

Care and Sensitivity in Resource-Based Interaction Traditions within Education and Upbringing

A Conceptual Discussion

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Introduction

Learning is all in all the process that forms the single person
to an active or passive individual,
to a responsible or incredible,
to a creative and constructive
or, at worst, destructive human being²⁰ (Befring, 1994: 11).

This notion of learning as stated by Norwegian scholar and special needs educational mentor, Edvard Befring, implies the complexity of learning opportunities. Due to this complexity, Befring emphasizes the importance of facilitating favourable learning conditions at home and school as well as within the community. In his book, *The Redemptive Pedagogy* (2014), Befring denotes this positive facilitation for learning, sharing positive, resource-based approach to the child, learner and learning environment with a growing number of scholars. What characterizes this discourse? Supporters of this approach apply a variety of concepts, arguments and nuances. Prominent in the discourse are the terms

20 The quotation is translated by the author of this text. The original Norwegian text is as follows; *Læring er alt i alt den prosessen som formar mennesket – og gjer det til eit aktivt eller passivt individ, til eit ansvarsfullt eller lite truverdige, til eit skapande og konstruktivt eller i verste fall destruktivt menneske.*

care and *sensitivity*; two concepts that are associated with other terms such as *empathy*, *sympathy* and a third term that is currently receiving increasing attention, namely *mentalisation* – as well as several other related terms. The purpose of this text is to clarify these core concepts and discuss how they are used in ordinary- and special needs education, inclusion and related fields.

A positive, resource-based approach to educating the child is not a new idea. Throughout the history of ideas in education and special needs education, there are many examples of scholars who base their teaching on the child's mastery and resources (Johnsen, 2000). Thus, a resource-based approach to teaching, learning and development has been approved in different ways by different idea creators at different times. It has also been relegated to the background by other more privileged ideas and traditions. How have resource-based approaches been described? What do they mean? How have ideas about resource-based approaches contributed to shaping educational and special needs educational research and professional identity? Lastly, how have they been transformed into useful knowledge and experience? The two concepts, care and sensitivity, are at the centre when in the discussion of these questions.

Care and sensitivity in two related research-based approaches

How are the concepts of care and sensitivity applied today? Two different, but related research-based practice approaches are used as examples in order to highlight the question. Both are developed by Norwegian researchers and used internationally. Care and sensitivity assume central positions within these positive, resource-based approaches to education and upbringing: 1) the *Curricular Relation Approach*²¹ focusing on educational and special needs educational planning and practice of individual- and class curricula (Johnsen, 2001; 2007; 2014a); and 2) the *Resource-Based Interaction Approach* focusing on caregiver-child interaction in general (ICDP)²² developed by Hundeide and Rye (Hundeide, 2010; Rye, 2001; 2002; 2005; 2007).

21 The approach is illustrated by a curriculum relation model consisting of eight main aspects of the teaching-learning situation and -process. The curricular main aspects or areas are all in a continuous interrelationship with each other and with the intended users of the tool, the practitioner and the researcher. The main areas are: the pupil/s – educational intentions – educational content – methods and organisation – assessment – communication – care + context / frame factors (Johnsen, 2014a).

22 ICDP: International Child Development Programme was registered as a foundation in Norway in 1992 (Rye & Hundeide, 2010).

- 1) The Curricular Relation Approach is a didactic relational approach to curriculum practice focusing on individual pupils in the community of the class. The approach situates care as a core aspect or arena of the didactic relationship between educators and pupils – along with seven other main aspects of vital importance in the teaching-learning-development process (Johnsen, 2014b; Vygotsky, 1978; 1987). Based on the principle of inclusive education, the focus on care represents a special needs educational extension of traditional discipline – or knowledge- and skills related classroom education. Care is essential, since positive learning depends on satisfying basic human needs such as a sense of belongingness and acceptance, recognition and dignity (Befring, 2014; Johnsen, 2014a; Rye, 2005). Therefore, according to this view, we need to be aware of not only the learner, but the whole child and adolescent within her or his social and cultural context, and with his or her personal history (Johnsen, 2014a; Noddings, 1992; 2002; 2003). We also need to be conscious of the cultural heritage and conditions that we share with our pupils, including potentials for happiness as well as barriers and even traumas. Displaying sensitivity towards pupils' personal circumstances as well as their entire range of developmental potentials and needs is an important and often difficult part of our challenge as teachers and special needs educators. Our pupils need to perceive that we care about them. This caring reveals itself in our attitudes, in small informal talks, in eye contact or a light touch on the shoulder, in giving positive feedback about what was good in the homework as well as in concern when necessary. Care and sensitivity manifest themselves in how we plan, implement and evaluate all aspects of the education of each individual pupil and the class as a whole.
- 2) While the Curricular Relation Approach has been developed as an educational tool in the developing inclusive school, the Resource-Based Interaction Approach focuses on the interaction between caregivers and children from birth and onwards. Rye (2001; 2005) and Hundeide (2010) direct their attention towards the caregiver – both parents and professionals. The main pillars of their resource-based interaction approach are a) eight themes for resource-based communication and mediation²³, and b) focus on the caregiver's sensi-

²³ In short, the eight themes focus on 1) demonstrating positive feelings for the child, 2) adapting to the child, 3) talking with the child, 4) giving praise and recognition, 5) helping the child focus attention, 6) assigning meaning to the child's experience, 7) elaborating and explaining shared events, 8) helping the child develop self-regulation.

tivity towards children and others in their care. The goal of ICDP is to support parents and other caregivers in raising their awareness of their own abilities as sensitive, resource-based caregivers, and support this ability's further development. Certified ICDP facilitators and trainers are important in this connection. Their task is to facilitate caregivers in dialogue groups in order to raise their personal consciousness, and in this way to support their empowerment. Due to this factor, being an ICDP facilitator and -trainer means to be in a continuous personal process of recognising one's own abilities to be sensitive when interacting with others. This is a life-long process. Developing the ability to be sensitive in different situations and interactions leads to rising confidence and thus to higher competence as facilitators, trainers and caregivers.

