

*Gendering “The Stranger - “The one who comes today and leaves tomorrow”*

*East – West Integration in Europe: A Polish – Italian Example*

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## *Gendering The Stranger*

### *Abstract*

The aim of the paper is to contribute to a further development of feminist and social theory related to research on global care chains and processes of commodification of care in international markets. The paper introduces sociological theory on migration and the complex meanings “The Stranger” has as a social role in different contexts. The paper argues that the substance in role of the stranger is negotiated in local situated contexts between social actors in different positions. By using an empirical example from a study of a Polish – Italian immigrant network in Sicily, the author illustrates how a domestic maid tries to re - negotiate her job instruction and how the participators interact as embodied, ethnic, class and gender specific members of the local community they live in. Their life biographies include experiences and emotional maps of senses and bodily images. Human bodily fluids are not detachable from people’s identities and body image is the effect of embodied social relations. How the participants’ situated knowledge and imaginations, as related to social stratification patterns and gender ideologies in the Italian welfare state and global markets, are in focus of the discussion.

**Key words:** Feminist theory, intersectionality, intercorporeality, social theory, situated knowledge, situated imagination, global care chains, bodily disgust, gender, migration, strangers, global health

Feminist perspectives: Embodiment and situated knowledge

Today it is more and less accepted that science is *in*, and not above historical and cultural processes. In contemporary feminist social and cultural research social constructivism may be based on experiences from the researchers own life in combination with fieldwork and participant observation. Donna Haraway’s engagement with feminist critique of science and Sandra Harding’s (1993) work on standpoint theory has led to a radical and politicised feminist critique. Haraway (1992) have encouraged feminist researchers to reflect upon how and if the production of science can serve to maintain hierarchical structures not only within science, but also within the scientific practices that affect those concerned. Participants in research projects might be understood, willingly or unwillingly as research “objects” whether these are nature or

people. The ways of producing knowledge are manifold and is not separated from the social relations and ideologies in societies or in research communities they are a part of. Knowledge production involves considerations of gender, class, ethnicity, location and race and awareness of how these aspects are or become a part of knowledge production. The specificities of the lived lives of researchers themselves and individuals and groups in research focus are combined in the production of the end results known as scientific conclusions or results.

Situating knowledge production recognizes science as culture. Culture are created in intersectional dynamic processes and the complexity in social patterns of meaning should be revealed. This imply a change in the understanding of culture from having been understood as vertical forms of meaning to be seen as horizontal understandings of meaning (Chodorow, 2001) Cultures are increasingly understood as complexities lived and constructed in the body and minds of particular gendered human beings. And as Stoetzler and Yuval – Davis (2002) argue, imagination needs to be understood as situated as much as knowledge does.

### Globalization

By using gender as a lens, I want to examine some common conceptions of globalization. Labonte (2003) discuss how globalization affect people's health and bodies and he points to how economic growth, poverty, inequality and the sustainability of our environment is lived daily and experienced as local situated individuals. Many people seem to associate globalization with images of high – profile business travel and video – conferences. But the large numbers of people moving around the globe, are in fact women participating in the up – speeded global distribution of care work. In these processes there exist a global hierarchy of care which give health gains for those higher up the social ladder while health risks accumulate for those lower down (Hochschild, 2001, Spitzer, 2002).

In global villages social institutions like families, nation states and local and global markets are changing and affected by what sociologists have named and defined as *crisis of care* (Hochschild, 2001). Local systems of care are no longer sustainable. International structural processes seem to have disruptive affects on care as culture and work. One response is that women from poorer countries find jobs as domestic workers in richer countries and send much valued currency back to their left behind families. Some women leave small children behind and send money to another woman taking care of her care responsibilities while she is abroad. It might create a job for a worse off village woman who again leaves her children to look after other children and their families. This is

what Hochschild (2000) calls *global care chains*. What on the surface might look as a win-win situation (rich people have money – poorer people find jobs) may have health damaging effects for those on the bottom which cannot be seen as local problems anymore since health risks and diseases do not respect borders.

