

## THE EXPERIENCES OF IMMIGRANT LIVE-IN CAREGIVERS IN ONTARIO

THE MIGRATION, WORKING, LIVING AND INTEGRATION EXPERIENCES OF  
IMMIGRANT LIVE-IN CAREGIVERS IN ONTARIO, CANADA

By

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To my beloved daughters, Ana and Isidora

## **Abstract**

This thesis aims to fill in the gaps in our knowledge of the experiences of immigrant live-in caregivers in Canada as a means to better understand the role of social networks and how this is informed by intersectionality theory. More specifically, based on 34 qualitative interviews with current and former live-in caregivers, this dissertation explores the migration, working, living and integration experiences of immigrant live-in caregivers in Ontario, Canada. In particular, I focus on: 1) their experiences with processes of decision making, migration and finding a job with a particular focus on role of social networks in these processes; 2) the impact of the type of care on live-in caregivers' working and living experiences as well as the role of networks in the process of their adaptation to life in Canada; and 3) their integration experiences (with a particular focus on role of social networks in these processes).

Although some researchers relied on some sociological perspectives in their studies focusing on live-in caregivers in Canada, none of the previous studies used these in conjunction with social network theory. My research shows that while social network theory is useful in considering the role of social networks in migration, living and integration experiences of LCP workers, it is not sufficient to come to a complete understanding of these issues. On the basis of my findings, I conclude that one should combine social network theory and intersectionality when exploring such issues with regards to not only LCP workers in particular, but also immigrant workers in general. By bringing such new empirical and theoretical insights, my dissertation contributes to the

body of previous research on experiences of LCP workers in Canada and more broadly to the literature on domestic workers in an international context, immigration research focusing on social networks and sociological theory.

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## **Declaration of Academic Achievement**

The following is a declaration that the contents of the empirical research in this document have been completed by Jelena Atanackovic.

# Chapter 1

## Introduction

As the result of global restructuring and population ageing many countries face a labour shortage in provision of healthcare and childcare services (Anderson, 2000; Armstrong & Armstrong, 2001). Part of the reason behind this shortage is that female citizens may be unable or unwilling to provide unpaid care for the elderly, disabled and young. The solution adopted by some developed countries has been to fill in such a gap by importing domestic care workers from other countries (Anderson, 2000; Neysmish & Chen, 2002; Yeates, 2004). Some countries, such as Canada and some regions of China (such as Hong-Kong), have even established “highly regulated, government-operated labour programs that have institutionalized both the recruitment and working conditions of migrant domestic workers” (Hondagneu-Sotelo, 2001, p.19-20). Others, such as U.S., have followed a more laissez-faire approach without any formal government system or policy to legally recruit foreign domestic workers (Hondagneu-Sotelo, 2001).

A peculiarity of the Canadian context stems from the opportunities offered by Live-in Caregiver Program (LCP), a federal work visa program that was created with specific aim to enable Canadian families to sponsor and employ people from other countries as live-in caregivers. In the international context, such program is exceptional since it allows foreign workers to apply for permanent residence status after they worked 24 months in Canada (Pratt & PWC, 2003). Another aspect of LCP for which it is seen as

unusual by international standards is that it represents a way for those considered to be unskilled to migrate to Canada. The inflow of foreign workers who enter Canada under the LCP has greatly risen from 5,028 in 2003 to 12,955 in 2007 (Citizenship and Immigration Canada [CIC], 2012). By 2011, the total entries of LCP workers have been reduced to 5,884. In 2012 they were slightly higher – in particular 6, 242 (CIC, 2012). The large numbers of foreign caregivers coming through the program illustrate the important role that immigrant live-in caregivers play in solving the problem of shortages of elderly and child care workers in Canada.

Despite the important role that immigrant live-in caregivers play in the care of children and elderly in Canada, the research that has examined their migration, working, living and integration experiences (Alcuitas, Alcuitas –Imperial, Diocson & Ordinario 1997; Bakan & Stasiulis, 1997; Bonifacio, 2007; DeVan, 1989; Granda, 1996; Granda & Kerr, 1998; Mikita 1994; Pratt, 1999; Pratt & PWC, 2003; Silvera, 1989) is incomplete with regards to many important issues. More specifically, it has left relatively unexplored the role of social networks in the migration and living experiences of immigrant live-in caregivers. Also, it focused mainly on migration experiences of Filipino live-in caregivers, thus failing to explore such experiences among non - Filipino LCP workers. In addition, most of the previous studies do not differentiate between different types of care and their impact on working and living conditions of immigrant live-in caregivers. Also, the previous research has insufficiently explored their integration experiences, in particular actions that immigrant-live in caregivers pursue during and after the program in order to improve their outcomes after they complete the LCP and the role of networks in

such processes. Such gaps are significant given the role that LCP workers play in addressing our care labour shortages.

Thus, in my dissertation research I aim to come to a better understanding of the migration, working, living and integration experiences of immigrant live-in caregivers in Ontario, Canada. With regards to their migration experiences, I explore the process of their migration decision making as well the actual process of their migration to and finding a job in Canada with particular focus on the role of networks in such processes. My study will show that migration decisions among immigrant live-in caregivers are triggered primarily by work/economic factors such as lack of job opportunities and poor financial circumstances in their countries of origin. This holds for all participants, regardless of their country of origin. The data will also demonstrate that often economic/work related reasons for migration combine with those non-economic (such as, for instance, desire for exploration of different geographical spaces or opportunity for learning a new culture) to initiate live-in caregiver's desire to migrate. Whatever the initial trigger for migration, social networks (both formal and informal) have been shown to be very important in both the migration decision and processes of migration and finding a job among LCP workers. These networks provide prospective live-in caregivers with information about the possibility of undertaking this kind of work in Canada and unique Live-in Caregiver Program, help them with finding a job and paperwork and serve to guide them to choose a certain type of care.

In order to get a better understanding of working and living experiences among LCP workers in Ontario, Canada, in my study I examine how their working and living

conditions differ according to the type of care they provide (childcare, elderly care). I also explore the role of social networks in the process of their adaptation to the life in Canada. I will show that type of care has a significant impact on live-in caregiver's working and living conditions. For instance, interviews reveal more favourable working conditions for live-in caregivers taking care of elderly compared to those taking care of children in terms of sick leave benefits, overtime work, additional work duties not stipulated by job contract and wages. I will also reveal how both live-in child and elder caregivers experience challenging living conditions in the home of the employer and limited social lives. Still, due to nature of their work, live-in elder caregivers experience more restrictions on the freedom of movement and greater social isolation. The results of my research will also demonstrate one's living experiences while under Live-in Caregiver Program are influenced not only by type of care (childcare, eldercare) one performs, but also his/her position in hierarchies of *gender*, *race*, *ethnicity* and *citizenship*. It will be revealed how strong ties with family and friends (i.e., - informal networks) play the most important role in the process of their adaptation to challenging living conditions in Canada. In contrast, the role of formal organizations (such as immigrant settlement services, recruitment agencies and live-in caregiver organizations) in the living experiences of LCP workers is limited.

Finally, in order to have a better understanding of the integration experiences of live-in caregivers after completion of LCP, in my study I explore: 1) immigration procedures that lead their transition from temporary to permanent resident status and family reunification process and 2) process of their preparation for and finding

the employment after LCP. In doing so, I pay attention particularly to the role of social networks in such processes. My findings will reveal that both the process of PR application and the process of educational upgrading are very long, expensive and complex. Informal networks assume the greatest role in all integration processes under consideration and are very beneficial to LCP workers as transmitters of relevant information and resources with regards to processes of PR application and upgrading. Even though informal networks of family and friends become major source of assistance for live-in caregivers during the process of job search after LCP, the help these networks can garner is limiting for live-in caregivers. Heavy reliance of live-in caregivers on these close personal networks gets them trapped in low paid jobs such as working in factory or food chains, babysitting and housekeeping.

Thus, the above outlined findings will demonstrate that informal networks of family and friends play an important role in experiences of LCP workers in Canada. While they are certainly useful to live-in caregivers in the process of their migration and adaptation to hard living conditions in Canada under the LCP, their utility decreases after some time, in particular after live-in caregivers obtain PR and are about to start the process of integration into Canadian labour market.

Some available studies on experiences of LCP workers are atheoretical. Although some sociological perspectives (e.g.-social constructionist, feminist and post-structural) have been used by some researchers in their studies focusing on live-in caregivers in Canada, none of the previous studies relied on these in conjunction with social network theory. Given its emphasis on role of networks in people's lives, this theory lends itself

very well to my research objectives focusing on the role of networks in the migration, living and integration experiences. Thus, in addition to bringing new empirical insights to the already existing body of literature on LICs in Canada and in turn suggesting policy changes, my research also makes a theoretical contribution to such literature. Specifically, my research will show that while social network theory is useful in considering the role of social networks in migration, living and integration experiences of LCP workers, it is not sufficient to come to a complete understanding of these issues.

In particular, I will show that network theory of migration by Massey et al. (1993, 2005) does not lead us to take into consideration the role of cross cutting hierarchies of difference (*gender, race, ethnicity and age*) and their intersections which prove to be very important factors in the processes of decision making and very act of migration of immigrant live-in caregivers. Moreover, I will also demonstrate how concepts of *strong and weak ties* as envisioned by Granoveter (1973,1983) do not consider the role of the three factors that impact on living and integration experiences of LCP workers 1) content of the information transmitted through the tie; 2) formal networks; and 3) cross cutting hierarchies of difference. In presenting my findings I will also show how an intersectionality approach adds to social network theory (and in particular both on network theory of migration by Massey at al. and Granovetter's concepts of strong and weak ties) by leading us to consider a role of cross- cutting hierarchies of difference (i.e. - *gender, race, class, ethnicity, nationality, citizenship, marital status/family situation and age*) in people's experiences. By integrating an intersectionality approach with social network theory we are able to better understand experiences of migrants more broadly

and LCP workers more specifically. On the basis of that, I will argue that one should combine social network theory with an intersectionality approach when exploring such issues with regards to LCP workers in particular and immigrant workers in general. In this way, by identifying the limits of this particular theoretical framework and how they could be resolved, my research will advance social network theory. This is the major theoretical contribution of my thesis research.

Before I map out the outline of my thesis, in the next section of this introductory chapter, I provide the readers with a brief background of the previous programs for foreign domestic workers in Canada and current, Live-in- Caregiver Program, including demographic profile of current live-in-caregivers in Canada. The purpose of such a review is to provide background context for my study that will be discussed subsequently.

## **1.1 Previous Foreign Domestic Care Work Programs in Canada**

Throughout the history, Canada has relied on immigrants for its domestic labour as many Canadian women irrespective of race and class have been unable or unwilling to engage in such isolated and privatized work (Arat-Koc, 1990; Zaman, 2006). Therefore, LCP is the latest version of such an immigration program (Spitzer & Torres, 2008).

Between the 1890s and 1920s, immigration officers recruited domestic workers from rural areas of England, Scotland, Ireland and Wales (Bakan & Stasiulis, 1994; Cohen, 1994; Daenzer, 1993; Macklin, 1994). As they were considered potential “mothers of nation”, they enjoyed the privileges unavailable to other domestics - they



entered Canada with landed immigrant status and enjoyed the right of occupational mobility (Arat-Koc, 1997; Daenzer, 1993). To meet increased demand for domestics, during WWII the recruitment expanded to white, East-European, non-English speaking refugees (Bakan & Stasiulis, 1994; Bakan & Stasiulis, 1997).

When the Cold War hindered migration for Eastern European women in 1955, Canada introduced a new scheme to admit “non-preferred” domestic workers from Jamaica and Barbados (Arat-Koc, 1999; Bakan & Stasiulis, 1997; Hodge, 2006). From 1955 to 1967, through this scheme called West Indies Domestic Scheme, 3000 women from Caribbean who had met certain health, age and marital criteria entered Canada (Cohen, 1994). Unlike the previous requirements for white domestic immigrants (the only one being that they wished to work as a domestic for one year), to qualify under the program the domestic workers from the West Indies had to meet the following criteria: have a grade eight education, be single and healthy, belong to 25-40 age group and agree to work for duration of one year as a domestic for a specific employer (Calliste, 1989). Even though this new scheme guaranteed the permanent status for the Black women from British West Indies, Canada signed an unusual agreement with the Caribbean nations concerned (Bakan & Stasiulis, 1994; Danezer, 1993). According to this agreement, “the Caribbean women if found in Canada to be unsuitable for domestic work, were to be returned to their country of origin at the expense of Caribbean government” (Daenzer, 1993, p. 54).

A point system that was established in 1967 as a part of new immigration regulations signalled an end to West Indies Domestic Scheme (Bakan & Stasiulis, 1997;

Cohen, 1994; Spitzer & Torres, 2008). The aim of a point system was to universalize immigration by permitting people's entrance into Canada based on individual occupation, education and personal circumstances (Cohen, 1994; Danezer, 1993). Although this new system has been seen by many as a liberalization of immigration policy, in reality it resulted in greater immigration obstacles for women of colour (Bakan & Stasiulis, 1997; Danezer, 1993). While the requirement to work as a domestic for a year was abandoned, it was very hard, if not impossible for women of colour to collect education or occupation points required for permanent residency (Cohen, 1994). Given the lack of formal training for nursemaids and nannies in their countries and neglect of their practical experience by point system, domestic workers from developing countries found it difficult to qualify under point system as independent immigrants on permanent status (Arat-Koc, 1999; Cohen, 1994; Daenzer, 1993). Likewise, immigrant domestics remained kept out from labour legislation with regards to minimum wage, hours of work, vacation, Unemployment Insurance and Workers Compensation (Cohen, 1994).

In 1973, as a result of growing needs of upper-middle class employers for childcare and desire to retain immigrants in domestic service, the government established a new policy -- the Employment Authorization Program (Arat-Koc, 1999; Cohen, 1994; Langevin & Belleau, 2000). The employment visas under this program were issued that would allow domestic workers to stay for specific duration with a particular employer (usually for a year) (Grande, 1996). The working permits could have been renewed for up to five years as long as registrants stayed in the field, but they were precluded from applying for permanent residency status (Cohen, 1994; Grande, 1996). After 1973,

approximately 80 percent of domestics were admitted to Canada on employment visas, while only 20 percent, mostly of European background were permitted to come through point system (Cohen, 1994). In her study on conditions of domestic occupation at that time, Hook (1978) found that in comparison to Canadian workers, foreign domestic workers were more likely to live-in the homes of their employers, to work more days per week, to work more overtime without pay, and to receive a smaller hourly wage.

Due the demands of INTERCEDE (the International Coalition to End Domestic Exploitation) and other domestic workers' organizations who lobbied for domestics to settle in Canada permanently, the government initiated a new scheme- The Foreign Domestic Movement Program (FDM) (Arat-Koc, 1999; Grandea, 1996). Domestic workers who had a minimum of one year experience of working as a domestic, or who have obtained a certificate as a trained domestic worker could qualify under such program. After they had enrolled in a program and finished two years of continuous live-in work in Canada, they could apply for landed immigrant status from within Canada (Arat-Koc, 1999; Macklin, 1992, 1994). Women were assessed according to a variety of criteria, among which three were critical: the completion of two years of satisfactory live-in domestic service; evidence of skill upgrading and the ability to support dependent family members (Grande, 1996; Macklin, 1992, 1994). In many ways, the fate of domestic workers depended on their employers as their eligibility for permanent status relied heavily on their goodwill, their willingness to let them upgrade their education and provide them with positive letters of assessment (Arat-Koc, 1992; Silvera, 1989).

## **1.2 Current scheme: Live-in Caregiver Program (LCP)**

In the 1992, the Employment and Immigration Canada made some alterations to the previous FDM and renamed it Live-in Caregiver Program (Arat-Koc, 1999; Granda, 1996). The objective of the LCP has been “to bring workers to Canada to do live-in work as caregivers when there are not enough Canadians to fill the available positions” (CIC, 1999). To recruit live-in caregiver, prospective employers must: have made a sufficient effort to first fill the position with a Canadian, a permanent resident or a foreign worker already in Canada; have sufficient income to pay a live-in caregiver; provide acceptable accommodation in their home; make a job offer that has primary caregiving duties for a child or an elderly or disabled person; and submit an application for a Labour Market Opinion (LMO) with the employment contract to Human Resources and Skills Development Canada/Service Canada (HRSDC/SC)(CIC , 2014a).

To be eligible to apply to CIC for the LCP, potential applicants must meet the certain requirements. First, they need to receive a positive Labour Market Opinion from ESDC/SC that confirms that employer’s job offer is acceptable in terms of working conditions and that there are no Canadians/permanent residents in Canada who would work as live-in caregivers in Canada. Second, they have to sign an employment contract with their prospective employer. Third, they need to demonstrate that they have successfully completed an equivalent of Canadian secondary school education, at least six months of recognized formal full-time training in a field related to the job, or at least one year of full-time paid work experience (including six months with one employer) in the field related to the job in the past three years. Fourth, they need to have a good

knowledge (in terms of speaking, writing and comprehension) of an official language (either English or French) so that they can function on their own in employer's home. Finally, they need to apply for an initial live-in caregiver work permit at a visa office outside Canada. Also, then they will need to obtain medical, security and criminal clearances which ensures getting work permit before entering Canada (CIC, 2014b). There are four points with regards to which FDM and LCP differ substantially.

First, the FDM was created with intention to fill the need for childcare, whereas LCP was designed to address the need for care also for those who are elderly, disabled or sick (Langevin & Belleau, 2000). Second, compared to FDM, eligibility criteria for LCP have been more restrictive (Spitzer & Torres, 2008). The education criteria have been raised so that now workers must have completed the equivalent of Canadian grade 12 education and at least six months of recognized formal full-time training in a field related to the job (such as early childhood education, geriatric care) (Daenzer, 1993; CIC , 2014b). The first stipulation was based on the concern that live-in care workers often leave the occupation after they get permanent resident status and some labour projections that have shown that in the future one will need at least grade twelve education to get employed in a great number of jobs in Canada (Macklin, 1994). According to Macklin (1994), “the six-month training requirement represented another attempt to “professionalize” the occupation of live-in domestic work without furnishing any financial or other incentives to transform it into a higher - status occupation that is attractive to workers over the long-term” (p.27).

Third, due to pressure of domestic workers' organizations, the new program also officially removed the requirement that domestic workers obtain letters of release from their employers before changing jobs (Macklin, 1994). Nonetheless, to receive a new employment authorization employees still have to get "record of employment" from their former employers (including reasons for leaving, hours worked, gross earnings and any money paid or payable at the time they left their job (CIC, 2014c)).

Fourth, as a result of the demands of domestic workers' organizations, LCP lifted some of the extra requirements imposed by FDM for obtaining permanent resident status (i.e.-having to do skill upgrading and demonstrate self-sufficiency) (Arat-Koc, 1999, Macklin, 1994). To become a landed immigrant, a candidate must now only have minimum of two years of full-time, live-in domestic service that must be completed within four year period (CIC, 2010b).

On December 12, 2009, Minister Kenney proposed a number of regulatory and administrative changes to the LCP (CIC, 2010a). These changes aimed "to protect the rights of live-in caregivers and to make it easier for them and their families to obtain permanent residence in Canada, while continuing to protect the health and safety of Canadians and maintaining the program objective to respond to labour market shortages" (CIC, 2010a). Such proposed changes to LCP regulations in the *Immigration and Refugee Protection Regulations* (IRPR) became law on April 1, 2010 (CIC, 2010a). One of these regulatory changes was expanding the time frame in which caregivers are supposed to complete their two years of work to four years in order to be eligible for PR (CIC, 2010b). In the past, caregivers had three years to complete such requirement. Such

change provides caregivers with more flexibility to handle life's unexpected events (CIC, 2010b). Another regulatory change introduced in 2010 was a more flexible assessment of the requirements for permanent residency (CIC, 2010a, CIC 2010b). Caregivers who work overtime are eligible to apply for permanent residence sooner. They may now apply "after 3,900 hours over a minimum of 22 months, with a maximum of 390 overtime hours; or two years, at regular full-time rates" (CIC, 2010b).

Finally, there was an elimination of the second standard medical examination that live-in caregivers had to undergo in Canada, after they have worked two years in the country. CIC now assesses "medical admissibility in an application for permanent residence based on the medical examination administered *before* coming to Canada as *temporary residents*" (CIC, 2010b). This change meant a relief for many live-in caregivers as some have been denied permanent residency due to illness that was detected during the second medical examination after live-in caregivers have fulfilled the LCP requirements (CIC, 2010b). In addition to the regulatory changes, many administrative changes were announced at that time, including mandatory clauses in the employment contract, which must consider job duties, hours of work, wages, accommodation arrangements (including room and board), holiday and sick leave entitlements, termination and resignation terms and employer-paid benefits (CIC, 2010a; CIC, 2010b). Employer-paid benefits require that employer must provide: "transportation to Canada from the live-in caregiver's country of permanent residence or their country of habitual residence to the location of work in Canada; medical insurance coverage provided from the date of the live-in caregiver's arrival until he or she is eligible to apply for provincial

health insurance; workplace safety insurance coverage for the duration of employment; and all recruitment fees, including any amounts payable to a third-party recruiter or agents hired by the employer that would otherwise have been charged to the live-in caregiver” (CIC, 2010a).

Besides these mandatory clauses in the employment contract, some other administrative changes were introduced into the LCP. In particular, the opportunity for emergency processing of both LMOs (the employer’s authorization to hire) and new work permits of live-in caregivers already residing in Canada and experiencing any kind of abuse and threats in their jobs was established. Moreover, CIC Call Centre has initiated a new caregiver telephone service, designed to supply better information to LCP workers and their employers about their rights and responsibilities under the LCP (CIC, 2010b).

The live-in caregivers I interviewed, however, were not affected by the above mentioned changes. This can be explained in two ways. First, given that almost all of my respondents immigrated to Canada before 2010 when these changes were introduced, they did not benefit from some of the new regulations (such as for instance the new rule according to which employer is responsible for all live-in caregiver’s recruitment fees). Second, employers and recruitment agencies often do not comply with new regulations, which make them largely ineffective.

Most recently, in particular on December 31, 2013 some amendments to Immigration and Refugee Protection Regulations (IRPR) became effective with purpose of strengthening the integrity of Temporary Foreign Worker Program of which LCP is a



part (Employment and Social Development Canada [ESDC], 2014). According to these new amendments, employers will be required to “make reasonable efforts to provide a work place that is free of abuse” (ESDC, 2014). In addition, these amendments give ESDC/Service Canada “the authority to conduct inspections to verify an employer's compliance with the conditions in IRPR (and confirmed in the LMO letter) for a period of 6 years, beginning on the first day of the period of employment for which the work permit is issued to the foreign worker”(ESDC, 2014)<sup>1</sup>. If found to be non-compliant with the conditions, employers will: “be deemed ineligible to hire foreign workers for 2 years, and have their name, address and period of ineligibility published on a public ban list; be issued negative LMOs on any pending LMO applications; and/or may have previously-issued LMOs revoked.”(ESDC, 2014)

### **1.3 Statistical Profile of Live-in Caregivers in Canada**

Even though the number of people who come to Canada under LCP is substantially smaller when compared to some other immigration categories (such as skilled worker class)<sup>2</sup>, the increasing trends testify about its significance to solving the problem of shortages of elderly and childcare workers. The data show that there has been a significant growth in number of people who landed in Canada under LCP in the

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<sup>1</sup> In order to determine whether employer is complying with the conditions, ESDC/Service Canada will be authorized to: “require employers to provide documents that relate to compliance with those conditions; conduct on-site inspections without a warrant (private dwellings excluded and in the majority of cases, advance notice will be given to employers); and interview foreign workers or Canadian employees, by consent” (ESDC, 2014).

<sup>2</sup> For instance, the official statistics demonstrate that the number of people admitted under skilled workers class in 2009 was 40,733, a number about six times higher than the number of LICs admitted to Canada the same year (CIC, 2012).

principal applicant category in the recent years, increasing from just 2,230 in 2003, to 6,273 in 2009 (Kelly, Park, de Leon & Priest, 2011; CIC, 2012). The record number of immigrant live-in caregivers has been admitted to Canada as permanent residents in 2010 - in particular, 7,664 (CIC, 2012). In 2012, there has been a significant decrease in the number of LCP workers who obtained permanent status dropping to 3,690 (CIC, 2012) which some see as a result of economic downturn that occurred after 2008.

A total of 52,493 women and men landed in Canada between 1993 and 2009 as principal applicants under auspices of LCP (Kelly et al., 2011). Together with 30, 028 dependents who arrived in the same period they represented 2.1 percent of all immigrant landings. In 1993, 98 percent of all LCP applicants were women. By the 2009, the number of women decreased slightly, constituting 95 percent of all LCP applicants, coming mostly from Philippines (90 percent). While in 2009 the Philippines was the major source of recent LCP arrivals, other countries from which LCP workers tended to migrate the most were: India, Slovak Republic, England and Jamaica (Kelly et al., 2011).

Between 1993 and 2009, the proportion of applicants under age of 30 has fallen from 45 to 26 percent. On the contrary, the proportion of LCP principal immigrants over 40 has risen from 12 percent in 1993, to 25 percent in 2009. This is important since it indicates that immigrants who are done with LCP are entering the open labour market in Canada later in life, when possibilities for retraining and flexibility are significantly reduced. Consequently, this may impact their post-LCP employment opportunities (Kelly et al., 2011).

While the majority of applicants are single, there has been an increase in the number of married and separated applicants. For instance, the proportion of divorced, separated or widowed applicants rose from 4 percent in 1993 to 7 per cent in 2009. Regardless of the cause of such a trend, an implication is that some children may be joining single parent when they land in Canada (Kelly et al., 2011).

Overall the level of schooling of live-in caregivers currently residing in Canada has increased between 1993 and 2009 and is now very high. In 2009, 63 percent of principal applicants held a bachelor's degree or higher compared to only 5 percent of applicants with such educational background in 1993. This is a significantly high proportion, which greatly surpasses the proportion of principal applicants in 'economic' categories of immigration who hold university degrees (39.5 per cent) (Kelly et al., 2011).

It should be noted that these official statistics cover only those immigrant live-in caregivers who come through LCP, thus failing to capture undocumented immigrants who are currently working in this sector. These include those who have come to Canada as visitors, asylum seekers or students and overstayed their time limited visas (Cohen 2000; Langevin & Belleau, 2000).

## **1.4 Thesis Outline**

Following this introduction, I set out the context for this research by first presenting a literature review, which outlines the major insights from the previous research on migration, working, living and integration experiences of LCP workers in

Canada. In this chapter, I also identify substantive gaps in such scholarship which this dissertation attempts to fill.

Chapter three is devoted to the overview of the insights from the two theoretical frameworks on which I rely in my study- *social network theory* (in particular, network theory of migration by Massey et al. (1993, 2005) and concepts of *strong and weak ties* as envisioned by Granovetter (1973, 1983) and *intersectional approach* (Baca Zinn & Thornton Dill, 1996; Collins, 1999; McCall, 2005).

In chapter four, I reflect on the methodology employed in this research. More specifically, I provide information on the processes of data collection and analysis highlighting some difficulties that I encountered while recruiting the participants for my study. The second part of dissertation is devoted to my findings. In chapter five, I examine migration decision of immigrant live-in caregivers in Ontario, Canada with a particular focus on the role of social networks in this process. In chapter six, I explore the processes of immigrant live-in caregivers' migration and finding a job in Ontario, and more specifically the role of social networks in these processes. In chapter seven, I move on to shed light on differences in the working experiences between immigrant live-in caregivers who take care of the elderly and those who take care of children. Chapter eight has two purposes: 1) to illustrate differences in living experiences in Canada between immigrant live-in caregivers who take care of the elderly and those who take care of children; and 2) to examine the role of social networks in the living experiences of immigrant live-in caregivers. The last finding chapter of the thesis aims to illuminate the issue of integration experiences of immigrant live-in caregivers in Canada. More

particularly, this chapter focuses on the role that social networks play (both formally and informally) in: 1) the immigration processes that lead their transition from temporary to permanent resident (PR) status and family reunification process; and 2) the processes by which they upgrade their skills and find the employment after LCP (i.e.- labour market integration).

In the conclusion, I summarize my findings and reflect on the empirical and theoretical contributions of my study to the already existing literature. In particular, I emphasize its contribution to sociological theory, sociological literature on live-in caregivers and more broadly, to the literature related to immigrant (domestic) workers in an international context as well as to immigration research focusing on social networks. Based on my research findings, in this chapter I also outline some policy implications. In particular, I propose some immigration and labour policy revisions that may substantially improve the migration, working and living and integration experiences of immigrant live-in caregivers in Canada. In this section, discussing some of the limitations of my research I also give some directions for further sociological inquiry.

## **Chapter 2**

### **Overview of the Literature on Live-in Caregivers in Canada**

The literature that focuses on immigrant live-in caregivers in Canada focuses on two broader areas: 1) policy-related theoretical articles that critically analyze the current LCP policy, which has mostly been through racial, gender and class lenses; 2) empirical studies that focus on the migration, working and living, and integration experiences of immigrant live-in caregivers.

#### **2.1 Theoretically Informed Critiques of LCP**

Those who have analyzed the LCP through race, gender and class lenses have criticized it on many grounds. Some have argued that by raising qualifying educational criteria, LCP actually has barred many women from developing countries from the opportunity to migrate due to their inability to access Western education (Arat-Koc, 1999; Hodge, 2006; Macklin, 1994). Hodge (2006) argues that these restrictions on applicants are reminiscent of systemic racism in Canadian domestic schemes that implicitly favoured white, Western-educated women. Indeed, analyzing the previous domestic policies in Canada, many authors have noted that as source countries of foreign domestic workers have moved away from Europe towards Caribbean and Asia, state regulation of

these workers has tightened and their residency and citizenship rights have become more limited (Arat-Koc, 1997; Bakan & Stasiulis, 1994, 1997; Brigham & Bernandino, 2003; England & Stiell, 2008). For instance, Bakan & Stasiulis (1997) argue that initiation of a temporary program by Canadian government to bring in the domestics that occurred in 1970 coincided with shift in source countries from Europe to the Third World. They further state that:

It is ironic that the recent emergence of migrant, as opposed to immigrant, status for foreign domestic workers came precisely at the time when Canada claimed to have rid its immigration policy and procedures of racial and ethnic biases. Just when Canada started to define itself as “multicultural”, it developed policies which defined some groups of immigrants as “workers only”, disposable non-members, who despite their contributions, are given no acknowledged part in the “nation” or “nation building”(Bakan & Stasiulis, 1997, p.78).

In addition, some have noted that as these restrictive criteria of LCP apply mainly to women entering the country through this program, the sexism of immigration policy, which designates domestic labour as unskilled is evident (Brigham & Bernandino, 2003; Hodge, 2006).

In addition, in their analysis on implications of immigration and border control policies for trafficked women, Oxman-Martinez, Martinez & Hanley (2001) conclude that LCP has a disproportionately negative influence on women and it rests on “social construction of women’s dependency” (p.309). More specifically, they claim this program is created in a way that pushes women to rely on others for the sake of maintaining their immigration status.

Some have argued that LCP contains class aspects. According to some, it is not a matter of chance that while privileged, wealthier Canadian women are having some

success in public sphere, their migrant counterparts have to cope with separation from families and friends in order to engage in childcare and housework in someone's home (Brigham & Bernandino, 2003; Macklin, 1994). Indeed, due to class differences between them and foreign live-in caregivers they employ, economically privileged Canadian women are able to overcome gender barriers and achieve some success in the public realm (Hodge, 2006; Parrenas, 2000).

In a similar vein, Daenzer (1993) maintains that “the removal of rights from domestic workers was a policy made in the best interest of Canadian state, with its most direct benefit flowing to middle-class women” (p.138). Such class based inequalities between foreign-born domestics and their largely domestic born employers are also “nurtured internationally by nations eager to benefit from the export of their female citizens to a more lucrative labour market” (Daenzer, 1997, p.85).

These criticisms revealed in most of the theoretically informed analyses of the LCP policy may be best summarized by following statement made by Daenzer (1993): “The primary goals of domestic workers’ program, then, are supporting class interests, maintaining gender-specific interests in this occupational area and enforcing subjugation of cultural and racial minorities entering pre-dominantly white Canadian labour force” (p.139).



## **2.2 Migration, Working, Living and Integration Experiences of Immigrant Live-in Caregivers in Canada**

### **2.2.1 Migration experiences of immigrant LICs in Canada**

Even though there are some empirical studies that consider the migration experiences of immigrant live-in caregivers to Canada, the research on this topic is still incomplete in many respects. Some studies that among other issues focus on the issues that relate to process of migration of live-in caregivers (Alcuitas et al., 1997; Barber, 2000; Mikita, 1994) reveal the reasons for which they decide to come to Canada. For instance, in her research on agency in Philippine women's labour migration Barber (2000) reveals that the decision of these women to migrate to Canada stems mostly from the crisis of rampant unemployment, low wages and poverty in the Philippines.<sup>3</sup>

Moreover, research conducted by Alcuitas et al (1997) on economic and social impacts of de-skilling of Filipino live-in caregivers, finds that problems of low wages and poverty at Philippines are complicated by “a highly commercialized education system” (p.20). In fact, they explain that such education system “continues to create a pool of highly educated and skilled workers that cannot be absorbed locally” (p. 20). Alcuitas et al. (1997) explain that this system of education is in tune with labour export policy

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<sup>3</sup> In the article in which she reports on the results of her study, Barber (2000) points out that official statistics estimate that number of Filipinos who live below the poverty line is somewhere between 50 and 70 percent. She explains that “one of the legacies of colonial domination first by Spain and then the United States (from 1898 until nominal independence in 1946), is a large number of Filipinos who experience poverty, in part because they lack access to economically viable resources and secure employment” (p.399).

created by Philippines government to export female labour as a part of Structural Adjustment Programs (SAPs), imposed by IMF/World bank.

In addition, in her research on impacts of state policy on migration of Filipina nannies to Canada, based on the survey data of 144 Filipina domestic workers in Toronto, Mikita (1994) finds that 87 percent of her respondents cite the need to earn money for family responsibilities as a motivating factor for migration. Mikita also reveals that possibility of gaining permanent resident status after two years one spends in the program (an opportunity that is not offered to foreign domestic workers in other countries) is the greatest motive in their decision to choose Canada as their destination country. Reflecting on that, Mikita argues that “Canadian state not only sets the legislation to facilitate the migration and employment of domestic workers, but as well, plays an influential role in drawing significant number of Filipina caregivers to Canada” (p. iv).

The previous research that examined routes of migration of live-in caregivers to Canada finds that women either contact a recruitment agency or have a relative or friend who recommends domestic work to them (Cameron, 1999; DeVan, 1989; Grandea, 1996; Mikita 1994; Zaman, 2006). Sometimes relatives themselves sponsor foreign live-in caregivers (Cameron, 1999). As pointed out at the Roundtable on Temporary Migration organized by Institute of Research on Public Policy (IRPP) in Ottawa on April 30, 2012, such a trend has recently become more widespread. This causes some concern in policy circles as there is a sentiment that Live-in Caregiver Program is used for providing an easy entry to Canada to people who are not genuinely interested in working as live-in caregivers.

It has been suggested that finding employers through relative and friends who already reside in Canada can be beneficial as that way live-in caregivers do not pay fees to recruitment agency (Torres, Spitzer, Hughes, Oxman-Martinez and Hanley, 2012). This route of finding employment can be disadvantageous too, as live-in caregivers may feel pressured by family or friends to migrate through LCP, even though they do not want to (Torres et al., 2012).

A participatory action research study on experiences of Filipino live-in caregivers in Canada, conducted by Grandea & Kerr (1998), reveals that applicants in Philippines can pay tremendously high fees to recruitment agencies, which can amount to US \$3,500<sup>4</sup>. The same research reveals and that total cost of getting a job in Canada (including travel, recruitment and government requirements) can reach C \$8300. It should be noted that this research by Grandea and Kerr (1998) was conducted long before changes were introduced into the Live-in Caregiver Program in 2010 according to which employers are responsible for any third party associated fees, including fees charged by recruitment agencies. Still, there are some indications that these new regulations are not respected by some recruitment agencies. In the report by the Human Rights, Equity and Diversity Department of the UFCW Union of Canada issued in 2011, it is stated that the use of employment recruiters by employers remains a great challenge for many migrant workers, including live-in caregivers. Exorbitant illegal placement fees amounting to

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<sup>4</sup> According to Asis (2006), “there are more than 1,000 government-licensed recruitment and manning agencies in the Philippines (and an unknown number of unlicensed ones) that match workers with foreign employers”. Given that labour export became ‘strategy for survival’ for this country, “the government facilitates migration, regulates the operations of the recruitment agencies, and looks out for the rights of its migrant workers”. Indeed, “the remittances workers send home have become a pillar of the country's economy” (Asis, 2006).

thousands of dollars are still being charged to migrant workers by unscrupulous recruiters (UFCW Canada, 2011). For instance, it has been revealed that such placement fees may range from \$2000 to \$25000 (Standing Committee on Citizenship and Immigration Canada, 2009).

As such high fees sometimes equal to “several generations of savings” for live-in caregivers who mostly come from poor, developing countries (UFCW Canada, 2011, p.11), LCP workers tend to borrow money from relatives, an agency or even loan sharks to pay for their travel and application expenses (Alcuitas et al, 1997). In her research on the implications of immigration policy based on thirteen interviews with live-in caregivers, Cameron (1999) reveals that in order to avoid such high immigration costs, some women do paperwork themselves in Philippines and pay a placement agency to link them up with Canadian employer. As the recruitment agencies are not regulated by Canadian or Philippines government, it is not uncommon for women to be brought to Canada by a fake recruiting agency and subsequently discover that no agent or job awaits them (Alcuitas et al, 1997).

Other questionable practices by some recruiters as noted by the Standing Committee on Citizenship and Immigration Canada (2009) are: “charging workers a fee to bring them to Canada for jobs from which they are laid off shortly after arrival; exaggerating the amount workers can expect to earn in Canada, sometimes grossly; providing translations of contracts that are inconsistent with the original English or French version in describing work and other details of employment; charging workers unconscionable fees for extra services, such as obtaining an extension of their work

permit, transportation, housing, document translation or interpretation services” (p.31). For instance, in the Committee’s report, it has been noted that “some workers have been charged between \$1,400 to \$2,500 to have a work permit extended, which service is provided by the Canadian government for \$150” (p. 31).

The research shows that another problem that arises with recruitment agencies is the fact that racial stereotypes which they attach to certain ethnicities of live-in caregivers can hinder their opportunities to migrate (Pratt, 1997; Stasiulis & Bakan, 2003). The study done by Stasiulis and Bakan (2003), based on the interviews with 50 West Indian and Filipino domestic workers demonstrates that entry is more restricted in the case of West Indian domestics than Filipinos. In fact, among the 25 West Indian domestics in their study, fifteen came as undocumented migrant workers while only ten came under the LCP or FDM. Among 25 Filipinas, only two came as undocumented workers, while the rest migrated legally through the LCP or FDM. Stasiulis and Bakan (2003) see such differential patterns of entry for two groups as result of racist stereotype of domestic placement agencies of Canada that see Filipinas as “good servants”. Bakan and Stasiulis (1994) explain such shift in preference from West Indian nannies to Filipinas as being related to militancy and organized resistance that arose when Caribbean women predominated among foreign domestic workers in Canada.

Coming to Canada is often not live-in caregivers’ first experience with migration. Before landing on Canadian soil, many of live-in caregivers migrate to work in the countries such as China, Singapore, United Arab Emirates where it is not that difficult to obtain employment (Torres et al., 2012). But unlike in Canada, the immigration policies

in these countries do not give the right to temporary workers to apply for permanent status after certain period of time.

Still, most of the above cited research on migration experiences of LICs in Canada focuses on Filipino group, thus failing to examine such experiences of other ethnic groups among live-in caregivers and possible differences between them. Specially, we need to know more about why foreign live-in caregivers immigrate to Canada since the situation in the Philippines cannot be generalized to other immigrant groups as they come from many different states and what is role of networks in that process. Even though the above mentioned research conducted by Alcuity et al (1997), for instance, indicates that Filipinas are helped financially by friends and family in their migration to Canada, we need to know whether that is the case with other groups of immigrants.

We also need to know more about: the process of migration decision making among prospective LCP workers from different countries, and especially role of social networks in that process; the role of formal organizations (i.e.-agencies, embassies, etc.) as well as the role of informal social networks (family and friends) in their migration and arranging the job; the advantages and disadvantages of these two routes of locating employment; the role of live-in caregivers' background (education), previous working experience and type of network on which they rely in determining the type of care in which they end up. In addition, as many of them tend to work in some other country before migrating to Canada, we need to know more about these previous migration experiences and how they compare with migration to Canada.

### **2.2.2 Working and Living Experiences of immigrant LICs in Canada**

Compared to the research exploring the migration experiences of immigrant live-in caregivers in Canada, a greater number of empirical studies examines their working and living experiences. The literature reveals that mostly due to restrictive live-in arrangement and temporary migration status under the program, contracts between employers and live-in caregivers are often breached, resulting in very challenging working conditions for this group of workers. The live-in caregivers often complain about: not being paid at all; working overtime for which they are not compensated or are underpaid; not being allowed to take sick leave and days off; being pressured to take care of tasks not included in their job contracts such as taking care of other family members (in addition to the client specified in a job contract) or even animals, and being fired without a valid reason (Alcuitas, Alcuitas -Imperial et al, 1997; Bakan & Stasiulis, 1997; Granda, 1996; Granda & Kerr, 1998; Oishi, 2008; Oxman- Martinez, Hanley & Cheung, 2004 ; Pratt, 1997; Pratt & PWC, 2003; Silvera, 1989; Spitzer, 2009; Spitzer & Torres, 2008; Stasiulis & Bakan, 2003; Zaman, 2006).

Moreover, the interviews conducted by Granda (1996) in her study of the experiences of live-in caregivers in Canada reveal that the practice of sharing nannies, a case when caregiver has more than one employer which is not followed by a corresponding increase in wages. The same study reveals that sometimes caregivers are asked to work for some time without being paid, the so called trial period. Even though such practices as well as the violations of contracts discussed above are not legal, live-in caregivers do not complain and respond to these demands imposed by employers mostly

due to lack of knowledge on their rights and fear of becoming unemployed or deported (Bourgeault, Parpia, and Atanackovic, 2010; Grandea, 1996; Oxman- Martinez et al., 2004). It is interesting to note here that abusive and discriminatory working and living conditions that live-in caregivers experience in Canada may seem much less severe when compared to conditions of work they experienced as domestics in Middle East and Asian Tiger countries (Bakan & Stasiulis, 2012). As Bakan & Stasiulis put it, “the relative unfreedom imposed by LCP may be experienced as less coercive for migrant worker who has spent some years as domestic slave in country such as Saudi Arabia”. (p.224)

The hard working conditions of live-in caregivers in Canada are complicated by racial profiling of recruitment agencies that serves to structure their working conditions in terms of access to jobs, work arrangements and wages (Pratt, 1997; Pratt, 1999; England & Stiell, 1997; 2008). For instance, study by Pratt (1997) highlights the agents’ role in setting the higher starting wage to European nannies than to nannies from Philippines as they consider former to be more educated and having higher salary expectations.

The research shows that working conditions become even more complex in the cases when employers develop intimate bonds of friendship with live-in caregivers and regard them as members of their family. In fact, some studies have shown live-in caregivers who develop such familial relationships with their employers are more likely to work overtime and stay in jobs which they would otherwise leave earlier (Bakan & Stasiulis, 1997; Silvera, 1989; Stiell & England, 1997). According to some (Colen, 1989; Katzman, 1978; Rollins, 1985), “what lies at the core of contemporary relationship between live-in caregivers and their employers is maternalism” which is reflected in



“patterned asymmetrical behaviours including forms of address, space, physical appearance and gift giving” (as cited in Bakan and Stasiulis, 1997, p. 13) These asymmetrical behaviours which Mary Romero (1992, p.110) termed ‘maternalistic practices’, “define workers as needy, immature and inadequate to master their own lives, while strengthening employers’ perceptions of themselves as generous, thoughtful, and superior moral guardians” (as cited in Lan, 2003, p. 533). As Rollins (1985) puts it, “the female employer, with her motherliness and protectiveness and generosity, is expressing in a distinctly feminine way her lack of respect for the domestic as an autonomous, adult employee” (p. 186).

Previous research suggests that immigrant live-in caregivers in Canada have expressed high level of stress and dissatisfaction with their living conditions. In fact, the previous research demonstrates that due to their live-in arrangements, LCP workers: 1) often do not have privacy; 2) are often greatly limited in terms of personal movement and freedom of association which may lead to isolation; and 3) sometimes become victims of abuse by their employers (Cameron, 1999; Granda, 1996; Granda & Kerr, 1998; Stasiulis & Bakan, 2003; Oishi, 2008; Spitzer, 2009). Live-in caregivers often do not have keys to their own rooms, or to their employers’ house (Granda, 1996; Granda & Kerr, 1998; Stasiulis & Bakan, 2003). Contrary to LCP requirements, live-in caregivers are often not provided with separate, lockable room in employment’s home and instead live in a child’s or elderly person’s room, basement or laundry room (PINAY, 2008; Pratt, 2001, Spitzer, Bitar, Kalbach, Bernardino & Pereira, 2002; Stasiulis & Bakan, 2003). In many cases, domestic workers are prohibited from using the employers’

utensils, drinking glasses, toiletries and laundry (Grande, 1996; Grande & Kerr, 1998). Domestic workers often report that employers place some restrictions in terms of food they eat, temperature of the room in which they reside and use of space in their home (Spitzer et al., 2002; Stasiulis & Bakan, 2003).

There have been also instances when workers are not permitted to enter the house when they fail to come back home at designated time (Grande, 1996; Grande & Kerr, 1998). In addition, the potential restrictions involve barring intimate friendships and familial and sexual relationships (Stasiulis & Bakan, 2003). By prohibiting visitors, employers hinder live-in caregivers' access to social support which is considered crucial to their well-being (Spitzer, 2009; Villasin & Philips, 1995). In her study on live-in caregivers in Alberta, Spitzer (2009) finds that isolation is the biggest problem for those living in small cities and rural areas, as they often lack access to social support to alleviate isolation and to help their integration. In addition, she finds that live-in caregivers in these areas "can be increasingly dependent on their on employers to transport them to health services, government offices, social gatherings or religious services—sometimes at the employer's convenience rather than the worker's needs or desires" (p.2).

The feelings of isolation and loneliness among live-in caregivers in Canada are amplified by the LCP prohibitions against bringing family members into Canada, resulting in the separation of the workers from their families for an extended period of time. Cohen (2000) documents the feelings of sorrow among domestics for their inability to be with their parents and children at crucial points in their lives. Such feelings are

intensified when taking care of employers' families and may cause many emotional difficulties such as separation anxiety, stress and even depression (Oxman-Martinez et al, 2004).

In order to secure social life for themselves and escape isolation, live-in caregivers tend to leave employers homes on weekends (which are usually their days off) and reside with former live-in caregivers or share inexpensive hotel rooms with other live-in caregivers (Cohen, 1991; Spitzer et al., 2002; Stasiulis & Bakan, 2003).

Moreover, living in the home of the employer has put domestic workers under the risk of abuse (Grande, 1996; Grande & Kerr, 1998; Oishi, 2008; Oxman-Martinez et al, 2004; Silvera, 1989). The research reveals that live-in caregivers in Canada have been subjected to various types of abuse including verbal abuse (i.e.-insults and threats), physical abuse, and sexual assault (Grande, 1996; Grande & Kerr, 1998; Pratt, 2001; Spitzer & Torres, 2008).<sup>5</sup>

There have been some indications in the previous research that social networks (both formal and informal) may play an important part in helping live-in caregivers to adapt to their living conditions in Canada and to overcome the stress brought about by their demanding live-in caregiver job (Cohen, 1991; Spitzer et al., 2002; Root, 2008).

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<sup>5</sup> The reason for which live-in caregivers fail to be protected by law with regards to their working and living conditions lies in lack of co-ordination between federal government that enforces immigration laws and provincial governments that devise labour laws and in some cases, immigration laws (Langevin & Belleau, 2000). For instance, while the federal government imposes mandatory live-in requirement on immigrant live-in caregivers in order to fill labour shortage in that field, provincial legislation does not differentiate between hours worked and hours of availability which results in abuse (Langevin & Belleau, 2000). In addition, if homes are not considered workplaces, provinces may not have jurisdiction to monitor and administer labour standards in order to prevent contract violations (Grande, 1996; Langevin & Belleau, 2000; Spitzer & Torres, 2008).

Spitzer et al. (2002) found that in the case of live-in caregivers in the province of Alberta the informal networks of “friends and relatives in Canada provided the most common source of emotional and material social support while employers were seen as potential sources of material support” (p.31). Similarly, in her study that focuses on coping strategies that live-in caregivers use to adapt to harsh conditions of work and life in a major Canadian city, Cohen (1991) reveals that many domestics network with others in similar types of situations. In particular, she points out that some live-in caregivers join church, which represents a source of institutional support and ethnic networking. She also reports that 54 percent of the interviewed domestics went to some kind of formal domestics’ meeting at least once, whereas 38 percent had never been involved with a domestics’ organization.

Domestic workers’ organizations sometimes serve as informational resource for many live-in caregivers regarding their rights given that immigrant settlement organizations play a very limited role in that sense (Torres et al., 2012). In particular, while live-in caregivers are eligible to use all federal and provincial settlement services (with the exception of language training), these services are largely unavailable to them due to limited funds (Canadian Council for Refugees, 2013). While domestic workers’ organizations are often located in bigger cities (e.g. - Toronto, Vancouver)<sup>6</sup>, research

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<sup>6</sup> Over the years and in larger cities in Canada, women, caregivers, domestic workers, migrant workers, temporary workers and newcomers established support and political activist groups. Intercede in Toronto, PINAY in Montreal and the Philippines Women Centre of BC in Vancouver are centres for Filipina caregivers and domestic workers. These groups offer information, support and solidarity to live-in caregivers (Root, 2008).

shows that live-in caregivers in smaller or medium-sized urban centres such as Halifax complain about lack of such services (Root, 2008).

In sum, previous research on the working and living conditions of immigrant live-in caregivers in Canada brings us great insights on that topic. Still, a majority of these studies tend to see immigrant live-in caregivers as a homogenous group, thus failing to differentiate between different types of caring situations (children, elderly, disabled). Consequently, such studies fail to examine how working (working hours, benefits, responsibilities at work, wages, work-related challenges and relationship with employer) and living conditions (accommodation arrangements, personal movement and freedom of association, and experiences of isolation) differ depending on the type of caring they give. Some international research on that topic indicates that live-in elder caregivers experience more favourable working and living conditions than those who take care of children. For instance, in her research on experiences of Filipino migrant domestic workers, Parrenas (2001) finds that both in Italy and U.S., those taking care of older adults tended to enjoy more autonomy in their job and were treated with more respect than other domestic workers. In addition, in her research on three generations of Japanese American women in domestic service, Glenn (1986) finds that elderly employers are preferred among this group of workers, as they can trust them and also receive love from them.

There are some indications in Canadian research that each type of care may carry specific challenges. For instance, in her above mentioned study, Spitzer (2009) reveals that some of her respondents who take care of children expressed “the need to engage with adults as one would in a normal community where one interacts with a variety of

people not just children” (p. 9). Moreover, in her research with LCP workers taking care of old clients, Oishi (2008) finds that they are often verbally, physically and psychologically abused in their jobs by mentally or cognitively ill patients. Oishi also reveals live-in elder caregivers face job instability because “their patients can suddenly become seriously ill, hospitalized or pass away resulting in a job loss” (p.110). Moreover, in her study on “lived experiences” of Filipina live-in caregivers in Halifax, Nova Scotia, Root (2008) finds that elderly clients need 24 hour on call care which results in sleep deprivation of live-in caregiver, putting at the risk both his and his client’s safety.

As type of care might have an impact on live-in caregivers’ experiences, not differentiating between different types of caring is a significant knowledge gap on this topic.<sup>7</sup> This is especially true if we consider the role that live-in caregivers play in filling our labour shortages, especially in domain of childcare and elderly care<sup>8</sup>. In addition, as evident from the above reviewed research, the role of social networks (both formal and informal) in the living experiences of immigrant live-in caregivers in Canada has been left relatively unexplored. Thus, we need to gain more knowledge on these issues.

### **2.2.3 After LCP: Integration Experiences of LICs in Canada**

The previous research that explores what happens with immigrant live-in caregivers after they are done with the LCP has been relatively scarce. After the two years pass and

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<sup>7</sup> This gap in the literature as well as one aspect of the gap discussed below in the section that relates to live-in caregivers’ experiences after LCP have been identified in the IRPP paper titled “Economic and Social Integration of Immigrant Live-in Caregivers in Canada written by me and my co-author Dr. Bourgeault.