Above, the notions of care and sensitivity are situated within the two related approaches; the Curricular Relation Approach and ICDP's Resource-Based Interaction Approach. What is actually meant by the two important notions of care and sensitivity? How are they related to other important concepts and research-based interaction traditions? In what way can they contribute to the practice of positive, resource-based approaches in teacher-pupil and caregiver-child interactions? How are these concepts connected to education, special needs education and other related fields? In spite of examples and specific recommendations put forth in order to recognise and further develop care and sensitivity (Hundeide, 2010; Johnsen, 2007; 2014a), some uncertainty and even confusion exists. This may be due to different interpretations and conceptual usage, not least because these concepts are "located in a linguistic landscape" with other, related terms that are also subject to different interpretations. Therefore, the next step in accounting for the terms "care and sensitivity" is to discuss them in connection with a limited selection of concepts, whereof sympathy, empathy and mentalisation stand out along with other closely related concepts.

The role of empathy in care and sensitivity

Empathy has a prominent role in ICDP's resource-based interaction approach. Hundeide places empathy as an important goal of sensitization:

What we call sensitization is to increase the caregivers' own sensitivity so that they can use their own empathetic capacity and practical experience to understand the other, i.e. to interpret the other's state and feelings so that they can respond sensitively and adjusted to the other's state and needs (Hundeide, 2010: 76. underlined by the author of this text).

The following is stated in the opening of the ICDP facilitator's handbook (Hundeide, 2010:5): "The programme is based on universally accepted humanitarian values about the significance of activating human *empathy* and compassion as a basis for care for children in need". Hundeide writes about empathic identifying with the child's state (2010:10), and gives a detailed account of "the zone of empathy", starting with the following (2010:19): "We place within the zone of empathy those people with whom we have a personal relationship ("me – you)". Thus, as documented, empathy is a basic concept for understanding as well as practicing Resource-Based Interaction Approach as described in the handbook. It is one of several bridging concepts and is closely associated with sensitivity. It is therefore of specific interest to explore the construct and use of empathy. How is empathy related to sensitivity and sensitization and how are these concepts connected to theories underlying this approach?

Discourses on care, sensitivity and empathy do not take place solely within education and special needs education. On the contrary, they are relevant to research and practice within most fields where human relations are in focus, such as psychology and healthcare disciplines, including psychiatry, and also in philosophy. Zahavi and Overgaard (2012: 3) point out two reasons why both philosophers and psychologists are interested in the notion of empathy; a) its relevance for moral theory – the idea being that empathy leads one to respond with sensitivity and care to the suffering of others; and b) recent research on social cognition emphasizing that empathy may hold the key to basic issues of interpersonal understanding.

Empathy is seen as a main concept within modern humanistic theory, which is one of the theoretical-philosophical pillars of both the Resource-Based Interaction and Curricular Relation Approach. Rye (2001) refers to Carl Rogers (1902-1987), who is widely recognized for his humanistic person-centred therapy as well as his thorough account of empathy as a core concept. In his well known 1957-article, Rogers describes empathy as follows: "To sense the client's private world as if it were your own, but without ever losing the "as if" quality – this is empathy ..." (Rogers, 1957; 99). Rogers describes empathy in teaching as first understanding the pupil's private world and then being able to communicate some of the significant pieces of that understanding (1980 in Swan & Riley, 2012). He notes certain attitudinal qualities existing in the personal relationship between teacher and pupil – facilitator and learner – that yield significant learning. In other texts Rogers (1975) returns to the concept and expands on it further, arguing that he would not characterize empathy as a state, but rather a process. This is in line with the logic of ICDP (Hundeide,

2010; Rye, 2005). Developing empathy is a never-ending process, and Hundeide (2010) points to a number of ways to develop this ability, such as the seven principles of sensitization described in the ICDP-handbook. Thus, empathy is a core concept describing and prescribing a basic human ability needed for special needs educational counsellors and facilitators of dialogue groups, so that they can support parents and professional caregivers and educators to discover and strengthen similar abilities.

Sympathy and empathy -inclusion and attention

There is reason to believe that Roger's account of empathy has contributed strongly to current extensive use of the term within social welfare and related professions. The term has gained an era of professionalism, whereas the term sympathy is widely used for similar phenomenon in conventional everyday language. Thus, current discourse of care reveals disagreements when it comes to application of the two related concepts. How does this uncertainty affect the discourse on care, sensitivity and related key concepts? And, what are the arguments for and against using each of the terms? A brief review can clarify as well as widen perspectives concerning the concepts and phenomena of care and sensitivity.

