

**THE OUTSOURCING OF ELDERCARE TO MIGRANT WOMEN:
WHO DECIDES AND WHAT THE CIRCUMSTANCES ARE
LA EXTERNALIZACIÓN DEL CUIDADO DE LAS PERSONAS MAYORES
A MUJERES MIGRANTES: QUIÉN DECIDE Y EN QUÉ CIRCUNSTANCIAS
TERCEIRIZAÇÃO DO CUIDADO DE PESSOAS IDOSAS ÀS MULHERES
MIGRANTES: QUEM DECIDE E EM QUE CIRCUNSTÂNCIAS**

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ABSTRACT: The union between care and women and the fact that it is a social reality in continuous change makes it a strategic field from which to analyze the implications that the socio-economic and cultural transformations have in the existing gender system. Thus the crisis of care is what shows the crisis of the current gender system on which patriarchal society is based and the reproduction of human life is organized. In this context, families have developed strategies to address the care, being one of them to outsource part of the caring tasks in the home by hiring migrant women. With this research we aim to explore how the hiring of a migrant woman for the care of an elderly person takes place in the homes of Avila. For this purpose an ethnographic approach has been carried out to achieve the object of this study, taking as a unit of observation the contracting households and as a geographic field of study the province of Avila. The technique used to collect the information has been in-depth interview. Fifteen people who have hired immigrant women to care for their elderly have been interviewed. We have sought the variability of men and women, the rural or urban context and whether the caregivers, Latin American immigrants, cared full-time or part time. The results indicate that the decision to hire a woman to care for the elder person usually occurs after a deterioration or change in the status and health of the elderly, whether at physical,

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	<p>psychological or social level. The decision to hire is taken mainly by the daughters, showing that this area is considered as something typical of women, to which it is allocated as its own task. It is concluded that the modality of the contracting is very influenced by the greater or less degree of dependence of the elder, that lives alone or accompanied and that resides in urban or rural zone. Hiring a migrant woman is a strategy within a broader range of strategies that the family progressively uses to address the care of a dependent person.</p>
<p>PALABRAS CLAVES: Necesidades familiares Migrantes Trabajadores Empleo de las mujeres Etnología Relaciones interpersonales Investigación en ciencias sociales</p>	<p>RESUMEN: La unión entre cuidado y mujer y el hecho de que sea una realidad social en continuo cambio hace que se trate de un campo estratégico desde el que analizar las implicaciones que las transformaciones socioeconómicas y culturales tienen en el sistema de género existente, así la crisis de cuidados lo que muestra es la crisis del sistema de género actual sobre el que se sustenta la sociedad patriarcal y se organiza la reproducción de la vida humana. En este contexto las familias han desarrollado estrategias para abordar los cuidados, siendo una de ellas externalizar parte del trabajo de cuidados en el ámbito doméstico mediante la contratación de mujeres migrantes. Con esta investigación nos proponemos explorar como se produce en los hogares abulenses la contratación de una mujer migrante para el cuidado de una persona mayor. Para ello se ha realizado una aproximación etnográfica al objeto de estudio, tomando como unidad de observación los hogares contratantes y como ámbito geográfico de estudio la provincia de Ávila. La técnica utilizada para recabar la información ha sido la entrevista en profundidad. Se ha entrevistado a quince personas que han contratado a mujeres inmigrantes para el cuidado de personas mayores. Se ha buscado la variabilidad de hombres y mujeres, el contexto rural o urbano y si las cuidadoras, inmigrantes latinoamericanas, realizaban los cuidados a tiempo total o parcial. Los resultados indican que la decisión de contratar a una mujer para cuidar a la persona mayor se produce habitualmente tras un empeoramiento o modificación en la situación y la salud del anciano, ya sea a nivel físico, psicológico o social. La decisión de contratar es tomada de forma mayoritaria por las hijas mostrando que este ámbito está considerado como algo propio de la mujer, a la que se adjudica como tarea propia. Se concluye indicando que la modalidad de la contratación está muy influenciada por el mayor o menor grado de dependencia del anciano, que viva solo o acompañado y que resida en zona urbana o rural. Siendo la de contratación de una mujer migrante una estrategia utilizada en una fase dentro de un abanico más amplio de estrategias que la familia utiliza progresivamente para abordar el cuidado de una persona mayor dependiente.</p>
<p>PALAVRAS-CHAVE: Necesidades da Família Trabalhadores migrantes emprego das mulheres Etnologia Pesquisa Social Pesquisa em ciências sociais</p>	<p>RESUMO: O vínculo entre cuidado e mulher e o facto de que seja uma realidade social em contínua mudança, converte o anterior vínculo num campo estratégico desde o qual analisar as implicações que as mudanças socioeconómicas e culturais tem no sistema de género existente, Assim sendo a crise dos cuidados o que mostra é a crise do actual sistema de género actual, no qual baseia-se a sociedade patriarcal é a organização da reprodução da vida humana. Neste contexto, as famílias têm desenvolvido estratégias para abordar o cuidado, sendo um deles a terceirização de parte do trabalho de cuidados em casa com a contratação de mulheres migrantes. Com esta pesquisa pretende-se explorar como se produz a contratação de uma mulher migrante para cuidar de uma pessoa idosa nas casas (ou famílias) da província de Avila. Para atingir o objetivo do estudo foi realizada uma abordagem etnográfica, tendo como unidades de observação as casas contratantes e como âmbito geográfico do estudo a província de Ávila. A técnica utilizada para coleta de dados foi a entrevista em profundidade. Foram entrevistadas quinze pessoas que contrataram mulheres imigrantes para cuidar das pessoas idosas. Tem-se procurado a variabilidade de algumas variáveis: homens e mulheres, o contexto rural ou urbano e se os cuidadores, os imigrantes latino-americanos, realizavam os cuidados a tempo inteiro ou parcial. Resultados: A decisão de contratar uma mulher para cuidar da pessoa idosa geralmente ocorre após uma queda ou alteração na situação ou saúde do idoso, seja ao nível físico, psicológico ou social. A decisão de contratação é tomada, de forma geral, pelas filhas, mostrando assim que este âmbito é considerada como um aspecto “próprio” da mulher, à qual é adjudicada como uma tarefa própria. A intenção da contratação de uma mulher é que a pessoa idosa possa conservar a sua independência, mas descarregando à família de parte do cuidado que o anterior implica. Conclusões: A modalidade de contratação é fortemente influenciada por vários aspectos: o grau variável de dependência dos idosos, que vivam sozinho ou acompanhado, em área urbana ou rural. Sendo a contratação de uma mulher migrante uma estratégia usada entre um leque mais abrangente de estratégias que a família utiliza progressivamente para abordar os cuidados de uma pessoa idosa dependente.</p>