<sup>8</sup> Even though there is no official data on number of caregivers involved in each particular type of care (childcare, elderly, sick, disabled), reading the literature on immigrant live-in caregivers in Canada suggests that child and elderly care are most frequent work domains for this group of caregivers.

their obligations to the program has been completed, live-in caregivers are in a position to start a second transition that includes filling in applications, finding an employment and housing and expanding one's social networks (Spitzer & Torres, 2008). This new phase of re-settlement begins first with obtaining an open visa, and then permanent residency status.

It has been revealed that sometimes it takes somewhere between three and twelve months or more to get an open visa, during which time they have to continue working as live-in caregivers (Spitzer, 2011). Often an additional waiting period of three or more years is needed to receive permanent resident status, which provides them with opportunity to enrol in post-secondary education and start family reunification process (Spitzer, 2011; Spitzer & Torres, 2008). For 80 percent of all cases between October 1, 2012 and September 30, 2013 it took 39 months in total to process the application for permanent residency (CIC, 2013a). Applicants with dependents may wait even longer to complete the process, as each additional member has to pass medical and security examinations (Spitzer et al., 2007).

Another pitfall of immigration process that concerns the transition from temporary to permanent resident status are high landing fees and other processing costs (Alcuitas et al, 1997; Grandea, 1996; Grandea & Kerr, 1998; Oishi, 2008). Even though the right of permanent residence fee was reduced by half in 2006, overall the fees are still high (CIC, 2006). Currently, those applying for PR have to pay a processing fee of \$550 and right of permanent resident fee of \$490 (CIC, 2014d). The processing fee for the principal applicant's family members 22 years of age or older is \$550; for the minor such fee is

\$150. The permanent residence fee for spouses/common law partners of applicants is \$490. Dependent<sup>9</sup> children are exempted from permanent residence fee (CIC, 2014d). In her research on Filipina live-in caregivers working with elderly in Canada, Oishi (2008) maintains that despite the reduction in right of permanent residency fee, “the total cost of sponsoring a spouse and children, including various administrative costs and airfare would easily amount to C \$4000” (p. 111).

The previous research demonstrates that many LCP workers experience de-skilling upon coming to Canada (Alcuitas et al, 1997; Hodge, 2006; Pratt, 1999; Pratt & PWC, 2003; Zaman, 2006). A survey revealed, for example, that eighty percent of LCP participants from the Philippines had college degrees (Mercurio, 2006). De-skilling refers to “the systematic and structural processes involved in eliminating educational and professional skills, whether by force, by constructing barriers, or by imposing government regulations/de-regulations” (Zaman, 2006, p.79). Even after getting permanent resident or citizenship status, many live-in caregivers end up in one or more low paid jobs as cashiers, babysitters, house cleaners and live-out care workers (Spitzer, 2011; Spitzer et al, 2007; Pratt & PWC, 2003). As Stasiulis & Bakan, (2003) put it, such findings oppose the thesis of ethnic succession which states that only recent immigrants work in most difficult and dangerous jobs.

The previous research demonstrates that even though many immigrant live-in caregivers try to upgrade their skills and return to their previous occupation, very few

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<sup>9</sup> On May 10, 2013, Citizenship and Immigration Canada (CIC) proposed regulatory amendments that will narrow the definition of “dependent child” by lowering the age limit to children under the age of 19. If implemented, such change may have detrimental effects on live-in caregivers as it may hinder their ability to sponsor their children who are over such age limit (Chang, 2013).



succeed (Cameron, 1999; Pratt, 1999; Pratt & PWC, 2003; Zaman, 2006). In the research conducted by Pratt and PWC (2003) in her sample of fifteen live-in caregivers, only one was successful in returning to her nursing career.

First, LCP imposes numerous rules on domestic workers, resulting in deterring the upgrading of domestic worker skill (Alcuitas et al, 1997; Zaman, 2006). While being employed under LCP, they are not allowed to enrol in any course longer than six months which prohibits access to credit courses in the domain of post-secondary and professional skills (Alcuitas et al, 1997). There is some evidence that taking non- credit, non-academic courses is not really beneficial to live-in caregivers as few who do obtain better paid professional jobs after the LCP (Torres et al., 2012). To enrol in any credit course, migrant live-in caregivers are required to obtain a study permit (CIC, 2013b). Some studies (Martin Spiegelman Research Associates, 2000; Spitzer et al., 2002) show that many of LCP workers do not know about such possibility. Moreover, the fee for a study permit (i.e. - student visa) is currently CDN \$150<sup>10</sup> (CIC, 2014d). Thus, as Zaman puts it, the domestic workers “are not free to upgrade their skills without going through immigration procedures - a time-consuming, costly process” (Zaman, 2006, p. 79). In doing so, domestic workers are dependent on employers as they have to get a day off to visit immigration office (Zaman, 2006). Moreover, even if they overcome barriers regarding immigration procedures, the great demands of live-in work make it hard, if not impossible for them to upgrade while under the program (Macklin, 1992).

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<sup>10</sup> The study permit is not needed for: “attending nursery schools or kindergarten, distance learning, auditing courses, following a course that is not academic, professional or vocational in nature that can be completed within the period authorized upon entry into Canada, and following a course or a program of study which is six months or less that can be completed within the period authorized upon entry into Canada” (CIC, 2013b).

The lack of time needed for upgrading and costly, unaffordable educational courses represent other barriers in the process of obtaining Canadian credentials (Spitzer, 2011). In particular, in her study in which she traces multiple transitions that live-in caregivers experience as a part of their journey from temporary worker to permanent resident, Spitzer (2011) has found that due to their full-time or multiple part-time, low wage jobs, live-in caregivers were left with no time to process their credentials. In the same study, Spitzer reports that some of her respondents got discouraged from processing their credentials as their colleagues with similar educational background informed them about their failure to successfully complete such a process. Moreover, need to remit money to family back home coupled with desire for family reunification in Canada, preclude LCP workers from re-training in a profession of choice (Spitzer, 2011; Torres et al., 2012).

Moreover, potential employers usually do not consider experience obtained through LCP as “Canadian experience” (Spitzer, 2011; Spitzer et al, 2007). Despite the fact that “they have been working in Canada for over two years, care-work in a private home is effectively rendered as non-work and hence inadmissible as evidence of Canadian work experience” (Spitzer, 2011, p. 7). Also, while in the program and after, women continue to remit money to their immediate and extended families back home (Pratt & PWC, 2003). Consequently, long after completion of the program, many of former LCP workers continue to work as live-in caregivers, often making transition from “cradle to grave”, that is from childcare to elderly care (Bakan & Stasiulis, 1997; Cameron, 1999; Zaman, 2006).

Few studies identify the informal social networks as an important factor to consider in explaining downward social mobility of immigrant live-in caregivers in Canada. For instance, a study done by Pratt and PWC (2003) reveals that those women who were successful in regaining their previous occupation had critically important institutional support and relied on more rich and diverse networks. On the other hand, those who remained de-skilled and continued working in low- paid sectors tended to rely on more closed and static networks of family and friends. Similarly, in their study conducted in 2006-2007 in Vancouver, Toronto and Montreal, Torres et al. (2012) find that respondents received informal, factual support about how to navigate Canadian system and information about cleaning or caregiving jobs from friends and co-ethnic church communities. They add that “participants who relied solely on informal support from other former live-in caregiver friends may be most vulnerable in their efforts to integrate and improve situation in Canada because like themselves, their friends occupied disadvantaged social locations and had access to few social capital networks” (p.237).

Thus, the previous research has illuminated certain aspects with regards to immigrant live-in caregivers’ integration experiences after the LCP. Still, it leaves many aspects of such a process largely unexplored, especially regarding the role of social networks in the immigration procedures that pertain to their transition from temporary to permanent resident status and the family reunification process. We also know a little about role of social networks in preparing for (i.e.-process of upgrading) and finding a job after they are done with the program. With regards to immigration procedures, we need to know more about the role of employer, domestic workers’ organizations and any other

institutions that may help live-in caregivers in their transition from temporary to permanent status and in family reunification process. With regards to preparing for and finding their employment after LCP, we need to know more about the actions they pursue to get their back home credentials recognized, education they undertake to upgrade their skills and the role of formal (e.g.-domestic workers' organizations) and informal networks (family, friends) on which they rely in terms of getting informed about accreditation and educational opportunities and paying such education; and role of networks (both formal and informal) in their search for job after LCP. The next chapter is devoted to the overview of the social network theory and intersectionality on which I rely in my research.

## Chapter 3

# Push-Pull Model of Migration, Social Network Theory and Intersectional Approach

### 3.1 Introduction

This theory chapter is divided into five parts. The first part is dedicated to an overview of the push-pull model of migration. Although a useful heuristic device, the push pull model cannot be considered a theory- rather a means of classifying different factors that play a role in a process of migration decision making (Massey et al., 2005; de Haas, 2007). Given its heuristic value, I rely on it in my first finding chapter (chapter five of the thesis) when reviewing the factors that triggered the migration decision among the LCP workers I interviewed.

The next part of this chapter is devoted to an overview of social network theory. I have relied on two particular streams of social network theory. In particular, my exploration of live-in caregivers' migration experiences (including both the processes of their migration decision making and migration) has been guided by a specific version of social network theory, namely, *network theory of migration* by Massey et al. (1993, 2005). Moreover, in my exploration of living and integration experiences of LCP workers in Canada I have relied on the concepts of *strong* and *weak ties* as envisioned by Granovetter (1973, 1983). Thus, in the second part of this chapter I outline the main propositions of network theory of migration and define Granovetter's concepts of strong

and weak ties. I also review the migration research that draws upon these theories and concepts.

The third part of this theoretical chapter contains overview of the multiracial feminist intersectional approach on which I relied in my exploration of each of the aspects of experiences of live-in caregivers in Canada. After outlining its main postulates, I explain why I chose to use it in my research. In doing so, I provide an overview of research that illustrates the importance of this approach for understanding the experiences of the immigrant population in general and live-in care workers in particular. Next, I outline the rationale for choosing social network theory as one of the main theoretical foundations of my research. The last section of the chapter is dedicated to the brief summary of the theoretical gap that my study seeks to fill; as such, it emphasizes the theoretical contributions of my dissertation to sociological theory, the body of existing literature pertaining to specifically to the experiences of immigrant live-in caregivers in Canada, and more broadly to the literature related to immigrant domestic workers in an international context as well as to immigration research focusing on social networks.

### **3.2 Part I: Push-Pull Model of Migration**

The roots of the push pull framework can be traced back to Ravenstein's (1885, 1889) 'laws of migration'. Ravenstein considered migration to be an integral part of development, and he argued that the major reasons for migration were economic in nature. His laws, which were applicable mainly to internal rather than international migration, are more empirical generalizations made on the basis of his analysis of the British as well as other censuses of the time (Samers, 2010, p. 55-56, as cited in King,

2012). Ravenstein's (1885, 1889) claim that people are more likely to move from low income to high income areas, and from densely to sparsely populated areas represents underlying assumptions of push/pull model of migration (de Haas, 2007).

The push – pull model is a “simple, indeed simplistic model that conceives of migration as driven by a set of push factors operating from the region or country of origin (poverty, unemployment, landlessness, rapid population growth, political repression, low social status, poor marriage prospects etc.), and pull factors operating from the place or country of destination (better income and job prospects, better education and welfare systems, land to settle and farm, good environmental and living conditions, political freedom etc.)” (King, 2012, p.13). In his version of the push-pull model, Lee (1966) proposed that in addition to such factors, there is also a set of a set of ‘intervening obstacles’ which potential migrants have to overcome such as physical distance, travel costs, culture-related barriers such as linguistic challenges and different ways of life, and political obstacles such as international borders and immigration restrictions (as cited in King, 2012). Lee also maintained that migration is selective in terms of the individual characteristics of migrants since different people respond differently to various combinations of push and pull factors depending on their economic status, life stage and personality (as cited in King, 2012). For instance, a single, young adult without a job will be more interested in employment and income factors and be less interested in the education system in a destination (King, 2012). Indeed, the educational system of a destination country will be more likely an important factor in the process of migration decision-making of a people who have children (King, 2012).

Therefore, as de Haas (2007, p.17) describes, “the push-pull model is basically an individual choice and equilibrium model, and is, therefore, largely analogous to neo-classical micro models” which are based on the principles of utility maximisation, rational choice, factor-price differentials between regions and countries, and labour mobility (see also King, 2012). This model has become very popular in the migration literature and it has been the predominant migration model in secondary and university education probably due its ability to include all the factors that play a role in migration decision-making (de Haas, 2007). Despite its apparent popularity, this model of migration has been criticized on many grounds. de Haas (2007), in his paper on migration and development from a theoretical perspective, reflects the most common criticisms of push-pull model:

It is doubtful whether the push-pull framework is of much analytical use, and whether it can be called a theory at all. It is rather a descriptive model in which the different factors playing a role in migration decisions are enumerated in a relative arbitrary manner. As they are applied in practice, push-pull models tend to have the character of ad-hoc explanations forming a rather ambiguous depository of migration determinants. More problematic is the tendency of push-pull models to confuse different scales of analysis (ranging from individual to global)...Neither do they allow for empirical tests on the role and importance of factors that have been included or excluded. Analyses concluding that low wages, high population pressure or environmental degradation as opposed to better conditions at the destination ‘cause’ migration tend to be so general as to be more or less stating the obvious. Push-pull models also tend to ignore the heterogeneity and internal stratification of societies... the argument that migrants are lured to big cities or to foreign countries because of the high wage ‘pull’, is implicitly or explicitly made in relation to an apparent low wage ‘push’ at the sending end. It then becomes arbitrary and open to subjective judgment to establish whether the push or the pull is dominant. In fact, the differences in the relative scarcity of labour can be aptly expressed in one single variable, that is, wage differentials. (p.18)



As it will be demonstrated in chapter five of this thesis, the push/pull model has allowed me to sort out the different (economic and non-economic) reasons for which immigrant live-in caregivers decide to leave their countries of origin and come to Canada. Still, this model is insufficient to fully explain migration decision among foreign LCP workers in Ontario as it focuses only on particular layers of migration process- push/pull factors and intervening obstacles. Social networks as well as hierarchies of gender, race, ethnicity and age are other important components of such a process to which network migration theory and the intersectionality perspective provides some important insights. As the findings in chapter five will demonstrate, social networks (both formal and informal) serve as bridges between push and pull triggers for migration and immigration policy for live-in caregivers.

### **3.3 Part II: Social Network Theory**

#### **3.3.1 Network Theory of Migration**

In their discussion of the network theory of migration<sup>11</sup> Massey et al. (1993, 2005) ground it in the concept of social capital. The concept of social capital has first been established by Glenn Loury to delineate a set of intangible resources in families and communities that help to foster social development among young people (Massey et al., 2005). Still, it was Bourdieu to first directly articulate its broader significance to human society (Massey et al., 2005). In Bourdieu's conceptualization, "social capital is the sum

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<sup>11</sup> It should be noted that Massey et al. sometimes refer to this theory as a social capital theory (as in, for instance, in their book "Worlds in Motion" published in 2005). In this dissertation, I use the term network theory of migration.

of resources, actual or virtual that accrue to an individual or a group by virtue of possessing a durable network of a more or less institutionalized relationship of mutual acquaintance and recognition” (Bourdieu & Wacquant, 1992, p.119). The group supplies its members with collectively-owned capital which allows them a credit (Bourdieu, 1983/1986 as cited in Lin, 2001). In that sense, capital is determined by the size of the network and volume of the capital (economic, cultural or symbolic) possessed by people to whom a person is connected (Bourdieu, 1986). Even though social capital is contingent on the size of one’s connections or the amount of capital in these connections’ possession, it is “a collective asset, shared by members of a defined group, with clear boundaries, obligations of exchange, and mutual recognition” (Bourdieu, 1986; as cited in Lin, 2001, p.22).

The key feature of social capital is its convertibility as it can be transformed into other forms of capital (Massey et al., 2005). People get access to social capital through membership in networks and social institutions and then translate it into material resources to advance or keep their status in society (Massey et al., 2005).

Applying this concept to migration, sociologists realized the importance of migrant networks in stimulating international movement to a host country (Massey et al., 2005). Migrant networks are “sets of interpersonal ties that connect migrants, former migrants, and non-migrants in origin and destination areas through ties of kinship, friendship and shared community origin” (Massey et al., 1993, p.448). Relying on social ties to relatives and friends who have migrated before, non-immigrants get access to knowledge, assistance and other resources that ease migration (Massey et al., 2005). The

first migrants who go to the receiving country have no social ties to rely on- thus, for them migration is expensive, especially in the cases when they migrate without legal documents (Massey et al., 2005). After someone in a personal network has migrated, ties become transformed into resource that may be used to access foreign employment and all benefits it brings such as better wages, and possibility of accumulating savings and sending remittances. In that sense, network connections represent a sort of social capital that people can use to access various sorts of financial capital (Massey et al., 2005).

Therefore, by virtue of having connections to somebody who already migrated, risks and costs of immigrating are lower for newcomers. Each new migrant widens the network and decreases the risks of movement for all those to whom he or she is connected, eventually rendering it “risk- free and costless to diversify household labour allocations through emigration” (Massey et al., 2005, p.43). This leads to an expansion of such networks in place of origin and destination and to more potential migration flows (Gurak & Cases, 1992; Massey et al., 2005).

The network theory of migration leads to a set of eminently testable propositions (Massey et al., 2005). According to this theory, the likelihood that someone will migrate is greater if: 1) he/she has somebody living abroad; that likelihood increases with closeness of relationship (e.g. - if person living abroad is brother, sister or mother; 2) if he/she has already migrated before<sup>12</sup>; and 3) if migration is common in his community of

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<sup>12</sup> This proposition of the network theory of migration is implied by its claim that “over time, migration becomes self-perpetuating because each act of migration creates additional social capital that promotes and sustains more migration, which creates more social capital, which produces more movement” (Massey and Espinosa, 1997, p.952). The constant “accumulation of social capital through the expansion of networks yields a feedback loop” (Massey and Espinosa, 1997, p.952). While in some of their papers, Massey et al. discuss such argument under the rubric of social capital (network) theory of migration (see, for instance,

origin and values related to migration become part of community values (Massey et al., 2005).

Network theory also argues that migrant institutions act as a structural component to migrant networks, suggesting that interpersonal ties are not only triggers of migration (Massey et al., 2005). Over time, immigrants get to know about for-profit firms and organizations which provide a range of services to immigrants in exchange for fees, representing another form of social capital on which they can rely in getting access to a foreign labour market (Massey et al., 2005; Massey and Espinosa, 1997). The services offered by for-profit organizations and private entrepreneurs often include: clandestine transport to internal destinations; counterfeit documents and visas; arranged marriages between migrants and those who legally reside or are citizens in receiving countries; and providing accommodation, credit or other forms of assistance in countries of destination (Massey et al., 2005).

Humanitarian groups assist immigrants by offering social services, counselling, shelter, legal advice about the ways to get legal papers, and even protection from immigration law enforcement authorities (Massey et al., 2005). Recruiting agents can at times be active creators of new flows of migration from areas of labour surplus to the areas of labour demand (Massey et al., 2005). Reflecting on the important role of migrant institutions in the process of migration, Goss and Lindquist (1995) point out that:

International migration is best examined not as a result of individual motivations and structural determinations, although these must play a part

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Massey and Espinosa, 1997), in some other works (see for instance, Massey 1990 or Massey et al., 2005) they explicitly include it in the other, related theory of migration called “theory of cumulative causation”.

in any explanation, but as the articulation of agents with particular interests and playing specific roles within an institutional environment, drawing knowledgeably upon set of rules in order to increase access to resources. (p.345)

### ***3.3.1.1 Social Networks and Migration Decision***

There is a large body of previous research that has proven the powerful role of migrant networks in structuring individual and household migration decisions as predicted by network theory (Chavez, 1988, 1990; Dinerman, 1982; Gurak & Caces, 1992; Hagan, 1994; Knight, 2002; Massey & Espinosa, 1997; Massey & Zenteno, 1999; Simmons, 1989)

Most of the literature examining the role of social networks in migration decisions has confirmed the above outlined hypotheses brought about by the network theory of migration. In particular, many studies have demonstrated that having a social tie to somebody living abroad drastically increases the likelihood of emigration and that chances rise as the strength of relationship increases (Massey, Alarcón, Durand, & Gonzalez, 1987; Massey & Espinosa, 1997; Palloni, Massey, Ceballos, Espinosa, & Spittel, 2001). For instance, using sibling data from the Mexican Migration Project to test the role that social capital plays in probability of migration, Palloni et al. (2001) have found that having a sibling who migrated significantly elevates the chances of the other siblings' migration.

In addition, previous research has revealed that “the more one migrates, the more one is likely to continue migrating, suggesting the self-perpetuating nature of the process”

(Findley, 1987; Massey & Espinosa, 1997, p. 972; Massey & Zenteno, 1999; Root & DeJong, 1991). For example, using data from 25 Mexican communities, Massey & Espinosa (1997) have found that the likelihood of repeat migration for Mexican migrants progressively increases as the number of U.S. trips grows both for legal and undocumented migrants.

Moreover, the previous research has found that people are more likely to migrate if they come from community where migration is common and where a huge stock of foreign experience has concentrated (Knight, 2002; Massey, 1986; Massey & Espana, 1987; Simmons, 1989). For instance, in one Canadian study examining the number of immigrants who came to Canada from sixty- six countries between 1980 and 1982, Simmons (1989) found that number of immigrants sent by country in such period was directly and positively related to the presence and size of national-origin community already residing in Canada by 1980 (as cited in Massey et al., 2005).

Finally, research has also confirmed the importance of migrant institutions in structuring migration decisions in various part of the world (Goss & Lindquist, 1995; Massey 1986; Spaan, 1994). For instance, studies that have explored the “immigration industry” in Asia reveal how these actors can persuade potential migrants to migrate, and aid their overseas move and labour market integration (Goss & Lindquist, 1995; Spaan, 1994). Commenting on the results of such studies, Massey et al. (2005) argue that they show that a great part of movement from “within Asia Pacific is facilitated, if not

initiated, by these intermediaries, particularly in the case of clandestine migration” (p. 188).<sup>13</sup>

### 3.3.2 Granovetter’s Strong and Weak Ties: Strength of Weak Ties Hypothesis

In 1973, *The American Journal of Sociology* published paper “The Strength of Weak Ties”, an important article in the domain of social network analysis, written by a sociologist Mark Granovetter. In this paper, Granovetter (1973) develops his famous *Strength of Weak Ties* argument. He begins by arguing that “the strength of a tie is a (probably linear) combination of the amount of time, the emotional intensity, the intimacy (mutual confiding), and the reciprocal services which characterize the tie” (p.1361). He states that despite the fact that set of these parameters is obviously highly correlated, each of these is to certain degree independent of the other.

Based on such a definition of strength, Granovetter claims that there are three types of interpersonal ties: *strong*, *weak* and *absent* ties. According to him, *strong ties* (such as the ties with family and friends) are related to higher frequency interaction, more emotional involving, more intimate, and wider reciprocal service, while weak ties (such as ties with acquaintances) are characterized by lower frequency interaction, less emotional involving, less intimate, and narrower reciprocal service. With regards to the absent ties, Granoveter claims that “included in the "absent" are both the lack of any relationship and ties without substantial significance, such as a "nodding" relationship

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<sup>13</sup> Despite its importance in Asia and other parts of the world, immigration industry is often neglected as a source of social capital, or is noted only in passing by researchers. In part, this omission is a result of “methodologies that focus on migrants, their families and communities at the expense of recruiters, agents, contractors and other migration enepreneurs” (Massey et al., 2005, p.190).

between people living on the same street, or the "tie" to the vendor from whom one customarily buys a morning newspaper” (p.1361).

Granovetter’s emphasis on bridging weak ties is central to his Strength of Weak Ties hypothesis. In particular, he argues that weak ties are more likely to link members of different small groups than are strong ones, which tend to be concentrated within particular groups. Thus, as he argues, “weak ties are more likely to move in circle different from our own and will thus have access to information different from that which we receive” (Granovetter, 1973, p.1371). In developing his argument, Granovetter (1973) points to the results of his study of professional, technical, and managerial job changers living in a Boston suburb; he states that in most cases, the contact who transmitted the relevant information about the job “was someone only marginally included in the current network of contacts, such as an old college friend or a former work- mate or employer, with whom sporadic contact had been maintained” (p. 1371). Commenting on such study results, Granovetter concludes that “weak ties are an important resource in making possible mobility opportunity” (p.1373). He maintains that “two common sources of weak ties are formal organizations and work settings” (p.1375). He concludes the article by commenting that “weak ties, often denounced as generative of alienation (Wirth, 1938) are here seen as indispensable to individuals' opportunities and to their integration into communities; strong ties, breeding local cohesion, lead to overall fragmentation” (p.1378).

While in his original argument Granovetter’s emphasis is on the weak ties, ten years later he devoted more attention to the strong ties in his revised version of this



argument laid out in article named “The Strength Of Weak Ties: A Network Theory Revisited” which was published in *Sociological Theory*. Opening the discussion on the value of strong ties, he writes:

Lest readers of SWT and the present study ditch all their close friends and set out to construct large networks of acquaintances, I had better say that strong ties can also have value. Weak ties provide people with access to information and resources beyond those available in their own social circle; but strong ties have greater motivation to be of assistance and are typically more easily available. I believe that these two facts do much to explain when strong ties play their unique role. (Granovetter, 1983, p.209)

Following that, he goes to cite various studies (e.g. - Ericksen and Yancey, 1977; Granovetter, 1974; Wellman, 1979) that show that people in the situations of high insecurity such as employment difficulty, emergencies and poverty tend to rely on strong ties. He claims that in his study of job finding, for example, he found that “those whose job was found through strong ties were far more likely to have had a period of unemployment between jobs than those using weak ties” (Granovetter 1974, as cited in Granovetter 1983, p.211). Further revealing the results of that study, he suggested, “moreover, that those in urgent need of a job turned to strong ties because they were more easily called on and willing to help, however limited the information they could provide” (Granovetter, 1974, as cited in Granovetter 1983, p. 211).

Moreover, Granovetter reveals that in his summary of the results of helping networks in a Toronto suburb, Wellman indicates that “56 per- cent of the first closest ranked intimates are relied on in emergencies (Wellman, 1979, pp. 1222- 1223; as cited in Granovetter, 1983, p.212). In addition, Granovetter argues that many studies demonstrate that poor people rely more on strong ties than do others. In order to support such an

argument, Granovetter (1983, p.212) cites a conclusion reached by Ericksen and Yancey (1977) in their study of Philadelphia:

Strong networks seem to be linked both to economic insecurity and a lack of social services. As long as the unemployment rate is high the threat of living in poverty is real, and as long as large segments of the population find access to medical services, day care, and social welfare services problematic, we can expect to find reliance on strong networks to continue among them. (p. 28)

While Granovetter does contend that given their greater availability strong ties are often used by individuals in situations of high insecurity, he further argues that:

...the heavy concentration of social energy in strong ties has the impact of fragmenting communities of the poor into encapsulated networks with poor connections between these units; individuals so encapsulated may then lose some of the advantages associated with the outreach of weak ties. This may be one more reason why poverty is self-perpetuating. Certainly programs meant to provide social services to the poor have frequently had trouble in their outreach efforts. From the network arguments advanced here, one can see that the trouble is to be expected. (p.213)

### ***3.3.2.1 Strong and Weak Ties and Immigrant Integration***

Granovetter's strength of weak ties hypothesis, as well as the concepts of weak and strong ties that it embeds, became very famous and had been greatly explored and discussed not only by sociologists, but also by scholars from many other disciplines. While some scholars have examined such hypothesis (or concepts of weak and strong ties that it embeds) exclusively with regards to the process of job search (e.g. Longjohn, 2001; Matthews, Pendakur & Young, 2009; Thomas, 2011), others (e.g. - Hyvönen, 2008; Moriah, Rodriguez and Sotomayor, 2004; Ray, 1998) have applied it to some other

domains (such as, for instance, immigrant access to the housing market or the process of integration more generally).

In accordance with Granovetter's argument on the important role of strong ties among people in situations of high insecurity (including marginalized populations, such as the poor), many studies that focus on immigrant populations find that newcomers often use strong ties with family and friends in order to access employment, housing, and healthcare in a new country (Green, Tigges, & Diaz, 1999; Martin, Fix, and Taylor, 2006; Parra & Pfeffer, 2006; Pereira, Crosnoe, Fortuny, Pedroza, Ulvestad, Weiland, Yoshikawa, & Chaudry, 2012; Preston, Murdie, Wedlock, Kwak, D'Addario, Logan, Murnaghan, Agrawal, & Anucha, 2009). For instance, one pilot study of immigrants and homelessness in York Region, Ontario finds that due to language barrier, many recent immigrants rely on friends and relatives in negotiations with landlords (Preston et al., 2009).

Also, as we have seen above, Granovetter argues that marginalized populations tend to rely more on strong ties than do others, "which makes them lose the advantages associated with outreach of weak ties" (Granoveter, 1983, p.213). Such argument implies that by relying more on strong ties, such populations are less likely to access better employment opportunities. And indeed, many studies show that relying on strong ties leads to low-paid jobs. For instance, in their study of racial and ethnic differences in job search strategies of immigrants in US, Green et al. (1999) demonstrate that in the case of Hispanics, if the social contacts include neighbours or relatives which indicate strong ties, there is a great probability that their annual income will be negatively impacted.

Similarly, Goel and Lang (2009) find that “immigrants with strong social ties in their localities enjoy a faster arrival rate of jobs, at least at the lower end of their wage distribution” (p.5).

Contrary to Granovetter’s argument that sees weak ties as the only conduits of a new, useful information, the research shows that strong ties can be equally useful in that sense. For instance, in their research on the experiences of Colombian newcomers accessing Toronto’s housing market, Moriah, Rodriguez and Sotomayor (2004) find that strong ties play an equally important role when it comes to integration of this group of immigrants into the housing market in that city. In particular, reporting on the results of their study, they state that “friends and acquaintances living in Canada were the best channel for getting information before coming to and during the initial search” (p.14). Since they possess knowledge of, and experience in, the Toronto housing market, these strong ties offer valuable assistance that helps newcomers to avoid financial and personal losses.

Some studies demonstrate that the utility of strong ties among immigrants may change with the time. For instance, the research on Salvadorians in San Francisco conducted by Menjivar (1994) demonstrates that kinship-based networks are helpful in the first stage of migration, but that lack of material resources in the ethnic community and changes in the local economy make networks less effective as time passes. Reflecting on the role of Salvadorian immigrants already in the US who settle close to their co-ethnic friends and family, Menjivar states that “impoverished migrants, as individuals or

groups, are simply unable to render much needed material assistance in the form of financial support and housing to their newcomer relatives” (p.12).

Similarly, in her article discussing psychological barriers to integration of new immigrants in Estonia, based on her own research and the above cited research conducted by Menjivar, Rannut (2010) concludes “that strong ties with the local ethnic community provide support and assistance during the first days in a variety of ways and ease adaptation, however, in a long run these strong ties become an obstacle for social adaptation and mobility”. This happens, she explains, because in many instances the advisers they rely on did not successfully integrate themselves and thus, pass to the newcomers their own negative attitudes and frustration instead of assisting them. In order to support her argument, she gives an example of an Arab community where people relied more on each other than officials. She explains that these people tried to change driver's licenses by gathering in a large group and threatening officials instead of asking for competent advice and just complying with the rules.

Both the network theory of migration and Granovetter's strength of weak ties hypothesis have aided my exploration of experiences of immigrant live-in caregivers. However, as my findings will demonstrate, they both proved to be insufficient to lead me to a full understanding of experiences of LCP workers. In particular, I will show that network theory of migration by Massey et al. (1993, 2005) does not lead us to take into consideration the role of cross cutting hierarchies of difference (*gender, race/ethnicity* and *age*) and their intersections which prove to be very important factors in the processes of decision making and very act of migration of immigrant live-in caregivers. Moreover,

concepts of *strong and weak ties* as envisioned by Granoveter (1973, 1983) do not consider the role of the three factors that impact on living and integration experiences of LCP workers: 1) the content of the information transmitted through the tie; 2) the existence of formal networks; and 3) cross cutting hierarchies of difference.

### **3.4 Part III: Multiracial Feminist Theory of Intersectionality**

Another theoretical framework that helps to inform research on live-in caregivers is an intersectionality approach. This perspective was forged in 1970s and stems from the work of scholars studying experiences of women of color in the United States (Browne & Misra, 2003; Stasiulis, 1999; Symington, 2004).<sup>14</sup> It emerged out of “a critique of gender-based and race-based research for failing to account for lived experience at neglected points of intersection—ones that tended to reflect multiple subordinate locations as opposed to dominant or mixed locations” (McCall, 2005, p.1780). McCall (2005) argues that combining studies of gender with studies of ‘race’ did not illuminate black women’s experiences because former explored the experiences of white women and later examined the experiences of black men. There was a need to come up with some new approach given the different and often diverging mechanisms that moulded the lived experience of people in these locations (McCall, 2005).

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<sup>14</sup> This body of work is usually referred to under the rubric of multiracial feminism, multicultural feminism, or postcolonial Feminism (Baca Zinn & Thornton Dill, 1996, Lorber, 1998).

For instance, it seemed that black women achieved greater parity with black men relative to white women because they had to work on par with black men due to conditions of slavery (McCall, 2005). Yet, black women were more likely to be subjected to sexual violence since whites did not think they should be protected “as women” (McCall, 2005). Thus, an intersectionality approach arose out of attempts to account for “multiple and conflicting experiences of subordination and power” (McCall, 2005, p.1780). Given the centrality of multiracial feminist theory in the literature from an intersectionality perspective, here I outline the central tenets of this theory of intersectionality.

First, multiracial feminist theory of intersectionality asserts that race and gender are socially constructed, not only impacting individual identities but also determining principles of organization in the social system (Collins, 1999, Glenn, 1999). Moreover, “these categories are mutually constituted to produce and maintain social hierarchy” (Browne & Misra, 2003, p.489). Collins (1999) argues that “interlocking systems of race, class and gender” form a “matrix of domination” (as cited in Browne and Misra, p. 489). What is meant by a matrix of domination is that a number of hierarchical systems function with and through each other (Baca Zinn & Thornton Dill, 1996). Thus, how an individual will experience race, class, gender and sexuality is dependent on his/her location in the hierarchies of race, class and gender. For instance, individuals of the same race have a different experience of race based on their location in the class hierarchy as working, middle capitalist class, or unemployed, and in the gender hierarchy as male or female (Baca Zinn & Thornton Dill, 1996). The intersectional approach puts an emphasis

on simultaneity of systems by arguing that these hierarchies are not simply additive, but that they operate in complex and simultaneous ways (Acker, 1999; King, 1989; Symington, 2004; Thornton Dill & Baca Zinn, 1997; Weber, 2001). As Baca Zinn & Thornton Dill (1996) put it:

Race, class and gender are not reducible to individual attributes to be measured and assessed for their separate contribution in explaining given social outcomes, an approach that Elisabeth Spelman calls “pop bead metaphysics”, where a woman’s identity consists out of the sum of parts neatly divisible from one other (p. 327).

For instance, a woman who is Black, Spanish speaking and a doctor does not experience herself in divided segments of gender, race, ethnicity and class; rather all of these are created and re-created within the same everyday experiences of her life (Acker, 1999). The matrix of domination aims to explain “multiple ways in which women experience themselves as gendered, raced and classed” (Baca Zinn & Thornton Dill, 1996, p.327).

Second, the multiracial feminist theory of intersectionality highlights the interrelationship between hierarchies in all domains of life (Baca Zinn & Thornton Dill, 1996). Class, race and gender represent constitutive parts of both social structure and social interaction. Women and men position differently in the locations produced by these cross-cutting hierarchies (Baca Zinn & Thornton Dill, 1996). Consequently, men and women throughout the social system have different experiences of privilege and disadvantage according to their gender, race and class (Baca Zinn & Thornton Dill, 1996; Thornton Dill & Baca Zinn, 1997). This means that “intersecting forms of domination produce both oppression and opportunity” (Baca Zinn & Thornton Dill 1996, p.327).



While hierarchies of race, class and gender greatly disadvantage women of colour, they create hidden advantages for people at the top of these structures - white people, those who belong to higher classes, and males (Baca Zinn & Thornton Dill, 1996). Therefore, multiracial feminist theory of intersectionality is applicable “not only to racial ethnic women, but also women and men of all races, classes and genders” (Baca Zinn & Thornton Dill 1996, p.327).

Third, the multiracial feminist theory of intersectionality underlines “the relational nature of dominance and subordination” (Baca Zinn & Thornton Dill 1996, p.327). By directing us to examine race, class and gender simultaneously, this perspective helps us to realize that the privileges of some people in the social order depend on the oppression and exploitation of others (Dill, 1987; as cited in Thornton Dill & Baca Zinn, 1997). In that way, we can understand not only the advantages that some women gain from their race and class but also realize the limitations that stem from their gender (Thornton Dill & Baca Zinn, 1997). These women are made subordinate by patriarchy, yet intersection of their class and race provides them with privileged opportunities, choices and lifestyles (Thornton Dill & Baca Zinn, 1997). In some cases, these women rely on their class and race privilege to reduce the effects of patriarchy and/or to oppress other women. As Gordon (1991) explains it in his reflection on American society: “It is a step backward to think about experiences of minority and white women as merely different. They have intersected in conflict and occasional cooperation, but always in mutual influence” (p.106). In other words, “the very meanings of being a white woman in US have been

affected by the existence of subordinated women of colour” (Baca Zinn & Thornton Dill 1996 p. 327)

Fourth, the multiracial feminist theory of intersectionality puts an emphasis on the understanding of reality as taken from the experiences of many different groups of women – such as, for instance, Asian American, Native Americans, Latinas and Blacks (Baca Zinn & Thornton Dill, 1996). More particularly, it recognizes that each of these groups experienced exploitation by whites in a distinct way: for example, American Indians were killed and displaced, Africans became enslaved and Filipinas/os and Puerto Ricans were colonized (Amott & Matthaei, 1991). In addition, this perspective highlights these groups are not homogenous –they consist of many diverse ethnic groups which view and live the reality in their own way (Baca Zinn & Thornton Dill 1996; Glenn, 1999). These “internal differences lead to greater awareness to both similarities and differences, reminding us of importance of comparative study and keeping a creative tension between diversity and utilization” (Baca Zinn & Thornton Dill 1996, p. 328-329).

### **3.5 Part IV: Rationale for Using Intersectional Approach in my Research**

There are two reasons why I decided to use the intersectional approach as a second framework of my research. First, although social network theory places emphasis on networks and as such is very useful in illuminating experiences of live-in caregivers in my research (and especially the role of networks in such experiences), it does not take into consideration the role of hierarchies of difference such as gender and race/ethnicity. Still, a large body of previous research shows that gender and race/ethnicity as well as

their intersections play an important part in terms of impact of networks on various aspects of immigrant experiences such as migration decision making as well as the process of immigrant integration into a new society (Cerutti & Massey, 2001; Curran & Rivero- Fuentes, 2003; Hagan, 1998). Even though the majority of such studies do not rely on an intersectionality perspective in particular, their findings echo the importance of its building blocks, i.e. - hierarchies of difference.

Second, the past research (both in the Canadian and the international context) on domestic work (Anderson, 2000; Glenn 1986, 1992; Hondagneu-Sotelo & Avila, 1997; Langevin & Belleau, 2000; Momsen, 1999; Parrenas, 2001; Pratt, 1999; Rollins, 1985; Romero 1992; Thornton Dill, 1988; Torres et al., 2012) has demonstrated that cross-cutting hierarchies of difference (i.e.- hierarchies of class, gender, race, ethnicity) which are the main focus of the theory of intersectionality significantly impact on the opportunities and experiences of domestic workers. The next two sections of this chapter are devoted to the review of such research demonstrating the linkages between hierarchies of difference and migration decisions and processes of integration among immigrants in general, and the linkages between these hierarchies and experiences of domestic workers.

### **3.5.1 Gender, Race/ Ethnicity, Migration Decision and Immigrant Integration into a New Society**

Research has shown that the processes of migration decision making and actual migration of men and women and the way in which male and female migrants integrate in the host country diverge (Curran & Rivero- Fuentes, 2003; Curran and Saguy, 2001; Hondagneu-Sotelo, 1994; Lindstrom, 1997; Pedraza, 1991; Pessar, 1999, Zlotnik, 1993).

The role of networks may be different for men's and women's migration and the potential for help varies depending on the gender of the previous migrants (Curran & Rivero-Fuentes, 2003). Some studies have found that women often lack access to social networks linking households to a destination country, which may impede the chance they will migrate (Hagan, 1994; Hondagneu-Sotelo, 1992, 1994). Other studies, however, suggest that presently both men and women have an increasing number of kin and companions with migrant experience which promotes their move (Kanaiaupuni, 2000).

In addition, the research has revealed that societal norms about women's migration vary by their ethnicity (place of origin). For instance, not only is the migration of young women from the Philippines to more developed countries encouraged, but also it represents a family strategy for obtaining remittances that help to satisfy family financial needs (Torres, 1992; as cited in Massey et al., 2005). Indeed, gender roles and cultural values seem to greatly impact on family strategies related to remittances. Families expectations for their daughters in the Philippines are to comply with requests of their parents, be less likely to spend money on themselves and more likely to send remittances to the family backhome (Trager, 1984).

In contrast, Bangladeshi women do not assume the responsibility with regards to family finances and thus are not encouraged to migrate to support their families (Oishi, 2002). In addition, some Mexican studies have found that dominant societal beliefs about women's helplessness and standards of family honour dictate that female migration is risky; thus, women from this country may not move unless they have a close relative that can protect them and provide them with important information and support (Lindstrom,

1997). Also, the research has demonstrated that men and women differ in terms of network support that they have within their families. Mexican men are often encouraged to migrate, and they are aided by their family members in the process of migration. By contrast, when Mexican women decide to migrate independently, such decision is discouraged by males in their family. In order to overcome such challenges, women are assisted by women's networks that include their female family members, relatives and friends (Hondagneu-Sotelo, 1994). Regardless of such familial expectations and gendered power differences in the family, women are not without any power and they do impact on household decision-making, even though often they do not have a final word (Ortiz, 1996; Riley and Gardner, 1993; as cited in Cerutti & Massey, 2001).

Whether women or men will decide to migrate is also influenced by their perception of opportunities in their home and destination countries, especially labour market opportunities (Cerutti & Massey, 2001). In the cases when the labour market in the destination country is segregated along gender lines, migrants may reap greater benefits from migrants of the same gender who pass them more important information and/or contacts (Curran & Rivero- Fuentes, 2003). As Hagan's (1998) research on settlement of Maya community in Houston, US, demonstrates, both men and women relied on their same-sex kin and friends in Houston to help them with getting access to established gender labour market niches once they arrived in the city. Given the job opportunities offered by their female social networks, almost all new migrant Maya women included in her study ended up being private-household domestic workers, the majority of whom were live-in domestics. Similarly, in her research on the migration of

Irish women to the US in 19<sup>th</sup> century, Diner (1983) stresses the role of female relatives who worked as domestics in US in triggering migration of their sisters, mothers, nieces, and friends by sending them their savings to help their move and employment into domestic service.

The research has also revealed the influence that gendered networks play in long term settlement opportunities (Hagan, 1998; Repak, 2006). For instance, the above cited research by Hagan reveals that while Maya migrant men prosper with time due to both their ethnic and non-ethnic ties, employment opportunities are much more restricted for Maya women. This lack of job opportunities for Maya women stems from their exclusive reliance on less resourceful networks of live-in domestics which often leads them to employment in domestic sector. Also, given that Maya women who work as live-in domestics are confined to an employer's home, they lack access to relevant social connections within and outside their respective social communities. But the influence of gendered networks goes beyond economic integration and expands to other domains of the integration as well. For instance, Hagan (1998) adds that due to Maya women's live-in status, their interactions with others in the community and outside of it are very limited which prevents them from gaining necessary information about legalization processes and producing the documentation necessary for filing a legalization application. Consequently, they do not benefit from community-based and non-ethnic ties as is the case with Mayan men.

### **3.5.2 Domestic Work and Hierarchies of Class, Gender, and Race/Ethnicity**

Domestic work clearly exemplifies the linkage between privilege and disadvantage (Browne & Misra, 2003). Global restructuring has resulted in the creation of a pool of immigrant women domestic workers who are willing to take care of housework and children for extremely low wages (Browne & Misra, 2003). Since structural adjustment policies established by IMF and the World Bank worsened the financial situation of people in indebted developing countries, many decided to migrate to more affluent countries to look for better job opportunities (Browne & Misra; Chang, 2006; Parrenas, 2001; Sassen, 2006). As globalization has created high paying, upper level job positions, it triggered the need for low wage labour that caters to the needs of those employed as professionals (Browne & Misra; Chang, 2000; Sassen, 2006). While in the past these jobs used to be performed by non-immigrant women of colour, increasingly these jobs are delegated to immigrant women and men (Browne & Misra, 2003). The immigrant women carry the burden of paid domestic work which has expanded in North America, Europe, the Pacific, industrializing countries in Asia, oil-rich Middle Eastern countries, and bigger cities in Africa and Latin America (Browne & Misra, 2003).

By passing on the reproductive labour to domestic workers (who are in most cases racial and ethnic immigrant women) who are paid poorly, middle-class men and women (such as White and American-born) manage to benefit in the labour market (Rollins, 1985; Glenn, 1992, 1999). Many domestic workers who migrate to other, more affluent countries to take care of other people's children must leave their children behind, in the country of origin (Cohen, 2000; Hondagneu-Sotelo & Avila, 2006; Parrenas, 2001,

2006; Pratt, 2006). As a way to cope with the pain of such separation, they establish new conceptions of motherhood (what Hondagneu-Sotelo and Avila name “transnational motherhood”) that can accommodate long physical absences (Hondagneu-Sotelo & Avila, 2006; Lan, 2006). While domestic workers greatly assist their employers by taking over their housecleaning and childcare responsibilities, they experience poor working conditions (including low wages, overtime, often unpaid work and denial of benefits) and try hard to support their families back home (Browne & Misra, 2003). Coming from many different places in the world to satisfy the demand for domestic services, these women are part of an “international division of reproductive labour” (Browne & Misra, 2003; Hondagneu-Sotelo, 2001, Momsen 1999; Parrenas, 2000, 2006). Basing her argument on the case of Filipina workers who enter domestic work, Parrenas (2006) explains that international division of reproductive labour, which she also calls the “‘international transfer of caretaking’ refers to the three- tier transfer of reproductive labour among women in sending and receiving countries” (p.49). While class- privileged women buy the low paid services of migrant Filipina domestic workers, at the same time migrant Filipina workers buy the even lower paid services of poorer women in the Philippines. That is, migrant Filipina domestic workers employ poorer women back home to perform the reproductive labour they are doing for more affluent women in receiving countries. Thus, Parrenas concludes, “this division of labour is structural relationship based on class, race, gender and (nation-based) citizenship of women” (p.52). Similarly, referring to “a series of personal links between people across the globe based on the paid



or unpaid work of caring”, Hochschild (2000, p.131) coined the term ‘global care chain’.

In her description of the term, she sees it as typically including:

An older daughter from a poor family who cares for her siblings while her mother works as a nanny caring for children of a migrating nanny who, in turn cares for the child of a family in a rich country (p.131).

By migrating to work as domestic workers in other countries and leaving their children and husbands behind, these women are seen as breaking traditional gender expectations of work and family (Glenn, 1999, Hondagneu-Sotelo & Avila, 1997). Consequently, they experience stigma, guilt and other criticisms (Glenn, 1999, Hondagneu-Sotelo & Avila, 2006; Parrenas, 2001). As a way to cope with these challenges, these women develop “the rhetoric of comparative motherhood”, emphasizing the sacrifices that they themselves make as low-income and racially oppressed working mothers and contrasting them to neglectful parenting provided by their privileged employers (Hondagneu-Sotelo, 2001, p. 26; Lan, 2006).

Gender, class, race/ethnicity, and nationality all shape the relationship between domestic workers and their employers (Browne & Misra, 2003). Employers find justification for low wages they pay domestic workers in the assumption that men are the only breadwinners (Browne & Misra, 2003). Class is another important factor that shapes the relationship between employers and employees. Clearly, domestic workers are disadvantaged in terms of their class relative to their employers (Browne & Misra, 2003, Parrenas, 2006). Moreover, upon migration to a host country, domestic workers experience certain class dislocations. Given that only relatively affluent people can afford to migrate, the domestic workers often come from middle and upper classes (Hondagneu-

Sotelo, 2001; Parrenas, 2001). Parrenas (2001, 2006) introduces the term “contradictory class mobility” to account for the class discrepancies that happen upon the migration of domestic workers into a host country. Parrenas (2001) explains that migrant Filipina domestic workers simultaneously experience an increase and decrease in social status. They have higher incomes than they ever would earn if they had stayed to work as professionals in Philippines. Still, at the same time, they feel a tremendous decline in social and occupational status and face a conflict between their current occupation and their training (Parrenas, 2001). Yet, their employers do not show respect for skills and education they bring from their home countries, mostly because they want to maintain a superior status they have over their workers (Lan, 2003; Romero, 1992).

In addition to gender and class, race and ethnicity are other hierarchies of difference that come to structure the experiences of domestics and their employers (Browne & Misra, 2003). Many employers prefer to employ the workers from certain racial and ethnic backgrounds (Hondagneu-Sotelo, 2001; Pratt, 1997; Pratt, 1999; Wrigley, 1995). For example, a study by Hondagneu-Sotelo (2001) reveals that employers in US prefer to employ Latina domestics since “as ‘others’ in language, race-ethnicity and social class, they are outside white, English-speaking, middle-class social circles and thus seen as unlikely to reveal family secrets and intimacies “(p.55-56). Another study conducted by Wrigley (1995) suggests that preference of US employers for Latinas is due to the fact that they see them as more submissive than whites. The research also shows that given that Filipinas are mostly well educated, they are often seen as

“uppity” and demanding which results in reluctance of US employers to hire them as domestic workers (Hondagneu-Sotelo, 2001, Parrenas, 2001).

Similarly, research by Pratt conducted in Vancouver, Canada shows that domestic labour market is highly racialized (Pratt, 1997). In particular, British nannies are portrayed by recruitment agents as being better educated, but cold and controlling. On the other hand, Filipina nannies are portrayed as affectionate, but with a poor work ethic. Pratt’s study also reveals that Filipina domestic workers were expected to do more housework than European nannies and that Filipinas were depicted as ‘housekeepers’ while Europeans were referred to as ‘nannies’. Such stereotypes have had great consequences, resulting in different wages for these two groups, with British nannies receiving more (Pratt, 1997). Employers, however, are not the only ones who have strong racial- ethnic preferences and prejudices. Latina domestic workers in US interviewed by Hondagneu-Sotelo (2001) tended to portray non-white employers as cheap, abusive and oppressive that should be avoided at all costs.

While all of the above cited hierarchies of class, gender and race/ethnicity shape the experiences of immigrant domestic workers, it is only by focussing on their intersections that we can fully understand exploitation that these workers face (Browne & Misra, 2003; Parrenas, 2001). For instance, in her study of three generations of Japanese American women in domestic service, Glenn (1986) shows that women of colour end up in domestic service not due to their personal choices, but due to institutional racism and patriarchal family system rooted in the rural Japanese past. Glenn highlights that in labour market, certain types of jobs are intended for certain types of people based on their

gender, race and class. In such an arrangement, unskilled, unprotected and low-wage jobs are allocated to women of colour. Therefore, it is not surprising that domestic work, as part of labour market where workforce regulations governing pay, taxes, working hours, and benefits are often not enforced, and workers face extreme levels of exploitation, is a mainly domain of immigrant women of colour (Browne & Misra, 2003).

In addition to illuminating why immigrant women from poor countries constitute a labour pool in the highly exploitative domestic domain in developed countries, an intersectionality approach also illuminates the exploitation they face with regards to their working conditions. In particular, since domestic work traditionally has been seen as a labour “natural” to women and as such low-skilled, employers have an excuse for giving low wages (de la Luz Ibarra, 2000; as cited in Browne & Misra, 2003). However, the gender of domestic workers intersects with their class and race/ethnicity as employers use ideologies based on these factors to account for their exploitation of women of color (Browne & Misra, 2003; Romero, 1992)<sup>15</sup>. Addressing the role of the intersections in the exploitation female domestic workers face by their female employers in Canada, Macklin (1994) argues:

For example, a female employer can hardly claim that her domestic worker is ideally suited for domestic work because she is a woman, without impugning her own status, but she can fall back on Filipina women being “naturally” hardworking, subservient, loyal, tidy housekeepers, and good with children. In this context, race and ethnicity conjoin with sex to create a sub-category of women whose subordination other women can

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<sup>15</sup> While early research about foreign domestics workers (FDWs) in Canada used to employ class, race ethnicity, and gender as independent concepts (Daenzer 1993; Turriffin 1976), more recently researchers has relied on an intersectional approach in order to come to a better understanding of experiences of LCP workers (Langevin & Belleau 2000; Schechter 1998; Sharma, 2000; Welsh et al., 2006; as cited in in Hsiung & Nichol, 2010; see also Torres et al., 2012).

rationalize by projecting onto them the stereotypical feminine qualities that patriarchy has used against them generally (p.35).

