

1 The Back Stage of a Global Free Market Nannies and Surrogates

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An ever-widening two-lane global highway connects poor nations in the Southern Hemisphere to rich nations in the Northern Hemisphere, and poorer countries of Eastern Europe to richer ones in the West. A Filipina nanny heads north to care for an American child. A Sri Lankan cares for an elderly man in Singapore. A Ukrainian nurse's aide carries lunch trays in a Swedish hospital. Going in the other direction, an elderly Canadian migrates to a retirement home in Mexico. A British infertile couple travel to India to receive fertility treatment and hire a surrogate there. In both cases, Marx's iconic male, stationary industrial worker has been replaced by a new icon: the mobile and stationary female service worker.¹

Drawing on research by Rhacel Parreñas, S. Umadevi, and others as well as on my own interviews with Filipina nannies and Indian surrogate mothers, I look behind the "front stage" of global free market – the jet-setting briefcase-carrying businessmen forging deals in fancy hotels – to a lonelier "back stage." There we find the migrant worker. Increasingly the work she does is not the physical task of building roads and constructing buildings, but the emotional labor of caring for people. One part of that emotional labor is to address the wrenching ruptures in her relationship with her family and in her relationship with herself. This hidden part of the emotional labor of "back stage women" reflects the enormous costs of life in a total free market. Many in the First World fear the oncoming big Mack truck of an over-powerful Orwellian government. What they don't fear, or even clearly see, is another big Mack truck, coming from the opposite direction – a pure market world with no help or regulation from any government at all.

Until recently, scholars have focused on migratory flows as matters of money and labor while scholars of work-family balance have focused on

1 This article is based on a talk entitled, "Global Traffic, Female Service and Emotional Life: the case of Nannies and Surrogates" and given April 23, 2009, at a conference on transnational care relations held at the University of Frankfurt, Frankfurt, Germany.

First World populations where emotional life and work-family conflict is a plainly visible issue. But emotional life for migrant workers is as real as it is for anyone else – and often far more wrenching. The same is true for Third World women to whom clients travel for service.

Virtually everyone agrees that workers can earn more money if they migrate to better paying jobs. In the case of the Sri Lankan maids studied by Michele Gamburd and Grete Brochmann female migrant workers send remittances desperately needed for basic food and shelter. Studies by Rhacel Parreñas revealed that wages of lower middle class and middle class Filipina nannies far more often covered children's school fees, housing upgrades and money to hire a home-based nanny. Many people benefit from migrant's income – children, spouses, parents, and sometimes the local church. Third World governments also gain from the inflow of hard currency. Indeed, the Philippine government has long recruited, trained and supported female migrant workers to tax their earnings. At the other end, First World employers welcome the badly needed services migrants provide. All these parties agree on the benefits of female migration and discuss openly the decision to migrate as a family strategy, a government policy and over the last thirty years, a national cultural norm. The primary benefit of female migration is clearly the transfer of money from First to Third World. The remittances of all migrant workers in 2008 were almost three times higher than all of the world's foreign aid. One World Bank economist calculated that remittances in 2003 totaled nearly 300 billion dollars (DeParle 2008). At the same time, that money did not result in the economic development of Third World countries.

However, there is an emotional aspect to migration-for work, which is often ignored in lieu of the financial aspects. I focus on the emotional side here in order to point out the prevailing ideology of globalization – the ideology of “free choice” in a “free market”. This ideology rather addresses the life of those on the front stage of globalization than those on its back stage. The word “free choice” holds a very different emotional and cultural price tags for each.

1.1 Parenthood and Migration

For the last century, migration studies have been dominated by the paradigm of a male migrant worker. And this was for a good reason. Half of the world's 200 million migrants (3 percent of the world population) are men. Historically, most people who migrated in search of paid work were men, while most women, migrated for the purpose of family reunification. However, today a growing proportion of female workers migrate to find paid work in the First World.

Many Third World male migrant workers have greatly suffered from poverty and from the low-wage work. We can picture a male Turkish migrant sweeping the streets of Amsterdam or a male Mexican gardener trimming the hedge in the yard of a California suburban home. Much of the literature on male migrants working in fields or factories has focused on his economic role – as a provider and as a human being. The emotional costs of his work often went unaccounted for. In the South African migrant labor system under the Apartheid regime, many men worked in coal, gold and diamond mines for eleven months at a time. They were far away from their homelands, and only allowed to return for one month a year. As one wise miner told the South African economist, Frances Wilson, “what I miss most is having my children bring me up.” Still, his central role at home was as a provider.

