

Emotional Proletarians In A Global Economy: Mexican Immigrant Women And Elder Care Work

María Ibarra

Department of Chicana and Chicano Studies
San Diego State University

ABSTRACT: Through the ethnographic case of Santa Barbara, California I focus on Mexican immigrant women employed as elder care workers in private homes. In particular, I examine the care narratives of Mexicanas who labor with little or no supervision from anyone other than their wards. These narratives reveal that workers undertake a broad range of unrecognized emotional efforts such as facial and bodily displays, tone of voice and spoken word, and more significantly, empathy and long-term strategic choices. These types of emotional labor stand in sharp contrast to those performed by the prototypical “emotional proletarians” of the academic literature and suggest that there is a new, more flexible type of emotional proletarian in the global economy, one whose skills involve providing authentic emotion.

I have known elderly persons who have no one, and I see them as abandoned persons. There is more of a need for caring than cleaning [in society]. But not just anyone can do it. It requires mind and body; it requires that you give order to the day. And it is very

difficult work, because you also have to put yourself in that person's place. You have to encourage them and try to understand them.

Guadalupe Martinez, September 2000

When Guadalupe, a private elder care provider in Santa Barbara, California explains why she stays in a low paid caring job rather than finding higher paid employment as a housecleaner, she says it is because there is a greater social need for this work in a city where so many elderly citizens live alone. As a recent immigrant who has had to leave her own family behind in Mexico, the state of being old and alone is to her mind very poignant. She also recognizes, however, that not everyone is cut out for elder care. From her point of view caring for the frail elderly is difficult and skilled work; it is not something natural to her. Rather Guadalupe argues that elder care requires that she create her own routine in which forethought, physical dexterity, and a broad range of "emotional labors" are central, all in exchange for \$600 a month.

Guadalupe's circumstance is far from unique. Increasingly, immigrant women are hired by employers in the United States to labor as elder care providers in private homes (Chang 2000; Abel 2000). This represents a dramatic change in the way Americans care for their elderly kin, a change that reflects a number of late 20th century developments. Globalization and alterations in ideologies about family and gender have contributed to the unprecedented feminization of the waged labor force in the last 30 years (Sassen-Koob 1988). Consequently, due to both necessity and choice, millions of women are no longer the primary caregivers for their children or adult kin, which was the case in most American households during most of the 20th century. At the same time, men have not filled the household labor vacuum. Rather, more than at any other time in history, families turn to the market to purchase a broad range of goods and services necessary for the physical

and emotional care of people. These goods and services range from prepared meals and disposable diapers to time in child, elderly and/or convalescent care centers. In many cities individuals also hire immigrant women to perform the work that they are too tired, too busy or simply unwilling to do themselves (Ruiz 1987; Solorzano-Torres 1987; Repak 1995; Mahler 1995; Wrigley 1995).

Globalization processes also help explain why it is that immigrant women from developing countries clean and care for the citizens of post-industrial nations (Enloe 1989). Since the 1970s the Third World's embrace of neo-liberalism, with its emphasis on production for export, coupled with structural adjustment programs, have fomented the increased south-to-north migration of women who are fleeing the traumatic consequences of these economic and political policies (Zlotnik 1995). This is particularly the case for Mexican women who, alongside Mexican men, represent the largest group of immigrants to the U. S. through the 1980s and 1990s (Gutiérrez 1998). Once in the U. S., Mexican women (like many recent migrants from Central America, the West Indies, and the Philippines) find limited labor market choices and are in essence tracked into low paying jobs (Fernández-Kelly and Sassen 1995), especially domestic employment (Salzinger 1991). Thus, one of the consequences of globalization is a boom in the supply and demand for immigrant domestics, a phenomenon that contrasts with the post-WW II period when the low number of domestic workers had led some academics to predict the demise of the occupation (Milkman et al. 1998).

Not surprisingly, recent anthropological and sociological research has focused on the expansion of the domestic labor market in the United States. Scholars have shed light on the transnational and stratified structure of the occupation (Colen 1995; Hondagneu-Sotelo 2001; Parreñas 2001), the broad range of physical tasks undertaken by domestics (Sanjek and Colen 1990), the importance of worker agency in shaping the labor

process (Romero 1992), and the effect of domestic work on women's gendered identities and migration patterns (Hondagneu-Sotelo 1994). Less explored is the increasing diversity of employment within the occupation, and in particular the increasing demand for women to labor as elder care providers. Moreover, while domestic labor scholars have repeatedly pointed to the relevance of emotional labor in the occupation (Glenn 1986; Rollins 1985; Tucker 1988; Romero 1992), there has been little exploration of what it means in the context of informal private sector care work. In a global economy, where employers can literally hire an immigrant woman to love a member of their family, it is important to de-essentialize emotional labor and, by extension, the women who perform it.

Through the ethnographic case of Santa Barbara, California I focus on Mexican immigrant women employed as elder care workers in private homes. In particular, I examine the work narratives of Mexicanas who, in the context of negative public perceptions about their presence in the U. S. (Chavez 2001), labor at providing intimate forms of care with little or no supervision from anyone other than their wards. These narratives reveal that workers often grow to feel affection for or "love" their charges as a way to "legitimate" forms of close connection "that violate hegemonic conceptions of family life" (Steinberg and Figart 1999: 23). Under conditions of low pay and long hours, this affection provides the motivation for workers to provide comfort, to make their wards feel good. To this end Mexicanas create work routines that include a broad range of unrecognized emotional efforts, some of which stand in sharp contrast to those performed by the prototypical "emotional proletarians" of the academic literature (MacDonald and Siriani 1996), the frontline, often scripted, service workers such as flight attendants, sales clerks and fast food servers who have fleeting contact with their customers (Leidner 1993). Elder care providers instead develop

relationships with their wards and through their everyday labors create the conditions for a new, more flexible type of emotional proletariat whose skills include providing authentic feeling in exchange for a wage.

Domestic Employment, The Aging Population, and Emotional Labor

The contemporary literature on domestics in the U. S. has sketched the outline of a new domestic labor, which arises in part from processes of economic restructuring. This new domestic labor consists of a broader spectrum of employers, women and men, from working class as well as elite households (Salzinger 1991), who hire a more diverse group of employees to perform a wider range of tasks than those found in the immediate post-WW II period (Ibarra 2000). Employees are predominantly immigrant women from the West Indies, the Philippines, Central America, and Mexico who in turn derive from both the working and middle classes (Colen 1995; Parreñas 2001; Hondagneu-Sotelo 2001). However, while the domestic labor literature has pointed to changes and diversification in the occupation over time, scholars have nonetheless tended to focus primarily on domestics who labor as housecleaners and/or childcare providers (Romero 1992; Rollins 1985; Repak, 1995; Chang 1994; Colen 1990, 1995; Wrigley 1995; Hondagneu-Sotelo 1994; 2001; Glenn 1986). Missing from the analysis of domestic employment is hands-on adult care (particularly care of the elderly): how it is structured, and what it does to workers.

