

Sarah Allen, Shirley R. Klein, and E. Jeffrey Hill

Framing Carework Context, Processes, and Outcomes

Everyday, prosaic processes of work in the home have remained unexplored in the research and theory about family life because of their taken-for-granted, mundane, and pervasive nature. Likewise, major gaps about mothering exist in terms of experiences and activities, social locations, and structural contexts. These contexts, processes, and outcomes of carework in the home warrant a more central position in our research and theorizing. This paper situates a process-oriented model of care within existing research and theory related to invisible family work and caregiving. The model identifies a number of contexts and processes that influence individual, familial, and societal outcomes as a theoretical basis for expanding our research and theorizing on invisible family carework. Perhaps most importantly, however, this model draws our attention to a variety of processes embedded in everyday home life that require significant amounts of time, energy, and emotional investment that have previously been overlooked as components of family carework.

Family scholars Sarah Allen (2005) and Kerry Daly (2003) assert that many of the everyday, prosaic processes of work in the home have remained unexplored in the research and theory about family life because of their taken-for-granted, mundane, and pervasive nature. Likewise, Terry Arendell (2000) identified major gaps about mothering that exist in terms of experiences and activities, social locations, and structural contexts. These contexts, processes, and outcomes of carework in the home warrant a more central position in our research and theorizing. This will help us understand care as a process that is created, negotiated, and sustained over the life course. A process orientation may help scholars see carework as a pragmatic practice rooted in and focused on what individuals do, the unique ways they fail and succeed, and the tensions and

paradoxes they experience. This creates a theory more congruent with everyday experience and challenges abstract ideological viewpoints as well as nostalgic musings about carework in the home.

The objectives of this paper are: (a) to situate a process oriented model of care within existing research and theory developments relating to invisible family work and carework and (b) to embed the every-day processes of carework within their logical contexts and outcomes. It is important to note that it is beyond the scope of this paper to address all the contexts, processes, and outcomes related to carework. Clearly, less optimal processes occur. As Juhani Pallasma (1995) and John Rennie Short (1999) note, home can also be a place of abuse, exploitation, and violence as well as a place of love, protection, and order. The processes we are suggesting in our model can be negatively or positively enacted in numerous contexts.

Theoretical perspectives

Symbolic interaction and gender theory provide useful framing concepts for our model. Symbolic interaction is useful because it emphasizes experience, agency, action, and the intersubjective process of creating meaning. This makes the fluid and dynamic nature of how roles, self-identity, and family identity are negotiated within the processes of carework more evident. Margie Edwards (2004) suggested that symbolic interaction is a useful framework for exploring carework because of its emphasis on personal definitions of the situation, social structural conditions, socio-historical and geographical contexts, cultural identity, individual interpretations and interactions, social position, and ongoing inter-subjective negotiation processes.

The theory of gender utilized in this paper is rooted within a social constructionist paradigm and is situated within three specific domains: gender roles, “doing gender,” and the social reproduction and production of labor. Family studies scholars Greer Fox and Velma Murry (2000) position gender roles within a larger framework of socially prescribed expectations and ideological assumptions about who does what in regards to household and community responsibilities. Like Scott Coltrane (1989) and Candace West and Don H. Zimmerman (1987), Fox and Murry explain that “doing gender” suggests that men and women overtly and covertly evoke, create, sustain, and differentiate gendered identities as men and women by doing and not doing certain aspects of family work. Further, Fox and Murry clarify the daily social interactions involved in “doing gender” that operate on a micro level within the family that also inform, create, and sustain much larger structures of power and privilege, maintain a variety of community and social institutions, and reflect many of the daily constraints within which men and women “do gender.”

The theory of gender is a useful framing concept in that it allows one to be attentive to the ways in which men and women “do family” and “do gender” through the daily processes of carework.

Literature review: Invisible work

Margie Edwards (2004) argues that historically, domestic life was considered irrelevant to academic inquiry because it was associated with the private sphere of women. Feminist scholarship called attention to the types of activities, processes, and work done in the home where women predominated and made that work more visible. The earlier work of Arlene Kaplan Daniels (1987) and Susan Leigh Star and Anselm Strauss (1999) noted that processes of family carework are devalued because it is unpaid, unprotected, unsupervised, and unregulated.