Hundeide (2010) applies the work of one of Rogers' humanistic forerunners, Martin Buber (1878–1965), when he characterizes the zone of empathy as a personal relationship or an "I – Thou" relationship, which refers to Buber's famous discussion of the term. However, Buber himself (1947) is critical to the concept of empathy, which he describes as an individual's effort to get outside him- or herself and enter another's perspective. According to Buber, viewing the world from another's vantage point certainly is positive. It promotes emotional connections between people that are crucial to overcoming exclusion and making peace desirable. However, Buber argues that empathy goes too far when it fails to maintain the necessary distance between individuals. Thus, while learning to see "from the standpoint of the other" is crucial, it needs to happen in a manner so that each person does not lose sight of his or her own standpoint (Shady & Larson, 2010). Why is it important not to lose sight of one's own standpoint? The consequence of "getting lost" in others' standpoints in the sense of losing one's own moral compass, may at worst lead to mass suggestion or mass hypnosis. The Nazi mass propaganda was still in fresh memory in the nineteen forties and fifties.

Therefore, Buber (1947) criticizes the concept of empathy and instead draws attention to another concept that is at the core of current political-professional discourse, namely inclusion.

How can inclusion be more helpful as a characteristic of the intimate human-relation dimension of communication – the communicative act? Buber relates inclusion to concepts similar to communication, namely ‘dialogue’ and ‘dialogical relation’, clarifying his argument as follows:

It (inclusion) is the extension of one’s own concreteness, the fulfilment of the actual situation of life, the complete presence of the reality in which one participates. Its elements are, first, a relation, of no matter what kind, between two persons, second, an event experienced by them in common, in which at least one of them actively participates, and, third, the fact that this one person, without forfeiting anything of the felt reality of his activity, at the same time lives through the common event from the standpoint of the other.

A relation between persons that is characterized in more or less degree by the element of inclusion may be termed a dialogical relation (Buber, 1947: 124-125).

Through putting forth this argument, Buber places ‘dialogical relation’ described as open, positive and profound communication, as what today may be called an inclusive practice (Johnsen, 2007; 2014a).

Does Buber’s critique of empathy relate to Rogers’ empathy concept? Close examination of the two humanists’ accounts reveals that Rogers considers Buber’s critique with his emphasis on the two words “as if”. By placing a particular emphasis on these two words through writing them twice, his account of empathy comprises Buber’s critique: “To sense the client’s private world as if it were your own, but without ever losing the “as if” quality—this is empathy ...” (Rogers: 1975). However, as shown, Buber’s argument quoted above, offers a new perspective to this fundamental ethical-philosophical discourse with his alternative focus on the dialogically related communication as inclusive practice; a perspective that contributes to a profound interpersonal quality to the later pronounced Salamanca Statement of inclusion (UNESCO, 1994).

One reason why Buber prefers the term sympathy to empathy may be that he is well acquainted with his contemporary Max Scheler’s philosophical anthropological texts. Scheler’s book, *The Nature of Sympathy* (1912; 1954) is a groundbreaking account of the concept and related terms. In what way is his work relevant for current understanding and use of the two terms? Scheler’s systematic discussion constitutes a basis for current somewhat unclear con-

ceptual understanding. How does he describe sympathy and what other terms does he use in order to illuminate the concept? Exploring the phenomenon, Scheler identifies a series of interdependent forms or aspects, whereof some are mentioned here:

Sympathy is a complex overarching or generic term consisting of:

- Identification of a sense of unity (Einsföhlung)
- Fellow-feeling or a shared experience of feelings (Mitgeföhl)
- Vicarious or derived feeling (Nachgeföhl)
- Empathy (Einföhlung)
- Mutually shared feelings for the community (Mitainanderföhlen)

One of Scheler's main arguments is that the phenomenon of sympathy consists of more than an ethical aspect, namely also complex aspects or forms of emotions; including a) an intuitive or momentary recognition of the feelings of a dialogue partner; b) sharing feelings with a fellow human being; and c) sharing feelings for the mutual community, as illustrated with the terms mentioned above. Empathy or the empathetic understanding happens in the face-to-face encounter with another person – not merely as a physical being or a hidden psyche, but in the moment I perceive You as a unified whole (Scheler, as interpreted by Zahavi, 2001; 2014). Zahavi's discussion of empathy is more complex than Roger's description, which is reasonable, since Zahavi makes use of important parts of Scheler's multifaceted argumentation. However, Zahavi does not adequately distinguish between the term empathy and the generic concept sympathy with its complex interdependent aspects or forms (Scheler, 1954). Sympathy is the overriding concept here and, as shown, it contains a series of interdependent psycho-social nuances. Empathy is not the most vividly discussed term in Scheler's work. At that time, it is a rather new concept, earlier used about the aesthetic ability to emotionally immerse into a work of art (Scheler, 1954). It seems that the term empathy has replaced the overriding psycho-social philosophical term of sympathy within social and psychological discourses around the 1950-ies (Agosta, 2011).

Why does empathy have a privileged status in today's professional vocabulary, whereas sympathy is degraded to a minor position with slightly negative connotations? Referring to a number of different descriptions of the two concepts, Gerdes (2011) indicates a historical line, where empathy seems to take over the role as a professional expression during the latter part of twentieth century. The concept of empathy is currently getting an increasingly detailed nuancing

within social work and psychological practice, at the same time as upcoming social-cognitive neurosciences are searching for steadily more detailed operational definitions. Empathy is the preferred term.

