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Liminal Living: Everyday Injury, Disability, and Instability among Migrant Mexican Women in Maryland's Seafood Industry

Mexican women constitute an increasing proportion of labor migrants to the United States. They are segregated into a handful of low-wage occupations, disadvantaged by global economic forces and the social construction of gender within employment relations. Drawing on ethnographic research from Maryland's Eastern Shore, I explore experiences of everyday injury, disability, and instability among Mexican migrant women who work in the commercial crab processing industry, which is increasingly dependent on the H-2B visa program to fill seasonal, non-agricultural jobs. By focusing on the daily lives of Mexican migrant women who are part of this labor force, their health and social needs, and the gendered dimensions of labor migration, I document how temporary work programs institutionalize liminality as permanent mode of being. I suggest that migrant women, amid the extraordinary uncertainty brought about by the processes of recurrent migration, reorient and recalibrate themselves through modes of conduct to make life more ordinary. [United States, gender, liminality, labor migration, injury]

In May 2017, a local media outlet published a story, titled "Why a Mexican Flag Flies High In A Trump County," featuring Maryland crab processors who publically declared that their livelihoods and small rural communities were highly dependent on female Mexican guest workers (Trull 2017). It focused on Hooper's Island—three small, remote islands with about 500 residents connected by a causeway along the Eastern Shore located about a three-hour drive from the nation's capital. These islands, locally known as *La Isla de las Mexicanas* or the Island of the Mexican Women, were named for the female migrant laborers who work in the industrial crab-processing plants during the spring and summer months. The story made headlines in part because much of the attention on the growing gridlock within the current political administration—between their pledge to modernize the nation's temporary worker H2 visa program to ease longstanding labor shortages in predominately rural, politically conservative regions and their rigid stance toward decreasing immigrant admissions and reshaping the selection of foreign-born workers—has focused largely on the agricultural industry and male

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migrant workers in the U.S. West and South. Many were surprised to learn of female migrants working in Maryland's renowned blue crab industry.

The feature opened with a color photograph depicting an unlikely couple—an older white man in jeans and a weathered T-shirt and a Mexican woman, wearing a hair net, apron, and rubber gloves—smiling at each other while standing behind a steel table full of crab innards and meat. The narrative described him as the owner of a local family-owned crab-processing plant, and the woman as a migrant worker who picked crab for his company. It stressed how Mexican migrant women, like the woman pictured, have become the "lifeline" of an "iconic" crab-processing industry over the past two decades. Employers, like the man featured, underscored the lack of available American workers and consequently, the importance of migrant labor in sustaining small, family-owned businesses in this predominately white, blue-collar, and politically conservative community. The feature then explained how the crab-processing industry as well as migrant women have come to depend heavily on H-2B visas, a U.S. government program that allows employers to bring foreign workers to fill temporary non-agricultural jobs.

The story described the woman as a widowed mother of four from Hidalgo, Mexico, who has migrated annually to work in the same crab-processing plant for 21 years. She is depicted as someone who has transformed from a complete novice to a renowned "master picker" whose hands are a "blur of activity as she tears off claws and shells, picks the juicy white meat and sorts it into small plastic tubs." The story goes on to mention that she has been appropriately compensated through the payment of money and employment in exchange for the risks of labor migration and occupational injury. Her physical wounds, "two decades of cuts from stubborn claws and slippery knives," are not only translated as material benefits to Mexico by way of school fees, mortgage payments, and small business financing, but also as sacrifices for the good of America's small businesses and rural communities. This discourse of compensation, gratitude, and sacrifice that frames the story provides a moral cover for how labor policies and programs engender injuries, disability, and instability experienced by female temporary migrant workers.

This feature article exemplifies how the American economy has come to increasingly depend on migrant workers, primarily from Mexico, Latin America, and the Caribbean. Using temporary guest worker programs, industries such as commercial crab processing have recruited foreign workers to perform difficult and dangerous jobs since the 1980s. Such labor policies and programs have expanded global labor networks and the economic mobility of foreign workers, especially women. Concomitantly, these processes also have deepened existing gendered, racial, and ableist dynamics of labor segmentation found within the seafood industry, disadvantaging female temporary workers within the U.S. labor market.

In this article, I bring together two primary modes of analysis to explore migrant women's motivations for engaging in recurrent labor migration to the United States, their living and working conditions, and their specific health vulnerabilities. Using the work of feminist scholars of gender and migration studies and a crip theory approach to disability, I build on prevailing frameworks within the anthropology of immigration and occupational health to better understand how conceptualizations of risk, injury, and mechanisms of care operate in a place like Maryland's Eastern Shore and among female Mexican migrant workers. Below, I outline how the

incorporation of Mexican women as migrant seafood workers into a highly masculinized guest worker program—programs that are an often neglected aspect of women's labor migration—brings into view a highly gendered, racialized, and ableist set of labor relations in commercial crab processing. I maintain that while broader transformations in labor and trade facilitate the nexus of risk and injury among female Mexican migrants in exceptional ways, temporary work programs have come to institutionalize liminality and the precarity that it engenders as permanent, ordinary modes of living for migrant women, well beyond the confines of the workplace.

