

## CONTENTS

	<i>List of Figures</i>	vii
	<i>Preface</i>	ix
1	Introduction: The Power of Seeing the Other	1
2	The Value of Connecting	25
3	The Automation Frontier	55
4	How to Be a Human: Connective Labor as Artisanal Practice	96
5	The Social Architecture of Connective Labor	130
6	Systems Come for Connective Labor	161
7	Connecting across Difference: The Power and Peril of Inequality	201
8	Doing It Right: Building a Social Architecture That Works	238
9	Conclusion: Choosing Connection	275
	<i>Acknowledgments</i>	289
	<i>Appendix. “Maybe We’re Going to Turn You into a Chaplain”: Studying Connection</i>	293

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vi CONTENTS

<i>Notes</i>	305
<i>References</i>	331
<i>Index</i>	355

# 1

## INTRODUCTION

### The Power of Seeing the Other

Erin Nash<sup>1</sup> was an apprentice chaplain in an East Coast hospital when she allowed me to shadow her as she moved through her day. A tall, middle-aged white woman with chunky jewelry and a direct but kindly manner, she was at the end of a long year, with weekly sleepless nights on call and intense sessions with peers and supervisors to process shifts replete with sorrow and death. That afternoon, I sat with her and the other chaplains as they gathered around a seminar table, talking with each other about what it meant to be simply “present” with patients. When it came time for Erin to share, she told the others of a moment when she had been called to help with a patient named Hiram, who had been intubated “even though he really didn’t want to be intubated, and the doctors were saying he would die if he was extubated, and that he might die even if he was intubated.” She continued, “And I was just sitting there with him trying to be with him, reading his body signals, and he was full of anger, and screaming ‘Why, why, why’ through his tube, and he couldn’t really write because he was on too many pain meds.”

At that moment, Erin said, she grabbed a box of Kleenex and handed it to him, telling him to throw it against the wall and that doing so would make him feel better. “And then I reached out my hand, and I thought he was going to hold my hand, and he ended up grabbing me by the arm and pulling me in and holding on to me for fifteen minutes.”

The moment was powerful for both Hiram and herself. “The next time I saw him he was not intubated, and not dying,” Erin told us, putting her hands together as if she were praying, “and he said: ‘There is nothing like being in the worst moment of your life and being met with comfort by someone you don’t even know, when you feel like someone understands you.’” Erin related that story, and then looked around for a moment, while a few of those listening nodded. “As chaplains, we can bring that kind of presence that allows people to see that they can bring those kinds of connections and we won’t turn away,” she told the others.

“That kind of presence” is what many people—not just chaplains—bring to their jobs. Erin managed to “see” Hiram and understand that frustration was boiling inside him, enough to think he might want to throw the Kleenex box. Hiram let her know that he felt “seen” by pulling her in like a life vest, and then later with his fervent avowal about “when . . . someone understands you.” The exchange had considerable impact on them both, and while such a powerful human interaction reverberates wherever it takes place, it had particular meaning for Erin as she drew on the vignette as testimony to convince her colleagues of the comfort they could offer. What Erin managed to do with Hiram deserves its own name, so that we can think better about its conduct and consequences: I’ve taken to calling it *connective labor*.

The crux of this labor involves “seeing” the other and reflecting that understanding back, and many workers—from therapists to coaches to teachers to managers to personal assistants to sales staff—depend on this process. Yet it is work that is essentially invisible, only partially understood, and not usually recognized, reimbursed, or rewarded, despite its ubiquity and importance. It has also long been associated with femininity, presumed to be part of women’s nature, and more frequently linked to jobs that women tend to hold, like teaching or nursing, while ignored or downplayed when found in jobs where men predominate, like police or the law.

For five years, I have been observing and interviewing all kinds of people who engage in connective labor at work, and I’ve come to see that it often serves as an underlying catalyst and conduit for the tasks

for which people are explicitly hired, from healing to motivating to teaching to persuading. A corporate manager, for example, may be hired for her capacity to organize and lead others, but if she cannot see and reflect her subordinates well enough to shepherd them effectively, her team will not produce and her own performance will suffer. Ostensible tasks like organizing or leading are important, to be sure, but they are also shiny objects, distracting us from the connecting beneath that makes them possible.<sup>2</sup>

Instead, connective labor is central to millions of jobs, including people working not just in health care, counseling, or education, but also in the legal, advertising, and entertainment industries, in management, in real estate, in tourism, even in security. By one estimate, 12 percent of the US paid labor force is likely engaged in a form of “interactive care work,” and this number is but a partial count of the contemporary army of connective laborers, because many of those who deploy it are not always devoted to other people’s well-being. For example, consulting, lobbying, and high-end sales are cases in which we might consider connective labor to be in service to persuasion, while parole officers, prison guards, hostage negotiators, spies, and detectives deploy the capacity to see the other, using it in service to control. The work of connective labor may require knowing and reflecting what someone thinks and desires, but it does not always involve holding that knowledge tenderly.<sup>3</sup>

The spread of connective labor accompanies the rising importance of such socioemotional skills in many kinds of work in the United States and globally; by some accounts, the US is moving from a “thinking economy” to a “feeling economy.” Labor economists debate whether jobs emphasizing such “soft skills” have increased because new jobs like wedding planning or social media marketing take up a greater share of the US economy, or whether the importance of such skills has simply expanded within old jobs like consulting or the law; both appear to be true. Researchers analyzing a sample of 7.8 million job ads from 1950 to 2000, for example, found that more recent ads were much more likely to emphasize interactive tasks; they estimated that most of the change

toward “feeling” took place within a given occupation, such as managers. The researchers wrote: “Our finding is important because it implies that the transformation of the US labor market has been far more dramatic than previous research has found.” In other words, the feeling economy is even bigger than we thought.<sup>4</sup>

In my research for this book, people often used the word “magic” to describe what connecting created—reflecting their sense of not just its wondrous mystery but its power. Studies in many different occupations attest to its impact. Reviewing a battery of randomized controlled trials, for example, medical researchers found that the patient-clinician relationship has a detectable effect on healthcare outcomes—an impact they described as stronger than that of taking aspirin to ward off heart attacks. Psychologists report that the therapist-client relationship, or the “therapeutic alliance,” is what matters for successful treatment. A small mountain of education research documents that student learning depends not only upon their engagement or academic achievement but also teachers’ caring support for, awareness of, and interest in students’ emotional and academic needs. Relationship, alliance, rapport, caring, interest—these studies might not be using the same words, but the phenomena they are observing have strong similarities, and together they suggest that connecting with others can have significant effects.<sup>5</sup>

### *Moneyball* Comes for the Chaplains

Despite the cultural resonance, increasing economic importance, and mighty impact of connective labor, however, it is clear that in many clinics and classrooms, we take this form of work for granted, assuming it will be available on demand no matter what manner of impediments we might place in its way. As I followed Erin while she made her rounds, for example, I was struck not only by the panoply of human drama she witnessed or the desperate needs she met constantly, but also by the continual nagging requirements of collecting, reporting, and analyzing data metrics in her daily tasks.

Erin kept a record of her patient visits in no fewer than three different tracking systems. One was the standard EPIC electronic health record,

Main Assessment of Explicit Spiritual Concerns of Palliative Care Patients	
Need for meaning in the face of suffering	Concern or Fear about Dying or Death
Difficulty coping with changes in things that gave meaning to life:	Unready for death
<ul style="list-style-type: none"> <li>key relationships</li> <li>illness</li> <li>frailty</li> <li>dependency</li> <li>other (specify)</li> </ul>	Hesitation to consider or discuss mortality or associated issues.
Expresses despair/hopelessness	Reluctance to consider or discuss their mortality or associated issues.
Need for integrity, a Legacy, Generativity	Avoidance to consider or discuss their mortality or associated issues.
Questions their life has meaning	Impatient for death.
Painful regret about some or all of life they have lived	Concerned to participate in important events before death
Questions whether they have made a positive contribution to:	Concerned illness or death will prevent participation in important events
<ul style="list-style-type: none"> <li>loved ones</li> <li>others</li> <li>society</li> </ul>	Torn between letting go and fighting on
Has tasks they must complete before they are ready to die	Uncertainty or fear about life after death
Remembering their life and life experience is painful.	Fear of pain or of pain in dying
Distressed about having lived a flawed life.	Issues Related to Making Decisions About Treatment
Concerns about relationships: family and/or significant others:	Needs assistance with values-based advance care planning
Unfinished business with significant others. Need to:	Confused or distressed about end-of-life treatment
<ul style="list-style-type: none"> <li>overcome estrangement</li> <li>express forgiveness</li> <li>reconciliation</li> <li>unfulfilled expectations about others</li> <li>other (specify)</li> </ul>	Confused or distressed about making choices about end-of-life treatment
Family's ability to cope without them.	Spiritual Struggle related to relationship with a Divine Other
Burden to their family.	Abandonment
Expresses unwanted isolation	Punishment
Expresses unwanted loneliness	Concerned about judgment
	Concerned about forgiveness
	Questions Divine Other's love for them.
	Unanswered prayers
	Expresses anger toward Divine Other
	Other Dimensions
	Other spiritual concerns (specify)
	**Scoring spiritual concerns:
	0 = not assessed or no evidence of spiritual concern. Further assessment indicated
	1 = some evidence of spiritual concern
	2 = substantial evidence of spiritual concern
	3 = evidence of severe spiritual concerns

FIGURE 1.1. A chaplain's cheat sheet to help code patient spiritual concerns.

which featured a stream of prompts so complex she carried her own cheat sheet with her to help her navigate it. (See figure 1.1.) After a visit with the family of a young woman who had died unexpectedly of a Tylenol overdose, Erin left the small hospital room where the woman's husband, aunt, and nephew had gathered in stunned silence, and went to find an available computer at a nearby nurses' station. She sat down at the hard-backed chair, clicking and typing to open up the EPIC chart as I looked on. Trying to translate what she had just seen into the chart's standardized parlance, Erin pecked away in response to the program's demands, explaining her notes to me: "Asking for a prayer is a resource, family together is a resource . . ." The computer kept freezing momentarily, and Erin spent fifteen minutes wrestling with it until it finally stopped responding altogether. "Yeah, it didn't save anything," she told me later, after powering up another computer to check. "It's OK. If this had been the end of the day, I would have been crying."