In an account of the term sympathy in *The International Encyclopedia of Ethics* (2013), Nancy E. Snow sums up the history of the term a) discussing the main arguments of the British philosopher David Hume's mostly ethical construction; and b) his continental European counterpart, Scheler's, more complex phenomenological construction described above; c) moving on to current scholars, such as Michael Slote's (2007; 2010) further development of the phenomenon based on arguments of the two forerunners, but now under the heading of empathy. Even though Snow prefers using the term empathy in her own writings, she concludes with pointing to the similarities:

In sum, sympathy is an important concept in the theory of ethics, playing roles in moral psychology and in ethics, social, and political theory. As a form of fellow-feeling, it is close in meaning to what we now call "empathy" (...). Sympathy appears in the works of contemporary feminists, such as Bartky and Noddings (Snow, 2013:7).

For Nel Noddings, former mathematics teacher and current educational philosopher, the term sympathy has a central place in her discussions of the challenge to care in school (1992; 2003). Her account of the phenomenon of care leads her to a nuanced discussion of the term sympathy, and thereby the sympathy-empathy discussion. Why is the sympathy-empathy discussion important? The following two reasons are central in this context:

- 1) Since the twentieth century, the concept of sympathy has been eagerly analysed and discussed, from the British empiricists, such as Hume and Mills, to the Continental European phenomenologists and current sociological, psychological, feminist, educational and other philosophers. Most contributions focus on the ethical aspect of sympathy. However, Scheler's phenomenological analysis still seems to be most holistic and nuanced, as he gathers within the generic concept of sympathy, emotional, psychosocial, cognitive and epistemological, as well as aesthetic and metaphysical forms or aspects in mutual dependency with ethics and love. Furthermore, with his phenomenological stance, he focuses on the subject or single person's immediate perception of the other (I – You). Accordingly, Scheler's analysis of sympathy contains a series of important aspects of the closely related phenomenon of care, which is at the centre of attention for Noddings.

- 2) Currently, there seems to be two parallel discussions, one with sympathy as a core concept, the other giving empathy a privileged status. Occasionally both concepts are discussed, often based on connotations contributing to lack of clarity and misunderstanding. Other texts show acceptance of the dynamic movements of concepts during history and between languages, cultures and professional discourses. These texts contribute to extended and enriched perspectives of the sympathy-empathy debate – including understanding of the related phenomena of care and sensitivity.

What are Noddings' (2002) arguments for favouring sympathy over empathy? She challenges the reader to think back on several situations when we find ourselves caring: What do we discover about ourselves in the caring encounter? Her answer is that we find us to be attentive and receptive. Receptive attention is an essential characteristic of a caring encounter. The carer is open to the cared-for and might be able to perceive and reflect upon it. The carer thus responds to the cared-for in ways that are potentially helpful. However, Noddings adds a necessary reciprocity: In order to be caring there must also be some recognition on the part of the cared-for. Her focus on our subjective perception of the caring encounter points to a phenomenological perspective. But what is the connection to feminism? Noddings describes the attention as receptive. This is contrary to what has been described as projective by other scholars. She argues that the focus on projection is “western and masculine” – and in line with empathy (Noddings, 2002; Smith, 2004; 2016).

Even though Noddings applies some of the aspects in Scheler's (1954) analysis of sympathy, references to Scheler are not found in her texts. Neither she nor other contemporary scholars within the sympathy-empathy discussions have covered the complexity of Scheler's concept and phenomenon of sympathy, even though some discussants refer to him – not even in the so-called conceptual history of empathy (Verducci, 2000). However, Noddings clearly perceives care and sympathy as something more than an ethical entity – the immediate emotional recognition is an important aspect in her philosophy as in Scheler's analysis.

One of Noddings' counterparts in the discourse on care, Michael Slote (2007), applies the term empathy. However, in spite of their differences in the sympathy-empathy discussions, Noddings (2010: 6) writes: “Slote and I have had conversations over the past few years about the use of empathy²⁴”

24 This article of Nel Noddings is written after the publishing of Michael Slote's book *The Ethics of Care and Empathy* (2007); a book that has been widely discussed and commented.

and she presents her new and revised view on the notion pointing out the following:

Today it is widely acknowledged that empathy involves what earlier thinkers called sympathy, an attitude of “feeling with” another, and etymologically, this definition of sympathy is certainly correct (Noddings, 2010: 6).

Interestingly, she uses the words “feeling with”, which seems to be compatible to the German word *emföhlung* mentioned above (see also Swan & Riley, 2012). Thus, Noddings incorporates the concept of empathy as equivalent to the notion “feeling with” that she has used earlier. She connects the term *attention* (receptiveness, openness, the action of taking special care of someone) to “feeling with” (*empathy*), and proceeds by discussing a number of complex aspects that need consideration in order to prevent the normative ethic of care to ignore “how things are”, because then it is unlikely to be taken seriously (Noddings, 2010). In this way, Noddings contributes to accept the term empathy as part of the debate on sympathy, attention and care.

How does this review of the sympathy-empathy debate contribute to a more fine masked understanding of the theoretical terms and practical phenomena of care and sensitivity?

