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The Morality of Care in Dave Eggers’ *A Heartbreaking Work of Staggering Genius*

Introduction

Dave Eggers’ memoir, *A Heartbreaking Work of Staggering Genius*¹, has been praised by metamodernism scholars for adding emotional depth to the rigid structures of postmodern storytelling. These critics analyse Eggers’ work through the framework of Robin van den Akker and Timotheus Vermeulen, who argue that postmodernism’s fragmented view of the self needs to be revised. The two propose incorporating a “modern enthusiasm” that “oscillates” between a range of emotions such as “hope and melancholy” to “unity and plurality, totality and fragmentation”². Lukas Hoffman (2016), Lee Konstantinou (2017) and Nicoline Timmer (2017) see Eggers using a metamodern pendulum effect, reworking irony within metafiction to instead, foster emotional connection, engagement, and trust. Alison Gibbons (2017) mentions Eggers’ memoir as an example of the contemporary autofiction genre, suggesting that his recognition and emphasis of emotions and connections should be bound up within a “relational subjectivity”³. Eimantė Liubertaitė (2018) claims that Eggers’ memoir can be categorised as a metamodern work, as it shows the emotional tension between irony and nostalgia, in which the author looks back with regret over the trauma of his childhood and with nostalgia over its innocence. Jesús Bolaño Quintero (2021) further examines Eggers’ reconfiguration of metafiction and affirms the American writer’s conscious distancing from the use of irony as a postmodern paradigm, citing the section “Mistakes We Knew We Were Making”, added to the revised 2001 edition,

¹ The 2001 paperback edition is used, published by Vintage books.

² VERMEULEN T., VAN DAN AKKER R., *Notes on metamodernism*, “Journal of Aesthetics & Culture”, 2010, z. 2, nr 1, s. 6.

³ GIBBONS A., *Contemporary Autofiction and Metamodern Affect* [W:] R. Van den Akker, A. Gibbons, T. Vermeulen (eds.), *Metamodernism: Historicity, Affect, and Depth after Postmodernism*, London & New York, Rowman & Littlefield International, 2017, s. 130.

as a case in point. The article explores the friction between Eggers' desire for emotional engagement and the potential dangers of a singular, author-imposed interpretation. Van den Akker and Vermeulen's concept of "oscillation" is introduced, suggesting that the work oscillates between emotions of sincerity and irony.

While these analyses of Eggers' memoir have effectively explored his metamodern reimagining of postmodern narrative through his emphasis on emotional connection, they have overlooked a central theme intrinsically tied to this emotional emphasis: the recurring focus on the morality of caring for friends and family. This paper proposes a methodological framework for examining this theme, drawing from the insights of contemporary care ethics. Care ethicists, with their foundational beliefs in human connection and emotional decision-making, offer a valuable lens for understanding the protagonist's embodiment of a morality of care. Rather than conducting a strictly metamodern analysis, this paper suggests that the perspective of care ethics can provide an even more comprehensive understanding of Eggers' memoir. It begins by outlining the ethicists' views on emotional connection and relationships, which align with principles within metamodernism⁴. It then defines an individual morality of care based on these ethical perspectives. Subsequently, it analyses how the protagonist, Dave, embodies this ethical code in his care for his immediate family. Finally, it compares this approach to caring for his friends.

Characterising a morality of care

In *A Different Voice: psychological theory and women's development*, Carol Gilligan (1982) introduces a relational understanding of an individual morality of care⁵ and challenges Lawrence Kohlberg's male-centred theory of moral development by upholding the necessity of relationships, caring and empathy. Gilligan claims that Kohlberg's model does not also account for the different moral orientations influenced by gender and cultural context, excluding female participants from his research. Gilligan's work inspired the development of a care-centred approach in feminism. Virginia Held (2006) extends the discussion on the ethics of care beyond personal life and family relationships, emphasising its societal implications. Nel Noddings (2002) supports Held by considering the ethics of care within "a relational ontology"⁶ and emphasising the broader social significance of relationships as a motivation for mor-

⁴ Sabine Grunwald briefly discusses the influence of care ethics on metamodernism, claiming the former "undergird" the latter. *Embodied Liberation in Buddhism, Participatory Theory and Feminine Spirituality: A Metamodern Critical Hermeneutics*. Unpublished doctoral dissertation. San Francisco, CA, California Institute of Integral Studies, 2021, s. 10.