Arlie Hochschild (1983) called invisible work “emotion work,” and Rebecca Erickson (1993) identified other labels such as “emotional sustenance,” “social emotional role,” “expressive role,” “mental hygiene function,” “therapeutic role,” and the “stroking function.” Brenda Seery and M. Sue Crowley (2000) identified additional terms such as “carework,” “interaction work,” “sociability work,” “kin work,” and “household management work.” Regardless of the term utilized, invisible work is most often conceptualized as the less tangible work that women do in addition to the tangible and measurable child care and housework tasks. These activities are difficult, if not impossible to quantify or measure precisely because, as Jacquie Swift (1997) noted, they often do “not result in a durable, tangible, or measurable product” (352) although they take considerable time and energy. Examples of invisible work abound in the literature, and scholars Andrea Doucet (2000, 2001), Edwards (2004) and Seery and Crowley (2000) included processes such as remembering, worrying, planning, juggling, strategizing, making practical decisions, arranging and scheduling tasks necessary for household maintenance, regulating time, funds, and attention, and organizing and integrating family schedules. Earlier work by Daniels (1987) explained that this work is difficult to see because it is private, personalized, customized, and involves processes of continual monitoring, specialized catering, restocking, improvising, adapting, tailoring, and persistent effort and skill. Doucet (2000) explained that although men have increased the amount of time they spend doing household chores, women still tend to do the bulk of household work and continue to be primarily responsible for the management, planning, organization, and supervision of housework and child care related activities.

In addition to the invisible work required for the family’s physical maintenance, effort is also expended in constructing and maintaining family relationships and optimizing the family’s emotional and psychological well-being. Doucet (2000) and Edwards (2004) explained that this type of invisible work involves the often spontaneous, informal, and unregulated emotional work invested in the ability to see or hear the needs of others, to take responsibility for them, and negotiate if and how they should be met, and by whom. According to Daniels (1987) it is the less visible components of family work that are deeply embedded not only in the social construction of daily life, but also in the maintenance and development of institutions. The

goal of this paper is to disembed what has previously been deeply embedded within the daily processes of family life in order to make it more visible and to expand the traditional conceptions of this type of work.

The need to reconceptualize and broaden how we think about and study family work to include the less visible spatial, temporal, relational, and emotional carework men and women do within and without of their homes is an assertion that is congruent with other research by Allen (2005), Daly (2002), Hochschild (1983), and Helen Mederer (1993). Doucet's (2000) work on gender, domestic responsibility, and community argues that family life is social, and is, therefore, located in the broader social world of relationships extending beyond the private realm of home. Thus, processes of home need to focus on the permeability of household boundaries and explore the linkages between the family and the wider institutional arena of the community. As Doucet (2001) and Myra Marx Ferree (1990) noted, family work connects economic and kinship structures within and between households and institutions. Unfortunately, family work is usually operationalized as labor that occurs within, rather than between or among homes. Doucet's assertions are congruent with Helena Znaniecka Lopata's (1993) and Anita Garey, Karen Hansen, Rosanna Hertz, and Cameron Macdonald's (2002) argument that a false dichotomy of the public and private realms not only artificially confines care within the boundaries of the private realm, but also ignores the continuum of social relations found within the intersections of family, community, and institution that are embedded in daily life. The traditional public/private dichotomy, therefore, prevents scholars from seeing many of the acts men and women do in the public world as family carework that is important to the whole society. Lopata (1993) coined the term "sphere binding" as a way to conceptualize family carework and allow for a continuum of involvement for both men and women at many levels ranging from private to public.

Doucet's research (2000, 2001) found that women assume all, or almost all, of the inter-household, inter-familial, and inter-institutional responsibility for carework. They initiated, planned, organized, and managed most of the short, medium, and long range planning of interactions between households as well as between households and other social institutions such as schools, work places, hospitals, child care centers, and grocery stores. Robert Putnam (2000) noted that the benefits that come from the trust, reciprocity, information, and cooperation associated with social networks illustrate the value of the role women play in building these networks in their community. Reconceptualizing carework to include these invisible dimensions of managing time and space both within and without the physical residence would broaden the ways we think about carework. It would recognize the time, energy, imagination, money, resources, skills, emotions, and work mothers invest that have remained unexplored in the literature.

