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Postponing Passage: Doorways, Distinctions, and the Thresholds of Personhood among Older Chicagoans

Elana D. Buch, MSW, PhD

Assistant Professor of Anthropology at the University of Iowa

Abstract

This article analyzes the quotidian ways that older Chicagoans remade and traversed physical boundaries between their homes and the city beyond. In so doing, it explores how changing engagements with the environment impact social personhood in later life. In a context in which personhood is equated with independence, elders relying on paid care workers to remain in their homes found themselves at the threshold of social death. To sustain their independence and personhood, older Chicagoans sought to prevent spatial and social transitions using a range of everyday tactics and material practices located around the doorways of their homes. These liminal practices simultaneously reasserted racial, class, and other social distinctions between elders, home care workers and others, helping elders continue to occupy familiar subject positions. For these older adults, homes and their thresholds became a resource with which they resisted profound changes to their daily lives, subjectivities, and social personhood.

Keywords

Aging; Personhood; Homes; Boundaries; Liminality

Joan Murphy's¹ hands, gnarled and twisted by the ravages of rheumatoid arthritis, clung tightly to the scarred and scraped wooden banister as she pulled herself up another step, inching slowly closer to her home. She only had about 15 stairs to climb from the entrance to her modest second-floor apartment on Chicago's northwest side where she had lived for the past several decades. Still, the journey often took her 15 or 20 laborious minutes, interspersed with breaks to catch her breath. Yet, Ms. Murphy voluntarily braved the arduous journey two or three times a week. Sans elevator, the only way for Ms. Murphy to move between the neighborhood and her apartment was to drag herself up and down these stairs. Because of this difficult passage, Ms. Murphy was not comfortable leaving the apartment on her own. However, each day that the weather permitted and either her home care worker Sally Middleton or I were available, Ms. Murphy insisted that one of us accompany her on as long a walk as she could manage with her walker—usually just a block or two so that she could look at the large Catholic church where she had long worshipped. Despite her difficulties navigating the passage between her home and the city, Ms. Murphy

¹All personal and organizational names are pseudonyms, changed to protect participants' confidentiality. For personal names, I reproduce the forms of address used by participants in their everyday interactions—typically, home care workers were called by their first, given names while elderly clients were called by a title and surname.

insisted on continuing to live at home, a place that represented her hopes for sustaining social personhood and simultaneously the possibility of being trapped and abandoned behind its doors.

During the 24 months that I conducted ethnographic fieldwork with older Chicagoans and their home care workers, nearly all these older adults emphatically expressed their desires to live and age in their own homes. Some even refused to discuss the possibility of needing future institutional care. For them, living at home not only positively affirmed their continued status as an independent and adult persons, it also meant that they had not yet been relegated to widely feared and maligned sites of institutional care. Nursing homes, assisted living facilities, and other group homes for older adults all shared the unhappy distinction of being viewed, both by participants and in popular discourse in the United States, as sites of neglect, abandonment, and social death.² Though remaining at home meant living with the fear of falling or being injured and not having anyone available to help, it also promised the possibility of sustaining relationships with neighbors, shopkeepers, and churches that required being physically present. All but one of the elders I knew well acknowledged that the progression of their ailments would likely leave them requiring care that exceeded what they expected to receive through home care; however, several expressed the hope that they would die before this was necessary. Yet even as these elders came to see their homes as bulwarks against their social unmaking, their homes became increasingly crowded with assistive devices and technologies and frequented by a growing number of health care and social service providers, transforming them into increasingly liminal spaces (Angus et al. 2005; Heinemann 2011; Long 2012).

Over the course of my fieldwork, the boundaries and doorways of homes emerged as places where older adults enacted their broader ambivalences and struggles around the looming reordering of their social personhood. Among other things, older adults' material practices around the thresholds of their homes reestablished ever-eroding boundaries and relationships between their homes and the city, often instantiating distinctions between themselves and others in the process. Even as elders struggled to maintain their homes and navigate the passages from their homes to the city beyond, they employed a variety of material practices to remake these border spaces, sometimes with the collaboration of home care workers. These material alterations to doorways reflected their subjectivities, reaffirmed their relationships in local communities, and postponed other deeply feared moral transformations in their social personhood.

In the United States, when bodily and social changes render older adults unable to maintain domestic life, many seek assistance from paid home care workers, who help older adults remain in private homes by performing what the gerontologists call "instrumental activities of daily living"—cooking, cleaning, bathing, shopping, and laundry. New medical technologies have transformed once-fatal diseases and injuries into chronic illnesses and long-term disabilities, leaving a growing population of older adults requiring care of

²Nursing homes are not inherently or necessarily sites of abandonment and social death, even if aging Chicagoans perceived them that way. A number of scholars shown that nursing homes are also liminal spaces (Shield 1990) that personhood and sociality may be sustained, recuperated, and transformed within nursing homes and other sites of institutional care (Chaterjee 2006; McLean 2007; Robbins 2013).

unprecedented duration and intensity. Such demands can no longer be filled by the unpaid female kin who might have been expected to do so in previous generations, both because the need for care has expanded so dramatically and because of women's increased participation in the formal labor force. Amidst these broad social and demographic shifts, neoliberal health care policies from the 1980s onwards increasingly shifted the locus of long-term care from institutions like nursing homes back to private homes. Taken together, these social, demographic, and policy trends have rendered paid home care one of the fastest growing occupations in the United States (BLS 2012).