The research has demonstrated that with time, immigrant domestics leave more exploitative live-in domestic jobs and get employed in other low paid, but probably less exploitative jobs either in the field of care work or other fields. In their already above mentioned study of post- LCP experiences of live-in caregivers in Canada, Torres et al. (2012) “examine the consequences of interacting inequalities for former LCP workers occupying different social locations while integrating in Canadian society and they analyze the ways LCP policies shape these inequalities”(p.227- 228). They find that only 28.1 percent of participants worked in jobs related to their educational background and 59.4 percent of them felt overqualified for their current positions. Relying on intersectional perspective, they conclude that the challenges that their respondents encountered in finding jobs within their fields stem from the erosion of their skills while in the program and “racialization” of temporary foreign workers.

As the credentials of skilled LCP workers are not recognized in Canada and strict immigration policies prohibit them from taking any course longer than six months while in the program, these workers occupy a lesser skill occupational category than would normally be the case (Torres et al., 2012). This places LCP workers in a subordinate social location which often compels them to stay in the field of care work. They add that attitudes of some employers indicated the expectation that workers, especially those of Filipino origin, would stay in care work after they complete the LCP or occupy subordinate locations in the labour market where they will continue to experience direct

discrimination. Moreover, Torres et al. also reveal that in post- LCP period, former live-in caregivers often take student loans that help them undertake training in high-demand, but modestly paid occupations such as resident care attendant, personal support worker (PSW), and early childhood educator.

In addition, a study done by Hondagneu-Sotelo (1997) on Latina domestics located in San Francisco, has demonstrated the transition of domestic workers from live-in domestics to housecleaners. These new jobs not only offered them an opportunity to set their own hours and schedules, but also allowed them to break out of extreme relations of dependency with their employers. Similar transitions have been made by American-born racial and ethnic minority women who have transferred from domestic sector to work in service sector settings such as restaurants, stores, etc. (Glenn 1992, Hondagneu-Sotelo 2001). Commenting on such trends, Browne & Misra (2003) argue that from the intersectional perspective, the decrease in disadvantage for domestics over time may be explained by “the conditionality of race, ethnicity, gender, class, and citizenship intersections”(Browne & Misra, 2003, p.506).

### **3.6 Part IV: Rationale for Using Social Network Theory in My Research**

Some of the empirical studies on migration, working, and living and integration experiences of immigrant live-in caregivers in Canada reviewed in Chapter 2 of this dissertation have not been based on any sociological theory or least they do not explicitly articulate their theoretical assumptions. There are some researchers, however, whose

studies were guided by intersectional, social constructionist, and post-structural approaches (England & Stiell, 1997; Pratt, 1999; Torres et al., 2012).

By relying on an intersectionality perspective in their research on post-LCP experiences of former live-in caregivers in Vancouver, Toronto and Montreal Torres et al. (2012) conclude that at the macro level, an intersection of social stratification factors reveals why former live-in caregivers included in their study migrated to Canada. They suggest that being women from developing countries predisposed these workers to migrate to Canada under the LCP. They give an example of the Philippines, whose government adopted a labour export strategy, thus rendering working abroad a norm in Filipino's employment options. At micro level, they further contend, "the participants seemed to have internalized their roles as heroes and heroines" as they are aware that they help their country tremendously through sending the remittances (p.232).

In their research on domestic workers in Toronto, led by social constructionist perspective, England and Stiell (1997) find that domestic workers national identities are racialized, gendered and classed by staff employed in placement agencies and are constructed in relation to other domestic workers. For instance, some agency owners included in their study made a distinction between English 'trained nannies' (formally trained nannies such as NNEBs) and 'other nannies' (unqualified Third World Women). To demonstrate this, England and Stiell cite a following quote of one of agency owners they interviewed:

In England, you think of a nanny as somebody who is trained, [but] I'm using the word [nanny] in the Canadian sense. I have now come to realize that what governments think of a nanny is just any female, you know, if you are a woman, you must be able to cook, clean and look after children.

So I am going to use the word ‘nanny’ in a Canadian sense, and if I’m talking about what, as a Brit, you call a nanny, I would add adjective ‘trained nanny’ (Agency 1). (p.208)

England and Stiell add that this quote “exemplifies the priority accorded to domesticity as a natural and universal experience for women, as well as intersection of gender (“women cook, clean and look after children”), class (“trained nanny”) and national identity (“Brit”) in defining one group as different (or superior) from other” (p.208).

In her study on Filipina domestic workers in Vancouver Pratt (1999) relies on a poststructuralist perspective of subject and discourse analyses in order to shed light on the process of their long- term labour segregation. In particular, she explores the discursive constructions of “Filipina” and argues that “they work to structure Filipinas’ labour market experiences in Vancouver” (p.215). She states that Filipinas who come to Canada through Live-in Caregiver Program often possess professional credentials, but subsequently become members of the most occupationally segregated of ethnic groups in Vancouver. Given their job as domestic workers in Vancouver, they are labelled “supplicant, preimmigrants,” inferior “housekeepers,” and, within the Filipino community, “husband stealers” (p.215). According to Pratt, segregation of Filipinas into domestic labour is a result of geographies written into discourses of “Filipina” constructed by employers, nanny agents and Filipino community that come to define Filipinas as inferior. She concludes that the discourses of domestic worker seem to put constraints on Filipinas long after they are granted an open visa which hinders them from



reactivating professional qualifications earned in the Philippines in the Canadian labour market. (p. 234).

Still, none of the above mentioned, relatively new studies on the experiences of immigrant live-in caregivers in Canada that has relied on some particular sociological perspective have used it in conjunction with social network theory. This is odd since the theory has extensively been used in the research (both Canadian and international) that pertains to experiences of other immigrant groups.

### **3.7 Part V: A Theoretical Gap and Contributions of My Study-- A Brief Summary**

This chapter has reviewed social network theory, the intersectional perspective and the push/pull model on which I rely in my dissertation. As the review of the literature done in the previous chapter has demonstrated, there are some gaps in the empirical literature pertaining to the experiences of immigrant live-in caregivers that this dissertation seeks to fill in.

While by illuminating these unexplored issues pertaining to live-in caregivers' experiences my research makes an *empirical* contribution to the previous literature, my study brings about some *theoretical* insights as well. In particular, as discussed in this chapter, some of the previous literature on immigrant live-in caregivers in Canada is atheoretical, or at least does not explicitly articulate its theoretical assumptions. Although some sociological perspectives (e.g. - intersectional, social constructionist and post-structural) have been used by researchers in their studies focusing on live-in caregivers in

Canada, to the best of my knowledge none of the previous studies used these perspectives in conjunction with social network theory. Given its emphasis on role of networks in people's lives, social network theory lends itself very well to my research objectives focusing on the role of networks in the migration, living and integration experiences. In my dissertation research, I have relied on two particular streams of social network theory- namely, *network theory of migration* by Massey et al. (1993, 2005) and the *concepts of strong and weak ties* as envisioned by Granovetter (1973, 1983).

My research will advance social network theory by illustrating that even though this theory is useful in exploring the role of social networks in migration, living and integration experiences of LCP workers, it is not sufficient to lead us to a full understanding of these issues. More specifically, I will demonstrate how an intersectionality approach adds to social network theory (and in particular both on network theory of migration by Massey at al. and Granovetter's concepts of strong and weak ties) by encouraging us to take into consideration the role of cross- cutting hierarchies of difference (i.e. - *gender, race, class, ethnicity, nationality, marital status/family situation* and *age*) in people's experiences. Based on that, I will argue that one should combine social network theory and intersectionality when exploring issues of migration, living and integration with regards to LCP workers in particular and immigrant domestic workers in general. Thus, in addition to bringing new empirical insights to the already existing body of literature on immigrant live-in caregivers in Canada and in turn suggesting policy changes, my study will also make a *theoretical contribution* to sociological theory, particularly literature pertaining specifically to the experiences of

immigrant live-in caregivers in Canada, and more broadly to the literature related to immigrant domestic workers in an international context as well as to immigration research focusing on social networks.

## Chapter 4

### Research Methodology

According to Merriam (2009), “qualitative researchers are interested in understanding the meanings people have constructed, that is, how people make sense of their world and the experiences they have in the world” (Merriam, 2009, p. 13) . Given that my research tries to illuminate so far unexplored issues related to migration, working, living and integration experiences of immigrant live-in caregivers in Canada, I chose to adopt a qualitative approach to my research. More specifically, I adopted a feminist qualitative approach to it, by starting “an active search for knowledge in the everyday experiences of concrete women” (Acker, 1999, p.51). My definition of experience follows that of feminist standpoint theorist Smith (1987), thus referring to “the ordinary, practical activities of daily life as well as the problems, frustrations, and happiness of life” (as cited in Acker, 1999, p.51).

A feminist standpoint approach, to which we can trace intersectionality that I use as one of theoretical paradigms of my research, claims that “knowledge must be rooted in “women’s everyday/everynight world” (Smith 1999, p. 5; Smith 1987; as cited in Doucet and Mauthner, 2006, p.37) and that women’s lives represent the “places from which to start off the knowledge projects” (Harding 1991, p.61, as cited in Doucet and Mauthner, 2006, p.37). This approach also highlights that social analysis must put these experiences in the context of broader relations of ruling or social structures (Doucet and Mauthner,

2006). This helps analysts to realize that women are not a homogenous group with a universal standpoint opposed to men and instead that there are multiple standpoints located at the intersections of class, caste, race, ethnicity, gender, religion, sexuality, dis(ability) that create the particular "relations of ruling" in specific times and places (Root, 2008). Similarly, such a notion is also reflected in the already discussed concept of "the matrix of domination", established by Patricia Hill Collins (1990). In such a matrix, she notes, "each individual derives varying amounts of penalty and privilege from the multiple systems of oppression which frame everyone's lives"(p. 229).

Drawing upon the feminist emphasis on women's experiences as resources for social analysis, the qualitative research methods that I employ in my study in order to explore how women see their migration, working, living and integration are semi-structured, in-depth interviews. Given that interviews allow the researcher to hear in-depth, rich accounts of respondent's experiences and "theorize these experiences with a view towards social change" (Westmarland, 2001), this method of data collection seemed the most appropriate for the purposes of my study.

I start this chapter by explaining my interest in doing the research that focuses on experiences of LICs in Ontario. Next, I reflect on how my role as a researcher in this project has influenced my study. Then I describe the process of data collection, describing the sampling and recruitment strategies I used to recruit and sample participants for my research as well as the process of their interviewing. I conclude the chapter with a discussion of the process of data analysis.

## **4.1 The Birth of My Research Project**

My interest in doing research on experiences of live-in caregivers in Canada was sparked through my involvement with a project titled “The Role of Internationally Trained Health Workers in Ageing Societies: A Comparison of Long-Term and Home Sectors in Canada, supervised by Dr. Bourgeault<sup>16</sup>. In particular, since summer 2007 till March 2009, I had been working on this project as a research assistant. As part of such a work, I conducted interviews with immigrant healthcare workers working in the home and long term care settings in Canada, exploring their reasons for, and means of migration, choice of employment, working and living conditions, and issues related to turnover, aspirations and social integration.

Some of the participants in this project were former LCP workers who migrated to Canada under the Live-in Caregiver Program. As one interview question focused on their previous jobs in Canada, former live-in caregivers told me about very hard working and living conditions that they experienced working as nannies or taking care of old people under the LCP. Their stories made me very interested in finding out more about this unique program. I subsequently searched for the literature pertaining to such a program and more specifically, for studies exploring live-in caregivers’ experiences under the program. Reading about exploitation and discrimination that these workers are subjected

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<sup>16</sup> This project represented a Canadian component of a larger, international comparative study of the experiences of immigrant care workers, employers, and elderly care recipients in a range of different healthcare institutions and private households in the United Kingdom, United States, Ireland and Canada (see Spencer, Martin, Bourgeault, & O’Shea, 2010).

to while under the LCP triggered my decision to make experiences of immigrant live-in Caregivers in Canada the focus of my dissertation research.

My decision was also aided by my personal experience of being an immigrant. When I migrated to Canada twelve years ago, I felt very lost and lonely, because I missed my parents and friends back home terribly. I would visit them in the summer or they would visit me occasionally. Talking to former LCP workers, I realized that this is not a possibility for them - they either cannot afford to travel or they often do not get any (or enough) vacation days to make such a trip. I could only imagine how hard it must be for them to be separated from their kids and spouses for years. Thus, I decided to do a study on their experiences, hoping that based on such research, I would be able to suggest changes to immigration policy decision makers. Such suggestions might serve to improve the migration, working, living, and integration experiences of immigrant live-in caregivers in Canada. I was hoping that in this way, by triggering changes in policy relevant to this immigrant group, my study will also benefit Canadian society, making it a place where everybody's well-being is respected.

## **4.2 My Role as a Researcher**

Researcher's positionality has been defined as the "perspective shaped by his/her unique mix of race, class, gender, nationality, sexuality and other identifiers" (Mullings, 1999, p. 337). Recently, there have been many studies that demonstrate the important role that positionality plays within the research process (Gupta, 2002; Kobayashi, 2003; Mullings 1999; as cited in Ficklin & Jones, 2009). Positionality can have an impact on

the entire research process, shaping the knowledge that results from such a research. Therefore, given that in a qualitative study the researcher is the research instrument (Janesick, 2001; Piantanida & Garman, 1999), I believe it is important to reflect here on how my different social identities influenced the process of my research and more particularly, entry into the field of study and the process of data analysis.

First, as mentioned above, where I reflect on the birth of my research project, my initial interest in this kind of research was sparked partly by my foreign, immigrant identity, i.e.- by my experience of being an immigrant in Canada. As I started the process of participant recruitment, I realized that my immigrant identity has facilitated the participation of live-in caregivers in my research. Indeed, often when I phoned live-in caregivers to ask them to participate or went over the letter of information for the study, they would recognize my foreign accent and ask me about my nationality. They also were curious about when I immigrated to Canada, what kind of study program I was pursuing at university as well about the reasons why I decided to do research focusing on their experiences. After I answered such questions, often our conversation would get a friendly overtone and I could feel that participants felt free and comfortable enough to share with me their experiences with migration, working, living and integration into Canadian society after the LCP. Also, as most of my participants were women, I could see that my identity as a woman also contributed to their willingness to take a part in my study.

Moreover, my identities as a woman and an immigrant have helped me to take a critical stance towards sociological theory (i.e. - social network theory) during the process of data analysis. Indeed, Collins (1986) argues that many Black female intellectuals



within academia have creatively used their marginality- their “outsiders within” status to establish a distinct standpoint on existing sociological paradigms. Further commenting on how “outsider within” status can contribute to a sociological field, she writes:

Outsider within status is bound to generate tension, for people who become outsiders within are forever changed by their new status. Learning the subject matter of sociology stimulates a re-examination of one's own personal and cultural experiences; and, yet, the same experiences paradoxically help to illuminate sociology's anomalies. Outsiders within occupy a special place-they become different people, and their difference sensitizes them to patterns that may be more difficult for established sociological insiders to see...In contrast to approaches that require submerging these dimensions of self in the process of becoming an allegedly unbiased, objective social scientist, outsiders within bring these ways of knowing back into the research process. At its best, outsider within status seems to offer its occupants a powerful balance between the strengths of their sociological training and the offerings of their personal and cultural experiences. Neither is subordinated to the other. Rather, experienced reality is used as a valid source of knowledge for critiquing sociological facts and theories, while sociological thought offers new ways of seeing that experienced reality (p.29-30).

Therefore, in the process of data analysis, my “outsiders within” status led me to critically approach social network theory, while at the same time social network theory made me see the experiences of live-in caregivers in a new way, from a sociological point of view.

It should be noted, however, that even though my social identities of being woman and immigrant helped me to critically approach sociological theories, my analysis was guided by voices of women who spoke to me about their experiences, not my own perspective.

As most of the women I interviewed had children, during the interviews, when talking about their migration decision and their social lives in Canada, women often

mentioned their sons and daughters they left behind in their home country. After finding out that I am also a mother, they felt more comfortable to talk not only about the pain of separation from their children, but also about other aspects of their experiences as LICs in Canada. Despite the identities of being an immigrant, woman and mother that I have shared with most of my participants, it is important to acknowledge here that I and my participants differed in many respects. Unlike me, many of the participants I interviewed were non-white and identified themselves as a visible minority. Also, while almost all of them were participating at the lowest echelons of the labour market (working under the LCP or doing some other low paid job in Canada after they finished the program), I was on my way to get PhD degree. Also, most of the participants were older than me.

Thus, while I strived to achieve a full understanding of the experiences of my live-in caregivers in Canada, I am aware that interviews could have been different and that therefore, the research could have revealed different findings if I shared all social attributes with my participants. Being aware of inequalities stemming from our different social status, I have taken some actions to ensure that such differences do not get magnified by the research process. In particular, I made sure each of my participants fully understood the purpose of my research as well as costs and benefits it carries before I interview him/her. Also, I reminded them that they could withdraw from the project at any time even after signing the consent form or mid-way or after the interviews (which was also written in the letter of information) or that can skip answering any question which upset or embarrass them or which they do not wish to answer. During the interviews, I have been paying attention to any verbal or non-verbal cues that might

reflect concerns about continuing. For instance, if the a live-in caregiver seemed reluctant to answer certain questions, I would remind him/her of his right to withdraw from the study at any time, without any consequences or to refuse to answer the question. While none of my participants decided to withdraw from the study, some of them refused to answer some of the questions they felt uncomfortable with.

## **4.3 Data Collection**

### **4.3.1 Sampling Techniques**

Using the various recruitment techniques that will be described in more detail below in the next section of the chapter, I managed to secure interviews with 34 live-in caregivers in the province of Ontario; 19 current and 15 former.

Since the majority of immigrant live-in caregivers in Canada come through LCP, the criterion that I used for sample selection was that that the participants came to Canada through this program. Despite my interest in LCP and important immigration policy suggestions that I hoped to emanate from my research, at the outset of my research I was more than willing to interview those who came illegally or under some different immigration category, if they show an interest in taking part in my research. And indeed, almost all of the study participants came through the LCP. Only four of participants did not come through this program. Two held visitor visas, one held a student visa and one came on a working permit and was recruited to work as a dialysis nurse in a hospital in

Manitoba. When their visas expired, they decided that the best way to re-gain legal immigration status in Canada was to enrol in the Live-in Caregiver Program.

Most of the participants migrated to Canada in the period between 2006 and 2009. Some of them arrived in the years preceding 2006. Only two live-in caregivers came in 2010.

In course of doing my research, I relied mostly on the technique of snowball sampling. Thus, after identifying and contacting some former and current live-in caregivers, I asked them to provide me with names of other caregivers that I may interview. In order to ensure diversity in my sample, I made sure that my subjects are selected from a variety of social and geographical locations in Ontario and not solely from one place. For instance, if I interviewed one person that is connected to one settlement organization, I made sure I do not confine myself to self-selected group of live-in caregivers dealing with this organization, but also to begin other snowball samples in other groups. Also, I made sure that my sample did not contain subjects drawn from only one city, but from many different places. Thus, my participants were from many different cities and towns in Ontario --Toronto, Mississauga, Oakville, Hamilton, Pembroke and Ottawa.

Even though my general sampling technique was snowball sampling, I was purposefully sampling from certain groups of potential respondents. I anticipated that that Filipinos will represent a large part of my sample as they are the predominant among immigrant live-in caregivers in Canada. As already mentioned in the introduction, in 2009 this ethnic group accounted for 90 percent of all immigrant live-in caregivers in Canada.

And indeed, most of my participants cite the Philippines as their country of origin. However, I wanted to ensure that other ethnic groups are represented in my sample as well since that could enable me to see how their migration, working, living and integration experiences vary depending on race/ethnicity. Thus, I managed to interview some live-in caregivers from Slovakia, Poland, Ukraine, Peru, India, China, Singapore and Kenya.

Similarly, even though the majority of immigrant live-in caregivers in Canada are female (95 percent), I tried to recruit as many males as I could to enable me to compare their experiences. Unfortunately, I managed to recruit only two male live-in caregivers for my research. In addition, as already mentioned above, in my research, among others issues I explored how the experiences of working and living experiences of live-in caregivers differ according to the type of care they provide. Due to that reason, I made sure that both eldercare and childcare providers are included in my sample. Indeed, I interviewed 19 child live-in caregivers, 12 eldercare live-in caregivers and 3 caregivers having experiences in both types of care. It should be noted here that the number of participants who had experience in both types of care is greater than 3 given that some of my participants who were current live-in caregivers, that is, who were taking care of either elderly or children at the time I interviewed them used to have experiences in both types of care. However, given my classification criterion according to which current live-in caregivers should be sorted according to the type of care they were currently performing, they were categorized according to the type of care with which they were involved at the time of the interview.

Many of my participants are married and most of them have children who do not live with them in Canada. Most of my participants are in 40-49 age group. Some of the participants are younger (30-39 years old), while only few are in 20-29, 50-59 and 60+ age groups. At the time of the interview, most of my participants were still holding temporary working (live-in caregiver's) visas. Some of them had an open permit, while only few held PR. Only one participant was a Canadian citizen at the time of the interview.

For more detailed information pertaining to my participants' year of migration to Canada, country of birth, gender, age, marital status and current immigration status, please refer to appendix 3.

#### **4.3.2 Recruitment strategies**

From January 2010 till June 2011, I have been collecting the data for my study in the province of Ontario. The rationale behind choosing Ontario as a place to conduct this study lies in the fact that data show that majority of LCP participants settle in this province, specifically in greater Toronto area (Kelly et al., 2011; Langevin & Belleau, 2000). For instance, data for the year 2009 show that out of 6, 273 LCP workers coming to Canada in that year, more than a half (in particular, 3, 238) settled in Ontario (Kelly et al., 2011).

As many other researchers (e.g., Spitzer, Parrenas, Hondagneu-Sotelo) who examined the issues regarding this group of subjects, I relied on variety of "intensive,

multi-pronged recruitment strategies” (Spitzer, 2009, p.5). A multiplicity of strategies were employed in order to increase the chances of finding a sufficient number of participants as they live in the homes of their employers and thus, are hard to reach. In addition, such a variety of recruitment strategies seemed reasonable to employ in examining experiences of this population also due to their fear of disclosing experiences to researchers, despite their assurances of confidentiality and anonymity (Hondagneu-Sotelo, 2001; Spitzer, 2009).

Therefore, in order to recruit participants for my study, I put up posters (appendix 1) advertising the study in places frequented by immigrant live-in caregivers - coffee shops, ethnic stores, ethnic restaurants, churches, recruitment agencies, and city neighbourhoods known for the tendency of its dwellers to recruit foreign live-in caregivers. In addition, I put up the posters about the study in integration and settlement services, English language schools, as well as in the hospitals and long-term care facilities where many of them are likely to end up after completing LCP. I also advertised my study on the kijiji web site.

In addition to putting up posters in facilities of integration and settlement services and advertising the study online, I also e-mailed various immigrant and settlement organizations, organizations providing bridging programs for internationally educated nurses (such as Centre for Internationally Educated Nurses [CARE]), Canadian Coalition

for In-Home Care<sup>17</sup>, and some recruitment agencies, asking them for help with regards to finding participants for my study.

I also relied on my Filipina colleague from university as a way to get in touch with owners of one Filipino store in Hamilton, which further connected me with live-in caregivers who come to the store. Moreover, I also relied on my personal networks of friends and family who helped me to locate participants for my research. For instance, one of my friends who is working in one non-profit organization helping people with developmental disability in Hamilton connected me to one of her colleagues who used to be a live-in caregiver.

While I employed a variety of recruiting strategies in order to reach respondents for my research, the process of finding participants for my research was very slow. It is reasonable to suppose that my difficulties with recruiting immigrant live-in caregivers stem from their fear that information they reveal in the interviews will be disclosed which would result in being fired or deported. Also, as they work long hours in the homes of their employers, lack of time is certainly another factor that may have made them hesitant to participate. Some recruiting techniques seemed to work better than others. Posters and online ads did not seem to be so effective, as I got only few responses using these recruitment techniques. This is probably due to the fact that posters and ads offer limited information about the study, and thus were not attractive enough to interest live-in caregivers to take a part in my research. Moreover, posters and ads do not offer the

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<sup>17</sup> Canadian Coalition for In-Home Care is “a national non-profit organization which represents the concerns of employers, home caregivers, nannies, and agencies involved with the issues of in-home care” (Halton Information Providers, 2013)



possibility to go over the letter of information and discuss the research objectives with participants as well as to thoroughly assure them of confidentiality of the collected data.

E-mailing officers working in immigrant settlement and integration services and management staff of recruitment agencies proved to be the most effective technique for finding study participants. There were two organizations that proved to be especially helpful to me in this regard. One of these is a community-based settlement agency that provides a variety of programs and services to immigrant and refugee communities in the Halton region. The other one is a recruitment agency located in Oakville, that among other services (i.e.- recruiting local live-out caregivers on a full-time, part-time, temporary and occasional basis providing child, elder and special needs care) is involved in recruitment of full-time overseas live-in caregivers. In particular, two settlement workers in the above mentioned immigrant settlement organization and a head of a recruitment agency provided me with contact information (either phone numbers, e-mail or both) of some live-in caregivers who were interested in taking a part in my study. Subsequently, I either mailed or phoned these live-in caregivers to ask them to participate in the interview. Unlike with posters, this provided me with the opportunity to explain the purpose of my study to them as well as to inform them about the ethical issues (i.e. - confidentiality of the data and privacy), which significantly increased the chance they will agree to participate. If I contacted them via e-mail, I made sure to attach the letter of information (to see a letter of information and consent form, refer to Appendix 2)

Relying on my Filipina friend turned out to be very effective technique in finding participants as she introduced me not only to the above mentioned owners of a Filipino

store who further connected me with some Filipino live-in caregivers who are their regular customers, but also to the owner of the other, nearby Filipino store, who herself helped me to find participants for my research. As the store was full of Filipino live-in caregivers on Saturdays and Sundays, on these days I would go there, tell them about my study and distribute the letters of information to those who seemed to be interested. Some of them I interviewed the same day in that store, while others e-mailed or phoned me later to schedule the interview.

#### **4.3.3 The process of interviewing**

Once a live-in caregiver agreed to participate in my research, we would set up a conversation so I could go over my letter of information, inform him/her about the interview details (such as, for instance, type of questions asked and approximate length of the interviews) and discuss the ethical issues (i.e. - issues of confidentiality, anonymity and potential harms and benefits). Subsequently, each respondent would sign a consent form (see appendix 2) or give verbal consent over the phone and fill in the demographic profile (see appendix 4). In the consent form, I also asked live-in caregivers for their permission to record the interviews, as well as if they are interested in receiving a summary of research results. All participants agreed to taping of the interview and almost all of them (except for three live-in caregivers) responded they would like to receive a summary of study results. While my intention was to take notes while talking to participants, during my first two interviews I noticed that such activity distracted my respondents, resulting in disruption of the natural flow of conversation. Thus, to avoid

such an effect I decided to make notes about each interview after the interview was done. These notes helped me to start thinking through my findings long before I initiated the process of analysis.

Sixteen interviews were conducted face-to face. However, given the busy working schedules of my participants, eighteen of them expressed preference for being interviewed over the phone. The interview guide consisted of four major sections, each of them focusing on one aspect of live-in caregivers' experiences that I tried to explore in my study. In particular, the questions explored their migration, working, living and integration experiences after LCP.

I started by asking LICs about how they decided to migrate to Canada as live-in caregivers and experiences of migration and finding jobs in Canada. Next, I inquired about respondents' experiences of working in Canada (including questions about their job contracts, job satisfaction and relationship with an employer), with specific focus on how the type of care they performed impacted on their working conditions. Then, I asked my respondents about their living experiences, including the questions on accommodation arrangements, personal movement and freedom of association, social life and experiences of isolation. I ended my interviews with a set of questions about respondents' experiences after LCP, in particular their experiences with upgrading, immigration procedure for obtaining PR status and finding a job in post-LCP period. With each set of questions in the interview guide (except for the one that focuses on working experiences) I intended to find out more about the role of social networks (both formal and informal) in the LICs' experiences. At the very end of the each interview, I asked my participant whether there

was anything that we did not cover during the interview that they felt it was important and would like to discuss.

All interviews were semi-structured. As this method of interviewing allows for probing beyond prepared questions from the interview guide, it provided me with an opportunity to thoroughly explore live-in caregivers' experiences (for interview schedule, see appendix 4)<sup>18</sup>. Some of the issues initially not included in the interview guide that emerged as important during the interviews were subsequently incorporated into my list of questions. For instance, initially my interview guide did not focus on cultural and language barriers as the challenges of working as live-in caregiver in Ontario. Still, during some of my first interviews, I noticed these issues were often described as significant challenges of working as LIC by many respondents. Consequently, I decided to incorporate question on this topic as a new probe into my interview schedule.

All the interviews were conducted in English. While almost all of my interviewees were fluent in English, the interview with the Chinese respondent lasted significantly longer. This was the case since she did not understand many of questions and had to consult her electronic device for translation. Moreover, one Peruvian live-in caregiver whom I contacted to participate in the interview for the study refused to do it since she felt her knowledge of English is insufficient to do so.

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<sup>18</sup> Many of the questions in my demographic profile and some of questions in the interview guide resemble or are identical to the questions of the above discussed international project in which I took part (for details on the project, see, Bourgeault, Atanackovic, Le Bruin, Parpia, Rashid & Winkup, 2009). This study focused on role of internationally trained healthcare workers in providing care for elderly in Canada and sample included nineteen live-in caregivers. Relying on questions from this study aimed to offer comparability of my results to the results of this and other similar studies. In particular, my supervisor and I intend to write a paper which will reflect on differences and similarities between experiences of live-in caregivers and experiences of immigrant health workers in Canada.

All interviews took place at mutually agreeable time and in a setting of participants' choice which was done with purpose of making my participants feel relaxed and comfortable during the interviewing process. Some of them preferred being interviewed in the night, as at that time they were done with all live-in caregiver's chores. Others would ask me to call them during the day, at the time when children or old people of whom they took care were napping. For most of them, however, the weekends were the best time for the interviewing as these were their days off, so they could easily dedicate some of their free time for the interview.

The interviews lasted approximately 60 to 90 minutes in length. As I am well aware of the precarious financial situation of many of the participants, I provided each participant with twenty dollars honorarium for taking part in the research. With the permission of the participants, each interview was tape recorded. During the last three interviews, I felt I have reached a saturation point given that these interviews merely confirmed the previous findings and did not seem to bring any new insight. At such point, I decided to stop interviewing and start the process of analysis.

#### **4.4 The Data Analysis**

Each taped interview was transcribed verbatim with participants' approval. In order to ensure confidentiality and protect identities of my participants, I made sure their names or any other identifying characteristics/statements are removed from the transcripts. Instead, the interview numbers were on the transcripts.

Subsequently, I transferred the interview transcripts into the NUD\*IST 6, qualitative data analysis software program for coding. In my analysis of the data gathered through semi-structured interviews, I relied on techniques of thematic and constant comparative analysis. I identified some codes at the outset and created the preliminary coding scheme by following the key thematic sections of the interview guide. Then, using such scheme, in the NUD\*IST 6, I coded a first set of interviews under the different nodes that contained the quotes about a specific topic. This allowed me to identify any new topics/themes, which were not included in the preliminary coding scheme. Thus, I altered a coding scheme accordingly adding some nodes to it and applied it to the first set of interviews. Subsequently, I repeated the coding process until all interviews have been coded. Next, data were contrasted and compared, and any similarities/differences among respondents' experiences were noted. For instance, the findings on their migration decision and act of migration were contrasted and compared on the basis of the respondents' gender, race/ethnicity and age. The data that relate to their working and living experiences were compared according to the type of care the live-in caregiver performs. Also, data pertaining to discriminatory relationship between employer and employee were compared based on LIC's gender, race and ethnicity. Lastly, experiences of living and integration in Canada were compared on the basis of type of care gender, race, class, ethnicity, nationality, citizenship, marital status/family situation and age.

In the following sections of my thesis, I will present my findings with regards to key themes that emerged from the analysis: 1) role of social networks in the LICs' migration experiences (including both migration decision and very act of migration); 2)

differences in the working experiences of LICs according to the type of care and hierarchies of difference; 3) differences in the LIC's living experiences according to the type of care and role of social networks in such experiences; and 4) role of social networks in the integration experiences of LICs.

## **Chapter 5**

# **The Role of Social Networks in the Migration Decision of Immigrant Live-in Caregivers in Ontario, Canada**

### **5.1 Introduction**

The purpose of this chapter is to examine migration decisions of immigrant live-in caregivers with a particular focus on the role of social networks in this process. There are some studies that examine, among other issues the factors that trigger migration decisions among this immigrant group in Canada (Alcuitas et al, 1997; Barber, 2000; Mikita, 1994). As we have seen in the overview of the literature, these studies have identified an array of factors both in their countries of origin and in Canada as their destination country that impact on their migration decision. In particular, socio-economic factors such as poverty, unemployment and low wages in their countries of origin *push* them to come to Canada which in addition to a better living standard for them and their families promises permanent resident status after they spend some time working under Live-in Caregiver Program.

Surprisingly, the role of social networks in the migration decision making for this group of immigrants in Canada is left relatively unexplored by these previous studies



despite the fact that it has been shown that social networks are an influential factor in initiating migration flows (Findley, 1987; Knight, 2002; Simmons, 1989). Moreover, most of the past research on migration experiences of live-in caregivers in Canada focuses on the *Filipino* live-in caregivers, thus failing to examine factors triggering migration decision among immigrant groups of other ethnicities.

Some of the past research that deals with migration decisions of immigrant live-in caregivers in Canada is not only incomplete, it is also atheoretical. There are some studies, however, that rely on sociological perspectives (e.g. - feminist) (e.g. - Cameron, 1999; Mikita, 1994); still none of these studies uses these perspectives in conjunction with network theory of migration even though this theory has been shown to be useful in examining the process of migration decision making of other immigrant groups (Massey et al. 1987; Massey & España, 1987; Massey & Espinosa, 1997).

Thus, in this chapter I more fully explore the reasons live-in caregivers of different ethnic backgrounds give to decide to migrate, examining in particular the role of informal (i.e.- family and friends) and formal networks (i.e.- recruitment agencies, schools for live-in caregivers) in the process of their migration decision making. In doing so, I rely on four propositions of network theory of migration according to which one is more likely to migrate if: 1) he/she has somebody living abroad; that likelihood increases with closeness of relationship (e.g.- if person living abroad is brother, sister or mother); 2) if he/she has already migrated before; 3) if migration is common in his community of origin and values related to migration become part of community values and; 4) migrant institutions (e.g., recruitment agencies, government agencies) act as a structural

component to migrant networks, suggesting that interpersonal ties are not only triggers of migration (Massey et al., 1993, 2005; Massey and Espinosa, 1997). As already mentioned in the theory chapter, these institutions try to control migration process to reap financial and political gains for themselves and consequently, their activities shape conditions of access to migration opportunities (Goss & Lindquist, 1995).

While all of the above four propositions of network theory of migration are supported by experiences shared by my participants, on the basis of my findings I argue that this theory is insufficient to fully explain migration decision of immigrant live-in caregivers in Canada. Clearly, this theory helps to capture and comprehend the role of social networks in migration decision of this immigrant group. Still, by its primary focus on networks in facilitating one's migration decision, it does not guide us to focus on other important factors that might trigger or impede such a process. In particular, it does not direct us to examine the roles of *gender*, *race/ethnicity*, *age* and their intersections which, as my findings demonstrate, prove to be very important in impacting such a decision. Thus, I conclude that in our exploration of the issue of migration decision making, we should couple network theory of migration with the intersectionality approach which puts emphasis on these cross-cutting hierarchies of difference.

By complementing network theory of migration with an intersectionality perspective, we are able to look beyond meso level of social networks to comprehend how cross cutting hierarchies of difference on a structural, macro level impact on their personal experiences (micro level), thus influencing their individual decision to migrate. In addition, an intersectionality perspective leads us to search for the differences in

migration experiences between people of different genders and race/ethnicity. Consequently, in this way we come to realize the importance of socio-political and cultural context in understanding migration experiences of immigrant live-in caregivers in Canada.

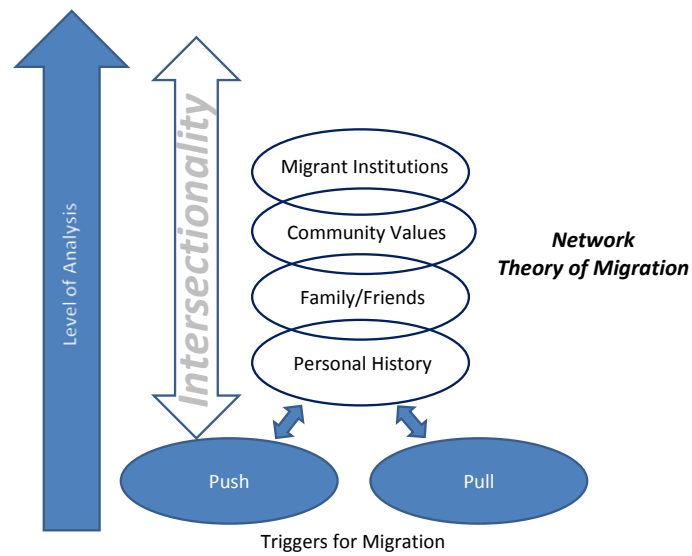
I begin this chapter by reflecting on various push and pull factors that have been identified by participants as important in triggering their plan to move. After discussing how immigration policy (the Live-in Caregiver Program) and labour laws aid live-in caregivers' decision to choose Canada as their migration destination, I outline my findings with regards to social networks. These findings show that both informal and formal networks have an important role in influencing the decision of prospective live-in caregivers to come to Canada. In presenting these findings, I show how the four propositions of network theory of migration are supported by the experiences shared by my participants. Next, I then demonstrate that albeit important, network theory of migration is insufficient to fully explain migration decision among immigrant live-in caregivers in Canada. I conclude the chapter by highlighting empirical and theoretical findings of my research.

## **5.2 The Various Factors Influencing Migration Decision of Immigrant Live- in Caregivers**

In this section, I discuss my findings relating to the reasons for which immigrant live-in caregivers decide to leave their countries of origin and come to Canada. In doing so, I rely on push- pull model of migration. First, I reflect on push economic factors (i.e. -

bad financial situation and few job opportunities in the country of origin) and non – economic factors (such as environmental concerns or stressful life events such as divorce) that trigger their decision to migrate. Next, I discuss pull factors that trigger their migration decision – both those more economic (such as better economic opportunities and future for family members as well as higher living standard) and non-economic pull triggers (such as curiosity, desire to travel and learn a new culture and Canada’s reputation as a country of friendly people). Then, I focus on the role of what Lee (1966) terms “intervening” factors– immigration Live-in Caregiver Policy and Canadian labour laws.

As we will see, while the push/pull model has some value in helping us categorize different economic and non-economic triggers for of those who come through the LCP, it is insufficient to fully explain migration decisions among foreign LCP workers in Canada. In particular, a push- pull model focuses only on one layer of the migration process. Social networks as well as hierarchies of gender, race, ethnicity and gender are other important components of such a process to which network migration theory and the intersectional perspective provides some important insights. As will be demonstrated in this chapter, social networks (both formal and informal) serve as bridges between push and pull triggers for migration and immigration policy for live-in caregivers. The figure 1 below summarizes all the above mentioned factors that play part in live-in caregivers’ migration decision as well as theoretical lenses that aided my analysis of such decision that will be discussed in more detail below.



**Figure 1:** Map of Various Factors Impacting on Migration Decision among LCP Workers

## 5.2.1 Push Factors

### 5.2.1.1 Economics/Work

The results of my study show that bad financial situations back home and lack of job opportunities are primary reasons that triggered the decision to migrate to Canada for majority of the interviewed live-in caregivers, regardless of their country of origin. This finding is reasonable in the light of the fact that all of the respondents came from countries which were facing some sort of economic crisis. For instance, reflecting on the low remuneration and difficulty of getting employed two respondents – one from the Philippines and the other one from Slovakia --state:

*My financial situation back home is not very good. I can tell you that was not good because we can eat three times a day but, you know, I think it's not really enough. And then I was helping my mother-in-law running the business. That's not your own business and there's a salary paying me, you know. It's not really very good (a current Filipino live-in child caregiver 7).*

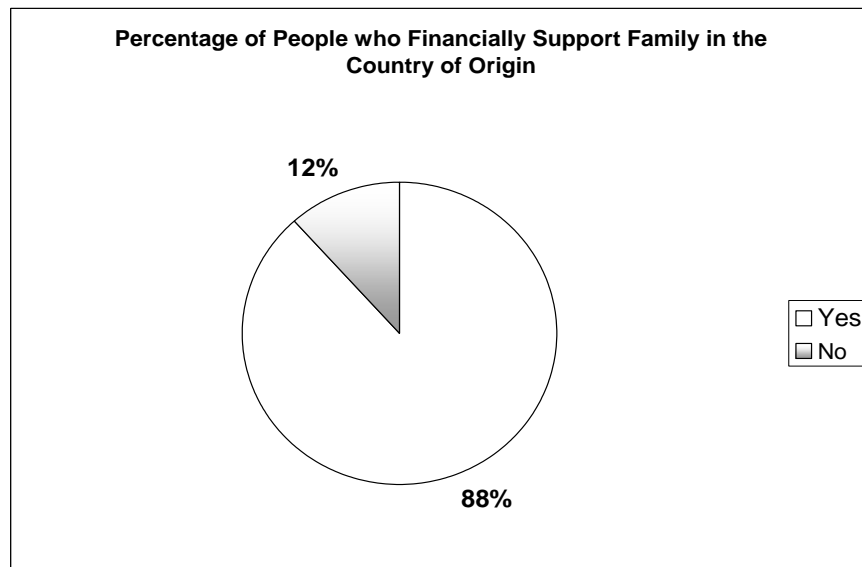
*Oh I am a graduate of university back home but the jobs that I am trying to get is not fit to what I've had, it's not into my career. Like it's not into the course that I've taken. Like I can just get a job in the fast food, whatever. Like of course as a fresh graduate you want to practice your degree. You want to work in the field where you've graduated. And I said okay, maybe I should rather than be employed at a fast food back home earning a peso I'd rather work in another country earning a higher paid salary. And I said the only way for me as of that moment to come to Canada is under the Live in Care Giver Program (a Filipino live-in child caregiver 10).*

The quotes above support the results of other studies on Filipino live-in caregivers in Canada that cite unemployment and low wages as the initial triggers for migration of this group of people (Alcuitas et al, 1997; Barber, 2000; Mikita, 1994). The findings of

my study indicate the same economic/ work related reasons for migration among respondents from other, economically less developed countries such as Poland, Slovakia, Peru and Kenya. For instance, citing her low wage as a main reason for which she decided to come to Canada, a former Slovakian live-in caregiver recalls:

*Back home I finish university studies and then I started to work as a social worker. I was hired by an agency but at the beginning I didn't get such a nice money so I decided maybe it will be much better to come to this country and maybe try it but first of all I had to apply for a live in caregiver to work here (a former Slovakian live-in child caregiver 15).*

That live-in caregivers interviewed in this study faced very limited opportunities in the economically disadvantaged countries from which they came is also evident from the fact that most of them claim that there are people back home who are totally financially dependent on them. The number of people who rely on them ranges from one to seven. Also, nearly all of them send money home on a regular basis to support their immediate and extended family (see figure number 2 below). Those who do not have spouses and/ or children, tend to support their parents, siblings and relatives.



**Figure 2:** The Percentage of People who Send Remittances to the Country of Origin

#### ***5.2.1.2 Non-Economic Push Factors***

Very few live-in caregivers report that they used to have good and relatively well-paid jobs in their country of origin, but decided to migrate only for some other, non-economic/work related push factors. For instance, one live-in caregiver from China said it was air pollution in that country that made her migrate to Canada. Some of them came in order to be able to “start a new life” after stressful life events (e. g. - divorce) (a former Slovakian child live-in caregiver 16).



## **5.2.2 Pull factors**

### ***5.2.2.1 Better living standard and economic opportunities***

Most of the live-in caregivers that I interviewed note that Canada is a well-developed country that promises a better standard of living and economic opportunities (“greener pastures” as one of the respondents has put it). For example, when asked about the main reason for their migration, one Filipino live-in caregiver answers:

*Well just to improve my way of living because this is an industrial or a very rich country and I come from a third world country and I know the difference between a third world country and North America which is like the United States. So in a way, in a way that if you come to Canada you are sure of a better life, you know what I mean? (a former Filipino elderly and child live-in caregiver 2)*

### ***5.2.2.2 Better future for family***

The notion that Canada promises a better future not only for themselves, but also for their children proved to be of great importance in deciding to migrate.

*Uh, I decided to come here to Canada because if you can look, if I can see they're kind of mixed up in our place. We work but we just earn less. And I know it's a good future for my children because in our place if they work they just earn less and it's not really enough for their good future. I decided to come into Canada because Canada is good for their future (a current Filipino live-in child caregiver 6).*

In fact, most of my respondents state that although the decision to migrate was their own, individual decision, they made it for the sake of their family. As one of the respondents put it: “It’s my decision. It’s my decision for the family, for our own goods”

(a former Filipino live-in child caregiver 11). Similarly, explaining the importance of family in their decision to migrate, another two live-in caregivers state:

*Oh, it's really hard. [laughs] It's really hard. Um, there's no job opportunity for me in the Philippines and because I dream of my children like to have their education too, so if I stay back home then I think I cannot provide their needs for school. So I decided to come here in Canada (a current Filipino child live-in caregiver 5).*

*Um, as you know, it's hard to get a good job in the Philippines and, I've been working like teacher. Sometimes it doesn't do enough for your living especially if you have lot members of family or you have more kids. That's not enough for living especially they will grow up, they will go to college and it's really hard. I think that's all the reason why. It's for my son's future so I came here (a current Filipina live-in child caregiver 11).*

The desire to secure better opportunities for their families is also found in many of the previous studies on domestic workers (e.g. - Grandea, 1996; Mikita, 1994).

#### ***5.2.2.3 Curiosity, Travel, Desire to Learn a New Culture and Canada's Good Reputation***

Some of the live-in caregivers explain that in addition to economic/ work related reasons, there were other pull factors that proved to be important in triggering their migration decision. Some live-in caregivers note that they chose to migrate to Canada not only to uplift their economic status, but out of curiosity, desire for exploration of different geographical spaces, opportunity for learning a new culture and Canada's reputation as a peaceful country of friendly people. For instance, noting that the opportunity to improve their financial situation was not the only reason for her decision to move to Canada, one Filipino live-in caregiver states: "I am so interested to see how Canada looked like. I am

so curious how Canada looked like and how, you know, how the weather is” ( a former Filipino live-in child caregiver 20).

While push and pull factors are important in exploring one’s migration decision, the “intervening factors” (Lee, 1966) such as immigration policies and labour laws are other relevant components of such a process.

### **5.2.3 Intervening factors**

#### ***5.2.3.1 Immigration Live-in Caregiver Policy and Canadian Labour Laws***

Some respondents weighed their options between Canada and other countries as a country for migration before deciding to come to Canada. They explain that Canada’s Live-in Caregiver Program, unlike similar programs for domestic workers in some other places (such as Taiwan, Singapore, Hong-Kong, Israel, Netherlands, and US), gives them unique possibilities that acted as a motive for them to choose to come to Canada. First, it provides them with the opportunity to become permanent residents after they finish their two years in the program. Second, it gives them the possibility to reunite with their families after a certain amount of time. As one of the respondents puts it:

*Well first and foremost I have heard from my friend when I was in Hong Kong that Canada is the best place to work. And Canada has some, you know, we can see better job here. We can find a better life. In other places like, Hong Kong or Taiwan or other places out of Philippines, they don’t have, a program like here in Canada, like a care giver program and then the Canadian government were able to give you the opportunity to be an immigrant and to take your family here, to come over and to stay and to be a Canadian citizen and stuff like that, you know. So Canada is good (a current Filipino live-in child caregiver 7).*

Some respondents highlight Canadian labour laws and immigrant friendly environment as important factors in their decision to migrate to this country. For instance, answering the question whether he considered other countries as possible choices for migration, one Filipino live-in caregiver who used to be domestic worker in Hong Kong, Brunei and lastly Taiwan before coming to Canada, says:

*Actually I did not think about other countries in my thinking to go someday but I only think about Canada because in Asia, it's very familiar in Asia that Canada has a very good reputation about labour laws and then about how the human treatment to the immigrants like me. So I was encouraged to come here. That's the only encouragement I have before I came here (a current Filipino live-in child caregiver 8).*

As it has been pointed out in the description of my sample outlined in the methodology chapter, nearly all of the interviewed live-in caregivers migrated specifically to work as live-in caregivers in Canada. Some of those who came through the LCP explain that coming through this immigration program was not their preferred choice, but the only way in which they could enter Canada. They explain that due to complexity of immigration point system that requires certain economic standing and education, the LCP looked like a best possible option to come to Canada. For instance, when asked whether they migrated to work specifically as live-in caregivers, one respondent replies:

*Well because in the live in care giver program, I find it cheapest, easiest, the fastest and a more practical way of going to Canada. I tried to apply as an immigrant but, you know, I failed in some aspects. I tried to do it on point system, but at the time I don't have the money to show as well (a former Filipino live- in elder caregiver 4).*

While the above described push and pull factors proved to act as important trigger for live in caregivers' migration, country's immigration policy (and in particular,

possibilities offered by Live-in Caregiver Program) and labour laws for this group of immigrant workers proved to be of greatest importance for their decision to choose Canada as their destination. This finding is in accordance with the argument made by Massey et al. (2005) that in today's changed circumstances, one's migration decision is not so much a result of interaction between "push and pull", but more between the push and 'intervening factors' such as immigration policies and laws.

While the push/pull model represents a useful way of classifying different triggers for migration decision, it is not sufficient to explain such a process. As it will be shown in the next section of this chapter, social networks (both formal and informal) serve as mediators between push and pull economic and non- economic factors that trigger their desire to migrate and immigration policy for live-in caregivers, as they inform prospective live-in caregivers about possibility of undertaking this kind of work in Canada and unique Live-in Caregiver Program that provides them with opportunity to become landed immigrants after two years of domestic work. As such, social networks assume an extremely important role in facilitating the migration decision among prospective immigrant live-in caregivers in Canada.

### **5.3 The Role of Social Networks in the Migration Decision of Immigrant Live-in Caregivers**

Social networks play a crucial role in prospective live-in caregiver's decision to migrate to Canada. Whether a potential migrant thinks about migration due to their bad financial situation or just out of curiosity or desire for exploration, social networks to which he/she is connected prove to be of crucial importance in whether such plan will

become reality. As we have seen above, many live-in caregivers have the future of their family in mind when deciding to migrate. In addition, there are some other ways in which social networks affect such decisions. In particular, all four propositions of social network migration theory that I explored in relation to my goal of examining the role of social networks (both formal and informal) in migration decision of immigrant live-in caregivers in Canada have been shared by experiences of my participants.

### **5.3.1 Strong and Weak Ties**

The interviews with participants lend support for the role of personal networks of family and friends who already live in Canada in structuring the migration decision of immigrant live-in caregivers that I examined based on the first proposition of the network theory. As already mentioned above, this proposition posits that the likelihood that someone will migrate is greater if he/she has somebody living abroad; that likelihood increases with closeness of the relationship (e.g.- if person living abroad is brother, sister or mother) (Massey et al., 2005). Thus, this theory of migration implies that both weak and strong ties play a role in one's decision to migrate. Still, according to this theory, the greater the strength of the relationship of potential migrant with the person living abroad, the greater possibility that he/she will decide to migrate.