⁵ This notion is distinguished from 'political' morality of which Slote (2007) extends the concept of care to the political sphere. He suggests that institutions and laws can be evaluated based on their ability to show empathy and care for citizens.

⁶ NODDINGS N., *Starting at Home: Caring and Social Policy*, Berkeley, Los Angeles, USA, University of California, Press, 2002, s. 206.

al behaviour. Michael Slote's *The Ethics of Care and Empathy* (2007)⁷ highlights the cruelty of male-dominated systems that undervalue and exclude women, care, and empathy, and is praised by Gilligan in the book's foreword. While Slote argues that the ethics of care can guide both men and women⁸, he agrees with his female colleagues that the ethics of care focuses on "connection and relationship"⁹.

Understanding the criticism of Kantian reasoning by care ethicists is crucial to analysing Eggers' memoir within the context of a care-based individual morality framework¹⁰. They argue that in a model of relational care, emotions play a significant role in the ethics of the individual. Rejecting Kohlberg's theory, Gilligan (1982) claims that such a justification of reasoning fails in resolving moral dilemmas related to caregiving. Both Slote (2007) and Noddings (2013) deny that care is a matter of necessity for reason; Slote, for example, argues for "practical rationality"¹¹ that leaves room for compassion. Held (2006) offers an anti-rationalist perspective, claiming that moral frameworks frequently overlook connections and duties resulting from dependency on others¹².

Slote (2007) emphasises empathy's integral role in regulating emotions and ethical consideration although his peers occasionally diverge from this viewpoint¹³. Noddings (2013) does praise him for his integration of empathy into care theory¹⁴. Both agree on the reciprocity of empathy between caregiver and cared-for, asserting that emotional characteristics, which I shall shortly outline, guide care-giving morality depending

⁷ Traci Levy's observations are used as the basis for focusing on these four scholars; see *The Relational Self and the Right to Give Care*, "New Political Science", z. 28, nr 4, s. 547–570. Here, she recognizes Gilligan and Noddings' significant contributions to the field. As Held and Slote are often discussed by Noddings (2013) and vice versa, the four collectively represent what Levy identifies as the care ethical arena which refines, challenges, or rejects pre-existing positions. Jean Tronto's 1993 study, *Moral Boundaries: A Political Argument for an Ethic of Care*, London, Routledge, 1993, is excluded due to its assertion that care lacks moral significance, connecting it to "naturalness" and traditional female roles, weakening care's potential in moral theory. The analysis in this paper occasionally includes the views of other relational care ethicists such as Levy to illustrate aspects of caregiving in Eggers' memoir.

⁸ Gilligan (1987), in a later co-authored study with Grant Wiggins, believes that women are not naturally more empathetic than men while stressing that empathy is not inherent to a specific gender. GILLIGAN C., WIGGINS G., *The Origins of Morality in Early Childhood Relationships* [W:] J. Kagan, S. Lamb (red.) *The Emergence of Morality in Young Children*, Chicago, University of Chicago Press, 1987, s. 277.

⁹ SLOTE M., *The Ethics of Care and Empathy*, Abingdon, New York, Routledge, 2007, s. 67.

¹⁰ Held views Kant as a catalyst for her own, feminist re-assessment of morality, challenging his belief that women lack rational thought and therefore cannot be regarded as complete moral beings. See *The Ethics of Care: Personal, Political, and Global*, Oxford, Oxford University Press, s. 59.

¹¹ SLOTE M., *The Ethics of Care and Empathy*, op. cit., s. 104.

¹² HELD V., *The Ethics of Care: Personal, Political, and Global*, Oxford, Oxford University Press, 2006, s. 10.

¹³ SLOTE M., *The Ethics of Care and Empathy*, op. cit., s. 28.