This neglect is surprising considering that several contemporary domestic labor scholars have acknowledged the existence of private elder care arrangements (Chang 2000; Glenn 1997), and one even suggests that as baby boomers continue to age, "domestic work may soon shift from nannies

to companions of the elderly" (Hondagneu-Sotelo 2001: 251). Today, those individuals 65 years of age or older represent 13 percent of the population, and those who live to be 85 years of age or older (the "old old") are the fastest growing segment of the population. Although most senior citizens do not require assistance, approximately one-quarter require at least occasional help, and the prevalence of disability (and consequently the need for help) "rises steeply with age" so that almost one-half of all people 85 years of age or older require some type of assistance (Abel 2000: 251). By 2050 one of every five Americans will be a senior citizen.

While elder care has not featured prominently in the domestic labor literature, one of the critical components of elder care (emotional labor [Diamond 1990; Foner 1994]) has been the topic of more discussion (Romero 1992). As first defined by Arlie Hochschild, emotional labor is "the act of inducing or suppressing feeling in order to sustain the outward countenance that produces the proper state of mind in others" (1983: 7). Such labors might include facial and bodily displays, like smiling, flirting, or deferring (Hall 1993). The mechanisms of emotional labor also include spoken word, tone of voice, and other "efforts that are expressed through behavior" (Wharton and Erickson cited in Steinberg and Figart 1999). By focusing on skills that have been ignored or naturalized by a previous generation of labor scholars (Blauner 1964; Braverman 1974) (skills in human relations, communication, and emotional effort) Hochschild demonstrates that these skills are critical to profitability and are carefully scripted for workers in the new economy (Steinberg and Figart 1999).

Hochschild (1983) has also argued that while emotional labor produces profits for corporations and good feelings in customers, it is highly costly to workers. "Faking" feeling, she says, alienates workers from their faces, bodies, and moods and leads to burnout or feelings of anger (1983). This provocative argument has created an interest in what Cameron

MacDonald calls the "emotional proletariat" (MacDonald and Siriani 1996), that growing segment of the U. S. workforce whose jobs require them to expend emotional effort. While the majority of such studies have focused on formal sector workers with routinized scripts (Hochschild 1983; Leidner 1993; MacDonald and Sirianni 1996), Mary Romero's (1992) important work on informal sector Chicana domestics in Denver, Colorado expands our understanding of how even without providing scripts, employers extract emotional labor from workers as a means of pleasing themselves.

Mary Romero finds that employers behave in such a way that workers learn that they need to "manipulate and manage their feelings in order to fulfill the psychological needs of their employers" (1992: 105). Likewise, other studies show that workers learn to provide encouragement (Glenn 1986), give "nurturance" to children (Dill 1979; Colen 1995), act as confidantes (Dill 1979), and provide deference to their employers (Rollins 1985). As in the service sector more generally, emotional labor in the context of domestic employment is rarely reciprocal and is often both materially and emotionally costly to workers: performing emotional labor expands the workday but does not increase income; likewise enacting emotional labors often make workers feel demeaned (Romero 1992: 114). Not surprisingly, the Chicana domestics Romero studied in Colorado have undertaken a "transformation" of housecleaning by eliminating emotional labors and "professionalizing" the work (1992).

What happens, however, when Mexicanas are expected, in essence, to serve as working surrogates for kin: when they are hired as the primary, and often the sole caretakers for elderly persons who are in the process of dying? How in the context of workplace power relations do workers shape the labor process and what does emotional labor mean in practice when the workplace is an elderly ward's home? As is the case for formal sector workers in the new economy (Fernández-Kelly

1983; Sacks 1988; Lamphere et al. 1993; Dudley 1994; Newman 1999) it is necessary to address the "everyday life" (Lamphere 1999) of informal immigrant elder care providers. It is necessary to look at what women actually do and how they produce comfort for others so as not to mask relations of inequality behind a presumed capacity of women (and women of color in particular) to more "naturally" know how to care.

Description of the Research

Material for this article is taken from a larger study of informal sector paid domestic work among Mexican immigrant women in Santa Barbara, California. The larger study focuses on 65 women, contacted through a purposive non-random, snowball sample. All these women migrated to the United States from Mexico between 1985 and 2000 and, with few exceptions, have no legal residency documents. The materials from the 65 women in the study were collected from a survey, in-depth individual interviews, group interviews, weekly tracking of hours and responsibilities, and more generally ethnographic fieldwork, which includes participant-observation and use of key informants. Mexicanas were interviewed over a total of 22 months, which spanned the periods 1994-1996 and then 1998-2000.

An initial survey was useful in helping to determine the growing heterogeneity among Mexican immigrant women to the United States. As in other southern California communities, Mexicanas demonstrate a greater variety in their ages, class background, communities of origin, and education than migrants in the immediate post-WW II period (Cornelius 1992). Mexicanas' ages ranged from 21 to 62 years, and they derive not only from the Mexican working class, but also from the middle class that was hard-hit by Mexico's economic crises of the 1980s and 1990s (Chant 1991; Gonzalez de la Rocha

1994). Furthermore women migrated from rural areas in "traditional" central-western sending states, as well as from new sending regions and urban areas, especially economically devastated Mexico City (Cornelius 1992). Mexicanas also have a broad range of educational backgrounds (from an elementary school education to a university degree) and had labored in a variety of occupations, such as domestics, teachers, salespersons, and small business owners, in Mexico.

The survey also demonstrates that household employment in Santa Barbara is heterogeneous and polarized in terms of wages, working conditions, and responsibilities. At one end are housecleaning occupations, which include labor contractors, employees for labor contractors, day workers, and caretakers for absentee homeowners. These types of workers typically live-out and earn in the range of \$600 to \$2,400 dollars per month, and tend to primarily perform instrumental tasks with a limited emotional component. At the other pole are human care workers who include child, adult, and elder care providers. These workers earn between \$200 and \$2000, although the average earnings are \$800 dollars a month. For these wages women often labor under conditions prevalent at the early part of the 20th century when workers were on call 24 hours a day, seven days a week (Katzman 1981). In this type of employment both physical and emotional tasks are central to the labor process.

While the survey was invaluable for determining the range of work in the city and women's general social characteristics, in-depth, ethnographic, in situ field research allowed me to collect detailed recruitment and work histories. Mexicanas are most often recruited into the occupation by a third party, typically a relative, friend, or former employer. Mexicanas are also recruited through newspaper and radio advertisements. Unlike formal sector care workers screened and recruited by agencies, informal sector workers directly negotiate wages and working conditions with their employers. Work history data

suggest that Mexicanas often make a career of domestic employment, and tend to move from one type of work to another. The tendency is for younger women to try to move from human care occupations to higher paying housecleaning occupations as they progress in their career as household workers.

For this article I draw primarily from interviews with 20 Mexican immigrant women who were employed at the time of the study as live-in or live-out private elder care providers. I also incorporate data from interviews with eight other women who, at an earlier part of their domestic careers, had labored as elder care providers. Interviews with all women took place at a location of their choice, and all the women were interviewed for a minimum of four hours. The majority of workers' employers were the adult children of the elderly wards; these employers in many cases, did not live in the city. Elderly wards also directly hired Mexicanas.