Over the last forty years, a growing number of migrant workers are women. Their identity is more than that of men, based in nurturing their children. Today's female migrants travel in their late twenties, thirties or forties, leaving children behind in the care of grandmothers, aunts, fathers, nannies, and others. Research by Parreñas, Umadevi, D. Cox, Yen Le Espiritu suggests that – compared to migrant fathers – mothers leave behind children far more strongly attached to them. This creates very different emotional problems.

Without promoting “maternalism” (the premise that only mothers can care for their children), or imposing Northern cultural ideals on families of the South, and without or being mistaken as opponents of migration – we can, I believe, open a full investigation into the emotional price these migrant workers pay. Usually children of migrant mothers are cared for by female relatives, husbands, nannies, or boarding schools. Sometimes they are left in orphanages as shown in Nilita Vachani's heartbreaking documentary “When Mother Comes Home for Christmas.” It tells the story about a divorced Sri Lankan mother of three who works through their childhood years as a nanny in Greece. Since one out of four children in the Philippines has one or both parents working overseas, this issue of separation is not at all a small matter.

Partly because mother-child bonds have been taken for granted – and are indeed an invisible aspect of the migrant’s family and community life. Also, family problems have been seen as sensitive and private and until recently this has remained a back stage part of back stage work.

1.2 Vicky and Maricel: Migrant Nannies

Vicky Diaz is a 34-year-old mother of five, and a migrant nanny. She had been a college-educated schoolteacher and travel agent in the Philippines before migrating to the United States to work as a housekeeper for a wealthy Beverly Hills family and as a nanny for their two-year old son. As Vicky explained to Rhacel Parreñas:

My children ... were saddened by my departure. Even until now my children are trying to convince me to go home. The children were not angry when I left because they were still very young when I left them. My husband could not get angry either because he knew that was the only way I could seriously help him raise our children, so that our children could be sent to school. (Parreñas 2001: 87)

Vicky, (Parreñas’ pseudonym for her), is “freely” pursuing an economic strategy. In a sense, she is privately making up for the absence of good public schools and jobs in the Philippines. In a larger sense, she is, through her migration, compensating for missing actions by international institutions such as the World Bank, and the International Monetary Fund, as well as the government of the Philippines. In a small way, her “free choice” equalizes the world’s wealth when there seems no other way to do it.

Paradoxically, Vicky inadvertently adds to a global *emotional inequality*. She subtracts daily maternal care from her own five children, and adds a second layer of loving care for an American child. As Vicky describes:

Even though it’s paid well, you are sinking in the amount of your work. Even while you are ironing the clothes, they can still call you to the kitchen to wash the plates. It ... [is] also very depressing. The only thing you can do is give all your love to [the two-year-old American child]. In my absence from my children, the most I could do with my situation is give all my love to that child. (Parreñas 2001: 87)²

While the American child enjoys one more caring adult, Vicky’s children grow up with one less. One mother returned to the Philippines after a long period of absence, only to discover her grown child asking to be carried, as if time had stopped at the point her mother left.

2 I cited this quote in my essay “Love and Gold” (Hochschild 2002).

In my own interviews with over-seas nannies living in Redwood City, San Jose and San Francisco, California, similar stories emerged. One nanny, Maricel Kowalski, described leaving her children:

You can't imagine... As I boarded the airplane, I told myself, *don't look back*. Just go. I didn't cry until I got on the airplane. It was like a death. My daughter was ten. I told myself, 'One year of sacrifice, and I'll go back or they'll come here.'