Introduction

All along our lives, all human beings need to be cared of, therefore it is a constant for everyone and in all societies. However, in spite of the universal care, the establishment of the needs of cares and the ways of responding to them are determined by social, historical, cultural and economic factors. The beginning of this research is that in Spain, a strategy for the care of elderly people has been developed to be done by migrant women, giving them a labour way-out. Therefore the care is transferred from some women to others exceeding the national borders. This transfer of job care, whether it is paid or non-remunerated, exceeding the national borders, has put together what's been called "Global Care Chains". In this article we carry out a micro analysis of one of the links of that chain: Hiring homes.

From the theoretical approach of the meeting point of cares and gender, we have carried out an ethnographic approach to the subject of research by means of in-depth interview. This research is delimited within a wider investigation developed to get PhD studies and it tackles the transference of cares to elderly people by migrant Latin American women.

1. Condition of the subject and theoretical plan

1.1. Crisis of cares

In the last decades the population over 65 in Spain has experienced an important increase, from 3.3 million people in 1970 (9.7 % of the population) (IMSERSO, 2012). In 2012 the percentage of people over 64 was 26.14 per cent of the Spanish population with an upward trend, the National Institute of Statistics (INE) works out that in 2022 this percentage will be 33.3% (INE, 2012). This aging of the population together with higher rate of survival of people affected by congenital disorders, illnesses and serious accidents, and the growing rate of incidence of work accidents have led up to an increase of request of cares of handicapped people (IMSERSO, 2011).

This rise in the request coincides with transformations in the informal support systems which traditionally have been responding to the necessity of cares produced by the deep changes that Spanish society has experienced over the last 50 years (higher access to education, the integration of women into the world of work out of the sphere of the family, etc.) which have produced a drop of the availability of the family caregivers (Roger García, 2010; Robledo Martín, 2003).