This article focuses on the quotidian ways that older Chicagoans and their home care workers engaged, remade, and traversed physical boundaries between elders' homes and the city beyond as a way of exploring how moral and political engagements with the material environment impact subjectivity and social personhood in later life. In so doing, this article builds upon Arnold van Gennep's (2004) famous observation that the rituals marking spatial and temporal passages often play significant roles in transforming individual personhood—for example, from foreigner to friend or from girl to woman. Yet among older Chicagoans, transformations in personhood were typically resisted rather than celebrated in part through a range of everyday tactics (de Certeau 1984) not coincidentally located around the doorways of their homes. Frequently, these boundary practices reasserted racial, class, and other social distinctions between elders and those beyond, enabling elders to continue to occupy familiar subject positions. For these older adults, homes and their physical boundaries became a kind of resource that, with the critical assistance of paid caregivers, they worked to mobilize in order to resist profound changes to their daily lives, subjectivities, and social personhood.

Aging Persons and the Thresholds of Life

Personhood, a fundamentally relational concept (Mauss 1979), is constantly negotiated in response to changing circumstances, technologies, and interactions (Levine 2014; Strathern 1988). At the same time, these shifting and contested understandings of personhood play a key role in shaping individual subjectivity. Unlike in places with recursive and nonlinear understandings of the life course (Eberhardt 2006; Gottlieb 2004; Lamb 1997), in the United States aging is often deeply feared as a time of irrevocable decline and loss. For example, in an article published in popular media, geriatric physician and public health scholar Linda Fried recalls that when practicing in Baltimore, many of her older patients, “wanted to make a difference in the world, but finding no role for themselves, were treated as socially useless and even invisible” (2014). Fried suggests that these feelings of uselessness are tied to the diminished autonomy and personal responsibility experienced by many older adults, especially those who require care from others.

In contrast to the United States, where maintaining social roles and autonomous forms of personhood are depicted as the keys to good aging, a good old age in Mangaldihi, the West Bengali village where Sarah Lamb (1997, 2000) conducted fieldwork, was associated with diminishing social ties in order to avoid haunting loved ones from the afterlife. While some elders in Mangaldihi struggled with this process, those who actively worked to transform their social personhood were praised. In this context, increased frailty and decreased social

engagement were seen as difficult, but normal and valuable, aspects of later life. In the United States, where the dead do not share similar standing as social persons, individuals typically resist the social and physical transformations associated with bodily aging (Buch 2013), and public praise is reserved for those who seem to be avoiding aging altogether. The widespread equation of independence with social personhood means that for many in the United States, physical and cognitive declines that require individuals to rely on others for everyday care create profound threats to elders' social personhood and sometimes lead to social death (Kaufman 1994; Lamb 2014).

For scholars who themselves are working within European legal and philosophical traditions, notions of the person and independence are also connected to an individual's rights and abilities to control houses and other forms of private property (Bachelard 1964; Radin 1982). For example, U.S. legal theorist Margaret Radin has influentially argued that certain kinds of property, such as homes, are constitutive of personhood and that control over these objects is critical for psychological well-being (Radin 1982; see also Stern 2009). In the context of such entanglements between homes and social personhood, perhaps it is not surprising that prominent U.S.-based gerontologists John Rowe and Robert Kahn argue that successful aging and independence are defined in part by "continuing to live in one's own home, taking care of oneself" (1998:42). Yet what of the social standing of those, like older Chicagoans receiving home care services, who fall somewhere in the middle—continuing to live in their own homes, but unable to care for themselves without significant assistance? In this context, elders engaged in boundary practices that reflect and even attempt to sustain the ambiguity of their social positions—better to be only partly independent than to be useless, invisible, and utterly unmade as a social person.

The peculiar link between houses as constitutive of independent personhood in Euro-American contexts is one example of the diverse and profound connections found between houses and persons across the globe. Janet Carsten and Stephen Hugh-Jones argue that houses, bodies and minds are "in continuous interaction" and that even as people make homes in their own image, they use them to "construct themselves as individuals and groups" (1995:2–3). In this way, they argue, houses become extensions of both the person and their subjectivity (1995:3). In old age, houses and the objects they contain can take on particular significance as reminders of worlds and moments no longer remembered by many others (Bahloul 1996). As is common around the world, homes were significant to older Chicagoans in part because of the ways that particular dwellings were invested with intimate memories, long-standing routines, and dense "webs of signification and affect" (Carsten and Hugh-Jones 1995:3).

For older Chicagoans, homes not only held memories, but also became central resources in their attempts to resist the unmaking of personhood. Indeed, across a wide variety of contexts discursive and material engagements with place figure critically into both the ritual and everyday ways people contend with social, life course, and spatial transitions (Lomsky-Feder and Rapoport 2002; Retsikas 2007; Schattschneider 2000). Spatial transitions in later life, ranging from transnational migrations to join kin to domestic relocations that place elders at the periphery of households, often signal elders' changing role in families and in social life more broadly (Cohen 1998; Hegland 2009; Lamb 2009; Rasmussen 2012)

(Hegland 2009; Lamb 2009). Across diverse contexts, the ways that people understand and articulate their relationships to the places they live impacts their subjectivities and their well-being (De Meis 2002) and can become a kind of resource for navigating social transitions. For example, Jean-Sebastien Marcoux shows how elderly Montrealers reconstruct themselves through the process of divesting their households, transforming themselves into remembered ancestors by placing household objects with kin in ways that guarantee the “survival of the subject and his or her memory” (2001:213). Across contexts, homes act as extensions of persons, offering a material medium with which to enact techniques of the self and social personhood.

