

IMAGINING CARE

Responsibility, Dependency,
and Canadian Literature

AMELIA DeFALCO



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Canadian Literature*

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For Robert and Morris, my fellow adventurers.

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IMAGINING CARE

Responsibility, Dependency, and Canadian Literature

Introduction: Literature, Care, and Canada

In Alice Munro's short story, "The Bear Came over the Mountain," the onset of a woman's dementia transforms her husband into a quasi-procurer who finds himself negotiating the restitution of his wife's new relationship in an effort to restore her failing health. The story offers an apt introduction to care and ethics in Canadian literature in its depiction of an ethical dilemma that positions the needs of the husband, Grant, in opposition to the needs of the wife. Fiona has developed a passionate attachment to a temporary resident, Aubrey, whose own wife has placed him in the facility for respite care. When Aubrey leaves Meadowlake, Fiona is bereft, her health deteriorating so precipitously that facility employees suggest she may need to move to the dreaded second floor, reserved for those who have "really lost it" (Munro 298). Because residents rarely return from their second-floor internment, Grant is desperate to avoid Fiona's relocation. As a result, Grant attempts to retrieve the usurper of his wife's affections, in effect, "proving his own fidelity to Fiona by facilitating her 'infidelity' to him" (McGill, "No Nation" 100), an altruistic gesture that requires him to suppress his own longing for Fiona's recognition and affection.

In this brief sketch of the story, Grant appears as an ethical hero, his noble prioritization of Fiona's needs over his own evidence of his devotion and care. Indeed, the 2006 film adaptation of the story directed by Canadian Sarah Polley, *Away from Her*, endorses such an interpretation, casting Grant as a suffering husband who trades his own happiness for his wife's survival.¹ However, closer attention to the story, to its narrative voice, its diction, tone, and imagery, belies this relatively straightforward account of the story's ethical implications. "The Bear Came over the Mountain" incorporates a degree of ambiguity that

inspires numerous interpretative questions: How does Grant's history of unfaithfulness affect his motivation? To what degree is the return of Aubrey the result of Grant's self-satisfied seduction of Aubrey's wife Marian? And what of Fiona? Readers get little sense of her perspective. How complete is her delusion? Is her ignorance of Grant's adultery feigned? Might this be a revenge story? The story's ethical irreducibility contributes to its powerful effect. Denying readers complete knowledge, it denies us the comfort of assuming a self-assured moralizing position, condoning certain characters and actions while castigating others as "wrong."

Munro's story rehearses one of the central concerns of ethics, namely, what is one to do with, or about, another person's suffering? What is one's obligation to other people, friends, family, strangers? And what is one's obligation to oneself? Ethical commitment can prove to be a high-wire act, a struggle to balance distance and presence, evaluation and interaction, abstraction and action, the needs of others and of the self. Practical ethics, what Derek Attridge categorizes as "morality" (28), requires that the self be, as philosopher James Mensch explains, "able to distance itself from itself, but not to the point that it uncouples from the world in which it acts" (Mensch 12). Responding to the other is an ethical act at the heart of ethics of care philosophy. Questions regarding who should give and receive care, and even more fundamentally, what exactly the giving and receiving of care means, are enquiries with both ethical and ontological implications. The larger issues of ethics and moral philosophy are brought into focus by ethics of care philosophy, which draws theoretical principles and abstractions into the everyday world of dependency, responsibility, and work. *Imagining Care* takes Canadian narrative literature like "The Bear Came over the Mountain" seriously as a discourse with the potential to both complement and complicate ethics of care philosophy. Its goal is to bring philosophical and literary discourses into dialogue by exploring care in fiction and memoirs by a selection of contemporary Canadian writers.

What Is Care?