All the interviews were conducted in Spanish, and all translations are my own.

"Giving Order to the Day": Elder Care Routines

Unlike many formal sector workers (Foner 1994), informal elder care providers are not typically asked to follow a routine previously established by their employers. Employers may require that certain tasks, such as bathing, feeding, and walking an older person, be performed but they do not provide workers with a fixed schedule. And, unlike many interactive service sector jobs, Mexicanas are not provided with a script that regulates emotional labor (Leidner 1993; Hochschild 1983). More often employers appear to assume that Mexicanas will naturally know how to care for their elderly kin. Even so, there is nothing natural about women's crafted efforts to give comfort

to wards in exchange for a wage. As Mrs. Leti noted, "One has to give an order to the day so that people are well cared for."

In order to give order to the day, elder care providers assess the particularities of the work context and then draw from past experience as caretakers for kin or for other wards, as well as from their learned "ethics of care" to organize their daily work. As I have argued elsewhere, these historically situated ethics delineate a gendered division of labor and provide cultural models for feeling and action (Ibarra 2003). In what follows I provide an edited care narrative of one worker, Mrs. Consuelo Archuleta, to highlight the complex range of physical and especially emotional labors that form part of many workers' days. In particular Mrs. Archuleta's case will reveal four categories of emotional labor: facial and bodily displays, tone of voice and spoken word, empathy, and long-term strategic choices.

Mrs. Consuelo Archuleta: Live-in Elderly Care Provider

When I asked the petite 59-year-old Mrs. Archuleta to describe what she does on a daily basis, she countered by going back in time and answered that "at the beginning" the work was "easy." In her narrative, care is a process that she constantly adjusts to accommodate the changing physical and emotional needs of a ward. Thus, in the beginning of her live-in employment in 1990, and for another two-and-a-half years, her ward Mrs. Sara was relatively healthy, and the "routine" was "the same" from day to day. Mrs. Archuleta began her workday at 7:30 A.M., when the first thing she did was prepare Mrs. Sara's breakfast. At 8:00 A.M. she went into Mrs. Sara's room and cheerfully said "good morning," and asked her if she had slept well. Mrs. Sara was typically a little groggy, so Mrs. Archuleta helped her sit up in bed and smoothed down her hair to give her time to wake up. She then gave Mrs. Sara her

prescription medicine and the breakfast she had prepared. Thereafter Mrs. Archuleta assisted her to the bathroom and undressed, bathed and dressed her 120-pound ward. At the very beginning things were difficult on Mrs. Archuleta because Mrs. Sara did not want to be touched if she was naked or if it was necessary for Mrs. Archuleta to change her diaper. Mrs. Archuleta recognized that this would make the morning more stressful for both of them, so she verbally soothed her ward to help Mrs. Sara manage the idea of a stranger performing such intimate tasks. Mrs. Archuleta said:

Poor old woman, she would get very embarrassed. Then when she got embarrassed she would try to hide herself and it would make the job more difficult on me. So I decided that she had to be comfortable. I told her, "I have done this all of my life, so this is not the first time I change somebody [referring to diapers]. Before I came here I took care of my own mother as well, who was very much like you."

By putting herself in the position of a daughter, Mrs. Archuleta helped "normalize" the experience for Mrs. Sara and made the job easier for both of them.

Mrs. Archuleta then organized the rest of the day around Mrs. Sara's two remaining mealtimes and afternoon exercise routine. If a doctor's visit was necessary during the day, Mrs. Archuleta changed the schedule accordingly. After bathing Mrs. Sara, Mrs. Archuleta helped her sit next to a sunny living room window, where she kept her company while knitting, talking, watching television, or reading the Bible. At noon, Mrs. Archuleta prepared a hot meal and gave it to Mrs. Sara on a "nice plate with a nice presentation." She had recognized that this made the food more appetizing to Mrs. Sara and made it easier to feed her. After lunch, Mrs. Archuleta gave her ward additional medication, and took her for a short walk. After the walk, Mrs. Archuleta asked Mrs. Sara if she would like to take

a nap. If she did, she settled her in bed, picked-up around the house, and had her own lunch. When Mrs. Sara woke up, they both watched television while Mrs. Archuleta undertook chores such as laundry or ironing, since it was important to Mrs. Archuleta that Mrs. Sara always have something clean and ironed to wear. At 4:30 P.M., Mrs. Archuleta began to prepare dinner, which she served and fed Mrs. Sara at 5:30. In the evening, Mrs. Archuleta sat with Mrs. Sara, sometimes engaging in conversation, massaging her legs, watching soap operas on the television, or looking at old pictures. At 9:00 P.M. Mrs. Sara was ready to sleep and Mrs. Archuleta changed her clothing, took her to the bathroom, brushed her teeth, and put her to bed. In sum, Mrs. Archuleta engaged in a variety of physical and emotional labors necessary to keep her ward comfortable, healthy, safe, and happy on a daily basis.

By the third year of employment, however, Mrs. Archuleta recounted that the job had become more difficult. Mrs. Sara's health deteriorated and she experienced increasing dementia, which required Mrs. Archuleta to respond to different and escalating needs. At night Mrs. Sara often experienced fear or restlessness, and Mrs. Archuleta took to sitting by her beside and staying there long after her ward had fallen asleep. She did so to ensure that Mrs. Sara would feel safe if she should re-awaken. In the daytime, likewise, it began to take much longer to finish tasks that formerly had been relatively easy. For example, bathing Mrs. Sara initially took 30 minutes, but three years later it took up to 90 minutes. This is because it takes Mrs. Archuleta a longer time not only to convince her ward of the necessity for a bath, but also to physically help her move to the bathroom and undress and then dress her again. Moreover as Mrs. Sara progressively lost more of her physical strength and ability, Mrs. Archuleta had to bear more weight, which, in turn, took its toll on her body. So she had to be more careful about movement.

Just as Mrs. Sara changed physically, she also began to change emotionally, such that it was often difficult to work with her. Mrs. Archuleta said:

She forgets who I am and tells me that I don't love her anymore and that she will die alone So I hug her and rub her head, and I tell her that it is not true, that I love her very much. Later it passes. It is not easy, I don't say that it's easy, but it is not from another world. That is the road we are all headed towards.

Because of these emotional changes in her ward, Mrs. Archuleta felt it was more important than ever to keep Mrs. Sara's spirits high, to keep her calm and free from negative thoughts. To this end, even if she was tired, Mrs. Archuleta reminded herself how vulnerable her ward had become and remembered to put a smile on her face to try to make Mrs. Sara feel happy. This emotional labor was not always easy, not because she had to "fake" emotion, but because she often felt overwhelmed by fatigue, sadness, or loneliness. Mrs. Sara's adult daughters (Mrs. Archuleta's employers) contributed to this situation. During the six months I interviewed Mrs. Archuleta, her employers did not show up to relieve her on Sunday, her day off, a total 13 times. Thus, more than half of all the Sundays in a six-month period were taken up by work for Mrs. Archuleta, work for which she was not paid an additional sum.