A year later Maricel returned to the Philippines. At the airport, she saw and embraced her son. But her eyes passed over the young woman quietly waiting to be noticed "My daughter was waiting for me to hug her, but I *didn't recognize her*; she was *mature!*"

Ana, a Thai nanny who had worked for fifteen years in San Jose, California, is married for the second time to an American man. She described in detail the personalities of each of her three children she'd had with her second husband, Photos of the three children were prominently displayed on her coffee table. When I asked if she had other children, she hesitantly described another son by a previous marriage, a boy she left behind with her mother and ex-husband. She recounted:

My son by my first marriage ... I left him with my mother when I came here. And my husband wanted his son with him in the village. He wouldn't let me take him. Even at the hospital, I had my mother sign as the legal guardian. When I next went back to Thailand, my son was eight. I should never have gone back. Because then my son wanted to come with me. I tried to arrange for him to come here, but since I wasn't his legal guardian, I couldn't do it. My son *waited* and *waited*. But after he heard he couldn't come, he had a motorcycle accident. He died. (weeps)

In a large 1998 survey of 709 Filipino elementary school children (average age of 11) – Graziano Battistella and Cecilia Conaco compared children with both parents present, with a father absent, with a mother absent and with both parents absent. Most children "show an understanding of the main reason for parents being abroad, that is, for economic improvement of the family and for improving their own education" they say. But children also experience migration with "a sense of loneliness and sadness." (Battistella/Conaco 1998: 228). Children living with both parents had higher grades and a higher rank in the class than children with absent parents. (This was true even though the children of migrant parents were financially better off.) Also, children living without either parent or without their mothers more often reported feeling sad, angry, confused, and apathetic than children without fathers.

In one of the few in-depth studies of what she calls "parenting from afar," Leah Schmalzbauer studied 154 Honduran migrant workers of whom 34 migrant care workers lived in Chelsea, Massachusetts, and their children, parents and others they left behind in Honduras.

"Conaco" or "Conoco"?
see references

Both, migrant fathers and mothers, she found, worried that their children didn't truly understand that their parents were sacrificing for – and not abandoning – them. She also described “dissension within transnational families” as “common.” (Schmalzbauer 2004: 28)

Sadly, in the absence of migrant mothers, Filipino husbands did not whole-heartedly take on primary care of their children. Rhacel Parreñas compared the Filipino children of absent fathers with children of absent mothers. When fathers migrated, mothers cared for their children. When mothers migrated, grandmothers, aunts, and in a minor way fathers pitched in. When Parreñas asked children to tell her who should dress them in the morning, they first named their grandmother, then aunt, and last, their “father.” Indeed, a good number of fathers started relationships with new women and established new families in separate villages (Parreñas 2005). Migrant mothers tried to keep in touch with their children through letters, email and Skype. Those children did best whose mothers continually explained their departure as a sacrifice for the family. But when Parreñas asked the children of migrant mothers whether they, once they become adults, would migrate to earn money abroad, nearly all answered “no.”

In another study of children left behind by migrant mothers, S. Umadevi interviewed twenty migrant women from Kerala, India who worked in the Persian Gulf, as well as a hundred children over age five, husbands, grandparents, or grandparents-in-law, and other relatives with whom the children lived in Trivandrum, Kerala, India. Mothers visited their minor children, on average, once every two years for a month.

In no way does this describe Keralan – and Indian – family ideal of childhood, which is to grow up in a joint family – elderly parents, their sons, the son's wives, and their children all in the same household. In fact, most Keralans now live in smaller, nuclear families; Umadevi notes that in one out of ten families, one parent has migrated abroad. Nine out of ten times, the migrant is a man. But with the growth of service jobs abroad, the missing parent is increasingly, the mother. Even so, the ideal of the stay-at-home mother living with and raising her children at home still exists. Leela, the daughter of a nurse working in the UAE lives with her father and brother in Kerala, told Umadevi,

I cannot go home even for weekends (from her boarding school) because my father is alone at home and in a traditional setting I would not go and live with him, when he is alone ... You know you cannot discuss everything with your father. I wait for my mother's call every Friday, but from the hostel phone. Also, I cannot talk freely with her, because the matron (a nun) is always hovering around ... My father is very strict, he has become more strict now and is very conservative ... if I do anything non-conventional he tends to blame my mother for bringing me up the way she has, so I

try to be very careful to see that my mother is not blamed. This is a big burden, which I would not have if she was here.

A number of nurses worked for hospitals in the Persian Gulf that had stringent leave policies for their pregnant workers. Hospitals in which the migrants worked general allowed their employees only forty days post-partum leave for the birth of their infants. Thus, mothers would fly from the Gulf back to Kerala to give birth to their babies, stay for forty days, then return on the forty-first day to work in the Gulf. Many of them worked for a year or more before they were able to see their baby again.