Unlike places where spatial transitions invested older persons with new social roles, in Chicago, such transitions were seen as threatening and diminishing social personhood. Participants in this study viewed moving to a nursing home as inevitable if living in their own private homes became unmanageable and had hired home care workers to forestall or prevent such a move. Thus when I asked elderly Chicagoans what they would do if they came to need more help than they currently received, many avoided answering. For example, Eileen Silverman told me that she would try to pay for more days of care but “If I couldn’t get around on my legs any longer, I would have to think further. But there’s no sense in getting ahead of the story because I don’t know what will unfold.” Several elders who had recently endured temporary stays in hospitals and nursing facilities told me that they felt invisible in these institutions, noting that even as they were being treated physically, doctors and nurses would ignore their questions but respond to those of their family members. Thus, elders clung to their homes as a sign of their ongoing personhood even when doing so meant risking isolation and abandonment. Fearing racially changed and unsafe neighborhoods, restricted by treacherous stairways, uneven, sometimes icy sidewalks and inaccessible public transportation, many elders found that both they and the aging members of their social circles ventured out into the city less and less frequently. While some elders could rely on the busy members of younger generations of kin for periodic companionship and assistance, others’ kin were spread across the country. Thus, for many older Chicagoans receiving home care, workers became critical conduits between home and city, forestalling the possibilities that elders would be abandoned either by being trapped within their homes or unwillingly removed from them.

Amidst these threats, paid home care emerged as a kind of liminal practice (Butler 2000) mediating the threatened unmaking of older Chicagoan’s social personhood and thus forestalling social death. In a kind of metonymic everyday tactic, many older adults collaborated with their care workers, responding to the increasing liminality of their social personhood in part through material practices that modified the boundaries between their homes and the city. Following Michel de Certeau, I view these everyday tactics as “clandestine forms,” often used by marginalized people such as the elderly to “reappropriate the space organized by techniques of sociocultural production” (1984:xiv). The everyday tactics employed by older Chicagoans—modifying doorways, monitoring and controlling who and how people passed into and out of their homes, collaborating with workers to sustain or prevent engagements with their neighbors and neighborhoods—reappropriated boundary spaces as a way of resisting the impending unmaking of their social personhood.

Doors and doorways, Bruno Latour's (1988) archetypical example of the moral and social qualities of nonhuman "actants," organize space and direct the movements of people. Specific qualities of doors may enable the passage of some people rather than others, for example, the hydraulic door opener that Latour notes requires the "energy of an able-bodied person" (1988:302). Thus, unlike the transformation and chaos typically associated with liminality (Turner 1987), doorway moments and boundary practices are as likely to reinscribe individual subject positions and broader social distinctions as they are to transform them. Alaina Lemon argues that liminal moments often "demand the strictest declarations of identity. At some thresholds, doorways just as state borders, identity must be verified, whether engraved in a passport, on the body or in bodily demeanor. All is not in flux—there are recognized ways to cross" (2000: 205). Among older Chicagoans, this was no less the case than in the Romani households Lemon describes—elders' boundary practices reinscribed distinctions between themselves and those of different class and racial backgrounds while also facilitating ongoing relationships. In these threshold spaces, older Chicagoans and home care workers collaborated to manage the uncertainty of both liminal spaces and the liminality of old age, guarding against the potentially chaotic intrusion of strangers while enabling elders' continued engagements with community. Rather than lead to transformation, these liminal practices maintain older Chicagoans as recognizably independent, adult persons and help them sustain familiar subject positions.

Studying Home Care in Chicago

Between August 2006 and August 2008, I conducted ethnographic fieldwork with the employees and clients of two home care agencies in Chicago. The city is a long-standing urban laboratory for research examining the relationships between the social organization of space, racial, and class differences and well-being (e.g., Black Jr. 2003; di Leonardo 1998; Drake and Clayton 1993; Wilson 1987; Zorbaugh 1929). Unlike the majority of spatially oriented research in Chicago that examines the impact of the city's infamously segregated neighborhoods on social life and economic mobility, this project focused on life in domestic spaces across the diverse neighborhoods inhabited by Chicago home care workers and their elderly clients. Though not a central focus of this particular article, the findings should be read within the context of workers' relatively unusual experiences as they traversed the radically different social and material environments of the city's residential neighborhoods (as compared with the majority of the city's workers who commute between residential neighborhoods and concentrated commercial districts).

In the United States, home care workers are typically paid just over minimum wage and rarely receive paid leave, health insurance, or retirement benefits. Global care chains (Hochschild 2000), welfare-to-work programs, and a long legacy of African American women being pushed into domestic work pull a disproportionate number of minority and immigrant women into home care jobs; these women subsequently struggle to support their own families. Home care thus brings people with markedly different class, ethnic, racial, regional, and generational backgrounds into intimate, daily contact.

