Body Work

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Migration and bodies are linked: it is embodied persons who migrate, and who experience gains and tragedies in embodied forms. Our bodies are physical, biologically-based entities, but they are also our way of being in the world and of experiencing ourselves, other people, and the world around us.

Gender analysis has for some time challenged taken-for-granted notions about migration, but we often forget how closely the roots and consequences of gender ideology are linked to gender-infected racist assumptions about bodies. The lens of embodiment brings out starkly the intractability of the issues facing migrant women, whose paid work is frequently limited to forms of intimate ‘body work’ on and with other people’s bodies (Wolkowitz et al., 2013). The consequences include not just the low wages but the vulnerability – sexual and otherwise – of employment in socially and physically isolating work.

Paid ‘body work’ focusing on the bodies of others includes work in hospitals, nursing homes and crèches, as well as care work in people’s homes, where it blends almost imperceptibly into the defined tasks associated with paid domestic work, pictured quite explicitly in the housewifery training given to Indonesian women before they travel to work as maids in the Gulf, as documented by Susan Meiselas’ photographic essay Costly Dream, produced in collaboration with Human Rights Watch (www.hrw.org/features/costly-dream). Migrant women are also recruited into household ‘body work’ through highly commodified forms of marriage.

The constructions of bodies which tie women to most forms of ‘body work’ (and excuse men from participation) can be understood in several ways. There are economic reasons why migrant women are sought out as cheap labour in modern economies. The focus of much reproductive work on human bodies is consequential for how it is organised and the downward pressure on wages (Wolkowitz et al., 2013). Not only is it labour intensive (one person can work on only one body at a time, so economies of scale are difficult), it also has to be performed in the presence of the recipient, so exporting it to lower-wage economies is not an alternative. (The bodies of consumers can travel abroad, as in the case of sex and medical tourism, but this is never going to be sufficient to deal with the care crisis in the global north nor day-to-day reproductive work.) Moreover, employers have few incentives to invest in a higher paid labour force: ‘body work’ output cannot be stockpiled, nor resold at a profit, and customers are state agencies, insurance companies and families seeking substitutes for their own unpaid childcare or care of the elderly.

There are also important cultural assumptions about bodies which render men less suitable for intimate work than women. The ideological roots of racialised migrant women’s association with reproductive labour go back to the Victorian age and beyond. Bodies, especially if they are naked or vulnerable, are coded as feminine, linked to nature, emotions, something to be exposed only in private. Moreover, the construction of male bodies as sexually predatory means that both men and women often prefer to be attended by women.

Below these everyday, relatively conscious assumptions, some argue that the ‘leakiness’ of the human body is a source of unconscious anxiety, especially for men (Widding Isaksen, 2002). Bodily fluids are cast out of consciousness because they trouble both the boundaries of the body and of those of social groups and categories: identity, system and order, as the French psychoanalyst and writer Julia Kristeva puts it. There is considerable tension between the demands of ‘body work’ and the construction of men’s bodies as dry, solid, firm and contained.

However, these psychoanalytical readings rarely recognise that, as Brigitte Anderson stresses, our understanding of the body is deeply racialised. From slavery onward, forced and voluntary migrants have been involved in ‘body work’. Anderson (2000) argues that the relationship between ‘hatred of women … hatred of the body … and hatred of racialised groups … is played out in the use of racialised female labour to do the work of servicing the body and in the treatment of domestic workers by their employers’. These assumptions also play out in sex work, and in other workplaces (nail salons, spas) where migrant women’s body labour is at risk of being read as sexual, the more especially when undertaken by racialised women whose bodies are already coded as particularly sexual (Kang, 2010).

Not all features of ‘body work’ are negative, especially as it provides opportunities for highly skilled migrant workers in, for example, medicine, dentistry and nursing. Some intimate ‘body work’ takes place within satisfying long-term, caring relationships - although these may lead to exploitative fictive kinship relations, reliance on gifts rather than proper wages, and incursions into workers’ own time and bodies. The cared-for also have different experiences of bodily interaction. The experience of being ‘cleaned up after’ may confer ‘a certain magical weightlessness and immateriality’ (Ehrenreich, 2003) on
the employer, epitomised in beauty salons, where workers are obliged to defer to clients in ways that sustain both the enchanting myth of customer sovereignty and racialised and classed hierarchies. On the other hand, working with low-status clients does not enhance the social power of the ‘body worker’: caring for ageing, ‘leaky’, and disempowered bodies seems only to stigmatise those who care for them.

Gendered and racialised assumptions about bodies also play out in understandings of men’s bodies. For instance, South Asian men building the facilities for the 2022 World Cup in Qatar face appalling working conditions. Neglect of male workers’ health and safety is connected not only to migrants’ disposability, but also to particular understandings of male bodies (vigorous, capable, and offering, rather than requiring protection) that have long justified employers’ shrugging off responsibility for male workers’ safety.

References