In addition to EPIC, the chaplains filled out a monthly statistics form required by their supervisor to keep track of their "units of service," which Erin greeted with a laughing resignation, saying she understood the

rationale behind it. “EPIC doesn’t capture everything we want to capture,” she explained to me. Last was a spreadsheet about the in-hospital calls they answered over a six-week period, a list maintained separately by each individual chaplain. Over the course of the shift, she held hands, prayed, hugged, and even sang with patients and the people who cared about them; but she also consulted with nurses about buggy technology, conferred with colleagues about what to label a particular service in the spreadsheet, and made decisions about when to visit particular units in the hospital based on whether there were reliable computers nearby. Over the course of my research for this project, I listened to scores of doctors lamenting how the electronic health record (EHR) was optimized for billing rather than medical care, which made watching Erin’s struggles with the computer even more striking. The hospital did not bill anybody for her “units of service,” so why were the chaplains charting in triplicate?



Erin’s capacity to see her patients was an emotional, spiritual, and intimate practice, but her job also offered a potent illustration of the measurement regimes now sweeping even these deeply personal occupations. In many industries, counting and assessing and applying all kinds of data is on the rise, crowding out the time that people like Erin have to pursue human connections. Even further, however, these campaigns have spread to counting connective labor itself, reflecting the cultural ascendance of data as authority. As I went from unit to unit in the hospital, watching as Erin pecked away at different computers, I could see that the data had its own insistent presence in her work, as it does in even the most low-tech connective labor jobs. (See figure 1.2.) *Moneyball* had come for the chaplains.<sup>6</sup>

They are not alone. Across the economy, connective labor is increasingly being subjected to new systems that try to make it more efficient, measurable, and reproducible. As connective labor increases in importance—and to be sure, in labor costs—firms in many industries have sought to get it under managerial control, introducing systems of data collection and analytics, imposing manuals and checklists, and



**Meaning in Life**  
Meaning Score: 0 - No evidence of spiritual concern

**Integrity/Legacy**  
Integrity/Legacy/Generativity Score: Not Assessed

**Relationships**  
Relationships Score: 1 - Some evidence of spiritual concern  
Concerns about Relationships: Family and/or Significant Others: Other (deaths of family members)  
• Pt laments the death of his mother, whom he says he loved deeply.  
• Pt reports that the death of his mother was so traumatic for an older sibling that she stopped talking.  
• When pt talks about his sister's reluctance to speak, he shakes his head sorrowfully.  
**Assessment:**  
• Pt may carry some worry, unexpressed this visit, about the effect his own death will have on his traumatized sister.  
• This would be worth exploring during the next chaplain visit.

**Death and Dying**  
Death and Dying Score: 1 - Some evidence of spiritual concern  
Concerns or Fear about Death and Dying: Other (stoicism and afterlife)  
• Pt shares that when he first heard about his cancer dx, he cried uncontrollably for a long time, it upset him greatly.  
• Since that initial tearful response, pt says he has tried to maintain a calm demeanor.  
• The ability to be stoic about his disease seems to be important to him.  
• Pt's response to his dx also included a turning back toward religion (see "Relationship..." below).  
• Pt's grows solemn and reflective when he talks about the various family members who have predeceased him.  
• When the chaplain asks about his perceptions of an afterlife, and whether he believes he will be reunited with these family members, the pt says that he hopes that is true.  
• Pt adds, "but no one has come back to tell us" (pts words).  
**Assessment:**  
• The pt may carry some doubt about what happens after death occurs, and if so, this doubt may have the potential to disturb what otherwise appears to be a solid relationship with pts Higher Power (see "Relationship..." below).

**Decisions about Treatment**

FIGURE 1.2. Chaplain notes on the EPIC health record.

implementing evaluation and assessment plans. At best, they do so assuming that such interventions will not impede their employees' capacity to forge the connections on which their work relies. At worst, firms ignore or dismiss those connections in the first place.<sup>7</sup> School districts, for example, are adopting "teacher-proof" curricula with step-by-step guidance for what children should read on a given day. Counseling centers are requiring therapists to administer surveys and offering clients graphs of particular clinicians' impact. Occupations are being transformed, as even these complex interpersonal jobs are reorganized to make them more predictable, through efforts to gather information and assessment data, and to introduce technology.<sup>8</sup>

We can certainly have sympathy for the goals underlying these changes, as they in part demonstrate a vision of a society where getting a good teacher or doctor would be less dependent on being lucky or affluent. Research finds that checklists and manuals can confer greater legitimacy upon many kinds of service work, and hedge our bets against incompetence and discrimination, while also protecting practitioners from demanding or chaotic situations and clients. Transparency and predictability can allow for greater coordination, mobility, and efficacy, studies have shown. As sociologists Stefan Timmermans and Steven Epstein point out, standardization does not inevitably lead to a "world of gray sameness."<sup>9</sup>

Yet these changes are coming about not just because program administrators or engineers want to improve access or performance, but because modern capitalism and modern bureaucracies converge on the priorities of data, accountability, and standardization in service to imperatives of efficiency and productivity—in the private sector with the goal of extracting profit, in the public sector with the goal of managing austerity. These twin domains—so often framed as opposites: the firm as efficient or flexible or rapacious, the bureaucracy as wasteful or immobile or dedicated to public goods—actually impose very similar pressures on interpersonal work, the human connections squeezed by an industrial logic in both settings. The squeeze takes place in the diminished time and space that firms set aside for it, in its framing as not a public good but a private luxury, in individualistic settings that emphasize outcome over process: in

other words, in the configuration of resources and culture shaping human connection that we might call a “social architecture.”<sup>10</sup>

And the squeeze matters. We know that the scripting of interactive service work threatens creativity and autonomy; transforms clients or patients into standardized “industrial objects”; and demoralizes workers, alienating them from their own feeling. Researchers have found that paperwork and repetitive tasks performed with little autonomy contribute to burnout and job dissatisfaction. Even before the coronavirus pandemic, more than 50 percent of physicians said they were burnt out and overwhelmed by data entry, with some of the highest rates for primary care doctors like pediatricians and family care providers. In a Gallup survey, about half of teachers and the same percentage of nurses reported experiencing high levels of job-related stress. Changes in the social architecture are transforming the work of people in connecting jobs, and along the way extracting enormous costs.<sup>11</sup>

## The Last Human Job

Accompanying the spread of data analytics, checklists, and manuals has come the dawn of an AI spring, with a heralded rush of apps and automation. To many providers, connective labor is not very measurable, not very predictable, and not very automatable, yet engineers forge ahead in their creations, from AI couples counselors to virtual preschool to apps that advise diabetes patients. Of course, many of these forays remain in the lab, and critics caution against believing too much of the hype about AI’s capacities to “disrupt” caregiving and other interpersonal jobs. Yet there are more than 350,000 health-related apps available, downloaded more than four billion times; the global market was valued at \$38.2 billion in 2021. Plenty of these innovations are in use today, and the market appears likely to balloon even further.<sup>12</sup>

In late 2022, the company OpenAI released to the public ChatGPT-3, the first of a series of experimental bots featuring a new level of fluency and creativity, although still based on analyzing existing text from the internet. Michael Barbaro, host of the podcast *The Daily*, asked the bot why he tended to be critical of others, and read aloud the response.

BARBARO (*reading aloud*): “Being overly critical can also be a sign of low self-esteem or lack of self-confidence. It may be that you are using criticism of others as a way of feeling better about yourself—”

BARBARO (*interjects*): Ooh, I’m feeling seen—

BARBARO (*continues reading*): “Or try to control a situation that you feel anxious or uncertain about—”

BARBARO (*interjects*): Really seen!

When he finished reading, his guest, journalist Kevin Roose, asked him, “How does that land?” “It lands!” Barbaro responded. “Yeah, I mean it’s conventional and a little rote, but it also feels like if it came out of the mouth of a relatively high-paid psychotherapist I would take it very seriously.” Roose said he had had the same experience. “And it doesn’t always do it perfectly, and it certainly doesn’t know me in the way that a human therapist would after many sessions, but for something that is free and instantaneous and available on your phone at all hours a day, it actually is capable of some pretty remarkable kinds of advice and guidance.” Automated connective labor had arrived.<sup>13</sup>

The public conversation about AI has so far been generally limited to three areas: algorithmic bias, surveillance/privacy, and job loss. We hear how AI turns historical correlations, often based on bias and stereotyping, into built-in assumptions, so that sentencing algorithms are more likely to predict recidivism for Black defendants than white ones, for example. We hear that apps track whether Amazon drivers look away from the road, that Baltimore’s police deployed facial recognition cameras to monitor and arrest protestors, and that the Chinese government has deployed a “social credit” algorithm to assign citizens a risk score determining their ability to book a train ticket or take out a loan. We hear that AI will radically reduce many occupations, dermatologists and truck drivers alike. These are all worthy concerns.<sup>14</sup>

Missing in these discussions, however, is the impact these systems might have on moments in which we express and experience our humanity, on the emotional understandings we build of ourselves and others, and on the resonant meanings we create together that contribute to a social fabric. When we think of workers as individuals, we think about

how innovations like ChatGPT or its inheritors might replace them; what is at risk, though, is more than an individual or his or her job, but instead the connections that are a mutual achievement between and among humans.

