Thinking it Through
Women, Work and Caring

BY PAT ARMSTRONG AND HUGH ARMSTRONG

Les femmes sont généralement des soignantes. Travail invisible auquel on accorde peu de valeur sauf quand il a la chance d’être reconnu qualifié. L’auteure évoque les forces, les structures et les relations que les femmes établissent comme soignantes tout en sous-estimant leur travail. Elle définit le type de soins à donner, quelle personne donne quels soins, ces données serviront à évaluer les politiques et les lignes directrices afin de repenser l’art de soigner.

The American feminist Deborah Stone, an eloquent analyst of women’s caring, talks about being a “lumper” rather than a ‘splitter’” (91). For “lumpers,” the emphasis is on what is common about women’s work, on what women share. At the same time, there remains in her publications a clear recognition of tensions and differences. Miriam Glucksmann’s revealing analyses of British women’s work speaks of “slicing” data, theory and concepts to create multiple and complex pictures of particular peoples in particular places (16). Her purpose is to look at the various ways work is divided up within what she calls the “total social organization of labour.”

This paper is about both lumping and slicing. It attempts to explore what is common, not only among women but also across time and space. At the same time, it seeks to examine different slices of the same questions. Such slices are meant to help expose the complex and contradictory nature of the concepts we use in considering women’s work and of the current state of women’s work. It assumes that contexts and locations matter, and that while women face considerable pressures from forces outside their immediate control, they also are active participants in shaping their own lives.

Why Lump?

Everywhere throughout recorded time, there has been a division of labour by gender. Every society we know about has defined some work as men’s and some as women’s. And every society we know about has made distinctions between what women can and should do. Women have primary daily responsibilities for children and for the sick or disabled, as well as for much of the other work in domestic domains. They do most of the cooking, washing, cleaning, toileting, bathing, feeding, comforting, training for daily living, shopping and planning for domestic consumption and care. And it is women who bear the children.

This division of labour is combined with a gap between average male and female wages. Jobs mainly done by men pay more than those mainly done by women. Women are much more likely than men to work part-time or part-year and to have interrupted career patterns or casual, temporary jobs. When self-employed, they are much less likely than men to employ others. And much of the work women do pays no wage at all.

Feminists have long been struggling to make the full range of women’s work both visible and valued. Lumping has allowed them to do this. They began in the early 1960s by focussing on domestic labour, understood as the unpaid work women do in households, and by revealing the institutional and social arrangements that combine to produce systemic discrimination in the paid workforce. Initially, the emphasis was on what was termed the reproduction of labour power on a daily and generational basis. This meant having babies and providing for their needs, along with those of their breadwinning fathers. As the research on women’s work expanded, the picture of this work became both more refined and more complex. More categories of work, such as care for the elderly, the sick and the disabled, appeared in the literature. Then this care category, too, was further refined to include care management, assistance with daily living and personal as well as medical care, and it came to be seen as a relationship rather than simply as a work category. Similarly, the picture of women’s work in the labour force was further developed to encompass the detailed division of labour found within occupations and industries.
and the nature of workplace relationships. Within the formal economy outside the home, working in the public sector was distinguished from the private sector, and then this private sector itself divided between the for-profit and the not-for-profit, or what came to be called the third sector. Within this not-for-profit sector, women’s work as volunteers was distinguished from their paid employment. Locations in the underground economy, where women worked for pay as cleaners, prostitutes, babysitters and secretaries, and in formal economy jobs that they did in their own homes, also have been exposed.

Lumping also allows us to explore the social, economic and institutional arrangements as well as the policies and practices that contribute to these patterns in women’s work. But lumping is not only about processes remote from the individual lives of most women, about abstract concepts or far-away decision-makers. It is also about how women’s work is shaped at the level of the hospital, day-care, community centre, clinic, home and office; about the fine divisions of labour; the ways policies are played out in daily lives and the ways women act to create spaces in their own lives or to limit those spaces. So, for example, lumping allows us to ask what kinds of caring work women and men do, and what kinds of government funding support or undermine this work.