The first agency that participated in this project, which I call Belltower, was a religiously affiliated nonprofit that was paid between \$18 and 20 per hour directly by older adults or

their families for home care services. The second agency, which I call Plusmore, was a for-profit national corporation, provided need-based services to poor older adults through a contract with a State of Illinois. Older adults receiving services from Plusmore typically paid a small sliding-scale fee (ranging from \$0.35 to \$1 per hour) for home care services while the state paid \$13 per hour. While Belltower clients determined what kinds of tasks their workers performed, at Plusmore, a state-designed needs-assessment form was used to determine both which tasks workers were allowed to do and the number of hours of care the client was allocated. Plusmore's workers and clients were overwhelmingly African American women. Belltower, on the other hand, served almost entirely Euro-American older adults, while its workers were most likely to be African American, Puerto Rican, or Filipina, though they also employed a sizeable number of Polish and West African women. At the time of my fieldwork, Belltower paid workers a starting wage of \$6.75 per hour while Plusmore workers earned a starting wage of \$7.65 an hour.³ While some benefits and paid leave were available at each agency, very few workers qualified for them.

In agency offices, I observed supervisors' daily work fielding phone calls, managing workers, staffing cases, and mediating disputes. I also attended a number of supervisory home visits, training sessions, and staff meetings. In the process, I learned about hundreds of older adults and workers beyond those I was able to observe directly and was able to gain a broad sense of the kinds of concerns and challenges faced both by individual elders, workers, and each organization. My fieldwork also included six to eight months of intensive weekly or biweekly participant observation in the homes of four Belltower clients and three Plusmore clients during their home care appointments who were selected with the assistance of home care supervisors.

While the ethnographic observations I report here describe the particular homes and activities of this core sample, they were representative of a broad array of material and social practices I observed around the entrances of older adults' homes as I accompanied supervisors on home visits and among those older adults whom I visited (with their prior permission) as I attempted to secure their consent to participate in the weekly in-home observations. Though this ethnography coalesces around things that happened in a very small portion of elders' homes, they are situated within my broad participation in elders' and workers' daily routines. While observing home care interactions, I alternated between sitting with older adults, usually chatting or watching television, and assisting workers with their work. I asked workers to treat me as a trainee, which elicited a wide variety of moral and practical instruction about what they considered "good care." I also joined workers and clients on any outings to run errands or go to restaurants. I recorded semi-structured life history interviews with older adults and workers who participated in the weekly observations and with a variety of administrators, supervisors, and advocates.

³Plusmore paid higher wages than Belltower as a provision of its contract with the State of Illinois, but it was able to remain profitable largely based on economies of scale. While Plusmore served approximately 2,500 clients and supervisors managed caseloads of approximately 250 clients each. Belltower served about 250 older adults and supervisors' caseloads averaged 32 clients each. Beyond workers' and supervisors' salaries, significant agency costs included bonding and liability insurance, office space, and business overhead.

Passages of Strangers, Friends, and Persons

By the time I met Mrs. Meyer, an African American Plusmore client, she was in her late eighties and lived on the second floor of a two-story apartment building on the far western edge of the city. The neighborhood was composed of brick single-family homes and small apartment buildings. The once working- and middle-class black neighborhood had, as Mrs. Meyer noted, “come down” in the world and had struggled with petty crime, gang violence, and poverty in recent decades. Despite this, she remained in her apartment, a place filled with material reminders of her husband and two sons, who had all passed away. Most poignantly, her younger son’s bedroom remained filled with his posters, books, and musical instruments though he had died from a degenerative genetic disease more than a decade prior. Home, for Mrs. Meyer, had become a place where she was still surrounded by the clutter of family life. Despite the changes around her, she was determined to stay put for as long as she could in the place where she had been a wife and mother and where she remained a respected elder amongst her neighbors and friends.

Mrs. Meyer’s apartment had two doors—a heavily guarded front door and a comparatively unfortified back door. In many ways, the differences between these doors instantiated the hopes and fears Mrs. Meyer had about continuing to live alone as her health declined, with each door materially shaped by her bifurcated relationship to her community. The front door reflected Mrs. Meyer’s increasing wariness of her neighborhood and the outside world in general. The back door reflected her faith and commitment to her network of friends and neighbors and her hope that through their mutual support she might be able to remain at home for a while longer.

Mrs. Meyer, a former Cook County Sheriff’s deputy, and a survivor of Jim Crow Alabama, was vibrant, opinionated, and still deeply concerned about the well-being of both her intimate community of friends and family and her broader, national community. Her potent memories of driving executives to their homes in predominantly white suburbs as her own neighborhood burned during the 1968 riots only deepened her commitment to the neighborhood. A longtime and active supporter of Chicago’s Democratic party, Mrs. Meyer and I spent much of our time together in 2007 watching CNN and discussing the historic party primaries. While Mrs. Meyer remained deeply concerned about and engaged with the world in this manner, her active role in the community had drastically shrunk as her health failed and her mobility became more impaired. Struggling with pain from recurrent kidney stones and balance issues caused by diabetes-related neuropathy, going up and down the stairs felt particularly treacherous to Mrs. Meyer, and so she had only been out of her apartment twice in as many months when I met her. By this time, the vast majority of Mrs. Meyer’s interaction with the outside world occurred through her home care worker Loretta Gordon, over the telephone, or when people from her building and community stopped by to say hello or run errands for her.