Permanent Liminality, Temporary Migration, and Fluid Injuries

Anthropologists have long utilized liminality to depict notions of transition, marginality, and threshold (Chavez 2013; Gaur and Patnaik 2011; Gennep 1960; Jackson 2005; Menjívar 2006; Stoller 2009; Turner 1969). Turner described liminality as a "rite of passage"—a clearly defined temporal and spatial *temporary* state that concludes with one's re-incorporation into the social structure (1969, 95). In many ways, liminality represents an extraordinary contingent state without structure and clear outcomes—moments or spaces where relations between structure or agency are not easily determined (Thomassen 2009). Yet, Turner also alluded to the "institutionalization of liminality" in reference to monastic orders, where the suspended character of social life becomes a permanent condition (1969, 107). Szakolczai (2000), building on Turner's conceptualization, suggests that individuals and societies can become trapped in a form of "permanent liminality," when transition between the three phases of the rites of passage (e.g., separation, liminality, and re-integration) fails to occur. Permanent liminality is characterized by danger and uncertainty, but also newfound possibilities (Thomassen 2009). In other words, liminal moments and spaces, extraordinary in their nature, can become quite ordinary, mundane, and highly institutionalized. I utilize permanent liminality as a lens from which to understand the everydayness of temporary labor migration, not as an in-between phase of existence, but as ordinary, structured experience (Szakolczai 2009).

Temporary labor migration is not ordinary, yet it has become so. Nevertheless, much of what we know and understand about temporary labor migration from anthropological and social scientific standpoints is based on its extraordinariness. Scholars have long recognized broader global changes as inducing migration for work in low waged labor markets (Balibar 2004; Cohen 1987; Hardt and Negri 2000; Sassen 1998). There is also growing documentation of how the rapid rise of global industries and growing labor demand for cheap, precarious workers in North America has increased the number of workers employed under temporary visas (Gentsch and Massey 2011; Preibisch 2010). Likewise, temporary labor migration has been theorized as a dynamic social process for those who must navigate cultural differences and barriers to social integration and re-integration in communities of origin and reception (Contreras and Griffith 2012; Griffith 2006; Kossoudji and Ranney 1984; Preibisch and Encalada Grez 2010). This literature has also richly illustrated how temporary labor migration engenders political, economic, and social exclusion that leads to significant disadvantages for those involved, including the

lack of social integration, and occupational injury and disability (Galabuzi 2004; Gonzales and Chavez 2012; Quesada et al. 2011).

Critical medical anthropologists have primarily conceptualized such disadvantages among labor migrants, particularly as it relates to health, through the lens of structural vulnerability (Quesada et al. 2011). Much of this work focuses on positionality, of (mostly Latinx) undocumented migrant workers located within a matrix of disadvantage produced by structural violence (Holmes 2013; Horton 2016; Saxton 2013; Smith-Nonini 2011; Stuesse 2016). The implicit assumption is that the health experiences of undocumented labor migrants and migrant bodies—both within and outside of the workplace—are marked as extraordinary, unlike those of documented (non-immigrant) workers (Quesada et al. 2011; Saxton and Stuesse 2018). Here, deportability (De Genova 2002), or the threat of deportation, becomes a key mechanism for a lack of subjecthood in a capitalist society.

For my interlocutors on Maryland's Eastern Shore, however, a series of ordinary unmarked moments and spaces constituted work and life—a cut of the finger, a reoccurring skin rash, eating, sleeping, work, home, transnational journeys. Women were fashioning a "normal" life amid permanent liminality brought about by the processes of recurrent migration. By employing narratives of durability and engaging in perpetual mobility, women in many ways pushed back against the capitalist notion that only un-deportable lives are lives that are fully able to work. In speaking candidly of isolation and ruptured lives and actively seeking care for injury, women performed a politics of visibility, making a space for themselves and other women within the normalized and valorized discourses of work and value. Here, crip theory, in its critique of a socially constructed normal disability and the ideologies that maintain it (McRuer 2006; Sandahl 2003), provides a useful framework for understanding the discursive politics and power dynamics of ableist views of the migrant body. Injury and isolation are not limited to and confined by women's bodily boundaries, but extensions of the state-sanctioned and extra-legal systems that seek to restrict and exploit migrant life. Crip theory's perspective on cripped individuals and systems, as well as on neoliberal constraints and state controls, makes it a useful framework for understanding the ways in which highly masculinized temporary guest worker programs valorize certain bodies and experiences, while silencing others. Crip theory, as both an abstract and a material mechanism for acknowledging the inclusion, exclusion, and subversion of migrant women's corporealities, urges us to hold gendered racism, ableism, and illness together, and to understand migrant women's attempts at generating a politics of survival from that nexus (Anzaldúa 1987; Kim 2017; Lorde 1984; Minich 2014).

While liminality usually refers to an exceptional, often transitional phase, my aim is to convey the ways in which temporary work programs come to facilitate enduring liminality as ordinary modes of living for migrant women. Rather than framing women's experiences as exceptional, through the grand narratives of vulnerability and suffering, I focus on the daily struggle and pain of migrant women's lives, attending to women's understandings of their own lives and acts. This attention to the everyday opens up possibilities for reconfiguring institutionalized liminality as the durability of the transition itself, rather than the permanence of a specific rite of passage.

Methods and Data

This article draws on data from the Immigration and Health in Rural Maryland Study, an ethnographic project that explores how political and legal notions of entitlement and access become understood and reconstituted within a moral economy that recognizes some immigrants on Maryland's rural Eastern Shore as deserving of health care and others as not. Since June 1, 2013, I have ethnographically explored the ways that people create mutuality and care in the face of precarious economic conditions and a hostile political climate. My primary data include semi-structured interviews with 62 Mexican ($N = 33$), Black/Haitian ($N = 26$), and Central American ($N = 3$) immigrants working in agricultural, poultry, and seafood industries about their perspectives on migration, health, and life in rural Maryland. I also interviewed health and social service providers ($N = 24$) about their perspectives and experiences with health care provision and delivery to migrants on the Eastern Shore. I conducted participant observation in social service agencies, health care institutions, job sites, and migrant homes and camps. The study received Institutional Review Board approval from the University of Maryland.