Speaking, perhaps, for many children of migrant mothers, Priya, a Keralan college student and the daughter of a nurse practicing in the United Arab Emirate, told Umadevi:

I want you to write about the human cost for people like us, to be apart for year after year. I'm living here in this hostel, and my classes are fine, but I can't talk to my mother. I can't tell her things. I can't see her face. I can't hug her. I can't help her. My mother misses me too. My mother will retire at some point, but how old will I be then?

The anguish of migrant mothers and children forms part of the invisible back stage of the global free market. We often see the terrible pains of migration as a temporary individual sacrifice that will bring about a larger structural change in the Third World economy. But sadly, that is not the case. Remittances sent home by migrant workers around the globe, according to Dilip Ratha of the World Bank, reduce poverty, but they do not foster economic development. Indeed they tend to create a new self-perpetuating dependency on remittances (see Ratha 2008; DeParle 2008). This culture of remittance-dependency, along with First World legal restrictions on citizenship, perpetuate the continuing global separation of mothers from their children.

1.3 Geeta and Saroj: Commercial Surrogates

Parallel to the movement of migrant women from the Third to First World is a less observed outbound flow of First World clients to care workers of many sorts in the Third World. Retirees from the North, for example, make long-term moves to cheaper care and sunnier climates in the South. Given cuts in pensions, a 65-year-old American whose middle-aged children hold full time jobs and live far away might live – at a third the cost according to a Metropolitan Life study – in an assisted living facility in Mexico. Indeed, 1.2 million American and Canadian retirees now live in Mexico. A divorced or

childless Japanese man might retire to northern Thailand. A French elderly person of modest means might retire to Tunisia, or a Norwegian to Spain, to be cared for by Third World women who – in contrast to Vicky and Maricel – stay put.

Northern clients also make short-term trips south as so-called “medical tourists.” Here we can picture a middle class American without health insurance flying to Mexico to get a tooth capped. A Canadian woman travels to Brazil for half-price cosmetic surgery. A Western European turns for less expensive treatment to a medical clinic in the Ukraine, Thailand or India.

India has attracted increasing numbers of Europeans seeking medical treatment. Advertisements describe India as a “global doctor” offering First World skill at Third World prices, short waits, privacy, and – most important in the case of surrogacy – the absence of red tape. At various Indian offices and hospitals, a tooth can be capped, a knee replaced, a heart valve repaired. In addition to the medical or dental treatment itself, many facilities offer “pre-care” and “after care” that can last some time. In India, medical tourism has now become second only to internet technology as a source of national revenue.

A growing part of medical tourism centers on reproduction – and in particular the sale of eggs, sperm and the rental of wombs. To discover more about the work of surrogates, I visited the Akanksha Infertility Clinic in Anand, Gujarat, India, which houses probably the world’s largest collection of gestational surrogates – women who rent their wombs to incubate the fertilized eggs from clients around the globe. Since 2004 when Akanksha began offering surrogate services, it has supervised the births of over 232 babies. Akanksha is not the only clinic open for business. Since 2002 when surrogacy was declared legal in India, well over 350 assisted reproductive technology (ART) clinics have opened their doors. Surrogacy is now a burgeoning part of India’s medical tourism industry, which is itself slated to add \$2 billion rupees to the nation’s gross domestic product by 2012. To encourage this lucrative trend, the Indian government gives tax breaks to private hospitals treating overseas patients and lowers import duties on their medical supplies. In a sense, the Indian government treats surrogacy – a \$445 million dollar business in India – as a type of economic development. Like migrant remittances, revenue from ART clinics helps alleviate the poverty of the surrogates but does not create an economy that offers another way out of poverty.

Commercial surrogacy in India is legal and as of yet, unregulated. Thus, a Westerner of moderate means can now legally go to an Indian clinic to purchase an egg, a vial of sperm, and hire a surrogate to carry the baby. Normally the surrogate is implanted with a fertilized egg of the female client. If

the wife cannot produce an egg, one can be bought and fertilized with the husband's sperm. But it is possible to buy all the human elements necessary for pregnancy. – egg, sperm, and womb, in India, or as the documentary film, "Google Baby", shows, from many places around the globe.