These intimate, well-known visitors typically entered through the unlocked back door, and it was through this door that Loretta and I passed when we left the apartment to run errands or to go home at the end of the day. The back door was connected to the building’s back staircase, which led out to the alley that ran alongside the building. The door to the alley

locked automatically when it closed. Without buzzers for residents to remotely open the doors, it was only accessible to those carrying keys. In good weather, building residents could frequently be found in the alley below sitting on lawn chairs, drinking beer, talking, and barbecuing their dinners. This doorway was guarded not by buzzers, locks, or alarms but by the watchful eyes of Mrs. Meyer and her neighbors who quickly reported sightings of unknown people in the stairwell to one another to ascertain whether the person was a legitimate guest or a possible threat. When Mrs. Meyer's neighbors came by, they ceremonially knocked once on the back door and then poked their heads into the kitchen. Sometimes these neighbors called ahead to see if Mrs. Meyer was available, but just as often they stopped by quickly to check in on her, share gossip, or help her with some small task. One longtime neighbor in particular kept a particularly good eye on her, unlocking the front door if Mrs. Meyer expected guests during the day. Mrs. Meyer told me that if "he's going to leave, his girlfriend will call [and say] 'We're going to the store and we'll be right back. Lock your doors. Do you need anything?' ... That's helpful."

Mrs. Meyer cherished her relations with neighbors and told me about another who lived across the street and "calls 50 times a day." When this neighbor phoned, Mrs. Meyer would sit at her kitchen table, overlooking the back alley, and the neighbor would "tell me what's happening in the front and I tell her what's going on in the back. She says 'You busy or something? Something is going on up there.' What I'm saying is I do not know how long [this arrangement will last] ... my life is like full." The back door, accessible only to neighbors and guarded by their shared knowledge and care, represented one of the many reasons Mrs. Meyers was anxious to stay in her apartment. Through the back door, she was known and protected, able to live a full and meaningful life as a valuable member of a vibrant social world. Unsaid in her unfinished sentence "I do not know how long ..." was her looming anxiety that she would soon be unable to stay in the apartment with just the few hours of help a week allocated to her by the state. And yet, as long as she could remain surrounded by neighbors who cared for and protected her and amongst whom she had an honored role, she felt her life was full.

The front door of Mrs. Meyer's home offered a different picture of what aging at home meant to her. This was the door through which I entered at the start of each visit, even though I left by the back door. It was also the door through which multiple bureaucracies of care—represented by social workers, visiting nurses, emergency services, home care workers—arrived. To get to Mrs. Meyer's apartment, I would first enter the building courtyard's small wrought-iron gate and then walk to the back corner of the courtyard and ring a buzzer to let Mrs. Meyer know I was there. There was no intercom on her buzzer, so I always tried to phone her earlier in the day to let her know when I would arrive. After buzzing, I usually waited a minute or two before hearing the buzzer that signaled that the door was unlocked. More often than not, once I passed through this first door, I was left locked in an entry vestibule littered with advertising circulars and unclaimed mail until Loretta came down to let me through.

Each day, the routine was the same: I followed Loretta up a long flight of stairs and opened the door to Mrs. Meyer's apartment, and as we walked through her apartment door, I invariably jumped backwards, startled by the shrieking electronic alarm that sounded each

time the door was parted from the doorframe. Laughing at what eventually became ritualized, but no less sincere, fright, I would enter Mrs. Meyer's apartment after Loretta and turn to resecure Mrs. Meyer's front door. In addition to the electric alarm, the door had a doorknob lock, a dead bolt, and a chain lock. To further block unwanted entry, Mrs. Meyer wedged a long metal rod capped with a forked plastic piece between the doorknob and the floor. Finally, the door secured, I could enter Mrs. Meyer's apartment. Mrs. Meyer told me that I was not the only person who entered her apartment in a state of mild physical shock because of the alarms. She took these reactions as a sign that her apartment was well defended.

Unlike the back door, the front door was Mrs. Meyer's connection to the anonymous and unknown world beyond her community of neighbors. Mrs. Meyer could never be certain who would enter through the front door, and she worried that new residents in the building were not careful enough about whom they buzzed through the downstairs door. She had no faith that law enforcement could protect either her possessions or her safety. She felt that many of the health and social service professionals that entered through this door seemed more concerned with filling out forms and checking boxes than with building a relationship with her. The many fortifications of her front door were manifestations of these anxieties, signs that she felt abandoned, unprotected, and unknown by the neighborhood and public services beyond her intimate community.

Her two doorways, one guarded by her neighbors and the other barred to potentially dangerous strangers, were a form of everyday tactics that instantiated Mrs. Meyer's complex relationship to home and her ongoing liminality. Amidst radical changes to her neighborhood, Mrs. Meyer acutely felt the threats of the outside world and her attachments to her neighbors. As Mrs. Meyer aged, her home remained the material embodiment of her earlier family life and enabled her valued participation in the local community of friends and neighbors that traversed her back door. Once removed from these places, Mrs. Meyer feared that she would no longer be thought of as a wise elder but rather as the person she feared becoming through the world of the front door—a vulnerable, sickly, dependent, and bureaucratically managed patient.