Interviews with live-in caregivers reveal that most of them did have someone (relative(s) or friend(s) or both to whom they were strongly tied) who was/were already in Canada when they were thinking about migration. In many cases these were very close relatives (parents, brothers, sisters) and very close friends from their home countries (for

instance, people from their native towns/villages whom they knew from the childhood). For some, these were people they met when working as domestic helpers in other countries but became very good friends in a short amount of time. The importance of being strongly connected to somebody who is already in Canada is illustrated by the following excerpts from the interviews with current child live-in caregivers:

*Interviewer: Did any of your relatives/friends came to Canada before you did?*

*Respondent: My friend. Very close friend. She lived in the same city as me. She told me Canada is good country so I think, yeah, I should come here*

*Interviewer: So your friend came before you did. Do you think that had influence in your decision to come?*

*Respondent: Yeah, yeah, yeah. Before that I'm hesitating to come here. It's the same country. I have no friends here. Maybe I feel lonely. But after she comes here I say that's good (a current Chinese live-in child caregiver 13).*

*Interviewer: Okay. So has the fact that your friends came here to work as live in care giver influenced your own decision to come?*

*Respondent: I can see that their living is better. Sometimes they talk to me about that and it's nice. They tell me it's nice and good in here so I want to try, too (a current Filipino live-in child caregiver 11).*

Some even got contacted by relatives with direct job offers. For instance, a Polish live-in caregiver got contacted by her not so close relatives with the proposition to care for their children. Only a few live-in caregivers I interviewed who had some close or distant relatives and friends in Canada before they migrated state that these networks did not have any impact on their decision to move to this country.

In some cases, the people who already migrated to Canada and who had an impact on live-in caregivers' decisions to migrate were not really close to the respondents. This

is in accordance with the above proposition of network theory which indicates that even weaker ties to people abroad can impact on one's decision to migrate.

*Interviewer: Did your friends who migrated to Canada before you had any influence on your decision to migrate to Canada?*

*Respondent: Yes. Because when they talk about it they say it is a good place to work and when I see them back home they have a good life so it influences me to come here.*

*Interviewer: Okay. And how close were friends to you? Were they very close friends?*

*Respondent: **Not really close** but some of my friends used to work in the same place that I worked with so we had some communications but they are not really like my best friends (a current Filipino live-in elder caregiver 24).*

Thus, regardless of strength of such relationships, having somebody abroad proved to be of great importance in live-in caregivers' decision to migrate. This was the case with majority of live-in caregivers, regardless of their country of origin. As most of these people abroad were former and current live-in caregivers, prospective live-in caregivers could hear about their experiences with this immigration program and see for themselves whether and how much their lives had improved upon migration.

Only few people in my sample did not have anybody already living in Canada or some other place abroad and were first to immigrate to this country. These are respondents from Slovakia, Philippines, Peru and Ukraine. Some of them explain that they were first in the migration chain – they were first to come and subsequently they



brought their family members and friends. Given that they did not know anybody enrolled in a program, they learned about the LCP from recruitment agencies which advertised their services either in their country of origin or another transitional country in which they worked prior to migrating to Canada.

### **5.3.2 Previous Migration Experience**

The second proposition of network theory that one is more likely to decide to migrate if he/she has already migrated before (Massey & Espinosa, 1997) has been shared by experiences of my participants. In fact, most of my respondents migrated to work in different countries before they decided to come to Canada. In particular, they reported working in one or more of the following places: Australia, Brunei, Cypress, Israel, Hong-Kong, Malaysia, Singapore, Taiwan, Saudi Arabia, UK and USA. One Filipino live-in caregiver reports having worked in five countries before her migration in Canada. While most of live-in caregivers I interviewed worked as domestic helpers, some of them used to work as nurse assistants in nursing homes or hospitals in these countries. By focusing on the previous migration experiences in the migration decision of a prospective migrant, the second proposition of network theory emphasizes that people who already migrated draw on social ties created in their past migration endeavours (Massey & Espinosa, 1997).

And indeed, as already mentioned above, working abroad in these various countries as domestic helpers, nurse assistants, or social welfare assistants many of my respondents met some people (mostly coming from their countries of origin) who soon

became their friends and proved to be of crucial importance in encouraging them to migrate to Canada. Thus, prospective live-in caregiver's decision to come to Canada is not only rooted in ties that he/she has to people already in Canada, but also ties that he/she created elsewhere, working abroad as a migrant. While some past research has demonstrated the role of previous migration experience from the same country in structuring one's decision to move again to the same country (Massey & Espinosa, 1997; Massey & Zenteno, 1999), my study reveals migration experiences from other countries are significant as well in structuring one's decision to move to a different destination. This is an important revelation, especially in the light of today's migration patterns, wherein a great number of labour migrants have experienced working in multiple locations around the world.

### **5.3.3 Community Values towards Migration**

The experiences of my respondents reflect the role of attitudes within the home country of potential migrant in structuring migration decisions of live-in caregivers. As already mentioned, this third postulate of network theory asserts that somebody is more likely to migrate if migration is common in his place of origin where "migration becomes deeply ingrained into the repertoire of people's behaviours and values associated with migration become part of community's values" (Massey et al., 1993, p.452- 453) . And indeed, all of my participants came from the countries where migration is very common and the culture of migration is greatly developed. The respondents explain that people from their countries tend to migrate to other countries and settle permanently there given

the bad financial situation and lack of job opportunities in their countries of origin. For example, asked whether it is common for people from their country to leave, two respondents—one from Peru and other one from Philippines explain:

*Yes, it's very common because the problem in my country it's not easy to find a job and the salaries are low. So if you have the chance to go abroad you can do it. They just do it and not many of them come back to Peru, just the people who suffers in another country and they say okay, I'm done with this country. I'm going back to Peru (a former Peruvian live-in child care giver 14).*

*Yes it is. It is very, very common. Like it's like a thousand lining up for interview. It's different countries around the world. I could say maybe it's because we are overly populated so the opportunities for a better future is very slim and the graduates, in one course the graduates are like hundreds of thousands a year. To put the young graduates into employment that's the problem. So the unemployment is the number one problem there too. Like an economic, you know, collapse (a current Filipino live-in elder caregiver 19).*

The interviewees reveal that attitude toward migrating to work abroad in their home a country is very positive as they are mostly seen as courageous people. As a Ukrainian current childcare live-in caregiver puts it:

*They consider us to be really courageous because they know that usually we give up everything and we kind of like go to the lower level of life and it's just like but still we are able to go for all this hardship and then eventually we end up achieving lots of things here (a current Ukrainian live-in child caregiver 28).*

Some state that although they endure many hardships working as live-in caregivers in Canada, often this is neglected by people from their home countries who tend to look up to them and see them as rich and happy people.

### 5.3.4 Migrant Institutions

As already mentioned above, recruitment agencies are very important source of information about the LCP for prospective live-in caregivers who do not know anybody already living in Canada and /or working under this immigration program. Recruitment agencies serve as an additional source of information about the program also for some live-in caregivers who first learned about the program from personal connections. Explaining how she initially learned about the Live-in Caregiver Program from friends, but wanted to be sure that such information is accurate, one respondent recalls:

*Oh yeah, there are friends who are telling me about the program. For me I am the kind of a person I want everything is clear, you know. So I went to the agency. Other Filipinos are just asking, co-Filipino, you know, so I don't want to rely on that. I want to go in person and ask them like what kind of job we are going to work in Canada and stuff like that, you know (a Filipino current live-in child caregiver 7).*

The role of agencies in shaping migration decisions is especially significant in the case of Filipino respondents due to the high rate of labour institutionalization in Asia which is discussed in more details below. Still, recruitment agencies are a valuable source of information on LCP not only for Filipinos, but people from some other countries as well. For instance, one former Peruvian child live-in caregiver used to work as an *au pair* in US and the same recruiting agency that helped her find employment in that country was working with an agency in Canada, so she got information about the program through that agency.

Some Filipino respondents reveal that they got information about the program from the schools on live-in caregivers which they attended before or upon coming to Canada.<sup>19</sup>

*In my country they offer live-in training. They have lots of centres, training centres for care givers. So that's the first step (a former Filipino live-in child and elder caregiver 3).*

Given that the findings of this study reveal that recruitment agencies and schools for caregivers impact on the migration decision of prospective live-in caregivers, they reflect the role of migrant institutions in structuring their migration decision. As already explained above, the fourth postulate highlights that informal networks are not only triggers of migration and that migrant institutions (defined as institutions that try to control the migration process for their own gain such as, for instance, recruitment agencies) do play a great role in such a process as well (Massey et al., 2005). As we have seen, recruitment agencies and schools for live-in caregivers control the flow of information about the Live-in Caregiver Program to potential migrant live-in caregivers, thus acting as another form of social capital on which they can draw in making their decision. In this way, they complement their structural and individual motivations for migration, making their move more possible.

While the four propositions of network theory of migration prove to be reflected in the experiences of my respondents, the proceeding section will demonstrate that such

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<sup>19</sup> Schools for live-in caregivers are situated either in Canada or abroad and offer training for live-in caregivers who want to work in Canada. For instance, training in one such school in Edmonton, “TLC Edmonton school” that is 7 months long, includes many modules (communication and interpersonal skills, care of the elderly, care of the disabled, care of the children, household management and taking care of a Canadian home, an overview of Canadian politics, geography, history and social structure, to mention just some). The cost of such education is \$5, 600 Can (TLC Edmonton, 2014).

theory is insufficient to fully address migration decision among immigrant live-in caregivers in Canada.

## **5.4 Complementing Network Theory with Intersectionality**

Even though network theory of migration has helped us to a great extent to capture and understand the role of social networks in migration decision of this immigrant group, it does not emphasize the role of gender, race/ethnicity, age and their intersections in impacting such a decision. Complementing migration network theory with an intersectional perspective made me attuned to recognize the unique ways in which these hierarchies of difference and their intersections, which prevail both at macro (socio-economic and political context) and micro level (level of interactions), come to influence whether prospective migrant will come to Canada to work as live-in caregiver. Thus, as it will be demonstrated here, being guided by an intersectional perspective enabled me to explore issues beyond meso level to which migration network theory is limited. In that way, I was able to capture how intersectional influences on a structural, macro level impact on live-in caregivers' personal experiences, thus influencing their individual decision to migrate.

Also, being guided by intersectional perspective and thus being focused on recognizing the difference in migration experiences between people of different genders and race/ethnicity made me realize the importance of socio-political and cultural contexts in understanding migration experiences of immigrant live-in caregivers in Canada. In the following part of this chapter, I show how an intersectionality approach reveals how the

intersectional influences in the labour market of receiving country and in the broader context of transitional countries in which live-in caregivers worked temporarily shape their migration decision. I also show how being guided by an intersectionality approach clarifies how the culture of migration is gendered and that the use of migrant institutions is contextual.

#### **5.4.1 Gender and Racially/Ethnically Segregated Labour Market of Receiving Country Matters**

First, while the network theory of migration emphasizes the importance of informal networks (family and friends) in migration decisions of prospective migrants, it does not direct us to look beyond the level of networks to comprehend how hierarchies of difference and their intersections on a macro and micro level intersect to influence one's decision to migrate. The intersectional perspective emphasizes the importance of these hierarchies of difference and their intersections (both at the micro and macro level) for the experiences of social actors (Acker, 1999; Winker & Dagele, 2011). Indeed, the intersectional approach implies that social actions (micro level) are influenced by social structures (macro level) (Collins, 1990; Winker & Dagele, 2011). Being guided by intersectional perspective, I looked for the intersectional influences on both of these levels. In that way, I was able to realize that one's gender and race/ethnicity intersect to influence the type of network to which one gets connected. This in turn impacts on chances that he/she will migrate to a host country.

Indeed, networks act as the means through which women of certain ethnic origins get information about gender and ethnically segregated domestic labour market in

Canada. The live-in caregivers I interviewed are mostly women who relied on women from their countries who have been already working in Canada as live-in caregivers to supply them the information about the program. As live-in jobs in Canada are predominantly female occupations (in particular, approximately 95 percent of live-in caregivers in Canada and all except two of live-in caregivers in my sample are females), having a tie to women already residing in Canada predisposes these women to migrate as domestic workers. Since domestic labour market in Canada is racially/ethnically segregated as well, being of certain ethnicity (such as Filipino, who represent most of my sample and 90 percent of live-in caregivers in the country as a whole) increases their chances to migrate as live-in caregivers. Thus, the larger socio-economic context of gender and racially/ethnically segregated labour market in the host country has channelled these women into this low-paid occupation. As already mentioned, such occupational segregation of immigrant women of certain races/ethnicities into Canadian domestic labour market has been maintained through stereotyping, "rationalizing allocation of different groups of migrant women, by skin colour and other invidious distinctions, into a racial/ethnic hierarchy within domestic work" (Cohen, 1987, 36-38; as cited in Bakan & Stasiulis, 1995, p.319).

That gender segregation of labour markets in the host country facilitates one's migration to work in a particular job is supported by the results of other studies done in the US context that conclude that gender specific migration is promoted when there is a gender segregated labour market (in this case-domestic work) where potential migrants



can benefit more from migrants of the same gender who supply to them more useful information or contacts (Hagan, 1998; Hondagneu-Sotelo, 1994; Menjivar 2000).

The results of my study also suggest that female live-in caregivers internalize such occupational gender and racial/ethnic segregation into domestic work as natural and thus tend to trust more to co-ethnic women when they are looking for information about the program. For instance, when asked how she found out about live-in caregiver work in Canada, one Slovakian live-in caregiver responds:

*Oh, during the internet on the chat. I phoned one Slovakian lady. She was nanny at this time and we start speaking about this and she gave me first information about Canada and about care giver live in program. I went to the chat and I really was looking for somebody who lives in Canada and especially woman because I thought that woman gave me more information than men for example because woman has different life and because of this I was looking for a woman and I phoned one from Toronto and she gave me every information and she helped me not with papers but advised me a lot about it. She explained me everything, everything well (a former Slovakian live-in child caregiver 16).*

Thus, as exemplified by this quote, this intersection of gender and race/ethnicity in the labour market tends to play out also on micro, interactional level of live-in caregiver's experiences. From an intersectional perspective, gender, race, ethnicity and other hierarchies of difference and their intersections are not predetermined, but are created and re-created in the process of social interactions (Acker, 1999; Collins, 1999; Glenn, 1999; Ridgeway, 1997). Thus, by internalizing such gender and racial/ethnic stereotypes, according to which women of certain racial and ethnic origins are best suited for domestic work, live-in caregivers contribute to and perpetuate such occupational gender and ethnic segregation.

#### **5.4.2 Intersectional Influences in a Broader Context of Transitional Countries**

##### **Impact on How Live-in Caregiver Perceive Previous Migration Experience**

Secondly, even though the focus of network theory on previous migration experiences has proved to aid my understanding of migration decision among live-in caregivers, it does not guide us to examine the role of structural factors of the country in which they have previously worked, including macro intersectional influences in aiding such a process nor the role of role of intersectional influences on a micro-level of their experiences. The intersectional perspective emphasizes that social actions (micro level) are influenced by social structural factors (Winker & Degele, 2011). As it will be demonstrated here, some macro structural factors (i.e.- gender and ethnically segregated domestic labour markets in these transitional countries, characterized by bad working conditions, stricter immigration policies; and intersectional influences of gender, racial/ethnic and age discrimination on the level of society as a whole) of the transitional countries play out on micro level, through live-in caregivers' experiences, thus influencing their decision to leave.

Many of the caregivers I interviewed experienced poor working conditions, low salaries and discriminatory treatment while working in these transitional countries. For instance, reflecting on issue of low wages, one Filipino male respondent explained: "In Saudi they may be rich but the salary there for Filipinos or for the Asian, if you are Filipino, not western, well you just get this kind of salary" (a former Filipino live-in child and elder caregiver 4). They describe these as important factors why they decided to leave and come to Canada.

Low income was not only the reason cited for those who used to work in Asian locations with poor labour law reputations such as Hong-Kong, Taiwan or Saudi Arabia, but also those who worked as care workers in US. For example, the Peruvian respondent who worked as an au pair in the US emphasizes that her wage was too low there, so she decided to take live-in position in Canada that guarantees better salary. Bad treatment by employers is noted as particularly challenging. One Filipino respondent describing the working conditions in Brunei where she used to work states: “It’s hard. They treat differently in Asian compared to American country” (a former Filipino live-in child and elder caregiver 3). While both male and female respondents depict Asian employers as strict people who treat the foreign worker harshly, bad treatment is experienced with a greater degree by women. Thus, as in Canada, race/ethnicity and gender intersect in labour market of these transitional countries to segregate immigrant women into these domestic work jobs in which they face challenging working conditions, including wage discrimination and bad treatment of the employer based on their gender and ethnicity (Kaur, 2007).

Some respondents see the race/ethnicity of the employer as the reason for such a harsh treatment in Asian countries. For instance, explaining why she decided to leave Hong- Kong and Taiwan where she worked as domestic helper and come to Canada, one of my Filipino interviewees claims that:

*We have more freedom in here. I think nicer job because sometimes there is a big difference between white people and the Chinese people. So we can say that but we cannot say that all Chinese is not good. If you have experience of not having a good one so you can say you want to find another more better one. In Hong Kong, I had bad experience with employers. They are not much good. And when I went to Taiwan a little*

*bit good. And when I come here it's very good. [laughs](a former Filipino live-in child caregiver 11).*

While she is fast to caution that one should not generalize on the basis of few cases, she still engages in labelling of White employers as good and Chinese employers as bad. This finding has been confirmed by other studies (e.g., Hondagneu-Sotelo, 2001) that find that it is not only employers who attach certain racial stereotypes to their domestic workers, but domestic workers themselves often do the same, categorizing the employers as good or bad depending on their race.

While the structural arrangement of Asian labour markets that are stratified according to race and gender certainly impacts on the working experiences of prospective live-in caregivers in transitional countries and in turn their decision to leave, there are also some other structural factors at work that shape their experiences on micro-level. In particular, my study shows that restrictive immigration policies of these countries do not allow them a chance to become permanent residents after their contracts are over and bring their families; this impacted on their decision to leave and choose Canada as their destination. In Taiwan, for instance, as one of the Filipino respondents who worked there as domestic reveals, the program only allows a contract worker to stay for nine years, without the possibility of gaining permanent status (a current Filipino live-in child caregiver 5). In a similar vein, one Filipino respondent who went to upgrade her skills as a social welfare assistant and had been placed in a nursing home in London recalls that given that her status was unstable after her student visa expired, she decided to apply to Canada as live-in caregiver. She decided so given that she was aware that under Live-in

Caregiver Program “after you finish for 24 months you are qualified to apply for PR”. In London, she explains, it would take time and she wasn’t sure about the future. She adds:

*And another reason also I left London I wanted that my family will come and stay with me. So maybe in London well I have a chance but it’s only temporary. So I decided to come here in Canada because I know some day my family will follow me here” (a current Filipino live-in child caregiver 6).*

Furthermore, my study shows that gender oppressive context of some countries is a very important factor in their decision to leave these other countries and come to Canada. Bad treatment of women in some Asian countries in which they have worked temporarily such as Saudi Arabia and Taiwan made some of my female respondents want to leave these countries. In Saudi Arabia, for instance, as outlined in the report by Human Rights Watch “women are treated like legal minors who have no authority over their lives or their children” (Black, 2008). Every Saudi woman is required to have a male guardian, usually a father or a husband, who is responsible for making a range of critical decisions for her (Black, 2008). Saudi women are not allowed to make even trivial decisions for their children and to travel with them without permission from the child's father (Black, 2008). Given that gender oppression is structural, permeating society as a whole, it is reasonable that female domestic workers are also affected by it, through their daily interactions with employers. The following quote of one Filipino female respondent who used to work in Saudi Arabia demonstrates that in that country female, foreign domestic workers are considered second class both by employers and society as a whole:

*Ah, this is why I like in Canada. From Philippines to immigrate to Saudi Arabia it’s not good because they treat you like, they do not respect you. They didn’t respect you. Women [are] second class there in Saudi Arabia.*

*Even your occupation they didn't treat you well. There is no respect at all in, you know. It's not good. It's different. But here in Canada I see the difference when I come here. They respect you. They even tell you 'Welcome to Canada.' This is what I like. You know what? You are new here in the territory. So in immigration here they said 'Welcome to Canada. I hope you like it.' You know, in my mind I say 'Oh my! This is home. This is home. This is what I like.' Saudi Arabia is very strict country as I said, very strict country and I decided for my children, the future of my children (a former Filipino live-in elder caregiver 22).*

Such treatment of women as second class on the level of society as a whole may explain the greater dissatisfaction among women than men in my sample regarding the treatment they received from the employers in these countries. Thus, hierarchies of gender and race/ethnicity intersect to predispose these women to bad treatment in Asian countries. This is further complicated with hierarchies of age. As the following quote of a Filipino woman who used to work as domestic helper in Taiwan demonstrates, in some Asian countries, such as Taiwan, gender intersects with age in structuring migration decisions for prospective live-in caregivers who work there:

*Because, you know, if you are in Asia once you are already old, like for example you are already 50 years old and above, after that you are not comfortable of going out already in the country because you are old. [laughs] We have age bracket that if you reach 50 or 50 and above you are not allowed to go out already in the country. From other countries especially for us women. Yeah, for men I think it's still allowed until 50-something. But for women most of the women not going out already to the country if they are 50 or 50 and above. In other words in Asia there is an age discrimination that if you reach 50 you are at the side already and not working any more. The agency will not accept you anymore. You are over age [laughs] (a current Filipino live-in child caregiver 8).*

Thus, while one's decision to migrate is certainly impacted by previous migration experience, such migration experience cannot be adequately explained without taking into consideration hierarchies of gender, age and race/ethnicity and their intersections. It is evident that whether one will decide to migrate again is influenced not only by ties one

forged during his/her previous migration experience, but also by other structural factors, including the intersections of gender, race/ethnicity and age in broader, contextual context of transitional country. These in turn have an impact on how one perceives his/her first migration experience. This is an important consideration not emphasized by network theory of migration and in particular its second proposition that emphasizes the importance of past migration experiences and social capital accumulated therein for future migration endeavours.

#### **5.4.3 Culture of Migration is Gendered**

My study has provided support for the important role of a culture of migration in migration decisions as predicted by network theory. An intersectional perspective guided me to look for influences of axes of difference on attitudes toward migration in the different countries from which my respondents came. While most of my respondents came from countries in which migration is common and as such supported by society, the culture of migration is often gendered, favouring or discouraging the migration of people of certain gender. This consideration is neglected by network theory of migration<sup>20</sup>.

Directed by an intersectional approach to look for differences between cultural gender expectations for migration of people of different ethnicities, I came to realize that gender expectations related to migration are often contextual, varying from one country to

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<sup>20</sup> It is interesting to note that in 2006, in their study in which they rely on census data, Massey, Fischer and Capoferro find that female householders in the two patriarchal settings (Mexico and Costa Rica) demonstrated low rates of out-migration compared with males, while in the two matrifocal countries (Nicaragua and the Dominican Republic) the ratio of female to male migration turned out to be much higher, “in some case exceeding their male counterparts” (p.63). On the basis of that, they conclude that “gender does matter in international migration” (p.76). Still, in any of their comprehensive overviews of network theory of migration (1993, 2005), Massey et al. do not devote any attention to the issue of gender.

another. Even though all of my Filipino respondents reveal that they were encouraged by their families to migrate, males were more independent in making such decision. While male respondents emphasize that they made such decision by themselves for the sake of family, Filipino female respondents reveal that their decision was a more collective, family decision. In particular, they explain that they consulted beforehand with their children about the decision to migrate and that they were encouraged by them to go given that they struggled financially and thus were unable to provide for their children's education. For instance, commenting on how her children who were attending university at the time aided her decision to migrate, one Filipino respondent explains:

*No. This is my family decision and me. Me and my husband, me and my children. When I told them I was going to Canada because... I did not, uh, I did not when I was there in my hospital in Saudi Arabia so I just sent a resignation because when I go home in the Philippines, I went home, we talked about this kind of if I will come here or not but they told me 'Mom, that is for our future. Go to Canada.' I told myself what happens, happens I will come to Canada. So this is it. So I decided to come for my children, for my family (a former Filipino live-in elder caregiver 22).*

This quote exemplifies the sense of responsibility prescribed by norms put on women in Filipino society. They assume financial responsibility and as such are expected to migrate and provide for the family from afar, while men stay home and take care of children (Oishi, 2002). The respondent's children from the quote above clearly internalized these norms which lead them to encourage their mother to migrate to Canada.

In addition, Filipino respondents stress the importance of remittances they send for the survival of their families at home. Filipino female respondents reveal that in their country, people who migrate to work abroad are often called heroes. Some of them note that Filipino women migrate more frequently than Filipino men, so a term *heroine* is



more appropriate for that context. Elaborating on the Filipino attitude toward migrant workers, one female respondent from that country states:

*Oh in the Philippines they call us heroes because we contributed lots to our government especially through remittances. If we send money, remittances because we pay taxes, we paid the dollar that we send to the Philippines it helps a lot. And we pay our OEC [overseas employment certificate] that we get, from the POEA. We need to pay that because we cannot come out from the Philippines unless we pay those fees from the government. They give us clearance in exchange from that amount. [laughs] a current Filipino live-in child caregiver 8).*

Underlining the importance of remittances for Filipino economy, another Filipino female live-in caregiver says:

*People in my country like when you migrate because that way you can send your nephews and nieces or brothers and sisters so they can build nice houses because of the money that you send to the Philippines” (a former live-in child and elder caregiver 2).*

This quote reflects the responsibility put on women in Philippines to provide not only for her immediate, but also extended family members as discussed in the literature (Oishi, 2002). As we have seen in the above quotes, remittances have an important impact on the attitude of people in the Philippines toward migrant workers. This finding is not surprising if we take into consideration that this country is greatly dependent on the money Filipinos who work abroad send home. As already mentioned in the earlier section of the thesis, Filipina domestic workers provide significant funds in terms of remittances. As women seem to send more money to their families at home than men who have better wages, women are encouraged to migrate (Alcid, 2005; Chang, 2000). Thus, while migration network theory is right in its claim that some countries develop and maintain a culture of migration which propels migration decisions, it fails to emphasize that culture

of migration is often gendered, favouring or discouraging the migration of people of certain gender.

My study suggests that remittances are also very important for live-in caregivers from other countries, and that they impact the way in which people in these countries tend to see live-in caregivers. For example, a Kenyan caregiver explains that people have a positive attitude toward migrant workers. Further explaining why that is the case, she says:

*Our country is a small country and very highly populated. Economically you're not very well up. So when we get to earn some money abroad and we put them back home they are happy (a Kenyan current live-in child and elder caregiver 26).*

While Filipina domestic workers I interviewed state that their migration to Canada is strongly encouraged by their society and families, this is not the case with female live-in caregivers of other ethnicities in my sample. For instance, one Chinese female respondent explains that family members opposed her decision to migrate:

*No my family do[es]n't agree that I come here because my sister, my mom don't want me to come Canada all by myself but I think it's okay for me. It's fine because I have no children, no family in China. Before I came here my mom passed away. So I think I can come here. Even my sister doesn't agree but I think yeah, I will come here (a current Chinese live-in child caregiver 13).*

The opposition of family members to migration for this Chinese woman can be explained by Chinese gender ideology that assigns to women a primary responsibility for housework, including looking after the children and particularly the elderly (Wan, 1995). Thus, this Chinese woman was precluded from migration by these gender expectations until her mother died and she no longer had responsibility to take care of her.

As it was mentioned above, in Filipino culture, Filipinas who go abroad to work as live-in caregivers are often depicted as “heroines” due to the financial help they provide to their country through remittances. In contrast, an Indian female respondent feels a need to be silent about her job as live-in caregiver in Canada due to stigma that her culture attaches to such an occupation. Reflecting on the issue of attitudes of Indian people towards migration and migrant workers, this respondent explains that her friends considered her “foolish” given that she already had a good job. She maintains that her friends from India would never accept a live-in caregiver job as they would think “it’s very degrading”. Commenting further on that, she adds:

*So I have not even told so many people what I am doing here. Because what I am doing is for my own need and just to keep my status here until I get an immigrant status. I am just doing it for myself. I don’t need to tell anybody. I told them I am working full time. That’s all they need to know (a former Indian live-in child caregiver 31).*

Even though this Indian woman decided to migrate as a live-in caregiver despite negative societal attitudes towards domestic work in her country of origin, we can certainly assume that many women do not do the same.

Hence, by relying on intersectional perspective, we are guided to look for differences between intersectional influences in the processes of migration decision making among live-in caregivers of different ethnic origins. In this way, we come to realize that gendered societal attitudes toward migration and occupation of domestic work vary culturally (by country of origin). Hence, instead of assuming that all people from country in which migration is common and part of community values will be more likely

to migrate, one should consider role of cultural, gender related migration and occupation attitudes in that country in aiding or constraining one's decision to migrate.

#### **5.4.4 Use of Migrant Institutions in Making Migration Decision is Contextual**

The role of migrant institutions (recruitment agencies and schools for live-in caregivers) in shaping live-in caregivers' decision to migrate, emphasized by network theory, is evident in the experiences of my participants. By relying on an intersectionality approach to note differences in migration experiences between live-in caregivers of different ethnicities, one can see that recruitment agencies and schools for live-in caregivers target some countries more than others. As this study has shown, recruitment agencies serve as a source of information about the program for Filipinos more than people of other ethnicities. The interviews with live-in caregivers from that country reveal that these agencies advertise their services in newspapers, magazines or radio stations in Philippines and Asian countries in which many of these Filipino live-in caregivers work before they come to Canada. In their advertisements, these agencies tend to emphasize the benefits of working as a live-in caregiver in Canada over working as domestic helper in some Asian countries. As one respondent recalls it:

*When I was in Taiwan I was working in the home, nursing in the hospital so every Sunday we have a radio, English station. It is being aired only every Sunday. So we are six Filipinos there so every Sunday we used to listen from that station. And then that station they are having a promotion that who wants to apply for Canada. This is the agency that you can contact. That way, I hear so many beautiful things about live in care giver, that being a live in care giver it's good because you will receive a good and high salary. [laughs] And every Saturday and Sunday you will have a day off as I do not have in Asia. Yeah, you would be working for*

*only eight hours a day. Those are the things that I hear before I apply (a current Filipino live-in elder and child caregiver 32).*

That recruitment agencies as a source of information on the LCP are used more by Filipino respondents than respondents of other ethnicities can be attributed to the fact that in this country, as in other countries of Asian Pacific, labour migration is highly institutionalized (in accordance with government policy which supports and encourages it) and migration industry is well developed. That is reflected in the large number of agencies in that country. As already mentioned in the literature review section of this thesis, there are a great number of private government-licensed recruitment and manning agencies in the Philippines (and an unknown number of unlicensed ones) that match workers with foreign employers (Asis, 2006). As we have seen, unlike respondents of other ethnicities in my sample, Filipino respondents reveal that schools for live-in caregivers acted as their source of information about Live-in Caregiver Program.

Thus, while network theory is right in claiming that migrant institutions act as structural components to migrant networks, this theory should note that the how much one will rely on certain migrant institution in making his/her decision to migrate depends on how much these institutions are available in his country of origin. Thus, use of migrant institutions in making migration decision is contextual and depends on how much state's political system supports labour migration, which is not acknowledged by network theory of migration.

## 5.5 Summary and Conclusion

In sum, this chapter brings important insights on migration decision of immigrant live-in caregivers in Canada. As it has been shown above, migration decisions among immigrant live-in caregivers is triggered primarily by work/economic factors such as lack of job opportunities and bad financial situation in their countries of origin. As we have seen, this is the case for most of the participants, regardless of their home country. These data also show that often economic/work related reasons for migration combine with those non-economic (such as, for instance, desire for exploration of different geographical spaces or opportunity for learning a new culture) to initiate live-in caregiver's desire to migrate. Very few live-in caregivers decide to migrate for non-economic reasons alone, such as for instance, health concerns from air pollution or desire for adventure.

My study has also revealed that institutional programs such as the Live-in Caregiver Program and favourable labour laws create particular opportunities for migration that seem very attractive to prospective live-in caregivers. As such, they represent an important motive for migration. Whatever the initial trigger for migration, social networks (both formal and informal) has been shown to be crucial in migration decision making for this group of immigrants as they provide a flow of information about the possibility of undertaking this kind of work in Canada and unique Live-in Caregiver Program to prospective live-in caregivers. As we have seen, social networks (both informal such as family and friends and more formal such as recruitment agencies) in Canada, in transitional countries in which they temporarily worked before coming to

Canada and in their home countries all prove to be very important factors in their decision to come.

My research has also shown that the process of decision making differs between Filipino and live-in caregivers of other ethnicities. While it seems that in the Philippines there are positive attitudes towards female migration and towards women who migrate as domestic workers, this is not case in some other countries such as India or China.

Moreover, recruitment agencies and schools for live-in caregivers also seem to play more significant role in the process of decision making among Filipino respondents than live-in caregivers of other ethnicities. This is due to the fact that in Asia labour migration is highly institutionalized and supported by governments of many countries.

My study lends support for all four propositions of the network theory of migration. As we have seen, as proposed by this theory, migration decisions among this group of migrants are often helped by: 1) family and friends who are already in Canada and often are employed as live-in caregivers and provide them with relevant information about the program and their experiences with them; 2) previous migration experience, in the course of which they forge relevant ties that prove to be important in their later migration to Canada; 3) positive attitudes toward migration in their countries of origin; and 4) migrant institutions (i.e.-recruitment agencies and schools for live-in caregivers) which supply them with the information about requirements for live-in caregiver work in Canada. Clearly, network theory of migration has aided our exploration of the process of migration decision making among the LCP workers in Canada.

Still, as demonstrated above, network theory of migration is insufficient to fully account for the migration decision of live-in caregivers as it does not guide us to take into consideration the role of *gender*, *race/ethnicity*, *age* and their intersections in impacting such a decision. As my study has demonstrated, to make up for such limits of this theoretical approach, one should couple it with intersectional approach which puts emphasis on these hierarchies of difference and their intersections. By complementing network theory of migration with intersectional perspective, we are able to see beyond meso level of networks to understand how intersectional influences on a structural, macro level impact on their personal experiences, thus influencing their individual decision to migrate. In addition, intersectional perspective directs us to search for the differences in migration experiences between people of different gender and race/ethnicity. This in turn makes us realize the importance of socio-political and cultural context in understanding migration experiences of immigrant live-in caregivers in Canada.

The next chapter will focus on the processes of migration and finding a job among immigrant live-in caregivers in Canada.



## **Chapter 6**

# **The Role of Social Networks in the Process of Migration and Finding a Job as an Immigrant Live-in Caregiver in Ontario, Canada**

### **6.1 Introduction**

Not only has the process of migration decision making among immigrant live-in caregivers in Canada been left relatively unexplored by previous studies, so too have the processes of their migration and finding a job. The purpose of this chapter is to examine the processes of immigrant live-in caregivers' migration and finding a job in Ontario, Canada with a particular focus on the role of social networks in these processes. As the overview of the literature has demonstrated, the past research has shown that it is either a recruitment agency or relatives or friends who help prospective live-in caregivers to come and find a job in Canada (Cameron, 1999; DeVan, 1989; Grandea, 1996; Mikita 1994; Zaman, 2006). In some cases, relatives decide to directly sponsor live-in caregivers (Cameron, 1999) or they help them financially by covering their migration costs (Alcuitas et al, 1997). Given that the role of networks in migration and finding a job has been explored largely through research examining experiences of *Filipino* live-in caregivers, there is need of more research that examines the role of networks in these processes with regards to other ethnic groups.

Even though we possess some (though limited) knowledge on the role of both informal networks (family and friends) and more formal networks (such as recruitment agencies) in live-in caregivers' migration and finding a job, we know even less about their experiences with these different sources of support. Indeed, there is some evidence that LCP workers have had negative experiences with recruitment agencies due to their high cost and unethical and questionable practices (Alcuitas et al, 1997; Cameron, 1999; Standing Committee on Citizenship and Immigration Canada, 2009). It seems that finding a job through family and friends has its disadvantages as well since live-in caregivers may feel compelled to migrate through LCP, even though they do not wish to do so (Torres et al., 2012).

We also do not know about the factors that determine the type of care which live-in caregivers end up providing. In addition, previous literature has not explored their previous migration experiences to other countries and how they compare to their migration to Canada. This is significant gap given that many of foreign live-in caregivers tend to work in some other country before migrating to Canada.

Past research on the process of migration of immigrant live-in caregivers and their search for a job is not only empirically, but also theoretically incomplete. In particular, some of the above cited studies do not rely on any sociological perspectives. Those of them that do (e.g. - Cameron, 1999; Mikita, 1994) do not use these perspectives in conjunction with the network theory of migration even though this theory has been successfully used in exploring the migration experiences of other immigrant groups (Massey et al. 1987; Massey & España, 1987; Massey & Espinosa, 1997). Thus, in this

chapter I fill in these research gaps. In particular, I explore the role of informal social networks (family and friends) and more formal networks such as recruitment agencies, schools for live-in caregivers and Canadian embassies in different countries in arranging the job; advantages and disadvantages of these two routes of locating employment as seen from immigrant live-in caregivers' perspective; a role of their background (education), previous working experience and type of network on which they rely in determining the type of care in which they end up; and how their previous migration experiences compare with migration to Canada. In examining two of these issues, I rely on the network theory of migration.

As already mentioned in the theoretical section of this thesis, this theory highlights that in addition to financial and human capital (education, skills, experience), *social capital* is another crucial resource in enabling people to migrate (Massey, 1990 as cited in de Haas, 2007). Indeed, once someone in a personal network has migrated, ties become transformed into a resource that can be used to access foreign employment and the benefits it brings such as high wages, and possibility of accumulating savings and sending remittances (Massey et al., 2005). According to this theory, it is not only informal networks that help their process of migration, but also more formal networks termed *migrant institutions* such as recruitment agencies and others that are established with aim of facilitating the process of one's migration to a new country.

Based on the claims of this theory, it is reasonable to assume that: 1) both informal networks of family and friends and more formal networks (such as recruitment agencies and some others) have a role to play in facilitating their migration and finding a

job; and 2) besides human capital (education, skills, knowledge) social networks in which social capital is embodied determine the type of care a prospective live-in caregiver will end up. Hence, in this chapter, I explore how these two assumptions are reflected in the experiences of immigrant live-in caregivers. While such assumptions are supported by the experiences shared by participants in my research, on the basis of my findings I argue that the network theory of migration is insufficient in fully explicating these processes. Even though network theory helps us to understand the role of social networks (both formal and informal) in the processes of migration and finding a job of live-in caregivers in Canada it does not lead us to examine the role of *gender, race/ethnicity, age* and their intersections in these processes. I conclude that to compensate for such shortcomings we should combine it with an intersectionality perspective which highlights these cross-cutting hierarchies of difference.

I begin the chapter by outlining the findings with regards to the two assumptions of the social network theory I have explored. These findings reveal the important role of social networks (both formal and informal) in migration and finding a job as live-in caregivers in Canada, including the type of care they end up providing. I also highlight the advantages and disadvantages of recruitment agencies and informal networks. Next, I discuss how live-in caregivers' migration to Canada compares to migration to other countries in which they temporarily worked and outline respondents' recommendations on how the process of migration for LCP workers could be changed. I finish the chapter by summarizing my empirical and theoretical findings.

## **6.2 The Role of Networks in the Migration and Finding a Job as Live-in Caregiver in Canada**

The first assumption of network theory of migration on which I relied in my exploration of the role of social networks in the processes of migration and finding a job has been supported by participants' experiences. In particular, the interviews reveal that migration of immigrant live-in caregivers and their search for a job has been aided by formal networks (i.e., recruitment agencies and schools for live-in caregivers) as well as by informal networks of family and friends. The reliance on informal and formal networks in their migration and finding a job in Canada is characteristic of all respondents, regardless of their country of origin.

### **6.2.1 The Role of the Recruitment Agencies in the Migration and Recruitment of Live-in Caregivers**

As suggested by the network theory of migration, *migrant institutions* such as recruitment agencies and schools for live-in caregivers do play an important role in the migration of live-in caregivers in Canada.

Most of the respondents I interviewed in my study relied on a recruitment agency to come to and find a job as live-in caregiver in Canada. Some of them report that they decided to use a specific agency on the recommendation of a friend or relative.

*...That agency was being referred to me by a friend who went into the agency ahead of me and then she is a high school friend of mine. And she went to Hong Kong also ahead of me. Like we just met in Hong Kong and then she said 'I am almost leaving to Canada' and I said 'Oh really. Oh wow!' And she said ... Why don't you come into the hotel because she is going to be interviewing applicants in there?' So I went to the hotel and*

*she was there and I registered and we are being set up (a former Filipino live-in child caregiver 10).*

Many of the LCP workers explain that the agency on which they relied in their migration and finding a job had two branches – one in Canada responsible to find them employers and one in country from which they applied which helped them with processing the papers.

The respondents describe recruitment agencies as beneficial in many ways. First, they find that recruitment agencies were very helpful “as you can find the employer more easily and faster than if you are going to find by yourself” (a former Filipino live-in child and elder caregiver 30). Not only an agency helps them find an employer, they note, but also ensure a proper employer by doing background check on prospective employers and selecting good ones. Reflecting on this advantage of finding an employer with a help of an agency, one respondent notes:

*There are pros and cons in my opinion because what if, uh, the employer who is sponsoring me doesn't have decent job or how would I know that these are genuine people? How would I know that they are not killer? How would I know that I am safe with them? If I have an agency or if I went through an agency then at least the agency have taken care knowing who the prospect employers would be. I feel safer that way with agency (a former Filipino live-in elder caregiver 17).*

Another advantage of using recruitment agencies over other routes of employment most commonly noted by live-in caregivers I interviewed is that they take care of paperwork. As they know “ins and outs of Live-in Caregiver policy” (a former Filipino live-in elder caregiver 4), they notify prospective live-in caregivers about the required papers and process these, thus simplifying and fastening the process of processing the application for them. Taking care of paperwork was especially beneficial for those who

have already worked as domestic helpers in other countries when they applied given that they worked long hours and could not afford to take time off to go to embassy to submit the requested papers.

*Well the advantages is I myself when I was in Hong Kong I was very busy. I don't have time of processing my papers, right? The advantage there is they will be the ones who do your papers and you just wait... I just filled out the form and then passed it to them all the documents and then the agency was the one who process it, went to the Canadian immigration. They do all the processing (a current Filipino live-in child caregiver 7).*

The third advantage of relying on agencies noted by respondents is the safety that they guarantee. Letting live-in caregivers know their rights as workers under the Live-in Caregiver Program and offering them advice and help in the case that they face some problems in their work (such as abuse, for instance) were noted by respondents as important reasons for using recruiting agencies. One Kenyan respondent claims that the “agency fights for caregivers” and thus, employers are less likely to take an advantage of live-in caregivers if they have agency behind their back (a current Kenyan live-in elder caregiver 26). Another respondent reveals that it is good to have an agency because:

*Like for example if something happened to your application you have somebody to go back, if you want to take back your money then you have the agency. You can go to the agency and say okay, I will take back my money because something wrong with my papers or something wrong with the agency. Not like if you go through direct hiring you do not know the person. You would just send the money through Western Union. You do not know that person. That person disappears. Your money also disappears (a current Filipino live-in child caregiver 8).*

Agencies, some of them note, function as safety valves for both the employer and the employee because they are responsible for making sure that both employers and employees are notified about conditions and changes in the Live-in Caregiver Program.

Also, as one of the respondents has put it, “if the agencies are in the middle they can scrutinize the applicant as well as they can scrutinize the employer” (a former Filipino live-in elder caregiver 17).

Agencies have been also described as advantageous to those who did not have good English language skills upon their arrival to Canada. As one Slovakian respondent who was matched by agency with one Slovakian family due to her language issues puts it:

*This advantage [of coming through an agency] is that you can find job sometimes faster than through the internet and if you have problem with language because through the phone it's very complicated speak with somebody. It's better through the agency. If you speak very good English and have experiences from England I think it's better from internet. If you have experience from other countries. But I didn't have experience (a former Slovakian live-in child caregiver 16).*

While the recruitment agencies have been described as advantageous in many ways, they were also seen as even more disadvantageous than informal networks by interviewed live-in caregivers. First, they reveal that recruitment agencies are very expensive as they had to pay between \$500 and \$5000 for their services. For instance, one of my respondents notes that is unfair that “recruitment agencies charge you according to the features - if you are single, if you are married, if you have kids, how old you are, if you have an international driver license”. She explains that she paid \$1500 as she was young and single, while her friend paid \$1300 as she was married and had kids. She concludes that even her friend paid less, that's still “a lot of money” for somebody who has to support family and that it “needs to change” as it restricts the economically disadvantaged to migrate.



In April 2010, a new rule was introduced into the Live-in Caregiver Program according to which any fees charged by recruitment agencies for bringing live-in caregiver to Canada should be charged to the employer, not to live-in caregiver as it has previously been the case. In spite of such a change, two live-in caregivers who came after this new rule was established were asked to pay agency fees. One of these two, a current Peruvian live-in caregiver was not aware of such changes when she started the process. As one agency offered her to pay an affordable cost of \$650 to help her to come, she agreed to pay them that amount. The other one of the two, a former Filipino live-in caregiver states that despite these new regulations, recruitment agencies are still charging live-in caregivers instead of employers to help them come to Canada.

*...Now they're not allowing to collect money as a fee but of course they cannot really tell it. Agencies are just collecting really big money from us. That's why they like overseas. They like getting other money from other countries because they can get really big money compared to Canada. So just like I paid three thousand five hundred in Asia so it's really big (a former Filipino live-in child and elder caregiver 30).*

Some respondents also reveal that recruitment agencies forget about live-in caregivers once they take money from them and are not willing to inform them on what they are supposed to do once they come. This can exacerbate the trauma of migration to a new country and homesickness endured by live-in caregiver. Arguing that his agency did not provide him with any directions on how to arrive to employer's place from the airport, one respondent says:

*Well depending on the recruitment agency, if the recruitment agency is helpful, cooperative, you know, or caring for the applicants that would be very helpful and, you know, that will minimize the trauma and the homesickness of the care giver or the applicant. But, you know, there are a lot of agencies I heard that are not doing this kind of thing. Once the*

*care giver arrives it's up to you, you know. You go on your own. And my employer was from... I mean they are not from Toronto and it takes 45 minutes to go to their place and it's the countryside. You have to drive. There's no bus going directly to their place, you know. The closest neighbour is around 500 metres away. The nearest store would be like a kilometre away. So, you know, when I arrived there I was looking for... I thought of my phone. I didn't know whom to call. It's really hard for me. During the first days I was crying (a former Filipino live-in elder caregiver 4).*

Agencies often do not help live-in caregivers when they face problems with their employers. In fact, some of them report that they did not stay in touch with agencies after they assisted them in finding an employment. One respondent claims that she phoned her agency which brought her to Canada when she encountered a problem with an employer to ask them about her rights, but nobody answered her call, since the agency was shut down (a Filipino live-in child caregiver 5).

Another disadvantage of using recruitment agencies as revealed by our respondents is that agencies care only about profit. Thus, it often happens that agencies do not ensure that working conditions stipulated in job contracts are respected by the employer or do not find an employer for them. As one of the respondents puts it :

*So these poor aspiring caregivers when they come here do not have relatives here. Sometimes they have to stay in the house of the agencies and what I heard they have to work and help there without being paid and it took them months, a few months before they can find another employer. So that's always the case. They are like a milking cow. They have to pay that amount with a promise but when they come here it's not what is promised. It's not what is said to them. It's not what is stipulated in their contract when they come over here. So they have to come here and they have to grope in the dark and they have to run around and look for another employer because that employer that is stated in their contract was either ghost, if I could say that, non-existent or it could be existent but does not want them. So that's always the case (a current Filipino live-in elder caregiver 19).*

This respondent adds that sometimes agencies are not truthful about the number of clients for whom prospective live-in caregiver will be responsible for.

*But there are also agents that the agency who hired them from overseas really have the kind of employment but it is always as I knew from friends, close friends of mine, what they say there, for example they say there are only three kids but when they get there, there are actually four kids. Like three kids plus a baby or three kids plus two dogs or three kids plus two dogs and three cats. [laughs] Yeah, that's always the case. And the jobs are from this time of the day until like eight o'clock, until seven o'clock in the evening but it's actually like six o'clock or seven o'clock until nine o'clock at night. So those are the disadvantages.*

One respondent who was directly hired by the employer feels that this route of employment is advantageous compared to the agency since the live-in caregiver has more control.

*... You're in more control if you're not with an agency as you negotiate with the employer before the employment and if you have any questions you don't have to go through the agency to know your answer (a current Singaporean live-in child caregiver 19).*

### **6.2.2 The Role of Schools for Live-in Caregivers**

The migration of some immigrant live-in caregivers was also aided by schools for live-in caregivers that they attended either in their home countries, other countries in which they worked temporarily or in Canada. These schools not only provided them with the education required for live-in caregiver work in Canada, but also information on how and where to apply. One live-in caregiver from Singapore, for instance, got advice from her instructor in “Training for Live-in Caregiver School in Edmonton” to apply to

Canadian consulate in Seattle in order to get the temporary working visa as live-in caregiver in the fastest possible way.

*It's just a school ... in a house that is specialized in giving training for live-in caregivers that includes childcare, elderly and disabled people... Yeah [consulate in Seattle] they are actually very efficient and very fast. Because... well that's what I heard because my school, my training school they have a lot of... they actually trained a lot of caregivers before and so they have a lot of experience dealing with immigration (a current Singaporean live-in child caregiver).*

### **6.2.3 The Role of Canadian Embassies and Employers in the Migration Experiences of Immigrant Live-in Caregivers**

The interviews also reveal that some other formal networks and agents that do not exactly fit the definition of *migrant institutions* as specified by network theory of migration have an important role in the process of migration and finding a job. These are Canadian embassies and consulates in other countries and employers either in Canada or other countries in which live-in caregivers worked temporarily.

While Canadian embassies and consulates do play a role in migration of live-in caregivers in Canada, their role is restricted to interviewing immigrant live-in caregivers and collecting the required documents for processing their applications. The interviews reveal that embassies rarely supply information about the migration process to immigrant live-in caregivers. The respondents mostly had positive experience with interviews. They report that interviews usually took between five and fifteen minutes where they have been asked about their working experiences and their ability to undertake a job (childcare or eldercare) for which they were applying. For instance, they were asked how to take blood

pressure or how they would handle certain situations (such as emergency) in their jobs. Some report that they felt nervous and describe the interview as challenging as “sometimes even you just tell them everything, even your education is good there’s a chance you have been refused” (a former Filipino live-in child caregiver 9). They also recall seeing “how other people failed and were crying when they came out the booth” (a current Filipino live-in child caregiver 7).

Few had negative experience with the interview due to their poor English language skills. One Polish live-in caregiver explains that she was asked to read medicine instructions at her interview and that she did not make it the first time because of her English. She managed to do it next time, after she improved her language skills.

Few of the respondents did not have a formal interview in the embassy, but they have been only interviewed briefly by a Canadian Border Services Officer officer upon arrival in Canada.

Few report that they were financially or otherwise assisted by their Canadian employer or employer from some other country in which they worked temporarily before coming to Canada. They explain that their employer covered part or the whole amount of processing fees and air fare or simply helped them with collecting the required papers.

*My employer [in Canada] paid for that. My employer paid for processing fee, for me to buy the ticket. Everything she paid (a former Filipino live-in child and elder caregiver 3).*

*But actually the families I worked with in the Netherlands and the United States especially in the Netherlands they helped me to do a few papers there because I had to do those papers in the Netherlands and because I was in Peru I didn’t know how to do those papers being far away from that country. So the people there helped me to do this (a current Peruvian live-in child caregiver 27).*

#### **6.2.4 The Role of Informal Networks in the Migration and Employment of Live-in Caregivers**

Some of the interviewed live-in caregivers relied on informal ties to find their live-in caregiver position in Canada. Few were contacted by their relative or friends with a job offer for live in position.

*...I have actually my childhood friend or my best friend. Like we grew up together in the same province. We were friends since we were young like eight or nine years old She got married and then had a baby so she can't work live in already and that's when they decided to sponsor me (a former Filipino live-in elder caregiver 17).*

Few of them got employed by their relatives. While personal networks were used less for finding their employment, live-in caregivers I interviewed relied extensively on family and friends to help them cover the costs of migration (i.e., application, placement fees, air fare and any other required fees). The respondents report some good and bad sides of reliance on informal networks of family and friends to find live-in caregiver position in Canada.