As the clinic's charismatic director, Dr. Nayna Patel, views the transaction between client and provider an extraordinary "win-win" deal. A childless couple gains a baby. A poor woman earns money. "What could be the problem?" If one looked only at the front stage of the global free market, Dr. Patel has a very good point. Even in the backstage of the free market, the story is complex. But what has been missing is both an understanding of the experience of the Third World surrogates and an appropriate lens through which to consider that experience.

Like the nanny, surrogates perform an invisible "emotional labor" to suppress feelings that could interfere with doing their job – including feelings of attachment to the babies they carry. In January of 2009, I followed a kind embryologist, Harsha Bhadarka, to an upstairs office of the Akanksha Infertility Clinic in Anand, India, to talk with two surrogates whom I will call Geeta and Saroj. Akanksha reportedly houses the largest collection of surrogate mothers in the world. (Aditya Ghosh, a journalist with the *Hindustan Times*, was, happily, with me.) The two surrogate mothers entered the small room nodding shyly. Both lived on the second floor of the clinic, but most of its twenty-four residents lived in one of two hostels for the duration of their pregnancy. The women are brought nutritious food on tin trays, injected with iron (a common deficiency), and supervised away from prying in-laws, curious older children, and lonely husbands with whom they were not allowed to visit or have sex, for nine months.

Geeta, a 22-year-old, light-skinned, green-eyed beauty, is the mother of three daughters. One of them is sitting quietly and wide-eyed on her lap. To be accepted as a surrogate, Akanksha requires a woman to be a healthy, married mother. As one doctor explains, "If she has children of her own, she'll be less tempted to attach herself to the baby."

"How did you decide to become a surrogate?" I asked.

"It was my husband's idea," Geeta replies. "He makes *pav bhaji* [a vegetable dish] during the day and serves food in the evening [at a street-side fast-food shop]. He heard about surrogacy from a customer at his shop, a Muslim like us. The man told my husband, 'It's a good thing to do,' and then I came to madam [Dr. Patel] and offered to try. We can't live on my husband's earnings, and we had no hope of educating our daughters."

Typical of other surrogates I spoke with, Geeta had only a brief encounter with the genetic parents who paid her. "They're from far away. I don't

know where,” she said of the parents of the baby she was carrying. “They’re Caucasian, so the baby will come out white.”

As for the baby, she said, “I keep myself from getting too attached. Whenever I start to think about the baby inside me, I turn my attention to my own daughter. Here she is.” She bounces the child on her lap. “That way, I manage.”

Seated next to Geeta is Saroj, a heavy-set, dark woman with intense, curious eyes, and, after a while, an easy smile. Like other Hindu surrogates at Akanksha, she wears *sindoor* (a red powder applied to the part in her hair) and *mangalsutra* (a necklace with a gold pendant), both symbols of marriage. She is the mother of three children and the wife of a vegetable street vendor. She gave birth to a surrogate child a year and three months ago and is waiting to see if a second implantation has taken. The genetic parents are from Bangalore, India. (It is estimated that half the clients seeking surrogacy from Indian ART clinics are Indian and the other half, foreign. Of the foreign clients, roughly half are American.) Saroj, too, doesn’t know anything about her clients. “They came, saw me, and left,” she says.

Given her husband’s wages, 1,260 rupees (or \$25) a month, Saroj turned to surrogacy so she could move out of a shed with an earthen floor to a rain-proof house and feed her family well. However, she faced the dilemma of all rural surrogates: being suspected of adultery – a cause for shunning or worse. I ask the women whether the money they earn has improved their social standing. For the first time the two women laugh out loud and talk to each other excitedly. “My father-in-law is dead, and my mother-in-law lives separately from us, and at first I hid it from her,” Saroj says. “But when she found out, she said she felt blessed to have a daughter-in-law like me because I’ve given more money to the family than her son could. But some friends ask me why I am putting myself through all this. I tell them, ‘It’s my own choice.’”

Geeta and Saroj “freely” chose to become surrogates. But in what context? Their villages reflected appalling government neglect, run-down schools, decrepit hospitals, and very few well-paying government jobs. Given these circumstances, the most lucrative job in town for uneducated woman was surrogacy. The decision to become a surrogate like the decision to migrate away from young children, made the woman violate social norms – in this case to carry the seed of a strange man, locally associated with adultery. But it also reaped large rewards.

