

# Femininity and Carework

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## » Care and Femininity

- \* In our contemporary society, care is deeply linked to womanhood and femininity
- \* “[M]uch feminist work so far on the economics of care... risks implicitly reinforcing an association of care with only women and with only women’s traditional activities.” (Nelson 2016)
- \* “The strong association between femininity and care for others has a long cultural and intellectual history...the links between femininity and care create significant economic vulnerabilities ” (Folbre 2018)
- \* Is there any correlation between femininity and working in care occupation? Can we conceptualize care without gender-essentialist assumption of femininity?

## » Defining Care Work

- \* Activities in which concern for the well-being of the care recipient is likely to affect the quality of the services performed in interaction” (Folbre 2012)
- \* Occupations providing a service to people that helps develop their capabilities (England, Budig, and Folbre 2002)
- \* Nurturant care vs. “reproductive care,” i.e. activities that ensure the daily maintenance and reproduction of the care recipient (Budig, Hodges, and England 2019).
- \* Common consensus: homemakers, nannies, domestic workers, kindergarten teachers, primary and secondary school teachers, primary healthcare providers, senior home attendants, therapist.
- \* Ideal care workers: kind, warm, nurturing, soft-spoken, devoted, compassionate, emotional sensitive - *characteristic that constitute the feminine as such.*

## » Sex, Gender Identity, Gender Expression

- \* Sex refers to biological differences among females and males, such as genetics, hormones, secondary sex characteristics, and anatomy (Haig 2004)
- \* Gender refers to cultural meanings ascribed to or associated with patterns of behavior, experience, and personality that are labeled as feminine or masculine (IOM 2011).
- \* Gender identity refers to a person's internal sense of being man, woman, transgender, or another gender.
- \* Meaning of feminine/ masculine/ androgynous gender expression (through appearance, dress, style, mannerism) is socially assigned and time-variant (Wylie et al. 2010)

## » Femininity and Gender Inequality in Care

- \* Women bear a disproportion share of both unpaid and paid care work.
- \* Globally, women are responsible for two-thirds of paid care work and three-quarters of unpaid care work.
- \* In the US women are more likely than men to provide care for household and non-household members, and spend twice as much time daily on activities that involve caring for others (Folbre 2018).
- \* Burden of unpaid care work also constrains women's participation in the formal labor market.
- \* Why aren't more men interested in doing care work?

## » Femininity and Gender Inequality in Care

- \* Insofar as femininity is coded in providing care, workers who are feminine will be more likely to sort into care occupations while masculine workers will avoid care occupations (Akerlof and Krampton 2004)
- \* Women are more likely than men to prefer career opportunities that helps others (Fortin 2008); Women are reluctant to apply to high-tech jobs because of high identity costs (Carpio and Guadalupe 2018).
- \* Employers seeking applicants with stereotypically masculine traits (e.g. aggressiveness, assertiveness, decisiveness) are likely to discriminate against feminine applicants (i.e. gay men) (Tilsick 2011).
- \* Feminist care theories inadvertently perpetuate the belief that doing care is not natural for masculine-gendered people (Nelson 2016).

## » Femininity and the Care Wage Penalty

- \* Care workers receive lower wages compared to similar workers in non-care occupations and non-care industries.
- \* Under heteropatriarchal norms, feminine characteristics receive lower monetary returns than masculine characteristics (England 1992, Mandel 2013).
- \* Femininity is associated with deference, non-aggression, and valuing emotion over material rewards. Wage bargaining is seen as antithetical to the spirit of care and the value of femininity (Folbre 2018).
- \* If care work provides the opportunity for workers to perform femininity and have their femininity valued (even without economic returns), this could be an intrinsic, non-pecuniary reward and a compensating differential for lower wage (Goldin and Katz 2016).

## » Femininity and Intersectionality

- \* Feminization of care was traced to the birth of capitalism, Western modernity, and Victorian "separate sphere" ideology in the 18th and 19th centuries (Nelson 2016)
- \* However, care privileges not just any kind of femininity, but a particular form of femininity that is "both white and Eurocentered, grounded in the colonial/modern gender system" (Lugones 2007).
- \* The figure of an "angel in the house" was not meant for every woman, but specifically an upper-middle-class, ethnically European woman (Barker 2012).
- \* The possibility of being a caring, dutiful homemaker remained out of touch for a large number of women that there had to be public campaigns on "female reform" in the US 19th century (Glenn 2010).
- \* The aspiration for women to become a full-time caretaker was always a deliberate, top-down transformation - what feminists have called "the cult of true womanhood" (Barker 2012).



## » Femininity and Intersectionality

- \* The identification of femininity with kindness, emotion, feelings, and compassion also erase the history of slavery and racism.
- \* By the standards of the 18th and 19th century, black people were not human, and black women were not women. Their racialized bodies served as the material Other, over and against which white femininity were constructed (Spillers 1987; Hartman 2016).
- \* The domestic space of the white plantation was the same space where black slave women were subjected to brutal violence and domination, some of which came from the hand of the white mistress (Glymph 2008).
- \* Even today, Black mothers are caricatured as irresponsible, lazy welfare queens, and black and Hispanic women are over-represented in “dirty back-room jobs” including maids, janitors, cleaners, kitchen workers, and nurse’ aides (Glenn 1992).
- \* To the extent that care is associated with white femininity, this might have exclusionary effects on BIPOC workers.

