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Author: E. Kay Trimberger

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E. Kay Trimberger*

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*E. Kay Trimberger is an affiliate at the Center for Working Families and a sociologist and professor in the Women's and Gender Studies Department at Sonoma State University.

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Abstract

Friendship Networks and Care

Based on her own research and a survey of both quantitative and qualitative social research, the author demonstrates the importance of care by a network of friends for the elderly, the seriously ill, single adults, singles mothers and in times of crisis. Although women predominate as friends who care, the response of gay men to the AIDS epidemic demonstrates that such care does not have to be gender specific. The author discusses the limits of such informal care, and argues for greater cultural recognition of care by friends as distinct from family, and for changes in social policy.

Defining nurturance as women's work, or limiting its expression to the family context, only abandons the public world to utilitarian market values. Instead, we might well look to friendship as a model for the way people ought to behave toward one another -- envisioning a society based on nurturant values of community and caring in the public realm as well as in the domestic.¹

Friendship networks are part of what sociologist Karen Hansen calls the *social world*, embracing "activities that transcend individual households and operate independent of the state."² Such networks provide significant care for adults in the U.S., but this care is usually culturally invisible or devalued. In both the popular media and academic literature, I find evidence of friends providing the support and care that we relish in good times and need in bad. I find, in addition, that this evidence is overlooked as reporters and experts focus primarily on families, the market (paid care), and care mandated by the state (welfare, social security, family and medical leave). These sources of care are, and will remain, important, but the care provided by friends needs recognition and discussion about its strengths and weaknesses. Care provided by a network of friends is more public than family care, but more personal than paid or state-provided care. Informal friendship networks can provide the personal and empathic touch too often missing from state and market care and can furnish shared personal care beyond a small family group. Because friendship is not culturally validated as a source of care, however, it is less dependable than family, state, or paid care.

Starting on September 15 and continuing for more than three months, the *New York Times* everyday printed a page entitled *Portraits of Grief*, short vignettes of the lives of those who died in the September 11 terrorist attack. These portraits offer brief but haunting stories of vibrant and active lives. Reading them day after day paints a picture of the diversity and vitality of ordinary Americans. The *Times*, in editorializing about its series, said on October 14: "The bonds of family -- no matter how you define family -- are palpable in every story." Families are prevalent in the portraits, but not necessarily in every story. I found another, unmentioned theme: the importance of friends.

I saved the *Portraits of Grief* pages for twelve days (October 9 - 20) and analyzed them. Of the 176 people portrayed during this time, 56 (32%) mentioned friends in their lives. This number is impressive given that *friendship* is as culturally invisible to the *New York Times* reporters who write the vignettes as to those they interviewed (usually family members). For nine of the dead, friendship was mentioned in the headline that introduces each vignette. Most impressive were two young women who were portrayed together under the title *Best Friends Forever*. Both 32-year-old Hispanic women were married, and one had a child; but their friendship, initiated in their teens, defined their lives. More than half of the portraits that mentioned friends were of single women or men, but 45% of those for whom friends were important were married. One story of a married man was entitled *Instant Friends* and focused on the friends this contractor made everywhere he went.

The *Times*, in other stories about the impact of the terror on survivors, documents the importance of friends, but hides it in how it frames the account. Marshall Sella, in a wonderful article, "Missing: How a Grief Ritual is Born," in the October 7, *New York Times Magazine*, discusses the impact of the posters and pictures of the missing plastered all over New York City after the terrorist attack. A colleague who knew one of the victims discussed in the story pointed out a crucial error. Sella said: "The family of Lindsay Herkness III, a Morgan Stanley executive, used various greeting cards he made last Christmas, each of which bore a picture of him with a joke caption." But my colleague, who knew Herkness, told me his friends posted these flyers around town. Herkness had never married and had no children. His parents were dead, and he had no full-siblings. But he had a wide network of friends. Sella does highlight flyers created by the friends of Lucy Crifasi, a 51-year-old consultant. The first lines in the very next paragraph, however, ignore Lucy's friends as Sella generalizes about "the family members who devised the posters."