These are the latest stakes of crossing the automation frontier—the moving line that demarcates human work as more or less available for automation. That line has been contested ever since machines were invented; in 1589, Queen Elizabeth I once apparently rejected the application for a patent for a knitting machine, the first attempt to mechanize textile production. “Thou aimest high, Master Lee,” she told the inventor. “Consider thou what the invention could do to my poor subjects. It would assuredly bring to them ruin by depriving them of employment, thus making them beggars.”<sup>15</sup>

Notwithstanding the Queen’s efforts, for a long while the automation frontier lay between physical labor and cognitive tasks; people thought technology replaced the jobs of manufacturing workers but that those of white-collar workers were safe. After it became clear that machines could do cognitive work as well, scholars drew a new line, pointing to the difference between tasks that were routine and those that presented more spontaneous challenges; a chambermaid’s task of changing a bed, for example, is nonroutine and, though physical, challenging for technology to master, while contracts and even some laws that used to be drafted by attorneys can now be written by ChatGPT or its successors. As scholars draw and redraw the line, however, researchers begin to express some frustration with the seeming arbitrariness of the designation “routine.” Most recently, the latest debate centers on social-emotional skills, with scholars arguing that such skills—such as those found in leadership, cooperation, and empathy—form the basis of a new frontier.<sup>16</sup>

While scholars and pundits may debate where the frontier is, AI researchers are not waiting for permission; socioemotional AI research has been burgeoning for the past decade. Of course, there is a big technological leap from a checklist or manual to an app that delivers therapy or a virtual nurse, and some people might not want to think about all these changes in the same viewfinder. Yet underlying the rise of data analytics and the dawn of the AI spring is the common assumption that

these interpersonal jobs can be broken down into a series of tasks, in which abstract principles can be measured, taught, and, if need be, fed into an algorithm. On some level, the manual, the checklist, and the app all rely on an abstracting process that standardizes the worker's part of the encounter, stripping out the personal or the idiosyncratic—those unique qualities that connect people to each other and that shape what those connections look and feel like. In short, these trends are all examples of a growing *depersonalization*.

Depersonalization is a patchy fog across our social relations, its impact unevenly distributed. On one end of the US economy, low-income people receive connective labor that is harried, scripted, or, increasingly, automated, as engineers and policymakers embrace the notion that being seen by machines is “better than nothing.” Even before the pandemic, for example, nearly half of Utah's four-year-olds were enrolled in “virtual preschool.” On the other end, however, we see that one of the fastest-growing sets of occupations before the coronavirus hit was what economists call “wealth work,” personal services that workers provide for rich people, from personal trainers to personal chefs to personal counselors, all of which depend on robust connective labor. As interpersonal work becomes ever more scripted and automated, being able to have a human attend to your needs has become a luxury good. Meanwhile, for the pressured middle class comes the proliferation of online platforms offering up connective labor on the fly, such as Care.com and UrbanSitter, with disenfranchised workers providing care work as a gig while technology, algorithms, and satisfaction scores mediate the relationship between employer and employed.<sup>17</sup>

The unevenness here reflects that we haven't acknowledged connective labor as worthwhile, either for its own sake or as the kind of activity that facilitates the ostensible work of teaching or primary care. Because of this omission, the distribution of connective labor is profoundly unequal across these populations, and likely to become even more so; in the future, the people on the top may get their connective labor from the people on the bottom, who in turn may get theirs from a bot.<sup>18</sup> While we each may occupy different spots in this landscape, we are all bearing witness to a collision in slow motion—the expansion and

growth of connective labor in occupations across the economy, and the spread of systems to contain and control it—a colliding intensification in both the demand for feeling seen and the dictates to shape its supply. As a result, we are facing what looks like a depersonalization crisis, a social malady on several fronts.<sup>19</sup>

## The Depersonalization Crisis

There is evidence of such a crisis in prevalent indicators of rising social alienation and isolation. Pundits and scholars refer to “the trust gap,” “deaths of despair,” or the “Great Pulling Apart,” declaring social isolation “the problem that undergirds many of our other problems.” In 2018, the British government appointed a Loneliness Minister, followed a few years later by the Japanese. Concerns mushroomed in the pandemic; in 2020, the United States Surgeon General Vivek Murthy published a book diagnosing “the current crisis of loneliness.” These are diverse trends, and analysts have pointed to multiple causes, from segmented media to the unequal distribution of good jobs to the decline of traditional solidarity-building institutions like unions, churches, and bowling leagues. What each of these trends has in common, however, is a fragmentation of social connectedness.<sup>20</sup>

There’s no question that connectedness matters. Studies show that both subjective and objective measures of it can have biological effects: feelings of loneliness and the objective measure of the size of one’s social network each predict one’s immune response to vaccination, for example. Loneliness has weighty negative effects on health and well-being—akin to smoking fifteen cigarettes a day, according to researchers—and a 2023 review of ninety studies with more than two million people found that being or feeling socially isolated are each linked to a higher risk of mortality. Belongingness is crucial to human thriving, psychologists say, “almost as compelling a need as food.”<sup>21</sup>

But social scientists disagree about how much fragmentation the trends actually show, with one scholar in exasperation calling social isolation and loneliness “the headless horseman” of a story, forever riding on into the night. In the United States, for example, in contrast to the

research lamenting a decline in Americans' social time (à la *Bowling Alone* [2000]), the sociability trend is apparently flat rather than downward. Sociologist Claude Fischer compared the percentage of Americans who "spent a social evening at least several times a month" from 1970 to 2020, and found essentially no change in those spending time with their relatives and friends, although he noted a 10 percent decline in sociability with neighbors. He concluded that "the total volume of personal contact has, in net, increased." Even the coronavirus pandemic—though it may have felt cataclysmic for our daily routines—appears to have mixed effects: people report being closer to their relatives and neighbors but more distant from some friends.<sup>22</sup>

At the risk of losing my sociologist's badge, however, I suggest that the persistent worry about social isolation may be more than a myth overturned by numbers that can't lie, and instead this headless horseman of a story keeps riding for a reason. The statistics are missing some important facts, and thus may not be capturing what it feels like to live in the United States and other modern industrialized societies. Most important, sociability data tell us primarily about close relationships like family or friends, but not about everyday encounters with weaker ties that—it turns out—play a significant role in well-being, a web of relations that we might call "social intimacy."

While sociologists have documented the "strength of weak ties" for getting a job, as it happens such ties—at the café, the classroom, or the salon—end up giving personal succor as well, with some people serving as confidants and counselors to others simply because they are there at the right time. Furthermore, contrary to the notion that money necessarily corrupts relations, this sense of closer-than-expected applies even to those service people with whom we exchange conversation throughout the day. One study in the United Kingdom found that people who talked to their barista derived well-being benefits more than those who breezed right by them; the authors titled their study "Is Efficiency Overrated?" Of course, these can often be perfunctory exchanges; indeed, retailers often make changes to control the spontaneity of human connection and increase efficiency, efficiency that busy people often say they prefer.



Nonetheless, the upshot here is that the gains of connection stem not just from the sacred family hearth, or even some convivial “tribe” of close friends, but rather from an extensive web of civic and commercial relations through which we make our way every day: from social intimacy. Research suggests that to understand sociability trends we need to reckon with a much broader terrain of human connection, the very terrain that has been radically transformed by metrics and technology. We need to reckon with depersonalization.<sup>23</sup>

Among those who do the work of human connection, the depersonalization crisis is experienced as a certain intensification of need. During my research for this book, a pediatrician told me that she was inundated by patient demands. “Healing happens through relation, and we’re just not doing the kind of caring that people need to heal,” she said. “But, you know, we’ve lost our village, all of us. We’ve lost the auntie who gave you the healing tip and the sister-in-law who taught you how to breastfeed, and the, you know, cousin who took care of your kids while you ran out to do errands or whatever. And that’s what—I feel like that a lot of the health problems could be solved by somehow recreating that village.” As a result, people were coming to her yearning for support that any good listener could provide, she thought. Other practitioners, such as teachers and librarians, reported encountering the same desperate thirst for being seen. In a crisis of depersonalization, the demand for human connection at the point of service can feel frantic.

