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Dan CLAWSON and Naomi GERSTEL, *Unequal Time: Gender, Class, and Family in Employment Schedules* (New York, Russell Sage Foundation Publications, 2014)

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*Unequal Time* is a compelling and important work of scholarship. Dan Clawson and Naomi Gerstel show how workers cope with the “normal unpredictability” of personal and family life. Workers’ capacities to deal with these everyday, but still always unexpected events, are shaped by their control of work schedules through official channels, a dimension of power that varies considerably by class and gender. But, workers also find solutions in what Clawson and Gerstel call the “web of time,” drawing on coworkers and family to respond to unpredictable events. *Unequal Time* should be of interest to sociologists of work and occupations, gender, and social inequality and would make a wonderful addition to graduate and undergraduate syllabi in courses in those areas.

These findings are supported by an extraordinarily carefully considered and constructed research design. Clawson and Gerstel select four occupations that fill out the two-by-two table of male/female-dominated by professional/working class. All four occupations are in the health care sector, with physicians comprising the male-dominated professional cell, nurses the female-dominated professional cell, EMTs the male-dominated working class cell, and nursing assistants the female-dominated working class cell. By focusing on the health care sector, they usefully reduce heterogeneity as well as allow for an analysis of how the occupational context shapes scheduling practices. Clawson and Gerstel then take an ambitious mixed-methods approach to data collection, combing surveys of members of each occupation with two hundred in-depth interviews and with hundreds of hours of observation at hospitals, nursing homes, doctor’s offices, and EMS centers. This observation gives Clawson and Gerstel the entree to access detailed work schedules and employee handbooks and union contracts. The resulting data is impressive. It permits Clawson and Gerstel to make informed comparisons across class and gender internally to their own data and permits them to credibly characterize the occupations and the organizational contexts that they

study at the same time that they draw out workers' complex understandings of scheduled time.

Clawson and Gerstel then deploy this formidable data infrastructure to examine the nexus of scheduled time, schedule control, and unpredictable events. Their first contribution is to beautifully uncover what is surely familiar to many readers—disruptions to scheduled time are entirely surprising in the instance, but entirely expected on the average. We can all be sure that someday childcare will fall through, that a sick relative will need care, or that our presence will be needed at a birth or a funeral. But, we can never know which day, at least not very far in advance. This is the dilemma that Clawson and Gerstel so aptly term “normal unpredictability.”

The real contribution of the book though is to examine how these events interact with work schedules and to trace how employee access to flexibility at work falls along the contours of class, and so structures men and women's ability to enact familiar and powerful gendered expectations. The professionals in the study, physicians and nurses, have access to structural solutions that allow them to shape their work schedules and respond flexibly to normal unpredictability. What is so interesting here is that the predominantly male physicians use their control over time to work more and so earn large incomes that effectively subsidize the private back up care system of stay-at-home spouses. In this way, male physicians enact masculinity. In contrast, female nurses use their control over time to hew to ideals of motherhood and matrimony, shaping their hours around their husbands' work schedules and creating time to do housework—enacting femininity. But, among the working class EMTs and CNAs, the situation is quite different. There, the lack of flexibility makes it very difficult for female CNAs to adapt their work schedules to their family lives. Male EMTs also do not enact traditional gendered expectations, but this is not because their jobs are so inflexible. Rather it is because the structure of their shifts allows them to perform chores and childcare in a way that CNAs cannot.

While only physicians and nurses have access to official tools that give them the flexibility to deal with normal unpredictability, EMTs and CNAs are not without recourse. Rather than relying on official practices, these working class men and women rely on the what Clawson and Gerstel call the “web of time.” When an EMT is running late, he can often count on a co-worker to cover and when a CNA must stay home, a co-worker can often be found to swap shifts. These are solutions found outside of official practices and, in some instances,

they subvert the control that management seeks to exercise over work schedules.

Clawson and Gerstel vividly portray the hardships and stresses that come from the mismatch between rigid schedules with little flexibility and the normal unpredictability of family emergencies. Compared with the male physicians or even the female nurses who have control over their schedules and the capacity to respond flexibly in the face of unexpected events, the CNAs encounter a very difficult situation in which they have little of this desirable flexibility. Their work schedules are totally rigid—there really is no official mechanism for workers to adapt these schedules to the realities of normal unpredictability.

Clawson and Gerstel often talk about these practices in terms of schedule unpredictability. Advocates and policymakers have used that same language in pressing for new legislation that would regulate work schedules and work hours. For instance, in San Francisco, the “Retail Worker’s Bill of Rights” requires that large chain retail and fast food businesses provide workers with at least two weeks of notice of their work schedules and then compensate workers with “predictability pay” for any unwanted deviations from that schedule. The ordinance also seeks to reduce schedule variability by requiring employers to offer existing part-time employees additional work shifts before hiring new part-time employees—a mechanism that could reduce schedule unpredictability by making workers less desperate for hours and so less compelled to accept additional shifts offered at the last minute. A similar bill has now been passed in Seattle and legislation is under consideration in Washington D.C. and New York City, with other cities and perhaps even states expected to follow suit.

At times, it seems as though *Unequal Time* is squarely focused on these issues. For instance when the authors discuss the rise and spread of specialized scheduling software that permits firms to use unpredictable and variable scheduling practices [13] or mention employee demands for predictable schedules at Walmart [91].

But, that is not really the case. The workers in *Unequal Time* have little flexibility to change their work schedules, but they actually have a great deal of stability and predictability in what those work schedules will be. As Clawson and Gerstel note, CNAs and EMTs have very stable official schedules that are set up to a year in advance. While the work hours may be non-standard and rigid, the schedules are regular and predictable.

Clawson and Gerstel argue that the term schedule unpredictability usefully reconceives debates in the work and family literature about

flexibility. But, in some ways the term “unpredictability” is too broad, potentially conflating two distinct dimensions of scheduling practices. There is the *desirable flexibility* that comes with employees’ power to shape and remake their work schedules and the *undesirable instability* that comes with unpredictable and unstable employer scheduling practices.

Millions of working Americans, particularly those in retail and food service, have almost no *desirable flexibility*—once set by the employer, their work schedules—like those of CNAs and EMTs are rigid—but they also encounter a great deal of *undesirable instability*. Their work schedules are set with as little as a week of advance notice and the days, the times of day, and the total hours worked can vary dramatically between weeks. The workers in *Unequal Time* struggle with limited flexibility to respond to time shocks from “employee actions.” But, many other workers also experience time shocks from employer actions. Just as Americans struggle to cope with financial emergencies that arise on both the “expense” side (from car repairs and medical bills) and on the “income” side (from layoffs), time emergencies also arise on the “expense” side of “employee actions” and the “income” side of employer driven schedule instability and unpredictability.

Clawson and Gerstel clearly state that their focus is on “jobs with stable schedules whose unpredictability is often caused by employee actions” [7]. *Unequal Time* is concerned with the important issue of unequal access to *desirable flexibility*. But, *Unequal Time* does not tell us about the other dimension of scheduling, *undesirable instability*. It is really that dimension of work scheduling practices that has been the focus of recent legislative activity and organizing.

The preface of *Unequal Time* begins with the observation that the contemporary labor movement could surge on a shared demand among workers around work time. Other scholars, such as Heather Boushey in her book *Finding Time: The Economics of Work-Life Conflict*, have also recently noted the potential for a broad based movement around work time. *Unequal Time* shows with rich data and careful analysis just how important the control of time is for American workers.