"Being Single in New York Is a Little Lonelier Now" is the title of a September 30th *New York Times* article by Ginia Bellafante. The report begins with a sketch of a single woman in her late thirties with many friends, but who in the wake of the crisis felt really alone and wished she was coupled. Bellafante then discusses two single women in their twenties, one of whom now "understands the value of belonging to someone" and the other who decides to move back home to Georgia. But the whole second part of the article is subtitled "Friends Become More Important than Ever." It documents a large number of single New Yorkers who, rather than seeking "solace in another's arms," renew their "ties to friends, a neighborhood and city life." Bellafante quotes a midtown psychotherapist who said that she had not heard anyone say she or he wished to be married, but kept hearing about the "overriding importance of friendships."

Perhaps sensing that this part of the article was contradicting the headline, Ms. Bellafante concludes that "if there is one broad feature of Manhattan social life that has been most evident during the present upheaval, it is the intensity with which single New Yorkers create surrogate families out of friends." But if our friends are really just another form of family -- or a substitute until we have a *real* family -- then we don't have to recognize friendship as an important social reality in its own right.

Turning to social science literature provides additional quantitative and qualitative evidence of the importance of care provided by friends. This evidence demonstrates that the single and childless have more need for care from friends and contribute more to care for their friends, but that nuclear families who face a serious illness or other care crisis can best deal with it when they too have support from a network of friends.

Quantitative Evidence for the Importance of Care by Friends

Political scientist Robert Putnam, in his much discussed book, *Bowling Alone*, compiles a large quantity of survey data that documents a decline in participation in both informal and formal community groups in the U.S. over the past 40 years. Despite this decline, Putnam found that in the 1990s, informal social ties with friends were still strong. He says:

Three-quarters of all Americans got together at home with friends at least once during the month, and the national average was three such soirees per month. . . . [T]he average American spent roughly half an hour each week on organizational activity (not counting religion), but more than three hours a week visiting with friends.³

Moreover, Putnam finds that single people spend more time than those who are married in informal socializing with friends and neighbors.⁴ Twenty years earlier (in the late 1970s), a quantitative study by sociologist Claude Fischer found that the never-married and childless had more friends and spent more time with them, but married couples had closer relationships with neighbors.⁵

Another quantitative study shows how friendship and community ties translate into personal care work. Dr. Jody Heymann, director of the Harvard University Center for Society and Health, followed a representative sample of 870 adults across the U.S., speaking to the participants every day for a week about whether they had to cut back paid work for care work. She found that 42% of cutbacks were to care for the respondent's own children, 15% to care for parents, 12% to care for spouses or partners, 7% to care for grandchildren, and fully 24% to care for other adults, including other relatives, friends, and neighbors.⁶ Heymann's study points out the deficiency of the Family and Medical Leave Act, which limits unpaid leave for "family" care to parents and children and thus would deny leave from work for 24% of those who need to care for people outside the nuclear family. Not only does the FMLA deny workers leave to care for friends and neighbors, but it does not permit care for brothers or sisters, aunts or uncles, nieces or nephews, nor for parents-in-law. In addition Dr. Heymann found that respondents with no children were more likely than those with either children under 18 or adult children to provide care for parents and much more likely to provide care for other adults.⁷

A number of quantitative studies document the unprecedented mobilization of networks of people not related by traditional family ties to care for gay men with HIV/AIDS. Within the contemporary gay community care is provided primarily by those not traditionally seen as care givers – young men between the ages of 20 and 50 giving care to peers who are not related by blood or legal marriage. Using large samples, these studies find that friends provide about as much care as live-in lovers and far more than family members. Networks of gay men who provide care for lovers and friends hope that a similar network will care for them if they become ill.⁸ One study concluded: "Researchers and policy makers have begun to recognize the valuable contributions of this nonprofessional, non paid national health resource."⁹

These three types of quantitative studies indicate the need for care researchers to expand the focus of their research beyond care given in nuclear families. Qualitative research provides additional support for the importance of care provided by friends.