#### Locations of knowledge production: Care crisis and gender ideology in the Pilati family in Sicily

In the period from 2002 to 2005 I participated in a Polish –Italian immigrant network in a coastal town in Sicily. Most of the participants were professional health workers like doctors, nurses, dentists and nannies. In the later periods of my fieldwork, the trans European buses from Poland increasing brought passengers looking for live- in domestic jobs. My key informants (the Pilati family) was one of the local families that hired one of the newcomers to take care of an elderly help dependent aunt. She (hereafter: aunt Pippa) was 88 year old and bedridden with cancer and incontinence. Her sister had died some months earlier with a similar medical diagnosis. The sister was the mother of the middle aged siblings (Rita (sister) and Nick (brother) in the Pilati family). The family women (Rita and her sister-in-law) had taken care of her on shifts. Nor brothers, sons or grandchildren had shared the shifts with them. The family saw the care problems as “women’s problem”. But one of the grand daughter was a university student in Rome. The other worked in restaurants at nights as a musician (violinist) in the tourist industry. None of them were available for night shifts in the family’s care work obligations. The family women took on the extra loads of care burdens, but added to their paid work in the market and unpaid domestic work in their own homes, it had been an exhausting experience. Both of them had gained weight, got sleeping problems and marital conflicts. The hiring of live-in care worker can be understood as a protection of their bodily and mental health and as a strategy to maintain the internal harmony in their family systems of gendered labour divisions.

#### Commodification of care and the relation to international institutions like the EU/ IMF/ WTO and The Catholic Church

From the Italian welfare state the family received a cash allowance of 400 Euro a month. They could pay someone to do the care work or keep the money and take on the extra burdens themselves. But the value of local domestic work must be seen as related to international institutions like European Community politics, the World Bank and the International

Monetary Fund. Payments in Euro is “gold” compared to Polish zloty for instance.

In the particular setting the care crisis was solved within, the tradition of hiring external help from neighbourhood women was still alive. Poverty problems had made it necessary for many local poor women to work as maids. Up to the 1980thies the supply of care workers had been sufficient. But changed economic conditions and increased female integration in the labour market, the pool of available care workers had evaporated. In the 1990thies women mainly from Ukraina and Rumenia came to find jobs in Italy. Poland is among the sending countries and in 2005 64.000 stay permits were given to Polish people (Nere, 2006) Most of them are women employed in private households as care takers for the elderly and children and as cleaners. The Catholic Church holds a strong and unquestioned position among the local people. Religious ideas about “the sacred family” and the moral quality in the “mother and child dyad” are accepted and integrated. However, the Catholic Church is an international institution playing an active role in immigrants life and affect their situated imaginations about the dignity and decency of their work.

Sharing of housework between men and women was a non- question. Men in the community rather took on a second job if the family got money troubles in stead of letting his wife work. The Italian gender models are according to Andall (2000) based on variations of masculine dominance and feminine subordination as married housewives. In the Pilati family the daughter Rita had a full time position in the welfare office. Her brother worked in the county administration as a book keeper. He had a second job as a musician (piano and guitar) in the tourist industry. Most of the work was done late at night and because of cardiological problems he needed someone to carry the instruments. In the internal culture of the family all agreed that “one works and 3 eats.” Even if the housewife took on paid jobs in the informal sector and both grown up children had own jobs ( the son lived in Milano and played in a rock group) they saw themselves as a family provided for by the father. Their situated imagination of themselves as a decent family implied a knowledge that the local culture of care attached stigma to families not taking care of their elderly. Lack of gender equality in domestic work was explained as “a question of masculine honour and family decency”. To keep up the image of being a normal family, the middle aged mothers and women worked in paid dayshifts and unpaid night shifts.