¹⁴ NODDINGS N., *Caring: A Relational Approach to Ethics & Moral Education, Second Edition, Updated*, Berkeley, Los Angeles, USA and London, England, University of California Press, 2013, s. 204.

on the caregiver's empathic ability. Gilligan (1982)¹⁵ and Held (2006)¹⁶ contend otherwise, claiming that empathy is not the sole governing influence on emotions. Gilligan asserts that a relational ethics of care requires a voice and language beyond empathy, while Held advocates for equal weight between empathy and other emotions. These emotions need to be nurtured for both practical moral applications and a deeper understanding of morality.

Care ethicists do agree that empathy and other emotional qualities form, at least, the foundation of an ethics of care, including respect for the autonomy of those receiving care. Slote (2007) links empathy and respect, stressing that adequate empathy fosters respect in all interactions¹⁷. Within the same work, Slote later addresses¹⁸ as does Gilligan (1982)¹⁹ the issue of potential paternalism in caregiving, emphasizing that to develop empathy, the need to differentiate one's needs from those of the cared-for are vital. Slote (2007) asserts empathy's importance in building respect and balancing wellbeing and autonomy while considering caregivers' needs²⁰. Gilligan (1982)²¹ and Held (2006)²² endorse reciprocal autonomy, arguing care involves mutual agreements on time, space, and individual choices. Noddings (2013) advocates respecting autonomy but highlights a selfless approach where caregivers openly share themselves in the caring relationship²³.

Except for Slote, most prominent care ethicists emphasize attentiveness to the cared-for, as it stimulates empathy, fostering in Noddings' view, an "attentive love", a desire for care to be ideally selfless, evolving through experience and attention to others' needs.²⁴ Held (2006) acknowledges attentiveness but warns against being overbearing, reaffirming the need for mutual autonomy²⁵. Gilligan (1982) also recognizes attentiveness but disagrees with Noddings on selflessness, asserting that allowing reflection on the caregiver's desires can be considered truthful and impartial²⁶.

Noddings (2013) highlights responsiveness as an essential aspect of care, governed by respecting the cared-for's freedom and able to develop through experience and

¹⁵ GILLIGAN C., *In a Different Voice: Psychological Theory and Women's Development*, Cambridge, Massachusetts and London, England, Harvard University Press, 1982, s. XIX-XX.

¹⁶ HELD V., *The Ethics of Care...*, op. cit., s. 10.

¹⁷ SLOTE M., *The Ethics of Care and Empathy*, op. cit., s. 57.

¹⁸ *Ibidem*, s. 84-87.

¹⁹ GILLIGAN C., *In a Different Voice...*, op. cit., s. 37-38.

²⁰ SLOTE M., *The Ethics of Care and Empathy*, op. cit., s. 62.

²¹ GILLIGAN C., *In a Different Voice...*, op. cit., s. 37-38.

²² HELD V., *The Ethics of Care...*, op. cit., s. 37-38, 55.

²³ NODDINGS N., *Caring: A Relational Approach...*, op. cit., s. 73.

²⁴ *Ibidem*, s. 203.

²⁵ HELD V., *The Ethics of Care...*, op. cit., s. 55.

²⁶ GILLIGAN C., *In a Different Voice...*, op. cit., s. 85.

awareness²⁷. Held (2006) acknowledges its importance but warns that mutual autonomy must be respected to prevent hostility and exploitation²⁸ while also emphasising responsiveness at a social level²⁹. Slote (2007) defines “empathic responsiveness”³⁰ and agrees with Held, stating that empathy for others requires understanding their perspectives and addressing their needs. Gilligan (1982) suggests that responsiveness can be driven by the caregiver’s desires, which does not lead to failure but rather shows increased self-awareness and sensitivity³¹.

Gilligan (1982) highlights the caregiver’s responsibility to the cared-for, shaped by women’s perspectives on self and morality³². Responsibility should also, she believes, align with reciprocal autonomy, balancing responsibility to others and oneself³³. Slote (2007) supports this, emphasizing the need to balance responsibility and autonomy³⁴. Held (2006) connects responsibility and responsiveness, acknowledging the involuntary acceptance of responsibility³⁵. Meanwhile, Noddings (2013) stresses the caregiver’s primary responsibility³⁶, advocating for both passion and pragmatism in applying ethical ideals which everyone shares an obligation to strive for, creating a more virtuous world³⁷.