Qualitative Data Supporting the Significance of Care by Friends

During 1994 and 1995 I conducted group interviews with forty middle-class women between the ages of 30 and 60 who had lived at least half of their adult lives single and outside of marriage. I found many illustrations of the importance of care given by friends. Even single women in their thirties with no children often needed not just emotional, but material, help from their friends. Here are two examples:¹⁰

Jennifer is a tall, attractive, energetic woman who, at age 30, has never been married and lives by herself. She is a graduate student in social welfare who likes to care for others, but thinks of herself as self-reliant. When she broke her leg in a skiing accident, she got some help from family members who lived nearby, but relied mainly on a network of eighteen friends. They drove her places, shopped and cleaned, fixed meals, but also took her to a movie or stopped by for a chat. In my interview with her, she remarked that some people might see such a health crisis as a reason they need to find a partner to live with. But Jennifer felt the opposite. Even though she is looking for a partner, she feels that such neediness is very hard on a primary relationship. If she had been living with someone, she wonders if her friends would have been as forthcoming.

Maria, a thirty-one-year-old divorced woman with no children, is in graduate school at an elite university. She grew up in an immigrant family, and both her mother and father were farm workers when she was small. Later her father worked in a garment factory and was a custodian. Her mother worked in a child care center. Her mother, especially, is very proud of Maria's educational success. She is emotionally supportive, but can give Maria little financial assistance and doesn't really understand her new world. Hence, Maria relies on friends (whom she distinguishes from colleagues and acquaintances) not just for emotional support, but also for material and sometimes financial aid. Maria has had to borrow money from friends. Once a friend drove Maria's mother home – one hundred miles round trip -- when Maria's car broke down.

The importance of friendship networks for single adults was identified by sociologist Margaret Adams in a 1970s study of long-term single, childless adults.¹¹ Adams found that those who were most satisfied with their single life had what she called "top ten people" – those whom they could turn to "without reservation for immediate succor in times of distress or, contrariwise, for the support of reciprocal pleasure on occasions of unusual happiness."¹² Single and married

friends were most prominent in the top ten, although most lists included some relatives, not parents, but siblings, cousins, nieces, nephews, etc.¹³

Qualitative studies on the response of the gay community to the AIDS crisis support the quantitative work discussed previously showing that strong bonds of friendship became the basis for a cohesive gay community that was essential for both slowing the spread of the virus and supporting those who developed AIDS. Andrew Sullivan, in *Love Undetectable: Notes on Friendship, Sex and Survival*, eloquently espouses the virtues of friendship.

The duties demanded in a plague, it turned out were the duties of friends. . . . Denied a recognized family, often estranged from their natural one, [gays] had learned in the few decades of their free existence that friendship was the nourishment that would enable them to survive and flourish. And having practiced such a virtue in good times, they were as astonished as everyone else to see how well they could deploy it in bad.¹⁴

Sullivan's observation is supported by anthropologist Kath Weston's research (using ethnographic observation and intensive interviews) on gays and lesbians in 1980s San Francisco before the major onset of the AIDS crisis. She found that gays and lesbians believed that they gave greater significance and respect to friendships than did heterosexuals.¹⁵ A number of personal accounts document the support provided by friends to those suffering from AIDS.¹⁶ Both the quantitative and qualitative studies documenting the care provided by gay male friends suggest that differences between female and male friendships may be exaggerated or situationally based.¹⁷

Researchers who have reviewed the literature on friendship among older adults find that friendships are more important than family relations for morale and well-being in old age. A network containing a number of friends is especially important for well-being among the elderly.¹⁸ Susan Crohan & Toni Antonucci conclude: "Because friends have more in common than family members, due to their shared cohort experiences, life-styles and interests, they often serve to involve older persons in the larger society more than family relationships do.¹⁹

These findings are supported by sociologist Arlie Hochschild in an ethnographic study of a group of white, working-class widows living in a publically subsidized small apartment building in the Bay Area in California in the early 1970s. Most of the thirty-eight women had strong family ties and family living nearby, but preferred to live in their own apartment. On a day-to-day basis they relied more on friends for social interaction, emotional support and for giving and receiving care. A lot of the social interaction among the women -- and the five men who lived there – was equal and reciprocal. They shared food, visits, and excursions to church and community events pretty equitably. But Hochschild found a number of instances of caregiving by the younger, healthier residents for those who could not reciprocate. Within a network of friends, the care given now to those more needy could be expected to be returned by others in the future.²⁰