The *Oxford English Dictionary* tells us that the English word "care" has been around for a long time, possibly as long as a thousand years. As one might expect, its meaning has evolved over the years. In its original Old English incarnation, "*caru*," or "*cearu*," the term denoted "suffering" and "sorrow," "mourning" and "lamentation" ("care, *n.1*"

def. 1 a–b), as well as other affective burdens: anxiety, concern, and “mental perturbation” (def. 2). Evidence suggests that the connection between “care” and responsibility, as in the construction “to care for: to take thought for, provide for, look after, take care of,” emerged in the thirteenth century (“care, v.” def. 3). Around this time, “care” became associated with “oversight” over and “preservation” of objects or people (def. 4a). Since its emergence around the turn of the first millennium, “care” has functioned as both verb and noun – one both cares and has cares – a dual function that continues to this day. We give care, take care, care for, care about, have cares, and don’t care. In its broadest sense, care is affection, devotion, responsibility, even obligation; it is action, behaviour, motivation, and practice: care feels and care does. Often the noun and verb usages are linked: having cares routinely coincides with doing care, although not always. As many of the examples studied throughout *Imagining Care* suggest, the frequent incompatibility of feeling care and doing care complicate the broader theorization of care.

“Care” continues to denote “serious or grave mental attention; the charging of the mind with anything; concern; heed, heedfulness, attention, regard; caution, pains” (n.1 def. 3a), an association between care and burdens and pains that harkens back to the original “*caru*.” As much as care is valuable, nay, essential for human survival and identity, it remains connected to its etymological roots: to pain and lamentation. *Imagining Care* considers the so-called burdens of care involving responsibility for one in need, a need often precipitated by illness or impairment that creates an imbalance of ability or means between the two parties involved. In such uneven relationships the decisions and activities associated with care accentuate the complexities of ethics of care philosophy, which considers and evaluates how subjects might, and often should, respond to another’s needs or vulnerabilities. As ethics of care philosophers make clear, not all care is ethical care, and these philosophers have done valuable work theorizing what care *should* be. For example, Patricia Benner, Suzanne Gordon, and Nel Noddings insist that care depends on receptivity between subjects: “Caring demands that one *dwell* – as Martin Heidegger would have described it – with another ... The product of care is embedded in the person who is cared for and cannot be segregated from that human life. Caring is not dependent on what I do to you, but on what I do and how *you receive or respond to it*” (Benner et al., emphasis in original xiii). As I discuss below, many of the definitions and parameters offered by ethics of care

philosophers are necessarily abstract in their privileging of reciprocity and responsivity. *Imagining Care* considers the unique insights offered by short stories, novels, and memoirs that depict devoted, yet reluctant or thwarted, moving, sometimes frustrating narratives of care in practice. This inquiry follows Peta Bowden's claim that "caring expresses ethically significant ways in which we matter to each other, transforming interpersonal relatedness into something beyond ontological necessity or brute survival" (1). The depictions of care in the literary texts of *Imagining Care* bring to light how and why this "mattering" is so complicated and difficult, and yet inescapable and important.

This inquiry into the cultural meanings of caregiving was inspired by the research into aging and narrative undertaken for my previous book, *Uncanny Subjects: Aging in Contemporary Narrative* (2010). While completing a chapter on narratives of dementia I became aware of the complexity of the caregiver/care-receiver relationship, which deserved more detailed attention than I could provide in a project focused on aging. In *Imagining Care* I attend fully to the ethical questions raised by literary narratives of caregiving. In so doing, this project proposes that literary explorations of caregiving have much to offer the larger understanding of the ethics of care, as well as illuminating how we imagine and construct the meaning of care in contemporary Canadian culture. The ambiguity and complexity of caregiving scenarios depicted in literature, scenarios complicated by the human desire for power, for attention, for affection, provide compelling territory for investigating both the satisfaction and connection, along with the ambivalence and unease produced by caregiving relations.

Who Cares?

It's a common question: who cares? Everyone cares. As ethics of care philosophers make clear, human survival depends on care. Infants are entirely helpless and would perish without some degree of care. As a result, we can say that all of us who have survived infancy have been involved in a caring relationship. Of course, as ethics of care philosophers are quick to point out, survival is not a marker of good, or ethical care, but merely a sign of care's presence. Survival is possible with poor care. Ethics of care philosophy is preoccupied with understanding and conveying what good care is or might be, and how Western society might function if care were highly valued and human dependence (and the caring relationships it necessitates), replaced independence as the