Guarding Passages, Maintaining Distinctions

Regardless of what kinds of assistance older Chicagoans needed to continue to live in their own home, for many, maintaining the boundaries separating their private residence from the broader community was an important signifier of continued personhood. Many were frustrated by the ways that their increasing need for assistance created cracks and fissures in what they argued were previously self-sufficient lives, especially by the ways that their lives and homes became subject to increasing surveillance and government regulation through their involvement with home care agencies. Indeed, as home care workers entered elders' homes so too did a variety of government laws, agency rules, and market pressures that had to be negotiated alongside older adults' preferences. For example, many elders complained that due to agency policies, which were in turn driven by government occupational safety laws and insurance company guidelines, home care workers were not allowed to climb on stools or lift heavy objects. This meant that workers technically were not allowed to dust

ceiling fans, retrieve objects from high cupboards, or carry overly large loads of laundry and heavy grocery bags. Elders' daily lives, and the work of those they often viewed as their domestic servants, were no longer squarely subject to their preferences, which elders keenly felt as a loss of the prerogatives of private property.

Elders experienced these changes as losses of self-determination over both their bodies and their homes, both of which became increasingly subject to public and bureaucratic regulation. In the face of these incursions and the broader context of threats to personhood faced by aging Chicagoans, some engaged in both material and discursive practices reinforcing autonomy through their control over the boundaries of their homes. These boundary practices constituted forms of domestic exclusion and domination that reinstated racial, class, and other social distinctions.

Receiving publicly funded services, including home care from Plusmore, presented additional threats to the social boundaries of older adults' homes, and several elders took specific measures to reassert these boundaries. For example, Harriet Cole, an African American Plus-more client in her early eighties, ritualistically spread borax powder around the perimeter of the publicly subsidized senior housing apartment on a regular basis and insisted that visitors immediately remove their shoes upon entering. Several years before we met, Mrs. Cole moved to the city-owned building following the death of her husband. Facing diminished economic circumstances and unable to manage the large, ornate home they had shared on Chicago's south side, Mrs. Cole was eager to make sure I knew that she was an entirely different kind of person than her neighbors, despite their shared address and racial background. Though Mrs. Cole had grown up in a working-class household, she had moved into the city alone as a young woman, eventually modeling for a prestigious African American magazine and later becoming a successful insurance saleswoman specializing in selling policies to black clergy across the city.

The borax, Mrs. Cole told me, prevented the cockroaches and ants that she was certain infested the apartments of her "filthy" low-income neighbors from breaching her walls. Merely sharing a building with other elders who relied on publicly subsidized housing was threatening for Mrs. Cole, who worried that their filthiness—which she deduced only from their need for public housing assistance—would contaminate her home and life. She refused basic social contact with those in her building, denying requests to borrow sugar and the like, while maintaining her strong relationships with friends she had made through work and church. Marking the boundaries of her home chemically as well as physically, Mrs. Cole attempted to reassert her position as a member of Chicago's black elite.

Home care workers often represented an incursion of the formal, public workplace into the privacy of elders' domestic lives, a process that felt like a violation to many older Chicagoans whose ideas very much reflected long-standing discursive distinctions between public and private (Gal 2002; Zelizer 2005). Some older adults resisted these intrusions by asserting private property rights that allow individuals to decide who can and cannot enter their home. For example, it was relatively common for new clients at both agencies to make discriminatory requests regarding the personal characteristics of their home care workers.

Since the agencies, and not elders, were home care workers' employers, the laws prohibiting employment discrimination did not directly apply to elders.

At Belltower, new clients often informed supervisors that they did not want workers from particular racial or ethnic backgrounds, sometimes stating their biases outright, and other times veiling their bigotry behind oblique objections to workers who cooked or ate "smelly food," which supervisors learned was code for the fish sauce integral to many Filipina dishes. Though Belltower supervisors were deeply critical of racist older adults and attentive to their agency's responsibilities as an equal opportunity employer, they generally accommodated older adults' discriminatory requests. Supervisors argued that even though they morally objected to these kinds of requests, they honored them because they could not force a client to let someone into their private home that the client did not want there. Because different clients discriminated against people from different backgrounds (i.e., some elders refused black workers while others refused Asian workers), supervisors did not have to turn away qualified workers of any race and argued that it was better to comply with racist clients' demands than to send a worker into a bigoted household. Of course, given that Belltower competed with other agencies and individual providers, it was also true that Belltower risked losing clients if it refused to provide services to people who expressed racial biases.

At Plusmore, on the other hand, supervisors quickly cut off elders' requests for particular kinds of workers. The majority of Plusmore's workers and clients were African American, and racially discriminatory requests were relatively rare. Rather, clients were more likely to request older workers, concerned that younger workers would be unreliable. Plusmore supervisors typically pushed back against these requests, knowing that their clients had been assigned to receive services from the agency by the state and could not easily switch to another provider. Several Plusmore supervisors expressed to me that their clients, as recipients of publicly funded services, should feel grateful to receive services at home and not be overly particular about what kind of person provided it. Plusmore supervisors' caseloads were six to seven times larger than caseloads at Belltower, and thus they were less able to spend significant amounts of time matching workers with older adults who had complementary personalities and needs. Plusmore clients told me that the agency might send them eight or 10 inappropriate or inadequate workers before it sent someone they felt comfortable having in their home. Plusmore clients thus faced multiple threats to their autonomy. In particular, their inability to maintain their homes without direct support from the state created increasingly porous boundaries between their homes and the outside world. Mrs. Cole's borax was thus one attempt to reverse this form of unmaking by reinforcing the boundaries of her home.