In terms of advantages, many of them note that by relying on family and friends, prospective live-in caregivers can avoid paying relatively substantial fees required by recruiting agencies. This finding echoes the results of study conducted by Torres et al. (2012). Another advantage they highlight is that unlike agencies, family and friends care about them and thus, tend to find “a nice employer who pays good” (a former Filipino live-in child caregiver 9). They also report that since family and friends ensure that they really find an employer, they cannot be tricked as it is often the case with agencies. In addition, when they find the employer through friends they get more respect. As one respondent puts it:

*An advantage would be maybe because you've come through a friend the employer understands you. You get more respect. ...At least the employer knows you well. Like you get to meet them face to face before you actually join the work. And that was in the case of my employers. I met them many, many times before I actually joined them. So I feel you just get a little more respect that way (a former Indian live-in child caregiver 31).*

Despite these advantages of finding a live-in job through family and friends, interviewees reveal that this route of employment has certain disadvantages. First, they emphasize that when one relies on a friend or relative to find a job, it is hard to complain or leave a job after if the job turns out to be unsatisfying. Reflecting on that, one respondent warns:

*Just be very, very careful because I find it better to go through agency because sometimes when you go through friends then you realize it's not what you were looking for and then it's harder for you to say later on 'No' that you don't agree with all of the agreements that you made. I don't know, I found it better to go through the agency. Then it's correct. Both sides are very correct. It's just my opinion. I don't know. I found it a little bit tricky to go with friends. Sometimes it can be helpful but sometimes you can get stuck with some things that you cannot change after all (a former Slovakian live-in child caregiver 15).*

The second disadvantage of this route of employment is that after the relatives and friends help live-in caregiver to find a job, there can be an expectation of something in return—either financially or in some other way. For instance, one live-in caregiver reveals that she had to pay \$2500 to her relative to find her job in Canada. Another live-in caregiver explains how her aunt asked for money from her as a payment for finding her an employer. When she refused to pay, her aunt called her employer, telling him bad things about her. Another respondent stated that she would rather pay 3000 dollars to come to Canada to avoid feeling of owing to somebody throughout the rest of the life:

*Nobody will tell me in the future 'Oh you're now here in Canada if not because of us. You're not who you are right now if not because of us so*

*you need to be under our whatever.’ Like they want to hold you. Like they want to direct your life here in Canada because they’re the one who give you the favour, who like set up for you to come over. That’s the thing that I don’t like for a relative to have. [laughs] Most relatives do that (a former Filipino live-in child caregiver 10).*

Some who have been directly employed by friends and family, report that they have been taken advantage by them. Commenting on that, one Polish live-in caregiver who has been brought by her distant relatives to work for them and paid only 100 dollars per month, states:

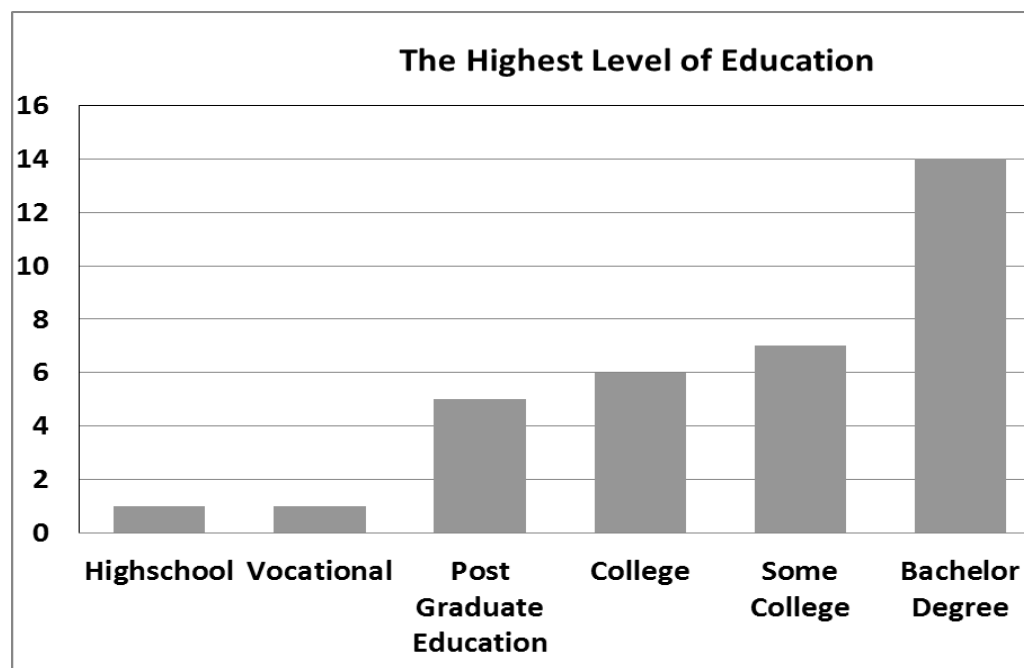
*Yeah. They gave me proposition to work in Canada as a nanny for them. I would never come to Canada if I don’t know them and if I am alone and I have to come here with some program to strange people I don’t know. Even this is my relatives they lied to me and they take advantage of me. And I know especially family or relatives can take advantage of you (a current Polish live-in child caregiver 12).*

### **6.3 Type of Care, Human Capital and Networks**

The second assumption of the network theory of migration that I explored was the influence of both *human capital* (i.e., education, skills, experience) and *social networks* to which one is connected (that embody one’s social capital) on type of care. This assumption is also reflected in the experiences of the interviewed live-in caregivers.

In particular, nearly all respondents in my sample have some sort of post-secondary education. Some of them have college degrees and some did some courses at college, but never completed their studies. Many respondents in my sample have university degrees and more than a few have some sort of post graduate education (see Figure 3 below).



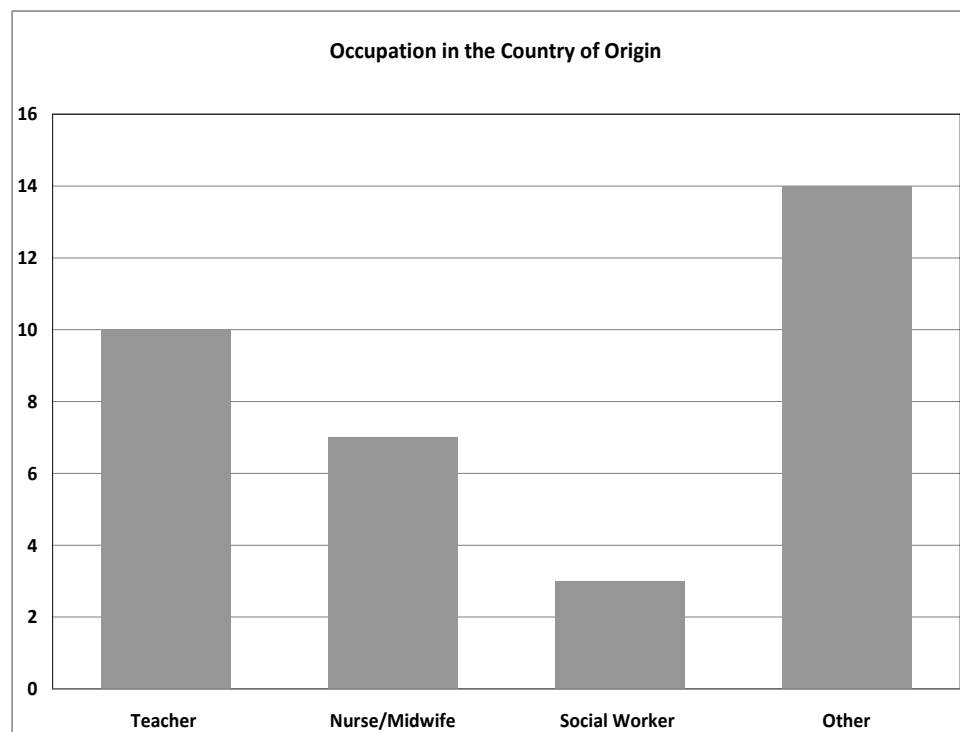


**Figure 3:** Live-in Caregivers' Educational Background

Most of my respondents had backgrounds in education and healthcare, which helped them in terms of getting employed as live-in caregivers of children and elderly in Canada (see Figure 4 below). For instance, explaining how their background in teaching/healthcare led them to choose certain domain of their live-in work, two of my respondents say:

*You know, like my Masters degree is in child development. I've always worked with children and, you know, I worked as a teacher. In India I was teaching preschool kindergarten. I've always felt more comfortable working with kids than with seniors (an Indian former live-in child caregiver 31).*

*I was a midwife in the Philippines. I used to work in the hospital. And I think that because the Embassy in Malaysia they look, they ask for my clinical records and my transcript and all those.... I think they have criteria for those ones [types of care (a former Filipino live-in elder caregiver 17).*



**Figure 4:** Live-in Caregivers' Previous Job

In some cases, prospective live-in caregivers did not have any formal education that relates to the certain type of care in which they ended up, but they did have skills gained through working experience that proved to be helpful. For instance, one respondent who graduated as a Bachelor of Science in Agriculture in the Philippines explains why she ended up as live-in elder caregiver upon her migration to Canada:

*Elderly is my experience in Cypress. I worked four years in Cypress for elderly people so this is the experience that I picked for the job so I am not qualified for the child care because I don't have the necessary training and experience for that (a current Filipino live-in child caregiver 23).*

That most of my sample did have education or experience that relates to taking care of elderly or children is not surprising given that currently under LCP one is required

to have “at least six months’ training or at least one year of full-time paid work experience as a caregiver or in a related field or occupation (including six months with one employer) in the past three years” (CIC, 2014b).

In addition to human capital (education and skills gained through working experience), networks to which one is connected (that embody his /her social capital) play an important role in live-in caregivers’ choice of type of care. In particular, my interviews reveal that recruitment agencies do play a significant role in aiding the process of prospective live-in caregiver’s decision making with the type of care will end up. In many cases, agencies inform prospective live-in caregivers about the educational or experiential requirements under LCP and advise them to choose certain job depending on experience they possess. For instance, reflecting on how the agency directed her to childcare on the basis of her working experience, one of my respondents reveals:

*Well in the agency they told us that what your job in Hong Kong is. That would also be your job when you come here in Canada. It’s because all of the requirements there in Canadian government is based on your working experience in Hong Kong. If you are child care giver you are going to choose child care giving. So depends on the work experience you have in other countries (a current Filipino live-in child caregiver 7).*

Some of them explain that that they ended up in a certain type of care as it happened to be the first job offered by agency. Another caregiver reports that her agency in Taiwan advised her to work as live-in elder caregiver as she can earn more money that way.

In the case of those who came through direct hiring, the decision of live-in caregivers to enter a certain type of care is also aided by informal social networks of

family and friends. Having a friend or a relative working in one type of care increases live-in caregiver's chances to end up in the same care domain.

Sometimes the type of care is a simply a result of circumstances. Even though initially assigned to a specific type of care, a few of them had to switch to another since they were released right away or soon upon arrival. This often happened due to their employer's inability to afford live-in caregiver or the very long time it took to process their applications:

*When I was in Hong Kong they said I am going to take care of children but when I came here I am released upon arrival and then she [agent] gave me another employer - that's elderly. So I worked with the elderly for a year (a former Filipino live-in child and elder caregiver 30).*

*Actually the one who sponsored me is somebody in the church.... There was a couple there who have two young children and the girl, the daughter is just newborn during the time when I went home. They really liked me a lot and they really hired me from here back home. And then because of the processing that took like three, almost four years before I was able to come back here .... So unfortunately when I came here the two children are already grown up and they are already in the school and in daycare. So I can still work but they cannot provide a full-time employment for me. It would be like part time, a few hours a day, a few hours a week, like that. So it didn't work that way. So I went to the agency actually and that's where I got my employer (a current Filipino live-in elder caregiver 20).*

Thus, one of the main assumptions of network theory of migration, according to which social networks (both formal and informal) play a role in migration and finding a job of immigrant live-in caregivers has been supported by experiences of my participants. Also, another assumption that suggests that one's human capital and social networks that embody one's social capital prove to be important in determining the type of care live-in caregivers choose to do upon coming to Canada has been reflected in the experiences of my respondents. These assumptions aid us in capturing and understanding the role of

social networks in the process of migration and finding a job as live-in caregiver in Canada. Still, the network theory of migration falls short on the role of *gender*, *race/ethnicity*, *age* and their intersections; these prove to be very important for the processes of migration and finding a job in Canada as live-in caregiver in Canada. As such, it is insufficient to help us to come to a full understanding of the migration process. Being guided by the intersectional approach to be sensitive to cross-cutting hierarchies of *gender*, *race*, *ethnicity*, *age*, we are able to discover their effects on the processes of migration and finding a job of immigrant live-in caregivers in Canada.

## **6.4 Complementing Social Network Theory with Intersectionality**

An intersectional perspective guides us to look for structural influences on personal live-in caregiver's experiences of migration and finding a job as live-in caregiver in Canada. As it will become clear from the following discussion, certain *stereotypes* based on the cross-cutting hierarchies of difference (i.e., *gender*, *race*, *ethnicity* and *age*) that exist at societal, macro level greatly influence live-in caregiver's experiences of migration and finding a job as live-in caregiver in Canada (micro level), including the type of care the live-in caregiver chooses to enter.

#### 6.4.1 Gender, Ethnic, Racial and Age Influences on Migration and Job-Finding

With respect to gender, the interviews revealed that being a woman makes it easier to migrate to Canada as a live-in caregiver. Most of women I interviewed reveal that they never met a man doing this type of job:

*As far as I know it's easier for women to come to Canada because of this live in care giver program. Because I've never seen or I've never met males who came to Canada as a live-in worker (a former Filipino live-in elder caregiver 17).*

That the live-in care giver job is a predominantly female occupation is reflected in official statistics according to which 95 percent of all caregivers in Canada are female (Kelly et al., 2011). Similarly, all except for two respondents in my sample are women. According to my female respondents, employers trust them more since women are considered as possessing more care work experience than men. Also, the words of women I interviewed reveal the role of deeply ingrained, societal gender stereotypes in facilitating their migration and finding a job as a live-in caregiver in Canada. In particular, they explain that women are generally held responsible for care of dependants and household and thus are considered more suited for this type of job than males.

*Because we're women and nowadays it's our responsibility to take care of the child and the elderly so woman is more applicable than a man. I think that's advantage as [a] woman. In general a live-in caregiver is in the household. It's more for the women (a current Filipino live-in child caregiver 23).*

Gender also seems to be influential in determining type of care a prospective live-in caregiver chooses to enter. Live-in caregivers' gender does shape attitudes how different workers are better suited for specific types of care. It has been revealed that is impossible for men to work as child live-in caregivers under Live-in Caregiver Program.

*Oh yeah, I feel some kind of different because when I am a woman I am able to avail the program, care giver program. But if you are a man in the Philippines you can't be a nanny here, you know. So it's different. Maybe they can able to get here by another program, like come here as a skilled worker, you know. So it's different (a former Filipino live-in elder caregiver 17).*

While it is generally easier for women to get a job as child live-in caregivers, men are preferred in case of male elderly clients or clients with disabilities as physical strength is required for tasks such as lifting and carrying these people.

*....I think it depends on the job too. ... There are cases that like for example if you are going to look after a male, especially if the male is big, big in stature, tall or having disabilities, sometimes they would like to hire a male caregiver too. But as far as I know most of the female caregivers are hired compared to the males. Well I think it depends on the employer here in Canada (a current Filipino live-in elder caregiver 19).*

Both of male live-in caregivers I interviewed worked with elderly, disabled clients: one worked with an elderly disabled woman, while the other was taking care of an older male. They find that being a man aided them in finding these jobs. Although it may be easier for women to get LCP positions, the interviews reveal that experience of migration was much more unpleasant for women than men, given that most of them were mothers who left their children behind. Reflecting on such a pain of separation, one Filipino mother notes:

*Oh being a mother especially it's hard to leave the kids. But there's no choice. I have to for their sake. Yeah. The hardest thing I have ever thought of coming here. I am happy because I can provide [for] them. Like sometimes the responsibility and some other ways it's hard. I cannot give them, you know (a current Filipino live-in child caregiver 5).*

But gender is not the only hierarchy of difference that determines live-in caregiver's experience of migration and finding a job in Canada. In fact, live-in caregivers experience the processes of migration and employment differently based on

their ethnicity/race as well. Indeed, it appears that being European, Spanish or Filipino increases the possibility that they will get job as live-in caregiver in Canada as employers prefer to employ people of these particular ethnic backgrounds. They reveal the great role of ethnic/racial stereotypes that employers hold in aiding migration for live-in caregivers of certain ethnic group and constraining it for others. A Ukrainian respondent argues that her employers told her that the reason they decided to hire her is that she is from Europe and that “Europeans usually come with a good background and they are different”. Further explaining such a point, she states:

*I have very good education so my family knew that I know how to deal with children that I'm not interested like only in cleaning their house. Like when it's necessary I can help children with their homework. When it's necessary they are going to ask me any questions I can easily answer their questions (a current Ukrainian live-in child caregiver 28).*

Respondents reveal that there are some employers who would state their preference for Filipino applicants in their job ads. When asked what the reason is for that, they explain that this is the case mostly due to their high level of education, extensive foreign working experience and their reputation as being “friendly, trustworthy and hard workers” (a current Singaporean live-in child caregiver, 29; a current Polish live-in child caregiver 12) . Employers believe that Filipinos, they state, are “patient with kids (a former Filipino live-in elder caregiver 9) and “caring, compassionate, loving and gentle with elderly” (a current Filipino live-in elder caregiver 20). One Filipino respondent reflects on why employers and live-in caregivers both consider Filipino live-in caregivers the best choice:

*I can say that hundred percent because Filipinos are very loveable. They're hospitable. They really make an attachment to that old person*



*emotionally. They are treating them like grandfather, like grandmother. Because in Philippines we don't have if you are old you need to go to nursing home. Somebody will look for you. So they don't have any responsibility. But in Philippines even your mom is old, even your sister is married, even your sister have a baby, they will stay in one roof. Because Filipinos they are very, um... what's this?... their emotions or their feelings, their instinct is I will find a Filipino nanny for sure my kids will be in good hands because I know Filipino nannies are very good in taking care of this kind of person like that (a former live-in elder caregiver 18).*

One Chinese live-in caregiver thinks it is much easier for Filipinos to come to Canada as live-in caregiver than for Chinese, as they have better English language skills and they often attend live-in caregiver course which is not offered in China. That Filipinos are considered at an advantage in terms of their coming to Canada as live-in caregivers was also echoed by a Kenyan respondent. She explains how being Black results in a longer migration procedure and considers it discriminatory. Thus, she advocates more equal policy that would ensure that Black people are admitted in higher numbers.

*I would say relatively the Canadians I don't think they like the Blacks too much to come to the country because it takes too long. I see so many the Filipinos they come so many of them (a Kenyan current live-in child and elder caregiver 26).*

The above cited Kenyan respondent nicely exemplifies that the roots of such discrimination that she feels through her experience of migration (micro level) are structural (macro level) as Canadian society as a whole does not value Black people.

While most of the respondents agree that ethnic/racial stereotypes that define Filipinos as good carers help them migrate and find a job in Canada, some of the respondents disagree. For instance, some of them find that being Filipino constrains one's

chances to come to Canada as live-in caregiver due to Filipinos' reputation as illegal immigrants.

*If you heard on the news that there are Filipinos who are in this country or another country like U.S.A. they were doing work without permit, you know, illegal stuff. That's what I say. Illegal stuff, you know. So some of the immigration people here in Canada are very careful with that. They make it sure that we come here in Canada you have all legal documents and legal working permit and stuff (a current Filipino live-in child caregiver 7).*

Interviews also show that employers often tend to employ live-in caregivers of their own ethnic background due to language issues. Reflecting on that, one Indian live-in caregiver states:

*Yes, she employed me because she wanted somebody who could speak the Indian languages because her husband is white so she really wanted her children to understand a little bit of Indian languages and I speak two or three Indian languages so she was really impressed with that (a former Indian live-in child caregiver 31).*

While live-in caregivers' position in each of the hierarchies of gender, ethnicity and race has impacted on their experiences with migration and finding a job in Canada, it is primarily by focusing on the intersections of these hierarchies that we can fully grasp such experiences. For instance, a female Peruvian respondent reflects on how a live-in caregiver's position in hierarchies of gender and ethnicity comes to influence one's migration and finding a job in Canada as child live-in caregiver:

*I think so [that gender, race and ethnicity influence one's migration experiences] because for what I talked to the families that looked for a nanny they prefer people from South America or from Philippines or some of those areas and especially female. To work with kids they want mainly females. At least if you have three, four boys you need a male nanny. But mainly they want female. I don't know why they don't want European people. Maybe because they think that European girls are more open*

*mind ed or they like to smoke and drink. I don't know what's the idea but the families I spoke to they prefer somebody from South America or from Philippines, Thailand, those kinds of countries (a former Peruvian live-in child caregiver 14).*

Similarly, reflecting on how her position in hierarchies of gender, ethnicity and age simultaneously influenced her chances to come to Canada as a live-in caregiver for children, one respondent says:

*Being a woman and young, like my age, it's actually easier to find a job, perhaps a little too young but anyway. And also I feel like my... because English is our first language in Singapore so I actually think I can communicate with the employer easily so I feel that makes my much more employable than any other people (a current Singaporean child live-in caregiver 29).*

The following quote taken from the interview with a male Filipino respondent best exemplifies how one's chances of migration and finding a job as live-in caregiver in Canada are shaped by intersectional influences of hierarchies of difference. Even though all Filipinos that I interviewed in my study belong to the same ethnic group, males and females do not experience migration in the same way. As males are often associated with terrorist attacks, it is harder for them to be admitted to Canada under Live –in Caregiver Program. As one male Filipino respondent has put it:

*I think it's harder to come here because we are Filipino. There are times that, you know, Philippines there is crooks there too, you know, that lead to Al Qaeda, so it's Muslim crooks and I'm sorry to say some Muslim people from Philippines so Philippines was a banned country for those Americans for the Filipinos to visit the Philippines and, you know, that's it. Yeah, I think, you know (a male, current eldercare live-in caregiver 25).*

None of my female respondents did mention that their chances of migration were hampered by such images of Filipino people. Thus, in accordance with intersectional approach, individuals experience ethnicity/race differently based on their location in

gender hierarchy as male or female. Gender and ethnicity/race “are not simply additive, but operate in complex and intersecting ways” (Thorton Dill & Baca Zinn, 1997, p.41; see also Acker, 1999; King, 1989; Symington, 2004). As Acker (1999) would put it, live-in caregivers do not experience themselves in separated segments of *gender*, *ethnicity* and *race*; on the contrary, their lives are determined by all these at the same time.

Before I close this chapter, I reflect on how my research participants compare the migration process of their applying for a job in Canada to the migration process of their applying to work in other countries as care workers. I also outline their recommendations regarding migration process for live-in caregivers in Canada.

## **6.5 Migration to Canada vs. Migration to Other Countries**

Most respondents note that Canada has a complex application procedure for live-in caregivers that requires excessive paperwork. In fact, most of them note that it is easier and faster to migrate to Hong- Kong, Israel, Taiwan and Singapore than to Canada since immigration requirements are not so demanding as in Canada. While it may take up to *two or three years* for people to get a working visa to migrate to Canada as live-in caregivers, *six months* is the maximum one needs to wait to get working visa for these other countries. Reflecting on such issues, one respondent who used to work as domestic helper in Taiwan states:

*I waited approximately five to six months [to get working visa for Taiwan]. It was quite easier than for Canada. Canada has the most strict policy, you know, you have to present all the original papers and things but in*

*Taiwan it's not quite as difficult because we had an agency in Taiwan who did the papers to make it faster. So I had no problems in Taiwan (a current Filipino live-in child caregiver 24).*

Similarly, one Peruvian live-in caregiver who used to work as au pair in US and Netherlands explains how it was easy for her to get working visas for these countries.

*Well the process to go to the Netherlands was very quick. The family did all the papers for me. It was pretty fast. And the process for the United States it was like six months probably which I consider fast because I did all the papers like in a regular time, like from the family and then after two months I was travelling. I was going there so I think it was pretty fast too (a current Peruvian live-in child caregiver 27).*

On the other hand, she had to wait much longer to get working visa for Canada due to the complicated paperwork she was required to submit regarding her foreign working experience:

*It was very difficult when I had to do these papers for Canada, you know, something that I had a difficult moment it was that I have experience taking care of kids which was the basic thing in order to come here as a caregiver and, you know, because I was an au pair in the Netherlands and also the United States they were asking me for my references from the family references and also my police, um, like police references, okay? So everything was going well with the families, with my employers' references but when it came to get the police... I don't remember... police references it was very difficult because I was in Peru and I had to collect from the United States and from the Netherlands and other people who didn't have this much of experience because they didn't, you know, work abroad they didn't have to collect these papers from these other countries so it was easy for them to process (a current Peruvian live-in child caregiver 27).*

Few of the live-in caregivers note that while the paperwork for application was not so much different for Canada than for some other countries, it still took them a bit longer to get their visa for Canada.

Some live-in caregivers noted that migration to other places like Saudi Arabia and Hong- Kong was easier for them than migration to Canada given that employers paid

a ticket (both to migrate and go back home) for them and covered other expenses. For instance, reflecting on such issue, one former Filipino live-in child caregiver notes:

*...And in Hong Kong we are in terms of for example if we didn't finish or we finished the employment, whatever, like doesn't matter if you finish the contract or you didn't finish the employer were going to be providing us the plane ticket going back home. They provide for that. And they paid for our medical expenses. They provide for that. So we just paid for the agency. Actually we are just paying for the agency but there are some agencies who are just for the... like we pay for our own medical but I am aware personally that the employer is giving us the... like they give it back the money that we spent. But they gave that through the agency. But it's up to the agency if they're going to give it back to us but most probably they won't, you know what I mean? But I mean in paper works I've read that we are entitled (a former Filipino live-in child caregiver 10).*

The respondents who complained about Canadian employers' lack of responsibility when it comes to cost of the plane tickets of their prospective live-in caregivers all migrated before April 2010, when changes to Live-in Caregiver which hold the employers responsible for such costs were introduced. My interviews suggest that even some who migrated to Canada after that date did not reap any benefits from these program changes. For instance, one of my respondents who came in 2010 after these changes were introduced had to pay his air plane ticket, even though according to these changes it is his employer who should have done that.

A few were lucky to get their visas for Canada as fast and easy as they did for the other countries. Asked about her experience in processing the papers for Hong-Kong compared to the experience in processing the papers for Canada, one current Filipino current child live-in caregiver responds:

*Same. The same when I was getting a visa here in Canada. When I was in the Philippines I was waiting for my visa [for Hong-Kong], medical check-*

*up, and then the passport and stuff. So it's just the same (a current Filipino current child live-in caregiver 7).*

## **6.6 Recommendations for Changing The Migration Process**

I asked my participants whether they thought migration process for those who come through Live-in Caregiver Program should be altered in any way. Their answers to that question as well as some other issues identified during my interviews indicate the need for some changes with regards to the time needed for processing, required paperwork, and practices of recruitment agencies and employers.

First, for most of them the processing of papers was very slow. The interviews reveal that paradoxically, even though the majority of live-in caregivers come from Philippines, the processing time is the longest for live-in caregivers coming from this country. For instance, a *Polish* live-in caregiver explains that while it took her only *two weeks* to get her papers processed after applying from Poland, the shortest processing time for her *Filipino* colleagues was *two to three months*. The only exceptions are Filipino live-in caregivers who have already been working in some other location (such as Singapore, Hong- Kong, Taiwan and other Asian countries). The interviews reveal that working experience from these other countries guaranteed that their papers for Live-in caregiver Program would be processed in a shorter amount of time, without even being required to have six months long live-in caregiver course, often required from those applying from home country. While it may take up to three years for Filipinos who apply from Philippines to get their visas, it often take only three to four months (six at maximum) for those applying from other countries.

When asked what could be the reason for such difference in processing time, my participants offered different answers. Some see it as stemming from high number of applications in the Canadian embassy in Manila which cause a backlog. Some explain that foreign working experience in taking care of children and elderly, which is highly appreciated by employers, is the reason for such difference. They hint not only at working experience in providing care, but also experience in domestic chores gained in these countries as a reason for that. One respondent explains that Hong-Kong, for instance, is highly modernized in comparison to Philippines in terms of cleaning and cooking appliances and thus very similar to Canada in terms of such technology. One respondent sees the difference in processing time as a result of "the policy of the immigration office in the Philippines or the policy of the immigration and the policy of the government in the Philippines" (a current Filipino live-in child caregiver 8). The speed of getting the papers depends not only on the country from which one comes, but also on the embassy to which one applies, even if the applicants apply for this program from the same country. One respondent who applied from Seattle recalls that it took her just couple of days to get her papers processed, while it took much longer for her friends who applied from Buffalo.

Second, many suggested that currently the required paperwork is very demanding and thus should be simplified. The complexity of paperwork is most profoundly felt by those who have a rich foreign working experience as it is very hard from them to collect all necessary documents proving such experience and make sure they are original and authenticated. As already mentioned above, a Peruvian live-in caregiver had problems with collecting all her papers as she worked in other countries before coming here.



Third, as many paid thousands of dollars to migrate to Canada, out of which the greatest part was given to recruitment agencies, they argue that these organizations should be more closely monitored and regulated. While some of them are aware of new changes that assign the agency costs to the employer, they are suspicious in terms of how much these new rules are respected. Thus, some suggest excluding the recruitment agencies all together from the migration process as it denies the possibility for many qualified, but financially disadvantaged to migrate. As demonstrated by my findings, it is not only the rules that assign recruitment agency fees to an employer that are not followed, but also the ones that make employers responsible for covering live-in caregivers' air fare fees. Such information shows that the better mechanisms should be adopted by government to ensure that such rules are respected.

## **6.7 Summary and Conclusion**

In sum, this chapter sheds a light on the previously relatively unexplored processes of migration and finding a job as an immigrant live-in caregiver in Canada and particularly the role of social networks (both informal and formal) in such processes. My study has shown that both formal networks and agents (such as recruitment agencies, schools for live-in caregivers, Canadian embassies, Canadian employers and employers in some other countries in which they have worked temporarily prior to migration to Canada) and informal networks of family and friends aid live-in caregivers' in their migration and search for a job. While recruitment agencies were used mostly for finding a job, live-in caregivers I interviewed relied extensively on family and friends to help them

cover the costs of migration (i.e., application, placement fees, air fare and any other required fees). My study also reveals that sometimes live-in caregivers are directly sponsored by family and friends.

Both recruitment agencies and informal networks are described by LCP workers as disadvantageous in certain ways when it comes to using these channels for finding a job in Canada. Still, respondents seem to express more dissatisfaction with recruitment agencies as they are very expensive, do not provide them with guidance in terms of initial settlement and solving the problems they face in the job and do not ensure that conditions stipulated in job contracts are respected.

My study also reveals the factors that impact on the type of care in which live-in caregiver ends up working upon arrival to Canada. It shows that one's *human capital* (education, skills, experience) and *networks* (both formal and informal in which social capital is embodied) as well as one's position in different *cross-cutting hierarchies of difference* (*gender, race, ethnicity, age*) are all very influential factors in determining the type of care in which live-in caregivers chooses to work.

Another important insight brought about by my study is that it reveals how live-in caregivers' migration to Canada compares to their migration to other locations (such as Hong-Kong, Taiwan and Singapore) in which they tend to work temporarily – the issue that has been neglected by previous studies. It reveals that due to Canada's complex migration procedure that requires demanding paperwork it takes much longer to come to Canada as live-in caregiver than to other countries employing domestic workers.

The interviewed live-in caregivers recommend that migration procedures for LCP workers should be changed in the following ways: 1) processing of the applications should be done in a more efficient way and duration of the process should be same for all applicants, regardless of country in which they apply; 2) paperwork should be simplified; and 3) recruitment agencies and employers should be more closely monitored and controlled given their tendency to disobey the existing rules.

My research lends support for two assumptions based on network theory of migration on which I relied with a purpose of coming to better understanding of the role of social networks in the processes of migration and finding a job as immigrant live-in caregivers in Canada. In particular, as demonstrated above, these processes are greatly influenced by both formal networks (such as recruitment agencies and some others, termed *migrant institutions*) and informal networks of family and friends. Also, besides human capital, networks (in which social capital is embodied) seems to be very influential factor in determining the live-in caregiver's choice of type of care. Although social network theory helps us to understand the role of social networks(both formal and informal) in the processes of migration and finding a job of live-in caregivers in Canada it does not guide us to consider the role of *gender*, *race/ethnicity*, *age* and their intersections. As such, it is insufficient to help us to come to a full understanding of these processes. As my study has shown, to compensate for such pitfalls of social network theory, one should couple it with an intersectionality approach.

Being guided by an intersectional approach to be sensitive to hierarchies of *gender*, *race*, *ethnicity* and *age* enables us to discover their effects on the process of

migration of immigrant live-in caregivers in Canada. This perspective makes us see how intersectional influences on macro, societal level influence one's experiences of migration on personal (micro) level. As we have seen, certain stereotypes based on the hierarchies of difference (i.e., *gender, race, ethnicity, age*) that prevail at societal, macro level greatly influence live-in caregiver's experiences of migration and finding a job as live-in caregiver in Canada, including the type of care he/she chooses.

So far I have focused on the migration experiences of immigrant live-in caregivers in Canada. Next chapter will focus on their working experiences.

## **Chapter 7**

# **Working Experiences of Immigrant Live-in Caregivers: Differences According to the Type of Care**

### **7.1 Introduction**

The purpose of this chapter is to shed light on differences in the working experiences between immigrant live-in caregivers who take care of elderly and those who take care of children. Given that previous research has failed to differentiate between the different types of care (i.e., childcare and eldercare) and their impact on working experiences of immigrant live-in caregivers, it is important to explore this issue. Such an issue merits attention given that it may signal a need for policies that would respect differences in live-in caregivers' working conditions according to the type of care.

Previous studies have shown that immigrant live-in caregivers face challenging working conditions while under LCP. It has been shown that they are often not properly paid for the amount of work they perform, are denied taking time off and sick leaves, and are required to do extra tasks not outlined in their job contracts (such as, for instance, taking care of animals) (Alcuitas et al, 1997; Bakan & Stasiulis, 1997; Granda, 1996; Granda & Kerr, 1998; Pratt & PWC, 2003; Silvera, 1989; Spitzer, 2008; Spitzer & Torres, 2008; Stasiulis & Bakan, 2003).

Still, most of the Canadian studies that examine the working conditions of immigrant live-in caregivers tend to consider them as a homogenous group, thus failing to explore how different types of care influence their experiences of working in Canada. This gap is surprising given the results of some international studies that find that in some respects domestic workers taking care of the elderly experience more favourable working conditions (in particular- greater autonomy and better treatment by employer) than those who take care of children (Glenn, 1986; Parrenas, 2001). But these studies do not examine the provision of elder and child care under LCP specifically so their transferability may be limited. Indeed, as my overview of the literature has demonstrated, there are some indications in the Canadian research that each type of care may carry specific challenges for LCP workers (Oishi, 2008; Spitzer, 2009).

Thus, in this chapter I explore how the type of care live-in caregivers provide influences their working experiences. In doing so, I rely on intersectionality approach as social network theory with its emphasis on the role of networks is not as helpful in this regard. This is not surprising given that during their working time live-in caregivers are isolated in an employer's home without access to social networks. By relying on an intersectional approach, I came to realize that it is not only the type of care that one provides that significantly shapes one's working experiences (and more precisely one's relationship with employer), but also the cross-cutting hierarchies of difference - namely the hierarchies of gender, race, ethnicity and citizenship.

I start this chapter by outlining my findings with regards to differences in employer's compliance with contracts according to the type of care. Then I outline unique

challenges related to each type of care as well as language and cultural barriers that that come to influence one's experience of working as a live-in caregiver in Canada. After identifying advantages specific to each type of care, I reflect on each type of employer-employee relationships as identified by my findings- namely - *professional, friendly/family like, in-between and friendly/family like*. After I discuss the process of changing the employers among LCP workers, I discuss how an intersectional approach helps to understand the working experiences of LCP workers (and in particular, *discriminatory* type of relationship that some live-in caregivers develop with their employers). I close the chapter by summarizing the findings of my research related to working experiences of immigrant live-in caregivers in Canada.

## **7.2 Differences in Working Experiences according to the Type of Care<sup>21</sup>**

My study shows that the type of care live-in caregivers perform influences their working conditions, carries specific advantages and disadvantages, and shapes the type of relationship that they develop with their employers as well as some of their expectations of their employers.

### **7.2.1 Job contracts**

This study reveals that the type of care greatly shapes live-in caregiver's working conditions. In fact, the interviews reveal that LCP workers caring for children experience

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<sup>21</sup> Many findings presented in this chapter have been reported in the IRPP paper titled "Economic and Social Integration of Immigrant Live-in Caregivers in Canada", written by me and my co-author Dr. Bourgeault. For a full reference, see Atanackovic and Bourgeault, 2014.

more problems when it comes to employer's compliance with terms of their employment contract than live-in caregivers working with older clients. Many live-in child caregivers feel that their job contracts are fair but the problem lies in that they are not followed by their employers. They reveal that the main issues with job contracts are that employers: 1) often do not respect benefits such as sick leave; 2) make them work overtime and do not compensate them appropriately for that; 3) expect them to perform additional work not stipulated by their job contracts; and 4) do not pay them appropriately and on time. While majority of live-in child caregivers are granted the standard two weeks vacation, some are denied the benefit of having sick leave:

*I actually never had a chance to take sick leave. Even if I was sick my employer started screaming at me that she cannot just stay with the kids because she had to go to work so I had to work even when I was sick (a former Slovakian live-in child caregiver 15).*

Many live-in child caregivers complain of having to work additional hours and not being remunerated accordingly. For instance, one Filipino childcare live-in caregiver states:

*I worked overtime and they did not pay me for that. I used to start before eight o'clock. And I am finished at around six o'clock. Not really six o'clock but my contract says that I will be done around four o'clock after we had the dinner. But sometimes because my employer is a doctor and the wife is a nurse so their job requires sometimes, mostly they're late (a former Filipino live-in child caregiver 10).*

Another live-in child caregiver explains that it is difficult to oppose overtime work because of the live-in arrangement:

*Sometimes I work overtime because when you are under live-in caregiver program it's hard to set schedule because you live with the family so you can't say no to them (a current Ukrainian live-in child caregiver 28).*



Many live-in child caregivers report that they were asked to do things not included in their job contracts such as shovelling the snow from driveway, cleaning the backyard, cutting the grass and washing a car. One Filipino live-in child caregiver recalls that once she had to wash the clothes even for four employer's guests who stayed in the house for a couple of days.

*So they asked me to wash clothes for the four person. So aside from her, from him, and the two kids and the four guests I washed the clothes of those eight person, right? So when I asked for my pay they don't want to pay me. So I get mad because I told them in my contract I only have to wash your clothes, your husband's clothes and your two kids' clothes. Those four people they are not my responsibility. They are not in my contract so you have to pay me. Okay? Of course she got mad at me because they are her family (a former Filipino live-in elderly and child caregiver 3).*

One Slovakian live-in caregiver recalls that her employer was running something like a kindergarten in her house in Oakville. Instead of taking care of only employer's child, as stipulated in job contract, she was required to take care of four other neighbourhood kids:

*This family hired me for one baby but it was not [one] baby. It was day care. This family has day care, yeah, day care for children. Five children. And this woman because she lived alone, her husband moved somewhere and she wanted that I take care about these day care children (a former Slovakian live-in child caregiver 16).*

Many of live-in child caregivers state that they are not satisfied with the salary from their live-in caregiver job. They find that the amount of money they get is not enough to cover their costs of living. Some find that their wages are not commensurate to the amount of work (which often includes responsibilities not specified in their job contracts) they do. Some of them even report not being paid on time.

In contrast, most of live-in elder caregivers report that their job contracts are fair and respected by their employers. Unlike child live-in child caregivers, live-in elder

caregivers do not report experiencing any problems with sick leave benefits. Only a few of them experience overtime work without being properly remunerated for that. Almost all among these few do not see such extra work problematic most due to the fact that that the type of care they provide enables them to have flexible hours, with long breaks. Reflecting on that, one live-in caregiver currently taking care of one elderly couple says:

*Basically if you're working for an elderly, you know that you work flexible hours because sometimes there are troubles at night time. Sometimes they make a fall. Sometimes they cough like crazy. Sometimes they have diarrhea. So I think you should be ready any time to run to give assistance. So it's mostly long hours. Actually right now if I have to count the hours it goes up to 15 hours a day. But during the day when the couple is napping, you can nap too if you want. There are break periods. Like every day I have some few hours for myself (a current Filipino live-in elder caregiver 19).*

Only one live-in elder caregiver complains about working overtime without proper remuneration:

*Just the old lady is bothering me even 24 hours but they just only pay 40. It's just like 40 hours in a week. That's all they're paying (a former Filipino live-in child and elder caregiver 30).*

Moreover, few live-in elder caregivers reveal having additional responsibilities not stipulated by their job contracts such as shovelling the snow, cutting the grass, etc. One Filipino live-in caregiver, for instance, complained of having to clean employer's house every time they were showing it for sale. Sometimes additional responsibilities that are imposed on live-in elder caregivers stem from the issues associated with old age of their clients. As live-in elder caregiver taking care of an old couple has put it:

*Basically yes, I do [take on additional responsibilities not outlined by job contract]. But as the years go by, you know, this couple their health is diminishing should I say as they age. So what is written there in the*

*contract is no longer applicable. But you know what is happening because I am with them 24 hours, four days a week so I know the needs. ...So I am very flexible to, you know, just use my judgement and ...I don't mind doing these things. Well because I love the couple already. Like I am treating them as my parents so I don't count everything that I do for them and I don't feel bad doing it for them. It is just necessary (a current Filipino live-in elder caregiver 19).*

Another Filipino live-in caregiver reveals that upon coming to Canada, an old lady with whom she signed a contract asked her to work for her daughter as well. She was required to work twelve hours per day - six hours for the daughter, six hours for the parents. Reflecting on such experience, she says:

*You need to tidy up two houses in one day for the two families, you need to walk from one house to the other house. And just like I have two masters, two employers. ... I need to rush just like a machine in order to finish the job in one day for the two families (a former Filipino live-in elder caregiver 23).*

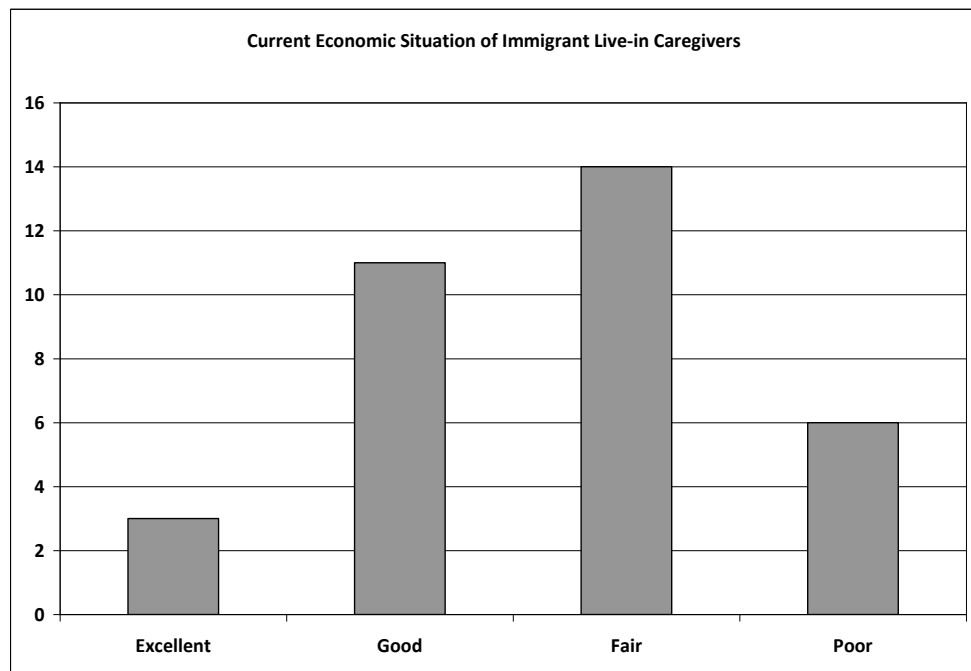
Only some live-in elder caregivers report being unsatisfied with their salaries. For example, one live-in elder caregiver from Kenya thinks live-in caregivers should be paid fifteen dollars extra per hour since they are “the backbone of people in Canada”. One Filipino live-in caregiver reveals that even though she takes care of an elderly couple, she is not appropriately compensated:

*The salary I think it would be better if they gave me more because there's an old couple, not only one client. (a current Filipino live-in elder caregiver 20).*

While live-in elder caregivers seem to be at advantage in terms of how much the employers respect job contracts, this is not the case when it comes to statutory holidays. The majority of live-in elder caregivers claim that they are required to work on statutory holidays even though this is not stipulated by job contracts since families of their clients are usually away at that time. Nonetheless, some of them explain that since they are often

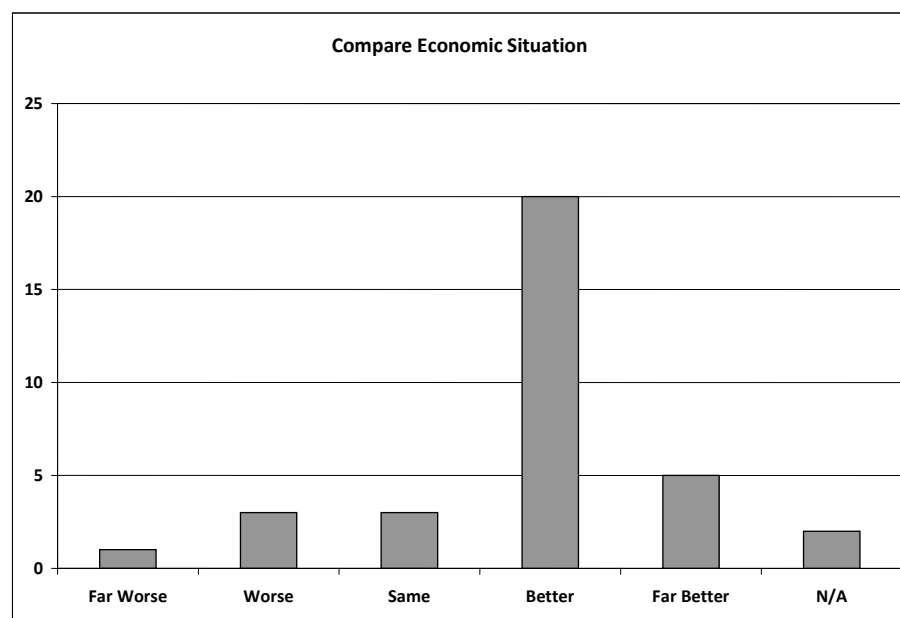
well paid for that- in some cases even two times more than their regular pay- that is not a big issue for them. In contrast working on statutory holidays is experienced only by some of live-in child caregivers I interviewed.

When asked how salary and conditions of live-in job in Canada compare to the salary and conditions of the job they worked in home country, live-in child and elder caregivers offer similar answers. They acknowledge that they earn much better salaries in Canada. Some Filipino respondents, for instance, reveal that salaries they earn in Canada are two times greater than the salaries they earned back home or other countries in which they worked temporarily such as Cypress, Taiwan or Singapore. A better economic situation in Canada is echoed also by their answers to demographic survey questions focusing on their current economic position. In particular, as shown below in figure 5 many of them describe their current economic situation as fair, more than some describe it as good and few see it as excellent. Some of them see themselves as poor.



**Figure 5:** Live-in Caregivers' Current Economic Situation

Most of the respondents reveal that their economic situation in Canada is better relative to their economic position if they were doing the same job in their own country or some other countries that are accepting live-in caregivers such as Taiwan and Singapore (see figure 6 below). Only few of them state that it is the same or worse.



**Figure 6:** Comparison of Economic Situation in Canada and Economic Situation in Their Country/Other Transitional Countries

Their live-in salaries, they note, are small relative to the Canadian standard, but are good enough if they send them as remittances to home countries. With the exception of good salaries in Canada, the overall working conditions of the live-in job are worse than working conditions of the jobs they did in their home countries. They see their care giving job as harder, more frustrating and isolating from the work they did in their home countries. This is not surprising if we take into account that most of my sample did have professional jobs in their country of origin.

*Like salary is it better than it was for the teacher job I was having there in Peru... Well I found working conditions in teacher's job very different, you know, just teaching and it's just basically preparing the class and to motivate students, teach them which I really like it. And being here as a caregiver it's a little bit difficult when I have to do like so many things*

*around the house. That can be a little bit challenging (a current Peruvian live-in child caregiver 27).*

*Salary be converted to my home currency was excellent. And the nature of the job was completely different there. I was in a school setting, you know. I had my co-workers. I was working with kids but I had co-workers and stuff so we could share our problems and stuff. But here I was like totally alone. I couldn't really share problems with anybody (a former Indian live-in child caregiver 31).*

Thus, by migrating to work as live-in caregivers in Canada, they experience simultaneous upward and downward mobility. While their financial status increases, their occupational status declines. Therefore, they experience what Parrenas (2001) terms *contradictory class mobility*.

## **7.2.2 Challenges According to the Type of Care**

Moreover, the interviews show that each type of care carries specific challenges that come to influence one's experience of working as live-in caregiver in Canada.

### **7.2.2.1 Childcare**

Live-in caregivers taking care of children report most of the challenges that they face in their job have to do with early age issues. More specifically, dealing with the kids' behavioural and disciplinary problems are the main problems they encounter in their job. These are sometimes made even more complex in the case of the children who suffer from some disorder such as attention deficit hyperactivity disorder (ADHD) or have some other kind of a problem (such as drug abuse in the case of older kids). Regarding that, one live-in caregiver who used to take care of two boys suffering from hyperactivity states:

*I was thinking about to quit because kids are very hot tempered. Like they are, what do you call that, hyperactivity, the two kids I am taking care. They were very, very moody. They shout. They scream. Sometimes it hurts me but I need to understand. I need to sometimes how to deal with them, you know, so I need to learn more to motivate them in order for them to listen what I told to them, you know (a current Filipino live-in child caregiver 7).*

One former Chinese current live-in caregiver says that teenager she was responsible for was drug addict who used to steal money from her.

Another challenge faced by live-in caregivers who take care of kids is that sometimes parent(s) work from home which complicates their work with kids.

*Mom was working but she worked very often from home and that was my challenge because when she was home the kids were attached to her. She was always getting involved in what I was doing. It frustrated me a lot. (a former Peruvian live-in child caregiver 14).*

Another challenge reported by those who take care of children is that sometimes they have to make quick decisions which often do not reflect what parents want for their kids. Commenting on that, one caregiver explains:

*It's just like sometimes the decision making. Certain decision that you have to make. ... You just need to do it right away. So yeah, sometimes my employer would say 'You should have done it this way.' But of course I need to react right away. ... I could not wait to contact her (a current Filipino live-in child caregiver 10).*

#### **7.2.2.2 Eldercare**

Live-in elder caregivers reveal that the most common challenges that they face in their work are related to the old age of their clients. Dementia is one of the common problems that a live-in caregiver has to deal with in his work with old people.



*In my case at her age her mind is still sharp. Yeah, but sometimes there are things like she already told me 10 times and in the last few months she will tell me things repeatedly and sometimes it annoys me but I understand that she is old. And she knew that she already told me several times because she'll ask 'Did I already tell you about this thing?' (a former Filipino live-in elder caregiver 17).*

Some of live-in caregivers' patients suffer from some kind of illness such as, for instance, depression or aphasia. Some of their patients are left disabled due to some medical issues that they faced in the past such as aneurism or stroke. Such a vulnerable state of their clients requires not only a lot of physical work on their part, but also understanding of clients' mental needs and providing emotional support. This can be really hard on live-in caregiver:

*First of all I have to start with the lady. The lady had a stroke and paralysis on the left side so you have to cut the meat, you have to assist in everything. ... On top of that they have some sort of incontinent problem and the worst thing, the worst challenging is to cope with her depression. Because of the current health conditions sometimes they become depressed and so you have to be very positive in your approach. ...But regarding ... the husband, he had a stroke as well and he has paralysis on the left side. On top of it he had aphasia. You know, the speech part of the brain was affected because of the stroke so he cannot talk anymore. So since he cannot talk anymore he is mumbling words. He is trying to express himself which he couldn't express anymore. That for me is a very big challenge on my part to understand what he means. Even with the gestures sometimes it's not very clear. So it takes a lot of understanding and a lot of patience to work for both of them. ... So it's not actually an easy job to work for the elderly because you don't only understand that they are aging, you have to understand their physical abilities and their mental capabilities and their psychological capabilities and conditions, the emotional as well (a current Filipino live-in elder caregiver 19).*

The problems described above are sometimes magnified if the old person they care for has a difficult personality. For instance, one live-in caregiver explains that the old lady for which she worked used to be “a very hard person who wanted everything her own her own way” (a former Filipino live-in elder caregiver 18).

Another challenge that is specific to those taking care of old people is their clients often pass away. This is emotionally difficult for live-in caregiver as they usually get attached to the people in their care. Recalling how difficult it was for her when her client died, one live-in caregiver says:

*Oh it was really, really hard for me because I cared for them. I took care of them. I was always with them. It was really, really hard. It made me so, so sad. And they're been a part of my life. Little by little I try to accept that nothing is permanent and no one, you know, will live forever but it was really, really hard (a current Filipino live-in elder caregiver 20).*

Indeed, working for the elderly brings uncertainty for live-in caregivers. Some of them reveal a fear that the old person they are caring for will die before two years expire that are required for gaining permanent residency status.

