

Immigrant women who look after other women's children, and in doing so, neglect their own.

A Global Heart Transplant

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Submitted: December 30th 2009

There are some topics that usually get written off because they are considered to be either a minefield of stereotypes (feminist claims), easily manipulated (immigration), or not worth discussing at all (housework). The combination of these themes can be explosive because it highlights something that is rarely brought up in debates about immigration: the care children and the elderly receive in First World countries is given at the expense of immigrant women who stop looking after their own children in their countries of origin.

This is the complaint Arlie R. Hochschild makes in her recent book, *The Commercialisation of Intimate Life: Notes from Home and Work*. She brings a new form of colonialism to light: the unnoticed extraction of a great wealth, namely the care immigrant women from Third World countries are paid to give at home in capitalist countries. In contrast with others before it, this new wave of immigration is made up of women and represents around 51% of the immigrant population in OECD countries. Millions of women leave their homes and their children to find work thousands of miles away as caregivers for children whose mothers have chosen to enter the workforce. As one of the most prestigious sociologists in the US and around the world, and as a specialist in 'second wave' feminism, Hochschild explains the situation with a poignant metaphor: 'we are faced with a global heart transplant (GHT)'.

The ones left behind

Although several of the essays in this book discuss themes related to care (and always do so from within a North American capitalist framework), it is the fourth chapter that has caused a stir among various feminist circles. On the one hand, care has become increasingly associated with feeling 'stuck' and left out of society, especially among women. On the other hand, Hochschild suggests that it is vital for a social and ideological revolution to take place in order to reevaluate 'caregiving as much as market success.' (21)

Is this yet another modern utopia? The difficulty in this reassessment is apparent when we consider how readily the developed world has accepted this global heart transplant: it alleviates the threat of an aging population and promotes a more economically active society (more mothers who choose to work outside the home). This position is obviously defended with humanitarian arguments: these jobs provide families in the global South with more money, enable them to improve the health and education of their children. Furthermore, these countries

are not losing their intellectual capital, they are witnessing the migration of cheap manual labour (even though some of these women have university degrees – from Third World universities, that is).

Nevertheless, if we consider a specific example, such as Ecuadorian migration to Spain (which is similar to the Philippine migration to the US Hochschild examines), all justifications fall through. The migration of women from Ecuador who leave their children behind leaves in its wake an increase in suicides among the youth of the country; seven out of every ten children leave school without having completed secondary school, and, if that were not bad enough, unwanted teenage pregnancies become more frequent when parents are substituted by grandparents. It is clear that the care the global North exports creates a vacuum that the global South does not have sufficient resources to fill.

Against primitive feminism

However, simplifying the question and falling into a geographical Manichaeism that condemns the 'bad' North and defends the 'good' South, would be another mistake. Over a century ago, for example, Italians, Chinese and Japanese people flocked to South America; now the flow is in the opposite direction. Immigrants look for a rich country, where there are jobs, because the problem they are running from – the real injustice – is the poverty in their own country, which seems to go hand in hand with corruption, poor administration and a lack of opportunities. It is well known that governments often drag their feet when it comes to established mechanisms for debt forgiveness because they refuse to be forced to invest in education and healthcare, yet they continue to invest in weapons and bureaucracy.

Having made this clear, we must resume our point. If we continue with the global heart transplant metaphor, we can see how a destitute immigrant woman, the heart of her home, painfully inserts herself into a capitalist society. She works as a caregiver for children and the elderly who are not her family in exchange for a high wage that is still not high enough to allow her to be reunited with her family. It is a startling contradiction of primitive feminism: how can developed countries justify their demand of domestic labour when their women have abandoned it? Hochschild is scathing in her criticism: 'it is good for two women to work for a salary, but for two women to give everything up to work is something good that has gone too far.' (p. 74)

An Ethic of Care

It is evident that primitive feminism is to blame for the fact that people have gone too far (rather than on the immigrant women, whose circumstances and willingness to suffer for her family force her hand). Feminism's struggle for equality centred on economic power and access into the work force has assumed, as if by osmosis, some of the negative capitalistic and liberally

individualistic elements that were already in the system. Rather than humanising men, feminism made women more materialistic, and rather than enabling men to participate more in family life, the context in which this would have been possible – the home and the work that goes with it – was stripped of its value.