- a) Scheler’s work (1954) has, through his account of sympathy reviled a symphony of interdependent emotional, cognitive, aesthetic and ethical aspects playing together in the relation between two or more single persons that constitutes conditions for care. His descriptions contain a series of diverse aspects of relational sensitivity. Scheler’s painstaking analyses deserve further in-depth explorations updated to our present focus on care- and resource based relation building between teacher and pupil, caregiver and child as well as between citizens, as Kristeva (2008) advocates for.
- b) Accepting current parallel use of the terms sympathy and empathy, Rogers’ statement on empathy is well fit as a summary and “working statement” with its focus on “as if”, in further discussions of sensitivity and preconditions for care:

“To sense the client’s private world as if it were your own, but without ever losing the “as if” quality – this is empathy ...” (Rogers, 1957: 99)
- c) The discussions of the terms sympathy and empathy are fetched from the following fields:

- ▶ Ethical discussions: (Noddings, 1992; 2002b; Scheler, 1954; Smith, 2004; 2016; Stoke, 1999; 2007)
- ▶ Cultural inquiries (Lu, 2017; Slote, 2010; 2016)
- ▶ Search for criteria for measuring empathy (Gerdes, 2011)
- ▶ History of ideas (Agosta, 2011; Gerdes, 2011; Snow, 2013; Verducci, 2000)
- ▶ Relational theory (Buber, 1947; Hundeide, 2010; Hutchinson, 2004; Noddings, 1992; 2002a; 2002b; 2003; 2010; Rogers, 1957; 1975; Rye, 2005; 2007; Scheler, 1954; Shady & Larson, 2010; Zahavi, 2001; 2014; Zahavi & Overgaard, 2012)
- ▶ Education (Noddings, 1992; 2002a; 2002b; 2003; 2005; 2010; Sidorkin, 2000)

The debates have been mostly theoretical-philosophical, while some have focused the attention on practices.

- d) Nel Noddings' texts are humanistic phenomenological and feminist discussions within the broad field of educational practices. In her discussions she relates the term and phenomenon of sympathy and a series of other practice-related aspects to each other in a detailed description and argumentation for the practice of caring, as the following quotation is an example of:

The phenomenological analysis of caring reveals the part each participant plays. The one-caring (or carer) is first of all attentive. This attention, which I called "engrossment" in *Caring* (Noddings, 1984), is receptive; it receives what the cared-for is feeling and trying to express. It is not merely diagnostic, measuring the cared-for against some pre-established ideal. Rather, it opens the carer to motivational displacement. When I care, my motive energy begins to flow toward the needs and wants of the cared-for. This does not mean that I will always approve of what the other wants, nor does it mean that I will never try to lead him or her to a better set of values, but I must take into account the feelings and desires that are actually there and respond as positively as my values and capacities allow.

In a caring relation or encounter, the cared-for recognizes the caring and responds in some detectable manner. An infant smiles and wriggles in response to its mother's caregiving. A student may acknowledge her teacher's caring directly, with verbal gratitude, or simply pursue her own project more confidently. The receptive teacher can see that her caring has been received by monitoring her students' responses. Without an affirmative response from the cared-for, we cannot call an encounter or relation caring (Noddings: 2005: 3).

Care and the ability to mentalise

Mentalising²⁵ is currently highly regarded and debated amongst the caring professions and researchers. Hundeide (2010: 11) connects mentalising to empathy in the following way:

To mentalize means to understand the other's reactions based on an empathetic experience of the Other's feelings, state and intentions – from “within”.

Jon G. Allen et al (2003: 2) offer an introduction of the notion of mentalising as well as of its applicability: “Mentalization refers to the spontaneous sense we have of ourselves and others as persons whose actions are based on mental states: desires, needs, feelings, reasons, beliefs and the like”. They point out that when we interact with others, we automatically base our responses on a sense of what underlies the other person's behaviour, namely, an active mind and a wealth of mental experience; thus, mentalise is a natural human response. It may be added that most responses are based on our tacit knowledge and accumulated experience. However, the thoroughness of our empathetic – let us say, positive sensitivity – varies. In this connection it is wise to remember Rye's (2005) argument that while it is easy to interact positively with persons belonging to our own culture of interaction, meeting an individual whose interaction is perceived as strange, unpleasant or even threatening, may be a challenge. Julia Kristeva (1997; 2008), draws attention to indifference and fear as all too common aspects of the spontaneous attitude towards individuals perceived as strangers, whether they come from another culture, speak another language or have disabilities. She offers a psychoanalytic explanation to these kinds of marginalizing meetings, arguing that the perceived stranger confronts us with our anxiety about our own vulnerability and fear, or of “the stranger in ourselves” (Johnsen, 2010; 2014c). When this happens, Allen et al (2003) point out, we consciously mentalise. However, it may be more accurate to change the last sentence into a normative hope: This is when we should consciously mentalise, use our sensitivity, “count to ten” before we react and mobilise our ability to care for the individual involved. Working with people with various psychiatric disabilities, Allan is well aware that the ability to mentalise differs between individuals. Moreover, there is good reason to add that our capacity to mentalise appropriately depends

25 The terms «mentalising» and «to mentalise» are written in several different ways, including different orthography between UK and USA English. In this text, mentalising and to mentalise is applied except in quotations, where the original orthography is used.

upon both the situation and cultural recognition. However, it is possible to learn to increase or extend this capacity. This is in line with the intentions of ICDP's Resource-Based Interaction Approach towards caregivers as well as the focus on care, communication and knowledge about the pupil "as a whole person" in the Curricular Relation Approach (Hundeide, 2010; Johnsen, 2014a; Noddings, 1992; Rye, 2005). Consequently, this is also in accordance with the continuous development of sensitivity when it comes to special needs educational counselors and educators as well as ICDP facilitators and trainers.