Lumping, then, is appropriate because there are so many common patterns in women’s work. Lumping allows us to see what women, as women, share, in terms of the nature of both the work and the work relationships. It also helps us to expose the forces that keep these patterns in place and change them.

Why Slice?

Although there is a division of labour by sex everywhere, there is also no common division of labour across time and space and often not even within countries during a particular period. What is defined and practised as men’s work or women’s work varies enormously, and most cultures have at least some women who do men’s work. Moreover, the actual division of labour can contradict the prescriptions or accepted practices. Equally important, there are significant differences among women related to class, race, culture, age, marital status, sexual orientation and spatial locations, as well as for the same women over time.

Once, those paid to do secretarial and teaching work were mainly men; now, most are women. Those paid as chefs are mainly men, while women do most of the unpaid cooking. However, in Canada at least, if the unpaid cooking is done outside on the barbeque, it is men who do the work, but the unpaid kitchen jobs are still primarily left to women. In the USSR, most doctors were women at the same time as North American medicine was dominated by men. The care provided by women in a Bosnian refugee camp differs fundamentally from that provided in a household in Ottawa’s exclusive Rockcliffe neighbourhood. While care work is women’s work, there are multiple forms of women’s paid and unpaid caring. There are also considerable variations in what is defined as women’s caring work. Our grand-
mothers, for example, did not clean catheters, insert needles, or adjust oxygen masks as part of the care work they did at home.

There may also be large gaps in both places between what women and men think they should do and what they are able to do. There is, in other words, often a gap between practices and ideas about appropriate practices. For example, while most Canadian and British men think they should equally share the domestic labour, there is little evidence that such sharing actually happens in practice. Yet many men who think care is women’s work find themselves providing care for ill and aging partners. Many women who provide care do not necessarily think that it is their job, nor do they necessarily have the skills to do the work. At the same time, many women who think they should provide care cannot do so because they have too many other demands on their time, because they do not have the skills, because they do not have the other necessary resources or because they do not have the physical capacity. Many who do provide care, providing services such as meal preparation, comforting and cleaning, may not even see this as care because it is so much a part of their daily lives.

Not only within countries at particular times, but also within workplaces, there may be significant differences among women. A hospital, for example, may have women working as managers and women working as housekeepers. The managers are more likely to be white, Canadian-born, with English or French as a first language and relatively young, while the housekeepers are more likely to have migrated to this country, to have neither English or French as their mother tongue and to be older than the female managers. And, of course, there are significant differences between these groups in terms of power, pay and ideas about work, and in their political, material and symbolic resources related not only to their positions in the paid work force, but also to their positions in their households and neighbourhoods.

But slicing is not only necessary to draw out the differences related to women’s various spatial, physical, social, psychological, economic, work and age locations, it is also necessary in order to see the different ways of understanding the evidence, different ways of developing evidence and different views on the same processes. It is, for example, possible to look at care from the perspective of the care provider or from that of those with care needs, or to examine care as a relationship. Furthermore, the family as a group may see care issues one way, and the government, the agencies and the paid providers in other ways. Indeed, each household member may have a specific way of slicing the situation. Equally important, the tensions among these may not be possible to resolve but possible only to recognize and handle. By beginning with a recognition of contradiction, by taking this slice, it is possible to base and develop policies and practices that seek to accommodate such tensions rather than setting out single solutions based on notions of harmony.

Analysis can begin from a number of different questions: asking, for example, what does this mean in the short term and what does it mean in the long term? What does it mean for those immediately involved, and what does it mean for the country or the world? It can also begin by acknowledging that some practices, conditions and situations are contradictory. Women, for example, may at one and the same time want to provide care and find it impossible to do so. They may love the person for whom they provide care but, precisely because of this love, hate to provide care.