*Yeah, that's the difference between looking after child care and elder care because with child care you know that you can have the job until they grow old even if you are a permanent resident already. You - have longer period of, uh, what they call this?, with the job. But with elder care you do not know until when you have the job (a former Filipino live-in elder caregiver 17).*

In addition, due to deteriorating physical and mental health of most of their clients, most live-in elder caregivers are required to stay awake for a whole night which is very hard to do.

*When I am assigned at night for night shift you really have to be awake. Sometimes, you know, you almost fell asleep and you have to wake yourself or else you might be in trouble because sometimes, you know, my employer comes in the wee hours and it's really a shame, you know, when you will be caught sleeping and actually it happened to me twice. (a former Filipino live-in elder caregiver 4).*

Thus, while LCP workers taking care of older adults seem to be advantaged in terms of employer's compliance with employment contracts, they may face greater issues at their job than those taking care of kids because of demanding, sensitive and deteriorating nature of the type of care they need to give to their elderly clients.

### **7.2.3 Cultural and Language Challenges**

The interviews reveal that both live-in child and elder caregivers encounter some cultural and language barriers dealing with their employers or clients. They report that they had to learn to cook food preferred by their employers/clients (e.g., Canadian, Italian, etc.) even though they did not like it. One live-in elder caregiver had to respect the rules of the religion of her clients that prohibited mixing some kinds of food with others. Some of those allowed to cook their ethnic foods for the employer or client had troubles in making their food accepted.

*...I love cooking in Philippines. Then when I arrive here well I am so lucky my employer allowed me [to cook Filipino food] for her children. So I cook it. But one thing I was frustrated that when I asked the children you eat this one. I cook it. 'Oh I don't want to eat that one.' You really had a hard time to do it for them but of course you can understand they can't appreciate it because they just, I think they just saw that kind of food the first time (a current Filipino live-in child caregiver 6).*

In addition, notions that live-in caregivers hold about some issues (such as care, religion and death) often diverge culturally from what employers in Canada think on these same issues. For instance, one Filipino live-in caregiver explains that in Philippines “babies ages three, two, three, four they are still sleeping with their mom or somebody but here they are already independent” (a current Filipino live-in child caregiver 6). Thus, she

is not allowed to sleep with a baby she takes care of since that is not culturally accepted in Canada. One Singaporean live-in child caregiver explains that Canadians tend to use positive reinforcement in raising kids. This was kind of “cultural shock” for her as in Singapore caregivers are more blunt and as such, prone to pointing out every flaw in child’s behaviour (a current Singaporean live-in child caregiver 29).

Those taking care of old people have had hard time accepting Canadian ways of grieving after the person in their care dies.

*I might not have seen them [family of person she cared for] like grieve because like in the Philippines we’ll pray. We’ll pray like nine days and then after the person dies. And then after 40 days there is another prayer and then after a year there’s another prayer. And then there are certain things that we do not do and there are certain things that we do when people die. ... But here I didn’t observe it from them (a former Filipino live-in elder caregiver 17).*

In addition to cultural issues, both live-in child and elder caregivers experience language barriers. The interviews reveal that these language barriers can be small (such as, for instance different terminology, wrong pronunciation or thick accent of some live-in caregivers) and as such do not seriously compromise the communication between live-in caregiver and his employers/clients:

*I don’t have really the hard time because I can speak English and I can understand English and they can also understand but sometimes if I am using my own accent and terminologies it’s different. So if I am using sometimes my own terminologies the children would say ‘What did you say? Can you explain to me what that is?’ (a current Filipino live-in child caregiver 6).*

It is important to note that due to multicultural make-up of the Canadian population, language issues go both ways- not only on the part of live-in caregiver, but also on the

part of employers and clients. As one Filipino live-in caregiver taking care of an old Italian lady has put it:

*Oh my goodness. It's hard for me to communicate with her because she doesn't understand English. And me too, I can't understand Italian dialect. So what I do if she wants to talk to me? I call her nephew and then her nephew translates, over the phone (a current Filipino live-in elder caregiver 32).*

#### **7.2.4 Advantages of Each Type of Care**

The interviews reveal that despite the specific care challenges outlined above, each type of care also carries certain advantages.

##### **7.2.4.1 Childcare**

Taking care of children is described as advantageous for an array of reasons. In particular, some live-in caregivers reveal that taking care of children is less tiring than taking care of old people. Live-in caregivers can usually sleep the whole night without interruption, which is not the case with those taking care of the elderly.

*If nobody is using bottle already, the whole night you can sleep whereas if the elderly she wants to go to, she wants to pee you have to wake up again. And sometimes elderly have the medicines at night, you still wake up and give them and everything like especially if she is bedridden you have to be very curious and awake, one eye is sleeping and the other one is opening (a current Filipino live-in child caregiver 5).*

Another advantage of taking care of kids cited by interviewed live-in caregivers is that unlike working with the elderly, working with kids does not make live-in caregivers to think about an old age that awaits them.

*Like oh my God, I was thinking what if I'm going to be like her, something like that, and that makes my mind so sad whereas in the kids they love to play, right? Your feeling is better (a current Filipino live-in child caregiver 6).*

Other advantages of taking care of children cited by live-in caregivers are: kids are more fun and make a live-in caregiver happy; live-in caregivers can teach children and learn from them; kids are more eager to listen while elderly people insist on doing things in their own way; working with kids is not so physically demanding as it does not require transferring the bedridden patients from one place to another as that is often the case with eldercare; live-in caregivers taking care of kids do not have to possess medical training which is important for those who take care of old people; and kids are more active so live-in caregiver gets to spend more time outside when working with kids.

#### **7.2.4.2 Eldercare**

Taking care of elderly is described by some respondents as having its advantages as well. One of the most cited advantages of this type of care as revealed by some of my respondents is that it does not take up as much energy as taking care of kids. Unlike some respondents who claim that eldercare is more tiring, these respondents claim that kids are very mobile and active and as such require lots of supervision.

Also, many of them explain that with eldercare, the emphasis is on satisfying old person's needs and not on house cleaning which is an important part of work done by live-in child caregiver. As one of the respondents puts it:

*In the elderly you only have to take care of the elderly. In child care you have to take care also of the house. [laughs] And you are not nanny at all. You are domestic helper in there (a former Filipino live-in child and elder caregiver 3).*

Some live-in caregivers argue that in taking care of an elderly client, he/she is the only person they have to satisfy, while in childcare they have to satisfy both overly demanding parents and child.

Another advantage of taking care of the elderly is that “with older people you can talk as adults” (a former Filipino live-in elder caregiver 17). Reflecting on that, one of my respondents argues:

*The advantage is you can actually have a decent conversation – You can talk as adult to old people providing that the elderly that you care for doesn’t have serious dementia. But it’s actually really nice to have someone to talk to all day. ... With kids you just talk about how is school, do you want to do a craft, look it’s a red car. ... It’s not intellectually stimulating (a current Singaporean live-in child caregiver 29).*

Some explain that they learn a lot from conversations with older people in their care as they have valuable life experience to share.

In addition, many argue that when taking care of an older person, the live-in caregiver gets *respect* and *appreciation*, which is often not the case with parents of the child in their care.

*And then the elderly if you, if you treat them nice too they will appreciate everything that you do. Sometimes they appreciate your cooking. They will call you rather than their daughters or sisters, their relatives. Maybe they will ask you for a help, not them. So it’s nice (a former Filipino live-in child caregiver 9).*

One live-in caregiver recalls how the old lady thanked her for everything she did for her just before she passed away.

*Two days or three days before she died, she told me [name] thank you so much. I really appreciate what you did for me. She told me about it. It comes from her mouth and from her heart (a former Filipino live-in elder caregiver 18).*

## **7.2.5 Relationship with an Employer**

### **7.2.5.1 Employer's expectations**

When asked what an employer is looking for in one employee, my respondents cite many characteristics that one should have in order to be seen as a good worker. The most cited among these are sincerity and trustworthiness. Reflecting on this, one live-in elder caregiver says:

*First of all is sincerity. I guess number one is sincerity because it's different when you work for the money or you work for people...They have dignity, they have their values, they have their self-esteem so if you are not sincere with what you are doing I don't think you are right for this kind of job. And not only sincerity, trust. Because they are trusting their lives every day in you so I don't want to breach the trust (a current Filipino live-in elder caregiver 19).*

Another important characteristic cited by my respondents is dedication to their caregiving job.

*You have to be dedicated really. You have to love your job. In order to appreciate what you are doing you have to love your job (a former Filipino live-in child and elder caregiver 3).*

The respondents also maintain that employers expect an employee to be responsible and mature enough to be able to provide the appropriate care, hardworking, smart, time conscious, cheerful and gentle. Some also note that employers prefer humble



workers who perform their jobs without complaining and never answer back to the employer.

Based on the findings revealed by my interviews with immigrant live-in caregivers, we can identify four types of relationships with their employers: 1) a *professional relationship* marked by clearly identified boundary between worker and employer lacking any emotional attachment; 2) *friendly relationship* characterized by friendship between live-in caregiver and employer which in some cases evolves into *family like* relationship where live-in caregiver comes to feel as a member of a family; 3) a relationship somewhere *in-between* the *professional* and *friendly* relationships which involves the elements of both and 4) *discriminatory relationship* that is founded on *gender, race, ethnicity* and *citizenship based inequalities* between the live-in caregiver and his/her employer (which will be discussed near the end of this chapter).

#### **7.2.5.2 Professional Relationship**

While both live-in child and live-in elder caregivers report developing all four kinds of relationships with their employers, it is important to note that *professional* employer-employee relationship is more characteristic for those working with children. Even though some employers suggested they would treat their live-in caregivers as friends or family members, that was not the case.

*My employer did not consider me as, you know, anything. With me her relationship was just eight to five when I was caring for the children and that's about it. I wasn't really a member of their family. No, I never felt like that. I was very lonely in fact. I was extremely lonely. It was very*

*professional. Eight to five I existed for her and after that I did not exist (an Indian former live-in child caregiver 31).*

While some complain about unfriendly relations with their employers, others are happy about it as they think that there should be a clearly marked line dividing employer from employee.

*I see that there should be a gap. I don't like to go hand in hand because I know that I am just an employee...There is a line (a former Filipino live-in child and elder caregiver 2).*

*I keep my employer as employer. Exceeding that is not good. Whatever is the relationship it's just between I am employee and you are employer. (a former Filipino live-in child and elder caregiver 3).*

#### **7.2.5.3 Friendly / Family like Relationship**

Most of the live-in child and elder caregivers report developing friendly relationships with their employers which in some cases evolved into feeling as part of the family. Being involved in the family's activities (including family celebrations and sitting at the same table with other family members), feeling free to talk with employer about anything or ask for anything, getting help from the employer either financially or in some other way (such as, for instance, being dropped off to certain place) or being praised by employer in front of others are some of the most important reasons that made them feel that way.

*What makes me feel as a member of family? They are always talking to me. That's the very important one. I can talk to them openly. And they always invite me for family birthdays, kids' birthdays. If there are kids' activities outside or whatever they're going to invite me. If they will go eating outside even though holidays, even though my off they are going to invite me if I want or not. Sometimes they offer me some help (a current Filipino live-in child caregiver 11).*

*Interviewer: What made you feel as member of family?*

*Respondent: That I was not afraid to ask what I can eat. I was not afraid to ask for a car if I need it. I was not afraid to ask for advice from them. I was not afraid to ask to see a doctor when I needed to go. Like there were no blocks between each other so you were very straight to each other and we talked to each other about everything (a former Slovakian live-in child caregiver 15).*

*Interviewer: So can you tell me more about instances, what she did to make you feel like a family member?*

*Respondent: Because I would always hear her say or hear her tell her friends how wonderful I am to her, that she called me dear (a former Filipino live-in elder caregiver 17).*

While most child and nearly all live-in elder caregivers report developing family like relationship with their employers, those taking care of elders state that their employers tend to respect them and overtly express that they see them as a part of the family. This can be explained by the fact that in many cases, live-in elder caregivers are directly employed by their elderly clients who are often not frequently visited by family members and are thus, solely dependent on caregiver. For instance, explaining how she has been considered family by an elderly couple of which she cares, one live-in caregiver states:

*They always tell me like 'You don't have to ask if you need this or need that.' You know, sometimes when the lady is having her treat like chocolate I would say 'Can I have one?' 'Oh, my dear. You don't have to ask. You're family.' ... 'Do whatever you want to do because you are a member of the family, you are part of the family.' And even with meeting people they make me feel important and introduce me as part of the family (a current Filipino live-in elder caregiver 20).*

As caregivers become an important part of the lives of old people for whom they care and in some sense become their family members, elderly people and live-in caregivers usually tend to adopt terminology that reflects such reality. For instance, some

of live-in elder caregivers report being called *daughter* or *son* by the employer or calling their employers/clients *mom* or *dad*.

*We're like daughter and mom. ...We have a good relationship (a former Filipino live-in elder caregiver 22).*

*...Sometimes she treats me like her daughter. I treat her also like a mother. I call her mama. ... If there is a party in the house I am welcome. I can sit with mama. I can sit at the table. And then if the family is there and they are visiting their mom, they want me also to join them in the family. And they are treating me very, very nice. They treat me very, very nice. Her children knows that we are really close (a current Filipino live-in elder caregiver 33).*

#### *In-between the professional and friendly relationship*

Few live-in child and elder caregivers report developing a relationship with their employer that cannot be defined strictly as either professional or friendly/family like relationship as it contains elements of both.

*Our relationship is I mean like half professional and part of the family. So it's kind of mixed (a former Filipino live-in elder caregiver 18).*

*During work time it's pretty much employer and employee, but after work like I can talk with them about my problems and they will actually help me out sometimes. Like if I have an issue with my friends or if I have an issue with something that I am doing then I can talk to them. It's sort of like they mentor me a little bit and give me some advice (a current Singaporean live-in child caregiver 29).*

#### **7.2.5.3 Workers' expectations of employers**

I also asked my participants what in their opinion would be an ideal employer. Most of them think that an ideal employer is the one who follows the contract and pays overtime, treats them with respect and not as maids or slaves, is responsive to live-in

caregivers' needs, patient, kind, generous, flexible, ready to compromise and is open-minded. Many of them maintain that treating the live-in caregiver in a non-discriminatory, friendly way and as a family member are important characteristics of an ideal employer. Reflecting on what for her is an ideal employer, one respondent states:

*Well would be like very friendly people, you know, people I feel comfortable to be around and to talk to. That's important because I am a caregiver here. I am far away from my family. I am not in my country. This is not my language. So that's what I would expect (a current Peruvian live-in child caregiver 27).*

Filipino respondents are more likely to expect a family like relationship with employer given the emphasis of their culture on family values.

*First of all not discriminating because of my ethnicity and my origin and because I came from another country. Secondly they must treat the caregivers not only as human beings but as a family because we are looking after their kids. If we don't treat their kids or their parents as our very own then it would be not the same the way we care for our family. So we want to be treated the same way that we treat their family members because in our country even our neighbours we treat them as our family members, our friends, our friends' parents are like our parents already (a current Filipino live-in elder caregiver 19).*

While the above outlined expectations of workers with regards to characteristics of the employer are reported by both live-in child and elder caregivers, some expectations are care-specific. For instance, some child-live in caregivers maintain that ideal employer is one who works, leaving their children fully in their charge.

*Perfect employer? You work nine to five o'clock and you take care of the kids. The best employer is working. You take care of the kids. Have fun with kids. I mean the best employer for me is not at home because it will give you a hard time because then everybody has different way to work*

*with kids, right? I will be different for my kid than somebody else. And if I know somebody else could take of my kid like that then I will say oh I don't like when she's doing that. You know? So for me the best employer is working (a current Polish live-in child caregiver 12).*

### **7.2.6 The Process of Changing the Employer**

Many of the respondents went through the process of changing employers. This was more the case with those taking care of kids than taking care of old people as they were more likely to be fired or leave a job. They had to leave due to one or the more of the following reasons: very challenging working and living conditions (such as working overtime without being compensated appropriately, being discriminated against by the employer, having an employer who do not pay taxes for them, lack of food and privacy in an employer's home, etc), employer's financial problems which lead to inability to further afford a live-in caregiver, employer's children outgrowing the age when nanny is needed, and some major conflict with an employer that could not be resolved successfully. In the case of live-in elder caregivers, change of the employer happened mostly due to elderly person being moved to a nursing or retirement home, or their death.

After live-in caregivers resign or are fired, they have to find another employer, with an offer of employment validated by the ESDC and the CIC and then obtain a new federal work permit, which may take up to a month, during which they are not allowed to work. Finding a new employer is often very hard.

*That's the problem [finding a new employer). Every time I looked for a job it takes me for six months or so. It's really hard. Like I'm really looking for a job that will last for me. That's always what I'm looking for.*

*That's why it takes me a while to get a job (a current Filipino live-in elder caregiver 20).*

Surprisingly, the cost of work permit (which at the time of the interviews was \$150 and now it is \$155) has not been seen as problematic by interviewed live-in caregivers.

While for some of interviewed live-in caregivers the process was relatively short, many report that it took them much longer to complete the process. In particular, the process of changing the employer as reported by my participants is somewhere between a couple of weeks to six months. The delay in the process is sometimes due to live-in caregiver's lack of information about the process or/and simply bad language skills that make available information relatively useless.

*Even you have this information sometimes language is difficult for me and I don't understand. Even when I talk with you sometimes I don't understand the question. You know what I mean? I think all care givers should have somebody to take care of the program and they have somebody to, discuss something about this job live in caregiver program; somebody who knows this program. Somebody where you can go and say, oh what I have to do (a current Polish live-in child caregiver 12).*

Sometimes the delay in the process is simply a result of employers' reluctance to release a good reference letter after they fired a caregiver.

*Yes, changing the employer was very slow but I found it out probably it was because of the reference. So maybe it's hard here I think when you get in a situation the employer fire you as a nanny then it's really hard for you to find another family because of the reference (a former Slovakian live-in child caregiver 15).*

### **7.3 Intersectionality: How Does It Help Us Understand Working Experiences of Live-in Caregivers in Canada?**

As already mentioned above, given the live-in arrangement of LCP workers, with its emphasis on networks, network theory is not helpful in helping us to understand their working experiences. However, intersectional approach lends itself well to explaining one aspect of their working experiences and more specifically- *discriminatory* type of relationship that some live-in caregivers develop with their employers.

#### **7.3.1 Discriminatory Relationships**

This type of relationship is characterized by abuse (physical and psychological) and discrimination of live-in caregiver by the employer and has been reported more by live-in child caregivers than those taking care of elderly. While none of my respondents experienced physical or sexual abuse, many complained about being shouted at or insulted by their employers. This often happened in the cases when live-in caregiver asked to be paid for overtime work, sick leave or vacation time.

As already outlined in the theoretical section of the thesis, an intersectional approach accounts for multiple and conflicting experiences of subordination and power by placing an emphasis on how one's standing in different hierarchies of difference (gender, race, ethnicity, etc.) shapes one's life experiences (Baca Zinn & Thorton Dill, 1996; Crenshaw, 1991). In this way, intersectionality helps us see that the discriminatory relationship that live-in caregivers develop with their employers is often based on unequal power that employer and live-in caregiver hold in terms of their standing in the cross-



cutting hierarchies of *gender, race, ethnicity and citizenship*. Employers often use gender and race/ethnicity as a way to mark the difference between them and live-in caregivers which serves to them as justification to discriminate against and abuse these workers. Such discrimination is often reflected in greater expectations placed on worker in terms of workload and aggravated living conditions.

*If I am a man they don't expect more jobs than I am woman I think. It's about gender. Because if man is care giver they usually want to play and am not sure they ask for huge cleaning (a former Slovakian live-in child caregiver 16).*

*The parents used to compare me with Dora like I'm dark like Dora. I mean the dad used to say 'oh [name] looks like Dora'. She's black and Dora is black. They were racist. Like I said there was always a difference between them and me and they tried to mark that difference for the kids (a former Peruvian live-in child caregiver 14).*

*They [employers] turned off the heater [because she asked them for her overtime and vacation pay]. I sacrifice for more than a week from sleeping with too much clothes. I was very tired with the sleep, with so many socks on my feet, and too much pyjama with me in order to survive. Because if my employer is not discriminating at all she would not do it to me because especially that time that they turned off the heater. They are thinking that I cannot feel cold. I think that was the thing. Maybe they are thinking because we have different skin colour, we cannot feel cold (a current Filipino live-in child caregiver 8).*

In some cases, being of different skin colour or ethnic background than employer can even result in a loss of a job for live-caregiver. As the following quote exemplifies, this can happen even in the cases when discrimination is not overt.

*I told you that the gentleman did not like an African. He was a German. He was talking to me like that so you feel indebted. You feel you are like useless. You are not a person who is needed in the place. I felt that I was not wanted. But I was told that because I did not know the driving I had to stop that job. And in the process for myself I discovered in the process*

*they were already bringing a German [live-in caregiver] and the papers were all done by the employer. I don't know whether she thought I never knew how to read. She left papers carelessly and then I saw the letter when she was coming and everything so that is the time when I told the agency I can see signs and symptoms. That one I was feeling very uncomfortable to tell you but I but it is good for the Canadians to know that there are some people who don't like to see blacks (a Kenyan current live -in elder caregiver 26).*

Interestingly, the discrimination by the employer was reported only by female live-in caregivers I interviewed. Two male live-in caregivers that I interview report that they have never felt discriminated on the basis of their gender, race, ethnicity and citizenship.

An intersectional approach also emphasizes that the relational aspect of dominance and subordination (Baca Zinn & Thornton Dill, 1996). By directing us to examine the simultaneous impact of gender, race and ethnicity this perspective helps us comprehend that privilege of some people in the society are dependent on the oppression and exploitation of others (Dill, 1987; as cited in Thornton Dill & Baca Zinn, 1997). As most of the employers of the live-in caregivers are Canadian white females, they tend to rely on their racial /ethnic privilege to escape the subordination by patriarchy and oppress and abuse female live-in caregivers they employ.

*When I just came here I was being asked by my lady employer whether know how to ride a bus. That is the way that they look at us. Being Filipino is we do not know nothing. You know how to eat grapes? Do you have fruit in your country? For us it's not a good impact because she asked me is that in front of all her friends (a current Filipino live-in child caregiver 8).*

White female employers also often use the workers' lack of citizenship status for their own benefit. As live-in caregivers have only temporary status and would stand anything not to compromise their chances for permanent residency, they are unable to

confront employer's abuse. For instance, reflecting on her fear of losing her chances for permanent status if she asks her lady employer about the delayed payment, one Polish live-in caregiver says:

*I didn't ask because I am afraid. The thing is that you're afraid to do everything, you know, because you don't know what will be reaction, what they're thinking. Like for me I don't have any other option. I know I have so much time. I came here in April and if people are okay I will finish this program now. But I have to wait to finish this program (a current Polish live-in child caregiver 12).*

Moreover, the theory of intersectionality proposes that we should understand reality as taken from the experiences of many different groups of people. Thus, even though live-in caregivers are mostly women and as such share the same gender, they do not have the same rapport with employers as they come from different racial/ethnic backgrounds. More specifically, this perspective highlights these groups are not homogenous –they consist of many diverse ethnic groups which view and live the reality in their own way (Baca Zinn & Thorton Dill, 1996; Glenn, 1999). Despite the fact that all female live-in caregivers are disadvantaged and subordinated by patriarchy, some racial/ethnic groups are more advantaged than others. The following quote of Singaporean live-in caregiver illustrates how his experience differs from experience of Filipino live-in caregiver even though they share Asian ethnic background.

*I believe that my conditions are better because I am from Singapore because I can speak good English. So I feel that my conditions are better than other people's, like other live-in caregiver that is from Philippines. But I think not being able to speak the language well is actually a great disadvantage no matter where you come from because I have a friend from Japan that was here but because her English wasn't that good, like her first employment wasn't very smooth. So it's more like if you can't really communicate with your employer saying what you want like your working conditions you wouldn't get as much as what you wanted because you*

*can't convey your needs and your wants and your expectation of this job (a current Singaporean live-in child caregiver 29).*

In some cases, workers did not experience any discrimination by their employers, but they did by immediate or extended family members. For instance, one Slovakian live-in child caregiver reports how the mother of her employer did not respect her Slovakian ethnic background:

*...Was not problem that I am from Europe or Slovakia. Only when this old lady moved to house it was problem because she looked at me that I am really stupid and that my education is like garbage. Oh, she was very old lady. Eighty-five. And problem was she push her daughter, my employer, that I don't speak English. 'Fire her. She doesn't speak English and your children need excellent English speaking nanny'. And it was every day. And because my employer didn't want to fire and they start lying about me and really lying. Not true about me. And after I was really frustrated. I felt that she look at me that I am like something low. And because of this I left (a former Slovakian live-in child caregiver 16).*

Guided by an intersectional perspective we come to see that one's experiences of working in Canada as live-in caregiver are not only shaped by the type of care (childcare, eldercare) one performs, but also one's standing in the cross-cutting hierarchies of difference - namely the hierarchies of *gender, race, ethnicity* and *citizenship*.

## **7.4 Summary and Conclusion**

In sum, this chapter brings important insights with regards to one previously unexplored issue, namely- differences in working experiences between live-in child and elder caregivers. This research reveals that type of care has a significant impact on live-in caregiver's working conditions. In fact, interviews show that LCP workers caring for children experience more problems when it comes to employer's compliance with terms

of their employment contract than live-in caregivers working with older adults. Many live-in child caregivers complain that employers: 1) often do not respect benefits such as sick leave; 2) make them work overtime and do not compensate them appropriately for that; 3) expect them to perform additional work not stipulated by their job contracts and 4) do not pay them appropriately and on time. In contrast, most of live-in elder caregivers report that job contracts are fair and followed by their employers with the exception of statutory holidays.

Moreover, my research has shown that each type of care carries specific challenges that impact on one's experience of working as a live-in caregiver in Canada. Live-in child caregivers experience challenges related to early age such as different behavioural and disciplinary problems, problems with decision making, etc. Live-in elder caregivers experience problems related to old age of their clients such as dementia, aphasia, depression, death, etc. Thus, while LCP workers taking care of older adults seem to be at advantage in terms of employer's compliance with employment contracts, they may face greater issues at their job than those taking care of kids because of demanding, sensitive and deteriorating nature of the type of care they need to give to their elderly clients.

My research has also shown that by migrating to Canada to work as live-in caregivers, LCP workers experience *contradictory class mobility* (Parrenas, 2001). While their financial status increases, their occupational status declines.

In addition, my study has identified four types of relationships between live-in caregivers and their employers: *professional, in-between professional and friendly/family*

*like, friendly/family like* and *discriminatory*. *Professional* and *discriminatory* relationships with their employers were more reported by live-in child caregivers. Both those taking care of elderly people and those taking care of children report *in-between professional and friendly/family like* relationship with their employers. While both live-in child and elder caregivers report developing *friendly/family like* relationship with their employers, it has been revealed that older people tend to show more respect and appreciation towards live-in caregivers than that is the case with parents. These findings are in accordance with results of some international research on domestic workers (Glenn, 1986; Parrenas, 2001).

The interviews show that process of changing the employers is often a complex process because it often takes a long to find a new employer and process the paperwork for a new job.

While network theory does not land itself well to the issue of working experiences among live-in caregivers in Canada, the intersectional approach has proved to be useful in helping our understanding of such issue. In particular, by relying on intersectional approach this chapter, we have realized that one's experiences of working in Canada as live-in caregiver (and in particular, *discriminatory* type of relationship that some live-in caregivers develop with their employers) are shaped not only by the type of care (childcare, eldercare) one performs, but also one's standing in the cross-cutting hierarchies of difference - namely the hierarchies *of gender, race, ethnicity* and *citizenship*. Next finding chapter of the thesis will focus on living experiences of LCP workers.

## **Chapter 8**

### **Living Experiences of Immigrant Live-in Caregivers: Differences According to the Type of Care and Role of Social Networks**

#### **8.1 Introduction**

The purpose of this chapter is twofold. First, it aims to shed light on differences in living experiences in Canada between immigrant live-in caregivers who take care of elderly and those who take care of children. As the previous research has not differentiated between the different types of care (i.e., childcare and eldercare) and their impact on living experiences of immigrant live-in caregivers, it is important to explore this issue. Previous studies have shown that immigrant live-in caregivers face challenging living conditions while under LCP. In particular, past research has revealed that they often experience a lack of privacy, prohibitions regarding their living accommodations, personal movement and freedom of association, isolation and in some cases, abuse (Cameron, 1999; Granda, 1996; Granda & Kerr, 1998; Stasiulis & Bakan, 2003; Stiell & England, 1997). Still, most of the Canadian research that explores living conditions of immigrant live-in caregivers tends to treat them as a homogenous group, thus being unable to examine how different types of care influence their experiences of living in Canada. Coming to an understanding of this issue is important as it may suggest the need

for policy changes that would be responsive to differences in LCP workers' living experiences in Canada according to the type of care.

The second purpose of this chapter is to examine the role of social networks in the living experiences of immigrant live-in caregivers. We possess relatively limited knowledge on the role of networks in the process of adaptation of LCP workers to hard living conditions in a new country.

Some of the research examining living experiences of LCP workers is a theoretical. Some of the studies focusing on this issue that rely on sociological perspective use an intersectional approach (Langevin and Belleau, 2000; Welsh, Carr, Macquarrie & Huntley, 2006). None of the past studies, however, has relied on some sociological perspective (such as, for instance, intersectionality) in conjunction with social network theory in examining their experiences. Therefore, in examining the role of social networks in living experiences, I rely on social network theory and more specifically on the concepts of *strong* and *weak ties* as conceptualized by Granovetter (1973, 1983) in his *strength of weak ties* argument. In particular, Granovetter (1983) argues that “weak ties provide people with access to information and resources beyond those available in their own social circle; but strong ties have greater motivation to be of assistance and are typically more easily available” (p. 209). Granovetter (1983) also asserts that marginalized populations are more likely to rely on strong ties, than do others, “which makes them lose the advantages associated with outreach of weak ties” (p. 213).

I find that Granovetter's concepts of strong and weak ties are very useful in the examination of the role of social networks in the living experiences (and more



particularly role of different ties in such experiences) among LCP workers. Still, my research shows that these concepts are insufficient as they do not consider the role of the three factors that impact on such experiences: 1) content of the information transmitted through the tie; 2) formal networks; and 3) cross cutting hierarchies of difference (i.e., - *gender*, *ethnicity* and *citizenship*). An intersectional approach serves us greatly in our exploration of the third factor cited above. On the basis of that I conclude that combining concepts of *weak* and *strong* ties as envisioned by Granovetter with intersectionality can enrich our understanding of living experiences of immigrant live-in caregivers in Canada.

I start this chapter by outlining my findings with regards to differences in living conditions of LCP workers according to the type of care. I find that both live-in child and elder caregivers experience challenging living conditions in the home of the employer and limited social lives. Still, live-in elder caregivers experience more restrictions on the freedom of movement and greater social isolation. Next, I discuss my findings with regards to the role of different social networks in caregivers' experiences. I find that strong ties with family and friends (i.e., - informal networks) play the most important role in the process of their adaptation to challenging living conditions in Canada. In contrast, the role of formal organizations in the living experiences of LCP workers is limited. I close the chapter by summarizing empirical and theoretical findings of my research.

## 8.2 Differences in the Living Experiences according to the Type of Care<sup>22</sup>

### 8.2.1 Live-in conditions

My study shows that both live-in child and elder caregivers in Canada face many challenges with regards to their living conditions. Even though according to the rules of Live-in Caregiver Program employers are responsible for providing acceptable accommodation (a separate, lockable room) and food, my interviews show that these rules are often not respected.

Both live-in child and elder caregivers complain of violation of privacy in the home of the employer.

*My room did not have a lock. And so there were times even on the weekend when I just wanted to sleep in and I had one of the kids barging into my room. That didn't happen once or twice. It happened many, many times (a former Indian childcare live-in caregiver 31).*

*I have my own room, yes, but it's always open so I would know. Because my room and her [old lady's] room are facing. I can see in her room from my room. And I would know what she is doing (a former Filipino live-in elder caregiver 17).*

Some of them report that their employers used to sneak into their rooms to look for missed jewellery and clothes as they suspected that live-in caregivers stole these items.

Even those with separate, lockable rooms report experiencing some other problems with regards to their accommodation. Some had rooms in the cold and dark basements, without heating in the cold, winter months so that they had to sleep with their

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<sup>22</sup> Many findings presented in this and the following section have been reported in the IRPP paper titled “Economic and Social Integration of Immigrant Live-in Caregivers in Canada written by me and my co-author Dr. Bourgeault. For example, see Atanackovic and Bourgeault, 2014.

clothes on. One live-in caregiver reports having a room in the basement, beside the employers' gym which disturbed her sleep, as they often exercised during the night. While the problems with accommodation were reported both by live-in child and elder caregivers, only a few live-in child caregivers complain about not be given enough amount of food. One live-in child caregiver, for instance, recalls that her employer even used a camera in the kitchen to monitor the amount of food she was taking each day. Another live-in child caregiver reports that she was allowed to eat with the employer's family only on the days when she helped with food preparation. Some complain about being provided with food that they are not used to.

While most of both live-in child and elder caregivers are allowed to enter all rooms in the house of the employer, some face certain space restrictions. Some live-in child caregivers are prohibited from entering employers' bedroom. One live-in caregiver explains how the elderly couple for which she cared tried to mark the difference in status between her and them by prohibiting her from sitting at the same table with them during the meal time:

*I cannot use all the rooms in the house. And I never sit at the dining table. Never. I don't know because that is the rules, only for the family. But for my previous two employers they allow me to sit and they don't feel that I am a servant or lower than them (a current Filipino live-in child caregiver 23).*

Living in the employer's home leads to feelings of uneasiness among live-in caregivers due to numerous restrictions imposed on them by employer. As one live-in caregiver has put it:

*I felt that it's not my home. .... even though during my off time I still need to think about the family, like sometimes I can't take showers when the*

*kids are trying to sleep because they can hear me so like I have to wait. I can't like do whatever I'm free to do. Or sometimes I want to cook something or make something or bake something at night, it will be too noisy and they will advise me not to do it. Yeah, so I feel that even though I live here but ... I don't have complete entitlement to this place because like after hours I have to be careful with what I want to do (a current Singaporean live-in child caregiver 29).*

Due to the live-in arrangement, freedom of movement is greatly restrained in the case of both child and elderly caregivers. Even though live-in child caregivers can leave right after their working hours, they still have to respect certain curfews.

*I can go out during the week days, even week days at night after work. But I have a curfew I can't come home. I can go out and party and come home pretty late. I have a curfew like 11:30. I have to be home by 11:30. I have an early night and not be tired the next day when I'm caring for the kids. But for the day off I can do whatever I want (a current Singaporean live-in child caregiver 29).*

The interviews reveal that restrictions on freedom of movement are greater in the case of live-in elder caregivers. While live-in child caregivers can use the evening for relaxing and socializing, live-in elder caregivers have to watch the elderly all day long as they are often sick and as such very dependent on the live-in caregiver. For instance, asked whether she can leave a house on some other days except for days off, one live-in elder caregiver explains:

*No, I'm not because, you know, it's elderly couple. They need me all the time. So I'm not allowed (a current Filipino live-in elder caregiver 20).*

While weekends are supposed to be live-in caregivers' free days, both live-in child and elder caregivers report that they get the occasional call from the employers on their days off. In most cases, these calls are made with purpose of finding out where live-in caregiver has put certain objects. Sometimes live-in child caregivers are called to go

back to babysit. Live-in elder caregivers are sometimes called to go back to work if the old person does not feel well. Sometimes they are paid very poorly for their extra work during the weekend. Reflecting on that issue, one live-in child caregiver explains:

*The employer did text me on Saturday. She texted me. [name] you come home because we are going somewhere. Is it okay for you to look after the kids? So sometimes I'm here. I am rushing going back home. It happens to me so many times. I did not erase the text. But they only pay me ten dollars. You see, I am here in Hamilton and I need to pay for my bus going there and then pay for my taxi going to the house and then they will just pay me ten dollars from six o'clock to eleven o'clock in the evening (a current Filipino live-in child caregiver 8).*

Many of the live-in caregivers report being allowed to bring guests into the employer's house after they ask for permission and under certain conditions such as that guest is family member, female, etc. Still, some of the respondents reveal that employers prohibit them from bringing guests into the house. This is mostly the case with child-live in caregivers probably out of the parents' fear for the safety of their kids. Some live-in elder caregivers report that elderly people like visitors as they are often lonely and would like to share their thoughts with somebody else, in addition to live-in caregivers.

Most of the respondents report that they were allowed to use employer's phone to make local calls, while they used calling cards to call their families and friends in their country of origin.

### **8.2.2 Social lives**

Most of the live-in child and elder caregivers interviewed have very limited social lives, due mostly to the live-in requirement that keeps them restricted to the employer's home for most of the day. As most of them do not work during the weekends, they use

these days to relax and socialize with their friends. When they meet, they usually go together to movies, shopping and dinners. Most of them report seeing their friends only on weekends. Some of them see them only once or twice per month. One live-in caregiver reveals she manages to see her friends only on big holidays such as New Year or Christmas. Those who tend to work on weekends do not have any social life as most of their co-ethnic friends who are live-in caregivers work on their days off. As one live-in elder caregiver has put it:

*No I don't have social life. All my girlfriends their off is weekend, right? Sometimes I meet my girlfriends but it's very, very seldom. I do not see them every week. ... That's it. I feel lonely. Yeah. I feel bored (a current Filipino live-in elder caregiver 33).*

They report phoning their friends to maintain connections with them. Not having enough opportunity for socializing coupled with hard working conditions and being away from family leaves live-in caregivers feeling socially isolated. As one live-in caregiver has put it:

*Sometimes I feel isolated probably because of the fact that I don't have many friends, I'm far away from my country, and I told you the family sometimes if not very friendly, very open to me. So yeah, sometimes I feel isolated. Sometimes if working long hours it's like they're taking away your life. It seems that you don't have time for yourself. Real isolated. You say 'I want to go out' but I can't because I have to stay. Have dinner? I can't because I stay longer on my job. But if I work overtime, they will pay my overtime but it's not the money all the time. Sometimes you have to balance your life as well, don't keep on working and working and working. I want to socialize with other people as well (a former Filipino live-in child and elder caregiver 30).*

Even though in general live-in child caregivers have poor social lives, compared to live-in elder caregivers they are at an advantage as they often use their evenings when the working hours are over to meet with friends. Live-in elder caregivers do not have such

opportunities as their clients are often bedridden and they are required to stay with them in the night time.

### **8.3 Social Network Theory: Role of Strong and Weak Ties in Living Experiences of Live-in Caregivers**

According to *strength of weak ties* argument developed by social network theorist Granovetter (1973), weak ties have a special role in helping person gain novel information and resources. In particular, he explains that those to whom people are weakly connected are more likely to be involved in the circles which differ from their own. Consequently, *weak ties* are more likely to lead the members of a network to new “information and resources beyond those available in their own social circle” (Granovetter, 1983, p. 209). While in his original argument he sees only weak ties as beneficial for an individual, in his subsequent revision he assigns some value to the *strong ties* as well. In particular, he argues that strong ties play a unique role as they “have greater motivation to be of assistance and are typically more easily available” (Granovetter, 1983, p. 209). He further asserts that strong ties are more likely to be seen as useful by the people in situations of high insecurity, such as employment difficulty, emergencies and poverty. Based on previous research, he concludes that marginalized populations tend to rely more on strong ties than do others, “which makes them lose the advantages associated with outreach of weak ties” (p. 213). Thus, his argument implies that while strong ties can be helpful to people in the state of high insecurity, they are not providing them with new information and resources.

Given their precarious migration status and extremely challenging working and living conditions they face in Canada, live-in caregivers could be classified as a marginalized population. Based on Granovetter's conceptualization of weak and strong ties, we can assume that strong ties with family and friends play the most important role in the process of live-in caregivers' adaptation to hard conditions of life in Canada.

### **8.3.1 Strong ties**

The above outlined assumption based on Granovetter's argument has been reflected in the experiences of my research participants. My study shows that strong ties with family and friends (informal networks) have the most significant role to play in helping live-in caregiver to adapt to their challenging living conditions while in LCP. In particular, strong ties with family and friends characterized by high level of emotional attachment and intimacy are more frequent among live-in caregivers than weak ties with people outside their closed circles.

Live-in caregivers I interviewed maintain strong ties mostly with co-ethnics (many of whom are current or former live-in caregivers) whom they know for a long time – either they met them in their home countries or other countries in which they temporarily worked before coming to Canada. Asked who her friends are and how often she meets them, One Filipino live-in caregiver who used to work in England before coming to Canada responds:

*Every day off. And some of my friends are in Toronto. Some of my high school friends also. And they're also care giver. And some of them are immigrants from London and they just came here as immigrants as well (a former Filipino live-in child caregiver 10).*



Some of live-in caregivers' friends are other live-in caregivers they met more recently, upon coming to Canada, but to whom they have strong emotional linkage as they face the same challenges with regards to their working and living conditions. In accordance with Granovetter's argument on the role of strong ties among marginalized populations, live-in caregivers tend to rely mostly on these strong ties (their family and friends) because "they are more easily called on and willing to help" in situations of high insecurity that characterizes their life as caregiver in Canada (Granovetter, 1983, p. 211 ). As they face complex realities of life in a new country (complicated by their precarious migration status), having somebody close enough to whom they can confide and complain about their conditions of life in Canada (including their relationship with employers) is very important for them.

*Interviewer: Could you tell me whom do you call when you face some problem?*

*Respondent: A person who is close to me. My friend. I have one friend that's really close to me. Yeah. She is not here in Pembroke, she is in B.C. Vancouver. I call her. Yeah.*

*Interviewer: So what kind of issues would be these? What kinds of problems you call her for?*

*Respondent: Uh, sometimes because I just want to talk. Family problems sometimes. Sometimes financial. Sometimes work. We talk about. She and me talk about our problems. We call each other (a current Filipino live-in child caregiver 11).*

Church is an important source of strong ties with people from their countries. Some of them reveal attending the church with other co-ethnics with a purpose of socializing or /and getting much needed spiritual support. How their church membership promotes strengthening of strong, ethnic ties is evident from the following quote:

*Yes, I do feel lonely sometimes. But more when somebody in the family sick or there are slight problems in the Philippines that's when you feel like oh, it's so hard to be so far from home. But other than that it was just fine because like in the Philippines Christmas is the most important thing, family gatherings and all. We always make sure that we are... because I am... we have a pastor and there are lots of us in that church who are live in care giver so we do not have our own families so during long weekends or special holidays we all go to her [pastor's] house... On Sundays I go to church. But during special occasions we spend the day at her house. My social life is just around my church member friends. Just because most of us come from the same province back home. It's more, it's more than friends. We are treating each other as family (a former Filipino live-in elder caregiver 17).*

A few of them report developing a strong tie with a priest of their congregation. Reflecting on the role of priest in helping her cope with an overly demanding employer, one live-in caregiver states:

*Sometimes my employer is so hard and I just give my mind to a priest because he is my spiritual advisor so it helps me a lot that you should have patience, a lot of patience for this kind of work. Because I got to work. So I just ask my spiritual advisor so he will tell me 'Just be patient. She's an old lady (a former Filipino live-in elder caregiver 22).*

The interviews reveal that many LCP workers also maintain their strong ties to family and friends back home. They often call them by phone or Skype to tell them about the problems they face in Canada and escape the loneliness they feel living in the home of the employer.

### **8.3.2 Weak ties**

In his theory of strength of weak ties, Granovetter (1973) asserts that the two common sources of weak ties are work settings and formal organizations (Granovetter, 1973). As live-in caregivers work in employer's homes in which they are isolated for the

greatest part of the day and have very limited contact with few formal organizations (an issue discussed in more detail below, in the next section of this chapter), it is not surprising that most of their ties are to the people from their respective ethnic groups. Granovetter (1973) argues that when left unbalanced by weak ties, strong ties lead to isolation of the network from broader segments of society. And indeed, my interviews show that by overly relying on strong, ethnic ties, immigrant live-in caregivers are unable to develop weak ties with people outside their ethnic communities. Only few of the interviewed live-in caregivers have ties with people outside of their respective ethnic group. These ties to non-ethnics are weak as they tend to meet these people rarely and /or and do not show any signs of emotional attachment to these non- ethnics.

*Interviewer: Do you have Canadian friends?*

*Respondent: Yes. Yes but just normal friends, not close friends.*

*Interviewer: Just like acquaintances?*

*Respondent: Yeah, just maybe I'll call him. How are you? Just ask. Not always talk very private conversation (a current Chinese live-in child caregiver 13).*

Sometimes live-in caregivers develop weak ties with representatives of immigrant organizations or recruitment agencies as they come into contact with these people occasionally (i.e., two or more times) when facing some work related or immigration paper issues. For instance, one respondent relied on such a weak tie with a settlement worker from one immigrant organization when her employer refused to pay her. She explains that the worker helped her resolve the issue by advising her to contact Ministry of Labour.

Thus, live-in caregivers maintain only a few weak ties with non-ethnic people and rarely rely on formal organizations some of which (i.e., immigrant settlement services, recruitment agencies, live-in caregiver organizations) could promote the development of weak ties with people outside of their own ethnic group. Consequently, these scarce weak ties tend to become overshadowed by multiple strong ties as exemplified by the following quote:

*Interviewer: Okay. So did you have at that time any Canadian born friends?*

*Respondent: Sorry?*

*Interviewer: Did you have any Canadian born friends? Canadians?*

*Respondent: Yeah I had. But I met them less often. I was socializing more with my friends from my origin country (a former Slovakian live-in child caregiver 15).*

Thus, in accordance with Granovetter's argument, maintaining connections solely with people from their ethnic groups precludes live-in caregivers from achieving full social integration.

Clearly, concepts of strong and weak ties as proposed by Granovetter in his argument on strength of weak ties are useful for our exploration of the issue of living experiences among immigrant live-in caregivers in Canada. Still, there are three reasons for which these concepts are not sufficient to lead us to a full understanding of this issue.

First, contrary to Granovetter's conceptualization of weak ties as the only conduits of novel information and resources, my research show that strong ties can be equally useful in that sense. Second, while in his argument on the strength of weak ties Granovetter considers the role of interpersonal ties of different strength in achieving an individual's goals, he fails to consider the role of formal organizations in such

experiences. Indeed, he only discusses formal organizations in relation to their ability to promote the development of weak ties, not as a subject in its own merit. Third, by emphasizing the strength of ties one forges with people around him/her, Granovetter's argument does not lead us to examine the role of different hierarchies of difference in living experiences of LCP workers in Canada. In the following three sections, I turn to discussion of each of these issues.

### **8.3.3 Strong Ties do Supply Novel Information and Resources**

As we have seen, in accordance with assumption of Granovetter's theory, strong ties do play the most important role in the process of adaptation of LCP workers to challenging conditions of life in Canada. Given that friends and family are easily accessible and most motivated to help, they are greatly called on by live-in caregivers for purposes of emotional support and socializing. Still, Granovetter's argument on the strength of weak ties also implies that while members of marginalized populations may find it useful to rely on strong ties to get by in the times of crisis or emergencies characterized by high level of uncertainty, the strong ties are likely to provide them with information they already possess. According to Granovetter (1973), the marginalized are best served by weak ties which can provide them with non-redundant information and additional resources.

My research shows that in contrast to Granovetter's view of weak ties as the transmitters of useful information and resources, strong ties play an equally important role in supplying live-in caregivers with such information and resources. In particular,

live-in caregivers often ask their friends and relatives for the advice regarding the problems related to their immigration papers, jobs or any other types of problems is very important for them. Contrary to Granovetter's view of strong ties as transmitters of redundant information, information they receive as a response is often new to them and as such very helpful.

*I have to find a new job. How to apply for. How to apply for work permit. For immigration. Is a big problem for us. Yeah, always ask them [friends] for this. How how to apply for. And if my boss don't treat me very well I will ask my friend how to do, how to fix it, how to figure out. I think almost all problems from my work, my job (a current Chinese live-in child caregiver 13).*

*Actually when I had a little car accident I was with my friend in the car at the time and we stopped by at a parking lot and we were... like she can get very stressed out and I found out okay, I have to do something, I have to do something. And I found it out that I have to call my aunt because she is living in Canada for a very long time and she knows about all the laws and procedures. So then I just found it easy to call her and ask her for help. Look, I had an accident and I don't know what to do. So she explained me everything what should I do (a former Slovakian live-in child caregiver 15).*

In addition, friends and family provide live-in caregivers with financial and accommodation assistance in the times of hardship such as the period between the two employers. While some relied on their savings, most stayed with or borrowed money from family or/ and friends to transition the period of unemployment.

*Interviewer: Okay. So how did you support yourself during those three months of unemployment?*

*Respondent: I stayed with my friends [Filipino friends] and they helped me out so when I had this new permit then I moved to my new job (a current Filipino live-in elder caregiver 24).*

Thus, immigrant live-in caregivers do get access to new information and resources through strong ties which is not recognized by Granovetter. The theorist's failure to

recognize the usefulness of strong ties as conduits of non-redundant information and additional resources could be explained by the fact that he does not take into consideration the content of the information transmitted through the tie. As mentioned above, LCP workers are mostly in the contact with other, current or former live-in caregivers. Given that these contacts have faced the same problems residing in Canada as live-in caregivers, they possess useful information that they may pass on to their fellow live-in caregivers. Also, given that they understand and sympathize with hard economic situation of their fellow live-in caregivers, they are willing to help live-in caregivers financially, whenever they can.

#### **8.3.4 Formal Organizations**

Even though in his theory of strength of weak ties Granovetter discusses only interpersonal ties, the role that formal organizations play in people's experiences is also important to consider. The interviews with live-in caregivers show that their involvement with any kind of formal organizations is limited. Still, as we will see, when live-in caregivers rely on these organizations, they find them helpful with the process of adaptation to the challenges of life in Canada.

Immigrant settlement services play a very limited role in the adaptation of live-in caregivers to challenging living circumstances. Very few immigrant live-in caregivers use the services of immigrant settlement organizations. Many of them are not even aware of their existence. Among the few who know about these organizations, most do not know that some of these occasionally host some information sessions (conducted by CIC) on

rights and responsibilities of LCP workers. Given that immigrant settlement organizations are geared mainly toward assisting those with permanent status, some live-in caregivers assume that they cannot reap any benefit from these institutions. Consequently, they are reluctant to visit them. Moreover, even though live-in caregivers in Ontario are officially eligible to use almost all settlement services (the only exception is language training), such services are not widely available to LCP workers due to limited funds.

Thus, some live-in caregivers recommend that more information should be given to live-in caregivers in terms of their eligibility for services provided by immigrant organizations while under the LCP. Such information, they note, should be provided in different languages, as many live-in caregivers have poor English language skills and cannot benefit from information given solely in that official language.

*Interviewer: Okay. Are there any organizations serving immigrants or migrant or live in care givers that you asked for help?*

*Respondent: Actually I didn't know and I have to probably tell you one more time that we need to get more knowledge where you can go and ask for help. Because right now I'm working at this immigrant organization and I didn't know [at the time I was live-in caregiver] that they are helping care givers as well. So maybe the first time when the care givers come to the country they should get orientation about like health cards, driver's license, what are the agencies they can ask for help. If they cannot read anywhere in their agency or fliers where to go and ask for help if they don't know anybody. Even numbers like to call emergency or call hospital if something will happen. It will be very helpful to have more information on that and about like the English courses (a former Slovakian live-in child caregiver 15).*

Those few who dealt with immigrant organizations reveal that they are useful as they can offer information regarding the rights and responsibilities of live-in caregiver, administer some training and assist them with immigration paperwork.



*Interviewer: So is there an organization serving immigrants in your neighbourhood/city?*

*Respondent: Only here in Burlington right now. The Halton Multicultural Council.*

*Interviewer: So what kind of issues they help you with?*

*Respondent: In terms of the conditions, your rights and new laws about the salaries. Everything they inform us about. They disseminate information about our rights, everything. Help us about some trainings just like CPR to help us to cope with our nature of work and they give some advice to those other girls who need some assistance about the papers (a current Filipino live-in child caregiver 23).*

Some live-in caregivers report staying in touch with recruitment agencies that assisted in finding them employment. They contact them when facing some job related problems, to ask for advice regarding immigration paperwork or to find a new employer.