## Heeding the Depersonalization Crisis

How we address the depersonalization crisis depends on how we diagnose it. Some tech enthusiasts recognize that people feel unseen, invisible in a mass society where standardization has erased individual differences. The solution they offer, however, invites even more data and technology to step in. They urge a strategy that is widely called “personalization,” involving a process of ever more precise tailoring, in which data is harnessed by technology to analyze someone’s health history, how a person likes to drive, or even the content of one’s sweat. Firms capitalize on that data to sell goods matching perceived need;

one such company collects information about babies' ages, for example, in order to funnel to their parents products aimed at stages of development as they pass from infants to toddlers, breathlessly touted in *Forbes* as "Enfagrow Personalizes Advice for Babies." Yet it is not just commercial outfits that deploy technology in this manner; "personalized medicine" and "personalized education"—sometimes called "precision medicine" or "precision education"—are parallel efforts to assess health or learning needs and produce recommendations tailored to the individual. While rigorous analyses tell us that these well-funded campaigns have made some modest gains in pharmaceutical treatments or student learning, the terms are a bit Orwellian because there is no "person" involved in the seeing they promise; surely this approach is not so much personalization as it is customization.<sup>24</sup>

Such customization makes sense if the problem is simply that people do not feel seen; as Michael Barbaro's experience with ChatGPT-3 suggested, machines can do something like "seeing," if they feed on the proper data to produce the right responses. The mechanized solution is a perfect example of what Marx called "commodity fetishism," where we fixate on the end result—feeling seen—without thinking about all the effort that goes into producing that feeling, or the people behind that effort. But what if the root of the depersonalization crisis is not only that people feel unseen, but that they do not feel seen *by another human being*? What if we have misunderstood what is lacking: the human connection that people make together, in interactive moments not reducible to just one person's skills or temperament? More data or technology is likely not the treatment for this kind of lack. What might be called for instead is a renewed infusion of human contact, a commitment to connection, even a *re*-personalization.<sup>25</sup>

## Actual Personalization

There are certainly a wide range of human connections that matter, but by "connective labor" I mean something quite specific: the forging of an emotional understanding with another person to create valuable outcomes. While there might be many paths to that emotional understand-

ing, they all seem to require some form of empathic listening, in which one cultivates a sense or a vision of the other person, and witnessing, in which that vision is reflected back to the other. Another crucial ingredient is the ability to regulate one's own emotions, to get out of the way of hearing and understanding the other. Most important, this process is deeply interactive, not least because for connective labor to land successfully, the other must assent—to some degree—with the vision that is being reflected their way. Connective labor is how we see the other, and how we convey to the other that they are seen.<sup>26</sup>

Not every job involves connective labor, of course, and some involve it more than others. Manufacturing jobs that don't ask workers to interact with other people, low-wage retail jobs or call centers that involve extensive scripts, highly technical jobs like surgeons or engineers with very little client-facing work, entertainers who put a lot out there about themselves without taking in much about the other—these are all jobs without much or any connective labor. The question I ask myself, when evaluating a given profession, is: How much do workers have to convey that they see, know, and understand the other person? In the answer lies the degree to which they perform connective labor in their job.<sup>27</sup>

There are some broader concepts in use that might seem related to connective labor, but these fall short for a number of reasons. Most popular, perhaps, particularly among business readers, is the notion of “emotional intelligence,” a term that not only carries a whiff of innateness but also focuses solely on the individual worker's skills and talents. Yet connective labor is first and foremost an interaction between people that generates an emotional experience, and creates particular meanings, greater than the sum of the individual parts. Words like “skills” train our focus on what workers can or cannot do on their own, but being able to talk about the connections forged between and among people allows us to see what else is at risk when we start replacing people with machines.<sup>28</sup>

We might think of connective labor instead as a combination of recognition and emotional labor. Philosophers have long understood the power of recognition, although they have focused more on political and social recognition than the domain of sentiment. When we marry this

concept to Arlie Hochschild's idea of "emotional labor," which captures how people use feeling to create and sustain relationships for a wage, we can better grasp how directing our emotional antennae toward the project of recognizing the other person can elicit a profound experience.<sup>29</sup>

Words like "see," "understand," or "recognize" are immodest ones, however, blithely promising far too much exactitude, for what is actually often a more imperfect match. Clinics and classrooms are littered with misrecognition and near-misses, as people come together across sometimes very great social distances, their vision of the other clouded by preconceived notions, by their own backgrounds and histories, by their inability to listen well enough, by the other's refusal to share. We know that gender and race shape the expectations people have of others' emotional performance at work, with women and Black men limited by these expectations and also punished for transgressing them; these expectations shape the kind of connective labor they are able to provide to and receive from others. Working conditions and climate, as well as social inequalities, can get in the way of people's capacity to see the other. Furthermore, under the best of circumstances, we are none of us perfectly legible to the other. Even when it is going well, then, connective labor often seems to involve a measure of grace, as people acquiesce to being seen at best partially, to a kind of "good-enough seeing." Given these limitations, both inherent and manufactured, connective labor's impact is remarkable indeed.<sup>30</sup>

### Connection, Culture, and Ambivalence

There is good evidence to suggest that these effects are not biological universals, inherent in all humans, but instead culture- and time-specific. On the Micronesian island of Yap, for example, anthropologists tell us that people value those who control their emotions, who keep their composure, who are unreadable. The Yapese use the expression *feal awo-chean* (good face) to signify an impenetrable mien, and they view people who cannot maintain good face as immature or childish, akin to a fruit whose bright colors tell anybody who wants to know that it is ready to eat. When they want to point out that someone is too easily seen by

others, the Yapese have a felicitous phrase *ke luul ni baabaay*, or “it ripened, the papaya.”<sup>31</sup>

In the United States, too, seeing the other and being seen has apparently not always been valued. Before the early twentieth century, we did not even have a word for empathy. As empathy historian Susan Lanzoni tells us, the concept traveled from German artists and psychologists—who used the term *Einfuhlung* to describe “feeling-into objects”—to American psychologists who coined the word “empathy” in 1908. While early on empathy meant projecting yourself into a form or shape, by midcentury it meant the ability to understand the feelings and perspectives of others. With the help of popular psychology and journalists, the concept broke out of labs and into the general lexicon, finding its way into advice columns and everyday marketing. Empathy transformed into the meaning it has today—of an emotional understanding of the other—in part because we also developed a sense of the other (and ourselves) as even understandable.<sup>32</sup>

Furthermore, despite the demonstrated benefits of emotional recognition for many, some people in the contemporary US are still ambivalent about it. Connective labor, even that which is warm and competent, can burrow into the private emotional terrain that people may want to keep from others. Some people regard interpersonal recognition as an invasion of privacy or as a threat, particularly when they are tired of fending off disrespectful or harmful stereotypes, or when it is being deployed to control them by those with power to assess or punish. It can feel disturbing to be “seen.”<sup>33</sup>

Despite this ambivalence, the contemporary United States—as well as other advanced industrialized nations—are rife with what the Yapese would probably consider “ripe papayas.” “Seeing” and “being seen” is broadly invoked, and not just in the therapy clinic (i.e., see figure 1.3). US schools spend at least \$21 billion annually teaching children empathy in socioemotional learning programs. Psychometric testing, often including measures of emotional regulation or relational traits, has come to dominate hiring; one report suggests eight out of ten of the top US employers use such tests. The turn to the “feeling economy” is more than a latter-day response to the threat of job disruption by AI or



FIGURE 1.3. Being seen in the market.

automation, but instead reflects much broader cultural trends that affect how we relate to each other on and off the market. As traditional social roles that used to give people's lives structure and meaning erode, people came to prize authenticity, or the "voice of an innate, primary nature that had been muffled." Therapeutic culture has shaped how we communicate about what we value at work and at home. Seeing each other is the currency of our time and place.<sup>34</sup>

Ultimately, connective labor is a social process, an interaction between people that is encouraged or impeded by their surroundings, by culture, politics and inequality, by the social architecture at work and the imperative of profit. It has considerable impact, not least of which

upon people's experience of themselves in community, upon their social intimacy. The conditions under which people do this work matter in helping to shape its conduct and experience. And as indicated by all the typing that Erin the chaplain had to do at the beginning of this chapter, we have been attempting to measure, evaluate, and scale up this work without actually understanding what it is, what makes it valuable, and what's at stake in its transformation. This book aims to fill in those gaps.

## The Research behind This Book

In 2015, I set out to understand this work, how people do it, what they get out of it, and how it is shaped and altered by the systems that try to measure, predict, and evaluate it. Rather than a traditional ethnography, in which an observer might embed themselves in a single community or two, I considered this project more like a conceptual ethnography, in which I went where the idea of connective labor took me.

I interviewed more than a hundred people for this book (assistants interviewed about ten of those), most of them people who actively practice connective labor, including therapists, physicians, teachers, chaplains, hairdressers, and community organizers. The bulk of these interviews took place with three groups of professionals (therapists, teachers, and primary care physicians) who varied in their time scarcity, as well as the centrality of relationship in their training and work; a fourth group—of those without college degrees—enabled me to explore how inequality shaped this labor. I also interviewed people who supervised, evaluated, or automated this work—from principals and program heads to the engineers working with robotics and AI—as well as a handful of those on the receiving end as patients, clients, and students.

I conducted more than three hundred hours of observations in doctor's offices and schoolrooms, therapy sessions and squad cars, in California, Virginia, Massachusetts, and—for a ten-day visit to a roboticist's lab—Japan. Among many examples, my observations included eight months participating in a weekly group devoted to humanistic medicine; six months watching physicians, nurses, and patients in an HIV

clinic; a semester witnessing a class for aspiring school counselors; many hours observing videotaped therapy sessions with supervisors giving commentary to apprentice clinicians; three months sitting in on a hospital chaplain residency program; a weekend spent at a workshop that used horsemanship lessons to teach medical students about the doctor-patient relationship; and twelve hours of ride-along in a squad car in a distressed Western city with a community policing initiative. Most of this research took place before the onset of the coronavirus pandemic, but I touched base with a number of informants throughout the lockdown and its aftermath, to hear how they were thinking about their work anew.