Slicing can expose the different kinds of care work involved in providing for children with and without disabilities: for teenagers who join gangs and for those unable to attend university because there is no money, for adult neighbours with chronic illness and for those with marital problems, for healthy elderly and severely ill old people. It can also reveal what it means to provide this care at home or in an institution and what different kinds of institutions and homes there are.

It is also possible to begin with quite different purposes. For example, most policies are about helping households and families adapt to the demands of paid work and services. It is also possible, as some Norwegian policy analysts make clear, to start by figuring out how paid work can adapt to family lives (Brandth and Kvande). Instead of asking what resources the growing number of elderly require, the questions could be about the resources they bring and the services they provide. Rather than asking how care can be made an individual responsibility, we can ask what conditions make it possible to care without conscripting women into caregiving.

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**Why Women?**

On the one hand, we have a universal pattern in terms of a division of labour by sex and women embracing caring work. On the other hand, we have an incredible range of labour done by women and defined as women’s work. We also have women resisting caring work. Indeed, American historian Emily Abel argues that some nineteenth-century women “complained bitterly that caregiving confined them to the home, caused serious physical and emotional health problems, and added to domestic labour, which was gruelling even in the best of times” (Abel 5). What factors, ideas, structures and processes contribute to this universality and difference, this embracing and resistance? More specifically, why do women provide the care but in so many different ways? There are no simple answers to these questions. Rather, there are a number of answers that help contribute to a better understanding of care as women’s responsibility.

We do know that only women have babies. But we also know that the meaning, experience and consequences of having babies vary enormously, not only across time and with location and culture, but also for individual women from one baby to another. Having a baby is fundamentally different for Celine Dion than it is for an Aboriginal woman who must leave her northern Quebec community if she is to receive medical assistance. Moreover, there is no necessary connection between having babies and rearing them; that is, to providing care. Bodies, then, are a factor in all of women’s lives, but these bodies themselves are embedded in social, economic and political structures that are continually influencing how bodies work, as well as how they are defined and valued. They cannot provide much of the explanation for why women provide most of the care, not only for the babies they bear, but for other people as well.

Although there is plenty of evidence to suggest that women are more likely than men to identify with the emotional aspects of caring, there is very little evidence to suggest that this is connected to the way women’s bodies or minds are psychologically constructed or that men are psychologically incapable of such caring emotions. There is also evidence to suggest that girls are taught and expected to exhibit such caring, and they are also more likely than their brothers to be assigned the caring jobs in the home. What sociologists call early socialization obviously contributes to women’s skills in and attitudes about care, as well as to their brothers’ notions of who is responsible for care and knows how to care. However, the pressures on women to provide care do not end and perhaps are not primarily created by early learning. Just as children are born and formed within a social context, so too are women carers daily created and shaped within social relationships, processes and structures. At the same time, women are active in creating these same relationships, processes and structures, albeit often from a weaker position than that of men.

**Thinking Globally: The Largest Context**

Globalization has become a familiar term in recent years. While familiar, though, teasing out its meanings and its implications for women in different locations is a complicated task.

Globalization implies a process that is drawing the world and its occupants closer together on what is often seen as an inevitable and undirected path. At the core of this process are giant corporations centered in one, usually Northern, country but operating throughout the globe. These transnational corporations (TNCS) helped create the technologies that have themselves contributed both to the corporation’s multinational form...
and their power. Such technologies make it possible to move money rapidly around the globe, thus allowing these corporations to avoid or at least threaten to avoid any particular government’s taxes and regulations by moving their investments. The technologies also make it possible to move work around the world, thus allowing the corporations to avoid or threaten to avoid demands from workers or restrictions on the use of labour imposed by governments. In order to facilitate this movement of goods, money and work, the giant corporations have been central in promoting what is often called free trade. Free trade is far from new, and traders have always enjoyed considerable freedoms as well as considerable power. It may well be, however, that the speed of transactions has altered along with the size of the corporations directing them. As a result, their power may be greater than ever before.