Little by little, it has become apparent that the war is not being fought in Wall Street, but in the residential streets of Manhattan. What is more, the lethal weapon, the value given to care, seems harmless. However, a new wave of feminism has discovered this contradiction and has raised its voice. Faced with a view that men and women are merely rational, autonomous and independent beings, this new wave promotes an ethic of care. Care necessarily implies an attitude of concern in the carer and a state of vulnerability in the person who is being cared for. Wherever there is a need – and here we are also referring to physical and everyday needs – there is room for a caring and humane response, as well as a technical one. We are neither supermen nor superwomen; we are vulnerable and we need to be cared for by others in order to develop as human beings. This is precisely what GHT reveals.

Within this context, the home can constitute every human being's first social network and his first source of humanisation, so long as the caregiving activities that strengthen it are promoted. Doing things together, such as eating meals or carrying out physical tasks (cooking, cleaning or decorating together etc.) constitutes a service to the individual that cares for their physical, cultural and even spiritual well-being. When this network is broken – as is the case with immigrant women who are deprived of direct contact with their children – essential elements of our identity are also broken. We might be familiar with some of Hochschild's suggestions against this break: an increase in male involvement at home, family-friendly work policies... However, the most radical suggestion, and the most difficult to implement, remains 'giving caregiving greater social value'. (213)

Mind and Hand

Women in the global North are very aware of the fact that we need ordinary care, even if only as an unusual postmodern taboo. In fact, what many women ignore is that this taboo is a prejudice of that same culture which defines man from a rationalistic paradigm. Thus the revolution Hochschild proposes must also be an ideological revolution: we either defend the rational, free (human) and relational (social) characteristics of daily manual labour and embrace how crucial they are, or we lose the battle. Other recent works, among them Richard Sennett (2) and Matthew Crawford (3), have started to voice this view.

Sennett's book, *The Artisan*, opts for incredibly humane theses: knowing how to do things well and doing them for the sake of the pleasure one gets from doing things well is a simple yet rigorous rule of life that has allowed very refined techniques to evolve and develop. Carpenters, jewellers and craftsmen of

musical instruments have always combined their knowledge and manual skills in a symbiosis between mind and hand that has strengthened the synergy between theory and practice. Repetitive manual tasks become a source of knowledge. Moreover, they cure a disease that permeates our culture: the misguided thirst for perfection driven by technique.

Crawford confronts the same theme from classical and Aristotelian principles. In addition to being a philosopher, Crawford is a proud motorcycle mechanic, convinced of the intrinsic relationship between his brain and hand, the practical rationality of what he is doing, his ethical dimension and his worth in generating a narcissistic culture focussed on the self.

In both cases, the defence of manual labour is presented as a challenge for our rationalistic culture (a culture that identifies humanity with abstract reason), for our capitalist society (a society that absolutises the economic value of a product) and for our individualistic existence (an existence that rejects all forms of service). We must neither confuse what is human with what is rational, nor knowledge with theory. There are many different ways of obtaining knowledge. Manual labour can be a form of knowledge, although when it is, it often presents itself as a hidden knowledge. It may be difficult to transmit, but it should not be considered nonexistent or inhuman for it.

The apologetics for manual labour, and specifically for everyday care, should not be a lost cause: our physical needs deserve a rational, free and empathetic response that might also be labelled 'professional'. It is a challenge our culture must face without further hesitation. Feminists are very aware of it: first wave feminists, who hire immigrant women to take care of their children, and second wave feminists who deplore this global heart transplant. It is a good point to consider.