I started this work fairly agnostic about the impact of systems like data analytics, AI, and robotics. While I knew about the troubles of burnout, alienation, and threatened job loss, I had also read about the gains promised by systems that could act as bulwarks against capricious unprofessionalism or demanding customers. While it was difficult to discern what was real about the AI spring from afar, it was also possible to see progress in innovations, particularly those that would enable people to gain new access to therapy or teaching. But after years of talking to and observing those who provide connective labor, I came to a new appreciation for what they manage to accomplish, for what was uniquely human about this work, and for how precious—and fragile—are the conditions that enable people to make powerful meaning together.

## A Map of What Is to Come

The structure of the book reflects its argument: that connective labor is a valuable human practice under siege by systems that to some degree enable but often impede it. But what makes connective labor valuable exactly? Stories abound about its profound impact, but what does it in fact do? Chapter 2 explores what is valuable about connective labor, far beyond the ostensible tasks of teaching algebra or coaching soccer. We hear what neuroscientists and other researchers have uncovered about



the mysteries of what happens when human beings mirror each other, and how they do not quite understand its powerful effects. By chapter's end, we see just what we are risking when we introduce new systems into this work.

Chapter 3 outlines its greatest threat, exploring how we have responded to the crisis of connection by doubling down on depersonalization, developing automation and AI in connective labor. This chapter outlines the profound impacts of the automation frontier for those who see and those who are seen.

Yet if it is under threat from automation, why is connective labor “the last human job”? Chapter 4 explores five uniquely human characteristics that make connective labor hard to systematize. We also hear about the shame, distrust, and vulnerability that bedevil these encounters, and how practitioners try to meet those challenges to somehow still produce the “magic.”

The next three chapters outline the contours of the current crisis of depersonalization and what it portends for connective labor. Chapter 5 shows how an organization's social architecture can hamper or support the connective labor people are able to give, forcing practitioners to choose between work that is sustaining, sustainable, or subservient. Chapter 6 goes deep inside these organizations, revealing how scripting and counting degrade connective labor, a degradation that paradoxically makes its automation more appealing. Chapter 7 tells the story of what happens when connective labor goes awry. It investigates connective labor against the backdrop of stark social inequality, particularly of race and class, and how it derives power from the very disparities that make it dangerous. After hearing about all the ways in which organizations are doing it wrong, chapter 8 offers a closer look at those who are doing it right. We see how an organization's social architecture can lead to a connective labor that works.

Finally, in the book's conclusion, I extend the discussion of why we should care about connective labor by exploring its broader impacts on social intimacy. What does it mean for a community when it is not just material goods that are distributed unequally, but the capacity to

see and be seen? I urge us to create a social movement for connection, arguing we should work to foster it not just for its capacity to act as a sort of grease for the ostensible tasks that we value, but because of its capacity to forge the social intimacy upon which we all rely.



In German, the word *Herzensbildung* means “training one’s heart to see the humanity of another.” Having words for things matters, not least because it enables us to identify when something valuable is under inadvertent threat. I call for a new awareness of connective labor and a social movement to protect it. The stakes are too high for us to shrink, strangle, or automate connective labor without knowing what it is and what it creates between and among people.<sup>35</sup>

## INDEX

- accountability, 75, 125, 166, 185, 210, 218
- advisors, in experimental school, 56–59,  
80–81, 87–89
- affective labor, 314n16
- Ahmed, Sara, 280
- AI (artificial intelligence): chatbots, 61, 68,  
73, 77, 287, 315n4; ChatGPT, 9–10, 61–62,  
279, 307n14; and connective labor, 9–10,  
59; and fight for social health, 286–87;  
and “humans-as-valets” future, 282–85;  
and mistakes, 129; and proving humanity,  
91–93; public conversation about, 10, 59,  
61; socioemotional research in, 11–12,  
62–63, 77, 78–79; Watson, 60–61. *See also*  
apps; automation of connective labor
- Allahyari, Rebecca Anne, 41
- anonymity: and automation, 73, 150;  
avoidance of being seen, 208, 277, 310n33
- anxiety, 83–84, 107
- apologies, 116, 265
- apprenticeships. *See* mentors
- apps: in education, 56, 71, 284; in healthcare,  
9, 61, 66–67, 75–76, 179; for therapy, 65,  
83–84, 91–92, 147–48
- artisanal practice, connective labor as, 96–129;  
body as instrument in, 99–103; client-  
centeredness/expertise tension, 119–22;  
collaboration in, 109–11; emotions/empathy  
in, 103–9; five practices of seeing-and-  
being-seen, 98–118; making/managing  
mistakes, 115–18; safety/judgment tension,  
122–25; spontaneity of connection, 111–15;  
tensions of human practice in, 118–28;  
and therapists, 96–98; vulnerability/  
sustainability tension, 125–28
- attentional load, 267–69, 285. *See also*  
overload
- attunement. *See* witnessing
- authenticity, 20; and capitalism, 319n13,  
326n18; and performance, 233–34; and  
proving of humanity, 91–93, 317n22; and  
scripting, 75, 176, 179–80; and therapist-  
client relationship, 44–45
- automation of connective labor, 55–95; as  
“better than humans,” 69–75; as “better  
than nothing,” 63–69; “better together”  
argument, 75–81; consequences of, 82–93;  
and demands to prove humanity, 91–93; in  
education, 55–59, 67–68, 70–72, 94, 284;  
expansion of data needs, 87–91; and gig  
economy, 149–51; and grocery shopping,  
277–78; in healthcare, 60–62, 64–67,  
75–77, 86–87; and “humans-as-valets”  
future, 282–85; invisible witnessing,  
83–87; question of what is automated,  
10–11, 77, 78–79, 86; rationales for, 63–82;  
and scripting, 179–80; and social inequi-  
ties, 12, 81–82, 155–56, 236, 279; spread of,  
60–63, 278–79, 303–4. *See also* AI  
(artificial intelligence); apps
- avoidance of being seen, 208, 277, 310n33
- Barbaro, Michael, 9–10
- BATHE script, 169
- belonging, 13, 40, 279–82, 328n9. *See also*  
witnessing

- “better than humans” argument, 69–75, 82, 94  
“better than nothing” argument, 12, 63–69, 82, 94, 159–60, 282  
“better together” argument, 75–81  
Bickmore, Timothy, 63–66, 68, 90–91  
billing. *See* insurance  
Blinder, Alan, 139  
Blume Oeur, Freeden, 208, 324n5  
body as instrument, practice of, 99–103; by educators, 102–3; and eye contact, 103, 119–20, 121, 270; by health care workers, 27, 99–100, 101–2; by therapists, 96–97  
bots. *See* AI (artificial intelligence)  
boundaries, 50, 125–28, 157–58, 259–60  
Bowlby, John, 45  
*Boys Will Be Men* (Kivel), 246  
Braverman, Harry, 81, 309n25  
Brayne, Sarah, 181  
bureaucracies, and standardization, 8, 217–18  
burnout: and “better than humans” argument, 72; among chaplains, 258; as impeded relationship, 143–44; among nurses, 67, 307n11; among physicians, 9, 151–53, 182, 194–95, 307n11; and scripting, 179; and social architectures, 143–44, 151–53, 157–58, 159; among teachers, 165, 193–94, 195; among therapists, 85, 242. *See also* overload  
Calarco, Jessica, 139  
capitalism, 306n10; and automation, 59; and bounded authenticity, 319n13, 326n18; and commodification of care work, 36; industrial model of work, 164–65, 166, 195–99, 303–4; and resource scarcity, 94, 136; and specialization, 81; wages, 139, 272, 305n4, 307n16, 320n5. *See also* corporate social architecture; employment  
Cardenas, David, 67  
care deficit, 139  
care work, 36, 108–9, 149, 286. *See also* connective labor; witnessing  
caring, by connective labor practitioners, 107–9  
chaplains. *See* hospital chaplains  
chatbots. *See* AI (artificial intelligence)  
ChatGPT (AI), 9–10, 61–62, 279, 307n14  
check-ins with students, 187–89, 199–200  
checklists. *See* electronic health records (EHR); scripting  
Child Protective Services (CPS), 218–19  
Chochinov, Harvey, 198  
chronic illness, 193–94, 239  
class: inequalities in, 12, 81–82, 155–56, 218, 279; wealthy people, 154–55; working-class people, 211, 282, 325n7. *See also* low-income people  
client-centeredness/expertise tension, 119–22  
coaches working for online start-up app, 83–85, 91–92, 147–48, 149–50  
cognitive behavioral therapy (CBT), 83, 149, 171, 173, 178, 318n10  
collaboration, x; and client-centeredness/expertise tension, 119–22; with healthcare workers, 121–22, 123–25, 252; between humans and machines (*see* automation of connective labor); and safety/judgment tension, 122–25; and supportive social architecture, 273; and sustainability/vulnerability tension, 125–28; with therapists, 97–98, 109–11, 318n10  
Collins, Patricia Hill, 207, 312n10  
Collins, Randall, 100, 311n2, 311n4, 318n4  
commodity fetishism, 16  
compassion, 128. *See also* empathy  
complexity, 65, 76, 227, 321n2  
concierge medicine (direct primary care), 131, 153–54, 155, 156–57, 158  
confidentiality, 302  
conflict, 105–6, 262. *See also* mistakes, by connective labor practitioners  
“connection-as-engine-grease” model of connective labor, 28, 37–39  
connective culture: defined, 136, 147, 243; and fight for social health, 286–87;