Details related to my recruitment strategy, interview guide, and analytic approach are described more fully elsewhere (Sangaramoorthy 2018; Sangaramoorthy and Guevara 2017). The data reported here draw primarily from interviews with 15 migrant Mexican women working in the commercial crab industry and four providers—including a nurse practitioner, a medical assistant, and two Spanish language interpreters—who oversaw the majority of care received by women through a mobile health clinic. They also draw from participant observation conducted in crab-processing plants, migrant housing complexes, and mobile clinics during the summer months, from mid-May until mid-August in 2014 and 2015. These months are peak periods for crab processing in the mid-Atlantic region.

Perpetual Migration, Temporary Work

Recent migration from Mexico has played an important but largely unrecognized role in generating population, labor force, and employment growth in the mid-Atlantic region of the United States, particularly around the Chesapeake Bay (Massey 2008). Low-paying, labor-intensive jobs in agriculture, poultry, and seafood have attracted a highly mobile, temporary, and increasingly female Mexican labor force to migrate to the area through guest worker programs (Griffith 2005; Sangaramoorthy and Guevara 2017). Even with work visas, these migrants face a number of social, political, and economic disadvantages due to their temporary legal status, including poor health and a lack of access to health care (Alexander and Fernandez 2014; Derose et al. 2007; Sangaramoorthy and Guevara 2017).

Women comprise a growing proportion of labor migrants from Mexico (Boehm 2008; Pew Research Center 2015). Mexican women constitute the largest female immigrant group in the United States, accounting for 26% of all female immigrants, 47% of the Mexican immigrant population, and a substantial and increasing proportion of all undocumented immigrants (Passel et al. 2014). Much like their male counterparts, Mexican women are highly segregated in a handful of low-wage, low-skilled occupations (Flippen and Parrado 2015). Despite their growing numbers,

much of what we know about labor migration in the social sciences literature represents Mexican men's experiences. This scholarship also often assumes that women's economic integration is an extension of the male experience, or considers gender within a critical analytic frame only when labor processes appear to be feminized such as those found in domestic service work (Blau and Kahn 2007; Broughton 2008; Hondagneu-Sotelo 1994; Nash 1985; Parreñas 2001; Pessar and Mahler 2003; Romero 2002).

The work of feminist scholars of migration and gender has destabilized these dominant frameworks of understanding induced labor migration. Literature documenting the acute precarity of female migrants has shown how global economic forces, the social construction of gender within employment relations, and legal status together create conditions of long-term uncertainty that directly affect women's labor market participation, labor conditions, and labor-related experiences and health needs (Dreby and Schmalzbauer 2013; Preibisch and Hennebry 2011). Further, scholars have illustrated how the intensification of induced labor migration has deepened gendered employment patterns globally, and within Mexico and the United States in particular (Castles 2003; Hondagneu-Sotelo 2001; Massey et al. 2002; Phizacklea 1983; Rosenbloom 2002; Segura and Zavella 2007; Tyner 2004). Preibisch and Encalada Grez (2010), for instance, note how local and transnational employers, labor recruiters, and nation states all play a critical role in compelling women, who otherwise may not have moved, to migrate. Finally, this literature richly demonstrates how economic conditions such as free trade, deregulation, and privatization coupled with progressively harsh anti-immigrant policies have led to a global trend toward hyper-flexible labor strategies (e.g., nonstandard work arrangements; temporary, seasonal, and informal female immigrant workforce), especially among global businesses struggling to succeed in increasingly competitive markets (Goode and Maskovsky 2001; Hennebry 2014; Preibisch and Encalada Grez 2010; Torres and Carte 2016; Valdez 2006).

The commercial blue crab industry along the mid-Atlantic region is one such business that has come to rely heavily on these female guest workers. Blue crabs are a key U.S. commercial species found along the Atlantic and Gulf coasts—with approximately 135 million pounds harvested, caught, and processed from 2009 to 2013 (U.S. Department of Commerce 2014). Revenues for blue crabs have steadily risen since 2005, totalling over $210 million in 2014 (Bourgeois et al. 2014). Although Louisiana currently boasts the largest global blue crab fishery, this industry has been historically centered on the Chesapeake Bay, and Maryland in particular (Paolisso 2002). The number of plants and workers fluctuates annually depending on the availability of crab stock. Maryland currently has 10–15 crab processing plants, almost all of which are small family operations, which employ under 500 workers (Maryland Seafood 2016). Over the past 20 years, fishing, environmental degradation, urban development, and regulations around the Chesapeake Bay have led to fluctuating and unpredictable crab populations[1] and a steep decline in the available local African American female labor force[2] (Griffith 1997; Lawson et al. 2001). This has led to an increasing reliance on Mexican female migrant labor through the expansion of the H-2B guest worker program, which has allowed the seafood industry to further reduce costs in commercial crab production and processing.

Since 1986, crab processors have utilized the U.S. Department of Labor's H-2B visa program to supply temporary, non-agricultural foreign workers willing to perform the gruelling jobs at low costs necessary to sustain their businesses, claiming that not enough Americans are willing to take on the work (American University 2010; Fritze 2015). On a broad level, the expansion of the H-2B program has increased Mexican women's transnational labor mobility and ability to earn better wages, created a growth in female labor networks, and contributed to the development of a new female middle class in sending communities in Mexico (Contreras and Griffith 2012; Straut-Eppsteiner 2016). For instance, many of the women working in commercial crab processing were from rural regions in eastern and north-central Mexico, such as Hidalgo and San Luis Potosí, areas that have undergone substantial rural outmigration due to the devastation of small-scale agriculture brought about by the North American Free Trade Agreement and the Mexican neo-conservative governmental regimes of 2000–2012 and where migration has become a central strategy for rural development (Arizpe 2014; Gálvez 2018).