Is it possible to identify more specifically, what characterizes the ability to mentalise? Allen et al (2003) highlight three aspects. 1) Mentalisation is both an intuitive and explicit sense of coherence and continuity of oneself. 2) Mentalisation includes empathy and involvement and forms the cornerstone for meaningful, sustaining relationships. 3) Mentalisation is the key to self-regulation and self-direction. It is a key to engagement in reciprocal, sustaining relationships. Further, it helps individuals manage loss and trauma as well as distressing feelings such as frustration, anger, sadness, anxiety, shame and guilt, thus generating meaning, hope, and opportunities for resilience. The authors specifically mention the following abilities that may be strengthened through mentalisation:

- the capacity to *make meaning* out of adversity
- the capacity to sustain a positive outlook with *hope, initiative* and *acceptance*
- the capacity to experience the *mastery* derived from feeling *responsible* for our own behaviour
- the capacity to have a sense of *purpose* and engage in healing and inspiring rituals based on *shared values*
- the capacity to *communicate* and *solve problems* by seeking clarity and speaking the truth
- the capacity for *flexibility* and *humour*
- the capacity to feel *connected* and to give and receive *support*
- the capacity for open *emotional expression* and *sharing* of a full range of feelings and
- the capacity for *mutual empathy*, which allows us to see both our own and the other person's perspective (Allen et al, 2003: 4).

This list may be seen as containing many of the characteristics of a healthy, positive and philanthropic person, and thus not only constitutes the aim of mentalising, but also of care, sensitivity and other related characteristics in

addition to the ultimate intentions of resource-based approaches within education and upbringing. However, the crucial practice-related question following this list is how to develop the ability of deliberate, conscious mentalising. Allen and associates offer four recommendations in their detailed overview article (2003).

- 1) The single most important factor in fostering mentalisation is a secure attachment relationship — a close emotional bond.
- 2) Having confidence that the attachment figure can be relied upon, if needed.
- 3) In therapeutic interactions, increase one's ability to mentalise is commonly done through identifying and labelling feelings; that is, the skill to feel and think about feeling at the same time. This is also called the ability to mentalise emotionally or developing "metalized affectivity" – a concept introduced by another prominent scholar within attachment and mentalisation, Peter Fonagy.
- 4) Fostering mentalisation aims at fostering the capacity for mutuality — meeting of minds — that both stems from secure attachments and makes secure attachments possible.

Again, when it comes to what Allen and associates call fostering mentalising, we recognize the ideas and practical recommendations related to care and sensitisation. The recommendations resemble Nodding's urge for care, Rogers' focus on empathy and Buber's line of arguments concerning communication and the dialogical relation. In short, Allen et al's (2003) detailed overview of the idea and practice of mentalising seems to incorporate other related concepts discussed here, as it stands out as an overarching concept.

In a previous article Fonagy and Target (1997) offer a review of relevant studies exploring the possible relationship between attachment processes and the child's development of the ability to envision mental states in themselves and others. Their assumption is that the ability to mentalise, interpreting behaviour in terms of mental states – or to have "a theory of mind" – is a key determining factor for self-organization, and that this is acquired in the context of the child's early social relationships. The article adds important aspects to the relationship between resource-based approaches to interaction and the ability to mentalise. Fonagy and Target (1997) describe mentalisation as the reflective function that enables a child to "read people's minds". Young children develop this reflective capacity, enabling them to interpret other people's behaviour and obtain a conception of others' "beliefs, feelings, hopes, pretence, plans and so on" (Fonagy & Target, 1997: 679).

What are the prerequisites for developing the ability to mentalise? Referring to a number of studies, Fonagy and Target (1997) argue that a secure attachment between caregiver – here represented by the mother – is a prerequisite for developing this metacognitive ability. Further, they point out three types of interactive or mediational models based on this secure caregiver-child relationship in infancy that contributes to the development of the ability for self-organisation as children grow up:

- a) Cooperative interaction between caregiver and child or between children, such as joint pretend play, show what they call superior mentalising and responses that indicate emotional understanding.
- b) Talking together, especially about reasons for people's actions and feelings, is related to relatively early development of the abovementioned reflective function or mentalising capacity.
- c) The third mediational model is peer group interaction, whether it happens between siblings or in other group constellations. This kind of interaction enhances theory of mind performance.

There are many aspects of Fonagy and Target's account of the relationship between secure attachment between caregiver and child, development of the ability to mentalise and organisation of self, which closely links mentalising to resource-based interaction approaches. One of the ICDP themes – helping the child to learn self-regulation – is one of Fonagy and Target's major areas of study (1997) in which their argumentation is documented by studies and useful examples that may also be applied in practical ICDP training. This article focuses on the crucial role early attachment plays in the development of young children's ability to mentalise. However, they also indicate that this is a developing ability along with other learned and developed abilities, referring to studies of play in kindergarten.

The vast number of texts produced by Allen, Fonagy, Target and associates discussing mentalising shows that they consider this ability to develop further into adulthood and that limited mentalising capacity may also increase through therapy.