At Akanksha, the director, Dr. Patel organized surrogacy much as she might have the manufacturing of clothes or shoes. She proudly sought to increase inventory, to safeguard quality, and to improve efficiency. In the case of surrogacy, that translated into the goals of producing more babies, monitoring surrogates’ diet and sexual contact, and assuring a smooth, emo-

tion-free exchange of baby for money. (For every dollar that goes to the surrogates, observers estimate, three go to the clinic.) In Akanksha's hostel, women sleep on cots, nine to a room, for nine months. Their young children sleep with them; older children were not allowed to stay in the hostel though they could visit. The women exercise inside the hostel, rarely leaving it and then only with permission. Dr. Patel also advises surrogates to limit contact with clients. Staying detached from the genetic parents, she says, helps surrogate mothers give up their babies and get on with their lives – and sometimes, on with the next surrogacy. This ideal of the de-personalized pregnancy is eerily reminiscent of Aldous Huxley's 1932 dystopian novel *Brave New World*, in which babies are emotionlessly mass-produced in the Central London Hatchery. In Huxley, and other popular dystopias, however, mothers are not voluntarily entering "win-win" bargains with clients, but have rather turned over their function to government-regulated eugenic scientists. Not the market, but the government, is the source of power at hand.

In India, commercial surrogacy is legal but unregulated, although a 135-page regulatory law, has long been in preparation to be sent before Parliament. Even if the law passes many feel it would do little to improve life for women such as Geeta and Saroj. The draft law specifies that the doctor, not the surrogate, has the right to decide on all matters, for example, on "fetal reduction" (abortion). Under no circumstances can the surrogate decide, because legally speaking this is not 'her' baby. Moreover, most Indian federal laws are considered "advisory" to powerful state governments. Courts – where such laws might be challenged – are also backlogged for years, often decades. The current proposal leaves the question unresolved what a surrogate can do if contracting parents don't pay, or most important of all, if they decide to reject – as has happened before – the baby she has borne.

Even if the law protected surrogates in such cases, and even if the law was effectively enforced, what surrogate could read the contracts they sign? Most surrogates have a 7th grade education in Gujarati and the contracts are written in English. Some illiterate surrogates sign contracts with thumb prints. Given their poverty, what surrogate could afford to hire a lawyer? Should it pass in the Indian parliament, the law would also do nothing to

address the crushing poverty that presses Akanksha Indian women to “choose” surrogacy in the first place.³

Even if surrogacy were safely regulated with the interests of surrogates well in mind, they are vulnerable to something else, inherent in the current global free market system – “a race to the bottom.” Indian surrogates charge less than American ones by a factor of one to ten. But Thailand could undersell India. Cambodia could undersell Thailand. Laos could undersell Cambodia. Sri Lanka could undersell Laos. Each country could undercut the next cheapest, cutting fees and reducing legal protection for surrogates along the way. If the “race to the bottom,” as William Greider calls it in *One World Ready or Not*, can apply in the production of cars, computers and shoes, it can also apply in the production of babies.⁴

Whatever the surrogate’s vulnerability to structural forces outside of herself, she simultaneously faces a difficult, complex and basic task internal to herself: detaching herself from the baby she carries. Akanksha’s director, Dr. Patel, instructs surrogates to think of their wombs as “carriers,” and to think of themselves as prenatal baby sitters. She invites them to imagine their wombs as separate from themselves. But the womb is not separate from the rest of a pregnant woman’s body. Even if body and mind can be separated during pregnancy, the surrogate still feels the baby’s presence in many areas of her body apart from the womb – her digestive system, ankles, hips, breasts, not to mention her fantasies and dreams – some of which may focus on connection to the child and some of which on money and escape.⁵

The surrogates I spoke with did not talk as if they were naturally detached from the babies they carried. They talked as if they were *trying* to

3 For N.B. Sarojini, director of the Delhi-based Sama Resource Group for Women and Health, a nonprofit feminist research institute, the problem is one of distorted priorities. “The ART clinics are posing themselves as the answer to an illusory ‘crisis’ of infertility,” she says. “Two decades back, a couple might consider themselves ‘infertile’ after trying for five years to conceive. Then it moved to four years. Now couples rush to ARTs after one or two. Why not put the cultural spotlight on alternatives? Why not urge childless women to adopt orphans? And what, after all, is wrong with remaining childless?”