Studies of how local care deficits in private family households have been solved by employing women from poorer countries, have described the

care workers working conditions. Transnational care workers in domestic spheres work long hours, overtime and night shifts without pay and many of them lack basic working life rights ( Anderson, 1999, Parrenas, 2001, Hochschild, 2001, Hovdan, 2005). How one experiences the employment relationships in paid care work, have been less focused.

## The Story

The narrative this story is a part of was told to me from the position of by the employer. She is herself an immigrant (from Norway) and she is the daughter-in-law in the family. She is given the role as the instructor and monitor of Bine's work.

After having hired a Polish woman named Jacobine (hereafter: Bine) in her early 50thies to take care of aunt Pippa, the Pilati family was satisfied. To find her they went by car to a catholic church in a neighbour village to a house for homeless women. East- European women looking for jobs lived here. Families in need of temporary care workers used the church as a labour agency because "the strangers" were cheaper and (according to local gossip) and "respected the elderly more than local Italians do".

The priest had a reputation for being "clean" which means he did not take bribes like expensive whisky or Cuban sigars. Besides, they had assured the Pilati's that all her papers (stay and work permit) were OK. The Pilati's chose to believe him and after a short meeting between her and aunt Pippa they decided to hire Bine.

The perception of the care worker as a person of only temporary interest is a central norm. The care worker is "A Stranger" and the job description attached to the role is linked to the history of how local culture has solved care problems by employment of poorer women being "the other".

However, there is an important difference. Local women lived home in their own families. Their intimate experiences and knowledge of sickness and processes of dying were shared in the community. Global maids are live-ins and are without the protection of having their own people to go home to after work. When they leave the community, their knowledge of the status of others and own individual health disappears with them.

But as a Polish care worker put it : "After three months of domestic work we are tired and need to restore our psyche" (Nere, 2006). She is referring to the fact that many works on tourist visa and have to leave after three months for some time and then come back again for new three months.

Bine, after having worked a couple of months, wanted to renegotiate her job instructions. Aunt Pippa's incontinence causes problems for her. She

has to walk with her to the bathroom several times each night. The aunt is heavy and overweight. Bine thinks the lifting and helping in and out of bed several times a night as “too heavy for her”. She wants to do more housework during day time in stead and asks for permission to use incontinence diapers. She thinks diapers will give both of them a more stable sleeping pattern.

Helene Pilati (hereafter: Lene) discuss the idea with the rest of the family and their doctor. The doctor thinks diapers will worsen aunt Pippa’s sore skin problems in the behind area of the body. Rita thinks aunt Pippa’s dignity is at risk. They decide that use of diapers will have negative medical effects and harm the patient’s social and mental dignity.

Their situated imagination from the hegemonic centre of the family plays an important role in their conclusion. They share an image of aunt Pippa’s “sivilized dignity” as better taken care of when she can use the toilet in stead of diapers. Even if they can use their “common reservoir of memories” (Marcuse, 1969 ) from their night shifts with Pippa’s sister and how tired and exhausted they felt, Lene and Rita felt they had to protect the aunt’s human dignity and feeling of having control over basic bodily functions. By protecting her, they protect themselves as carers in the family and concensus is restored.

The discussion of the aunt’s dignity did not include talk about the bodily fluids in question. The smells, sounds, needs for help to use toilet paper or the bidet (clean the urological area having urinated) was the “invisible imaginations” in the situation. These images construct the implicit meanings of importance of female dignity. Walks to the bathroom included use of nightgown covering the body. Diapers would expose a kind of nakedness one usually associate with helpless children. Risks of infantilization and exposed nakedness of the sexual areas of the body was not communicated issues in the negotiation. Bine hope to change her working conditions did not succeed 100%. But since the women could understand her exhaustion a wheel chair with a toilet seat was brought into aunt Pippa’s bedroom and replaced the walks to the bathroom at nights. Bine was disappointed and Lene called up another “polish” (Sonya) in the margins of the family network. She was married to a male cousin and as a skilled nurse’s assistant she had worked with cancer patients in Poland before she married Mario. Lene instructed her to explain for Bine that Bine was employed because of the night shifts and all the work caused by the incontinence. That is “what the “Polish” women do as domestic helper here” was the message Lene gave Bine through Sonya. The language in Lene’s story about this negotiations express a local categorization about domestic maids as ethnic categories. Bine is “polish” and it is her “polish – ness” they are paying for because ( they think) it implies night work and intimate knowledge about elderly people’s bodily