Caregiving

In some respects carework and invisible work are overlapping concepts. Like invisible work, carework has an emotional aspect, is hard to see and measure, is most often linked to female roles, is dichotomized in ways that are usually not helpful, and suggests linkages beyond the household. Though sometimes used interchangeably, the terms carework and invisible work are distinct. Carework implies a specific type of invisible work, one that is most often tied to reciprocal interaction between maternal home roles and similar roles in the workplace.

Although the issue of care is complex in nature and difficult to conceptualize in a bounded way, Paula Dressel and Ann Clark (1990) identified several distinguishable features of carework that are relevant to the discussion of a model of contexts, processes, and outcomes. Francesca Cancian and Stacey Oliner (2000) suggest that caring is a focus on both the physical and emotional work of caregiving—both *caring about* and *caring for*. A working definition for carework, therefore, is “feelings of affection and responsibility combined with actions that provide responsibly for an individual’s personal needs or well-being, in a face-to-face relationship” (2). Paula England, Michelle Budig, and Nancy Folbre (2002) and England’s later work (2005) showed that carework also extends from private to public spheres and includes work done in the market for pay as well as in the home. Mary Zimmerman, Jacquelyn Litt, and Christine Bose (2006) noted that carework has global implications. According to Cancian and Oliner (2000), in these private, public, and global spheres, family members construct meanings about *good* care that fit their cultural backgrounds and social positions. Michael Bittman and Nancy Folbre (2004) and Folbre (2005) also noted that another feature of carework is that it is considered a “public good,” that is, goods that have diffuse benefits that cannot be restricted to those who pay their price. When parents care for children they create public goods because this socially productive work yields benefits to others. Folbre (2005) explained, “Some of these benefits are intangible, such as our collective sense of pride in a new generation of citizens. Other benefits are quite tangible, such as the taxes that today’s children will pay” (355). A model of care needs to account for feelings, actions, and conceptions of “good” care, both in and outside the home.

Sociologists Paula Dressel and counsellor Ann Clark (1990) pointed out that a variety of motives underlie acts of care and over time shifting cognitions influence behaviours. It is helpful to think of these motives in terms of who benefits and what purposes are served. Dressel and Clark report finding that acts of care are often motivated by needs of the caregiver rather than the care receiver. Acts of care that appear to be expressive (phoning or playing) instead may be instrumental to meet one’s own needs. Dressel and Clark refer to C. Wright Mills’s (1940) seminal delineation of motives: integration (reflected in statements about maintaining the family unit or marital dyad), control (influencing a family member to behave in a certain manner), and specifica-

tion (reflective of family relationships such as “mothers are supposed to do things like that with children”). The goal of this paper is to understand care and the reasons for caring behavior over time and at discrete points. Reasons may be influenced by different contexts, the interaction among contexts, and between processes.

Dressel and Clark (1990) and Viviana Zelizer (2002) warned that conceptions of caregiving may be misunderstood or prematurely reified because of persistent dichotomizing. Assumptions about family care seem to proceed from assumptions of dichotomy: women are expressive, emotional, sentimental, and home-oriented, while men are instrumental, rational, and work- and goal-oriented. Care is routinized in terms of household work or tasks, child care and kinkeeping or care is stressful in terms of caregiving, social support, or assistance. There are costs and burdens associated with carework versus attitudes and feelings of caring. According to England, Budig, and Folbre (2002), these persistent dichotomies are rooted in schemas about gender and motherhood that come from culture. Dichotomized thinking is not helpful as we explore new ways to provide adequate care in a changing environment. Contexts such as higher rates of women’s employment have resulted in less carework in the home and more in the marketplace. Recognizing these changing contexts would extend conceptualizations of caregiving.