Many of the interviewed live-in caregivers are not aware of the organizations serving specifically immigrant live-in caregivers. Few went to these organizations only once or twice to attend some social events hosted by these agencies. Some who live in small towns explain that that is expensive for them to go to bigger cities where these organizations are located. Not only they have to pay the transportation costs, but also the lodging and food as social events are often organized late in the day and they have to stay overnight. For some of them it is impossible to reach these organizations as often there is no public transportation available for the intended destination and/or it is too time consuming to travel to another city:

*...Intercede is good. I used to go there for the meetings before but since I moved to Georgetown I have problems with transportation. There is no public transportation there and they said they didn't mind to give me rides but when I asked them for a ride they mind, they were mad. 'Oh I'm busy' or 'I can't do this' or they say 'Why don't you call a cab?' So I had*

*limitations with transportation there. That's why I wasn't going out much. And I wasn't going to Toronto. I went to couple of social gatherings but not very often because to go from here to Toronto is like an hour, take the subway to the office. Wilson is like another hour, half an hour. So it's a long... (a former Peruvian live-in child caregiver 14).*

Few are members of ethnic associations that often assist them by providing directions on where they can look for certain information or advice with regards to challenges they face in their jobs (with regards to whom to contact or where to complain when work related problems emerge). One respondent felt that stigma that her co-ethnic friends attach to the live-in caregiver occupation precluded her from actively participating in an ethnic association she joined:

*... I signed up for this Singaporean overseas. But I couldn't really connect to my fellow Singaporeans because pretty much nobody will be a caregiver in Canada so I couldn't connect with them because when I told them I am a caregiver they're like 'What is she doing here?' You know those looks? So I found myself moving away from my fellow Singaporeans like a lot from what I choose to do (a current Singaporean live-in child caregiver 29).*

Thus, formal organizations do not play significant role in the process of LCP workers' adaptation to challenges of life in Canada. Still, when live-in caregivers turn to these organizations, they get provided with relevant information and opportunities for socializing. Thus, it is important to consider the role of formal organizations in the experiences of LCP workers - the issue neglected by Granovetter's theorizing on interpersonal ties of different strengths.

## 8.4 The Intersectional Influences of Gender, Ethnicity and Immigration Status on Living Experiences

Although generally useful for our examination of role of networks in the living experiences of immigrant live-in caregivers in Canada, Granovetter's concepts of strong and weak ties do not direct us to explore the role of different hierarchies of difference in living experiences of LCP workers in Canada. As already mentioned above, the intersectional approach emphasizes the connection between privilege and disadvantage. In this way, it guides us to realize how live-in caregivers' disadvantaged position in the cross cutting hierarchies of gender, ethnicity and citizenship comes to shape live-in caregivers lives upon immigration, leading to many difficulties. Most of live-in caregivers I interviewed are Filipino women. As cultural expectations in Philippines dictate that women take a role of breadwinner, they are forced to migrate, leaving their children and families in the country origin to care for children of wealthy employers. This often results in disruption of the family unit. Such disruption is reflected in the process of divorce that often follows the migration of female live-in caregivers. Reflecting on that issue, one Filipino woman working as live-in elder caregiver in Canada explains:

*We sacrificed to come here as caregivers. One disadvantage also is that we leave our own children, leave our own family, and go to another place and take care of different people which is hard for us. So we feel lonely but we have to sacrifice because we need the money to send back to our children, to our family, in order to give them a better living. One of the most difficult things is that we women are coming out from our country to go to another country and work and leave our husbands. This happened to me. So now marriage is broke. So this is the most difficult problem (a current Filipino live-in elder caregiver 24).*

Having temporary migration status while under the program further complicates their living conditions. Immigrant caregivers live in Canada under great emotional pressure as they miss their families greatly and feel remorse because they are not able to be there for their children. Still, they endure such hardships given that they know that by working as a live-in caregiver in Canada they can secure better lives for their children whom they left behind in the country of origin. They are also aware that after two years under the program they will be able to get more permanent status and bring them to Canada. Reflecting on how having patience is important for live-in caregivers to succeed in their intention to get permanent status and secure better lives for their families, one of the former Filipino live-in caregivers states:

*You know, sometimes to be a live in care giver in Canada you need to be very patient, right? Especially if you are a family woman. Most of these people are women, right? They come to Canada and work and they have families back home. They leave their family, their children, their husband in order to succeed in Canada because you feel homesick once you come first here, right? For the first few years you become so homesick. it's very hard leaving because you will be homesick. You'll be thinking of your children who go to school. You'll be thinking of your salary especially when it's not enough to send home for your children to go to school. These are the things that you are thinking. And sometimes if you are so weak you broke down... (a former Filipino live-in child and elder caregiver 2).*

Thus, intersectional perspective helps us to see that one's living experiences while under Live-in Caregiver Program are influenced not only by type of care (childcare, eldercare) one performs, but also his/her position in hierarchies of *gender, ethnicity* and *citizenship*.

Since social network theory does not emphasize intersectional influences of one's standing in hierarchies of gender, race/ethnicity and citizenship, it has not fully aided our

understanding of these experiences. Thus, as evident from this chapter, only by combining social network theory with intersectionality are we able to fully comprehend such an issue.

## **8.5 Summary and Conclusion**

In sum, this chapter brings important insights with regards to two previously unexplored issues, namely-- differences in the living experiences between live-in child and elder caregivers and the role of social networks (and more specifically different types of ties) in these experiences.

My study has revealed that the type of care has a significant impact on live-in caregiver's living conditions. In particular, my interviews have shown that both live-in child and elder caregivers experience very hard living conditions (such as violation of privacy, space restrictions and bad room conditions) while working in an employer's home. Still, freedom of movement and social life are more constrained in the case of live-in elder caregivers, as they are not allowed to leave house after working hours due to the vulnerable state of their clients.

My findings reveal that informal networks (family, friends) play the most important role in helping immigrant live-in caregivers to adapt to hard living conditions they experience while working under LCP. They provide them with various kinds of help, including emotional, financial and informational support. Compared to informal networks, formal organizations play a limited role in the process of their adaptation. Still,

when they are used, they prove to be helpful to LCP workers in terms of supplying them with useful information and opportunities for socializing.

By relying on the concepts of *strong* and *weak* ties as envisioned by Granovetter in his argument on the strength of weak ties, we are able to better understand the role of social networks in living experiences of LCP workers. Relying on Granovetter's concepts also makes us realize that the lack of weak ties with people outside live-in caregivers' ethnic groups precludes their social integration.

Still, my research demonstrates that even though these concepts are useful, they are insufficient to help us to come to a full understanding of living experiences of LCP workers in Canada for three main reasons. First, my study on experiences of LCP workers demonstrates that marginalized people in situations of uncertainty tend to successfully rely on strong ties to reach new information and resources which is not recognized by Granovetter's theory (1973, 1983) on strength of weak ties. Indeed, by neglecting the issue of content of the information received through the tie, Granovetter fails to recognize that strong ties as well may be valuable sources of new information.

Moreover, in his argument, Granovetter focuses only on role of the interpersonal ties in achieving the goals of social actors, thus neglecting the role of formal organizations in people's experiences. My study has shown that LCP workers have a limited involvement with formal organizations. Still, when they rely on these organizations, they find them helpful with the process of adaptation to the challenges of life in Canada.

Finally, as in his theorizing on the strength of weak ties Granovetter (1973, 1983) does not put an emphasis on cross-cutting hierarchies of gender, race/ethnicity and citizenship, this theoretical approach alone is insufficient in helping us to come to full understanding of living experiences of immigrant live-in caregivers. In that sense, the intersectional perspective has proved to be very useful as it guided us to see that in addition to the type of care, live-in caregiver's standing in hierarchies of *gender*, *ethnicity* and *citizenship* greatly influences his/her living experiences. Therefore, I conclude that combining concepts of weak and strong ties as envisioned by Granovetter with an intersectionality perspective can help us our understanding of living experiences among immigrant live-in caregivers in Canada.

Next and last finding chapter of the thesis will focus on live-in caregivers' integration experiences and more specifically, the role of social networks in such experiences.

## **Chapter 9**

# **The Role of Social Networks in Integration Experiences of Immigrant Live-in Caregivers**

### **9.1 Introduction**

The purpose of this chapter is to explore the role of social networks in the integration experiences of immigrant live-in caregivers in Canada. More specifically, this chapter examines the role that social networks play (both formally and informally) in: 1) the immigration process(es)<sup>23</sup> that lead their transition from temporary to permanent resident (PR) status and family reunification process; and 2) the processes by which they upgrade their skills and find employment after LCP (i.e.- labour market integration).

The previous research that examines the post program experiences of live-in caregivers has been relatively limited. As we have seen in the overview of the literature, these few studies identify certain pitfalls with immigration procedures that pertain to live-in caregivers' transition to permanent residence status such as high landing fees and long waiting periods to get permanent status (Alcuitas et al, 1997; Cohen, 2000; Grandea,

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<sup>23</sup> Here I use both singular and plural forms of the noun (i.e. – process (es)) given that when the live-in caregivers apply for permanent residence in Canada, in that same application they can request that their family members' permanent residence applications be processed at the same time. Still, it is also possible to sponsor family members later. Thus, while for some of them process of applying for PR and family reunification happen at the same time, some decide to bring family members only after they obtained PR status.



1996; Granda & Kerr, 1998; Spitzer et al, 2007). Previous studies also reveal certain factors that help aid the process towards permanent deskillling of immigrant live-in caregivers in Canada, such as lack of Canadian experience and strict immigration rules that preclude them from upgrading their skills while under the program (Alcuitas al, 1997; Spitzer et al, 2007; Zaman, 2006).

Still, such research does not reveal much about the actions live in caregivers undertake to improve their outcomes after the completion of the program. Past research is particularly silent on the role of social networks in the immigration procedures that pertain to their transition from temporary to PR status and the family reunification process. We also have a limited knowledge on the role of social networks in the process of their labour market integration (i.e.- process of upgrading their education to improve their labour market outcomes in Canada and finding a job) after they have completed the program.

In this chapter I rely in particular on the concepts of *strong* and *weak ties* taken from Granovetter's *strength of weak ties* argument (1973, 1983). While these concepts are very useful in helping us come to a better understanding of social networks (and more specifically the role that different ties play) in these integration processes, my findings show that there are other factors influencing such processes not considered by Granovetter's theory. These are: 1) the content of information transmitted through personal ties (influencing the process of obtaining permanent residency status and upgrading); 2) formal organizations; and 3) cross-cutting hierarchies of difference (influencing processes of upgrading and finding a job). An intersectional approach offers

significant insights to our consideration of the third factor cited above. On the basis of that I conclude that combining concepts of *weak* and *strong* ties as envisioned by Granovetter with intersectionality can enrich our understanding of process of integration of immigrant live-in caregivers into Canadian society.

I begin the chapter by reflecting on my findings with regards to various obstacles that immigrant live-in caregivers in Canada face with regards to the process of obtaining PR and family reunification, upgrading and finding a job. Next, I present my findings on the role that various informal (and more specifically, ties) and formal networks play in such processes. Informal networks assume the greatest role in all integration processes under consideration and are very beneficial to LCP workers as transmitters of relevant information and resources with regards to processes of PR application and upgrading. Even though informal networks of family and friends become a major source of assistance for live-in caregivers during the process of job search after LCP, the help these networks can garner is limiting for live-in caregivers. My findings show that at such points in time, heavy reliance of live-in caregivers on these close personal networks gets them trapped in low paid jobs such as working in a factory or food chains, babysitting and housekeeping. I finish the chapter by summarizing my empirical and theoretical findings.

## **9.2 Integration Processes in the Post-LCP Period**

### **9.2.1 Obtaining Permanent Residency (PR) and Family Reunification<sup>24</sup>**

#### ***9.2.1.1 Challenges***

The respondents reveal that there are many challenges with regards to immigration procedure(s) for obtaining permanent residency (PR) and family reunification. In particular, they argue that such processes are very long. While some of them reveal it took them about six months to a year at most to obtain PR status, for others the process took much longer. In the case of one participant, a year and one-half passed from the time he had first applied until the time of the interview and he still did not get any response from immigration authorities.

Many participants reveal that it may take them somewhere between 24 to 36 months to process the applications for their family members to be allowed to come to Canada. In addition, most of them complain about the overly demanding paperwork. In addition to fulfilling the requirement of 24 months of authorized employment under program, they have to collect many papers in order to apply for PR such as birth certificates, police clearance, records of medical examination and marriage certificate for themselves and each of their family members they wish to bring to Canada. Not only that,

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<sup>24</sup> Many findings presented in this and other sections of this chapter have been reported in the IRPP paper titled “Economic and Social Integration of Immigrant Live-in Caregivers in Canada”, written by me and my co-author Dr. Bourgeault. For a full reference, see Atanackovic and Bourgeault, 2014.

the majority of the required paperwork has to be supplied from their country of origin which prolongs the process.

*The challenges are just those paperworks and, you know, sometimes it's hard to secure this paperwork, licenses, marriage contract, it takes time to get them from back home... There are challenges, of course with obtaining that paperwork that they require for a couple. If you are married you need to prove the relationship, like that it is continuing and genuine. Like, you know, because the purpose of that is reuniting a family so how could you reunite a family that is not genuine relationship between the spouses, you know. So that's all a bit hard for us because we need to take photos and marriage contract, uh, history. Like you need to make a story in there what had happened few years ago, years and years ago. So yeah, like it's just more of the paperwork (a former Filipino live-in child caregiver 10).*

The situation is even more complex for applicants with complicated marital situation. One Filipino live-in caregiver who was abandoned by her husband in Philippines describes how such a situation precludes her from reuniting with her daughter who is in the Philippines.

*I didn't have any problem coming here, coming here, renewing my permit and then applying for my open permit. But only with the permanent resident application because I am sponsoring my daughter and I have been married in the Philippines. And in my application I am single mom. But then... and we were abandoned when my little girl was still young. And I don't know why this immigration keeps digging and if they want me to look for the father. I've never been with the father since my daughter was young. And now I do not know where to find him. We do not have communication. I have sent them affidavits and all but I don't know. The last letter that I got from immigration they are asking me when was the last time I tried to look for my husband (a former Filipino live-in elder caregiver 17).*

Another challenge that live-in caregivers face with regards to the process of obtaining PR and family reunification are the high application fees. In the case of my interviews the fees ranged from approximately \$900 (if the live-in caregiver is only applying for PR for herself, including the cost of PR processing fee, medical examination

and open permit) to \$2000 (if s/he is also bringing family members).<sup>25</sup> They reveal that despite some recently introduced substantial reductions in the fees for PR applications, it is still very expensive if one is bringing a couple or more family members. Not only is the application in itself expensive, they report, but accompanying documents required, such as police clearance and medical examinations often expire before they or their family members are granted visas. That means that LCP workers have to renew these documents and bear these extra costs. Commenting on such issues and explaining how her financial situation is made more complex by the need to constantly send remittances to family and friends back home, one live-in caregiver says:

*And those police clearances they expire. It costs, you know, they're going to get another one. And if they're going to be requesting for a medical examination before the visa will be granted. It's expired. New again. Another medical exam again. So money again. [laughs] And it's a little bit hard because of course sometimes I need to send money back home (a former Filipino live-in child caregiver 10).*

### **9.2.2 After LCP: Upgrading and Finding a Job**

After they finish 24 months in the program required to be completed within 48 months, live-in caregivers I interviewed travel multiple paths. Some end up working as babysitters, housekeepers and live-out caregivers for older clients. Others end up working in the service industry such as restaurants, big food chains and factories. While some of them intend to stay in these jobs, others have plans to upgrade their skills and eventually find better jobs. This is not surprising if we take into consideration that nearly all live-in

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<sup>25</sup> The live-in caregiver who has reported paying \$2000 for PR and family reunification is Filipino woman who was bringing three children and the husband.

caregivers in my sample have some sort of post-secondary education and many of them have university degrees (see the figure 3 in the chapter 6 of this dissertation). Given that their economic situation after they have completed the program is precarious, they often must choose service sector jobs for some time in order to save money for their education. Even though some of them worked as nurses in the country of origin (see figure 4 in chapter 6), few of them plan to upgrade their nursing education given the length, cost and complexity of such a process.<sup>26</sup> Instead, they often choose to go to college and pursue training for personal support worker. That way, they explain, they stay in the medical field for which they trained back home.

Similarly, even though some of the interviewed live-in caregivers used to be teachers in their countries of origin, few of them make the decision to upgrade their skills. This is due to a long and complex process of getting a teaching licence in Canada and the small number of teachers' positions. Reflecting on why she decided not to pursue upgrading of her teaching education, one former teacher now working as laboratory assistant at the Canadian Blood Services explains:

*Because you see the demand in Canada. Because you cannot teach in Canada unless you go back to a four year course at a university wherein I cannot stand myself any more of the school. So I took a short course wherein I know there is a demand where I live. So that's how I got the job (a former Filipino live-in child and elder caregiver 2).*

Few of the interviewed live-in caregivers are unsure which area they should choose to upgrade. Few of those who knew what kind of studies they will pursue did not have any information either on the steps needed to complete such a process or whom to

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<sup>26</sup> For instance, while it often takes somewhere between six and eight months to complete Personal Support Worker training program, the bridging programs for nurses may last up to three years (Ontario Colleges, 2013).

ask for help. Next I turn to my findings with regards to a role of weak and strong ties in the integration of former LCP workers including the processes of obtaining PR and family reunification, upgrading and finding a job after the LCP among former LCP workers.

### **9.3 Social Network Theory and the Role of Strong and Weak Ties in the Integration Experiences of Immigrant Live-in Caregivers in Canada**

According to *strength of weak ties* argument developed by Granovetter (1973), weak ties are especially important for transmitting new information and resources. While strong ties tend to be found between people who are members of the same social circle, weak ties tend to be found between socially different persons, which provides them with the access to more diverse social circles. Hence, Granovetter argues, weak ties enable the members of network to gain new “information and resources beyond those available in their own social circle” (Granovetter, 1983, p.209). Furthermore, Granovetter argues that people in situations of high insecurity, such as employment difficulty, emergencies and poverty tend to rely on strong ties which “have greater motivation to be of assistance and are typically more easily available” (Granovetter, 1983, p. 209). On the basis of the previous research, he concludes that marginalized populations tend to rely more on strong ties than do others, “which makes them lose the advantages associated with outreach of weak ties” (Granovetter, 1983, p.213). Such argument implies that by relying more on strong ties, such populations are less likely to access better employment opportunities (Granovetter, 1982).

Based on Granovetter's conceptualisation of *weak* and *strong* ties, we could draw three assumptions. First, we can assume that live in caregivers as a marginalized group of people finding themselves in situations of high insecurity would greatly rely on strong ties to help them with: 1) obtaining permanent residency status; 2) upgrading their skills after the program; and 3) finding a job. Second, we can assume that while live-in caregivers would not tend to rely as much on weak ties, weak ties would be the most beneficial to live-in caregivers with regards to these integration processes. This is because they would supply better, newer information and resources to live-in caregivers than strong ties. Third, based on Granovetter's argument, we can assume that due to their reliance on strong ties in their search for a job after LCP, live-in caregivers would face limited employment opportunities. In the proceeding sections of this chapter, I explore the above outlined assumptions with regards to immigration procedure(s) for obtaining permanent residency and family reunification as well as process of labour market integration (in particular, processes of skill upgrading and finding a job) of immigrant live-in caregivers.

### **9.3.1 Strong Ties Do Supply Novel Information and Resources**

The first above outlined assumption based on Granovetter's theory that predicts that live-in caregivers will greatly rely on strong ties for help with regards to the processes of integration has been shared by experiences of my participants. Most of them turn to family and friends for assistance when applying for PR and family reunification, upgrading their skills and finding a job after the LCP as people from their own circle are



easiest to contact and most willing to offer support. This is in accordance with Granovetter's argument that members of marginalized populations tend to turn to those closest to them (strong ties) as these people are most readily available and motivated to help.

Granovetter's argument about the strength of weak ties (and in particular the second assumption outlined above) also implies that weak ties benefit the disadvantaged the most as they transmit novel information and resources, while strong ties can only supply the information they already possess. However, my study shows that in the case of LCP workers, strong ties (family, friends) can act as a source of new information about the immigration process(es) related to application(s) for PR and family reunification and process of upgrading.

In particular, my respondents reveal that family and friends provide them with information about the PR and family reunification application process(es), financial assistance and help with paperwork. Most of immigrant live-in caregivers rely on strong ethnic ties of family and friends (often former live-in caregivers themselves) who live in Canada to find out which documents are required for PR and family reunification application(s) and how to fill it in. They explain that information they receive in such informal ways is comparable to what they receive from CIC. Thus, those who already went through such a process are in position to offer useful, precise information about it.

*Oh. Just information because I have friends already that they got their PR and some of them have applied already just a few months ago so I keep on asking how to fill it up, what are the steps. So these are the documents you have to print out on the website. But how to fill up those documents I'm asking some of my friends. Because they have already experience with that (a former Filipino live-in child and elder caregiver 30).*

*Interviewer: Okay. So did you ask anybody for help?*

*Respondent: Yeah. Ask my friend. Ask my friends, ask my friend who is a live in nanny. She is Chinese.*

*Interviewer: So how your friends helped you with advice? What kind of advice she gave you?*

*Respondent: Because the phone call from immigration I answered wrongly and my friend told me how to fix it out, how to explain. And she has been helping me do some paperwork because my English isn't good. Yes, my meaning. She corrected my meaning (a current Chinese live-in child caregiver 13).*

Given that they earn modest incomes while in the program, live-in caregivers often cannot bear the cost of the PR and family reunification application(s) and any other associated expenses by themselves. In particular, many of them report relying on strong ties of family, relatives and friends to get money for these costs. Even though the expectation from Citizenship and Immigration Canada is that they have enough money in their accounts to pay sponsorship fees and support their families once they come their own, most of them have to borrow money from their relatives and friends for such purposes. The following excerpt from the interview with one live-in caregiver nicely illustrates such a point.

*Interviewer: Are you planning to pay the application fees by yourself or do you borrow money for that purpose?*

*Respondent: There is this space in the application asking how do I, how do I pay my bills and my sponsorship, my processing fees. And they were asking how much Canadian dollar do I have in my bank account or am I supported by other person. That would credit though. If you put there that could delay the application for approval. That's what they told me because the government of Canada doesn't want you to be in debt. And I understand that. So we just be thinking of it, what would be the impact on the application, right? And how would you support your family, how would you support yourself if you are granted with permanent residency and you are*

*wanting to sponsor your family. So I don't want to put there that I am receiving money from my aunt or whosoever.*

*Interviewer: So but is it hard for you to pay? How much is this application?*

*Respondent: For me because I have three kids coming and my husband and myself, uh, five fifty for us couple. Then it's one thousand, one hundred, right? And the other one is over 18 years old so another five, fifty. And the two is one hundred, fifty each. And my process is four hundred and ninety. So the total is two thousand something including the application for open work permit. This is one hundred and fifty. So I have to prepare for that. Not to borrow. Though I will borrow from my sister (a current Filipino live-in child caregiver 34).*

Not only do strong ties with family and friends provide live-in caregivers with the economic resources needed for PR and family reunification application(s) purposes, they also offer financial assistance after submission of the application. For instance, one live-in caregiver who still did not receive an open work permit and is still waiting for his PR, says that his sisters, whom he helped to come to Canada under LCP, have played a great role in assisting him financially while he is unemployed.

In addition, given that the demanding paperwork that they have to submit when applying for PR includes many documents from their country of origin (such as birth and marriage certificates) live-in caregivers often rely on their families and friends back home to collect such papers for them. For instance, one Filipino live-in caregiver says she plans to contact her sister in Philippines to get NBI (National Bureau of Investigation) certificate that she needs for her PR application.

Similarly, family and friends play a large role in the process of upgrading undertaken by LCP workers in post-LCP period. After live-in caregivers are done with the program, they are without a job and money. If they plan to upgrade, they must do it as

soon as they can since upgrading would enable them to find better jobs once they reunite with their families. Live-in caregivers report not only being encouraged to study, but also getting necessary information about education they intend to pursue from their co-ethnic friends who have already started or finished the process of upgrading. One Filipino live-in caregiver who lives-in the building with other, co-ethnic former live-in caregivers explains how she not only got an idea to study for PSW, but also information on the reduction of her tuition fees.

*Oh, lots of my friends living in this building they introduce me [to the idea of upgrading] and one of them helped me. She brought me to the school and then she really... actually I still have no plan because I said I don't think so that I can go to school at this time. I have no job. I don't think so I can pay. But she really encourages me. You need to start because they are still honouring your care giver course in the Philippines. You will just pay half, around thousand and nine hundred. So I think you need to... she really try hard to convince me. You need to enrol, you need to enrol. I said okay, okay, I go. And I go (a former Filipino live-in child caregiver 8).*

Close networks of family and friends provide them not only with encouragement and useful information on how to apply, but also with money needed to cover high tuition fees. One live-in caregiver, for instance, mentions that she plans to ask her parents to help her with costs of courses that she plans to undertake.

Thus, in accordance with Granovetter's argument, live-in caregivers tend to rely greatly on strong ties given the context of uncertainty in which they find themselves at the time of application(s) for PR and family application and process of upgrading. The fact is that live-in caregivers who apply for PR and family reunification have precarious, temporary migration status - they would have to leave the country any day if their applications for PR are refused for any reason. Thus, they live in a state of uncertainty

until they are granted their permanent resident status visas. Moreover, after live-in caregivers are done with the LCP, they have to quickly figure out how to prepare for a job and try to ensure a better income for their families. In such context of uncertainty, it is natural for them to rely on the strong ties to co-ethnics who are easily available and ready to help with such process.

While context of insecurity may help explain why they turn to people close to them (strong ties) in the processes of applying for PR and family reunification and upgrading their skills, the content of information is another important factor not taken into account by Granovetter. The above discussed findings testify that live-in caregivers do efficiently retrieve new information and resources about PR application process and process of upgrading through *strong ties*; this is not recognized by Granovetter's strength of weak ties thesis that restricts sharing of useful information and resources mainly to weak ties. In fact, strength of weak tie argument developed by Granovetter focuses only on strength of the tie – not considering the content (nature) of information that is spread through the tie. Strong ties with their co-ethnic friends and family are efficiently used for gaining new information given that most of these people on whom they rely used to be live-in caregivers themselves. Therefore, they get all necessary information about applying for PR, family reunification and upgrading from these people close to them who already underwent such processes and thus are fully competent to offer right, useful advice. Thus, people can benefit from information obtained through strong ties if its content guides them towards achieving their goals.

### **9.3.2 Weak ties Are Beneficial to Live-in Caregivers and Lead Them to Better Jobs**

As predicted by the first above outlined assumption based on Granovetter's argument, in the processes under consideration (i.e.- obtaining permanent residency status and family reunification; upgrading their skills after the program and finding a job) live-in caregivers tend to rely to a much lesser extent on weak ties than on strong ones. This can be explained by the fact that they have few ties to people outside of their own social circles. In Granovetter's view, two major sources of weak ties are work settings and formal organizations (Granovetter, 1973). As live-in caregivers work in the home of the employer and have limited contact with formal organizations, they have only a small chance of developing ties with people outside their own social groups (with exception of their employers).

In accordance with the second above outlined assumption based on Granovetter's argument, when used, weak ties tend to be very beneficial to live-in caregivers. In particular, respondents reveal that *weak ties* to employers and representatives of some formal organizations do have a very important role in providing the live-in caregivers with information, assistance with paperwork and financial resources relevant to the procedures for their PR and family reunification application(s) and upgrading. Moreover, in accordance with second and third assumptions outlined above, weak ties to employers and representatives of placement and recruitment agencies also tend to lead former LCP workers toward better employment opportunities.

### 9.3.2.1 Employers

Many of the live-in caregivers I interviewed revealed that employers are very helpful to them when it comes to the process(es) of applying for permanent residency and family reunification in two major ways.

First, employers supply them with necessary paperwork that confirms that they have continuously worked for them for two years which makes them eligible to apply for PR.

*The help of the employers is necessary. I need that for applying. It's really very important, the summary of the numbers of hours. Everything. The numbers of hours, records of my salary, the taxes they get them from us, the deductions...So the employers have to certify everything (a former Filipino live-in child and elder caregiver 30).*

Second, in some cases employers or employer's family members help live-in caregivers to cover the PR and family reunification application(s) fees.

*Interviewer: So did you pay these fees by yourself or did you borrow money for that purpose?[for application for permanent residency]*

*Respondent: I think it's half and half. My employer's daughter paid and I paid at the same time but she paid more than I paid. It does not happen all the time like that. Some of my friends they have to use their Visa to pay or they have to use up their savings to pay (a current Filipino live-in elder caregiver 19).*

In addition, my interviews show that sometimes employers of LCP workers help them with information and resources needed to successfully finish a process of upgrading. As already mentioned above, educational upgrading which live-in caregivers pursue is often very costly. In particular, the interviews reveal that it may take somewhere between \$700 and \$ 3000 to cover the costs of the courses in which they enrol, depending on the program of the study they choose. As that is very expensive for live-in caregivers who

lived on meagre incomes for years, it is very hard for them to cover such costs by themselves. In some rare instances, live-in caregivers reveal that they have been helped by their employers. For instance, one live-in caregiver who takes care of an elderly lady on weekends recalls:

*I am still lucky because the lady that I work for the weekend I just mentioned it to her [that she does not have enough money to pay her social work courses]. She said she would write the cheque for me. She said 'I want you to have your future set right now. You look after me but you look after yourself as well.' I highly appreciated. In fact I really cried. She said 'I am going to write a cheque for you so you can pay your tuition right away in an instant.' (a current Filipino live-in elder caregiver 19)*

One live-in caregiver explains that her employer helped her choose between two colleges by giving her information about the quality of each of these two schools.

Similarly, in accordance with the second and third assumption, my findings show that when used, weak ties tend to lead to salient information about job openings and thus, better jobs. Few live-in caregivers I interviewed report that their employers will assist/assisted them in their job search after LCP. For instance, a former live-in caregiver recalls that she got a very good job as a nurse's aide in Sick Kids Hospital in Toronto given that parents of child of whom she was taking care were working there and told her to apply.

*How I found my job? I live with a family and they work at Sick Kids and then she told me to go and apply there. And then I went for interview and I was an outsider. And there was a position, right? Normally they take the insider first, right? And then I work at the Hospital for Sick Children for six years in Toronto. I work in the operating room. I work at haematology oncology bone marrow transplant. So those are departments where I worked (a former Filipino live-in child and elder caregiver 2).*



### ***Representatives of Recruitment and Placement Agencies***

Some of the live-in caregivers interviewed state that in the process(es) of applying for permanent resident status and family reunification they have been greatly helped by representatives of their recruitment agencies. This is the case since through the contracts they made with live-in caregivers agencies are obliged to provide them with help regarding immigration procedure(s) without any additional charges. In particular, representatives of recruitment agencies often assist live-in caregivers by informing them on how to apply and by making sure that paperwork submitted to CIC is accurate and complete. For instance, reflecting on the overall help that she got from the director of one prestigious recruitment agency, one live-in caregiver reveals:

*Whatever questions I have in my mind I jot it down on a piece of paper and I called them [agency] toll free. So they gave me instructions on what to do and then when I prepared all the papers I went to director of agency, I showed all the papers and get her opinion what she think about it. But she said 'Oh you are fine' and then I mailed it. So I mean the last person to go over my papers is her. She looked at those papers and checked if it's correct and then she said 'I think you are fine. So you can mail it now.' So I did mail it and it came after more than five months (a current Filipino live-in elder caregiver 19).*

Asked why she turned to director of the agency for help with the process, she explains:

*Because I knew that she is a member of that organization for live-in caregivers. I think she knows. She has been in that business for many years and a lot of her, you know, caregivers under her agency were already permanent residents. So I consider her more expert for that matter and she knows exactly what it is. Even the computation of the hours, how much I am going to be paid for my holiday. She did the computation and then she did a computation of how much raise should I get. So she knows everything about it...I just want to know if I'm doing the right thing and if my papers that I am working are all accurate. I mean it's all, the papers that the immigration is asking for, if it's all correct and if I'm doing the right thing.*

Some live-in caregivers report that representatives of the agencies not only checked their paperwork, but also helped them to collect it. For instance, one Filipino live-in caregiver who used to work in Taiwan before coming to Canada explains that her recruitment agency helped her get police clearance from that country. The agency, however, charged her seventy dollars for getting that paperwork done.

One respondent recalls how the woman from the placement agency for live-in caregivers whom she met when she first came to Canada gave her an administrative assistant position in her organization once she lost her live-in caregiver job.

*Because [name] is placement agency for care givers. I've known her for quite a while and when I said that I am losing my job, I'd be finishing here when the house is sold which will be on the market in a few weeks. Then I need a job I told [name] so she said can you come and do like on training or something. That's how I landed in that office (a former Filipino live-in elder caregiver 17).*

#### **9.3.4 Strong Ties Lead Former Live-in Caregivers Towards Limited Job Opportunities**

The third above outlined assumption based on Granovetter's theory that predicts that that due to their reliance on strong ties in their search for a job after LCP, live-in caregivers face limited employment opportunities has been shared by experiences of my respondents. As they are supposed to begin the new phase of re-settlement, they have to find jobs quickly and thus they choose to rely to a great extent on those closest to them (family and good friends) who are the most motivated and available to help them. When relying on such ties, most of them end up in lower paying service sector jobs taking care

of elderly people as live-outs, housekeeping, babysitting and working in big factories or food chains as these are the easiest to find.

For instance, one current Filipino live-in caregiver who has a very close, co-ethnic friend talks about how that friend offered to help her move to another province and work with her as live-out taking care of children and cleaning houses.

*One of my friends in Calgary I told you, she is my best friend. She told me if you come over here I can able to if I want to have part time then you can able to go with me and we can have a part time two of us. You know. It's five hours of babysitting and they're going to pay you. After five hours you're going to rest, you know. And in Calgary they pay \$25.00 hour, per hour. And there are also employers that want you to just clean the house. Then how many hours they pay you. So that's a pretty good job rather than live in care giver, staying in one employer (a current Filipino live-in child caregiver 7).*

Asked what kind of job she is planning to find once she gets her papers, one live-in caregiver I interviewed responds:

*Hopefully like because my uncle is personnel management officer, like that, he told me I will go there when I have permit to work in the factory for GM (a current Filipino live-in child caregiver 5).*

Similarly, one Slovakian live-in caregiver recalls how she found two part-time jobs in Tim Horton's through her immigrant friends who already worked in those places.

In sum, as we have seen, the concepts of Granovetter's weak and strong ties help our understanding of the process of integration (i.e. – process (es) of obtaining PR and family reunification, upgrading the skills and search for a job) of LCP workers after they are done with program. The assumption based on Granovetter's argument that predicts that live-in caregivers rely greatly on those closest to them (friends and family) has been reflected in my findings. Moreover, in accordance with Granovetter's argument, weak ties

are very beneficial when it comes to supplying relevant information and resources with regards to the integration processes under consideration. Moreover, my research has confirmed the assumption based on Granovetter's argument according to which strong ties lead former LCP workers towards limited job opportunities.

While weak ties help them find a better job (such as, for instance, a nurse, administrative assistant, etc.), in accordance with Granovetter's argument, most of live-in caregivers I interviewed do not rely on such ties in their search for job after they are done with a program. As my discussion of study findings in this chapter has demonstrated, strong ties seem to assume a much greater role in the process of finding employment among immigrant live-in caregivers given their greater availability and willingness to help in the situations of high uncertainty in which live-in caregivers find themselves once they are done with a program. Since former live-in caregivers tend to rely on strong ties in their search for job after the LCP, they tend to lose advantages of weak ties, thus ending up in low-paid service sector jobs.

Still, Granovetter's concepts of strong and weak ties are insufficient to guide us towards to a full understanding of such a process for three main reasons. First, as my discussion of a processes of PR and family reunification application(s) and upgrading has shown, by focusing on strength of the tie, Granovetter fails to recognize the importance of content of information; this can help explain why strong ties can transmit the salient information and resources. In addition, the formal organizations play a role in the process of labour integration of LCP workers. This is neglected by Granovetter who in his thesis focuses only on the interpersonal ties. In fact, he only discusses formal organizations in

relation to their ability to promote the development of weak ties, not as a subject in its own merit. Third, in his thesis of strength of weak ties, Granovetter fails to consider the impact of cross-cutting hierarchies of difference in one's life chances. In the next sections, I discuss two of these neglected issues, namely, the role of formal organizations and agents and the role of hierarchies of difference in live-in caregivers' integration experiences.

### **9.3.5 Formal Organizations and Agents**

In his argument on the strength of weak ties, Granovetter focuses on interpersonal ties, thus neglecting to consider the role of formal organizations and agents in people's experiences. Still, my interviews show that some formal organizations and agents (such as, CIC, colleges, and employment agencies) provide live-in caregivers with useful information related to the PR application, upgrading and finding a job. While some LCP workers tend to rely on CIC for help with the PR and family reunification application(s), immigration lawyers play a much less significant role in such a process. While colleges often provide live-in caregivers with information about the process of upgrading, regulatory bodies and other organizations dealing with the assessment of immigrant credentials and immigrant settlement organizations play a more limited role in that sense. Moreover, my interviews show that some formal organizations (in particular, colleges and employment agencies) play an important role in the process of finding a job among live-in caregivers once they are done with the program. Professional bridging programs offered by some organizations dealing with immigrant credentials and immigrant

settlement services, on the other hand, are much less significant for live-in caregivers in that sense.

#### ***9.3.5.1 Citizenship and Immigration Canada***

The interviewees reveal that Citizenship and Immigration Canada (CIC) is a greatly trusted source when it comes to the information on how to become a permanent resident. They find that the information kit CIC mails them after they become eligible to apply or CIC's web site contains all the necessary information they need, and as such is very useful. Explaining why they chose to rely on CIC as source of information regarding applying for PR, some respondents cite accuracy of the information and time and money saved in that way.

*Because they are the ones who know everything what's going on, how long is the processing time and everything. All the details (a former Filipino live-in elder caregiver 18).*

*It's because I can be able to get the accurate answer. Like you are asking some Filipinos because in every Filipino story there is different kind of situation, right? So my situation is different from them. And I can able to have a little advice when I directly call them and ask them for these things what I am going to do rather than asking some Filipinos (a current Filipino live-in child caregiver 7).*

*That is the quickest way. Saves time. And saves money (a current Filipino live-in child caregiver 8).*

Getting information from CIC was deemed especially helpful by those whose family situation changed from the time they entered Canada. For instance, explaining how CIC gave her good advice regarding her application after she got separated from her husband, one Filipino live-in caregiver says:

*In the first place before I ordered application I referred them [CIC] about my problem, marital status. So instead of listening to friends' advice I called them and told them this is my problem. I laid down my cards. So they tell me what to do so I follow their advice about my husband. I couldn't get my husband. I declared my husband. I couldn't get him since he is living with someone else now. So what do I do since I don't belong to him anymore? But my kids, I will get my kids. So they asked me everything. So they advised me you have to have a proof that your husband is not coming here. So that's what I did. Whatever advice they gave me I followed it and it's all easy (a former Filipino live-in elder and child caregiver 3).*

### ***Immigrant Settlement Agencies and Lawyers***

Interviews reveal that live-in caregivers contact immigration lawyers only in complex cases when their legal status in Canada was called into question. For instance, one live-in caregiver explains that he called immigration lawyer to help him when 36 months into the program passed and he was required to leave the country. Even though the lawyer helped him to stay in the country, he notes that costs that he paid for lawyer's services were tremendous.

*All my thought was to see an immigration lawyer, seek the help, and file for appeal, you know. So yeah, I went to the immigration lawyer and the lawyer was really therapeutic and I was able to get some air when I was with him. And he made the letter and immigration responded. The lawyer made a really strong letter. The immigration officer responded again and he was telling me that I must have a status before my papers will be applied, da-da-da. And the problem here is the expenses. I have been borrowing money from my credit card and actually at this very moment my credit cards are maxed out. My line of credit is maxed out. And I've been jobless for almost 14 months (a former Filipino live-in elder caregiver 4).*

Moreover, the interviews show that immigrant organizations play a very limited role in upgrading efforts and the process of finding a job among immigrant live-in caregivers once they are done with the program. Few of the respondents report being assisted by them in the process of upgrading. One former live-in caregiver reflects on

how the people from an aid immigrant organization told her that given that she attained PR status, she is eligible to apply for courses that she needs to upgrade her skills.

*Interviewer: Ok. Nursery. So you are going to take some courses. Do you know what courses?*

*Respondent: It is Early Childhood Education. ECE. At the Halton Multicultural Council they told me that I have already the PR card I can go to them to seek help. They can help me how to get through the course that I want to pursue, the kind of course that I want (a current Filipino live-in child caregiver 23).*

Some were surprised when asked about whether and how much they have been helped by immigrant settlement services with a process of upgrading. They have not been aware that these organizations can assist them with information on how to upgrade their skills. Some assumed that these organizations would refuse to help them as in the past (while still under LCP) they have been turned away by these agencies. Others that have been aware that they can be helped by these agencies do not know which among these organizations provide particular type of help that they need. One respondent explains how she needs help with language and computer skills, but she does not know to which immigrant organization she can turn for such specific type of service:

*I am trying to find a school or a free learning school for computer and, you know, the ones that offer ESL provided by the government so I can go there on the weekends. In Toronto there is one [immigrant organization] where they welcome immigrants and then try to upgrade their skills and their education. There is one in Toronto. I just forget the name. I have all the links here, like continuing education here in Oakville. I got all the numbers from Halton and Oakville. And then I tried calling. So I find links but altogether I think I didn't find enough so I have to find more. So do you know anything? [laughs] I would greatly appreciate it after this interview if you can send me an e-mail of this organization that helps the*



*new immigrants to prepare for their future and upgrade their skills (a current Filipino live-in elder caregiver 19).*

Interestingly, none of my respondents reports going to immigrant organizations for help regarding their job search after the LCP. Even though immigrant settlement services can provide help with job search (through various workshops geared towards writing resumes, preparing for job interviews, etc.), none of my respondents mentions them as possible source of support in such a process.

#### **9.3.5.2 Colleges**

As most of the interviewed live-in caregivers who plan to upgrade their skills report planning to do courses for a personal support worker, colleges offering such programs proved to be very important in terms of offering the information with regards to such process. One respondent explained how people at college to which he went to inquire about PSW courses that he planned to undertake proved to be very helpful in the process.

*I went to Sheridan College, the continuing studies in there. Yeah, I went in there and made some inquiries. And I talked to somebody in there and she lay down some information about courses. She mentioned about how long would it take or the different courses that I am interested in. So it's nice, you know, that they are there. And I even have some info from Mohawk College cause I met a professor in there. He said yeah, I might help you about this but he said since you are not a permanent resident I can't go in for any training courses, whatever. So I need to wait. Wait and see (a former Filipino live-in child caregiver 10).*

The colleges assist live-in caregivers not only with a process of upgrading, but also later with their search for job. As many of the respondents enrolled in PSW courses

offered at various colleges, some of these institutions directed them where to look for jobs.

*Interviewer: So tell me how you found these jobs? How you found the job in retirement home? And the nursing home too.*

*Respondent: Um, because the school [college offering courses for PSWs] that I went in they have a list of nursing home that you can apply for, that have job openings. You just only fax the resume and then they will call you if they need employee” (a former Filipino live-in child caregiver 9).*

### **9.3.5.3 Regulatory Bodies and other Professional Organizations**

Given that only a few of live-in caregivers in my sample plan to go back/went back to their professions, their use of regulatory bodies (such as *Canadian College of Nurses (CNO)*) and other professional organizations dealing with assessment of immigrant credentials (such as, for instance *Care Center for Internationally Educated Nurses*<sup>27</sup>) is/was very limited. Only few of them report being helped by such organizations in the processes of upgrading and search for a job.

*CNO and CARE were especially helpful to me in the process of upgrading. I was assessed by the College of Nurses of Ontario that I could go to CARE. So when I was directed to CARE I was assessed in CARE and I was allowed to enrol in the school without the study permit so, uh, I took this... the subjects actually are not required for me but they are subjects that could be helpful for me if I'm going to take licensure exams. So I took three subjects, three nursing courses (a former Filipino live- in elder caregiver 4).*

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<sup>27</sup> In 2001, Ministry of Training Colleges and Universities in Ontario decided to fund a project called CARE (Creating Access to Regulated Employment). This pilot project aimed to “develop, implement and evaluate a sustainable bridge training program for internationally educated nurses” residing in this province (CARE, 2014)

*Interviewer: Okay. So was there any person or organization that might help you to find your employment after you are done with LCP. Like you are done with LCP but after you finish your nursing courses who will help you find a job as a nurse?*

*Respondent: It will be the CARE. They have so many offers. They have contacts, yeah. And they organize workshops on how to find a job, I mean, preparing the resumes, doing the interviews (a former Filipino live-in elder caregiver 4).*

#### **9.3.5.4 Employment agencies**

When asked whom they plan to turn for assistance with finding a job once they are done with the program, some of the interviewed live-in caregivers mention employment agencies.

*Interviewer: Do you think, um, that there is any person or organization that might help you to find a job as PSW after?*

*Respondent: There is an agency for PSWs like Bayshore. These are employment agencies (a former Filipino live-in child and elder caregiver 3).*

In sum, formal organizations prove to be very useful to live-in caregivers in the integration processes under consideration. While live-in caregivers tend to turn to some of these organizations more than to others, they all seem to be beneficial to them when used. Thus, it is important to consider the role of formal organizations in the experiences of LCP workers - the issue neglected by Granovetter's theorizing on interpersonal ties of different strengths. In the next section, I discuss intersectional influences of hierarchies of difference on both processes of LIC's labour market integration i.e. - upgrading their skills and process of finding a job.

## 9.4 An Intersectional Lens on Labour Market Integration

### 9.4.1 Upgrading from an Intersectionality Perspective

My research shows that in addition to nature (content of information) and role of formal organizations, there are other important factors, not captured by Granovetter's concepts of weak and strong ties, that influence the process of upgrading the skills among former LCP workers. While his argument on the strength of weak ties is based on principle of *homophily*, according to which people tend to associate with people similar to themselves (which implies similarities in terms of class, gender and ethnicity), he does not explicitly discuss how actor's position in different, intersecting hierarchies of difference impacts on his/her life opportunities. Intersectional paradigm puts an emphasis on how multiple social systems (gender, race, ethnicity, age, marital status, immigration status, age etc.) intersect to shape experience of human life (Collins, 1986; 1990; Crenshaw, 1991). And indeed, the interviews with live-in caregivers show that intersectional influences of *citizenship status*, *marital status/family situation*, *gender*, *ethnicity* and *age* shape their decision on upgrading.

Interviews have shown that live-in caregiver's low standing in the hierarchy of *citizenship* significantly influences their post program experiences. Having *temporary migration status* greatly limits their chances for upgrading their skills. The strict immigration rules prohibit them from taking any course longer than six months in duration while working under the program without being required to obtain a student permit. Even if they secure a student permit, they face certain obstacles to upgrading.

They explain that being on temporary status, as international students they face very high tuition fees. Their temporary status prohibits them from taking OSAP (Ontario Student Assistance Program) loans and applying for bursary to cover such high cost needed for upgrading. That means that most of them delay their upgrading and in many cases they end up in some low paid job and never start it.

Some of the unmarried live-in caregivers report that having a very low income, while not having any second source of financial support, makes it very hard for them to upgrade. Asked whether she plans to go back to her previous occupation of teaching, one former live-in caregiver responds:

*No. I really don't have idea. It's very bad for me. I really don't know. Every time I think about school field but I feel that it's not good life for me because problem is that I live alone here and expenses for one person is very high. And I can learn, fourteen dollars for one hour. It's not enough for me. This is problem (a former Slovakian live –in child caregiver 16).*

Upgrading is also very hard to do for those married and/or with dependants who plan or are in the process of family reunification as they have to save money for application fees for each of their family members and to support them once they are in Canada. For instance, one former live-in caregiver who currently works as a PSW and has three kids whom she plans to bring to Canada explains how it is hard for her to think about upgrading her nursing skills given the high costs of brining and supporting her children in Canada:

*Like nursing upgrading is a lot of money. I will think first before I will go to school. I am not sure yet because I have my children and husband to bring here. It's a big amount of money so I hope I will upgrade. I have my priorities so I cannot do this one this time (a former Filipino live-in elder caregiver 22).*

Analyzing the above quote from the intersectional perspective reveals that this respondent's chances of upgrading are restricted also by her standing in cross cutting hierarchies of *gender* and *ethnicity*. In particular, this woman is of Filipino ethnic origin. Currently, the cultural gender norms in the Philippines prescribe that in light of the precarious economic situation in the country, women should migrate and assume the role of breadwinner. Further discussing the possibility of going back to nursing, this same respondent who is in her mid-forties sees her *age* as another barrier:

*Yeah. Because of my skills so maybe [she will go back to nursing] I am thinking also of my age. If I have time I will go upgrading as a nurse because that is my expertise.*

Thus, to fully understand the process of upgrading, we have had to go beyond the level of ties considered by Granovetter's argument on the strength of weak ties. While concepts of strong and weak ties focus on the role of different type of ties in constraining/expanding one's opportunities, they do not direct our attention to the influence of one's social location (standing) in multiple, cross-cutting hierarchies of difference on individual's life chances.

#### **9.4.2 Finding a Job from an Intersectionality Perspective**

As we have seen above, the concepts of weak and strong ties as envisioned by social network theory aid our understanding of the process of finding a job among live-in caregivers in Canada once they are done with Live-in Caregiver Program. Still, by focusing only on the strength of the tie argument we are unable to come to a full understanding why live-in caregivers end up in low paid jobs after they are done with a program.

Employing intersectionality as one of the theoretical perspectives in this research helps us to see an array of influences that would remain hidden if one relied only on the concepts of weak and strong ties. Clearly, Granovetter's emphasis on restricted job opportunities of marginalized individuals who tend to rely heavily on strong ties implies that one's social location (determined by one's race, gender, ethnicity, etc.) may restrict the usefulness of information one receives through such ties. Still, he does not go beyond the level of ties, failing to explicitly and separately focus on how individual standing in multiple cross-cutting hierarchies of difference shapes his/her job opportunities. As already mentioned, an intersectional perspective emphasizes how concurrent influences of multiple social hierarchies shape people's life experiences. And indeed, as the proceeding discussion of my findings will reveal, what type of job live-in caregivers get once they are done with the program is dependent to a great degree on their standing in the cross-cutting hierarchies of *class, citizenship, nationality, gender and ethnicity*.

LCP worker's standing in the hierarchies of class and citizenship greatly shapes his/her employment opportunities after LCP. As demonstrated by my findings above, in accordance with Granovetter's argument on strength of weak ties, weak ties with their employers lead live-in caregivers to gain useful information on available jobs once they are done with the Live-in Caregiver Program. As employers tend to belong to circles different than those of live-in caregivers, they tend to help live-in caregivers get salient information about new jobs. My interviews, however, also show that employers to which live-in caregivers are weakly tied sometimes help workers to find lower paid jobs. The following excerpt from the interview with one of the workers nicely demonstrates such a point:

*My employer told me that if I want to, he can help me with a job because he is working in a big company, right? And he said that if I want to work in the company when I get my open permit he can able to recommend me. That's what he offered to me. Maybe I could say that I need him to recommend me to get a job there. So that would be a factory job like maybe working on a line, packing, something like that (a current Filipino child live-in caregiver 7).*

Relying on an intersectional perspective helps us understand such findings. It guides us to see that differences in *class and citizenship* status between employer and employee can lead employers to think about immigrant live-in caregivers as suitable only for the jobs located near the bottom of labour market hierarchy. Even though the respondent cited in the above excerpt earned a degree of Bachelor of Science in Philippines, her employer assumed that she will be happy if she gets a job as a factory line worker once she is done with a program. Such an assumption could be interpreted as result of *class* differences between employer and employee on the basis of which later is



perceived as inferior by former. The employer may also have been aware of the fact that lacking permanent resident status and any Canadian working experience her job opportunities are very limited.

The interviews show that the nationality of former LCP worker also plays a role in determining the employment opportunities former live-in caregiver face in the Canadian labour market. Even after live-in caregivers obtain permanent resident status, the fact that better jobs require Canadian experience adversely impacts on live-in caregiver's chances of finding such jobs. The working experience that a live-in caregiver has gained under LCP is not considered real Canadian experience and thus is not helpful at all for securing better jobs. Commenting on the challenges that lack of Canadian experience poses, one Slovakian live-in caregiver who was trying to find a position as teaching assistant has said:

*If you don't have experience you can't find job. How can I have experience if I don't have job? Like circle. It is problem. You need Canadian experience. Yes Canadian but how can I have Canadian experience when nobody want to hire me? And I show my teaching experience from backhome and Tim Horton experience and I want to go back to school they will laugh me. Make funny of me. Kitchen experience and you want to go work school? But my 20 years of experience from my country is like nothing. Is like zero. It's pretty sad (a former Slovakian live-in caregiver 16).*

Moreover, my interviews reveal that gender shapes one's post LCP employment opportunities. Being a woman significantly shapes live-in caregiver's job choices once she is done with a program. Holding the baby in her lap, one of my respondents who is done with the program and is in the process of bringing her husband to Canada states: "I am working part-time in that food chain. Like I don't want to leave him to a babysitter

and like work full time” (a former Filipino live-in child caregiver 10). Some other female live-in caregivers also explain that they have to think about future of their kids and thus have to take the first available job once they are done with LCP. Being a man on the other hand opens up some more diverse work possibilities. For instance, one man who is planning to find a job as personal support worker in a retirement home thinks that the fact that he is man and thus is strong enough to work with heavier patients can help him tremendously in such a process.