needs. This cultural essentialism is combined with gender essentialism in their creative imaginations. Lene's images links practical knowledge to Bine as a middle aged woman. The medical expertise is brought into the negotiation as a legitimization of the employer's refuse to use diapers. The old body is kept "clean and covered" as the local norms expect from an old civilized woman. The employer's use of another Polish immigrant working as a neighbour hood care worker, but paid by the hour, strengthened her powerful position. The re- writing of Bine's job instructions gave her some benefits. The wheel chair reduced the lifting problems and as such improved her working conditions. But it did not change the night shift. Her image of herself as a paid worker able to change her working conditions is creative and makes it clearer for the participants in the negotiation what one's expect from a person doing the "polish" work. Seen through an empowerment lens, she brings to the table an image of "the Polish" as traders and service producers. She, as a "stranger" in the local community, is expected to produce a service the locals demand. The Pilati family's care deficit have a differentiated character. The well established system of hiring poorer wives from the neighbourhood as night shift workers becomes a service and a commodity one can buy from global markets.

#### "The Stranger" in sociological theory

"The Stranger" is according to Georg Simmel a social form that is included in social groups the same way as poor people and other human beings one likes to think as having a marginal position.

"The Stranger" is a part of a collective's culture of immanence in the sense that there will (always) be human relations which condition is a mobile spatial life and the symbol of mobility is the cultural significance of the human relations the stranger is connected to.

The Stranger is "he who is close by, but far, and strangeness means that he, who is also far, is actually near." The Stranger is a very positive relation and it is a specific form of interaction. Usually the stranger is related to economy. Simmel writes:

"As long as economy is essentially self sufficient, or products are exchanged within a spatially narrow group, it needs no middleman: a trader is only required for products that originate outside the group." (Simmel in Wolff, 1950:402)

#### The social logic

The stranger is a merchant that comes today and (may) leave tomorrow. If nobody in local families find jobs outside and/or in other cities, "The Stranger" would not be of interest. A chain reaction is that through trade

(migration to sell care services) come new possibilities and a production of new lenses to value local systems of care and how they for instance affect the care workers health and bodies. In this case Bine as “the Polish” made it clear for the family that nights shifts including a lot of personal care work for an incontinent person was too hard work for one middle aged woman alone without assistance. (In Norway care workers in public sector work two and two when caring for bedridden incontinent persons).

Economic aspects and situated image production

Simmel’s discussion of the stranger is based on the fact that tradesmen could not buy land and be local tax payers. This would imply a total shift from being stranger to be a “local”. Local gossip in Sicily about how young east European women came to Italy to work for terminally ill and single elderly men in hope for financial inheritance was related to a fear for the “strangers” to get land and rights as “locals”.

Simmel thinks it is the *money* that is exchanged in the employment relationship that defines the role as temporary and nomadic and determines it’s formal status. Being a *paid* care worker implies a connection to the process of commodification of care. “The Stranger” is a service producer selling a commodity. She has an unwritten market contract and works in the sub-systems of local family institutions. She “replaces” the “dutiful daughter” and helps families keep up an image of decency. She sells images of “decency” and “dignity”.

Globalization’s impact of care work. Intensification of global stratification systems based on race, class and gender.

The “objectivity” of the lens of “The Stranger” is a particular combination of intimacy and distance. It brings to the social group new perspectives.