Due to her employers' absence, Mrs. Archuleta perceives them as "bad" daughters and she attempts to make up for the missing love in Mrs. Sara's life. Mrs. Archuleta attempts to "shield," as Brenda Seerey (1996) notes for mothers, her ward from hurt and disappointment by doing those things she thinks daughters should do. At the same time, her sense of a moral alliance with Mrs. Sara against her inattentive children permits Mrs. Archuleta to vent her personal anger about her working conditions. She often expressed outrage that daughters could

treat their parent in such a coldhearted manner. In this case, anger becomes a "means of defending" herself from demeaning treatment without thinking of herself as demeaned (Leidner 1993: 13). Care in this context also creates the opportunity for Mrs. Archuleta to create a notion of herself in opposition to people she perceives as unethical in addition to powerful (Rollins 1985).

Mrs. Archuleta's work responsibilities, however, are also a source of conflict for her beyond the workplace. The fact that Mrs. Archuleta's employers do not relieve her, angers one of Mrs. Archuleta's five adult sons who finds it difficult to understand why his mother stays and works a minimum of 77 hours per week for \$700.00 a month (roughly for \$2.27 an hour). In an effort to gain his support, Mrs. Archuleta invites him and her grandchildren to come over on those Sundays when Mrs. Sara's daughters do not show up. She also explains to him why she stays. She says Mrs. Sara reminds her of her own mother, she has forged a strong relationship with her ward, and she sees herself as responsible for her. She says: "It is no longer about them, it's about the Mrs. How can one avoid sentiment? Everyday, here we are two old women together. I tell him, 'If one can feel affection for whatever animal (a dog, a cat) how can one avoid feeling affection for a human being?' " Because of this affection and sense of moral obligation, Mrs. Archuleta has made a commitment to her ward to stay until Mrs. Sara dies. In a sense, Mrs. Archuleta has become trapped by the emotion attendant to the physical care.

Deconstructing Emotional Labor

Mrs. Archuleta's care narrative is representative of what other workers have to say about their crafted care routines, and it allows us to better appreciate not only the physical, but also the emotional labors that women perform to create comfort

for their wards. Comfort does not just happen; rather workers produce it. Moreover, Mexicanas believe that emotional labor is essential to the performance of bodywork in a manner that makes wards feel good. Mrs. Guadalupe says: "What elderly people most want is to feel loved; they want to feel wanted. If one can give them that, then the other things become easier." Yolanda, likewise, expressed the importance of emotional labor to the job. She said that more than anything else elder care requires "heart, stomach, and valor" because wards need a lot of "love, compassion, and patience." In what follows I deconstruct the four types of emotional labor that were most prominent in Mrs. Archuleta's and other workers' care narratives. These emotional labors are facial and bodily displays, tone of voice and language, empathy and long-term strategic choices.

Facial and Bodily Displays

As is common among frontline service workers, Mexicana care providers school the expression on their faces in order to make their clients feel good (Hochschild 1983). Mexicanas, however, do not work from a script provided by their employers, but rather from the knowledge they are able to get from their ward. Most often the facial displays women speak about are "smiling." This may mean that workers hide their own feelings (such as anger, sadness, or fear) behind a smiling face so that their wards do not feel badly. Mrs. Lupe says: "In front of her [her ward] I did not show if I was worried about my son who was very ill. They are already badly off and then to add to that, they worry about you. They feel happiness when you have something beautiful." Likewise Mexicanas may simply put on an impassive or serious face (neither smiling nor frowning) to let their wards know that they are "busy" with other tasks. As 37-year-old Patricia, says: "She knows this

face [makes "serious" face]. She knows that's the face I have when I'm trying to finish our chores as quickly as possible. It seems to calm her; it's like she knows that this is my separate chore time, and that I'm not trying to ignore her." Workers argue that they are not "faking" when they put on these faces nor do they succumb to feeling badly if the exterior does not match their interior feelings. Rather a smile or an impassive face is, from many workers' points of view, an expression of compassion and humaneness, and it makes workers feel like "good" persons.

Some workers believe that schooling the expressions on their faces is especially important when helping their wards perform basic bodily tasks such as using the toilet, or alternatively, when changing the diapers of someone who has become incontinent. Workers associate being able to perform these body functions independently as tied to a person's sense of dignity. For example, 54-year-old Margarita says, that she often feels like gagging when she changes her ward's diaper, but would never allow herself to show disgust, because her ward is "innocent," and "frail, like a child." A person who displays disgust, she believes, is "someone who does not care about the feelings of others" and the importance of their emotional integrity. In regards to this she says: "It is not necessary that they feel badly. Also grimaces or yelling are not necessary. If you are at a person's service then you should do it well."

In addition to monitoring their expressions to make their wards feel good, Mexicanas engage in "bodily displays" that are also meant to produce positive feelings in their wards. Displays most prominently refer to dress and grooming and some workers suggest that these are as important as the expressions they wear on their faces. "If you go in without combing your hair, without some color on your face or with dirty clothes, well you can imagine what the other person will think. They will say, this person does not care about her

appearance and much less mine" 51-year-old Ernestina said. Yolanda provided a more concrete example of the effect of soiled clothing on her employer's mood shortly after the birth of her third child. She was lactating and did not notice that "My milk had leaked. Well, *she* did. She told me she didn't like to see that, and that if I were a professional, I wouldn't be wet." The disagreement over her physical appearance was such that Yolanda and her ward were upset with each other for the rest of the day, and at one point Yolanda quit and was rehired again.

Women who work for wealthy wards are particularly conscious not only of good grooming, but also of "style." Mrs. Licha, who works for 92-year-old Laura, says: "I always arrive prepared. For me it is more comfortable to help her if I'm wearing lighter, loose clothing, because one is always moving and getting dirty. But I know she likes to go out, and I bring more appropriate clothing. That way she feels proud of me, and I, well, I feel more comfortable in public." Alternatively, clothing can also serve as a "status shield" (Hochschild 1983), and some workers (particularly if they go out in public with their wards) may prefer to wear a uniform. This status shield helps not only to protect workers but also their wards. For example, 27-year-old Elena describes taking her 79-year-old ward Susan on a small shopping trip in search of a sweater that would match one that had become too old to wear. When, after looking in five stores, they could not find a sage colored, cashmere sweater with leather elbow pads, Susan broke down crying. Elena felt embarrassed, thinking others might assume she was "abusing" her ward. From that moment on she decided to wear a "nurse's uniform" when in public. She says: "It is more practical and people seem to give you more respect if they think you are a nurse. . . and also they don't look at her like she's crazy. They look at me and then they think, the Mrs. needs help."