Women felt socially stuck and in limbo due to a lack of available work in Mexico and a broad sense of economic precarity. This shaped their decisions to engage in temporary migrant labor to the United States and enter into a transitional phase. "The work that you get pays poorly," explained Alejandra, a 43-year-old woman who had worked for over a decade as a crab picker on the Eastern Shore. "There is orange cultivation, corn. You work in the fields and pay is much less than here. You earn 400–500 pesos per week ($20–25 USD). That's maybe enough to eat." Being the sole economic provider for their families, a trend throughout rural Mexico noted by other scholars (Katz 2003), only increased the economic precarity faced by women, which led many to migrate. "It's not that I like it, but I need this job," confided Gloria, a young single mother who eked out a living selling tamales. "In Mexico, you earn very little and here, I've secured a job. If I do well, the owner asks me to return next year. [I stay] because of the work. That's why I came. If not for that, I would have stayed in Mexico. I'm a single mother."

Yet, within localized contexts like the Eastern Shore, the expansion of temporary guest worker programs continued to severely restrict women's employment prospects and create conditions of extreme precarity, extending women's experiences of uncertainty beyond particular spatial and temporal dimensions and rendering indeterminacy as a permanent state of being. It is well documented that systemic flaws in guest worker programs have negatively impacted the rights of male workers beginning with the Bracero program, which was established with Mexico in 1917 and then again, from the 1940s to 1960s, as a response to severe labor shortages in agriculture during the world wars (Mize and Swords 2010). Because this program led to large-scale immigration of Mexicans to the United States, policymakers enacted more stringent regulations, merging them into the Immigration and Nationality Act of 1952 which established a temporary unskilled worker category, created the H2 visa program, and instituted numerical quotas for workers (Council on Foreign Relations 2017). In 1986, the Immigration Reform and Control Act divided the H2 program into H-2A (uncapped quotas for agricultural workers) and H-2B (capped quotas for non-agricultural workers), with emphasis given to temporary workers as a way to counter the anticipated decline in the undocumented

immigrant population due to the act's provisions related to border control and enforcement.

Employers need to demonstrate labor scarcity to apply for H2 visas. On approval, employers are issued visas through the Department of Labor and the Department of Homeland Security. H-2A and H-2B visas are valid with a single employer who has the power to repatriate workers if they fail to meet production quotas, become ill or injured, or are no longer needed (Arcury and Quandt 2009; Hansen and Donohoe 2003; Hiott et al. 2008). However, women are particularly disadvantaged. They are widely excluded from guest worker programs, constituting 26,770 of the 177,828 of those who were issued H2 visas or 15% of the temporary visa labor force in 2015 (U.S. Department of State 2015). Men make up almost all of the workers placed in H-2A jobs (96% or more), which tend to be more standardized and higher paying (U.S. Government Accountability Office 2015). Gender bias in employment recruitment and lack of government enforcement of anti-discrimination labor laws allow employers and recruiters to track women almost exclusively into the H-2B visa program which offers lower wages, unequal income-earning opportunities, and fewer rights and protections than their male counterparts (Southern Poverty Law Center 2013). For instance, in commercial crab processing, women who pick crab receive piece-rate pay, while men who cook and haul crab receive hourly pay (Centro de los Derechos del Migrante 2018). Further, H-2B workers lack many legal protections afforded to H-2A workers, such as receiving three-fourths of the total hours promised in the work contract, access to legal services, and other benefits including workers' compensation or injury insurance coverage (Southern Poverty Law Center 2013).

For women who migrate to the Eastern Shore, legal employment opportunities were often only available through H-2B visa program. Women learned about seafood employment opportunities through labor recruiters and returning female labor migrants. Beatriz's story was illustrative of many of the women. A recent divorcée with several children and ill older parents, Beatriz learned of the opportunity from a neighbor: "A young woman told me about this. I asked her if she could help me out. She then recommended me to the contractor." Although employers are required to pay the prevailing wage established by state and local governments and provide transportation for H-2B workers, they are not expected to pay for or provide housing or food (McDaniel and Casanova 2003). However, the actual burden to procure a H-2B visa was much higher. Women described internal social structures that have developed to accommodate the H-2B system in Mexico. They spoke of paying various fees and expenses to local labor recruiters, taking out loans with individuals and banks, and contracting with travel brokers to obtain H-2B visas and travel to Maryland. "You find a contractor that tells you to go to a specific place because the owner has asked for you," Elena recounted. "You pay to be put on the list, the visa applications, passport, and transfer. Everything is out of pocket." Francisca provided additional details, "I paid 2,000 pesos to the consulate [and 6,000 pesos for travel] for a total of around 8,000 pesos ($400 USD). The owner pays us back about $300 dollars."

Despite these challenges, women continued to migrate to the Eastern Shore every season. Further, women who were regular migrants described recent changes that elevated their feelings of present and future uncertainties, noting that although

the number of female migrant laborers had stayed relatively stable over the past decade, there was less work due to the dwindling number and quality of crab and crab-processing plants. Alejandra explained:

> There used to be really big meaty crabs. I'm not seeing that anymore. For years we used to go home late in November. We've been going home early November for the past several years. We don't work the last several weeks in October. They're bringing the crabs from North Carolina and very little is coming out of these waters.

In addition, there has been a steady decline in the number of women recruited to work in crab processing because of the intense competition for H-2B visas in recent years with landscaping and forestry industries receiving most of the allotted visas, illustrating that the growth of demand for visas far outstrips the existing cap. This has led to what many see as a continued crisis for the commercial seafood industry (Hughes 2018). These changes, along with the current administration's increasingly restrictive immigration policies, concerned many women who expressed uncertainty about whether such jobs would exist in the future and how such conditions only exacerbated feelings of anguish and fear. Elena summed up her feelings: "You kill yourself for almost no gain. To come from so far away for such few hours."