Bounded eclecticism in theory and practice

Care and sensitivity in upbringing and education is at the core of this text, which offers an introduction to these and related core concepts, using two resource-based interaction approaches as examples; the *Curricular Relation Approach*

(Johnsen, 2001; 2014a) and the *Resource-Based Interaction Approach* (Hundeide, 2010; Rye, 2001; 2005). The aim is to account for an initial exploration based on the following questions: What is really meant by the two important notions of care and sensitivity? How are they related to other important concepts and research-based interaction traditions? In what way can they contribute to the practice of positive, resource-based approaches in teacher-pupil and caregiver-child interactions? How are these concepts connected to education, special needs education, inclusion and other related fields?

The question of the meaning and applicability of the concepts of care and sensitivity has been attempted answered through a literary search in order to explore how they are related to other important concepts within research-based interaction traditions. As a preliminary result, the three concepts of sympathy, empathy and mentalisation are arrived at as related terms contributing to shed light on interpretations and use of care and sensitivity – along with a selection of other closely related concepts.

As a starting point for a brief compilation, empathy is one of the main concepts in Hundeide's ICDP facilitators' handbook (2010). The humanist psychologist, Carl Rogers' introduction of the concept led to widespread application within human-related disciplines. However, in spite of its extensive use, the concept is controversial even within the ranks of humanists, including educational philosopher Martin Buber and feminist humanist, Nel Noddings. The phenomenological philosopher Max Scheler's (1874 –1928) detailed analysis of the concept of sympathy has influenced debates about the two terms' pros and cons, sympathy and empathy, and references to his texts are widely found. Currently, debating scholars seem to have arrived at a consensus concerning Rogers' brief description of empathy – containing the "as if" – is applicable: "To sense the client's private world as if it were your own, but without ever losing the "as if" quality—this is empathy ..." (Rogers, 1957: 99). The debates have, however, highlighted a number of additional related concepts that may support a dynamic and applicable understanding of the concepts of care, sensitivity, empathy and sympathy. Thus, Buber adds inclusion, dialogical relation and the existential I–Thou relationship. The ethics of care is at the centre of Noddings' educational philosophy. She connects attention and "feeling with" (*einführung*) when she currently accepts including the term empathy, amongst other terms, concerning comprehensive care for the pupil as a child and whole human being. Similar to other debaters referred to in this article, she applies phenomenology in her analysis of caring relationships.

Mentalisation is the third main concept discussed in this text. As argued above, it is closely related to sensitivity, sympathy and empathy. Both the articles of Allen and associates (2003) and those of Fonagy and Target (1997) are major sources for this introductory review of the concept. They establish the premise that while the ability to mentalise may be a natural, or tacit, automatic perception of another fellow human being, it may also be conscious and reflected. Moreover, referring to Rye (2005) and Kristeva (1997; 2008), it may also be argued that the conscious form of mentalisation differs from person to person. There is general agreement among the authors referred to here that the conscious ability to mentalise may increase through different kinds of awareness raising and therapy. As their articles show, the argumentation for mentalisation derives support from humanistic scholars such as Rogers, from attachment research such as Bowlby and Stern, from Vygotsky's cultural-historic focus on the interaction between teacher and learner and between caregiver and cared-for as well as from psychoanalysis.

Bounded eclecticism in theory. As referred to, when taken as a whole, the discussions above draw their arguments from a set of theoretical traditions. These are mainly humanism, existentialism and phenomenology, culture-historic theory and related communication and mediation theories, attachment theory, psychoanalysis, feminism and the ethics of care. All of the applied articles in this text are referring to more than one of the theoretical traditions. Drawing upon several theories or traditions, they offer complementary, eclectic insight. Basically, none of the applied theories contradicts each other; in this way, they do not represent an accidental composition, since they have what Wittgenstein (1953 in McShane, 1991) argued, "family resemblance", being connected by several overlapping similarities but no feature that is common to all. If any characteristic should be highlighted as a possible common denominator, it would be Buber's focus on the I-Thou relationship. Thus, it is fair to assign this cohesive discussion the characteristic of a bounded eclecticism in theory.

Bounded eclecticism in practice. There is an Icelandic saying that "Words are the beginning of everything (Orð eru til alls fyrst)." This discussion of care and sensitivity has generated a number of related "words" or concepts, all containing similarities and nuances as shown above, which in turn may serve to increase the depth and nuances of understanding as well as clarify practice. The majority of the related concepts mentioned in this article are the following:

Empathy, attention, attachment, the “I-Thou” relationship, dialogical relation, inclusion, sympathy, *einführung* – insight – compassion, “feeling with”, mentalising, involvement, acceptance, communication, flexibility, give and receive connection and support, emotional expression and sharing.

As expected, there is “family resemblance” between the concepts, even though, as demonstrated above, there may be strong disagreement regarding some of them, as shown above. The diversity and nuances along with the relationships constitute a sound basis for further specification and implementation of care and sensitisation in practice.

Where, then, is awareness raising of care, sensitivity and related activities applied? Limiting the answer to the scholars mentioned in this article, there are four main arenas: education and special needs education, counselling and therapy. Several authors discuss awareness raising of empathy, mentalising and related terms within therapy, such as Rogers, Allen, Fonagy and Target – even though they also discuss the topics connected to education. Education is of main interest for Buber and Noddings. Care, including sensitisation, is a core arena of the practice-oriented Curriculum Relation Approach (Johnsen, 2001; 2014a; Johnsen et al, 2020), whereas care, sensitisation and awareness raising are at the center of ICDP’s Resource-Based Interaction Approach (Hundeide, 2010; Rye, 2001; 2005). Counselling is an important arena for special needs education, educational-psychological services and other services aiming at supporting education as well as childrearing in institutions and families. Thus, teachers and special needs educators working in kindergarten and school as well as caregivers in families and institutions are among the main target groups for awareness raising, which takes place on both an individual and group basis. ICDP dialogue groups are examples of low-threshold counselling in awareness raising groups led by trained facilitators (Hundeide, 2010). Focus on care and sensitisation, sympathy, empathy and mentalisation is a fundamental aspect (or should be?) even within an extended number of professions such as healthcare, psychiatry and psychology, social work, education and special needs education, to mention some.