- leaders' importance to, 245–46; of social architectures, 136, 147, 155, 260–65
- connective labor: ambivalence about, 19; and capitalism, 36; centrality to jobs, 2–3; defined, 2, 16–17, 53; degradation of, 63, 67 (see also “better than nothing” argument; burnout); feminization of, 2, 36, 272; invisibility of, x, 2, 53–54, 83–87; power of, 280; related concepts, 17, 309n28, 314n16; researcher impact/ethics, 301–2; researcher vulnerability, 300–301; research interviews and observations, 21–22, 294–300; as social process, 20–21; as “soft skills,” 3, 28, 36; as two-way operation, x, 29–30, 54; unequal distribution of, 12. See also connective labor, practitioners of; connective labor, recipients of; witnessing connective labor, practitioners of: benefits to, 40–42, 54, 143–44; interviews with, 294–95, 296–97; making dignity, 42–46; making purpose, 46–48; making understanding, 48–53; research on practices of, 317n3. See also physicians; teachers; therapists
- connective labor, recipients of: benefits to, 39–40, 54; interviews with, 295–96. See also inequalities in connective labor relationships
- consumerism. See corporate social architecture
- controlling images. See stereotypes
- coordination with others (perceptual crossing), 29–30
- corporate social architecture, 144–53; and approach to patients, 145–46, 147–48, 152, 153, 154; and burnout, 151–53; and coworker relations, 145, 152; and gig economy, 148–51; hairdressers in, 232
- “cost disease,” 139, 320n5
- counting. See data tracking
- COVID pandemic, 13, 14, 22, 60, 195, 315n3
- coworker relations. See peer groups
- CPS (Child Protective Services), 218–19
- Crisis Text Hotline, 176
- culture, valuing of connection as specific to, 18–20
- culture, work. See social architectures
- customer satisfaction data, 147, 151, 186–87, 202, 306n8
- customization (personalization), 15–18, 56, 71, 80, 87
- The Daily* (podcast), 9–10
- data tracking: in chaplains' work, 4–6, 195–97; and coping with overload, 187–88, 189–90; in corporate social architecture, 147; customer satisfaction data, 147, 151, 186–87, 202, 306n8; defined, 164; in education, 87–90; in EHR, 4–6, 7, 182–85, 198, 269–70; expansion of, 6–9, 11–12, 87–91, 279; and fight for social health, 286; and “humans-as-valets” future, 284–85; and SEL checks, 189–90; and standardization, 180–87; in suicide risk assessments, 177
- deference, 40, 224–25, 227–28
- depersonalization, 12; crisis of, 13–15, 180, 282
- Deutsch, Tracey, 276
- diabetes care, 66–67, 244–45
- dignity/humanity, recognition of, by connective labor practitioners, 42–46
- dignity practices, 212
- dignity therapy, 198
- direct primary care (conciierge medicine), 131, 153–54, 155, 156–57, 158
- doctors. See physicians
- Dodo Bird Verdict, 175
- domestic abuse, 124, 198–99, 218
- eating disorders, 61, 122–23, 126
- economy. See capitalism; employment
- education: automation in, 55–59, 67–68, 70–72, 94, 284; benefits of witnessing in, 37, 38–39; body as instrument in, 102–3; in corporate social architecture, 146–47; in mission-driven social architecture, 138–40; online courses, 92, 315n3; SEL

- education: (*continued*)  
programs in, 19, 187–88, 189–90; standardization in, 8, 71–72, 87–90, 270–71; in supportive social architecture, 246, 260–63, 270–71, 272; use of emotions in, 108. *See also* student-teacher relationship; teachers
- efficiency, emphasis on, 139; and grocery shopping, 278; and “humans-as-valets” future, 282; and social architectures, 147, 157, 165; and social health, 14; and standardization, 8, 164, 165–66, 178–79, 198, 322n4. *See also* productivity, imperative of
- electronic health records (EHR), 4–6, 7, 182–85, 198, 269–70
- emotional capitalism, 36
- emotional intelligence, 17, 28, 37. *See also* witnessing
- emotional labor, 17–18, 40–41, 309n29. *See also* connective labor
- emotions: expression of, 18–19, 40, 310n31, 312n11; and standardization, 189–90, 191; use of by practitioners, 17, 97, 103–9
- empathic listening, 17, 37. *See also* witnessing
- empathy, 227, 311n7; development of term, 19; listening well as, 37; research on, 314n19; use of by practitioners, 104–5, 106, 107, 230–31, 310n1, 318n6; variability of, 135, 243
- employment: and automation, 77–79, 94; and benefits of connective labor, 37–38; and “coaches” for therapy app, 85–86; connective labor’s importance in, 28; and “cost disease,” 139, 320n5; emphasis on connective labor in job ads, 3–4; evaluation of connective labor in, 17; and “freeing up” humans by AI, 59, 77–78, 94; psychometric testing in, 19; satisfaction in, 9, 195, 241 (*see also* burnout); specialization of, 81, 321n2; tied to socioemotional skills, 305n4; wages, 139, 272, 305n4, 307n16, 320n5. *See also* social architectures
- entrepreneurship, 268. *See also* personal-service social architecture
- EPIC electronic health records. *See* electronic health records (EHR)
- Epstein, Steven, 8
- evidence-based approaches, in therapy, 169–70, 172–73, 174, 175
- expertise/client-centeredness tension, 119–22
- eye contact: avoidance of, 35, 277; as coordination with others, 29; lack of in virtual environments, 60; use of by practitioners, 103, 119–20, 121, 270
- faking. *See* authenticity
- feelings. *See* emotions
- Fischer, Claude, 14, 308n22
- Fletcher, Joyce, 256, 327n7
- flexibility/spontaneity/improvisation, 97–98, 111–14, 174–75
- Foucault, Michel, 210, 324n6
- Fraser, Nancy, 36, 306n10
- “freeing up” humans by AI, language of, 59, 77–78, 94
- Friedman, Thomas, 278–79
- friendship, and norms of connective labor, 229–32
- funeral home directors, 48–49, 101
- gender, 18, 246, 327n5; feminization of connective labor, 2, 36, 272
- gig economy, 12, 91, 148–51, 155–56
- grief, 113–14, 254–55, 256–57
- grocery shopping, 275–78
- group learning, 71–72
- guilt, practitioners’, 141, 143. *See also* shame
- hairdressers, 101, 167–68, 229–32
- healthcare: and “better together” argument, 75–76; burnout in, 9, 307n11; direct primary care, 131, 153–54, 155, 158; in mission-driven social architecture, 132–34, 136–37; palliative care, 65–66; patient-centered approach, 215–16; pediatrics, 77, 107, 131, 140–41, 209; rural medicine, 130, 131, 132–34; and supportive social architecture,

- 238–41, 258–60, 263–65. *See also* health-care, and standardization; HIV clinics, practitioners at; nurses; patient-doctor relationship; physicians; primary care
- healthcare, and standardization: AI in, 60–61, 64–66; apps in, 9, 61, 65, 66–67, 75–76, 179; EHR, 4–6, 7, 182–85, 198, 269–70; and hospital chaplains, 195–97; pain scale chart, 190
- healthcare workers. *See* HIV clinics, practitioners at; hospital chaplains; nurses; physicians
- hero role, 41, 136, 242–43, 273. *See also* savior role
- HIV clinics, practitioners at: connective labor by, 25–28, 51–53, 119–22; and mentoring, 253, 295; observation of, 297, 298–99, 301, 302
- Hochschild, Arlie, 40, 139, 309n27, 309n29, 315n2. *See also* emotional labor
- home health aides, 224–28, 236
- Horn, Craig, 67
- hospital chaplains, 1–2, 35–36; and body as instrument, 100; and data metrics, 4–6; and flexibility, 112–14; and inequalities, 220–24; and peer groups, 253–55, 256–58; and reflective resonance, 32–33; and social architecture, 267; and standardization, 171, 195–97; and time, 267
- hotels, 72
- human error, 92–93, 115–16, 170. *See also* mistakes, by connective labor practitioners
- humanity, proving of by connective labor practitioners, 91–93, 317n22
- human-robot divide, 91–93
- “humans as feelers” vision of future, 278–82
- humans as replaceable. *See* “better than humans” argument
- “humans as valets” vision of future, 282–85
- identities, understanding of created through connective labor, 49–51
- Illouz, Eva, 36
- immigrants, connective labor by, 224–27, 238, 240–41
- improvisation. *See* flexibility/spontaneity/improvisation
- incarcerated or formerly incarcerated people, 267–69
- individualism, x–xi, 15–16, 17, 155, 273
- industrial model of work, 164–65, 166; as cultural juggernaut, 195–99, 303–4
- inequalities, 201–37; among healthcare workers, 240–41, 258–59, 264; and being seen, 208–12, 235–36; and belonging, 280; class inequalities, 12, 81–82, 155–56, 218, 279; and educational experiences, 193; and expression of emotions, 40, 189–90; and misrecognition, 207–8, 312n10; and shame, 204, 206–7, 215, 216–17, 235–36; and shutdown by clients, 214–16, 235; and standardization, 169, 181, 217–20; and vulnerability, 204–6; when clients behave poorly, 229–32; when connection is performance, 233–34. *See also* inequalities in connective labor relationships; recognition, and inequalities
- inequalities in connective labor relationships: and automation, 12, 81–82, 236; and dignity practices, 212; hairdresser, 229–32; home health aide, 224–28, 236; hospital chaplains, 220–24; and mistakes by practitioners, 207–8, 212–14, 282, 312n10, 324n2; and performance, 233–34; physicians, 27, 201–4, 207, 210–11, 215–16, 324n2; practitioners with greater privilege than clients, 235; practitioners with less privilege than clients, 206, 235–36; and race, 207–8, 213–14, 218, 219, 227–28, 235, 324n2; and savior role, 40–41, 45, 205–6, 210, 220–24; teachers, 211; therapists, 206–7
- infant development, 34, 311n7
- insurance, 112, 123, 157; billing, 6, 167, 185; and standardization, 164; and supportive social architecture, 239