Journalist Peggy Orenstein, in her book, *Flux: Women on Sex Work, Kids, Love, and Life in a Half-Changed World*, contrasts the negative view of single life held by young women in their thirties with the positive experiences of older single women. Orenstein seemed surprised to find that many "career women" who were single and childless in their fifties were often very feminine and had put their "domestic" skills to work in a wider network. Orenstein gives the example of Roseanne Petetti, a divorced account executive in Brooklyn:

Despite her iconoclasm, she was actually one of the most conventionally feminine women I met, in that she values care-taking and community over everything else in her life. At first that seemed incongruous: On one hand, she was a sexual adventurer, a free spirit, disinterested in a live-in relationship. On the other, she spoke most proudly of the lifelong multi generational ties she'd formed not only with her siblings' children but with neighbors, with friends' children and with the elderly. . . . Her experience [which was not unique among the never-married, divorced, and childless women I interviewed] illuminated the opportunities for nurturing, creative expression, social contribution and self-development outside traditional boundaries.²¹

A final example of the importance of caretaking through friendship networks is seen in a study of single mothers by choice conducted by Rosanna Hertz and Faith Ferguson. They studied fifty self-supporting women who chose to become mothers as unmarried women between the ages of 21 and 50, who varied by race (40% minority or interracial) and class (waitresses to lawyers, women who make less than \$20,000 a year to women who make \$130,000). The women in this study were unmarried and not living with either the father of the child or a romantic partner at the time of birth or adoption or at the time of the interview.²² Although most of these single mothers

had quite traditional values, they were raising their children outside of a conventional family. Hertz and Ferguson found the following:

These women are highly enmeshed in mutually supportive networks of friends, kin and childcare providers to help raise, not simply care for, their children. . . . These single mothers are on the vanguard of creating a circle of "others" to care for their child so they can remain employed. Mothers in this study report not only do they rely upon other adults, but their children have woven close and exclusive relationships with these individuals. . . . At a time when neighboring has declined, these women actively foster exchange relationships with neighbors for the children's benefit, but also to provide themselves with an emotional cushion, backup help and a sense of community belonging. . . . In sum, the women are challenging the sanctity of the nuclear model of family, by developing a broadbased network model. . . . These relationships are cultivated by the women prior to their having children. When children arrive, these mothers mobilize friends and kin . . . to become essential players in the child's life.²³

Friendship and Care

All of these studies lead to the conclusion that it is a friendship network, not just one best friend, that is essential for effective care work outside the family. All emphasize that the friendship network is established long before the care is needed, or even envisioned. Hence, the emotional support provided by networks of friends in young adulthood – friendship networks depicted on popular TV shows like *Friends, Seinfeld,* and *Cheers* – becomes the basis for a combination of instrumental and emotional support by friends for mature and older adults. Care provided by a network of friends spreads the burden among a number of people so that no one person is overwhelmed.

Such a friendship network to care for an ill or dying person can be highly structured. *Share the Care* is a manual written by Cappy Capossela and Sheila Warnock based on their experiences in creating a group of twelve friends (most with busy careers) to provide more than 3 years of care for a divorced friend in her forties dying of cancer. The network was able to provide the "deep personal attention that bureaucracies cannot give and that geographically dispersed families cannot provide."²⁴ Most of the friends in the care network did not know each other, and some were only colleagues or acquaintances. But all got a sense of satisfaction and often experienced personal growth by participating in a structured group where no one was

overburdened, where everybody did a little, where they could choose tasks they liked or wanted to do at times that fit into their lives and schedules. Participants in the care group took care of each other and many made new friends. All felt less alone in the world and more confident that friends would come through for them if they faced a similar health crisis.

In mainstream American culture, friendships are voluntary associations based on a spirit of free choice, equality, similarity, mutuality and affection.²⁵ Friendship is not socially ascribed, demanded or coercively imposed.²⁶ Therefore, care given by friends may be more genuine and supportive than that provided by families. Same-sex friendships avoid the gender inequity so prevalent in family and market care.²⁷ Friendship allows for more personal autonomy than family relationships, and care through a large friendship network does not create the loss of personal independence that care by one or two family members entails.