When talking about cares we refer to it by following Pérez Orozco (2009):

The management and daily upkeep of health and life, mostly at home through women's non-remunerated job where it is daily guaranteed, through the development of activities of direct attention to the people who are in a position of dependence, who, at the same time, require having previously guaranteed what we call preconditions of cares (feeding, cleaning, etc...) something everybody needs. The way of caring and the meanings associated to the cares hold deep ethical sense and they also express vital aims.

1.2. Care crisis or gender system crisis

However, when analysing the cares it is necessary to consider:

- It is a social fact attached to a continuous change which means that the social, economical and cultural transformations produce changes to the cares which must be given, who must provide them, when and where (Del Valle, 2004).
- It is a basic fact about the social gender structure: In the patriarchal society these cares are tasks assigned to women. The contributions made by Comas d'Argemir (1995) when analyzing the division of jobs and the systems of genders allow us to consider how each society builds the representations of the differences between genders and how through the recognition of differentiating capabilities and abilities, the tasks are allocated. In this way, the differences between men and women are incorporated as an organising factor between the production and tasks sharing. Therefore, the link between cares and women is based on the enlightenment of the biological differences, merging these differences to organise the tasks depending on the gender, in this way women become responsible for the care of the children and parents. Cares to others are basic facts in the gender social building with important consequences for women's identity and activities (Comas d'Argemir, 1995).

The link between cares and women and the fact that it is a reality which is changing more and more, makes it to be a strategic field where to analyse the consequences that the social, economical and cultural transformations have in the existing gender system. Therefore, the existing care crisis presents the crisis in the current gender system where the patriarchal society is held, and the reproduction of human life is organised. Bringing

to light two facts which are consubstantial to the gender system and the current care system:

1. Therefore, the transformations which have taken place in Spanish society have not brought along with them the equality of responsibilities for household tasks between men and women. As what Díaz Gorfinkiel y Pérez Orozco (2010) points out, the male role has been shown hard to change, and men still continue without assuming the equal rate of responsibility for cares.
2. At the same time the State has not assumed the social responsibility for cares, what is still falling as a duty to the families and based on cultural roles about women. . The social and economical is based on a gender division of the work showing the structure of an iceberg: the cares form the base of the social group and this base falls to women as something natural but unnoticeable (Pérez Orozco, Paiewonsky & García Domínguez, 2008).

1.3. Outsourcing of the work of cares

In this context of crisis of cares, some strategies to carry out these cares are developed. When referring to strategy, we have adopted the expression used by Constanza Tobío (2005) “to name social practices where the components of intention and innovation gain importance”. In this sense Tobío points out:

In the countries where women’s employment increases for a short period of time and where the social organization (including State and family) is scarcely sensitive to the effects of this new situation, women have to assume directly the decisions and the actions which lead to make their double responsibility possible. They find themselves obliged to develop social practices which demand a good calculation and high caution to run a wide variety of necessities, demands and resources belonging to two worlds which have lived denying the truth about it. (p. 141)

A suggested strategy for the care of elderly people in Spain has been to outsource part of the tasks which were done at homes, or pay for part of the work of cares in the domestic sphere by hiring migrant women (Pérez Orozco et al., 2008). The care is transferred from some women to others exceeding borders.

This denationalization of the cares must be considered as a conjunction of strategies developed on the one hand in Spain, to relieve the crisis of cares , and on the other hand in the countries of origin of the migrant Latin American

women to relieve the denominated “crisis of social reproduction”.

So in the countries of origin of the migrant women the plans of structural adjustment and the consecutive changes of neoliberal style have had a disproportionate impact on women, caused by the existing system of gender which gives women an essential position in the supply of services to their domestic group, meanwhile they are conceded less possibilities to control goods and mobilize resources out of home (Maquieira, 2000). It makes that in these contexts of crisis, the known feminization of migrations (Monreal Gimeno, Terrón Caro & Cárdenas Rodríguez, 2014) to be one of the economical strategies that the migrant homes display to be able to survive (Herrera, 2006). Women have always migrated, for different determinants depending on the country of origin, which have to do with the gender, with family, political, economical dynamics, etc. The feminization of the migration indicates, in terms of quality, a change of profile in the arrival of ground-breaking women in the migratory process, that is to say, women who migrate alone, beginning the migratory chain and maintaining the family responsibilities in the countries of origin (Parella Rubio, 2009).

