more in-depth treatment of these concepts.

Education has an unprecedented and unique opportunity to practice a deep ethics of care. The model that best represents such education comes from the theory and practices of Deep Democracy (Mindell, 1995/1997, 2002). Deep Democracy provides both a conceptual framework and practices that are broadly and deeply inclusive of marginalized, mainstream, and in-between voices within classrooms and within individuals. This practice requires skillful facilitation by the educator and supports profound depth of caring, which is conducive to meaning-making and connection. For this, educators must put the human beings within classrooms (including themselves) in the foreground, and not in the background as current educational 'best practices' dictate – dictates that are in the service of curriculum absorption, that require students to acquire and master content, no matter what the cost. As my colleagues here mention, Nel Noddings (1984, 1992) states that the human experience is the most important dynamic in the classroom. This speaks to the underlying theory of caring that I alluded to briefly above: namely, that human needs, particularly for, in, and with (to borrow from Moustakas, 1990) others/relationship are crucial to fulfillment or lack of fulfillment in the lives of individuals and

communities. My own experience as an educator (Cohen, 2006) with graduate students in classrooms is that they are willing, eager, and, I might add, very hungry to have this human dimension attended to. They cannot do this without the teacher's willingness, support, and facilitation. The opportunity to learn about self, relationship, and community is presently ongoing in classrooms. The experience itself is valuable. The leadership that is required and the modeling that occurs by having a teacher attend to this is invaluable. My experience has been that prioritizing the human dimension also creates an environment that makes curriculum learning much more likely to occur. Of course, there is skill required and acquiring this skill and the knowledge of the underlying philosophy means that teacher education programs must address relationship and educational philosophy by putting these dimensions at the center of teacher education curricula. Currently this opportunity is being squandered.

Avraham Cohen

Empathic Understanding and Care-Ethical Agency in Teachers' Knowing

In teacher education and teacher development the notion of 'best practice' is wide-spread, especially in the educational leadership literature in the USA.³ Here, generalized knowledge from educational research is 'translated' into steps of actions for teachers. For instance, based on meta-analyses of quantitative studies, teachers are told how much homework of what kind to give to students, how the learning environment is to be effectively designed or how student behaviour is effectively managed for best student learning. This approach to a knowledge base in teaching seems to me a prime example of commodified knowledge: knowledge that is removed from context but considered 'applicable' to all contexts within a given domain (classrooms); there is an authority (educational research) that establishes what counts as knowledge and that knowledge sets the 'standard' against which human action is judged ('being an effective teacher').

I am not against the use of findings of educational research in teaching practice – quite to the contrary – but rather, I am concerned about the metaphysical assumptions that underlie the metaphor of knowledge as a commodity. I am concerned about the assumption that knowledge can be stripped of the knower and then transferred like a commodity from one (knowing) subject to another (knowing) subject. Having studied mathematics, Popper's (1979) conception of a "third world of objective knowledge" that exists independently of us, the knowers, was quite attractive to me. Back then I experienced the doing of mathematics as trying to *discover* the theorems that were already uniquely and unchangeably established by the set of axioms and logical derivation rules. Then, influenced by Quine's (1951/1953) thesis of the underdetermination of all sciences, by Thomas Kuhn's (1996) idea of paradigm shifts in the sciences, Charles Taylor's (1971/1985) hermeneutical view of the human and social sciences, and Lakoff and Johnson's (1999) notion of the embodied mind, I changed my take on knowledge and now believe that knowledge is inseparable from the knower, and, thus, qualified to knowing subjects; it is integrally linked to a knowing subject and cannot be transferred or passed to others. We should talk more about *knowing* (thus implying a knowing subject) rather than about *knowledge*.

Belonging to humankind, we are equipped with similar perception systems and so our experiences are (often) somewhat similar – at least within a given socio-cultural context. So the belief that there is a 'common standard' of understanding, knowledge, or even truth seems quite explainable. But as Davis, Sumara and Luce-Kapler (2000, p. 4) point out:

Perception is not about channeling information into the brain; rather, perception is more a matter of expectation and past experience. . . . Perception isn't a passive event or a 'taking

³ See, for instance, Marzano, 2001, 2003; Marzano, Pickering & Pollock, 2003; Wolfe 2001.

things in.’ Quite the contrary, sense organs actively fish for sensation, making perception more a matter of imposing expectation on experience.

It is our biases, prejudices, and pre-conceptions that frame our ‘expectation on experience’, frame not just *what* we know but also *how* we know what we know.

Where does this all leave us, then, in terms of ‘standards’ for our knowledge or expectations, in terms of a ‘common understanding that can guide us in living our life’? It is here that the ethics of care comes in. To emphasize the central concern for caring relations in an ethic of care, Nel Noddings (1984, p. 176) writes that “the student is infinitely more important than the subject matter.” Similarly, I like to say that our relations to one-another are infinitely more important than our striving for knowing about the world; however, the former does not leave the latter unconsidered, as caring for students will have to include concern for curricular content to be learned.

Care-ethical agency is, then, characterized by *a drive for and enactment of empathic understanding of the knowing of the other*. It is through such drive that we get to know the other, that we connect with the other, that we can relate to the other – which makes the caring for the other possible in the first place. Such ‘getting to know the other’ has to be empathic, because we each have different expectations (as Davis, Sumara and Luce-Kapler would say); each of us does not just know different things but also knows things differently. Empathic understanding gives us access to the other person as a knowing subject.

To turn back to the best practice example from the beginning, in some places in the USA teachers are nothing more than executors of teaching scripts, which tell them exactly what to say to the class, when to say it, what assignments to give to the students, what needs to be on the tests, and when to administer them, and so on. Against this extreme version of knowledge as a commodity I hold the view of the teacher as a care-ethical agent engaging in empathic understanding of her students as knowing subjects and, thus, as Noddings was quoted in the introduction: “living together. . . creating, maintaining positive relations” (Noddings, 1992, p. 21).

Thomas Falkenberg

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About the Authors

Kumari Beck is a doctoral candidate and sessional instructor in the Faculty of Education at Simon Fraser University. Contact information: kumari_beck@telus.net

Avraham Cohen, Ph.D., RCC, CCC is in private practice (counselling and psychotherapy) and teaches at City University of Seattle, in Vancouver B.C. He has published widely in academic journals and regularly presents at educational and counselling conferences. Contact information: acohen@cityu.edu

Thomas Falkenberg teaches in the Faculty of Education, University of Manitoba. Contact information:
tfalkenberg@umanitoba.ca