Carework in the home needs to acknowledge the shifting fulcrum of care from home to market. This shift highlights the tensions that affect caregiving in our social and economic environment. Suzanne Gordon, Patricia Benner, and Nel Noddings (1996) commented on the desire to be freed from caregiving burdens and how this flight makes the provision of caregiving all the more burdensome. They believed that this makes it almost impossible to engage in meaningful dialogue about how to pool resources to fund systems of care delivery in the home, community, or public sector. Public policies surrounding carework have evolved with little consideration of the impact for family life and thus impose significant constraints on individual choices. As we dichotomize care and the market economy it is tempting to think of caregiving as a non-economic commitment, but the public good created by raising children and caring for others is crucial to economic growth. The organization of carework and its relation to the market economy is crucial for all of society but an in-depth discussion is beyond the scope of this paper. Our concern is that conceptions of care recognize the economic context.

England (2005) suggested five theoretical frameworks that have been developed to conceptualize carework. The “devaluation perspective” argues that carework is badly rewarded because care is associated with women and often women of color. Cultural biases limit both wages and state support for carework because cultural ideas deprecate women and by cognitive association devalue the work typically done by women. The “public good” framework points out that carework provides benefits far beyond those to the direct recipient and suggests that the low pay of carework is a special case of the failure of markets

to reward public goods. While there is only indirect evidence and no direct evidence of the central claim of this framework (i.e., fertility, education), the framework is still used to interpret policy implications of wage penalty for motherhood. The “prisoner of love” framework argues that the intrinsic caring motives of careworkers allow employers to more easily get away with paying careworkers less. Instead of seeing the emotional satisfactions of giving care as its own reward, the theory of compensating differentials offers a more correct explanation—employers will have to pay more to compensate for non-pecuniary amenities, all else equal. If marginal workers see intrinsic properties of work as an amenity, this permits a lower wage. The “commodification of emotion” framework focuses on emotional harm to workers when they have to sell services that use an intimate part of themselves and/or when they are required to alienate services from personal true feelings, display feelings they do not actually feel (i.e., flight attendant being cheerful), or feign love for someone else’s children (nanny). The “love and money” framework argues against dichotomous views in which markets are seen as antithetical to true care. This framework makes the assumption that profit and self-interest rule in the market while caring values rule in families. Some argue that extrinsic rewards crowd out intrinsic motivation; psychologists argue that individuals find autonomy and self-esteem inherently rewarding. Would real care be drained out of the workers by high pay? These five theoretical frameworks for carework suggest the need for a broader social, economic, legislative, community, political, and familial context within which to situate the everyday processes of carework.

The social constructionist approach to family carework offers several more insights for consideration. Family members hold to idealized notions of family care, even as they report situations fraught with ambiguity, negative thought or affect and unshared or dishonored definitions of care. Some demonstrations of self-defined care appear to be linked to issues of women’s family status and power, thus calling into question essentialist view of women’s caring nature. Dressel and Clark (1990) suggested that multidimensional conceptualization of family care can lead us beyond gender reification and overly rigid family boundaries to richer understanding of internal family dynamics and family’s connections to the broader society.

These theoretical approaches help summarize, compare, and contrast ideas about carework. Some offer conflicting answers to the same questions while others speak to dissimilar questions. Zimmerman, Litt, and Bose (2006) believe they illuminate more fully the crisis of care with its deficits, commodification issues, and global implications, and Dressel and Clark (1990), Folbre (2005) and Zelizer (2002) point to the need to link families more systematically to other social institutions. The purpose of our model is to more fully explore components of family carework and its linkages, both inside the family and out.