This transfer of work of care, paid or non paid, exceeding the national borders, forms what has been called “global chains of cares”. We can define them as “chains of transnational dimensions which are made up with the aim of maintaining daily life and homes where the jobs of cares are transferred from some to others based on concepts of power where we have to outline gender concept, ethnic group, social class, and origin” (Pérez Orozco et al., 2008).

It is necessary to set out the phenomenon of the creation of global chains of cares keeping into account one of the characteristics which are intrinsic to the activities of direct care attention: face to face contact is required. That is to say, it is essential that the closeness between who takes care and who is taken care exists (Hochschild, 1983). That means that the work of cares related to the maintenance of life (it doesn’t happen with the management of cares) cannot be relocated, it must be done where the people who need that attention are. So as in the case of industrial production of its internationalization involved a relocation of the enterprises of the countries in the centre to the outskirts, in the case of the reproduction it has been produced by a migration of the workforce from the outskirts to the centre.

In an easier version, a chain would be made up by a Spanish family who has decided to hire an Ecuadorian woman to take care of an elderly woman of the family. The hired woman, at the same

time, has migrated to guarantee enough incomes to her own family and she has left her children in her country of origin, in charge of her mother. This chain, with the development of the migratory process, can modify its composition, changing the links and the people who form it.

With this research we are resolved to explore the phenomenon of denationalization of the cares analyzing how the hiring of a migrant woman for the care of an elderly person is produced at homes in Ávila.

For this we will consider two specific aims:

1. Describe what the circumstances motivate the hiring
2. Explore who decides the hiring
3. Analyse what aspects influence on the model of hiring (full time / part time).

2. Methodology

2.1. Methodological approach

An ethnic approximation has been carried out to the subject of research looking for a deep understanding of the subject in its natural atmosphere, for that we have taken as the unit of inspection the hiring homes and as the geographical area of research the province of Ávila.

The ethnic knowledge tries to understand the vision of the social events in the way the subjects of research live it, being characteristic of this method the continuous reflexiveness from the researcher as the flexibility and circularity of the process (Hammersley & Atkinson, 1994).

The research means selection and interpretation from the researcher, therefore being the researcher a part of the reality which is studying, forcing this premise to a continuous reflexiveness along the research.

The flexibility is attached to this method, it doesn't require a previous extensive design but it is developed an emerging design which remains open to add aspects which could redirect the design which has been set.

2.2. Used techniques

Among the used techniques in this methodological approach is the in-depth interview specially adjusted, among other circumstances, when the situations as it happens in our research, are not accessible in any other way (Taylor & Bogdan, 1998).

An in-depth interview was carried out to the relative who made the hiring of the Latin American immigrant woman to the care of the elderly person. To this, we looked for, as caretakers,

community workers who worked in day care centers or in intermediation services to relatives of elderly people who look for caregivers.

2.3. Recruitment process and characteristics of the sample

To select the sample it was used at the beginning of the research a sampling at convenience contacting friends or acquaintances whose parents had, or had hired an immigrant Latin American woman to take care of them, likewise the contacts coming from the caretakers. From the first interview, the interviewed subjects pointed out the data of possible participants in the study who were contacted using the sampling in line.

In the last stages of the field work we went to a sampling of maximum variation intentionally looking for the inclusion of people with different points of view about the matter which is been studied, in this way we have looked for the changeability of men and women, the rural or urban context and whether the caregivers, Latin American immigrants carried out this cares full or part time.

Fifteen people who have hired immigrant women to the care of elderly people have been interviewed.

It was decided not to go on interviewing when the researchers considered that they had reached a saturation of the speech since the last interview did not contribute with new information.

There were four people who did not want to take part in the study, it is not possible to know the reasons for it, since they refusal took place before contacting them, when the caretakers asked for their authorization to make their contact easier. However, the development of the research, likewise the information provided by the caretakers, makes us consider that there were reservations to show in a public sphere something they considered to be really private. In addition, it should also be considered the fear that their participation in the study could mean any harm for them, since a high number of them hadn't been legally hired.