Other important types of bodily displays that workers use to produce good feeling in wards are what I call "waiting

postures." These include, for example, Mrs. Archuleta's practice of sitting by a bedside, but it also includes the act of providing wards with a modicum of "privacy" while their ward is in the bathroom or in the process of undressing. This may mean looking away or standing outside a doorway, close enough to help if necessary, but far enough away to allow a ward a sense of independence. Waiting postures may also include providing support for wards who need to be fed. This means that workers allow sufficient distance between themselves and their wards (more distance implies that the worker is waiting patiently for her ward to chew and swallow). Moving closer is meant to prepare their wards for another spoonful of food, or to signal to wards that this is the time to ask for a drink or simply to say she wishes to stop eating.

In short, in each of these ways workers school their bodies to produce specific feelings on the part of their wards.

Tone of Voice and Spoken Word

Often just as important as facial and bodily displays are tone of voice or words that workers use to communicate with their wards (Wharton and Erickson 1997: 458). In formal settings, employers often provide workers with scripts that attempt to standardize the quality of interactive service. Workers are told such things as how to greet, how to respond to customer dissatisfaction, and how to end a service encounter. There is often little call for workers to use their own judgment, since "there are rules about everything" (Leidner 1993: 72). In contrast, in private homes, Mexicanas receive no script and use tone of voice and spoken word without employer prompting, to make their wards feel good. Through the conscious control of their tone of voice workers soothe and encourage, and through the careful consideration of spoken words they convey particular feelings and information. As 49-

year-old Consuelo said: "If you take the time, if you give them respect like, 'How are you Mrs. Landry?' [She says this with a modulated tone, with a smile, with happiness.] It's a very different thing than going in there and just starting in."

Language is also one of the areas of greatest frustration for many workers, either because they cannot find placement due to limited English skills or because they are not being able to communicate effectively with their wards. Sandra, for example, relates the story of Annie, her 102-year-old ward who became confused when Sandra asked, "Do you want to go to the bathroom?" Sandra's heavy accent led Annie to misunderstand the question and in a perplexed voice she asked, "Who's the Baptist?" Margarita provides another more sobering example of the need to communicate effectively. Margarita recalls once showing fear when her ward started to have difficulty breathing and required a quick intervention with a mask and oxygen tank. She says: "She became very frightened, so much so that she began to want to cry and scream, and I blame myself for my lack of experience, for not knowing how to speak to her. Now, I don't show her anything, I calm myself immediately, and I begin to talk to her saying things like, 'It's fine Mrs. Cooper, breathe deeply, I'm here with you.'" Thus, the combination of facial displays, tone of voice and spoken word are critical to the work of caring, especially for people who are ill. In fact what Margarita tell us is that the inability of workers to create a feeling like "calmness" in their wards is potentially fatal.

Empathy

Mexicana elder care providers labor in a private home where often the only two people present are ward and worker. Here, the worker is entrusted by an absent employer to care not only for a fleeting interaction, but to care consistently (in

some cases constantly) and over a long-term relationship. In this context Mexicanas think it is necessary to “understand” their wards in order to care for them. For these workers understanding their wards requires that they engage in empathy (the “efforts made to understand others”) as well as the act of “feeling [other’s] feelings as part of one’s own” (England and Farkas cited in Steinberg and Figart 1999: 11). As Margarita most eloquently expressed it, “The worker should analyze at what level of sentiments that person [the ward] is, and take into consideration the human quality of that person.”

Among elder care workers in Santa Barbara empathy means trying to apprehend, not only what their wards feel in the present moment, but also how the present is tinged by the past. That is, workers express that it is necessary to have an understanding of their ward’s life and the history of their physical and, sometimes, mental decline. 33-year-old María makes this point clearer when she discusses the strategy she employs for empathizing with a new ward who is rude: “I start to think, ‘What were you when you were young?’ Most people were something in their lives. . . and then to end up here all wet. When one sees that, one learns to live and have respect.”

This type of empathy, of “knowing” the person diachronically, may begin as simply as expressed by María, by imagining what a person might have been. Over time, however, empathy also involves trying to understand in more detail a ward’s worldview, a person’s way of life relative to their social class (what Bordieu refers to as the *habitus* [Bordieu 1984]); it involves getting to know their history of emotional suffering as a lover, parent, spouse, or daughter/son; and ultimately, it involves getting to know their history of physical or mental illness. For workers who are simultaneously in a position of needing to care while in a position of great social inequality, learning about those elements of life history that are most relevant to their own lives is one way to positively “feel” for their wards and subsequently provide better care.

Habitus

Habitus, the social space of lifestyles, may include distinctions in food, clothing, and leisure activities. Bordieu argues that class position, culture, and education mark one's habitus, which can be analyzed as a set of practices. Among workers and their wards one of the most important elements of this habitus is food.

Wealthy wards try to teach working class Mexicanas about particular types of distinctions in food, and Mexicanas try to learn as a means of providing comfort for their wards. Remy says that Barbara has her go to the "best" gourmet shop in the city and buy her particular types of cheeses, cuts of meat, fresh seafood and desserts. Barbara teaches Remy how to pronounce the food correctly so she may impress the grocer, and she also invites her to eat with her so that she may learn the difference in taste. With this learning and understanding of her ward's habitus, Remy is now able to go to a grocery store and choose things that would have never occurred to her in the past. As she notes, "I would have never thought to buy, for example, a lobster."

Mexicanas also try to understand their ward's food aesthetics, to gain knowledge about what they find pleasing (Devault 1991). Mrs. Archuleta, for example, described using a "nice" plate and presentation because her ward better enjoyed her meals this way. Likewise, Sandra has learned that Annie, her 102-year-old ward, likes small portions of food served on fine china. Sandra believes, in fact, that she is a better caretaker than the "American" nurses who substitute for her on her days off, because she understands this about her ward. She refers to these other nurses as "rough" persons who lack delicacy and appreciation for her ward's aesthetic preferences. Mrs. Sandra says:

She has problems with her digestion, like many people. And so I give her fruit, which she loves, and a special oatmeal first thing in the morning when she wakes up. . . I make it with little pieces of apple and little pieces of prunes. Not a lot, because I don't want her to have diarrhea, but enough to help her digestion and so that she likes the flavor. I serve it to her on a nice plate. Annie won't eat her oatmeal if it is presented to her just like that, the way others [white nurses] do it.

Food in essence permits Sandra to simultaneously care for her ward's proper digestion and show that she emotionally cares by making a simple meal reflect her ward's desires.

This concern by Mexicanas for their wards' personal history and habitus is also apparent in workers' discussion of toilette and clothing rituals. Remy says of her 80-year-old ward: "She loves to take baths, she loves for me to set out clean towels for her, that I put flowers in the bathroom. She is used to a lot of attention, because she has always had a lot of money." A comment made by 42-year-old Celia, on the other hand, reveals a different type of class understanding. Celia says about her 87-year-old ward, "She worked hard all her life, and she told me that although they did not have a lot of money she always tried to keep her clothes clean and ironed. Well, I have a lot of affection for her, and I always make sure my *viejita* [little old lady] is very clean, well combed, and with her clothes well pressed." Thus, in both cases workers imbue physical tasks with meaning: baths become practices which recreate a person's class standing, and clean, ironed clothes become a challenge to stereotypes of what it means to be working class.