*I think they'll say you have that experience as caregiver so you can do PSW job and because you are a man you are strong enough so we can hire immediately (a current Filipino live-in elder caregiver 25).*

*Ethnicity* is another hierarchy of difference that in interaction with others influences labour market opportunities of live-in caregivers once they finish LCP. Most of Filipinos in my sample chose to work as PSWs. As one Filipino respondent has put it: “PSW is something that most of the Filipinos do after they are done with a program” (a current Filipino live-in child caregiver 7).

In contrast, one Slovakian former live-in caregiver found a very good job as a settlement worker in an immigrant settlement agency. She reveals that she is very happy with that job which she found through her very strong tie with co-ethnic friend.

*My friend from Slovakia actually told me that it's going to be like a job fair, let's say a job fair for volunteers. So I went one night to attend this event when they were hiring new volunteers and I found it very nice and the people were trying to do their best, explain everything about the agency, about how the volunteer program runs and how does it go. So I like it. Then I started to volunteer here at this agency and then I was hired after a few months (a former Slovakian live-in child caregiver 15).*

While we cannot draw any generalizations on labour market outcomes of particular ethnic groups (such as Filipino or Slovakian) on the basis of small sample of this qualitative research, such findings are not surprising. It is well known that the Canadian job market is segregated along ethnic lines (Porter, 1965). Thus, the type of the job live-in caregivers end up in when relying on those from their immediate circle (close ties) is often type of job characteristic for their own ethnic group.

Therefore, an array of intersectional influences of multiple hierarchies of difference profoundly shapes the type of job which live-in caregiver gets once he/she is done with Live-in Caregiver Program. This means that in order to fully understand the process of finding a job among live-in caregivers, we have to go beyond the level of ties as envisioned by Granovetter's argument.

## **9.5 Summary and Conclusion**

In conclusion, this chapter shows that both informal (family and friends) and some more formal networks play an important role for live-in caregivers in the processes of application(s) for PR and family reunification, upgrading and finding a job. My findings show that the informal networks play the most important role with regards to all three integration processes. While strong ties seem to transmit new, useful information with regards to PR applications and processes of upgrading, they are less useful when it comes to the process of finding a job after LCP. Even though informal networks of family and friends are a major source of assistance for live-in caregivers during the process of job search in period after Live-in Caregiver Program, the help these networks can garner is

limiting for live-in caregivers. My findings suggest that due to such heavy reliance on these close personal networks at that point of time, live-in caregivers get trapped in low paid jobs such as working in factory or food chains, babysitting and housekeeping.

My research findings lend support for all three assumptions of Granovetter's thesis on the strength of weak ties that I explored in my study. As we have seen, strong ties tend to be used the most when it comes to all three processes of integration under consideration (i.e. - the processes of application for PR and family reunification, skills upgrading and finding a job) of LCP workers. Although LCP workers tend to rely much less on weak ties with regards to all three integration processes, when these ties are used they are useful for conveying novel information and bringing additional resources. Finally, reliance of former LCP workers in their search for job after the program leads to limited employment opportunities.

Still, my findings show that there are three other factors influencing these integration processes not considered by Granovetter. These are: 1) the content of information transmitted through personal ties (influencing the process of obtaining permanent residency status and upgrading); 2) formal organizations (playing an important role in all integration processes); and 3) cross-cutting hierarchies of difference (influencing processes of upgrading and finding a job). An intersectional perspective helps us to direct our focus to the third factor cited above. Therefore, I conclude that combining concepts of *weak* and *strong* ties as envisioned by Granovetter with an intersectionality perspective can enrich our understanding of process of integration after LCP among immigrant live-in caregivers in Canada.

## **Chapter 10**

### **Conclusion and Discussion**

#### **10.1 Introduction**

This conclusion chapter consists of four parts. First, I provide a summary of my empirical findings. In doing so, I reflect on empirical contributions that such findings enable. After reflecting on policy implications that emanate from my research, I discuss the theoretical contributions of my thesis. I conclude by reflecting on the limitations of my study as well as areas needing further attention.

#### **10.2 Summary of Thesis Findings and Empirical Contributions**

This thesis aims to fill in the gaps in our knowledge of the experiences of immigrant live-in caregivers in Canada as a means to better understand the role of social networks and how this is informed by intersectional theory. More specifically, the purpose of this thesis has been to come to a better understanding of migration, working, living and integration experiences of immigrant live-in caregivers in the province of Ontario. Past research has left relatively unexplored the role of social networks in the processes of migration and adaptation of LCP workers to hard living conditions in a new country. In addition, it explored the migration experiences of mainly Filipino live-in

caregivers, thus failing to examine such experiences among non- Filipino LCP workers. Moreover, most of the previous studies do not distinguish between different types of care and how they impact on working and living conditions of immigrant live-in caregivers. Also, the previous research has insufficiently explored their integration experiences, in particular actions that immigrant-live in caregivers take during and after the program in order to improve their outcomes after they complete the LCP and the role of networks in such processes. Such gaps are significant given the role that LCP workers play in addressing care labour shortages in Canada.

By drawing on the findings stemming from 34 semi-structured interviews with former and current immigrant live-in caregivers in the province of Ontario, my dissertation research sheds light on previously unexplored issues related to the migration, working, living and integration experiences of LCP workers in Canada.

As we have seen in chapter 5, work/economic factors such as lack of job opportunities and bad financial situation in their home countries trigger a decision of live-in caregivers to come to Canada. This is the case for most of the participants, regardless of their country of origin. These motives were identified also by previous literature on immigrant live-in caregivers in Canada (Alcuitas et al, 1997; Barber, 2000; Mikita, 1994). Still, my research has also shown how work/economic related factors are relevant not only for Filipino live-in caregivers on whom this previous research has mainly been focused, but also live-in caregivers from other economically disadvantaged countries. My study has also suggested that institutional programs such as the Live-in Caregiver Program that offers possibility of gaining permanent residency after 24 months of work

under the LCP and family reunification as well as Canada's reputation as a country with favourable labour laws offer certain opportunities for migration that are very attractive to prospective live-in caregivers. Thus, they serve as an important motive for migration. This finding was echoed by other studies on immigrant live-in caregivers in Canada (Cameron, 1999; Mikita, 1994). Whatever the initial trigger for migration, social networks (both formal and informal) have been crucial in migration decision for this group of immigrants as they provide a flow of information about possibility of undertaking this kind of work in Canada and unique Live-in Caregiver Program to prospective live-in caregivers.

Thus, by bringing these important insights on previously the insufficiently explored issue of decision making among live-in caregivers, and especially role of social networks in such processes, my study makes an empirical contribution to the literature on the migration experiences of live-in caregivers in Canada. As already mentioned, few previous studies that focus on, among other issues, migration decision among immigrant live-in caregivers tend to rely on samples of Filipino respondents. By including non-Filipino respondents in my sample and comparing their process of decision making to such process among live-in caregivers from the Philippines, my study makes another empirical contribution to the literature. While the initial triggers for migration are very similar and are mainly economic for both Filipino and non-Filipino respondents, there are some differences in terms of migration decision making process between these different ethnic groups of live-in caregivers. While Filipino culture encourages female migration and embraces positive attitudes toward women who migrate as domestic workers, this is

not the case with some other ethnic groups. As the interviews with Chinese and Indian respondents show, the migration of women is often discouraged in certain countries and there may be stigma attached to domestic work which can hamper one's desire to migrate. Moreover, recruitment agencies and schools for live-in caregivers seem to be much more available to Filipino respondents given that in Asia labour migration is highly institutionalized and supported by governments of many countries.

Not only do social networks play an important role in the migration decision making among LCP workers, but also in the very act of migration and finding a job in Canada. In particular, as illustrated in chapter 6, both formal networks (such as recruitment agencies, schools for live-in caregivers, Canadian embassies, etc.) and informal networks of family and friends assist live-in caregivers' in their migration and search for a job. While immigrant live-in caregivers tend to rely mostly on recruitment agencies to find a job, they are greatly helped by family and friends when it comes to covering the costs of migration (i.e., application, placement fees, air fare and any other required fees). My research also reveals that live-in caregivers sometimes (indeed increasingly) are directly sponsored by family and friends within their co-ethnic communities. These results parallel previous research (Alcuitas et al, 1997; Cameron, 1999; DeVan, 1989; Grandea, 1996; Mikita, 1994; Zaman, 2006). Still, my study adds on these previous studies by revealing that social networks play an important part in the processes of migration and finding a job of all immigrant live-in caregivers in Canada, not only of *Filipino* ones on which most of these previous studies were focused.



Chapter 6 also sheds light on another, previously unexplored issue- the factors that impact on the type of care in which live-in caregiver ends up working upon arrival to Canada. It shows that one's *human* capital (education, skills, experience) and networks (both formal and informal) (in which social capital is embodied) as well as one's position in different cross-cutting *hierarchies of difference* (*gender, race, ethnicity, age*) determine the type of care in which live-in caregivers choose to work. Another important insight related to the process of migration brought about by my study is that it shows how live-in caregivers' migration to Canada compares to their migration to other countries (such as Taiwan and Singapore) in which they tend to work temporarily- the issue that previous studies failed to explore. It demonstrates that it takes much longer to come to Canada as live-in caregiver than to other countries employing domestic workers because of Canada's complex migration procedure that requires demanding paperwork.

Chapters 7 and 8 present important findings with regards to previously neglected issue of the impact that type of care live-in caregiver provides has on his/her working and living experiences. In particular, my findings described in Chapter 7 reveal that that type of care significantly impacts on live-in caregiver's working conditions. In fact, the interviews reveal that LCP workers caring for kids experience greater problems when it comes to employer's compliance with terms of their employment contract than live-in caregivers working with older adults. Most live-in child caregivers complain that employers: 1) often do not respect benefits such as sick leave; 2) make them work overtime and do not compensate them appropriately for that; 3) expect them to perform additional work not stipulated by their job contracts and 4) do not pay them appropriately

and on time. On the other hand, most of live-in elder caregivers report that job contracts are fair and followed by their employers with the exception of statutory holidays. Moreover, my research has shown that each type of care carries specific challenges that influence live-in caregivers' working experiences. LCP workers caring for children experience challenges related to early age such as different behavioural and disciplinary problems, problems with decision making, etc. LCP workers caring for elderly encounter problems related to the old age of their clients such as dementia, aphasia, depression, death, etc. Thus, LCP workers taking care of older adults seem to be advantaged in terms of employer's compliance with employment contracts. Still, they seem to face greater issues at their job because of the demanding and sensitive nature of the type of care they need to provide to their elderly clients.

I make a case for four types of relationships between immigrant live-in caregivers and their employers: *professional*, *in-between professional and friendly/family like*, *friendly/family like* and *discriminatory*. While both live-in child and elder caregivers report developing *friendly/family like* relationship with their employers, it has been revealed that elderly people tend to show more respect and appreciation towards live-in caregivers than is the case with parents. Such a finding is in tune with findings of some international studies that find that those taking care of elderly tend to be respected and loved more than other domestic workers (Glenn, 1986; Parrenas, 2001).

The data outlined in Chapter 8 suggest that the type of care has a significant impact on live-in caregiver's living conditions. In particular, my interviews have shown that both live-in child and elder caregivers can experience very challenging living

arrangements (such as violation of privacy, space restrictions and bad room conditions) while working in employer's home. Still, freedom of movement and social life are more limited in the case of those caring for the elderly, as they are not permitted to leave house after working hours due to the vulnerable state of their clients.

Although previous studies have documented difficult working and living conditions of immigrant live-in caregivers in Canada (Grande, 1996; Grande & Kerr, 1998; Stasiulis & Bakan, 2003; Stiell & England, 1997), most of them tend to see live in caregivers as a homogenous group. As a result, they fail to examine differences in their experiences according to the type of care. Thus, by exploring such differences in working and living experiences based on the type of care live-in caregivers perform, my study makes an important contribution to the past literature. Such contribution to the existing knowledge is important given that it indicates a need for policies that would respect differences in live-in caregivers' working and living conditions according to the type of care.

In addition, the data presented in chapter 8 shed light on another relatively unexplored issue- namely- the role of social networks (and more specifically different types of ties) in LIC's living experiences. My findings reveal that informal networks (family, friends) have the most important role to play in assisting immigrant live-in caregivers in the process of their adaptation to the difficult living conditions they experience while working under LCP. They provide them with various kinds of help, including information, emotional and financial support. Compared to informal networks, role of formal organizations in the process of their adaptation is limited. Very few

participants reported interacting with immigrant organizations and organizations serving specifically immigrant live-in caregivers (domestic workers' organizations). Live-in caregivers fail to use immigrant organizations due to their lack of awareness of their eligibility for services they can offer to them as well as limited funding that makes their services scarcely available to LICs. Moreover, domestic workers' organizations are rarely used by live-in caregivers since they are often unaware of their existence or they are geographically remote and as such unavailable to LCP workers.

In Chapter 9, important insights with regards to relatively unexplored issue of integration experiences of LCP workers after the program and especially the role of social networks in such processes were explored. My findings reveal that both the process of the PR application and the process of educational upgrading are very long, expensive and complex. My findings have shown that both informal (family and friends) and some more formal networks (such as CIC, colleges and employment agencies) have an important role to play for live-in caregivers in the processes of application for PR, upgrading and finding a job. Other formal networks (such as, for instance, immigrant settlement organizations) play a very limited role in the processes of LIC's integration after LCP. For example, while some of the interviewed LICs assumed they would be refused if they turned to immigrant organizations for help regarding the process of upgrading (as this was often the case while they were under LCP), others were uninformed about the type of services they can receive from particular organizations. Although informal networks of family and friends are major source of help for live-in caregivers during the process of job search in period after LCP, the assistance these networks can garner is limiting for live-in

caregivers. My findings suggest that because they rely so heavily on these close personal networks at that point of time, LCP workers get trapped in low paid jobs such as working in factory or food chains, babysitting and housekeeping.

By bringing all these insights with regards to unexplored aspects of migration, working, living and integration experiences of immigrant live-in caregivers, my study makes empirical contribution to the body of previous research on experiences of LCP workers in Canada. More broadly, by garnering such knowledge with regards to experiences of this particular group of immigrant workers in Canada, my study contributes to the research on the experiences of domestic workers in an international context. Lastly, my research also makes a contribution to the immigration research focusing on social networks. As the above outlined findings have demonstrated, informal networks of family and friends play an important role in experiences of LCP workers in Canada. While they are certainly useful to live-in caregivers in the process of their migration and adaptation to hard living conditions in Canada under the LCP, their utility decreases after some time, in particular after live-in caregivers obtain PR and are about to start the process of integration into Canadian labour market. Thus, social networks are not static and their usefulness may alter with time. Majority of the studies of informal networks in the process of migration fail to consider such a fact highlighting instead “their existence, operation and persistence across time and space” (Boyd, 1989, p.655). Thus, together with few other studies (e.g.-Menjivar, 1994; Rannut, 2010), my study challenges such a simplified representation of long-term usefulness of social networks.

### **10.3 Policy Implications and Recommendations<sup>28</sup>**

The findings of my research presented in this dissertation have important policy implications. They indicate some policy changes that should be considered to improve the migration, working, living and integration experiences of this group of immigrants.

The interviews with live-in caregivers reveal the need to change migration procedures for live-in caregivers in the following ways: 1) processing of the applications should be done in a more efficient way and duration of the process should be same for all applicants, regardless of country in which they apply; 2) paperwork should be simplified; and 3) recruitment agencies and employers should be more closely monitored and controlled given their tendency to disobey the existing rules. As discussed earlier in this dissertation, while changes introduced in 2010 to the Live-in Caregiver Program stipulate that employer is responsible for any recruitment-associated fees (such as cost of services provided by recruitment agencies or live-in caregivers' air fare), my research findings indicate that not all employers adhere to such rules. This calls for stronger enforcement of such rules possibly with introduction of high penalty fees that would be charged to employers in the case of non-compliance. Moreover, given the bad treatment of live-in caregivers by some recruitment agencies, there is need to provide their regulation either

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<sup>28</sup> Many of the policy implications outlined in this chapter are discussed in the IRPP paper titled "Economic and Social Integration of Immigrant Live-in Caregivers in Canada", written by me and my co-author Dr. Bourgeault. For a full reference, see Atanackovic and Bourgeault, 2014.

through voluntary codes of practice<sup>29</sup> or if this appears to be insufficient to achieve such a goal, by government agency.

Given that each type of care carries specific challenges that impact on one's experience of working and living as live-in caregiver in Canada, any future policy interventions should be attentive to the type of care to secure better working and living conditions for this group of workers. As we have seen, one of the challenges that is specific to those taking care of old people is their clients can pass away. This is not only emotionally difficult for live-in caregivers, but may also result in a job loss. As this can happen before LCP worker have fulfilled their two year requirement for permanent residency, it may compromise live-in caregivers' chances for gaining such status. Thus, in order to ensure that live-in caregivers taking care of elderly are given enough time to achieve their requirement for PR, their minimum working years could be extended. More specifically, given that the current pre-requisite for permanent residence dictates that live-in caregivers should accumulate two years of authorized full-time employment as live-in caregiver within four years from arrival date, they could be given more time (five or more years) to meet such requirement.

As my findings have demonstrated, freedom of movement and social life are more constrained in the case of live-in elder caregivers, as they are not allowed to leave the

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<sup>29</sup> In May 2010, the World Health Organization [WHO] Global Code of Practice on the International Recruitment of Health Personnel was established by the 63rd World Health Assembly (WHO, 2014). This code aims to "establish and promote voluntary principles and practices for the ethical international recruitment of health personnel, taking into account the rights, obligations and expectations of source countries, destination countries and migrant health personnel" (WHO 2010, p.1). Such code states that "member states should, to the extent possible, encourage and promote good practices among recruitment agencies by only using those agencies that comply with the guiding principles of the Code" (p.10).

house after working hours due to the vulnerable state of their clients. Thus, the nature of their job hinders live-in elder caregivers from participating in social events hosted by live-in caregiver organizations or immigrant organizations. One way to help them enrich their social lives is to provide them with some sort of opportunity for social interaction such as through online meetings with fellow live-in caregivers.

Moreover, as evident from my findings, both live-in child and elderly caregiver sometimes have to deal with medical conditions suffered by their clients that are especially demanding in terms of care that should be provided. Still, current wages or education/training of live-in caregivers do not take into account such special care needs. Therefore, wages of live-in caregivers should be modified so that they correspond to the health conditions of clients in their care. Given that labour legislation is jurisdiction of provincial and territorial governments (Worswick, 2013), they could ensure that special care needs are reflected in wages of those who care for people with medical conditions.

The results of my research indicate the need to truncate or even eliminate the long, expensive and demanding immigration procedure that is part of LICs' transition from temporary to permanent residency and family reunification status. Indeed, there are some indications that government is taking some steps to shorten the waiting times for PR applications. More specifically, in October 2013 Canada's Citizenship and Immigration minister has declared "aggressive new action to address the growing backlog and increasing processing times in the Live-in Caregiver Program" (CIC, 2013c).

My findings also suggest that the prohibition against taking any course longer than six months in duration without being granted a student permit while under the



program hinders the process of upgrading among immigrant live-in caregivers in post LCP period. To encourage upgrading, the rule should be changed. Lastly, employers could help with the process of upgrading, which is very expensive for live-in caregivers, by contributing certain amount of money each month to a bursary fund intended for such a purpose. In this way, upon expiration of the employment contract live-in caregivers would have financial means to cover expenses for credential recognition and skills upgrading.

Moreover, my findings indicate that live-in caregivers in Ontario should be made aware of the existence of immigrant settlement organizations and services they can provide to assist LICs' adaptation both during and after LCP. Given that many live-in caregivers have poor English language skills, such information should be available in different languages so that live-in caregivers can benefit from it. Moreover, immigrant organizations should be provided with more funding so that they can better assist LCP workers during their involvement with LCP. Also, live-in caregivers should be better informed about the type of services that certain immigrant organizations offer (such as, for instance resume writing, language courses, preparing for job interviews, etc.) so that they can benefit from them in their efforts to integrate into Canadian society after LCP.

My findings also suggest the need to spread a greater awareness of the existence of organizations serving specifically immigrant live-in caregivers (i.e. - domestic workers' organizations) in the province of Ontario and the ways in which they can help live-in caregivers both during and after the program. Moreover, as evident from my

findings, there is a need to make these organizations more widely available by establishing them even in smaller cities.

While these specific policy changes would certainly be helpful to live-in caregivers, my research has also indicated the need for more substantial changes in order to assist LCP workers in their work, life and integration in Canada. As is obvious from my findings, the live-in requirement complicates the working and living conditions of LICs in Canada. Thus, the elimination of live-in requirement that has been proposed by some (Arat-Koc, 2001; Grandea and Kerr, 1998; Pratt and PWC, 2003) would solve many problems that live-in caregivers face in their jobs (e.g. - working overtime, lack of privacy, social isolation). In that case, live-in caregivers would be responsible for finding suitable housing and pay for it which means that their wages would have to be increased too, so that they can cover such expenses.

Another substantial change would be to provide live-in caregivers with an opportunity to apply for PR status right upon their arrival in Canada, but remain tied to the care sector, not to the specific employer as it is currently the case. This would ease the process of changing employers as well enable LICs to start the process of reunification right after they land in Canada. More fundamentally, as already proposed by some research (Grande 1996; Arat-Koç 2001), LCP workers should be provided with the opportunity to enter Canada as independent immigrants. This option would mean, as Spitzer and Torres (2008) put it, “above all, recognizing that care-work is valuable, complex, and requiring of skill, and not the natural or innate domain of women” (p. 24).

Whether enforced through an incremental approach or through more fundamental reform, the above proposed immigration and labour policy revisions may substantially improve the migration, working and living and integration experiences of immigrant live-in caregivers in Canada.

## **10.4 Theoretical Contributions**

In addition to empirical contributions to the body of previous research, my study also makes a theoretical contribution to the past research. Given that it emphasizes a role of networks in people's lives, network theory lends itself very well to my research objectives focusing on the role of networks in the migration, working, living and integration experiences. However, my research has also shown that while social network theory is useful in considering the role of social networks in migration, living and integration experiences of LCP workers, it is not sufficient to come to a complete understanding of these issues.

In particular, I have made a case that network theory of migration by Massey et al. (1993, 2005) does not encourage us to take into consideration the role of cross cutting hierarchies of difference (*gender, race/ethnicity and age*) and their intersections which prove to be very important factors in the processes of decision making and very act of migration of immigrant live-in caregivers. Moreover, I have also demonstrated how concepts of *strong and weak ties* as envisioned by Granoveter (1973,1983) do not take into account the role of the three factors that impact on living and integration experiences

of LCP workers 1) content of the information transmitted through the tie; 2) formal networks; and 3) cross cutting hierarchies of difference. In presenting my findings I have also shown how an intersectionality approach adds on social network theory (and in particular both on network theory of migration by Massey at al. and Granovetter's concepts of strong and weak ties) by leading us to consider a role of cross- cutting hierarchies of difference (i.e. - *gender, race, class, ethnicity, nationality, citizenship, marital status/family situation* and *age*) in people's experiences.

By integrating social network approach with intersectionality we are able to better comprehend experiences of LCP workers. On the basis of that, I conclude that one should combine social network theory and intersectionality when exploring such issues with regards to not only LCP workers in particular, but also immigrant workers in general. Indeed, given that hierarchies of difference seem to loom large in the experiences of immigrant population both in Canada and other countries (see for instance, Dion, 2001; Das Gupta, 1996; Man, 2004; McCall, 2001), any exploration of experiences of immigrant workers and especially the role of network in such experience would benefit from such conjunction. Thus, by identifying the problems with regards to social network theory and how they could be solved, my research advances this particular theoretical framework. This is the key theoretical contribution of my thesis research. Thus, in addition to bringing new empirical insights to the already existing body of literature on immigrant live-in caregivers in Canada and in turn suggesting policy changes, my study also makes a *theoretical contribution* to sociological theory, literature pertaining specifically to experiences of immigrant live-in caregivers in Canada and more broadly,

to the literature related to immigrant (domestic) workers in an international context as well as to immigration research focusing on social networks.

## **10.5 Limitations of Research/ Areas needing Further Attention**

There are always limitations to any research project; some are inherent in the methods, some are as a result of poor implementation or research design. I outline here some limitations of this research. I conclude with promising areas for future investigation, some of which build upon the key theoretical insights garnered from this research.

The first concern is with the sampling strategy and consequent representativeness or range of participants' experiences. Although generalizability is not a primary aim of in-depth, qualitative research, there are some issues with regards to make-up of my sample that need to be noted here.

In collecting data for my qualitative study, I relied on both snowball and purposive sampling methods. Snowball sampling was clearly useful given the difficulties I encountered with recruitment of this population of participants. Even though I strived to recruit as many male and non-Filipino participants for the study, majority of my sample are Filipinos (in particular, 24 of my participants) and female (in particular, 32 participants). Such a sample composition reflects the make-up of general population of live-in caregivers in Canada. While some participants in my sample came from two top source countries of LCP workers such as India and Slovakia, none of my participants came from other two countries from which they tend to migrate the most, namely - England and Jamaica. Thus, future studies focusing on migration, working, living and

integration experiences of immigrant could benefit from recruiting more male and non-Filipino participants, especially those that come from countries that are the most frequent sources of LCP workers.

For instance, as demonstrated in chapter five, in my study I explored how gendered societal attitudes toward migration vary culturally (by country of origin) and how in turn, they can impact on migration decision of immigrant live-in caregivers. While in my interview guide, I did not explicitly focus on societal attitudes towards live-in caregiver occupation, in some of my interviews this issue emerged as a significant factor in migration decision. As already mentioned, in my interview with a woman who migrated from India, I found that she kept silent about her job in Canada due to stigma that her culture attaches to such a job. On the other hand, some Filipino women I interviewed reported that they were considered heroines because of their decision to migrate as live-in caregivers and support family backhome.

Thus, the role those attitudes towards live-in caregiver occupation play in the migration decision of prospective LCP workers seem to be significant and as such should be explored more fully by the future research. More specifically, future research should aim to examine the how the attitudes towards live-in caregiver jobs vary culturally and especially between the other cultures from which LCP tend to migrate. In doing so, such research could build on the key theoretical insights brought about by my research. In particular, guided by the theoretical contribution of my study that emphasizes how network theory can benefit from intersectionality, such research could explore the role of not only gender, race and ethnicity but also another hierarchy of difference, namely, class.

Different standings in the hierarchies of class of people from different countries may intersect with their ethnicity and gender to impact on their decision to migrate to Canada as live-in caregivers.

By examining the experiences of LCP workers in province of Ontario my study has made some contribution to the understanding of the experiences of LCP workers in Canada. Still, future studies could compare differences in working, living and integration experiences between live-in caregivers working and living in different provincial contexts. While LCP program is federal program and as such prescribes same rules for all live-in caregivers across Canada (except for Quebec, which has some unique rules<sup>30</sup>), there are some differences between the provinces in terms of labour standards and availability of some services that are mandated provincially. For example, in Ontario, despite the issues with funding, live-in caregivers are officially eligible for provincially funded settlement services, while in Newfoundland and Labrador the province does not fund settlement or support services for migrant workers at all, including live-in caregivers (Canadian Council for Refugees, 2013). Thus, conducting a comparative study that would compare LCP workers' experiences in different provincial contexts would be beneficial.

In addition, as most previous studies on the experiences of live-in caregivers in Canada are qualitative in nature, we need more quantitative or mixed method studies to more fully establish how relevant the experiences that emerged from this study are in the broader caregiver population. While qualitative research helps us to explore how live-in

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<sup>30</sup> For instance, in Quebec live-in caregivers are hired in a different manner than in the rest of the country given that province is in control of its own migration. For more information on that, see [ministère de l'Immigration et des Communautés culturelles \(Quebec Immigration\)](#) website.

caregivers experience certain challenges they encounter with regards to their migration, work, life and integration in Canada, adopting quantitative research methodology would help us assess the prevalence of such problems. Indeed, reflecting on the difference between qualitative and quantitative methods in her paper that focuses on the quantitative/qualitative divide, Westmarland (2001) states: “Although a survey may be the best way to discover the prevalence of problems, interviews are needed to fully understand women's experiences and theorise these experiences with a view towards social change”.

For instance, as evident from chapter 9, few of live-in caregivers decide to upgrade and many of them end up in low paid jobs such as working in factory or food chains, babysitting and housekeeping after they finish the LCP. Thus, employing a survey, for instance, would help us to statically assess the severity of this problem as well as the impact of various factors that play role in it (e.g. - gender, ethnicity, age, personal networks, etc.). Indeed, as Spitzer and Torres (2008) note it “longitudinal, mixed-method (qualitative and quantitative) research is required to assess the long-term impact of the LCP on former live-in caregivers’ integration into Canadian society.” (p.29). As they further explain, “this type of research will need to be conducted in collaboration with Government departments, as academic and community researchers lack access to a central registry of current LCP workers and are less able to follow informants after completion of the Program” (Spitzer & Torres, 2008, p.29).



Over the course of this research, I aimed to come to a better understanding of the experiences of LCP workers. As it is often the case with research projects, while I was finding out about their experiences, some new issues that need further research emerged.

One issue that emerged during some of my interviews that needs to be explored further is the relationship between live-in caregivers and the family members of their employers. While in my study I explored an issue of relationship of live-in caregivers with their employers, some live-in caregivers complained about having bad relationship with or even being discriminated by employer's immediate or extended family members. One Canadian research project shows that "LCP workers felt that having a good relationship with the family members was of such importance that they would rather receive lower wages but have a good relationship with the family members (Bourgeault et al., 2010, p. 95). Thus, it seems that the relationship of LCP workers with employers' family members represents an important aspect of their working experiences. Since the research on such an issue is scarce, we need more research on this important topic.

Moreover, in Ontario migrant workers, including live-in caregivers must wait three months before they are eligible for healthcare coverage, during which their employer is responsible for providing health insurance. Given that it often happens that employer disobeys such a rule, it is important to find out about strategies that live-in caregivers employ to solve their health issues during first three months in the program. One former live-in caregiver who was pregnant at the time of the interview stated that she

was lucky not to get pregnant while still in the program. Thus, we also need to find out more about coping strategies of pregnant LCP workers.<sup>31</sup>

Finally, in my research I focused my attention on two groups of live-in caregivers - those working with children and those working with elderly. Still, there is third group of live-in caregivers providing care to disabled people that I did not explore in my dissertation study. To the best of my knowledge, so far none of the previous studies in Canada has been conducted on such a group. Thus, my personal future research destination is exploration of experiences of this particular type of workers and more particularly, how the type of care they perform influences their working and living experiences. Ultimately, I would be able to compare their experiences with experiences of two other groups explored in my dissertation.

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<sup>31</sup> That this issue needs further exploration was also noted by Spitzer and Torres (2008), in their overview of literature on gender-based barriers to settlement and integration for live-in caregivers.

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## Appendix 1

### Recruitment Poster



### Attention Immigrant Live-in Caregivers!

**Participants are needed for a study of:**

### **The Migration, Working, Living and Re-Settlement Experiences of Immigrant Live-in Caregivers in Ontario, Canada**

I am looking for current and former live-in caregivers of elderly who came to Canada through Live-in Caregiver Program or otherwise.

I would like you to take part in an approximately 60-90 minute long interview in person or over the phone.

The questions will mostly be open-ended regarding your background, views and experiences of immigrating to, working and re-settlement in Canada.

In the appreciation for your time, you will receive \$20.

To learn more about this study or to take part in an interview please contact:

Jelena Atanackovic

@

905-920-5398 or

[atanaci@mcmaster.ca](mailto:atanaci@mcmaster.ca)

This study has been reviewed by, and received ethics clearance through, the McMaster University Research Ethics Board (MREB)

## Appendix 2

### Letter of Information and Consent Form



DATE: \_\_\_\_\_

#### *Letter of Information for:*

#### **The Migration, Working, Living and Re-settlement Experiences of Immigrant Live-in Caregivers in Ontario, Canada**

##### **Principal Investigator:**

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##### **Faculty Supervisor:**

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#### **Purpose of the Study**

The purpose of this study is to examine the migration, working, living and re- settlement experiences of immigrant live-in caregivers in Canada.

#### **Procedures involved in the Research:**

I am inviting you to take part in an in-depth interview about your experiences. The interview will take approximately 60-90 minutes. You can choose time and place for an interview. The questions will largely be open-ended (not yes or no questions) about your views and experiences of migrating to Canada and, your experiences here. Here is a sample of the kinds of questions I'll ask :

- *Background information such as your age, gender, marital status, income, ethnic origin, economic situation, etc.*
- *How you came to Canada;*
- *Your experiences of the live-in caregiver job(s) that you hold/held in Canada.*
- *Your living conditions as a live-in caregiver*
- *What your employer was like*
- *What it was like to re-settle including experiences related to immigration procedure for obtaining landed immigrant status and process of your preparation for and finding the employment after Live-in Caregiver Program.*

I would like to tape record the interview and take notes with your permission. The tapes will be typed out word for word for analysis to the study and then erased.



**Are there any risks/discomforts to doing study?**

It is possible that there may be some discomforts related to answering some of the interview questions since the experience of migration is challenging. You may also worry about how others will react to what you say. Here are some questions that you might find too sensitive and thus feel uncomfortable to answer:

- Have you ever experienced any kind of abuse (physical, psychological or sexual) by your employer?
- Have you ever felt discriminated against by your employer on the basis of your race/ethnicity/gender?
- What is your current gross income (before tax) per month?

Because of potential risks/discomforts that you might feel regarding some questions, I will treat your participation and identity confidential (see Confidentiality below). Please also be aware that you do not need to answer questions that make you uncomfortable or that you do not want to answer.

**Are there any benefits to doing this study?**

Taking part in this study will not benefit you directly. However, this research may bring some indirect benefits to you. In doing this research, I hope to learn more about the migration, working, living and re-settlement experiences of immigrant live-in caregivers. I hope that what is revealed through this study will help me suggest systemic changes that may be needed to address the issues you raise. For this reason, I am committed to making the results of our study known to key policy decision-makers so that such changes could be initiated.

**Payment or Reimbursement:**

I am pleased to provide you with a \$20 in cash for participating in this study.

**Confidentiality:**

Every effort will be made to maintain your confidentiality and privacy. Anything that you say about yourself that could identify you will not be published or revealed to anybody else. Any material used in the publications resulting from this study will have identifying characteristics or statements omitted or paraphrased to help ensure confidentiality. I will not be asking you to provide your name in the interviews, so as to ensure your privacy. Only the interview number will be on the interview transcripts and it will not be linked to your name (which will be on the consent form). All study materials will be kept in a locked desk drawer and on a password protected desktop computer until the end of the study, at which time the transcripts will also be destroyed unless you give permission that they may be retained.

The reason for which I would like to keep the data is that it will allow me to better understand the experiences of this group of migrants and compare them to the results of my future studies on this and other group of immigrant caregivers. Also, by keeping the data and doing such comparisons, I would be able to inform immigration and labor policy in this area. Any future use of the data will respect all of the confidentiality and security commitments I am making for this study and will only proceed after ethics clearance.

**Participation:**

Your participation in this study is voluntary. It is your choice to be part of the study or not. If you decide to participate, you can decide to stop at any time, even after signing the consent form or part-way through the study. If you decide to stop participating, there will be no consequences to you. In cases of withdrawal, any data you have provided to that point will be destroyed unless you indicate otherwise and you will still receive the \$20 compensation. If you do not want to answer some of the questions you do not have to, and you can still be in the study.

**Information about the Study Results:**

I expect to have this study completed by approximately July, 2010. If you would like a brief summary of the results, please let me know whether you want to receive it by mail or e-mail. Please make sure that you provide me with your mailing (home or other) or e-mail address in the consent form.

**Questions about the study:**

If you have questions or require more information about the study itself, please contact me at 905-920-5398 or send me an e-mail at [atanacj@mcmaster.ca](mailto:atanacj@mcmaster.ca)

This study has been reviewed and approved by the McMaster Research Ethics Board. If you have concerns or questions about your rights as a participant or about the way the study is conducted, you may contact:

McMaster Research Ethics Board Secretariat

Telephone: (905) 525-9140 ext. 23142

c/o Office of Research Services

E-mail: [ethicsoffice@mcmaster.ca](mailto:ethicsoffice@mcmaster.ca)

I will give you a copy of this letter.

Thank you for your interest and your participation in this research.



Inspiring Innovation and Discovery

**The Immigration, Working, Living and Re-settlement  
Experiences of Immigrant Live-in Caregivers in Ontario, Canada**

**Project Consent Form**

I have read the information presented in the information letter about a study being conducted by Jelena Atanackovic, of McMaster University. I have had the opportunity to ask questions about my involvement in this study and to receive additional details I requested. I understand that if I agree to participate in this study, I may withdraw from the study at any time.

Name of Participant (please print) \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please indicate (with your initials) your agreement or disagreement to each of the following requests and sign the form at the bottom. You will be provided with a copy of this form.

1. Do you agree to the taping of the interview?

YES \_\_\_\_\_ NO \_\_\_\_\_

2. May the typed out text of your interview be retained after the completion of this study since I am intending to do more similar studies and compare their results to this one?

YES \_\_\_\_\_ NO \_\_\_\_\_

3. Do you wish to have a summary of the results from this study?

YES \_\_\_\_\_ NO \_\_\_\_\_

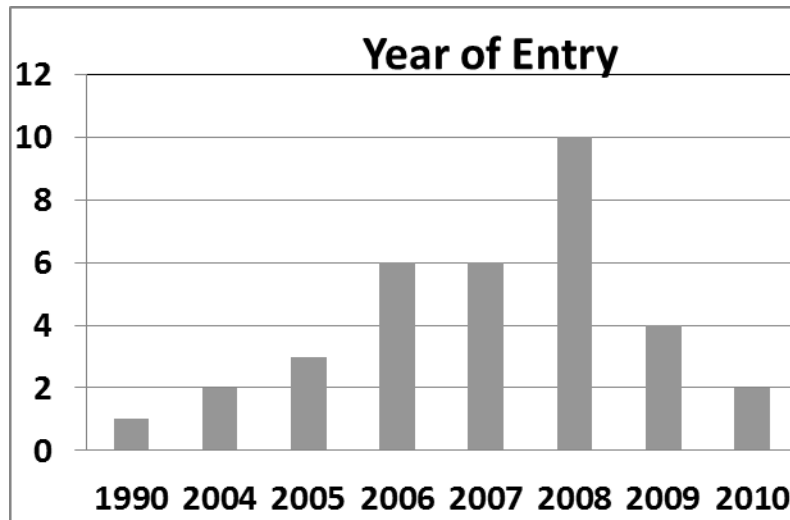
Please provide your email or mailing (home or other address):

\_\_\_\_\_

## Appendix 3

### Participants

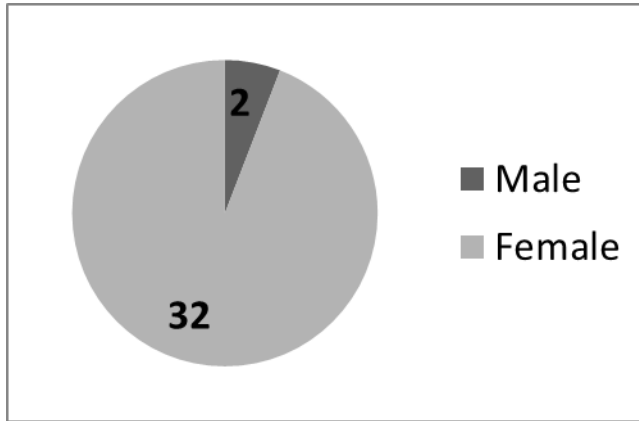
#### The year of Migration to Canada



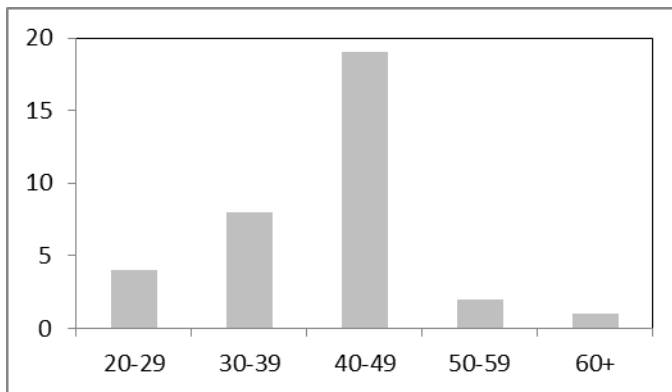
#### Country of birth

Country of birth	Frequency
China	1
India	1
Kenya	1
Peru	2
Philippines	24
Poland	1
Singapore	1
Slovakia	2
Ukrain	1

## Gender



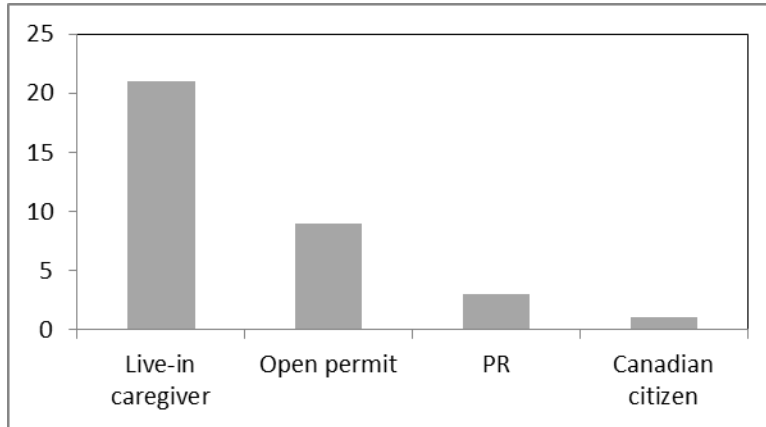
## Age



## Marital Status

Marital status	Frequency
Married	12
Divorced	3
Separated	5
Single	14

## Current Immigration Status



## Appendix 4

### Demographic Profile Sheet & Interview Guide

#### The Migration, Working, Living and Re-settlement Experiences of Immigrant Live-in Caregivers in Ontario, Canada

##### Demographic Profile

Please fill in, and tick, the following demographic questions as appropriate.

Gender: Male ☐ Female ☐

Age: 20-29 ☐ 30-39 ☐ 40-49 ☐ 50-59 ☐ 60+ ☐

Marital Status: Married ☐ Divorced ☐ Separated ☐ Single ☐ Widowed ☐

1. If you are married or with a partner, where does he/she currently live?

With me ☐

Not with me ☐ Explain: \_\_\_\_\_

2. Do you have children? Yes ☐ No ☐

If yes:

How many children do you have? \_\_\_\_\_

Are they with you in Canada? \_\_\_\_\_

3. What is your country of birth? \_\_\_\_\_

4. What do you consider to be your ethnic origin? \_\_\_\_\_

5. Do you consider yourself to be a visible minority? Yes ☐ No ☐

6. What is the highest level of schooling that you attained? (Tick ONE only)

☐ Some elementary school

☐ Vocational school

☐ Elementary school

☐ Some college

☐

☐ Some high school

College (B.S. or B.A. degree)

Specify college:

☐ High school

☐ Post graduate education

☐ Post-secondary vocational course.  
Specify course:



7. Please list country of educational training and duration of training.

Country\_\_\_\_\_ Duration\_\_\_\_\_

Country\_\_\_\_\_ Duration\_\_\_\_\_

Country\_\_\_\_\_ Duration\_\_\_\_\_

8. What was your country of last permanent residence prior to migrating to Canada?

\_\_\_\_\_  
\_\_\_\_\_

9. What was your job in that country?

\_\_\_\_\_

10. Date of entry into Canada (*year*): \_\_\_\_\_

11. What was your immigration category? -----

12. What is your current immigration status? \_\_\_\_\_

13. What is your current gross income (before tax) per month? \_\_\_\_\_

14. Are there people who are financially dependent on you? Yes ☐ No ☐

15. If yes, please specify how many and who they are. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

16. Do you send money back to people in your home country? Yes ☐ No ☐

17. How would you describe your current economic situation?

Excellent ☐ Good ☐ Fair ☐ Poor ☐

18. How would you describe your current economic situation, relative to your economic position if you were doing the same job in your own country or some other countries that are accepting live-in caregivers such as Taiwan and Singapore?

Far Better ☐ Better ☐ Same ☐ Worse ☐ Far Worse

## Interview Guide

### *Migration experiences*

*Let us discuss how it is that you came to Canada.*

1. Why did you decide to come to Canada?

1.1 Were you always thinking about coming to Canada or did want to go elsewhere?

1.1.1. Where?

2. Please tell me how you made your decision to work in Canada?

2.1 What was your financial situation backhome?

2.2 Did you migrate specifically to work as live-in caregiver?

2.3 Do you feel it was entirely your decision to go abroad, or was it more a family or collective decision?

2.4 Did any of your relatives/friends migrate to Canada before you did? If so, how close that friend/ relative was to you?

2.4.1 Has that had any influence on your decision to migrate?

2.5 In your country of origin, is it common for people to migrate?

2.6 What is people's attitude in your country towards migrant workers?

3. How did you find out about live-in care giving work in Canada?

4. What were you told/what did you know about live-in care giving/domestic work in Canada before coming here? Who informed you on this issue?

4.1 How did you end up specifically in this city?

5. Why did you look for job as child/elder care live-in caregiver?

6. When did you start planning to migrate?

6.1 What actions did you pursue prior to coming here?

*Probe about persons/agencies/organizations that helped and those that made this process difficult; i.e. embassies backhome, recruitment agencies, family, friends, colleagues, etc.*

6.2 What kind of fees did you have to pay in order to come to Canada? Did you pay it by yourself or did you have to borrow money? From whom?

6.3 Do you think that the immigration process should be changed? If so, how?

6.4 Could you compare your migration experience with migration experiences of other live-in caregivers and other immigrants?

7. What is your informal/formal work experience before coming to Canada?

8. Is this the first time you left your country to look for work?

8.1 Could you please compare your previous migration experience(s) to this experience of migration to Canada?

8.2. What kind of job you had done there?

8.3 Why you decided to migrate again?

9. How long you have lived in Canada?

10. How many jobs as live-in- caregiver you held in Canada?

11. How did you find these jobs?

11.1 Did you come here through a recruitment agency?

11.1.1 Could you tell me about your experience of applying to the agency and for a job in Canada?

11.1.2 Are you still in touch with the agency that connected you with your employer?

12. If you did not go through a recruiter, who helped you to come to Canada? Did you draw upon informal networks?

12.1 In your opinion, what are main advantages/disadvantages of coming through recruitment agency?

12.2 What are main advantages/disadvantages of relying on family, friends, acquaintances?

13. Do you think that your migration experiences were affected by your race/ethnicity/ gender or any combination of these factors?

13.1 If so, how?

## ***Working experiences***

*Let us now discuss your live-in job.*

1. Describe a typical working day with your employer.

1.1 What are/were your hours of work?

1.1.1 Do/did you work overtime? Are you paid for that?

1.2 Do/did you work on statutory holidays?

1.2.1 Were/are you paid for that?

1.3 Do/did you receive any benefits from your employer (e.g. - paid sick leave, vacation)?

1.4 Are/were you given days off?

1.4.1 If so, which are these days?

1.5 What are/were your responsibilities at work?

1.5.1 Do/did you feel that any of the activities you take on fall outside of your responsibilities?

2. Do/ did you have contract with your employer? Do/did you feel your employment contract is/was fair? Is/ was it followed?

3. Are /were you satisfied with your salary from your live-in caregiver job? Are you/were you paid on time?

3.1 How do salary and conditions of live-in caregiver job in Canada compare to salary and conditions of the job that you worked in your home country?

4. Tell me about the things you like/liked most about your job.

5. Tell me about things you would change/would have changed about your job.

6. Describe the challenges you face/faced in your job.

*Probe further about the context of their work including wages and working conditions; for those working with elderly, probe about how they cope with the death of an older person under their care. Also, probe about cultural issues and language barriers they face in their jobs.*

7. Do you have experience of live-in work with different clients (elderly, children)?

7.1 Could you, please, reflect on differences between these different types of care-giving and how they impact on you?

7.2 In your opinion, what are advantages/disadvantages of each of these types of care-giving?

7.3 Do you think that your working experiences are affected by your race/ethnicity/ gender or any combination of these factors?

7.3.1 If so, how?

### ***Relationship with Employer***

*Let us now discuss your relationship with employer.*

1. What were your expectations regarding the characteristics of your employer before you started working for this person?

2. Could you, please tell me about your employer.

2.1 Describe the kind of person he/she is and discuss your relationship.

2.1.1 Have you developed a sense of companionship with your employer that goes beyond typical employer- employee relationships? Have you ever felt as a part of your employer's family?

2.1.2 Have you ever experienced any kind of abuse (physical, psychological or sexual) by your employer?

2.1.3 Have you ever felt discriminated against by your employer on the basis of your race/ ethnicity/gender?

2.1.4 Have you ever come into verbal conflict with your employer?  
Over which issue?

2.2. What do you think your employer is looking for in an employee?

2.3 Do you intend to change/have you ever changed the employer?

2.3.1 Why?

2.3.2 What will be/ has been that process like?

3. In your opinion, what would be an ideal employer?

### ***Living Experiences***

*Let us now discuss your living conditions.*

1. Could you, please tell me how you feel/felt about living in your employer's home?

1.1 Do /did you feel that your privacy is/was invaded in any way by your employer?

1.1.1 Are/were you provided with a separate, lockable room in the home of your employer?

1.2 Are/were you satisfied by amount and type of food that employer gives/gave to you?

1.3 Would you, please, tell me which rooms in the house are/ were you allowed to use

1.4 Are/were you allowed to leave house on some other days except for days off?

1.5 Are/were you allowed to bring guests into your room?

1.6 Are/were you allowed to use employer's phone to call your friends and family?

1.7 Could you, please describe what do you do/did on your days off?

- 1.7.1 Have you ever received a phone call from your employer on your day off?
- 1.7. 2 Why did he/she call?

2. Tell me something about your social life?

As a caregiver, do/did you feel isolated in any way?

- Who are your friends and how often you meet them?
- Do you have Canadian-born friends?

3. When you have a problem, whom do you ask for help?

- Are there any organizations helping immigrants and/or live-in caregivers in your neighborhood/city?
  - Can you describe these organizations? Tell me about the times you went to such an organization to ask for assistance.

***After LCP***

*Let us now discuss the immigration process that is a part of your transition from temporary to permanent resident status and the family reunification process and your plans for the future employment.*

1. Do you plan to start/ did you start the process of becoming a landed immigrant and process of family reunification?

1.1 What will be/was the each process like?

1.1.1 Whom do you plan/did you ask for help/information with regards to each of these processes?

*Probe about the role of employer, immigration lawyers, immigration offices, domestic workers' organizations and any other institutions and individuals that can help live-in caregivers in their transition from temporary to permanent status and process of their family reunification. . Probe which of these are considered/were helpful and not helpful.*

1.1.2 Why will you turn/did you turn to that specific person, organization or institution for help?

1.1.3 How did you hear about that particular organization/person?

1.1.4 Are you planning to pay/did you pay the application fees by yourself or will you borrow/did you borrow money for that purpose? From whom?

2. If you are not a live-in caregiver anymore, what kind of work do you do?

2.1 What job(s) have you done since leaving this job?

2.1.1 Were you satisfied with job(s) you found?

2.1.2 Tell me how you found these jobs.

3. *I would like you to think a little bit about the future now. I wonder if you could tell me where you think you will be in five years. Probe: stay in Canada? Take a different kind of job?*

4. Please tell me about your educational history and training that you got backhome.

5. What are you planning to do /did you do in order to improve your labour outcomes after you are/were done with live-in caregiver work?

5.1 Are you taking / do you plan to take/ did you take any courses in order to upgrade your skills?

5.1.1 How did you find out about these courses?

5.1.2 How much do /did you pay for these courses? Do/did you pay for these courses by yourself or somebody lands/landed you money? Who?

5.1.3 Is there any person or organization that proves/ proved to be especially useful to you in terms of getting information on upgrading/recognizing your skills?

6. Is /was there any person/ organization/institution that might help/helped you to locate your employment after LCP?

6.1 What would be your recommendation to any immigrant live-in caregiver who wishes to upgrade his skills, get his/her skills recognized and find a better job after he/she is done with live-in caregiver work?

7. Do you think that your employment experiences after LCP will/were influenced by your race/ ethnicity/ gender or any combination of these?

7.1 If so, how?

8. Is there anything that I did not ask during this interview, but you feel is important and would like to talk about?