Because friendship in the U.S. is not culturally validated as a source of care, there are limitations to care provided through friendship networks:

- Friendship is not institutionalized in the manner of marriage or family relations, and hence obligations have no legal or even normative standing. Sociologist Stacey Oliker found that friendship has no "explicit rights and obligations, rituals of solidarity, or firm expectations of permanence."²⁸
- 2. The strongest cultural expectation we have currently for friendship is the sharing of emotional support and leisure activities. We have no consistent cultural norm that friends should be responsible for care that involves labor or material or monetary support. We may praise friends who provide such help, but we do not feel cultural support for criticizing or condemning those friends who do not provide this care.
- 3. Because friendship is based on ideals of equality and mutuality, friends may not respond well to the need for long-term care that is not equal and cannot be reciprocated. A *network* of friends may help sustain equality and mutuality, but even so, friends may not be a reliable source of long-term care for most children, the elderly or disabled.²⁹

- 4. The importance and efficacy of friendship networks vary by social class and ethnicity and historically within a social class or ethnic group. For example, researchers in the 1950s and 1960s emphasized the positive importance of friends and neighbors as caregivers in working class and poor families.³⁰ But research in the 1990s questioned whether these networks were viable. Ann Roschelle found that in the 1990s women with more education and income were more likely to give and receive child care help both in kin and nonkin networks.³¹
- 5. Because friendship is so invisible in our culture and social theory, we have had practically no cultural discussion of the work involved in maintaining friendships or on how to deal with conflict between friends.³² Both the work and conflict involved in friendship are sure to increase as we rely on friends for care that was formerly supplied by family members.

Caring Beyond the Nuclear Family

As families have become more nuclear, more geographically dispersed and more unstable, most women, and many men, face living a considerable portion of their adult life single. Today 40% of both the adult population and of the workforce are living outside of marriage. Twenty-six percent of households consist of an individual living alone, compared to 23% of households composed of a nuclear family with children living in the household. Catastrophic illness in even the most stable marriage and nuclear family can lead quickly to becoming single. A friend in a long-term marriage whose husband was diagnosed with terminal brain cancer when she was in her early fifties said:

I almost instantaneously became single, but with the burden of total responsibility for the care of a dying adult – a process that lasted 2 years. If I had to rely only on my nuclear family – two children in their early twenties - or even on my small extended family, it would have been hell.

She was fortunate to have a network of close friends and colleagues who helped care for her husband and provided a lot of the emotional support and practical help that she needed. Another

married friend with a strong friendship network was surprised at how helpful (and necessary) friends were when she was injured in a serious auto accident.

I recently came upon a newspaper column that provides another example of how relationships between family members and long-term paid caregivers can take on some of the characteristics we sometimes associate with friends. In a column in the *San Francisco Chronicle* (8/2/01), Susan Parker responded to several people who reacted negatively to a previous column in which she had referred to people who helped take care of her disabled husband as family:

I reflected upon the family issue as I drove my neighbor, Mrs. Scott, to her appointments with the dentist, foot doctor and the heart specialist. I thought about family as I made arrangements for Harka, one of my husband's live-in attendants to talk with a lawyer about problems he was having. I reflected upon next of kin as I paid credit card bills and parking tickets for Jerry, our other roommate and caregiver. I thought about family responsibilities as I enrolled Jerry's daughter in swimming lessons, bought her a dress at Old Navy, held her hand as we crossed the street, answered, "Yes she is," when a stranger said to me, "Your daughter is beautiful."

These examples of how those living in nuclear families both receive and give care that extends outside traditional family bonds illustrate a conclusion drawn by Andrew Sullivan about the increasing interconnection between family and friends. Sullivan believes that making friendship networks more of a social institution can also help families and marriage.

Networks of friends are increasingly complementing the networks of family. And this can only improve both institutions. Families and marriages fail too often because they are trying to answer too many human needs. . . . There is no reason why human lives should not have a deep experience of both family and friendship.³³

In distinguishing friendship from family, Sullivan makes a departure from both gay culture and gay researchers of the 1980s, who tended to consider good friends as family and to use fictive kin terminology.³⁴ But Peter Nardi, a sociologist who studied gay male friendship in the 1990s, supports making a distinction between friendship and family:

Structurally, Friendship circles do not look like families: they certainly do not have the legal, ceremonial or religious attributes that characterize the family institution in American society. . . . Families are made up of people whose ages, genders, degrees of power, and experiences are divers, while homophily characterizes most close friendships.³⁵

I believe that we need to follow the lead of Sullivan and Nardi and clearly validate caring by friends as distinct from family. Too often friends who provide care that traditionally we associate with a family responsibility are talked about in kin terms (e.g., "She is a real sister to me."). Why does Susan Parker in the quote above have to see the care she provides for a neighbor and for paid care workers as "family" work? Why can't she see it as care work that is outside that provided in families?