Instead of combining to resist this pressure, many governments have come together to support the process of achieving greater and easier movement of goods, services and money. At the international level, the First World countries (also called northern, developed or industrial countries) in particular, have worked through the International Monetary Fund, the World Bank and the World Trade Organization to promote the removal of restrictions on trade, a process which entails both deregulation and re-regulation. Countries owing enormous debts have been required to introduce structural adjustment programs that involve the removal of many restrictions on foreign investment and labour practices, as well as the sale of public corporations to private ones, cutbacks in public services and the adoption of market strategies within the public sector that remains. The impact on women has been mixed and contradictory, both within and across nations.

Some women have been able to get new jobs on the “global assembly line,” producing goods and even services previously produced mainly by women in the highly industrialized countries. Precisely because firms have relocated in these countries in order to avoid high wages and restrictions on working conditions, these jobs for women have rarely been good jobs. But they have offered some new possibilities for work, income, shared locations and minimal protections. More common has been the expansion of paid work for women outside the factory walls within the underground or informal economy where few, if any, rules apply. Women have been drawn into small-scale retail and service work, into domestic and homework, or simply into semiclandestine enterprises (see Ward). Here the boundaries between household and formal economy, between public and private space, and between employment time and non-employment time are blurred and protection along with visibility absent. At the same time, the withdrawal of public services has meant that women have had to do more of this work without pay or support within the confines of their private worlds, where the work is less visible and less available.

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In addition to imposing structural adjustment programs on Third World countries (or what are often called southern or developing countries), First World countries have entered into trade agreements that promise to support the movement of goods, services, money and, to a lesser extent, people across borders. This has not necessarily meant less government, but it has meant more measures to allow corporations to operate with less regard to national practices and preferences and fewer taxes or other contributions to national economies. It has also meant less local and democratic control as more decisions are being made by these international trading groups. Facing debt pressures themselves, these countries have adopted strategies similar to those imposed on the Third World. First World countries have acted more like entrepreneurs at the same time as they have handed over more of the services previously provided by governments to private, for-profit firms.

These shifts have had critical consequences for women. The expansion of the public sector had provided many, and often quite good, jobs for women. Indeed, “in 1981, between 65 and 75 per cent of col-
lege-educated women in Germany, Sweden and the U.S. were employed in the "social welfare industries" (Pierson 130). Many of these jobs disappeared or their character changed in the wake of the global reforms. Trade agreements did allow some women to move to other countries in search of work. Registered nurses, for example, left Canada in large numbers when hospitals closed, acquiring jobs in the United States. But those women from Third World countries seeking work in Canada found it more difficult to gain full citizenship status, providing just one example of how free trade has not worked in the same way for everyone.

As public services have declined, more of the services have been provided for sale in the market.

This process, often described as commodification, determines access primarily on the ability to pay rather than on need. More of the women in First World countries, as compared to those in the Third World, have had the means to pay for commodified services. However, women in both Worlds have continued to earn less than men, and women have continued to bear primary responsibility for care and domestic work. Faced with fewer public services and relatively low pay, but still in need of income to purchase these services, women in the First World have sought the cheapest means of paying for care or other supports. These means have often involved the even poorer women from the Third World. This is not to suggest that most First World women have completely escaped unpaid work or that the majority of women could afford to pay for services. Indeed, the reduction in public services has meant that a considerable amount of this work, formerly done by women for pay in the market, is now done by women without pay in the home. In other words, it has been decommodified but not eliminated. Rather, it is to stress the linkages among women created by globaliza-

tion and the growing gaps among women that these linkages often entailed.