Dave’s care for family and friends

In Eggers’ memoir, the protagonist Dave³⁸ faces unexpected responsibilities, mirroring Held’s anticipated scenarios. Dave and his sister Beth care for their terminally ill mother Heidi and are set to become guardians of their younger brother Toph. Their father John is also terminally ill, while brother Bill remains updated from afar. Despite the family’s complex dynamics, including Jack’s late disclosure of his diagnosis and Bill’s minimal dialogue, Dave primarily focuses on relationships requiring his attention and responsiveness.

²⁷ NODDINGS N., *Caring: A Relational Approach...*, op. cit., s. 72.

²⁸ HELD V., *The Ethics of Care...*, op. cit., s. 36.

²⁹ *Ibidem*, s. 160.

³⁰ SLOTE M., *The Ethics of Care and Empathy*, op. cit., s. 39.

³¹ GILLIGAN C., *In a Different Voice...*, op. cit., s. XIII.

³² *Ibidem*, s. 22.

³³ *Ibidem*, s. 35–42.

³⁴ SLOTE M., *The Ethics of Care and Empathy*, op. cit., s. 80–81.

³⁵ HELD V., *The Ethics of Care...*, op. cit., s. 10, 14.

³⁶ NODDINGS N., op. cit., 2013, s. 76.

³⁷ *Ibidem*, s. 100.

³⁸ Dave is referred to as the protagonist and Eggers as the author. Given Gibbons’ (2017) association of Eggers’ memoir with contemporary autofiction, we should remember that it self-identifies as fiction to some degree. Thus, claiming that Dave’s morality of care absolutely reflects the author’s personal beliefs is not affirmed in this paper.

Having limited mobility, Heidi spends time watching television. Dave demonstrates empathy through attentiveness and responsiveness to her deteriorating health, helping change TV channels and managing her nosebleeds. He also invests in self-interest, using personified, black-humoured visions as a possible coping mechanism to alleviate the levity of the situation:

We are waiting for everything to finally stop working — the organs and systems, one by one, throwing up their hands—The jig is up, says the endocrine; (...) We'll get em next time, adds the heart, with a friendly punch to the shoulder³⁹.

Dave and Beth become increasingly responsive as Heidi's bleeding persists, leading to their decision to hospitalize her. Dave's engagement is so intense that he neglects changing clothes. Later, during an MTV interview, it becomes clear both siblings demonstrated Noddings' "attentive love" throughout their mother's care.

sometimes it was an excruciatingly long wait, (...) if she had a blanket over her or something, we would have to go further, would have to lean close and search her face for movement—that went on for weeks⁴⁰.

Later, we gain further insights into their caring affection when Dave recounts her final hours at home while he and Beth remained with her "day and night because you did not know"⁴¹.

Dave initially respects Heidi's autonomy, agreeing to leave curtains open and watching her chosen TV programmes. However, arriving at the decision to hospitalize her, Dave and Beth are challenged with balancing respect for autonomy and empathic concern. So burdensome is that concern that they eventually persuade Heidi to seek professional medical care.

Dave's responsiveness as a caregiver here is sometimes governed by his own distorted expectations, leading him to lie to his mother about her sleep patterns. His attempts to soothe her are based on his own delusional beliefs rather than her actual needs. He tries, inappropriately, to inject humour – Dave asks her to "talk funny"⁴² as he and Beth try to stop Heidi's nosebleed. There later emerges Dave's illusory envisaging of a potential care plan for his mother, believing she will be released from hospital after her admittance.

Dave faces a dilemma in contemplating the disposal of Heidi's ashes as he tries to balance responsibility between himself and what he thinks his mother would have wanted. He wavers, imagining his mother's disapproval, and decides not to proceed: "I see her suddenly, watching me (...) and she is just shaking her head, disappointed, disgusted"⁴³.