- interactivity: as component of connective labor, 17, 20, 30, 37–38; in neuroscience, 29–30; of witnessing, 33
- interpersonal sensitivity, 28, 37. *See also* connective labor; witnessing
- Interpersonal Therapy (IPT), 169–70
- interviews, ix, 21–22, 294–97
- intimate labor, 314n16
- intuition, 98, 100–101, 104–5, 142–43, 174–75
- invisible witnessing, 83–87
- journalism, 77
- judgment: and automation, 73–74; judgment/safety tension, 122–25; and relational mistakes, 202–3, 212–14; and risk of vulnerability, 204–5, 236; shutdowns in response to, 214–16, 235
- Kahn, William, 256
- Kayal, Philip, 41
- labor economy. *See* capitalism; employment
- language tutoring, 73
- Lanzoni, Susan, 19
- leaders, 136, 151, 243–47
- learning. *See* education
- Levy, Karen, 181
- lifestyle work, 155. *See also* personal-service social architecture
- listening well, 37, 97, 177–78. *See also* witnessing
- literacy levels, 64
- loneliness/social isolation, 13–15, 275, 277, 308n21, 328n1
- Longing and Belonging: Parents, Children, and Consumer Culture* (Pugh), 280–81
- Los Angeles Times*, 283
- love, 108, 221, 223, 234; rhetoric of, 109, 318n9; systematizing of in supportive social architecture, 260–63
- low-income people: and “better than nothing” argument, 66–67, 159–60; and depersonalization of connective labor, 12; impacts of connective labor on, 40; and recognition gap, 329n17; and resource scarcity, 136; rural medicine, 130, 131, 132–34; “virtual nurse” for, 64; and wealth gap in access to connective labor, 155–56, 159–60. *See also* inequalities
- lying, 92
- machines/mechanization. *See* automation of connective labor
- material resources, as element of organizations that support connective labor, 266–71
- meaningfulness/purpose, 29, 46–48, 53–54, 85, 230; and burnout, 143–44, 157–58; and social architecture, 242. *See also* authenticity; mission-driven social architecture
- measurement. *See* data tracking
- medical assistants, 238, 239–41, 258–59, 263–64, 269–70
- medical care. *See* healthcare
- mental health care. *See* therapists
- mentors, 136, 151, 326n5; to physicians, 249–53; and relational design, 247–53; to therapists, 30–31, 44, 105–6, 198–99, 248
- Micronesia, 18
- mirroring. *See* witnessing
- misrecognition, 117–18; and race, 282, 324n2; and relational mistakes, 204, 212–14; and stereotypes, 207–8, 312n10; vulnerability to, 204–5. *See also* mistakes, by connective labor practitioners
- mission-driven social architecture, 132–43; and burnout/overload, 138–44; education in, 138–40; healthcare in, 132–34, 136–37, 154; and scarcity of resources, 135–38, 140–41, 159
- mistakes, AI agents programmed for, 129
- mistakes, by connective labor practitioners: and inequalities, 207–8, 282, 312n10, 324n2; making and managing, 115–18; by physicians, 118, 202–3; and risk of misrecognition, 202–3, 204–5; as signal of humanity, 92–93; by teachers, 116–17, 213–14; by therapists, 115, 117–18, 213



- moral selving, 41. *See also* meaningfulness/  
purpose
- motivation, 46–47, 79–80, 83, 85–86
- Murthy, Vivek, 13, 308n20
- neediness, and personal-service social  
architecture, 148, 155, 156
- Netherlands, the, 275, 278, 328n11
- neuroscience, 29–30, 98
- No Child Left Behind Act (2001), 88, 180,  
306n8
- nonverbal cues. *See* body as instrument,  
practice of
- Nonviolent Communication, 171
- nurses: and AI/automation, 75–76, 86–87;  
and body as instrument, 101–2; and  
burnout/overload, 9, 194, 307n11; and  
client-centeredness/expertise tension,  
119–22; complexity in work of, 321n2;  
connective labor by, 42–43; and men-  
toring, 326n5; and social architecture,  
320n10
- observations, 297–99
- OpenAI, 9
- optometrists, 148
- organizational cultures. *See* social  
architectures
- overload: how workers cope with, 187–95;  
and industrial model, 164–65; and in-  
equalities, 218; and mission-driven social  
architecture, 138–43; and productivity  
pressure, 139, 165–66, 242; and social  
architecture, 267; and standardization,  
165–68, 180, 197–98, 319n3. *See also* burnout;  
resource distribution; time, constraints on
- palliative care, 65–66
- pastoral power, 210, 324n6
- patient-doctor relationship: disrupted by  
EHR, 182–84; effect of, 4, 38; inequalities  
in, 27, 324n2; and mission-driven social  
architecture, 133–34, 154; mistakes in,  
202–4; and personal-service social  
architecture, 153–54, 157, 158; research  
on practices for building, 317n3; and  
supportive social architecture, 238–39,  
244–45
- pediatrics, 77, 107, 131, 140–41, 209
- peer groups, 136; and chaplains, 32–33,  
253–55, 256–58; and corporate social  
architecture, 145, 152; and gig economy,  
151; and relational design, 253–60; and  
supportive social architecture, 258–60
- perceptual crossing, 29–30
- performance, 233–34
- personalization (customization), 15–18, 56,  
71, 80, 87
- personal-service social architecture, 153–59;  
and approach to patients, 153–54; costs  
of, 157–58
- physical contact, 27, 29, 99–103, 113–14,  
251
- physicians: and “better together” argument,  
76; and body as instrument, 99–100, 101;  
burnout/overload among, 9, 151–53, 165–66,  
167, 194–95, 307n11; career paths for, 130–32;  
and corporate social architecture, 144–46,  
151–53; and cultural supremacy of indus-  
trial model, 197–98; and data tracking,  
182–85, 190; and inequalities, 202–4, 210–11,  
215–16; instrumental value of connective  
labor for, 38; interviews with, 294–95; and  
judgment, 123–25, 202–3, 215–16; making  
purpose, 46–48; and mentoring, 249–53;  
and mission-driven social architecture,  
132–34, 136–37, 140–42; and patients’  
desire for being seen, 209–10; and  
personal-service social architecture,  
153–54, 155, 156–57; and scripts/standard-  
ization, 169, 170, 178–79; and supportive  
social architecture, 239–40, 244; and  
sustainability/vulnerability tension,  
127–28; use of emotions by, 107. *See also*  
patient-doctor relationship
- Piggly Wiggly (grocery chain), 276–77
- platform economy. *See* gig economy
- poverty. *See* low-income people

- power: and belonging, 328–29n9; bodily, 103; and data tracking, 181; pastoral, 210, 324n6; of practitioners, 205–6; in therapist/client relationship, 97, 115 (see also collaboration). See also inequalities
- Power, Michael, 284
- primary care: AI for, 61, 76; burnout in, 9, 182–85, 194–95, 279, 307n11; and collaborative approach, 123–25; and connecting across difference, 202–4, 209, 215; and corporate social architecture, 145–46, 152–53; and EHR, 182–85, 194, 269–70; and expertise, 119–21; and mentoring, 249–53; in mission-driven social architecture, 132–34, 136–37; overload in, 141–42, 165, 167, 168; in personal-service social architecture, 131, 153–54, 155, 156–57, 158; in supportive social architecture, 238–41, 258–60, 263–65. See also healthcare; physicians
- principals, 88–89, 108, 245–47, 296, 326n4
- privacy, sense of, 19, 73–74
- privilege: and social architectures, 154–56, 271–73. See also inequalities
- productivity, imperative of: and automation, 69–70, 78; in healthcare, 145, 165–66, 198; and inequalities, 217; and overload, 139, 165–66, 242; and privilege of supportive social architecture, 271–72; and standardization, 8, 164, 166–67, 198. See also efficiency, emphasis on
- professions. See employment; *specific professions*
- psychology, connective labor in. See therapeutic alliance; therapists
- purpose. See meaningfulness/purpose
- Qayum, Seemin, 229, 318n9
- quantification. See data tracking
- race, 18; and connective culture, 262; and connective labor by teachers, 50–51, 138–39; and recognition gap, 329n17; and relational inequalities, 207–8, 213–14, 218, 219, 227–28, 235, 324n2; witnessing across lines of, 35–36
- rapport. See connective labor; trust; witnessing
- Ray, Raka, 229, 318n9
- recognition, 310n30, 311n7, 312n9; as component of connective labor, 17–18, 30, 34–36, 293, 311n5; and social health, 281–82, 286; and supportive social architectures, 245, 272–73; and vulnerability, 205. See also misrecognition; recognition, and inequalities; witnessing
- recognition, and inequalities, 312n10; exploitation of practitioners, 226–28, 229, 231, 235–36; the need to be seen, 208–9, 210–11; recognition cutting across differences, 35–36; recognition gap, 311n8, 329n17; and stereotypes, 207–8
- Reddit, 277, 278
- reflective listening. See witnessing
- reflective resonance, 31–34, 42, 202, 211–12, 267, 285. See also witnessing
- reframings: by physicians, 27; by therapists, 30–31. See also reflective resonance
- relational design, in organizations, 136, 243–60; defined, 243; importance of, 243–44; and leaders, 243–47; and mentors, 247–53; and peers, 253–60
- relationality, and automation, 68
- relationships. See connective culture; inequalities in connective labor relationships; patient-doctor relationship; relational design, in organizations; student-teacher relationship; therapeutic alliance (therapist-client relationship)
- resilience, 48
- resonance, 31–32, 311n5
- resource distribution, 266–71; attentional load, 267–69; defined, 243; labor scarcity, 94; and social architectures, 135–38, 140, 146, 159; and systems/standardization, 269–71; time, 266–67. See also time, constraints on
- restorative justice circles, 262
- retainer-for-hire model. See personal-service social architecture

