

CARE IN TRANSNATIONAL MIGRATION

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- *A category of social and political analysis* •

ABSTRACT

This article seeks to explore the relationship between care and transnational migration by analysing the changes and challenges that the contexts of migration and the global labour market bring to women, as they are historically linked to care work. Care has emerged as a category for examining how inequalities are produced and reproduced, mainly from the perspective of gender relations as power relations that are inseparable and sustained fundamentally by family ties maintained across borders. The objective is to reveal the multiple forms of inequality at work in the management of care in the global care chain, as well as the role migrant women play in this context that is generating new rationale/forms of domination.

KEYWORDS

Care | Transnational migration | Gender | Inequality | Global market

1 • Point of departure: Human social life is impossible without care

Human social life cannot exist without care. However, care as an intrinsic part of social life has emerged only recently as a problem for social scientists to investigate.¹ In the words of Nakano Glenn,² care work involves three types of intertwined activities. First, there is direct care for the person, which includes physical care (feeding, bathing, grooming), *emotional care* (listening, talking, offering reassurance) and *services* to help people meet their physical and emotional needs (e.g. buying food, go on outings). Secondly, there is the type of care work that refers to the maintenance of the physical surroundings in which people live (changing bed linens, washing clothes and cleaning floors). And the third is the work of fostering people's social relations and connections – a kind of care work that has been referred to as “kin work”.³ All of these activities, which have been culturally and historically assigned to women and naturalised as their tasks, are what makes life possible. The problem is that this naturalisation generates certain disadvantages for women: disadvantages brought to light by migration, as they are visible in care work carried out at a distance, or *transnational care*, also known as the *global care chains*.

Women's migration and the way it has been incorporated into the global labour market in particular has led to certain disruption in the family environment. The work to reproduce the work force and the socialisation and care of children have been disrupted by the physical absence of the woman who is defined mainly as the mother, spouse and/or companion, but primarily as the caregiver *par excellence*. As a result, the agreements and arrangements in the home that sustain the household have to be reproduced in a transnational context in which *global care chains* emerge.⁴ We know that migration today raises new challenges for the analysis of care, as it brings to light the place of women in the different welfare regimes.⁵ But the origin of concerns with care dates back to before migration, to earlier decades in which care work became one of the pillars of the feminist struggle.

2 • Care: going beyond its multiple definitions

While many definitions of care exist, it can be said that the concept of care has been gradually built on the basis of the observation of practices of everyday life. In general terms, care has been defined as the relationships and activities involved in caring for people in their daily lives and inter-generationally.⁶ However, this generalisation has led to multiple definitions of care, as well as certain inaccuracies in regards to it. What is more, a series of difficulties exist in not only defining care, but also establishing the specific limits between the terms “care work”, “domestic work” and “reproductive work”, which, for the most part, can be used almost interchangeably.⁷ While reproductive work

is seen as that which allows the labour market to exist, theorists on care propose care work as being opposed to the values of the market, as they feel that it is contradictory to apply labour market terminology to the sphere of intimate personal relations.⁸ However, in addition to revealing the importance of feelings and identities in relation to this type of work, theorists of care do not ignore the context of the social, political and economic relations in which care is situated.

Ever since care emerged as a category of analysis, its complexity has become more and more evident in the arrangements that allow the needs for care and well-being to be met, such as: paid and unpaid care work (with or without a contract, with or without papers); care provided in the home and outside of it; and care provided in a country or between several countries (transnational care), to mention only a few of these divisions. Many studies that were promoted originally by feminist schools of thought in the field of social sciences back in the 1970s in Anglo-Saxon and Scandinavian countries explain these practices. Even so, it is worth highlighting that comparative studies between countries are the ones that enriched the theoretical work in this area. One characteristic common to all of them, though, has been the quest for greater conceptual precision.

In view of the above – that is, in an attempt to go beyond the definitions of care⁹ – one can note that defining care requires talking about both opposing and complementary elements. As the Spanish feminist collective *Precarias a la Deriva* points out, this, in turn, illustrates that in reality, what one is talking about is the movement between pairs in which care acts as the transversal element, because: 1) it breaks with the dichotomy between notions of dependence and independence by stressing the idea that we all have to take care of ourselves in daily life and we depend on each other for different things and at different moments of our lives; 2) it combines the “material” with the “immaterial” in an inseparable way; 3) it cuts across various spheres of economic activity (uniting the commercial with the non-commercial); 4) it is not restricted to the home, nor to a concrete woman; instead, it has been historically organised around networks of women in and outside the home, paid or unpaid, nuclear or extended family, among others; 5) there are chains of women who cross borders; 6) it is a job where numerous tasks are mixed together all at the same time, which demands constant time and space management and a versatility of knowledge; and 7) it is a job in which it is extremely difficult to distinguish between time for one’s personal life and time for work.¹⁰