4 Right now international surrogacy is a confusing legal patchwork. Surrogacy is banned in China and much of Europe but it’s legal and paid for in Israel. It is legal in New Zealand but banned in Australia. In France one can’t be or hire a commercial surrogate but one can use foreign surrogates and bring babies back to France after birth. Only 17 states in the United States have laws on the books among them, California which allows surrogacy and New York which bans it.

5 Psychologists have also found that babies respond with faster heart beats to their mother’s voices in utero.

detach themselves from them. For example, one surrogate said, “I try not to think about the baby. Whenever I start to think of the baby in my womb, I focus on my *own* child.” Another surrogate who had difficulties conceiving her own child, commented, “If I hold a jewel in my hand, I don’t covet it as my own.” Others commented “I think of my womb as a carrier.” Or “I have three children, I don’t need one more.” Another said, in the spirit of sour grapes, “When children grow up, many become disloyal to their parents. They don’t help you.”

Both nannies and surrogates do emotional labor. Nannies do emotional labor to cope with grief, depression, anguish they feel apart from their own children; even as they work to positively attach themselves to the First World children they care for. Surrogates do the emotional labor of separating themselves from the baby they carry, and from the part of their body that carries that baby. We could describe both of these as the emotional labor of estrangement.

1.4 The First Big Mack Truck We Can Imagine and the Second One We Can’t

Like other migrant nannies, Maricel “freely” chose to leave her children behind. Like other surrogates Saroj “freely chose” to give up her baby. Given their circumstances, these choices made great sense to them, as they would to many women in their circumstances. But in no sense were these choices easy or free.

Yet, the prevailing free market ideology invites us to look past their confining *circumstances* to their apparently free *choices*. In the imagination of a free market society, the object of fear and dread is “big brother” government. Novels such as George Orwell’s *1984*, with its “Ministry of Truth”, Ray Bradbury’s *Fahrenheit 451*, with its image of Nazi-type book burning – offer an image of a frightening state. Aldous Huxley’s 1931 novel *Brave New World* describes a government-organized London Hatchery in which babies are designed by white-uniformed eugenic scientists. Margaret Atwood’s disturbing 1998 novel, *The Handmaid’s Tale* describes a right-wing Christian state that divides women into Handmaids who procreate;

Martha's who tend house, and wives who serve husbands.⁶ In these nightmares, governments coerce, intrude on and control the human being. They undermine and replace family and community. They rob us of our highest ideal – individual free choice.

But the stories of Maricel, and Saroj, just to mention these two, suggest a very different nightmare, in which government does not exercise total control. No police, no jailer, no Big Brother government coerces or intrudes on the human being. On the contrary, free market exchanges go on, without virtually any government regulation at all. Instead of police helping you there is a sense that no one is coming to one's aid in an hour of need. The individual is not forced to conform to rigid rules but is free to take the best available option. They are free in a global free market lacking help for those in need. We are called to ask whether the image of a neo-liberal world – a totally free market – doesn't present a nightmare all of its own. Without government intervention of any sort, we face an empty world composed of many desperate people making apparently "free choice." Migrants to First World countries make similar choices in a legal no man's land as well, as Ursula Apitzsch observes in this volume, – in which the protection of civil rights such as traveling freely, medical care, and education elude the migrant.

Curiously we have been culturally poised to look for a big Mack truck representing "big bad government" coming from the left, when another big Mack truck – representing total market control – is approaching from the right. Toward the left, we envision a presence of government. Toward the right, we envision its absence. Although the second truck is hard to see. It takes the form of millions of solitary "win-win" deals in a context lacking support. Erased from our imaginations is the inequality between the horrendous circumstances of the provider and pleasant circumstances of the client. This contrast comes to be accepted as a matter of "how things are." In the absence of a positive alternative vision of sustainable world development, Maricel and Saroj are therefore left to say they work as they do out of "free choice." But they did not choose the terrible options they are forced to choose between.