Framing contexts, processes and outcomes of carework

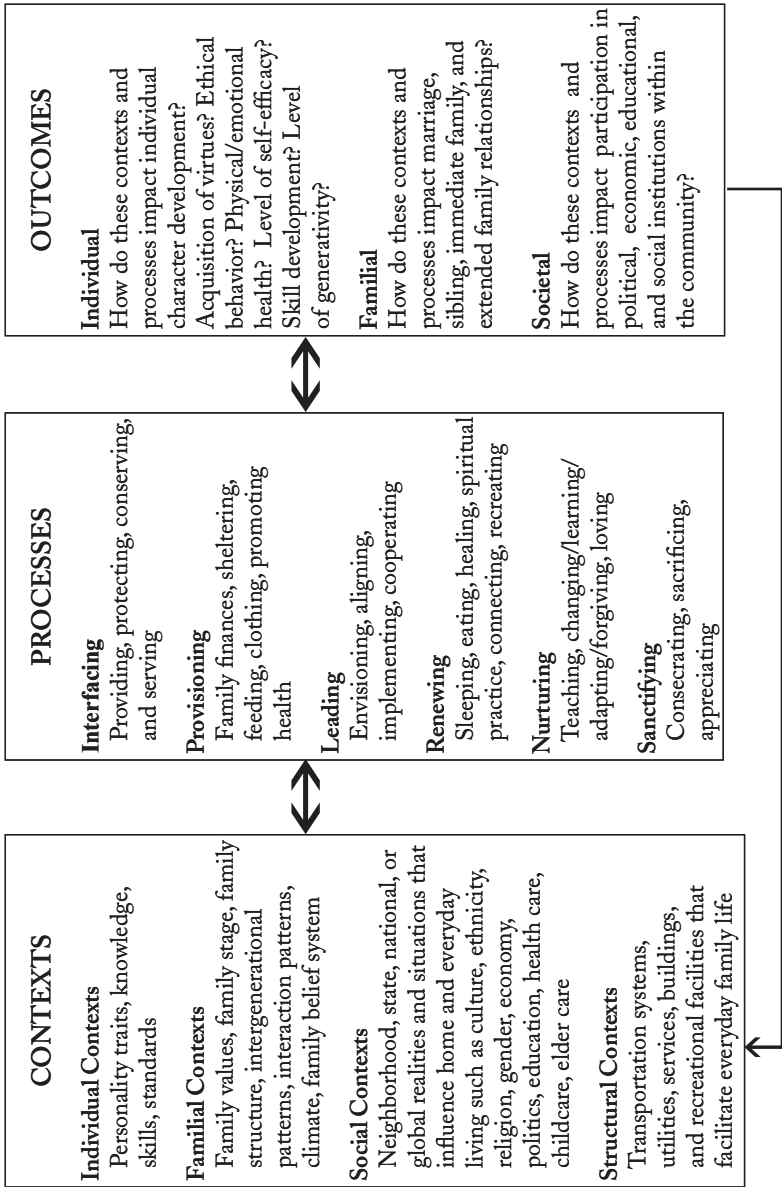
Our proposed model attempts to account for the invisible family carework

that is done on an everyday basis (see Figure 1). In this model we propose that carework influences, and is influenced by, contexts in which it is situated, and that processes facilitate a variety of family outcomes. There is both horizontal and vertical interaction among the parts of the model and circular interaction between outcomes and contexts. The event of family mealtime is one way to illustrate the model and show how mealtime is shaped by interactions with individual, familial, social, and structural contexts, and how it influences individual familial and societal outcomes. A growing body of literature documents the positive effects of shared meals on individual and family development (Fulkerson, Neumark-Sztainer, and Story, 2006; Larson, Wiley, and Branscomb, 2006; Weinstein, 2005). These studies, and numerous others, document that families who regularly eat meals together enjoy the outcome of healthier individuals and more positive family relationships.

We propose that family mealtime is better understood when we think about how it is shaped by its contexts. The influence of *individual contexts* is readily seen. For example, the individual personality of the primary food preparer and other members of the family may influence who is involved in the preparation. The culinary knowledge, skills, and standards of individual family members may influence what food is prepared and how it is presented. *Family contexts* are also influential. For example, if interaction between parents and children during meal preparation is unhurried, generative, and positive then it will be likely that family members will want to be involved and learn more than if this time is impatient, demanding, and full of criticism. If the family is cohesive and values togetherness it is likely that more family members will be present for family mealtime than if the family system is chaotic or disengaged. If the family belief system is egalitarian it will be more likely that everyone will help with the cleanup than if doing dishes is seen as women's work. The family stage in the life course makes a difference in who is available to participate. *Societal contexts* are less overt in their influence, but important nonetheless. For example, school activities for a family with teenagers may dictate if, when, where, and for how long family mealtime may occur. Religion may prescribe and proscribe certain foods and rituals for family mealtime. The economy determines which foods are available in the marketplace and their affordability. Finally, *structural contexts* also exert an influence. The access of the home to utilities, marketplace availability, transportation services, appliances and other household equipment all influence mealtime. By being thoughtful in examining the influence of all of these contexts we can better understand why family mealtime is the way it is.