Women expressed their desires to end labor migration due to the growing incertitude related to these broader labor market and political changes in the United States; they were also uncertain about how to fashion a liveable life in Mexico on a more permanent basis. "[The future] I can't tell you about. But in five–10 years, I see myself in my own house in Mexico," Marta divulged. "I only came here because I wanted to build my own home. I expect to do this in three years. Pay is low but I don't expect to build a mansion. I see myself in my own home with my family." Many women revealed that they had considered overstaying their visas to escape uncertain futures and financial hardships back home, but decided against it because of the dangers associated with being unauthorised. Juana confided, "There are moments when I would like to stay here and work really hard and give my family everything they need but living without papers is really difficult here. My thought is that while I'm able to physically work, I'll work here." Many knew of friends or family members who overstayed their visas, were detained and deported, and were unable to acquire work visas or return. Women stated that they preferred to work legally as temporary migrant workers.

With Congress setting the limit of annual H-2B visas at 66,000 to a range of industries such as forestry, landscaping, and housekeeping (Council on Foreign Relations 2017), temporary work programs engender competition among countries and workers along myriad social hierarchies, including gender, race, and nationality. This temporariness of a bureaucratic category is embodied and experienced as permanent liminality among women. Their entry and retention within H-2B programs have become stabilized through various social structures in Mexico, the United States, and the crossings between, where perpetual labor migration is made ordinary by way of an entire industry of recruiters, lenders, and agencies. In this way, guest work programs suspend women in a perpetual state of migration where liminality is incorporated and reproduced into ordinary structures along the route,

framing everyday conditions of living by the process of movement where spatial and temporal dimensions converge and appear undifferentiated—a journey continually in motion in space and time. Women's desires to end temporary migration manifest vis-à-vis their simultaneous longing for home and work—of being perpetually betwixt and between—rather than fully remaining home or away or, conversely, not altogether committed to being either here or there. Despite the deep insecurities that permanent liminality brings forth, women inscribe an ordinary existence—through narratives of longing and desires for home, work, and transitions—that both lives with and refuses the violence of migrant expendability and gendered and racialized disablement.

Transient Sociality, Unending Transformation

Women, when describing their experiences of working in commercial crab processing, stressed the notion of "transformation," the same concept that framed the narrative of the woman featured in the local news story in the introduction. But transformation was not merely about corporeal proficiency or mastering work skills, as in the news feature; it was about the continual (re)adjustments made to fashion "ordinary" lives here, there, and in perpetual transit. "I didn't know anything at all," Xiomara, who had been migrating back and forth for close to two decades, elaborated, describing her first migration journey. "Every time you come here, it's like for the first time. It's as if you're absolutely blind. You've never seen this, but you have." For women, there is recognition of a past (of the first journey), but also a retention of unfamiliarity in the present, even after years of recurrent migration. The Eastern Shore is both ordinarily familiar yet always a strange, routinized transitional moment.

Loneliness and social isolation were everyday matters in this ordinary process of transformation on the Eastern Shore and beyond. Women expressed a deep sense of estrangement not only from family and friends in Mexico, but also from other female migrant workers and neighbors. This led to feelings of heightened anxiety and despair. Juana, for instance, lived with 11 other women in a small residential house for migrant women. Her house, like all housing for migrant women, is substandard; women live in cramped quarters, often in spaces that are deteriorating or aged. Many houses are basic two or three bedroom residential homes, with a living room, dining area, one full bath, or sometimes an additional half bathroom. The furniture is rudimentary and old. Linens are sometimes provided but they are often not adequately sanitized. Juana described her living situation as tense:

> There are too many people. They make so much racket. I can't sleep and we have to wake up really early! It's hard to go out because the stores are far away. It's hard in the house because we have bed bugs. I'm not getting enough sleep because they come out of the walls, jump on to the bed, and then you have to kill them. If I don't sleep, I can't keep up at work.

Women live with other women, yet there is very little socialization or interaction among them. Their long work schedules, lack of established social connections to other women, and cramped housing conditions do little to foster close relationships

between women or form clear sense of community. Women also arrive and depart the Eastern Shore at different times depending on their employer and regulations set out by the H-2B program. In addition, the constant worry of family in Mexico made it difficult to build social rapport even when it was a mutual concern among them. "Each of us keeps to herself, in our own world," Xiomara explained. "We sleep, we get up, we eat, and time to work. It's the same routine. There's also too much stress. I think too much. I worry about my family. You can't prevent it no matter how hard you try." Despite their shared experiences of routinized (and stressful) living and working conditions on the Eastern Shore, as well as constant anxiety about home and families left behind, women like Xiomara described their distress as only affecting themselves, in isolation.

The physical and natural characteristics of the Eastern Shore also enhanced the ordinariness of isolation felt by women. Women often described the Eastern Shore as a liminal space—a "desolate place that time forgot," noting its sparse population and rural, isolated landscape. Women lived on small, remote islands connected by causeways along the Eastern Shore, located about a three-hour drive from Washington, DC, the U.S. capital. The entire region was largely isolated from the rest of Maryland until the construction of the Chesapeake Bay Bridge in 1952. Its landscape, dotted with long stretches of farmland, tidal marshland, and mixed hardwood and loblolly pine forests, is a popular regional tourist destination for those who are attracted to its small-town atmosphere and its pastoral scenery. But for migrant women, these same characteristics shaped their daily life and feelings of complete isolation from the "outside world," contributing to experiences and heightened awareness of being alone and suspended in a liminal space.