2.4. Data collection system

The followed system was that the caretakers, when they were in touch with an elderly person who was looked after by an immigrant Latin American woman, or even his or her relative, informed them about some workmates who were carrying out a study about the subject and they needed to contact people who had hired immigrant Latin American women to take care of an elderly person. After they were asked for their authorization to get their data. If they authorized it, it

was communicated and the researcher who was in charge, phoned them for an introduction and tell them exactly what the research was about. In the same way they were told who they needed to interview, arranging to meet, if they wanted to take part, somewhere to inform them in detail about the study, applying for their consent and, if they agreed, to have the first interview.

The interview started once the presentation of the study had been done and the reason why they wanted to have the interview had been explained. At first it was focused on the moment of hiring an immigrant woman to carry the cares out: When the decision is made, who makes it and the reasons which lead them to do it. From then on there was a retrospective tour up to the current moment and a retrospective itinerary of the family trajectory, focusing on the life of the elderly person who needed the cares.

They looked for a quiet place for the interviews, trying not to have interruptions in the process of communication having them in offices, provided by the day care centers, or at the interviewee home address. At their homes they used rooms where they could avoid the presence of the caregiver or any other members of the family who could influence on the speech. The length of the interviews varied from 38 minutes and 2 hours, 32 minutes. All of them were recorded and transcribed as a whole for the subsequent analysis. The prolegomena of the interview, the highlighted issues in the development and the end were written down in their field diary.

2.5. Data analysis

It has been carried out a thematic analysis of the speech gathering the information in categories and subcategories created from the speech received. The initial results of the research were sent to two participating people who, because of their characteristics were considered key respondent. They later had a meeting with each of them to collect their opinion about the obtained results, finding coincidence.

2.6. Ethnic framework

The research is focused on the province of Ávila, the reasons to take this region have been the proximity of researchers to the area and the social and demographic changes of the province.

Ávila is one of the most deserted provinces in Spain, with a population of 172.000 inhabitants. The 31.5% live in the capital city. Throughout the 20th century there has been an exodus of the youngest population from the rural towns to other

provinces or Ávila, the capital city, currently having more than 90% of the towns of the province less than 1000 inhabitants. Talking about demography it is characterized by the aged population being even more predominant in the smallest areas. So in the biggest part of the areas of less than 100 inhabitants (the 22% of the total amount of towns in the province) exceed the 65% of elderly people. Even there are towns where nearly three quarters of the inhabitants are over 65. On the contrary, the youngest population is generally located in the most populated urban areas, such as Ávila and Arévalo (INE, 2009; Fundación BBVA, 2008).

In this way, in the rural sphere it has remained really aged population, which has experienced an important change in its family structure. Being high the number of elderly people who live alone and have their children in far cities such as Madrid or other capital cities.

3. Results

At the researched homes it has been established as one of the options to take care of the elderly people the outsourcing of a part of these cares through the hiring of immigrant women. Next we will show the results obtained in chronological order, we have first focused on the moment of hiring: when the decision is made, who makes it, the reasons which lead to it, as well as the acceptance or reservations to hire and the selected model of contract. To approach in the last place to the strategies that the family gradually develop facing the increase of situation of dependence of the elderly person.

3.1. When the hiring takes place

The decision of hiring a woman to take care of the elderly person usually happens after the worsening or modification in the condition and health of the elderly person, either physically, psychologically or socially.

On some occasions it is because a sudden worsening of health. In the case of Raquel, after her father suffered a stroke which stops him from doing basic daily life activities, She and her siblings consider the necessity of having someone in a continuous way to take care of her father and mother, troubled with diabetic retinopathy. *"In the moment my father was discharged from the hospital, he could not fend for himself; we had to take her on"*.

In the case of illnesses whose damage is progressive, such as dementia, the hiring takes place when there is a pronounced worsening of the elderly person. This vision is different depending

on the greater or lesser degree of contact they have with the elderly person. When there is a daily relationship with the elderly person, the relatives watch, in a continuous way, the inability of the elderly person to do the most basic needs of self-care and the necessity of having help to carry them out. For instance, Cayetana's mother, with Alzheimer disease, is suffering a progressive advance in her disease which stops her from washing herself up, or eating by herself. Faced with this situation Cayetana and her siblings decide to hire a woman. For the first years they hire a day caregiver, to the care of her mother and father, but after the father passed away, they did it as a boarding caregiver.