³⁹ EGGERS D., *A Heartbreaking Work of Staggering Genius*, New York, Vintage Books, s. 17.

⁴⁰ *Ibidem*, s. 218.

⁴¹ *Ibidem*, s. 431.

⁴² *Ibidem*, s. 14.

⁴³ *Ibidem*, s. 395.

Caring for brother Toph involves voluntary responsibility for the younger's well-being and moral growth⁴⁴. Dave demonstrates attentiveness, checking on Toph's needs and social integration, desiring to "see if he's talking with the other kids [. . .] to see if he's being accepted"⁴⁵. At this point, Dave has seemingly become one of Noddings' ideal carers, replete with "attentive love". However, in a thinly veiled critique of his father, Jack, Dave rejects the traditional parental role, using role-play to satirize the stereotype of a domineering father⁴⁶. Nonetheless, Dave, alongside Beth, believes in teaching Toph to care through example⁴⁷. The elders outline conditions for the responsibility, which they must also follow to prevent further tension with Toph. So, for example, Beth will not allow her friends or romantic partners to meet Toph immediately.

Despite recognizing the need for reciprocity, Dave's care for Toph is self-serving and paternalistic. He sees Toph as a tool to shape to his own liking, undermining his autonomy. Initially, Dave focuses on exposing Toph to new experiences without considering his preferences.⁴⁸ However, eventual recognition and respect for these emerge – the two engage in a firefighter's role-play at Toph's request. Soon though, the younger grows weary of Dave's paternalistic care, expressing frustration: "you've been very priggish and controlling (...) you hardly ever let my friends come over"⁴⁹. Dave's concern about Toph's autonomy reflects his paternalistic tendencies. He fears that Toph might become too involved with others and neglect his "own needs"⁵⁰.

As Dave decides to again relocate at the end of the memoir, this time further north, Toph concedes Dave's recipe for caregiving has benefitted him: "I think it's good to move around, see stuff, not get stuck"⁵¹. This admission highlights Dave's apparent success in shaping Toph's ethical perspective, aligning with Noddings' view, despite the frequent recourse to paternalism.

Where Dave's decision to move on has evidenced some rational decision-making (San Francisco has become too overwhelming, driving to work takes too long,

⁴⁴ Beth, we learn, is listed in her parents' wills as being Toph's guardian (Eggers, 2001: 408). However, Bill and Beth allow Dave to assume the role (not notifying the authorities) in exchange for dealing with the execution of the parents' estate.

⁴⁵ Ibidem, s. 56. Because he places importance on Toph's need for community and social engagement, I would disagree with Nicoline Timmer that we see Dave desiring to create a "solipsistic world-for-two" in the relationship. *CHAPTER 4: DAVE E.*, *Postmodern Studies*, Suppl. *do You Feel It Too?*, 2010, z. 44, s. 201.

⁴⁶ EGGERS D., *A Heartbreaking Work...*, op. cit., s. 90.

⁴⁷ Ibidem, s. 137.

⁴⁸ SLOTE M., *The Ethics of Care and Empathy*, op. cit., s. 57, discusses the relevance of "substitute success syndrome" which may initially apply to Dave's treatment of Toph. The cause of this is seen to be an overriding presence of connection between parent (in this case, guardian) and child which results in the elder's failure to acknowledge the desires of the younger.

⁴⁹ EGGERS D., *A Heartbreaking Work...*, op. cit., s. 116.

⁵⁰ Ibidem, s. 253.

⁵¹ Ibidem, s. 412.

evidence is of increasing destitution and filth in the city) we nonetheless witness the presence of fear and paranoia that engulfs him when he is directly unable to care, becoming increasingly apparent as Dave reacts to Toph being out of sight. What transpires is reflected in Dave's imagination which quickly creates negative, exaggerated scenarios regarding Toph's well-being. This is evident when Toph is left with babysitter Stephen; upon returning home and being unable to find Stephen, Dave jumps to worst-case conclusions about Toph's safety: "Stephen is gone because he poisoned Toph. Toph is dying"⁵².