The Polish maid in the Pilati - family wanted to reduce her night shift. The disappointment Bine must have felt when receiving the denial to use diapers is a feeling she has to deal with on her own. By asking *why* she had to take on the personal care work in the night, she made it visible the family members how much their own income depended upon the service Bine provided. Expansion of the tourist economy and harder working conditions for local musicians because of arrival of cheaper artists from former east European countries, meant longer working hours (more jobs) for less pay for the Pilati musicians.

The new job flexibility and diversity of income sources made it necessary for the family to buy a live-in night shift worker available also in day time for aunt Pippa.

## New working conditions – new stratification patterns

Being a middle aged mother to 3 grown up children (and grand mother to two children) the energy of Bine's body has ecological limits. The knowledge the Italian family expects her to have is seen as "a natural part" of her as a woman. It is "naturalized" and gendered. "The Stranger", says Simmel, is mirroring ourselves. By hiring a white, married, middle aged and heterosexual woman and mother, Bine represents an image that "in our family we take care of the elderly ourselves". In fact, Bine has to act *as if* she is not a stranger, but perform her role as "polish" in the "Pilati way". She has to be a creative actor in her image production, and is instructed to mirror the culture of the Pilati family. The night shifts and the "dirty work" – burdens related to aunt Pippa's loss of control of bodily functions – is outsourced from the family. The political dimension in Bine's reaction is that she went to her employer and wanted to negotiate. The suppressive aspect is that she was alienated though the categorization of her as "polish worker" not as Bine. She violated the image of the Pilati family as a "family" when she forced them to see themselves as service consumers. Her emotional frustrations became a problem for Lene to solve. The siblings, Rita and Nick, were not the front line workers and their powerful position as cash managers and employers was protected by the *status shield* Lene gave them. (Hochschild, 1983). Bine's feelings of exhaustion and tiredness was not supposed to be visible since her role was to act as a professional night worker. But Lene and Rita hoped that the wheel chair with a toilet seat could improve her working conditions and prevent harmful anger and frustrations that could reduce the quality of care they wanted to buy from Bine.

The knowledge attached to the role as "polish maid" was expected to be included as a "free gift" creating meaning and harmony in the Pilati family. The emotional work as a "dutiful daughter" ( the role Rita had for Pippa's sister ) has become a burden for the women in the family and aunt Pippa's needs are taken care of, but buy a commercial care service. Pippa is taken care of and Bine is paid for. An instrumentalization process of care and emotions is emerging.

The new moral order in the family seem to consist of a vertical and intergenerational female solidarity. Masculinity cultures are not challenged in the Pilati family. Rita and Lene, as middle class women, solve "their" care deficit problem by the hiring of Bine.

Pippa died some weeks after Bine had tried to renegotiate her job instructions. She went home to Poland. If she, as other Polish women came home as tired and exhausted women looking for possibilities to rest

and restore the psyche before she went back to new care worker jobs, is an open question.

## Conclusion

Combining feminist philosophy and classical social theory seems to be a fruitful way to develop empowering perspectives into the debate of how globalization can be embodied. The bodily dimensions of the work that are sold and bought in global care chains have been undercommunicated. It is evident from my account that the sharing of “dirty work” reveals complex meanings of body related care. Problematic and stigmatized fluids questioning the civilized nature of one’s social identity and issues of dignity is a part of all the work that now is outsourced from families and local communities. The loss of intimate knowledge about processes of dying and terminal care is one important loss. Another is the emotion work and feelings of humiliation and stress among live-in care workers and how experiences are written into their bodies as gender and class problems. Feelings of disappointment and stress has a power dimension and a gender dimension. The concept of intersectionality opens up for inclusion of more complex dimensions like sexuality, race and ethnicity. Intercorporeality perspectives creates a space for discussion of how social and cultural meanings of bodily tissues and fluids affect the organization of care and division of labour. Being seen as “strangers” bring into further feminist discussions an image of global women as professional service producers participating in global markets and all the new complexities that comes with it.

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