Our model also highlights home processes less well identified in the family studies literature. Family mealtime is clearly identified as a *provisioning* process as families shop and meet needs for nourishment, but mealtime is also *nurturing* as the setting provides opportunities for interaction and caring. The family *interfaces* with workplace, neighborhood, and other community entities to accomplish mealtime. *Leadership* is required as someone envisions the event,

Figure 1



aligns family schedules and make plans, then implements the plan and tries to win the cooperation of other family members. *Renewing* takes place and family members can be *sanctified* as they appreciate, sacrifice, and otherwise give of themselves in the process.

Family mealtime is linked to valued *individual, family, and social outcomes*. By involving family members in meal preparation in a patient, supportive way, parents can contribute to skill development and self-efficacy for the children. The process of doing so may contribute to developing generativity in those same parents. A relaxed, unhurried family mealtime provides a context for conversations that can promote character development and the acquisition of virtues. Of course, the actual food consumed at the dinner table can contribute to physical health of family members. During family cleanup, children can enact ethical behavior by choosing to contribute fully to the process. Likewise, positive *family outcomes* are fostered by family mealtime. As parents work with children in meal preparation, healthy parent-child relationships are fostered. When grandparents and uncles and aunts are invited to special meals, extended family relationships are fostered. As parents work together on mealtime cleanup, healthy marriage relationships are engendered. Finally, *societal outcomes* are influenced by these same processes. The lessons taught around the family dinner table may help family members become law-abiding, educated citizens. Work habits involved in family mealtime may help family members become economically productive workers. This will help family members be self-sufficient and less dependent on government services.

Stable family relationships, in turn, tend to create the family context and environment within which effective routines of carework can be maintained over time. Family scholar Kathleen Bahr (2000) said that carework is an opportunity to foster the outcomes of individual educational development, enhance communication among family members, and strengthen family relationships. Clearly these outcomes could potentially have reciprocal influence on future contexts and processes. Thus, as Enola Aird (2001) explained, carework is so pervasive that it has ramifications not only for outcomes for the individual, family, and society, but it can also impact future contexts, processes, and outcomes of carework.

Although carework involves many possible processes, we focus specifically on carework as embedded within the six processes of interfacing, provisioning, leading, renewing, nurturing, and sanctifying. These processes explore a number of specific ways in which carework is negotiated within a variety of contexts on a daily basis. It must be noted, however, that what is considered a nurturing carework process to some family members is not considered nurturing to others. For example, what is seen as necessary for renewing or nurturing a child to one parent may not be seen as necessary or even desirable for another. It is important, therefore, to problematize each of these six carework processes in order to better understand them. The intent of this model is not to determine positive or negative potentialities, but rather to simply identify a variety of

contexts, processes, and outcomes associated with carework as informed by the theoretical literature. Further theoretical and empirical work will be necessary in order to document the theorized linkages. It is also important to note that there are individual, dyadic, and family units which sometimes act in conflict when doing carework. Thus, it is important to explore how different members in the family perceive, define, and go about engaging in the processes of carework. The contribution of this model is that it illuminates and gives names and categories to carework contexts, processes, and outcomes. By giving names and proposing relationships from known contexts to valued outcomes, family members may gain greater power and discretion over these outcomes.

Conclusion

In our model we have identified a number of contexts and processes that influence individual, familial, and societal outcomes. These contexts, processes, and outcomes are in continual and reciprocal interaction with each and serve as a theoretical basis for expanding our research and theorizing on invisible family carework in a number of ways. What is most important, however, is that this model draws our attention to a variety of processes embedded in everyday home life that require significant amounts of time, energy, and emotional investment that have previously been overlooked as components of family carework. Future research could explore this contextualized attentiveness to process and outcomes in order to broaden our understanding of family carework beyond the private realm and begin to explore new ways of thinking about the daily processes of home.

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