Dave secures an interview for an MTV show 'The Real World' having done so by emphasising, within the application, his political involvement in *Might* magazine. In the interview, Dave presents his vision for an individual morality of care extending beyond immediate family, 'The Lattice,' defined as "the connective tissue (...) I see us as one, as a vast matrix, an army, a whole, each one of us responsible to one another, because no one else is"⁵³. Dave acknowledges that an individual morality of care involves social responsibility for people outside one's immediate family,⁵⁴ a duty which he feels is not tangibly and readily felt by society. By witnessing the unfortunate situations of two of Dave's associates, we are particularly made to experience the need for his political vision within the responses and reactions of the community to those affected.

When Dave's colleague Shalini Malhotra lies comatose after a balcony fall, Eggers not only depicts Dave's responsiveness to a non-family member but also the response of others from her wider community. Dave rushes to her aid, recalling her past support during his health issues. Meeting friends Marnie and Moody, Dave initially witnesses the distress caused to Shalini's mother who is often "pacing, arms crossed, stiff-backed, demanding things of the doctors"⁵⁵. He uses the pronoun "we" when discussing hospital visitor restrictions, emphasizing shared responsibility for care. This narrative style encourages readers to consider the importance of community support in challenging times: "We are to stay. And we are not to ask questions of the parents. If we want to know something, we are to ask a cousin or a friend"⁵⁶. Dave wishes us to reflect on the extent of the response to Shalini's plight; "dozens" of well-wishers surface and the protagonist offers to buy food for those waiting anxiously for news⁵⁷.

⁵² Ibidem, s. 163.

⁵³ Ibidem, s. 211.

⁵⁴ Eimantė Liubertaitė (2018) is correct, in my view, to perceive Dave seeking empathy in this passage. Furthermore, she believes that he is indicating "'responsibility' his peers should feel and practice towards one another." However, her analysis does not proceed to illustrate an individual morality of care within a discussion of care ethics. *Metamodern Narrative Identity in Dave Eggers' Memoir 'A Heartbreaking Work of Staggering Genius'* [W:] S. Martin, D. Owen, E. Pladevall-Ballester (red.), *Persistence and Resistance in English Studies*, Cambridge, Cambridge Scholars Publishing, 2018, s. 43.

⁵⁵ EGGERS D., *A Heartbreaking Work...*, op. cit., s. 329.

⁵⁶ Ibidem.

⁵⁷ Ibidem.

He is now envisioning the formation of a potential body for 'The Lattice' where those physically present "must do what they can . . . to suffer too (...); to leave the hospital is to weaken the curing forces, to enfeeble the efforts towards recovery"⁵⁸. Dave's desire for social connection is driven by a need for support, which he believes Shalini also needs: "the connection, the pumping of blood, the use of the lattice! She needs her friends not only there by her side, but she needs us being as close as possible, not only to her but to each other"⁵⁹.

In the memoir's latter half, Dave learns about friend John's mental health crisis through another friend, Meredith Weiss. Motivated by 'The Lattice' concept, Dave aims to support John but initially approaches the situation paternalistically, potentially risking their relationship. Nonetheless, Dave shows responsiveness by hurrying to meet John despite traffic. Upon arrival at John's apartment, Dave's attentiveness intensifies as he searches for overdose signs, fearing his friend's demise. Discovering John alive, Dave is upset when his friend dismisses his gratitude, leading to frustration and aggression in an attempt to provide care. This scenario is typical of what Held (2005) has argued, that care is not always "soft-headed"⁶⁰. Dave's paternalistic tendencies have led him to disregard John's autonomy and led to notifying the police without proof of an overdose. This irrational decision, based on fear and paranoia, however, proves eerily correct when John later overdoses and requires hospitalization.

Although Dave questions his actions and words, he perseveres in lifting John's spirits. Crucially, Dave prioritizes building trust and support to reinforce John's connection to life, leading to increased comfort in sharing struggles and accepting help. This empathy-driven dynamic highlights care's significance in fostering well-being.⁶¹ Dave enumerates John's positive qualities, praising the beauty in his life and questioning how someone can "care about such a soft and pliant person"⁶². Towards the end of the memoir, the two meet again following John's release. The friend tries to establish why Dave cares for not only him but also Toph and Shalini. After much discussion, Dave replies that "You will always need. You'll always need someone to bleed on"⁶³. Dave's reflection on 'The Lattice' concept may reveal its inspiration: the image of his dying mother. This underscores the necessity of relationships, both familial and otherwise, in cultivating collective responsibility and promoting mutual care.