Care, sensitivity and relational traditions

The study of human relations has been gaining such a high degree of attention that new traditions are developing within psychology and relational psychology, relational education or relational pedagogy. More specifically, within the educational sciences, relational pedagogy draws attention towards theoretical

discussions concerned with ontological, epistemological and ethical considerations. Buber's (1947) subject-subject relationship, and Noddings' (2002) ethics of care, are presented as pioneering thoughts – and the developing theory is located in the humanistic-phenomenological tradition (Sidorkin, 2000; Vecks, 2013). Sidorkin lists different types of relationships in the classroom, presenting the following characteristics: stereotypical – exploratory – cooperative – accepting – respecting and – mutual relations. Through doing so, Sidorkin takes a step further away from philosophical reasoning toward prescribing researchable relational qualities. He also emphasizes that interpersonal relationship is based on mutual trust, respect and care. Further, Bingham and Sidorkin (2004) have published an overall presentation of relational pedagogy in the anthology *No Education without Relation* in which care and democratization are given ample space with representatives such as Noddings, Biesta and other researchers.

Relational pedagogy explores, recommends and criticizes, posing questions such as: Who are “all” in relational pedagogy? Does the discourse only revolve around ordinary educational topics? Are learners with different levels of mastery and specific educational needs included? Are all kinds of relations positive? How are relationships with strangers? Following in Noddings' footsteps (2003), Hutchinson (2004) and McDaniel (2004) apply relational pedagogy in their criticism of marginalization of minorities within the topic of cultural diversity. Their criticism does not apply to children with special needs. However, Kristeva (1997; 2008) extends her analysis to a specific focus on conditions for the disabled in her psychoanalytical-based criticism. She takes the same point of departure as Hutchinson, McDaniel and Noddings – the stranger – discussing how the disabled are perceived as strangers when encountering members of the majority population; as aliens that evoke unpleasant feelings in members of the majority, reminding them – consciously or unconsciously – of their own vulnerability and powerlessness. The consequences are invisibility, marginalization and discrimination – including their schooling. However, Kristeva believes that this majority mentality can be reversed. She argues for a humanistic ethical-political program reminding her fellow French citizens of French liberation's motto during the “childhood” of modernism: Liberty, Equality, and Fellowship – adding a fourth motto recognizing a common mentality of Vulnerability in all citizens (Kristeva, 2008; Johnsen, 2014c; 2015). Additionally, Biesta, one of the participants in Bingham and Sidorkin's anthology (2004), draws attention to the relationship between democracy, education and the issue of inclusion (Biesta, 2007). Biesta argues that inclusion is a core value of democracy and that the ideal

democracy includes every individual – in education as well as in society at large. He bases this argument on what he calls a wide – not narrow – understanding of necessary requirements for inclusion and democracy building.

Relational pedagogy in theory and practice - curricular relation approach towards inclusion

This text started intending to answer the following questions: How have resource-based approaches been described? What do they mean? How have ideas about resource-based approaches contributed to shaping educational and special needs educational research and professional identity? And how have they been transformed into useful knowledge and experience? The answers have taken as a point of departure two main concepts connected to a resource-based approach to education, namely care and sensitivity, and discussed the concepts in light of a number of related terms in theory and practice. Two different yet related approaches are applied as illustrations of how care and sensitivity are being incorporated in educational and special needs educational practice, the *Curricular Relation Approach* and ICDP's *Resource-Based Interaction Approach*. It is already indicated above how the Resource-Based Interaction Approach, including its universal focus on communication and mediation, contains many of the concepts discussed here. Several of them are even used in ICDP's facilitators' handbook. The Curricular Relation Approach has been developed as a detailed educational and special needs educational tool to tailor-make the teaching-learning-development process for individual pupils within the community of the class – in other words a tool in developing inclusive practices. How have care and sensitivity earned a place in this approach? Curricular or didactic relational approaches highlight care and relational communication as fundamental aspects in the planning and practice of individual curricula within the classroom community. The approach may be described as relational from two perspectives: a) all eight aspects are related to each other in order to create a holistic curricular plan and practice; b) it is dependent upon or contributes to a resource-based relationship between educator and pupil – master and novice – in the process of teaching, learning and development. All eight aspects of the approach contribute to this double relational perspective: knowing the pupil and pupils – assessment of teaching and learning – educational intentions – educational content – class organization and methodology – communication – care – context or frame factors.

Finally, even though the main aspects of care and human relational communication are the most obvious, all eight aspects or arenas relate to one another in an educational setting (Johnson, 2014a). Caring and interpersonal communication can prevent overriding and promote dialogue between school and pupil with the aim of constructing a joint process of teaching and learning in accordance with the pupil's capabilities in the classroom context, indicating the necessary human relation traits of inclusive education.

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