Further, the burden of racism and anti-immigration sentiment on the Eastern Shore heightened women's feelings of social isolation. Even though women are technically free to come and go as they please, unlike many migrant workers working in commercial agriculture for instance, they rarely leave because of the unfamiliar and harsh landscapes beyond their immediate surroundings. Maryland's Eastern Shore, which has experienced rapid growth in its immigrant population, is considered a new receiving destination, places with very few existing immigrant communities (Gaffney 2007; Sangaramoorthy and Guevara 2017). It is also known for being politically conservative, with local residents and policymakers often noting how drastically different their political and social values are from the rest of Maryland (Dresser 1998). "When you go shopping you can feel the racism and bad feelings from people," Alicia said describing a recent outing to the local Wal-Mart. "They look at you strangely, make faces at you. It's pretty clear what they're doing. When you go to the stores and pay, they throw the change at you." As a result, women remained in their houses and on the remote islands. Victoria clarified, "We don't go anywhere. We don't leave the house. We work, come home, eat, and sleep and the days go by quickly."

Women spend the vast majority of their time working side-by-side for hours in crab-processing plants and living in cramped quarters with each other on the Eastern Shore. Yet women expressed that they were alone or lonely, without a sense of community. Rather than their migration trajectories or the daily shared routine of work and life on the Eastern Shore, women seemed more connected in their experiences of continuous transformation and transit and the various types of

precarity that this permanent liminality engendered. Temporary work programs and the conditions of permanent liminality that they bring forth foster an "in-durable sociality" among migrant women, "a way of being in common that is based on the hardness of life—both its difficulty and its explicitly material anchors—but that is also conditioned by the temporal limits of that togetherness" (Wool 2015, 52). For migrant women on the Eastern Shore, *communitas* (Turner 1969) and belonging itself is lived as ruptured social cohesion and the transient experience of togetherness.

Everyday Injury, Provisional Disability, and Transient Care

On the Eastern Shore, women's time, activities, and even physical movements were highly regulated by work conditions. Women spent much of the day indoors picking crab or sleeping. When picking crab, women usually worked in daily shifts of eight–12 hours to meet minimal quotas of picked crabmeat. However, these hours were unstable, often predicated on the amount and quality of crab available on a daily basis, depending on the morning catch. Antonia, a 30-year-old woman who had left her young son in the care of her parents, described a typical work day:

> The regular schedule is from 5:00 AM to 1:00 PM. But when you have a lot of work it's from 5:00 AM to whenever the boss tells you. We pick up a plastic tub and we rinse it with a water-bleach solution to disinfect it. We take out our tools, put on our apron, sit down, and fill the tubs. We separate the lump crab meat from other meat and place them in a separate plastic cup. Every hour, the manager comes by and takes the crabmeat and weighs it.

Dry skin, cuts, scrapes, and rashes on women's arms and hands were ordinary occurrences due to the nature of the work. Women were routinely exposed to hazards like vapor generated by cleaning and steaming crabs, cuts from knives and crab shells, and constant contact with containers filled with salty water, bleach, and other chemicals. "There's an entrance where the crabs are cooked and kept," Maria explained. "The vapor that escapes the crab when it's cooked gets inside and trapped. When we leave, we're stinky. Even if we wash our hands, we smell like crab. It's hot and it smells like acid." Serious infections stemming from everyday injuries related to cuts and contact with crabs also occurred. Vera noted:

> [The boss] only cares about work. I cut myself once and was in the hospital. I didn't know the crabs were infectious. I had a red line running up [my arm]. The manager looked at it and said it was fine. My sister told them that it was a serious infection and could get to my heart. She took me to the hospital. And from what I understand, the owner needs to pay for those kind of work-related injuries. My sister mentioned this to the supervisor and she said that she wouldn't pay because I didn't tell them when it happened. I had to pay $1,100.

Women reported not using gloves for protection because of the expense and limitations to productivity—that is, picking crab meat at a pace fast enough to meet the daily poundage quotas set by the company. "Those who want them have to

purchase them," Carolina explained. "They only give us rubber finger tips. Like today, I cut myself and they gave me a rubber fingertip. But if you want gloves, you have to buy them yourself. They cost $8 per box. I don't know how many are in each box but I'm earning very little, $168 per week." Prescription creams and lotions were the most dispensed medications by providers for these everyday visible injuries. Elena described what was often heard during mobile clinic visits: "I want to see the doctor to get some ointment because my hands get horribly dry and red because they disinfect everything and because of the salty water. They crack. They get dry. They get itchy and burn. You cut yourself with the knife all day. Since it's salty water, it hurts."

Additionally, women suffered from numerous invisible injuries and disability. For instance, all women reported experiencing routine pain and myalgia from sitting for long hours picking crab in crouched positions. Alejandra described her pain: "Backache and my legs swell up because we're always sitting down. A year ago I was given a pair of compression socks but they wear out really fast." Elena stated, "My chest hurts quite a bit. It was hard to breathe. When I make sudden moves with the knife, I'm in pain." Mobile health providers explained that many women suffered from severe back and neck issues that radiated pain down the arm because of repetitive motions and constant crouching over tables when picking crab. Numbness, epicondylitis tendon injuries, nerve pain, and carpal tunnel were prevalent among women as a result of the fine hand work done for hours at a time. Further, providers noted that several women had developed vitamin D deficiencies as a result of long periods of time spent indoors and a limited diet, raising concerns about rickets, osteopenia, and osteoporosis. The nurse practitioner prescribed high dosages of prescription-level vitamin D supplements for these women, even though she admitted that many would not continue this treatment regimen once they returned to Mexico. Yet providers could do very little in terms of treatment for these invisible forms of injury and disability.

In addition, conditions within the crab processing plants exacerbated existing chronic issues or precipitated them. "I can't wear gloves. They told me it was an allergy," Francisca said. "In Mexico I don't cough, but I started to cough when working here. I feel like I have a cold all the time." Marta explained that she, like many other women, has developed allergies to crab, "I get a breakout and lots of itching wherever the water hits the skin ... could be the feet, arms, legs." Often, these allergies were temporary, and symptoms subsided when women left the Eastern Shore. Victoria explained that she is not allergic to crabs normally but develops an allergy while on the Eastern Shore:

> It's related to the contamination here. Everything is dirty. Chemicals left over from cleaning. The air is contaminated. I was never allergic to the crabs. Now once anything falls on me from the crab, I get itchy. The substance that makes me itch comes from the crab. It's some type of allergy. I don't want to scratch because it could spread below my neck on my chest.