⁵⁸ Ibidem, s. 330.

⁵⁹ Ibidem, s. 339.

⁶⁰ HELD V., *The Ethics of Care...*, op. cit., s. 160.

⁶¹ I am indebted to Hagen et. al (2017) whose study on the care of suicidal inpatients is conducted in line with the relational care ethical principles of Gilligan and Held. *Relational Principles in the Care of Suicidal Inpatients: Experiences of Therapists and Mental Health Nurses*, "Issues in Mental Health Nursing", 2017, z. 38, nr 1, s. 99–106.

⁶² EGGERS D., op. cit., s. 279.

⁶³ Ibidem, s. 425.

Conclusion

While analyses of Eggers' memoir from within metamodernism have effectively examined its revision of postmodern narrative techniques, they have yet to delve into a crucial theme: the significance of individual morality centred on providing care to both immediate family and broader social circles. This paper has argued that such an ethics of care can be illustrated by reference to the work of key practitioners who themselves proved inspirational to metamodernism's belief in emotional connection residing within the narrative. Consequently, we observe Dave, the central protagonist in the memoir, embodying an individual morality of care shaped by a diverse range of emotions that guide his interactions with his immediate family. As care ethicists have argued, and as evidenced in Dave's moral demeanour, his care for individuals is not solely governed by rational considerations; his responsiveness promotes delusional expectations regarding his mother's situation and generates fear for his brother's safety which often escalates into paranoia. The risk of paternalism poses a challenge to maintaining balance within his caring relationships and it may be argued that Dave has been successful in his care for younger brother Toph (and indeed, for his suicidal friend, John) despite this threat. Dave's mother's death serves as a catalyst for his construction of 'The Lattice,' a vision of individual care that becomes politicized over time. While dealing with the critical situations of a sick colleague and a suicidal friend, Dave envisions a supportive network capable of sustaining life. This vision motivates him to encourage others to develop a stronger sense of social responsibility and ethical behaviour towards those outside their immediate circle.⁶⁴ Our duty to care, he believes, lies both within and beyond our immediate ties to redefine how we respect each other as a larger family, within society itself.

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⁶⁴ In *What Can a Citizen Do?*, Chronicle Books, San Francisco, CA, Chronicle Books, 2018, s. 14, Eggers proceeds to uphold the notion of care within his vision of citizenship, harnessing Dave's fledgling, politicised vision of individual care and social responsibility: "A citizen should be engaged / A citizen should care and care."

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The Morality of Care in Dave Eggers’ *A Heartbreaking Work of Staggering Genius*

Summary: Dave Eggers’ memoir, *A Heartbreaking Work of Staggering Genius*, is celebrated for its elements of metamodernism, but existing scholarship overlooks its central theme of the ethics of care as a guiding principle in personal and wider social relationships. This paper explores how Eggers’ protagonist Dave embodies the key tenets of the ethics of care, including attentiveness, responsiveness, responsibility and respect for autonomy. Drawing on the work of care ethicists such as Carol Gilligan, Nel Noddings and Virginia Held, the analysis highlights the interplay of emotions and moral dilemmas in caregiving. Through Dave’s relationships with his terminally ill mother, younger brother, and friends, the memoir reveals the complexities of caregiving, including the tensions between paternalism and autonomy, emotional attachment, and rationality. In addition, Dave’s experiences inspire a politicized vision of care, encapsulated in his concept of “The Lattice,” which extends care beyond familial boundaries and advocates for collective social responsibility. This study positions *A Heartbreaking Work of Staggering Genius* as a profound exploration of care ethics, offering a nuanced understanding of its foundations in metamodernism and emotional depth.

Keywords: relationships, care ethics, metamodernism, family, society

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