## » Taking Stock

- \* Hypothesis 1: Feminine workers, regardless of biological sex and sexual orientation, are more likely to work in care occupation
- \* Hypothesis 2: Femininity has negative interactive effect on Black and Hispanic workers
- \* How do we measure femininity without conflating with sex and sexual orientation?

## » Measurement framework

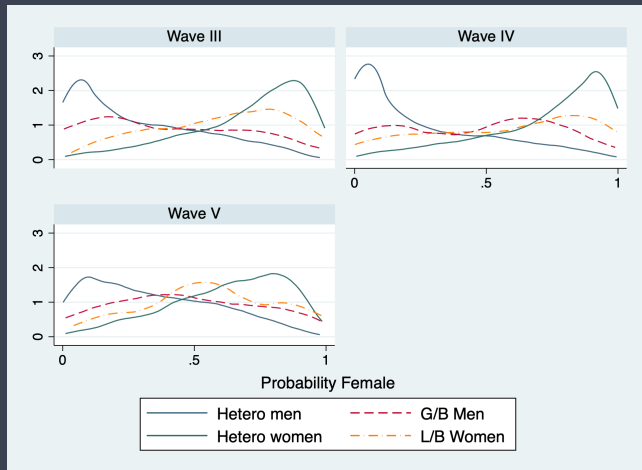
- \* Traditional techniques, e.g. Bem sex-role inventory, self-reported scale, etc. contain heteronormative assumptions.
- \* Gender performativity paradigm: masculine and feminine behaviors are observable outcomes of individuals doing genders (West and Zimmerman 1987, Butler 1990)
- \* Gender diagnostic techniques: compare individual's behaviors, attitudes, and activities relative to how most of their peers behave, without presupposing what feminine/masculine behaviors look like (Cleveland et al. 2001; refined by Fleming et al. 2017).
- \* Burn and Martell (2020) use this to measure adherence to gender-typical norms (gender typicality); Campell, Badgett, and Brennan (2021) report evidence of labor market reward (penalty) for masculine (feminine) gender expression.

## » Gender diagnostic model

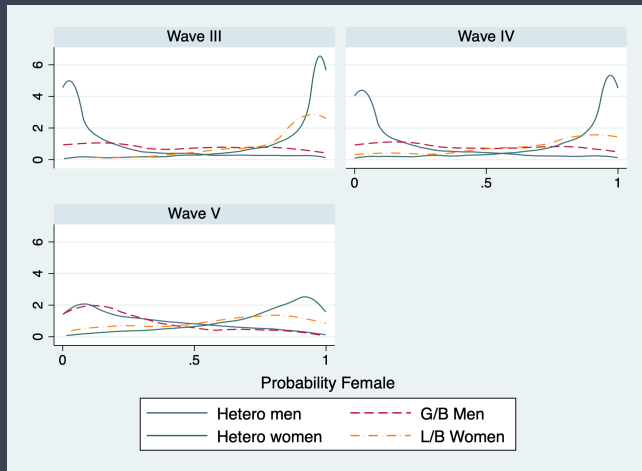
$$\text{Female}_i = \alpha + \beta_1 X_1 + \beta_2 X_2 + \dots + \beta_n X_n + \epsilon_i$$

- \*  $\text{Female}_i$ : an dummy indicator that takes value 1 if respondent's sex is female, and 0 otherwise
- \*  $X$ s: Vector of predictors including preferences, opinions, and behaviors
- \* AddHealth data: survey of US adolescents in grades 7-12 during the 1994-1995 school year, with subsequent interviews as the cohort mature into adulthood, Wave III - Wave V (2001, 2008, 2017, aged 18-40)
- \* Fitting models: OLS, stepwise backward logit, cv-lasso logit, rigorous cvlogit
- \* Predicted value is measure of gender expression (higher value = more feminine)