When the contact of the relatives with the elderly person is more occasional, the increase of the worsening can be unnoticed for the elderly person's children. In these cases they are usually warned by neighbours or other relatives, who inform them about the situation the elderly person has. Salvador points out how they realized about her mother's illness: *"our acquaintances told us... so we started to suspect...In the shops, as it is a small town, my mum's sisters started to be told, my mum had six sisters, or any other member of the family, like a son or other relative 'well, Nati has bought two lamb legs, for example, and today she has come to buy another'"*.

When some illnesses of chronic evolution appear, it is sometimes triggered by something which leads the family to consider the need of hiring. Fausto and his brother decided to employ someone to accompany their mother permanently troubled with a mental disease when a morning they went to visit her, they found her on the floor. They made the decision in spite of her denial.

Sometimes, the changes in the social situation or vital conditions can also lead to the decision of employing a caregiver. Isidora decided to hire a lady because her mother refused to move to her daughters' and the daughter in law's houses alternatively due to the death of Isidora's brother.

The changes in the family dynamic produced by the death of the main caregiver lead to, as in the case of Rocío, the necessity to modify the outlined strategy and hire a caregiver. Initially, Rocío and her father shared the care of her mother, who had a high degree of dependence for ten years. Rocío is a teacher and she has been reduced four hours at work to be able to take care of her mother. However La Junta de Castilla y León ended up eliminating this help. At the same time her father suffered an important health problem which obliged him to be at hospital. Facing the impossibility of being able to take care of both of them, the mother and the father, Rocío and her brother

decided to hire someone to help them with the cares of their mother while they take turns to look after their father.

Besides the needs of physical cares, there are some psychological lacks which they try to cover by hiring a woman. The fact of having a company and, therefore avoiding loneliness is a recurring factor which occasionally can be urgent, at the time of making the decision of employing a caregiver as a strategy of intervention. Amparo and her husband decided to take somebody on to "accompany" her mother in law after some emergency hospitalizations where they were told the doctors did not find any health problem, so it might be a way to catch their attention.

3.2. Who makes the decision of hiring and its influence on the gender roles?

The decision of hiring for the elderly person to be looked after is mostly made by the sons and /or daughters, although it is sometimes made by the husband or wife, any other relative or the elderly people who needs the cares themselves.

On those occasions when the decision is made by the elderly person and the determination is subsequently communicated to their sons and daughters, like Inma and Catalina, it is made after a worsening of the health conditions and it is highly influenced by the fear to be alone after that event. Inma points out that after having a heart operation right after her husband's death; at the hospital she told her sons and daughters that, for some time, she would need someone. *"I knew I didn't feel well, so I thought, well, for some time I cannot be alone, I need to have someone with me"*. In the case of Catalina, she communicated her children the necessity of having someone with her after suffering transient episodes of memory loss *"Because I couldn't carry the bags when I did the shopping, and my head wasn't...I don't know... It didn't work properly"*. At first her son looked for an immigrant woman to look after her, when this lady gives it up Catalina gets in touch, through her friends, with her current caregiver. In both cases the fact that some friend had hired an immigrant woman before led them to choose the same option.

In the case where the decision is made by the husband and wife, like Cándido and Teresa, it is because of a worsening in the health conditions of the person who needs these cares and the inability to be able to provide the partner with these cares. As with Cándido, his wife suffered a stroke, having difficulties to move, during the stay at the hospital he decided to hire someone, although first he told his daughter if she wanted to take

care of her mother and he would pay her for it, but the daughter refused it, "as she was there, and she only worked in the morning. She was bringing her children up, she has three children....I also understood it. She seemed to go her own way, doing everything comfortably". After his daughter denial, he contacted, through an acquaintance, the caregiver they currently have.

In the rest of cases the decision is made by the sons or daughters, after evaluating the change suffered by the elderly person. Once all the siblings reach an agreement, the solution is proposed to the elderly person, In the case the husband or wife exists the solution is arranged by him or her, the person who has the role of main caregiver, in addition to the sons and daughters.