However, although the concept is becoming more precise over time, there is still no consensus on its definition. This generates debate between those who attempt to develop a theoretic approach capable of going beyond national borders and differences related to gender and family ties, and those who limit its scope by converting it into a descriptive category situated in a concrete national context, which leaves out all experiences with care at a distance – the so-called “transnational care”. In the end, contexts are important for understanding care,¹¹ and even more so in a scenario of mobility in which care emerges not only as an analytical category, but also a political one.

3 • Care in transnational migration: the emergence of the global care chains

As has been shown in recent decades, migration is a very important area of study in the field of social sciences, especially for modern research on inequalities. Questions raised by the distinctions made according to gender, kinship, social class, immigration status or age, among others, are a concern in research that concentrates on the analysis of power relations in migration. Closely linked to the interest in showing how inequalities are produced and reproduced, care emerged as a key practice for analysing inequalities. This is due primarily to the interest in gender relations as inseparable power relations that are fundamentally supported by transnational kinship or, in other words, family ties that go beyond the borders of the nation-state.

If we look back to only a few years ago, we observe that in the analyses on migration, questions related to gender focused on social change. In these studies, researchers asked themselves if gender relations tended to be more equal or, on the contrary, reproduced the relationships of inequality and subordination that existed in the place of origin in the place of destination. These inquiries concentrated on the changes or in the elements that remained the same, both here and there.

Later, research conducted mainly from a feminist perspective¹² began to give visibility to how in women's discourse on their migration, their responsibility as mothers – but also as sisters and daughters – is crucial for them, and for the other members of their families and family networks. These studies demonstrated how the circulation of goods, care and affection among related women sustained family life at the transnational level.¹³ Since then, family ties have been incorporated into research on transnational migration as an axis of social differentiation and as a result of this, families and networks of relatives are considered not only as units of analysis, but also axes of social inequality. The inclusion of family relations as relations of power and inequality leads families to dialogue with the social reproduction of transnational life, and the practices of giving and receiving care in transnational family relations (transnational maternity, paternity and marriage). Thus, the feminisation of migration, the use of new information and communication technology (ICT) and the loss of social class due to mobility, which are characteristic of modern migration, allowed issues related to social change and social reproduction to be united, while giving visibility to concerns with care, transnational families and transnational family ties.¹⁴ Since then, the analysis of “global care chains” – the term coined by feminist sociologist A. Hochschild¹⁵ – has been brought into the limelight by interest in understanding how transnational life is sustained.

The transformations of global capitalism in welfare societies¹⁶ have brought these global care chains, which transcend the borders of nation-states, to light because of the role migrant women have played in resolving the global crisis of care. Therefore, when we

talk about care in relation to mobility across borders, a large number of these studies concentrate on the management of family well-being.¹⁷ Therefore, in this context of changes at the global level, the feminist critique will once again be the one concerned with analysing how the practices of giving and receiving care, as principles of social organisation, reproduce inequality in order to understand the causes and impacts of migration.¹⁸ In these studies, feminism will assume the task of examining the specificity of care work by asking who does what, how, when and why so as to give visibility to these practices and the growing complexity of their moral, material and affective aspects in local contexts and now, transnational ones as well. Monitoring the chain's development – which depends not only the distribution of care within the family, but also the existence of public services, migration policies or the regulation of domestic work, among other factors – allows one to visualise how transnational care produces gender inequalities.

That said, if we explore the relationship between care and transnational migration further, we realise that care and global care chains appear in works that analyse the *transnational family*,¹⁹ or more specifically, the link with *transnational maternity*²⁰ – that is, the work of providing support and care that is assumed to exist in this long-distance relationship. Using Finch's²¹ classification of care, Baldassar²² identifies different types of support or care that appear in migration, which include practical, financial, personal, moral and/or emotional support or care. According to Baldassar,²³ family relations are built on the latter. This is reflected in efforts to “stay in touch” – that is, in the desire to not only keep communication channels open, but also preserve emotional ties. “Being in touch” involves “kin work”²⁴ or “emotional work”,²⁵ which is understood as a type of emotional care in Finch's terms.²⁶ Moreover, authors like Baldassar, Baldock and Wilding argue that moral and emotional support “help migrants deal with sadness, and fathers and mothers, with the profound feeling of loss caused by the distance that separates them from their children and grandchildren. It involves providing mutual support when a crisis occurs due to illness, death or family breakdown. From a distance, moral and emotional support is provided through letters, phone calls, e-mails and other forms of communication.”²⁷