Globalization does not simply refer to economics, however. It also refers to the ways people, ideas and cultures are brought closer together around the world. This has, in many ways, meant the spread of First World, and especially U.S., practices. Along with music, movies, fashions and food have come ideas about all aspects of social life, including women's work. This dissemination of ideas is also linked in many ways to the corporations, both through their ownership of companies that produce these goods and through their influence over the media. In these global sources, the emphasis is increasingly on the individual as a consumer with choices being based on the capacity to purchase. Like the relocation of jobs, the spread of ideas is a mixed blessing. On the one hand, feminist ideas have spread rapidly around the world. On the other hand, the First World version of feminism is what has spread most rapidly, and this version too often fails to take context and difference into account.

This notion of shared international perspectives is not particularly new. Indeed, after the Second World War there was much talk of a postwar consensus. This consensus was based on a commitment to expanded government-provided services to a mixed economy that combined public and private enterprise, and to policies of full-employment along with sustained economic growth (Pierson 125). Redistribution of goods and services was part of the package, as were collective responsibility and shared risk. Now, this consensus seems to have fallen apart, only to be replaced by a new, and quite different, one. Public rights are replaced by private ones, with markets rather than states as the preferred means of allocating jobs, goods and services. But markets are unable to respond to many human needs and are especially ill-equipped to promote equity and full employment or to avoid long-term problems like pollution or other health consequences. Instead, they result in greater inequality, especially for women. As British theorist Ian Gough puts it, "Markets paradoxically require altruistic, collective behaviour on the part of women in the household in order to enable men to act individualistically in the market" (16).

Globalization has allowed much more than money, people, goods, and services to move quickly around the world. Diseases, too, face more permeable borders. New epidemics, such as HIV/AIDS, are transported along with old ones, like tuberculosis and hepatitis, around the globe with relative ease, transported in and by airplanes, as well as by service workers. Increasing inequality, not only in the Third World but also in the First, encourages their development and prevents their treatment. Diabetes has become much more common, especially among marginalized groups in large urban centres and on reservations. At the same time, protections under free trade rules for pharmaceutical patents frequently leave treatments beyond the reach of many.

One way, then, to slice globalization is to reveal the increasing dominance of transnational corporations, the converging of governments
around market strategies, the declining democratic controls and the growing gap for and among women. Another way to slice it is to expose the counter tendencies. The same technologies that support corporate power allow various kinds of social and labour movements to organize around their interests. We see evidence of this not only in the "battle of Seattle" and in the streets of Quebec, but also in the Beijing Conference on Women that reached a consensus around means of promoting women's equality and in the attempts to protect sweat shop workers encouraged by the success of Naomi Klein's book No Logo. The movement of people around the globe has meant that many of us are more familiar with other cultures and practices.

We also see counter tendencies in the escalation and power of terrorism. Although many governments have adopted strategies taken from the for-profit sector, there is still an incredible variety in the ways these governments operate. Important public programs that reflect a continuing commitment to social rights and collective responsibility remain in many countries. Others have taken a route that emphasizes family values while still others have turned to religion and ethnicity. Moreover, the trade alliance among members of the European Union has served to improve working conditions for many women and help improve services for others. Instead of de-regulation, we see on occasion the extension of regulation. Britain, for example, has been required to provide protections for part-time workers and to introduce both minimum wage and equal pay legislation, all of which improve women's market jobs. Several countries are resisting the high drug prices that prevent them from treating mothers with HIV/AIDS, a sign that not all countries are willing to put property rights above people's right to life. And perhaps most importantly, there is ample evidence to demonstrate that spending on social programs can enhance rather than prevent trade, and that gender-based analysis linked to effective programs is essential to economic development.

Contradictions within global developments, as well as those among particular kinds of developments, are important in understanding where and how change may occur or is occurring. It is equally important to examine the details of how global agreements and patterns are played out within specific locations, because practices may well defy or transform intentions.

In short, globalization is about processes that result from actual decisions and practices rather than about forces beyond human control. While there is strong evidence to demonstrate that corporations are powerful players that are often supported by governments, there is also evidence to suggest that there are both limits on this power and contradictory patterns. There are choices to be made. These choices can have important consequences for women and their work and have to be considered in developing strategies for care.

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