Another important part of a person's habitus are leisure activities. Most wards enjoy listening to the radio or watching television, although their class and cultural background helps shape what they will watch or listen to. Sandra, for example, says Annie likes to listen to classical music and as a younger woman would often go to concerts. One evening, Sandra took

it upon herself to sit next to her ward, dim the lights as if they were in a music hall, and remain silent until the "concert" was over. At the end, Annie clapped her hands, delighted with the music, and asked Sandra if she enjoyed the evening. Mrs. Archuleta, on the other hand, says Mrs. Sara, an ex-seamstress, enjoys watching soap operas and commenting on the fashions of younger people. Because she recognizes that this is amusing to Mrs. Sara, Mrs. Archuleta took to commenting on the different dresses, and asking her ward how they compared to those that were popular in her youth. Other workers concur that their ward's hobbies should be understood and be made available to them. Leisure activities are a window into past moments of joy, but also provide a reason for their wards to continue living.

History of Emotional Suffering

Perhaps the most striking aspect of empathy in which workers engaged, was to try to get to know their wards diachronically, by learning their history of emotional suffering as a lover, parent, spouse, or daughter/son. For workers it is almost as if finding a flaw or weakness provides them with the means to better appreciate their wards, to humanize them. As is apparent in Mrs. Archuleta's case Mexican workers have great empathy for wards they consider to have been "abandoned" by their children. But Mexicanas also have empathy for wards who, in their eyes, sacrificed to take care of an ailing parent or spouse or who suffered from the loss of a lover. One of the most moving aspects of women's care narratives, in fact, is the attention paid to the details of their ward's heartaches. Remy says the following about her ward Barbara:

I don't know why Barbara never married, because she was very pretty. What I do know is that when she was young she had a boyfriend she loved very much. He was also very handsome. I saw a photo. They were to be married. . . she had bought the dress and they had decided that they wanted to be married in the garden, everything was very beautiful. And then the fiancée disappeared, and no one ever knew what happened to him. She spent a lot of money to find him, and he was in the newspapers and everything, because he was also very wealthy. But they never found him. And from there comes her sadness. She had many boyfriends but she never married. And that is why I treat her with a lot of love, because I feel a lot of pity for her and respect.

In essence Mexicanas focus on their wards' narratives of suffering as a way to measure their moral worth. "Suffering" gives wards the right and the need to be redeemed by care at the end of their lives.¹

History of Illness or Disease

When engaging in the emotional labor of empathy, workers in essence recognize that their wards' past, imagined or otherwise, "entered into their way of being-in the world" and subsequently elicit this knowledge and "fold" it into their everyday practices (E. Valentine Daniel 1996). Workers attempt to understand a ward's past in order to link it to the onset of mental illness or other diseases. Alternatively, workers simply attempt to understand the "spirit" of the person who was "there" before the illness.

Mrs. Archuleta's care narrative illustrates that she did not have to learn about Mrs. Sara before she became increasingly ill. She was there to see the process of change in her ward. Her ward's dementia made her increasingly nervous and sometimes even hostile; but in Mrs. Archuleta's mind this was

I don't know why Barbara never married, because she was very pretty. What I do know is that when she was young she had a boyfriend she loved very much. He was also very handsome. I saw a photo. They were to be married. . . she had bought the dress and they had decided that they wanted to be married in the garden, everything was very beautiful. And then the fiancée disappeared, and no one ever knew what happened to him. She spent a lot of money to find him, and he was in the newspapers and everything, because he was also very wealthy. But they never found him. And from there comes her sadness. She had many boyfriends but she never married. And that is why I treat her with a lot of love, because I feel a lot of pity for her and respect.

In essence Mexicanas focus on their wards' narratives of suffering as a way to measure their moral worth. "Suffering" gives wards the right and the need to be redeemed by care at the end of their lives.¹

History of Illness or Disease

When engaging in the emotional labor of empathy, workers in essence recognize that their wards' past, imagined or otherwise, "entered into their way of being-in the world" and subsequently elicit this knowledge and "fold" it into their everyday practices (E. Valentine Daniel 1996). Workers attempt to understand a ward's past in order to link it to the onset of mental illness or other diseases. Alternatively, workers simply attempt to understand the "spirit" of the person who was "there" before the illness.

Mrs. Archuleta's care narrative illustrates that she did not have to learn about Mrs. Sara before she became increasingly ill. She was there to see the process of change in her ward. Her ward's dementia made her increasingly nervous and sometimes even hostile; but in Mrs. Archuleta's mind this was

not the "real" Mrs. Sara. This knowledge, as well as the affection she grew to have for her ward, allowed her to more patiently deal with violent outbursts. Yolanda, on the other hand, began to care for 80-year-old Emily long after she had been diagnosed with various serious illnesses, including schizophrenia, irritable bowel syndrome, and depression. She felt frustrated by her inability to "understand" her ward who was very "paranoid" and who because of this had not been able to get along with her previous caretakers. So Yolanda took it upon herself to talk to staff members at the expensive "assisted living community" where Emily had lived, as well as to Emily's private doctor. The amount of information that she obtained was not extensive. She learned that Emily had never married nor had children and that she had worked for the government in some sort of intelligence capacity. Nonetheless, it was enough information for Yolanda to construct or "invent" a history for Emily. Workers need to "know" to care well (they need a reason for empathy) but the details do not all have to be accurate. Yolanda concluded that her ward's illnesses derived from her previous work in the "Secret Service" where "too many secrets caused her to go crazy." With this knowledge Emily's "strange" habits made more sense to Yolanda. She understood that Emily's habits were meaningful to her within this larger history and her actions (unless they were liable to cause harm) should be respected. "Why should I fight her," asked Yolanda, "if she likes to have her maps neatly laid out on the table while she is eating and then locked up in her cabinet when she is done?" As a result of this "respect," in a period of few months, Emily, said Yolanda, "came to trust me and to have affection for me, she was very closed before then."

In short, empathy allows workers to diachronically get to "know" their ward and subsequently "feel" their plight. In so doing workers are able to provide better care because they take into consideration not only physical needs but also the emotional needs of people who are at the end of their lives.

Once workers are able to empathize with their wards they may also make long-term strategic choices for which they are not paid, and which further expand the care routine.

Long-Term Strategic Choices

Once Mexicanas have established a relationship with their ward, and once they have come to feel affection for them they may engage in a type of emotional labor that no other emotional proletarians provide. Private elder care workers make "long-term strategic choices" (Devault 1991) in order to produce good feelings in their wards.

Workers decide whether to include their wards within their family's everyday life, to manage a relationship with an employer for the sake of the ward, and (perhaps the most difficult long-term strategic choice that an elder care worker may need to make) whether to stay on the job until a ward dies. This, like other elements of the work, is skilled labor, involving forethought and communication. But these choices also sometimes "trap" women.