Women openly discussed how the gendered and racialized ideologies that have become the grounds for their recruitment also heighten their risk of everyday injury and disability. They indicated that employers and labor recruiters claimed that

women exhibited greater levels of speed and dexterity and were more patient and productive than men. "I knew that some men came here to try," Yolanda offered. "They don't do well or get better. Our boss says that they don't have the patience like a woman to pick the crabmeat." Women themselves internalized these ideologies, explaining that men didn't have the patience to pick crab because it required delicate, careful, and hard work, describing crab picking as exclusively "women's work." Women also discussed supervisors' perceptions of the appropriateness of workers through racialized notions of work ethic, "[My supervisor] told me that Americans aren't going to wake up at 4:00 AM to do the work. She told me that we are hard workers ... that no one else is going to come to do the work!"

Despite the daily risk of injury and disability, women had little access to care and treatment. They relied on the weekly mobile clinic—which consisted of a rented minivan, a nurse practitioner, a medical assistant, and Spanish-language translators—during the summer for triage and basic medications such as creams and ointments. Many women, however, did not receive care even when the mobile clinic was in operation. Because the mobile clinic operated approximately once a week, providers were forced to perform a system of triage given the sheer number of women who needed to be seen and the vast distances needed to travel between migrant houses. Sometimes women waited in line, and still did not get seen because the mobile clinic ran out of time. At times, women were not seen at all for weeks because the mobile clinic did not have enough time to make the visit.

The local federally qualified health center (FQHC) was 25 miles away, and women did sometimes use it for more serious medical issues. They paid a flat $15 for an entire season of basic preventive care for these services, which also covered mostly generic or basic prescriptions. However, the FQHC, like its mobile health unit, was not equipped to handle specialty or urgent care and the premium that women paid did not cover speciality care or treatment. Women who needed urgent or emergency care or specialized treatment had to access them through the regional hospital located about 120 miles away. Those who did need to access these services incurred massive debt. Yolanda described her situation: "I had an ectopic pregnancy and serious pain. I was mopping the floor and I started to bleed. I went to the hospital. They did surgery after the ultrasound. It was very expensive. They sent several bills. It was $22,000. I'll be done [paying] in 7 years."

As I have documented elsewhere (Sangaramoorthy 2018; Sangaramoorthy and Guevara 2017), the issues of health care provision and delivery are heightened among residents and migrants on the Eastern Shore. This rural region, composed of nine counties east of the Chesapeake Bay, suffers from high rates of poverty, poor health status, and health care needs. Many of the counties encompassing the Eastern Shore are federally designated health shortage areas, yet only two FQHCs, organizations that receive special federal health care reimbursements to assist underserved populations, serve the nine counties. Maryland has expanded Medicaid and created state-based exchanges to provide subsidized health insurance for low-income residents under the Affordable Care Act (ACA). However, rural residents continue to face severe financial and systemic barriers in receiving adequate care and treatment (Sangaramoorthy 2018).

Further, insurance coverage and health care accessibility for H-2B workers are dependent on both immigration and health care laws (Bruno 2018). Unlike the H-2A

program for agricultural workers, employers can choose to offer health care benefits for H-2B workers but are not required to do so under immigration law. Additionally, the ACA also does not require employers to offer health insurance to any worker including H-2B visa holders. Many states, including Maryland, have health care access restrictions in place for immigrants (Sangaramoorthy 2018; Sangaramoorthy and Guevara 2017). H-2B visa holders are eligible to purchase ACA-compliant health insurance within 60 days of their arrival or other temporary short-term medical insurance. However, these insurance policies often only cover what are considered to be "new" injuries, conditions, or accidents. My interlocutors did not have insurance through their employers; their only option was to purchase the basic insurance plan from the local FQHC.

Both the broader conditions and the routine nature of work and life led women to perceive of their physical health, much like their social lives, as constantly in flux, in a continual process of transformation and transition. Beatriz elaborated on the enduring nature of risk, injury, and disability, as well as its temporal limitations, "Right now we're well but you could get sick just like that. I'm always worried. We will all eventually develop something or another." The provision and delivery of care for these ailments were also unpredictable. Rural precarity and legal uncertainty intensified permanent liminality among migrant women, heightening their risk of injury and disability and rendering the provision and delivery of care difficult (Sangaramoorthy 2018).

Even in this precarious realm, women's narratives and actions sought to crip normative spatiotemporal logics of stable, enduring embodiments and anthropological understandings of immigrant workplace injury and disability, bringing into focus the continuously shifting boundaries between material and experiential states of being (de Wolfe 2002; Vick 2012). Women's accounts of their bodies and health as contingent, mutable, and fluid further resists dominant frameworks of health, illness, disability, and ability (Sheppard 2018). Lightman and colleagues (2009) suggest "Such bodies-at-odds create discomfort because they possess the ability to live sometimes as healthy, sometimes ill, sometimes able, and sometimes disabled." Migrant women's reimagining of embodiment, in many ways, opens up critical spaces of representation that incorporates liminal living as ordinary lifeworlds and as a part of the phenomenological experience of self.