From the moment an older adult made contact with either home care agency, the various moral orders organizing distinctions between public and private began to impinge on one another in new and uncomfortable ways. In a context in which adult persons were recognized in part by an individuals' ability to inhabit dwellings within which the state, the market, and other "public" institutions had sharply curtailed access. In this context, older adults' attempts to exclude groups they deemed unacceptable from their homes were also attempts to recreate their homes as private dwellings and themselves as still independent

persons. These exclusions were everyday tactics elders used to sustain their subject positions, often by asserting the racial and/or class privileges that went along with these positions. The material and discursive barriers elders erected to prevent their homes from being infiltrated by unwanted others were thus also barriers against elders' social unmaking.

Remaking Passages and Relations

Unlike Mrs. Cole and Mrs. Meyer, John Thomas, a 95-year-old Euro American Belltower client, was significantly less concerned about dangerous neighbors and more concerned about his growing isolation and loneliness. A former debt collector for one of Chicago's large candy companies, Mr. Thomas and his wife had purchased their small, single-story, three-bedroom home in a modest middle-class suburb in the early 1950s. They raised their son in the home and lived there together until Mrs. Thomas died three years before I met Mr. Thomas. Since his wife's long illness, Mr. Thomas' social life had contracted rapidly, as he had clearly relied on her to organize and sustain their relationships—activities he considered part of women's role. The neighborhood had changed substantially and had in recent decades become one of the most expensive suburbs in metropolitan Chicago. Modest single-story homes were rapidly being replaced by homes with three and four times the square footage, and some homes took up multiple lots, causing Mr. Thomas' home care worker Doris to speculate that they looked more like supportive group housing for people with disabilities than single-family homes. A shy and somewhat introverted man, Mr. Thomas rebuffed his social worker's idea of joining a men's group at the senior center, telling me that he was always busy on the day that it met. By the time I met Mr. Thomas, his only regular social contacts besides Doris were with the waitresses at two local restaurants and his longtime next-door neighbor who looked in on him most days and invited him to join her and her husband for a glass of wine several evenings a week.

Though Mr. Thomas had initially resisted the idea of hiring a home care worker, he was finally convinced after falling while carrying laundry to his basement and then again during a long bike ride. Though he appreciated that Doris relieved him of the daily upkeep of his home, he was even more appreciative of her company. Mr. Thomas told me that before Doris, he had struggled to eat and had lost a worrisome amount of weight. Doris not only prepared food for him to eat when she was not there, but she accompanied him to breakfast at a favorite restaurant and then later to lunch at a favorite bar at the beginning and end of nearly every one of her workdays, often working unpaid overtime to do so. Mr. Thomas also went to these restaurants when Doris was not working and seemed to be a favorite customer of waitresses at both places because of his shy but delighted responses to their playful and flirtatious banter. He once joked with me that they reminded him of the secretaries who had worked for him at the candy company. Doris' company, however, shifted the experience of these interactions. As Mr. Thomas told me, his favorite thing about having Doris around was that "I have someone to talk to ... she keeps me up to date about her family, which is interesting." Through her presence and conversation, Doris helped Mr. Thomas sustain connections to the social world beyond his home. Doris not only encouraged him to leave his house, but shifted his social experience of these crossings—in contrast to the brief moments of banter with waitresses, he was able to engage more deeply with her and took an interest in her ongoing problems with her children and grandchildren.⁴ Doris also kept track

of Mr. Thomas' medical appointments—cajoling him into scheduling regular checkups even if he might have preferred to avoid them. When I went with them to an eye doctor's appointment, I observed that Doris also had an encyclopedic knowledge of Mr. Thomas' various health issues and made sure to ask the nurses and doctors a wide variety of questions about his health, new treatments she had read about, and possible interactions between his various prescriptions. Through these activities, Doris not only ensured Mr. Thomas' physical health, she also facilitated his relationships and ventures outside of his home, helping to insure that he would not be forgotten and abandoned inside its walls.

Beyond her regular routine accompanying Mr. Thomas out into the community, Doris also helped Mr. Thomas interact with his neighbors. For example, a few weeks before Christmas 2006, Doris decided that she would take a little of her time to decorate Mr. Thomas' front door in honor of the approaching holiday. To do so, she used her own money to purchase a roll of pale metallic blue paper with a snowflake Star of David pattern, a plastic pine branch, and a bag of multicolored preformed stick-on bows, all of which she found on sale at a store in her neighborhood. Mr. Thomas' son was visiting that week, and Doris quickly enrolled us to help her in her plan to cover the entire front door with the wrapping paper and to construct a wreath out of the pine branch and bows. Mr. Thomas' son quickly noticed that the wrapping paper was probably not intended as seasonal winter paper, but rather for Jewish Hanukkah celebrations, which had ended about a week earlier. Mr. Thomas' son told me privately that he was concerned about what his father's reaction to this plan would be, given that taping paper on the door would never have been allowed by his mother and that his father had, in the past, expressed anti-Semitic sentiments. Yet as we cut and measured the paper, Mr. Thomas looked on, seemingly bemused by the way Doris had put us both to work. When I returned to visit Mr. Thomas the following week, he told me that he was really enjoying the decorations on his door and that many of his neighbors had stopped by to compliment them—it was unclear to me if he had even recognized the Jewish symbols on his door. Though Doris' stated intention was simply to bring a bit of holiday cheer to Mr. Thomas' life, by choosing to decorate the door instead of another part of the house, she had also (perhaps inadvertently) created a social opening for him to have more interactions with his neighbors.