Mexicanas, particularly those who do not live in and who have young children, need to decide the extent to which their ward may form part of their own private, off-work lives. For some workers this involves making a conscious split between the world of work and the world of home. As 31-year-old Teresa said: "I am of the idea that when I go to work I have to forget my personal problems, that I am in another world. And in the same way, when I get home I forget about my work day." For other women, however, such a split is neither necessary nor desirable. Instead some try to join the two realms, explaining that rather than increasing the burden of work, it makes their lives easier. For instance, Remy says: "I have my family and I need to take care of my children when they come home from school. But when she's sick, my family knows that I'll go see

her again, to make sure she has everything she needs." To further cement the tie between her family and Barbara, Remy engages in the emotional labors of planning celebrations on special days, such as Easter, Valentines' Day, Christmas, and birthdays, so that her children and her ward can spend time together. Remy's acceptance of Barbara into her everyday life is clear in the physical symbols of her own home. Among the pictures of her children, her husband, and other family members there are also two side-by-side pictures of Barbara. The first picture is that of her as a very young, pensive woman, beautifully dressed and wearing a hat. The other is a picture of her as she is now: a woman with a wrinkled face, whose penchant for hats is still apparent.

Another long-term strategic choice that Mexicanas may make is whether to manage a difficult relationship with an employer for the sake of the ward. Care, in this sense, may become an opportunity to teach the "correct" way of behaving as a son or daughter by providing guidance. Guidance may involve, among other things, giving verbal direction: "You need to find the time and strength to sit with her." Among workers who have an antagonistic relationship with their ward's children, teaching or guidance may be a way in which they temporarily reconcile their hostility for what they perceive to be the greater good of their wards. Among employers and employees who have better relations, workers may help adult daughters or sons deal with the process of physical and mental deterioration that mark the impending death of their parents. Mrs. Licha said, "I put myself in the place of the daughters and see Mother does not pay attention. But I know that this is normal, and I tell them." In helping their employers deal with the process of their parents' physical and mental decline, workers hope that they will show greater patience and affection towards their elderly wards.

The most difficult long-term strategy undertaken by workers, however, is whether to stay on the job until the ward

dies. In essence, what workers do is accept that another person's life will take precedence over their own plans and needs for an undetermined amount of time. And that in the end the worker, no longer on payroll, will bear the grief of their ward's death. Mexicanas make the choice to stay until the end as a way to provide emotional comfort to their ailing and dying wards; wards who often need reassurance that they will not be left to die in the hands of another stranger or placed in a nursing home. This choice, or promise, is filled with moral quagmires and emotional pain for workers.

Mrs. Licha, for example, promised her 92-year-old ward Laura that she would stay until the end. However, Mrs. Licha was not a live-in worker, and this vow became difficult to keep. Laura had become increasingly frail, and at night when she was alone, began to fall, hurting herself. She would then call Licha for help, but as Licha could not lift her up off the floor by herself, she would need to recruit her eldest son. Licha worried about the bruises on Laura's body, and her inability to provide constant physical care for her. Licha finally decided to call her employers who lived on the east coast, and shortly thereafter Laura was placed in a nursing facility. To this day, says Licha, she is filled with "remorse" and "pain" over her inability to stay and help Laura.

Among the Mexicanas who had seen the death of a ward, employment varied in length from as short as three months and as long as five years.

Conclusion

Globalization has produced growing numbers of "emotional proletarians" in the booming service sector, workers paid to perform not only routinized instrumental tasks, but also scripted emotional labors. As part of their script, the prototypical emotional proletarians of the academic literature

(fast food servers, waitresses, and flight attendants) school the expressions on their faces and modulate their tone of voice, faking feeling. These efforts are designed to make customers feel good and produce profits for corporations. In contrast to these formal sector workers, are private elder care providers who, I assert, represent a new, more flexible type of emotional proletarian. In Santa Barbara, California, elder care workers in the informal sector are not provided with routines; instead they create their own. Moreover, they are not given specific feeling scripts but rather produce authentic emotion in exchange for a wage. Ultimately, elder care providers make their wards feel good, but in more complex and intimate ways than interactive service workers.

For many care providers in the informal sector, work involves constant contact with their elderly wards, and it is in this context that Mexicanas craft work routines that include a broad range of unrecognized emotional efforts. In addition to facial and bodily displays and tone of voice and spoken word, Mexicanas take up the task of trying to “know” their wards. Mexicanas attempt to apprehend not only what their wards may feel in the moment, but how that moment relates to a “total” person, a person with a history of loves, joys, losses and regrets that serve to humanize them. This knowledge may then lead to empathy in workers and creates the basis for authentic affection, which in turn leads Mexicanas to make strategic, long-term emotional choices such as whether to include their ward in their “private,” off-work life, or more poignantly, whether to stay on the job until their ward dies. Thus, emotional labor in the context of elder care involves a long-term commitment to the well-being of another.

The results of Mexicanas’ intentionally performed labors are wards who demonstrate, as much as is possible for each person, not only physical but also mental health. For those who are at the end of their lives, love matters. However, for workers themselves, the emotional and material cost of caretaking is

high. The shift does not end after eight hours, nor do they receive support, training, or supervision from other staff members. Instead, this new category of emotional proletarians labor on their own, stretch the limits of the day, and put their needs on hold, all in exchange for less than minimum wage in a society that begrudges them recognition of their labors.

NOTE

- 1 Ruth Behar (1993) argues that Mexican women's life stories can be understood as narratives with specific processual shifts that include suffering, rage, and redemption. Among Mexicana elder care providers in Santa Barbara there is a similar understanding, one that is then applied to their wards' narratives.

REFERENCES CITED

- Abel, Emily K. (2000). *Hearts of Wisdom: American Women Caring for Kin, 1850-1940*. Cambridge, Mass. : Harvard.
- Behar, Ruth (1993). *Translated Woman: Crossing the Border with Esperanza's Story*. Boston: Beacon Press.
- Blauner, Robert (1964). *Alienation and Freedom*. Chicago: University of Chicago Press.
- Bourdieu, Pierre (1984). *Distinction, A Social Critique of the Judgment of Taste*. Cambridge, MA: Harvard University Press.
- Braverman, Harry (1974). *Labor and Monopoly Capitalism*. New York: Monthly Review Press.
- Chang, Grace (1999). Undocumented Latinas: The New Employable Mothers. IN *Mothering: Ideology, Experience and Agency*, Evelyn Nakomo Glenn, Grace Chang, Linda Rennie (eds.). New York: Routledge, pp. 260-285.
- Chang, Grace (2000). *Disposable Domestic, Immigrant Women Workers in the Global Economy*. Boston, MA: South End Press.
- Chant, Sylvia (1991). *Mexican Women in Cities*. Oxford University Press.
- Chavez, Leo (2001). *Covering Immigration: Popular Images and the Politics of Nation*. Berkeley: University of California Press.
-