Conclusion: Temporary Labor and Liminal Permanence

A constellation of conditions, including the growth in high-value products and goods for foreign export and domestic consumption and the subsequent preference for female labor, the expansion of the U.S. guest worker program, and declining employment opportunities and low wages for women in Mexico, induce women's labor migration to the United States. Mexican women's migration to the Eastern Shore also generates and reconfigures new labor networks and migration flows that mirror existing gendered, racial, and neo-colonial frameworks (Preibisch and Hennebry 2011; Segura and Zavella 2007; Torres and Carte 2016). At the same time, these conditions that prompt women's labor migration—fashioned through and by way of labor market forces and values predicated on flexible labor strategies and an ideal labor force—are unstable. While women perceived temporary work in

the United States to be financially more lucrative than engaging in wage labor in Mexico, despite the financial, social, and health costs involved, they also understood the uncertainties of such migration strategies.

Further, Mexican women's motivations for migration are often depicted in the literature as determined by having family members, particularly parents or husbands, in the United States (Pessar and Mahler 2003). Yet, women in the H-2B visa program migrated independently to improve their and their family's life, highlighting long-term economic and social uncertainties in Mexico for women. Contreras and Griffith (2012) have suggested that Mexican women's labor migration to work in the North American commercial seafood industry was critical to the growth of a new female middle class in sending communities. Likewise, women on the Eastern Shore indicated that they were working to earn more wages and saving to support children and their families in Mexico. The H-2B program and the commercial crab-processing industry effectuate Mexican women's labor migration to the United States, but by choosing workers (on the basis of sex, race, class, and ability) with more reasons to go back home than to remain in the United States, they also ensure the women's return to Mexico.

This engenders a process of recurrent migration and conditions of permanent liminality experienced by women, where they are suspended in a state of perpetual transformation, threshold, and living uncertainty—an enduring holding pattern that makes them feel simultaneously outside and inside, both home and away even as they are trying to live with continual transition as more or less fixed or unchanging mode of being. Turner's original interpretation of the institutionalization of liminality (1969) and Szakolczai's (2000) expansion of the concept refer to conditions when transition between specific rites of passage does not occur (e.g., separation, liminality, and re-integration). Yet, women's own framing of their lives—through narratives of migration trajectories, in-durable sociality, and workplace injury—illustrate that continuous transition through varied rites of passage is *also* a critical configuration of permanent liminality.

Although scholars have characterized the permanence of liminality as "pure danger," representing extraordinary conditions of unstructure and unknown futures (Thomassen 2009, 30), women engage with the cultural and material production of precarity and instability brought forth by temporary labor migration through a series of ordinary actions and relations. In the face of significant social and institutional barriers to participating in the immigrant labor force—including gendered, racial, and ableist social expectations, challenges in completing the temporary guest worker application process, risk of early return due to not meeting employer expectations, and the potential for adverse consequences as a result of long-term family separation (Contreras and Griffith 2012; Preibisch and Encalada Grez 2010)—women inscribe a liminal existence that foregrounds intimate entanglements of gender, race, poverty, legality, and bodily injury. They utilize myriad structures and connections with the United States, Mexico, and in-between to enter and remain within the H-2B program.

While on the Eastern Shore, women fashioned an ordinary life from the margins, amid the precarity of geographic and social isolation, racialized anti-immigration sentiment, and painful working conditions. Even within the highly routinized and structured nature of their daily lives, women were continually destabilizing

racialized, gendered, and ableist ideologies that ground normative understandings of migrant labor and health by both refusing and relying on the nation-state as a source of protection. They embodied and conformed to a capitalist ideal of able-bodied and productive migrant worker, someone who is willing to do the work that no one else will, seeking ways to integrate pain and injury into the self in order to safeguard their financial mobility. Despite the risk of deportability, they engaged in a politics of visibility by criticizing labor demands that created risk for injury and disability and challenging notions of collective female suffering and migrant sociality. Women actively sought care for visible and invisible injuries, embodying the fluidity of disability and rendering the body as itself a liminal threshold. In doing so, they underscored the dire landscape of care in rural Maryland for both migrants and residents alike.

Although they engage in a period of re-integration by returning home, and their earnings often afford them social and materials rewards that otherwise may be elusive, this phase is also contingent since they must again prepare to leave. Women conveyed desires to end recurrent labor migration, wanting to stay in Mexico with their families or at times, risking overstaying their visas and remaining in the United States without papers, but even these longings are expressed in non-committal terms, as improbable futures. Such continual ruptures in women's lives foster liminal permanence, where life is continually being lived in transition and incertitude. Yet, within this realm, women configure possibilities for ordinary living, renegotiating space, time, and movement in daily life imbued with precarity, injury, and isolation.

Notes

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1. Beginning in the early 1990s, mortality due to fishing pressure, disease, and environmental degradation led to a 70% drop in the region's blue crabs. These conditions resulted in severe losses in employment, wages, and overall economic revenue (Paolisso 2002). In 2008, a federal disaster was declared in response to such drastic population declines and Maryland implemented severe restrictions on crabbing and established management and sustainability guidelines to improve blue crab population health (Chesapeake Bay Foundation 2008). Since then, substantial increases in the crab population have prompted experts to predict a slow recovery among Maryland's blue crab fisheries (Fincham 2012). This recovery has foregrounded debates on the growing need for workers to sustain Maryland's crab industry.

2. The mid-Atlantic blue crab industry has long been characterized by gendered and racialized labor relations. The success of the blue crab industry in this region up until mid-1980s rested on the comparative disadvantage of African American

rural women in formal labor markets (Griffith 1997). African American women picked crab from early Spring to early Fall, and relied on public benefits, transfer payments, social networks, and part-time jobs or informal economic activities to support themselves and their families during the winter months. Throughout most of the 20th century, African American women and girls comprised the vast majority of workers in crab processing. The growth of educational and alternative employment opportunities for young African American women, reduced amounts of available work, and favoritism toward foreign workers have been attributed the rapid decline of the African American labor force (Griffith 2006; Holt and Mattern 2002). Very few African American women work in crab processing today.

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