My own research yields an example of how imposing family norms on friendship can undermine it. Jane Herald, a 54-year-old divorced woman, has the fewest kinship ties of all the single women I interviewed. Jane has no children, is an only child, and both of her parents are dead. Her only family is two aunts who live far away, and whom she sees rarely. Soon after her mother's death and the breakup of a relationship, Jane offered to rent a room in her large house to a former student, Connie, who is fifteen years younger. Connie, who recently faced the breakup of a 10 year cohabitation that she thought was a lifelong commitment, jumped at the chance. Jane and Connie shared many interests and soon became close friends. Connie had recurring health problems, but she had help from other friends and family members, and neither Jane nor Connie mentioned this as a problem. But after 2 ¹/₂ years, Jane asked Connie to move out, giving what seemed a flimsy excuse. Connie was shocked and hurt, but complied. In a separate interview about 6 months later, Connie, in reflecting on the breakup, attributed it to the way she had come to treat Jane as a mother and to consider herself more of a daughter than a friend. Connie felt that their age and economic differences contributed to this and that both her economic and psychological dependency on Jane undermined the relationship. I think Connie is right because Jane, in her interview with me, indicated that she never wanted children and did not consider herself maternal. To both their credit, Jane and Connie maintained their friendship, and even traveled to Europe together several years later. Both are still single, childless women with strong

friendship networks. In time of need, they will be there for each other, along with many other friends.

A final example of the problem of imposing family terminology on friendship networks is this: Member of the he caregiving network of friends portrayed in *Share the Care* called themselves "Susan's funny family," even though they recognized that the care they provided was beyond that available in most families. By assimilating all unpaid care into *family*, we reinforce the continued invisibility of care provided by friendship networks and contribute to the insecurity felt by those with weak family ties. In addition, as political theorist Martha Ackelsberg argues, "using the language of kinship to describe powerful . . . non kin bonds reinforces the ideological primary of traditionally-constructed families, and obscures the social inequalities that are often perpetuated through families."³⁶

However, my desire to see friendship valued in its own terms, and not as an extension of family, may apply only to those accepting American cultural values. Sociologist Hung C. Th, in a study of second generation Vietnamese American young adults, found that many "often reject the values of self-sufficiency, individualism and egalitarianism that are generally prevalent in mainstream U.S. culture."³⁷ For his subjects "friendships, like family, are permeated by a sense of obligation, non-egalitarianism, and sharing of resources. . . . Sharing feelings and common interests were important, although secondary to material help and support in their friendship development."³⁸ These young Vietnamese Americans did not like to borrow money from their "white" friends, because they expected to be paid back right away. Vietnamese friends did not have such a strict standard of give and take. I would not presume to argue my position in such a cultural context – one that may exist too for other ethnic or immigrant groups in the U.S.

Policy Implications

In an influential article, "Why We Need a Care Movement," Deborah Stone defines three rights to care: (1) "A right to care means that families are permitted and helped to care for their members." (2) "A right to care means the right of paid caregivers to give humane, high-quality care without compromising their own well-being." (3) "A right to care means that people who

need care get it.³⁹ In order to ensure the later I would add a fourth right: A right to care means that friends and other nonkin who provide care are recognized and helped to provide good care.

Although voluntary help from friends will never substitute for state subsidies for the provision of care, focus on the importance of such care does have policy implications: As advocates for care provided by friends, we must bring public pressure on hospitals to change their policies about who is consulted or even allowed to visit the seriously ill and dying. Too often only family members are given such privileges.

We must insist that family and medical leave acts, including paid leaves, include care for those in the extended family and outside the family. We must ask that unions that use collective bargaining to obtain paid leave to care for others recognize the increasing necessity of care for those who are outside the nuclear family.