Though the changes in Mr. Thomas' neighborhood were the near opposite of those experienced by Mrs. Cole and Mrs. Meyer, they nevertheless threatened to leave Mr. Thomas isolated after his wife died. Unlike the two women, however, Mr. Thomas did not perceive his new neighbors as threatening and welcomed the chance to interact with them more, but he found himself uncomfortable actively pursuing social engagements. Instead Doris eased Mr. Thomas' passage between home and city, decorating his door and playing the familiar role of a female social companion who organized and facilitated his social life. Doris thus sustained Mr. Thomas' masculinity and personhood through the enriched sociality she brought with her when she entered his home and through her material

⁴According to the Belltower employee handbook, Doris was not supposed to reveal the intimate details of her personal life to clients, however Mr. Thomas specifically told me that one of the things he most enjoyed about having her in his life was talking to her about her personal life and problems. These entanglements were not without consequence, since Mr. Thomas' concerns about her family's well-being led him to loan her considerable amounts of money—an example of exactly the kinds of consequences home care agencies seek to avoid by prohibiting workers from disclosing intimate details of their lives (Buch, 2014.).

modifications to his door. Though Mr. Thomas' boundary practices were quite different from those of Mrs. Cole and Mrs. Meyer, perhaps reflecting their different class, racial, and gender positions, for each, material modifications and the social management of their doorways and passages to the city were central to sustaining personhood.

Conclusion

Discussions of life course transitions and especially rites of passage often implicitly suggest that people and communities view such transformations as accomplishments. Even when people do not welcome challenging transitions, anthropological accounts often portray everyday forms of change and rites of passage as proceeding progressively, with people moving steadily through the various stages of both rituals and life. Chicagoans receiving home care services instead sought to resist significant transformations their everyday lives, social relations, and personhood. Faced with understandings of successful aging and social personhood as depending on their sustained independence, even those who had welcomed change earlier in their lives often became resistant to it as their need for care increased and the social threats of dependence mounted. While these anxieties manifested in multiple aspects of elders' daily lives, they were most visibly negotiated around the doorways of their homes, which they altered through a range of everyday material and social tactics. Elderly Chicagoan's tactics around the doorways and passages of their homes remind us that some transitions may not be so welcome, especially when they promise only diminished social status and threats to subjectivity.

These cases also suggest that theories of personhood and subjectivity must account not only for change across the life course, but also for how social, material, and bodily resources intersect with these complex processes. Theories of personhood must thus consider which kinds of persons are able to successfully pursue valued social roles at different stages of the life course and how the possibilities for personhood vary depending on the kinds of resources people have access to. Older Chicagoans' attempts to manage the social and bodily threats they experienced as accruing in later life reveal the mutual entanglements of material things, persons, and social distinctions. Across cases, elders drew upon and altered particular material qualities of boundary spaces to cope with specific social and bodily changes that were altering their relationships to home and thus their social personhood. For nearly all the elders I met, increasing physical frailty remade homes into spaces of vulnerability—spaces within which elders feared becoming ill or injured while alone. For some elders, changing neighborhoods and the entry of strange care workers rendered homes newly vulnerable to untrustworthy outsiders. Managing the thresholds of their homes such that known and trusted others remained engaged in their lives while minimizing the entry of uncaring bureaucratic regimes and dangerous strangers became a central preoccupation for many older adults. In part, the kinds of persons elders could be depended on the material resources and environments available to them—it is not the same thing to sustain independent personhood in an increasingly dangerous neighborhood as it is to do so in an increasingly affluent one, nor is it the same thing to sustain independence in a public senior housing apartment as it is in a private apartment. At the same time, elders, sometimes in collaboration with workers, creatively employed everyday tactics using the material resources available to them—locks, alarms, borax, decorations—to alter these thresholds,

thus adapting the environment to sustain their social relations and personhood. Across cases, elderly Chicagoan's efforts to sustain personhood and social position through boundary practices suggests that creativity and capacity for social action were not necessarily diminished in later life but instead redirected to protect social personhood.

While periods of liminality are classically considered chaotic moments in which social order is held at bay, the extended liminality experienced by older Chicagoans receiving home care services suggests that liminal periods may depend on and reinforce social distinctions. Given elders' diverse social and material positions, it is perhaps not surprising that their efforts to resist social unmaking took multiple and often shifting forms. Across these differences, the boundary practices elders used to sustain social personhood frequently depended on their economic, racial, and gender privileges. Elders' abilities to maintain meaningful social distinctions in their lives were also constrained by their economic status and related changes in their neighborhood environments. While some elders asserted private property rights to exclude particular kinds of workers from their homes altogether, others altered the doorways and boundaries of their homes to better distinguish between trusted neighbors and dangerous strangers. Those who relied on public programs for housing and home care were not only more likely to live in dangerous neighborhoods, but they also found it more difficult to resist being incorporated into homogenizing bureaucratic systems—perhaps leading to more extreme exclusionary boundary practices like Mrs. Cole's borax or Mrs. Meyer's heavily fortified front door. By contrast, remaking Mr. Thomas' subject position after his wife's death meant finding new ways of engaging the world outside his door, perhaps reflecting the different challenges of sustaining personhood for men and for those with greater economic means. Periods of social liminality thus not only transform persons and social relations but can also reproduce broader forms of privilege and inequality.

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