- risks, of misrecognition, 202–3, 204–5, 236.  
*See also* shame
- rituals, 99–100, 259, 318n4
- Roberts, Dorothy, 219
- robots. *See* AI (artificial intelligence)
- Roose, Kevin, 10
- rural medicine, 130, 131, 132–34
- safety/judgment tension, 122–25. *See also*  
judgment; vulnerability
- sales, 69–70, 78, 233–34
- savior role, 40–41, 45, 205–6, 210, 220–24
- schools. *See* education
- scribes, medical assistants as, 240, 269–70
- scripting, 9; and automation, 179–80;  
benefits of, 169–71; and “better than”  
arguments, 12, 74; and coping with  
overload, 187–88; defined, 163–64; and  
grocery shopping, 275, 277; problem  
with, 176–80; in supportive social  
architecture, 270–71; in therapy, 172–75
- second-person neuroscience, 29, 98
- seeing-and-being-seen. *See* witnessing
- self-checkout. *See* grocery shopping
- self-understanding, created by connective  
labor practitioners, 48–53
- service work: and emotional labor, 40–41;  
and standardization, 8, 9, 179, 181. *See also*  
specific professions
- shadowing. *See* mentors
- shame: and appeal of automation, 74, 236;  
and relational inequalities, 204, 206–7,  
215, 216–17, 235–36; and safety/judgment  
tension, 122–23, 125
- Sharkey, Amanda and Noel, 68
- Sherman, Rachel, 155, 326n16
- shopping. *See* grocery shopping
- silences, 119–20, 214–15, 235
- skills, 17, 81
- Smith, Anna Deavere, 281–82
- Snyder, Ben, 266
- social architecture, supportive, 238–74;  
benefits of, 272–73, 287–88; connective  
culture, 260–65; elements of, 243,  
273–74; experimental primary care clinic,  
238–41; and hero role, 242–43, 273;  
material resources, 266–71; and privilege,  
271–73; relational design, 243–60
- social architectures, 130–60; changes in,  
6–9; connective culture of, 136;  
corporate, 144–53; costs of, 159–60;  
mission-driven, 132–43; personal-service,  
153–59; and physicians, 130–32; relational  
design of, 136; use of term, 306n10. *See also*  
social architecture, supportive
- social health, 286–88
- social intimacy: across difference, 279–82;  
fragmentation of (*see* depersonalization);  
importance of, 13, 14; and patient-doctor  
relationship, 133–34; and recognition, 34–35
- soft skills, 3, 28, 36
- sounding boards. *See* peer groups
- spiritual concerns, and end-of-life care, 5, 7,  
65–66, 195–96
- spontaneity. *See* flexibility/spontaneity/  
improvisation
- standardization, 6–9, 161–200; benefits of, 187;  
in the built environment, 281; counting  
(data collection/analysis), 180–87; and  
cultural supremacy of industrial model,  
195–99; definitions, 163–64; difficulties  
of, 129, 176–80, 187; in education, 71–72,  
161–63; and flexibility, 112; and funding,  
164, 166; and inequalities, 217–20; and  
overload, 165–68, 187–95; scripts, 169–76;  
in supportive social architecture, 260–63,  
269–71, 287. *See also* data tracking; scripting
- stereotypes: and AI, 10; and belonging/  
difference, 281; and misrecognition, 207–8,  
235, 312n10; and systematization, 218, 325n11
- student-teacher relationship: check-ins with  
students, 187–89, 199–200; and desire to  
be unknown, 208; effect of, 4, 38–39, 80–81,  
161–63, 211; extending presence of teachers,  
192–93; mistakes in, 213–14; research on  
practices for building, 317n3; and sup-  
portive social architecture, 243, 246–47;  
and 10:30 trick, 190–92

- Suchman, Lucy, 62, 307n13
- suicide, 51, 52, 152, 176–77, 323n10
- surveillance, 10, 181, 199, 219
- sustainability: of mission-driven social architecture, 135–37; in tension with vulnerability, 114, 125–28. *See also* burnout systems. *See* standardization
- teachers: advisors in experimental school, 56–59, 80, 87–89; and body as instrument, 102–3; and burnout/overload, 165, 187–94, 195; and data tracking, 185; and empathy, 104; hiring, 246–47; instrumental value of connective labor for, 38–39; job-related stress among, 9, 161–62; making purpose, 46, 47; making understanding, 49–51; recruitment of/interviews with, 296; roles of, 58–59, 80–81; and social architectures, 138–40, 146–47; and standardization, 161–63, 188, 189; and sustainability/vulnerability tension, 126–27; and training, 327n5; use of emotions by, 108. *See also* student-teacher relationship
- team building. *See* peer groups
- technology. *See* AI (artificial intelligence); apps; automation of connective labor; electronic health records (EHR)
- templates. *See* scripting
- tensions of human practice, 118–28; client-centeredness/expertise, 119–22; safety/judgment, 122–25; vulnerability/sustainability, 125–28
- Tessa (chatbot), 61
- text messaging, 91, 176
- therapeutic alliance (therapist-client relationship): and authenticity, 44–45; effect of, 4, 38, 175, 273; power dynamics in, 97, 115; research on practices for building, 317n3; and scripting/standardization debate, 172–75; with teenagers, 198–99; terminology of, 37. *See also* witnessing
- therapists: AI replacing, 61, 65, 69, 74, 92, 279; artisanal practice of connective labor by, 96–98; and body as instrument, 100–101; burnout/overload among, 166–67, 242; coaches for online app, 83–86, 91–92, 147–48, 149–50; and collaboration, 109–10; and data tracking, 185–87, 306n8; and dignity, 44–45, 198; and flexibility, 111–12, 174–75; and inequalities, 206–7, 216–17, 218–19; instrumental value of connective labor for, 38; interviews with/observation of, 296, 299; making purpose, 46; and mentoring, 30–31, 248, 327n5; and mistakes, 115, 117–18, 213; and scripting, 169–70, 171, 172–75, 176–78; and social architectures, 141, 147–48, 156; and standardization, 8, 172–75, 176–78, 199; and tensions of practice, 122–23, 125–26; and time constraints, 171–72; use of emotions by, 104–6, 107, 108. *See also* therapeutic alliance (therapist-client relationship)
- Ticona, Julia, 148–49
- time, constraints on, 64, 66, 75; and burnout, 194–95; in corporate social architecture, 146, 147, 151–52, 157, 167–68; and efficiency, 319n3; and gig economy, 150; and grocery shopping, 275; and inequalities, 312n10; in mission-driven social architecture, 135–36, 140–42, 189–90; and personal-service social architecture, 155, 156–57; and standardization, 176–77, 198, 218, 321n1; in supportive social architecture, 238–39, 266; for therapy sessions, 171–72. *See also* burnout; overload
- timescapes, 266
- Timmermans, Stefan, 8
- touch. *See* physical contact
- transformational leadership, 245
- trust, 105–6, 111–12, 203–4, 262–63, 269
- Turkle, Sherry, 68
- Verghese, Abraham, 182
- veterans, 74
- virtual connective labor, 60. *See also* apps; automation of connective labor

- virtual nurses, 64–65
- virtual schooling: online courses, 92, 315n3;  
virtual preschools, 12, 67–68
- vulnerability, 33; and inequalities, 204–6;  
researcher vulnerability, 300–301; and  
tensions of practice, 114, 122–23, 125–28
- wages, 139, 272, 305n4, 307n16, 320n5
- Watson (AI), 60–61
- wealthy people: and automation, 82; and  
inequalities with practitioners, 229–32,  
237–38; and social architectures, 12, 82,  
145–46, 154–55, 156, 279; wealth gap in  
access to connective labor, 155–56, 218,  
279. *See also* privilege
- weight, and relational mistakes by physicians,  
203–4, 207
- witnessing: and belonging across difference,  
281–82; body as instrument in, 99–103;  
characteristics of, 17–18, 30, 33–34;  
collaboration in, 109–11; and connective  
culture, 263–65; effects of, 37–38;  
emotions/empathy in, 103–9; by  
hairdresser, 230–31; importance of, 34–35;  
and inequalities, 35–36, 208–12, 227, 235–36,  
311n8, 312n10, 329n17; and infant develop-  
ment, 34, 311n7; invisible witnessing,  
83–87; and judgment, 125, 216; five prac-  
tices of seeing-and-being-seen, 98–118;  
making/managing mistakes, 115–18; by  
physicians, 209–10, 211–12; spontaneity  
of connection, 111–15; by teachers, 80–81,  
208, 211, 212; by therapists, 30–31, 85,  
104, 318n6; and vulnerability, 205. *See also*  
misrecognition
- work. *See* employment
- working-class people, 211, 282, 325n7. *See also*  
low-income people
- workplaces, culture of. *See* social architectures
- Wright, Patrice, 207
- xkcd (comic), 79
- Yap (island), 18