Researchers need to look for, and ask people about, care provided by friends. What factors (ethnicity, gender, social class, marital status, etc.) facilitate the creation of friendship networks of care? Friendship per se cannot be institutionalized because friendship in our culture is defined by personal choice and privacy. But *friendship networks* could be normalized by providing more social definition, visibility, and support in order to define a community of choice with obligations for care.

Endnotes

1. Martha A. Ackelsberg, "Sister of Comrades: The Politics of Friends and Families," in *Families, Politics and Public Policy*, edited by Irene Diamond. New York: Longman, 1983: p. 345.

2. Karen V. Hansen, A Very Social Time: Crafting Community in Antebellum New England." Berkeley: University of California Press, 1994: p. 9.

3. Robert D. Putnam, *Bowling Alone: The Collapse & Revival of American Community*. New York: Simon & Schuster, 2000: p. 96-97.

4. Ibid., pp. 94, 278.

5. Claude Fischer, *To Dwell Among Friends: Personal Networks in Town and City*. Chicago: University of Chicago Press, 1982: pp. 102, 115, 128, 130.

6. Jody Heymann, *The Widening Gap: Why America's Working Families are in Jeopardy and What Can Be Done About It.* New York: Basic Books, 2000: p.27.

7. Eleven percent of respondents with a child under age 18 cared for a parent during the week, compared to 20% of those with only adult children and 36% of those with no children. Thirteen percent of respondents with a child under 18 cared for another adult, compared to 20% of those with only adult children and 46% of those with no children. *Ibid*.

8. The following is a sample of quantitative studies on care for gay men in the U.S. with HIV/ AIDS. I wish to thank sociologist Andrew London for providing me with these studies. G. Hart et al., "Gay Men, Social Support and HIV disease: A Study of Social Integration in the Gay Community," AIDS Care, Vol. 2, #2, 1990, pp. 163-170; Heather Turner et. al., "The Prevalence of Informal Caregiving to Persons with AIDS in the United States: Caregiver Characteristics and Their Implications," Soc. Sci. Med. Vol. 38, #11, 1994, pp. 1543-1552; A.S. London et al., "The Integration of Informal Care, Case Management & Community-Based Services for Persons with HIV/AIDS," AIDS Care, Vol. 10, #4, 1998, pp. 481-503; Heather Turner e al., "Informal Caregiving to Persons with AIDS in the United States: Caregiver Burden Among Central Cities Residents Eighteen to Forty-Nine Years Old," American Journal of Community Psychology, Vol. 25, #1, 1997, pp. 35-59; Linda Wardlaw, "Sustaining Informal Caregivers for Persons with AIDS," Families in Society: The Journal of Contemporary Human Services, 1994, pp. 373-384; Allen LeBlanc & Richard Wight, "Reciprocity & Depression in AIDS Caregiving," Sociological Perspectives, Vol. 43, #4, 2000, pp. 631-649; Heather Turner et. al., "Sources and Determinants" of Social Support for Caregivers of Persons with AIDS," Journal of Health & Social Behavior, Vol. 39 (June), 1998, pp. 137-151; Leonard Pearlin et al, "The Structure and Functions of AIDS Caregiving Relationships," Psychological Rehabilitation Journal, Vol. 17, #4, 1994, pp. 51-67.

9. Allen LeBlanc, Carol Anehensel & Richard Wight, "Psychotherapy Use and Depression Among AIDS Caregivers," *Journal of Community Psychology*, Vol. 23 (April), 1995, p. 127.

10. All names given to women I interviewed are fictitious.

11. Margaret Adams, *Single Blessedness: Observations on the Single Status in Married Society*. New York: Basic Books, 1976.

12. *Ibid.*, p. 87.