Nor did Maricel and Saroj choose the curious paradox within which they find themselves. They do the backstage work of the home – gestating and rearing children. They do work which symbolizes "the milk of motherly kindness." The surrogate carries the baby lovingly in the womb. The nanny

6 Various films carry this theme further. *Amerika* (1987), a film about a United States taken over by communism, and strict martial law enforced by a U.N.-appointed Russian general governing the U.S. from Moscow. To be sure, some recent films have focused on powerful corrupt companies.

cares for it lovingly afterwards. A nurse's aide helps the sick. An eldercare worker helps the old. This work was done by women locally. Now it's going global. Now a growing array of third world care workers, prepare first world individuals to go into the front stage market. They do work that sustains the image of – in the words of Christopher Lasch – “a haven in a heartless world.” But the work that sustains that haven, the birthing and care of a child, or the sick and dying has now gone global.

Yet the care worker's job goes on within the “heartless world.” Since she rents her womb or sells her caring labor, the third world worker operates paradoxically within the logic of the marketplace. There, transactions between First World client and Third World care giver can be fair or it can be a rip-off. Such a transaction, I would argue, do not inherently exploit. But the economic chasm dividing the two worlds tips the balance between client and provider. And a free market ideology provides no lens for exploring the consequences of that imbalance.

Let us look once again at Dr. Patel's picture of the “win-win” deal. The surrogate receives money she needs. The client receives a yearned-for baby. Both benefit. This is true. But this is not all. With each transaction, the Third World clinic also makes a profit; so it is an invisible third “win.” Insofar as those wins are taxed, the Indian government also “wins”. As nannies are working for First World clients they free up time for careers in high-powered companies, the nannies contribute indirectly to the company's “wins.”

But there is more. We rivet our focus on a “win-win” deal. But what does that lead us to ignore? Although the work of Maricel and Saroj are not fully acknowledged – their work creates what I have called *emotional surplus value* (Hochschild 2000). They create more emotional ‘value’ through their work than others see or reward.

The free market lens can also lead us to ignore *cultural surplus value*. The First World client enjoys a care-free, honorific *identity*. The client is a manager, an accountant, a technician on the global front stage. He or she enjoys a more honored cultural identity because others adopt a less honored identity, the surrogate, the nanny, the eldercare worker. In addition, the care-free front stage worker often imagines himself as having a certain high-status temperament and set of emotional skills. A manager sees himself as a “Type A personality.” A technician imagines himself as rational and efficient. Meanwhile back stage workers are imagined to “have” and exercise subaltern temperaments involving less valued qualities like patience, sensitivity to the needs of others, qualities which make it possible to live up to the ideal of the First World citizen. We can call this cultural surplus value.

It is not my argument that every First World employer receives emotional surplus or cultural value from every Third World worker. Instead I fear,

that we lack a lens through which we can really see or think about these issues. The neo-liberal lens narrows our focus on free-standing ‘win-win’ transactions between First and Third World people. This lens filters out the aspects of *reality* we need in order to think about what is and is not exploitation. If emotional life is rendered invisibly, so too, is emotional labor. If we can’t see emotional labor, we can’t appreciate it like the nanny’s attachment to the client’s child, the surrogate’s readiness to give up “her” baby to the client.

If we can’t appreciate emotional labor, we also can’t appreciate the toll it takes on the worker – the surrogate’s estrangement from her body and baby, the nanny’s grief at separation from the children she’s left behind. Just as a nanny had to separate herself from her identity as an emotional mother to her children, so had the surrogate to separate herself from the fruit of her womb, the baby she bore. Indeed, these separations of oneself from maternal identity were *part* of the labor she sold.

The estrangement from her identity as an empathic mother, from the symbol she carries – all this she “freely chooses.” And in feeling she does this freely, she is abiding by the free market logic that pervades all of life – free market choice. But we could change the structures that so powerfully influence the painful free choices of a Maricel or Saroj. We live in a world of constraints. But in the end, it is groups of people who make them. We could change them by pressing for more progressive national policies, international trade agreements, and a new cultural lens through which we see our way forward. Through that new lens we could recognize what it is we *aren’t* seeing when we think we *are* seeing a simple “win-win” or “free choice.” We would see economic surplus, emotional and cultural value. Were we to alter the world based on what we see through such a lens, workers on the back-stage of the global free market would enjoy a new dignity in doing emotional labor, and sharing the gift of doing it well. In fact, with such a lens, the back stage wouldn’t be a back stage. It would be right up there in front.

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