## » Visualization



## » Visualization



## » Summary Statistics

Variable	Straight men	Bi/Gay men	Straight women	Bi/Les women
Age	26	27	26 <sup>†</sup>	27
Feminine score	0.19	0.37*	0.84 <sup>†</sup>	0.75 <sup>‡</sup>
Partnered	0.44	0.20*	0.52 <sup>†</sup>	0.42 <sup>‡</sup>
Have children	0.36	0.06*	0.50 <sup>†</sup>	0.35 <sup>‡</sup>
Race and Ethnicity				
White	0.78	0.76	0.78	0.84
Black	0.16	0.17	0.17	0.13
Asian	0.03	0.02	0.03	0.01
Hispanic	0.10	0.20	0.11	0.14
Education				
High school or less	0.34	0.26	0.24 <sup>†</sup>	0.37 <sup>‡</sup>
Vocational training	0.13	0.09	0.10 <sup>†</sup>	0.13
Some college	0.34	0.33	0.40 <sup>†</sup>	0.35
Bachelor degree	0.13	0.24*	0.17 <sup>†</sup>	0.10 <sup>‡</sup>
Graduate degree	0.06	0.08	0.08 <sup>†</sup>	0.05 <sup>‡</sup>
Employment	0.83	0.82	0.76 <sup>†</sup>	0.80
Annual earnings	38,261	35,509	29,385 <sup>†</sup>	26,907
Working in care	0.07	0.11	0.30 <sup>†</sup>	0.16 <sup>‡</sup>
Observations	6,158	182	7,397	297

## » Regression model

$$\text{Care}_{ij} = \alpha + \beta_1 \text{Femme}_{ij} + \beta_2 Y_{ij} + \beta_3 \text{Femme}_{ij} * Y_{ij} + \theta X_{ij} + \epsilon_{ij}$$

- \*  $\text{Care}_{ij}$ : binary indicator whether person  $i$  from school  $j$  is a care worker
- \*  $\text{Femme}_{ij}$ : standardized feminine propensity score
- \*  $Y_{ij}$ : indicator for race/ethnicity or for being lesbian, gay, or bisexual
- \*  $X_{ij}$ : demographic controls at individual level (age, age squared, race and ethnicity, education attainment, relationship status, parental status, physical health, physical heights and weights, religiosity)
- \* School fixed effect, interview wave fixed effect, separate regression for males and females



## » Regression result: Female worker

N = 5,153	(I)	(II)	(III)
Femininity score	0.022*** (0.006)	0.023*** (0.006)	0.026*** (0.007)
Lesbian or Bisexual	-0.080*** (0.029)	-0.082** (0.032)	-0.077*** (0.029)
Black, non-Hispanic	0.005 (0.027)	0.005 (0.027)	0.004 (0.027)
Asian, non-Hispanic	0.015 (0.048)	0.015 (0.048)	0.007 (0.049)
Other races, non-Hisp	0.006 (0.045)	0.006 (0.045)	0.002 (0.047)
Hispanic, non-White	0.008 (0.039)	0.008 (0.039)	0.006 (0.039)
Femininity * Lesbian/Bisexual		-0.004 (0.020)	
Femininity * Black			0.001 (0.014)
Femininity * Asian			-0.041 (0.027)
Femininity * Other races			-0.031 (0.038)
Femininity * Hispanic			-0.037 (0.026)
Constant	-0.359 (0.252)	-0.359 (0.252)	-0.357 (0.253)
R-squared	0.10	0.10	0.11

Cluster-robust standard error in brackets. Data is unweighted. All estimations include individual-level demographic controls, school fixed effects and wave fixed effect.

## » Regression result: Male worker

N = 4,578	(I)	(II)	(III)
Femininity score	0.004 (0.004)	0.003 (0.004)	0.007 (0.005)
Gay or bisexual	0.026 (0.031)	0.021 (0.030)	0.026 (0.031)
Black, non-Hispanic	0.029* (0.017)	0.030* (0.017)	0.030* (0.017)
Asian, non-Hispanic	0.017 (0.024)	0.017 (0.024)	0.016 (0.024)
Other races, non-Hispanic	0.038 (0.025)	0.038 (0.025)	0.036 (0.025)
Hispanic, non-White	0.035* (0.018)	0.035* (0.018)	0.034* (0.018)
Femininity * Gay/Bisexual		0.009 (0.014)	
Femininity * Black			-0.009 (0.009)
Femininity * Asian			-0.020 (0.016)
Femininity * Other races			-0.027 (0.021)
Femininity * Hispanic			0.008 (0.022)
Constant	-0.084 (0.156)	-0.086 (0.156)	-0.077 (0.156)
R-squared	0.09	0.09	0.09

Cluster-robust standard error in brackets. Data is unweighted. All estimations include individual-level demographic controls, school fixed effects and wave fixed effect.

## » Some (preliminary) take-aways

- \* Even though care is feminized and women have a disproportionate burden of care, not all care workers are women
- \* Femininity is correlated with working in care occupations for female workers but not male workers
- \* Races and Sexual Orientation also seems to play a role
- \* Robustness Check: Categorical regressor; Ever working sample; Nonlinear effect

## » Deconstructing Gender from Care

- \* Genders are multi-dimensional and complicated - in context where gendered norms and expectation matters, controlling for sex might be biased.
- \* For a less-/non- gendered concept of care, we should look to practices and knowledge from the queers and trans community
- \* Care is a survival response to violent abandonment; an urgent and necessary dependence on the Others who show up in the wake of profound physical, emotional, and psychological trauma (Malatino 2020)
- \* Thinking about care differently also helps broaden the scope of our political and activist alliance - abortion provision as care, abolition as care, affordable housing as care, etc.

# Thank you!



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