13. Ibid., p. 97.

14. Andrew Sullivan, *Love Undetectable: Notes on Friendship, Sex and Survival.* New York: Alfred Knopf, 1998: p. 175.

15. Kath Weston, *Families We Choose: Lesbians, Gays, Kinship.* New York: Columbia University Press, 1991: p. 118.

16. For example see the following: John Preston & Michael Lowenthal (eds.), *Friends and Lovers: Gay Men Write about the Families They Create.* New York: Dutton, 1995 and David Brudnoy, *Life is Not a Rehearsal.* New York: Doubleday, 1997. Brudnoy, a gay, conservative journalist and radio talk show host in Boston, celebrates "my Gang of Five – the five friends who were with me every day during my unconscious period and with me as well throughout my hospitalization." (P. 188)

17. For a historical example of working-class men in the 19th century U.S. providing emotional support for, and even nursing, each other, see Karen V. Hansen, "Our Eyes Behold Each Other': Masculinity and Intimate Friendship in Antebellum New England," in *Men's Friendships*, edited by Peter M. Nardi. Newbury Park, CA: Sage Publications, 1992. Karin Walker's empirical study of friendship in the contemporary U.S. found that the ideology about differences in male and female friendships was not supported by actual behavior. Men provide emotional support for each other and share activities. These also form the basis of many female friendships. See "Men, Women and Friendship: What They Say, What They Do" *Gender & Society*, Vol. 8, #2 1994: pp. 246-265.

18. Susan Crohan & Toni Antonucci, "Friends as a Source of Social Support in Old Age," in *Older Adult Friendship: Structure & Process*, edited by Rebecca G. Adams & Rosemary Blieszner. Newbury Park, CA: Sage Publications, 1989: p. 133.

19. Ibid., p. 135.

20. Arlie Russell Hochschild, *The Unexpected Community: Portrait of an Old Age Subculture*. Berkeley: University of California Press, 1973.

21. Peggy Orenstein, *Flux: Women on Sex Work, Kids, Love, and Life in a Half-Changed World.* New York: Doubleday, 2000: pp. 251, 281.

22. Rosanna Hertz & Faith I. T. Ferguson, "Kinship Strategies and Self-Sufficiency Among Single Mothers by Choice: Post Modern Family Ties," *Qualitative Sociology*, Vol. 20, #2, 1997: pp. 187-209.

23. Ibid., pp. 204-206.

24. Cappy Capossela & Sheila Warnock, *Share the Care: How to Organize a Group to Care for Someone Who is Seriously Ill.* New York: Simon & Schuster, 1995: p. 11.

25. See Lillian Rubin, *Just Friends: The Role of Friendship in Our Lives*. New York: Harper & Row, 1985: chapters 1 & 2; and William K. Rawlings, *Friendship Matters: Communication*, *Dialectics, and the Life Course*. New York: Aldine De Gruyter, 1992: chap. 1.

26. See Marilyn Friedman, *What Are Friends For?* Ithaca, NY: Cornell University Press, 1993: p. 248.

27. See, Francesca M. Cancian, *Love in America*, New York: Cambridge University Press, 1987: p. 134.

28. Stacey J. Oliker, *Best Friends and Marriage*. Berkeley: University of California Press, 1989: p. 63.

29. See Pat O'Connor, *Friendships Between Women: A Critical Review*. New York: Guilford Press, 1992: pp. 154, 184.

30. For example see Carol Stack, *All Our Kin.* New York: Harper & Row, 1974; and Michael Young & Peter Willmot, *Family and Kinship in East London*. Baltimore: Penguin Books, 1964.

31. Anne Roschelle, *No More Kin: Exploring Race, Class & Gender in Family Networks*. Thousand Oaks, CA: Sage Publications, 1997: p. 153.

32. See Rachael Kranz, "Toward a New Definition of Singleness: Building a Life with Close Friends," Utne Reader, March/April 1989, pp. 56-63.

33. Sullivan, , op. cit., p. 234.

34. As an example see Kath Weston, op. cit.

35. Peter Nardi, *Gay Men's Friendships: Invisible Communities*. Chicago: University of Chicago Press, 1999.

36. Martha Ackelsberg, "Families, Care and Citizenship: Notes Toward a Feminist Approach," paper presented at the 2001 annual meeting of the American Political Science Association, p. 1.

37. Hung C. Thai, "Splitting Things in Half Is So White!": Conceptions of Family Life and Friendship and the Formation of Ethnic Identity Among Second Generation Vietnamese Americans," *Amerasia Journal*, Vol. 25, #1, 1999, p. 56.

38. Ibid., p. 72.

39. Deborah Stone, "Why We Need a Care Movement," The Nation, March 13, 2000, p. 13-14.