4 • Point of arrival: analysing inequality in the social organisation of transnational care as a political mission

The *social organisation of care* is the way each society establishes a correlation between its specific care needs and how it responds to them. It is the way social stakeholders that may have a role to play in the provision of care (families, communities, the market and the state) come together to provide it and also, the leadership role that each one assumes.²⁸ The “social organisation of care” concept is a regional adaptation of the concept of “social care” proposed by Daly and Lewis that emerged in Latin America.²⁹ In the words of Arriagada,³⁰ it refers to the “interrelationships between economic and social policies on care. It is a way of distributing, understanding and managing the need for care work, which keeps the economic system functioning and sustains social policy.” Therefore, to

understand how care work is organised socially, one must know what care needs there are in a given context and how different actors respond to them. The stakeholders mentioned above – families, communities, the market and the state – make up the “care diamond”. This term not only emphasises the presence of these actors, but also refers to the relationships established between them: care provision does not happen in an isolated or stagnant manner. Instead, it is the result of a continuity of activities, work and responsibilities³¹ – a care diamond that is also reproduced and sustained transnationally.

In a broader framework, in regards to the relationship between migration and the social organisation of care, in the words of Gregorio,³² it is understood that

in the new global context, gender boundaries generated by the separation of the reproductive sphere – understood as the domestic one – from the productive sphere – understood as labour, which is the result of the ‘social contract’ – are becoming more complex and new forms of domination are appearing. We are witnessing the production of masculinised body-machines, which are required to produce surplus value in the framework of market relations; sexed bodies in their relationship with employment and unable to provide care and be cared for; and feminised, ethnicised and proletarianised bodies that move between the home and the market and that are necessary for the production of surplus value and as caregivers.³³

Based on this logic, migration brings this lack of precision to light and care work articulates it. Studies on the social organisation of care³⁴ have allowed us to assess and give visibility to the role of international migration flows and especially of the women in them due to the analytical, political and ideological weight of the “care” category.

This category is also a political one. The “crises of care”, which are a result of changes in the content and the protagonists of care work and the circumstances in which it is carried out, and the “commodification of affection”, which is a result of the combination of economic practices and emotional or sexual relationships in an intimate environment (domestic workers, nannies, nurses, sex workers, transnational marriages, etc.), challenge the type of analysis being done on care that is provided and received at a distance.

Therefore, we believe that in order to respond to this challenge and show that care produces and reproduces power differences, we must show the multiple inequalities that are intertwined in the management of transnational care while we take into account that these social relations are also influenced by a series of dichotomies. In fact, if we centre our attention on geographical aspects – that is, local or transnational care – we find the geographical distance/proximity binomial.³⁵ If we focus on spheres of action – that is, care provided in or outside the home – the public/private dichotomy emerges. If we take into account family ties – that is, the weight of blood relations in the management of care – the leading binomial refers to

biology versus choice in the construction of ties that are considered important, while family connections built voluntarily are set aside. If we look at moral issues – that is, if the best care is the one provided in an altruistic manner or out of self-interest – one observes the personal interest/altruism dichotomy. If we concentrate on physical aspects – that is, care provided in a situation of dependency – the dependency/autonomy pair emerges. And finally, if we consider time, we can observe the time for personal life/time at work dichotomy, which is related to the time we dedicate to providing paid or unpaid care, at the expense of time to spend on other aspects of our life.³⁶ Present in the management of care practices, these binomials place women on the side of the dichotomy that has less value and recognition and is often paid less.

In sum, based on this assignment of dichotomous positions, migrant women will attempt to respond to the obligations that derive from transnational social reproduction or transnational care. Their responses will be influenced not only by their gender and positions in the family (women-mothers-sisters-grandmothers-aunts or friend), but also by their social class, ethnic group, age or colonial relationship, in the assignment of these dichotomies. Showing how inequality is reproduced in the management of transnational care and in the global care chains is our mission.

NOTES

1 • Niall Hanlon, *Masculinities, Care and Equality: Identity and Nurture in Men's Lives (Gender and Sexualities in the Social Sciences)* (Basingstoke: Palgrave MacMillan, 2012): 29.

2 • Evelyn Nakano Glenn, *Forced to Care: Coercion and Caregiving in America* (Berkeley, CA: University Press Books, 2010).

3 • *Ibid.*, 5.