- Colen, Shellee (1990). Housekeeping for the Green Card. IN *At Work in Homes*, Roger Sanjek and Shellee Colen (eds.). Washington, DC: American Anthropological Association, p p. 89-118.
- Colen, Shellee (1995). Like A Mother to Them: Stratified Reproduction and West Indian Childcare Workers and Employers in New York. IN *Conceiving the New World Order*. Faye Ginsburg and Rayna Rapp (eds.). Berkeley: University of California Press, pp. 78-102.
- Cornelius, Wayne (1992). From Sojourners to Settlers: The Changing Profile of Mexican Immigration to the United States. IN *U. S.-Mexico Relations: Labor Market Interdependence*, J. A. Bustamante, C. W. Reynolds, and R. A. Hinojosa Ojeda (eds.). Stanford: Stanford University Press, pp. 155-193.
- Daniel, Valentine E. (1996). *Charred Lullabies, Chapters in an Anthropology of Violence*. Princeton University Press.
- Devault, Marjorie (1991). *Feeding the Family*. Chicago: University of Chicago Press.
- Diamond, Timothy (1990). Nursing Homes as Trouble. IN *Circles of Care, Work and Identity in Women's Lives*, Emily K. Abel and Margaret K. Nelson (eds.). Albany: SUNY, pp. 173-187.
- Dill, Bonnie Thornton (1979). *Across the Boundaries of Race and Class: An Exploration of the Relationship between Work and Family among Black Female Domestic Servants*. Ph. D. Dissertation. New York University.
- Dudley, Kathryn (1994). *The End of the Line*. Chicago University Press.
- Enloe, Cynthia (1989). *Bananas, Beaches and Bases: Making Feminist Sense of International Politics*. London: Pandora.
- Fernández Kelly, María Patricia (1983). *For We Are Sold: I and My People*. Albany: State University of New York Press.
- Fernández Kelly, María Patricia, and Saskia Sassen (1995). Recasting Women in the Global Economy. IN *Women in the Latin American Development Process*. Christine Bose and Edna Acosta Belen (eds.). Philadelphia: Temple University Press, pp. 99-124..
- Foner, Nancy (1994). *The Caregiving Dilemma*. Los Angeles and Berkeley: University of California Press.
- Glenn, Evelyn Nakano (1986). *Issei, Nissei, War Bride, Three Generations of Japanese American Servants*. Berkeley: University of California Press.
- Gonzalez de la Rocha, Mercedes (1994). *The Resources of Poverty: Women and Survival in Mexico City*. Oxford: Blackwell.
- Gutiérrez, David (1998). Ethnic Mexicans and the Transformation of "American" Social Space: Reflections on Recent History. IN *Crossings*. Marcelo Suárez-Orozco (ed.). London: Harvard University Press, pp. 307-340.
-

- Hall, Elaine J. (1993). Smiling, Deferring and Flirting: Doing Gender by Giving "Good Service." *Work and Occupations* 20(4): 452-71.
- Hochschild, Arlie (1983). *The Managed Heart*. Los Angeles and Berkeley: University of California Press.
- Hondagneu-Sotelo, Pierrette (1994). *Gendered Transitions: Mexican Experiences of Immigration*. Berkeley: University of California Press.
- Hondagneu-Sotelo, Pierrette (2001). *Doméstica*. Berkeley: University of California Press.
- Ibarra, María (2000). Mexican Immigrant Women and The New Domestic Labor. *Human Organization* 59(4): 452-464.
- Ibarra, María (2003). *The Tender Trap: Mexican Immigrant Women and the Ethics of Elder Care Work*. Forthcoming, unpublished manuscript under review.
- Katzman, David (1981). *Seven Days A Week*. Chicago: University of Illinois Press.
- Lamphere, Louise (1999). Let's Set the Agenda. *Anthropology Newsletter* 4 (2): 7-8. American Anthropological Association.
- Lamphere, Louise, Patricia Zavella, and Felipe Gonzalez (1993). *Sunbelt Working Mothers: Reconciling Family and Factory*. Ithaca: Cornell University Press.
- Leidner, Robin (1993). *Fast Food, Fast Talk: Service Work and the Routinization of Everyday Life*. Berkeley: University of California Press.
- MacDonald, Cameron Lynne, and Carmen Sirianni (eds.) (1996). *Working in the Service Society*. Philadelphia: Temple University Press.
- Mahler, Sara J. (1995). *American Dreaming: Immigrant Life on the Margins*. New Jersey: Princeton University Press.
- Milkman, Ruth, Ellen Reese, and Benita Roth (1998). The Macro-Sociology of Housework. *Work and Occupations*. 25: 483-510.
- Newman, Katherine (1999). *No Shame in My Game*. New York: Knopf and Russel Sage Foundation.
- Parreñas, Rhacel Salazar (2001). *Servants of Globalization: Women, Migration, and Domestic Work*. Stanford University Press.
- Repak, Terri (1995). *Waiting On Washington*. Philadelphia: Temple University Press.
- Rollins, Judith (1985). *Between Women: Domesticity and Their Employers*. Philadelphia: Temple University Press.
- Romero, Mary (1992). *Maid in the U. S. A.* New York: Routledge.
- Ruiz, Vicki (1987). *By the Day or the Week: Mexicana Domestic Workers in El Paso*. IN *Women on the U. S.-Mexico Border*: Vickie Ruiz (ed.). Boston: Allen & Unwin, pp. 44-62.
-

- Sacks, Karen (1988). *Caring By the Hour*. Urbana: University of Illinois Press.
- Salzinger, Leslie (1991). *A Maid By Any Other Name*. IN *Ethnography Unbound*. Michael Burawoy (ed.). Berkeley: University of California Press, pp. 139-160.
- Sanjek, Roger and Shellee Colen (eds.) (1990). *At Work in Homes*. Washington, DC: American Anthropological Association.
- Sassen-Koob, Saskia (1988). *The Mobility of Labor and Capital*. Cambridge: Cambridge University Press.
- Seerey, Brenda L. (1996). *Four Types of Mothering Emotion Work: Distress Management, Ego Work, Relationship Management, and Pleasure/Enjoyment Work*. Ph.D. dissertation, Pennsylvania State University.
- Solorzano-Torres, Rosalia (1987). *Female Mexican Immigrants in San Diego County*. IN *Women on the U. S.-Mexico Border: Responses to Change*. Vicky Ruiz and Susan Tiano (eds.). Boston: Allen and Unwin pp. 41-59.
- Steinberg, Ronnie J., and Deborah M. Figart (1999). *Emotional Labor Since the Managed Heart*. *Annals of the American Academy of Political and Social Science* 561: 8-26.
- Tucker, Susan (1988). *Telling Memories Among Southern Women: Domestic Workers and their Employers in the Segregated South*. Baton Rouge: Louisiana State University Press.
- Wharton, Amy, and Rebecca Erickson (1997). *Inauthenticity and Depression*. *Work and Occupations* 24(2): 158-214.
- Wrigley, Julia (1995). *Other People's Children*. New York: Harper Collins.
- Zlotnik, Hania (1995). *The South to North Migration of Women*. *International Migration Review* 29: 229-254.
-