4 • Arlie Russell Hochschild, "Las Cadenas Mundiales de Afecto y Asistencia y la Plusvalía Emocional," in *En el Límite. La Vida en el Capitalismo Global*, ed. Will Hutton and Anthony Giddens (Barcelona: Tusquets Editores, 2002): 187-208.

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6 • Nakano Glenn, *Forced to care*, 5.

7 • Mignon Duffy, *Making Care Count: A Century of Gender, Race, and Paid Care Work* (Piscataway, NJ: Rutgers University Press, 2011): 12.

8 • *Ibid.*, 13; Hanlon, *Masculinities, Care and Equality*, 31.

9 • María Ángeles Durán and Jesús Rogero García, *La Investigación Sobre el Uso del Tiempo – Colección Cuadernos Metodológicos N° 44* (Madrid: Centro de Investigaciones Sociológicas, 2009); Rosario Aguirre and Karina Batthyány (ed.), *Uso del Tiempo y Trabajo no Remunerado. Encuesta en Montevideo y Área Metropolitana* (Uruguay: Unifem, Universidad de la República, 1995); Marie-Thérèse Letablier Letablier, "El trabajo de 'cuidados' y su conceptualización en Europa," in *Trabajo, Género y Tiempo Social*, ed. Carlos Prieto Rodríguez (Madrid: Editorial Complutense, 2007): 64-84; Ubaldo

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10 • Precarias a la Deriva, *A la Deriva por los Circuitos de la Precariedad Femenina*, 224-225.

11 • Carmen Gregorio Gil, "Silvia, Quizás Tenemos que Dejar de Hablar de Género y Migraciones: Transitando por el Campo de los Estudios Migratorios," *Gazeta de Antropología* 25, no. 1 (2009): 1-17.

12 • Feminist anthropology's view on the processes of building and changing gender relations in migration has led to the analysis of gender and kinship as inseparable power relations. This approach, which I identify with, explains not only the feminisation, but also the reproduction of

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15 • Hochschild, "Las Cadenas Mundiales de Afecto," 187-208.

16 • Lourdes Benería, "Crisis de los Cuidados, Migración Internacional y Políticas Públicas," in *El Trabajo de Cuidados. Historia, Teoría y Políticas*, ed. Cristina Carrasco, Cristina Borderías and Teresa Torns (Madrid: Catarata, 2011): 359-89.

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18 • Carmen Gregorio Gil, *Migración Femenina. Su Impacto en las Relaciones de Género* (Madrid: Narcea, 1998); Herminia González Torralbo, *Migración Colombiana, Género y Parentesco. La Organización Social de los Cuidados* (Granada: Editorial Universidad de Granada, 2010).

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- 26 • Finch, *Family Obligations*, 1989.
- 27 • Baldassar, Wilding and Baldock, *Families Caring Across Borders*, 87.
- 28 • Mary Daly and Jane Lewis, "The Concept of Social Care and the Analysis of Contemporary Welfare States," *British Journal of Sociology* 51, no. 2 (2000): 281-98; Irma Arriagada (coord.), *Familias y Políticas Públicas en América Latina. Una Historia de Desencuentros* (Santiago de Chile: CEPAL-UNFPA, 2007); Irma Arriagada, *La Organización Social de los Cuidados y Vulneración de Derechos en Chile* (Santiago de Chile: ONU Mujeres y Centro de Estudios de la Mujer – CEM, 2011); ONU Mujeres, *Sesión 2. La Organización Social del Cuidado: Identificación de Necesidades y Escenarios de Cuidado* (Santiago de Chile: ONU Mujeres Centro de capacitación, 2014).
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- 35 • The concept of the transnational family used the most in recent years refers to "the family that lives some or most of the time separated from each other, yet stays together and creates something that can be seen as a feeling of collective welfare and unity, i.e. 'familyhood', even across national borders" (Bryceson and Vourela, *The Transnational Family*, 2).
- 36 • Herminia González Torralbo and Elaine Acosta, "Cruzar las Fronteras de los Cuidados. La Migración Transnacional Más Allá de las Dicotomías Analíticas," in *Las Fronteras del Transnacionalismo. Límites y Desbordes de la Experiencia migrante en el Centro y Norte de Chile*, ed. Menara Lube Guizardi (Santiago de Chile: Ocho Libros, 2015): 126-49; Herminia González Torralbo, "Las Familias Transnacionales ¿una Tautología? Más Allá de la Dicotomía 'Distancia/Proximidad Geográfica,'" *Polis*, no. 43 (Jun. 9, 2016), accessed October, 2016, <http://polis.revues.org/11738>.



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Received in November 2016.

Original in Spanish. Translated by Karen Lang.



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