The decision of hiring shows the gender role involved in the field of cares, showing that this sphere is considered as something typical of women, whom are allocated these tasks as something appropriate. It is shown in the different weight the sons' wives' opinions and the daughters' husbands' opinions have on the hiring of a caregiver. Salvador points out the disagreements the siblings had when discussing about their looking after their parents. "We nearly lost each other's respect, there was a huge tension, some of us accepted, but the others didn't" and he admits, " well, my sister, as it was about her mother, didn't want to accept". Among the differences they had he names the daughters in law's refusal to look after her, "some of us suggested looking after her taking turns of a month...but two or three of my sisters in law didn't accept" The refusal of the daughters in law does not lead the sons to take care of their mother, but to hire a woman to look after her.

Penelope explains "it's my brother who really takes responsibility for my mother, but he does it by himself...but his family situation is different to mine. It is not the same because she's my mother, and my sister in law....is not her daughter". And notes the power a woman has at home when having an elderly person at that home "Let me explain, if I take care of my father in law, he can be at home. If it is me who does it he mustn't be at home, although it is also his son's home. So women have strong power over that".

Amparo and her husband decide to hire a person to accompany her mother in law. Although she has two children, she usually goes with her mother in law to the doctor's. "We pay lots of attention to that, I am really concerned, I always go with her, it's always me", although she has to request a leave of absence at work.

3.3. Acceptance or reticence from the elderly person who needs cares at the time of hiring

As we have observed, most of times the sons or daughters are who decide on hiring a woman and later they tell it to the parents. The new situation is not always accepted by the elderly people who in some cases express their reticence. This opposition is related to the context where the care is carried out and also to aspects such as:

- The place where it is developed
- Who develops it
- How it is developed

In this context, the strategy to hire an immigrant woman is carried out within the private sphere of a home, where these tasks begin to be carried out by somebody who does not belong to the family, therefore they are outsourcing the care which becomes a paid work. Salvador comments that his father did not want to have anybody else at home, or have to pay somebody else who took care of him. So he was tricked, he was told it was a financial help the government provided him with to pay the caregiver. "We falsified a letter with the head of the National Institute of Social Security where it was written he had been given that help"

The elderly person's reluctances to the hiring are also influenced by the sort of contract which has been established. They show less opposition when the hired woman works part time than when the caregiver is a resident one, it is a circumstance which they usually reject. Fausto states that the first woman who looked after his mother "got to work at nine until lunch time. She fed my mother and in the afternoon she came back at five until nine". His mother got used to her. However, when the sons and daughters told her they were going to bring a woman to the house to stay with her all day long and at night too, she opposed. When the caregiver got to the house, the mother told her to leave.

On the other hand there is no reticence to the fact that the hired person is a woman, because the roles of gender make them to be considered as more appropriate for these types of jobs. Nevertheless, on some occasions the fact that she is a migrant woman is a cause of a conflict. However, we should highlight that in small towns where most inhabitants know each other, some elderly people think that the intimacy of their homes is preserved by hiring someone completely unknown., as it happens with a woman from a different country. Fausto points out "If it is someone my mother knows... she wouldn't have accepted".

On the contrary, Isidora's mother prefers to hire a caregiver to leaving her house; that is why

she agrees on the hiring. Raquel's father agreed on the hiring of a caregiver, although the mother usually complained about the behavior of the caregivers she had.

In the cases where the decision of employing a caregiver belongs to the husband or the wife or the person who needs the cares it is accepted with no rejection.

3.4. What we expect from the hiring of a caregiver

In the case of the elderly people what they look for is:

- On the one hand, to keep their independence
- On the other hand they don't want to be a burden, basically for the daughters who are the ones to be considered responsible for the cares. The intention of avoiding to be a burden is related to:
 - The distance between the homes of the sons or daughters and the mother's one and the impossibility to carry the cares out.
 - Because of the fact that the daughters also work outside their home.

What the sons and daughters seek by hiring a caregiver:

- That the elderly person keeps as much independence as possible, in case he or she is able to do it.
- In the cases of dependent people, the hiring is a way to discharge a part of the cares falling to the family.
- Regardless of the degree of dependency, with the hiring, we are seeking to keep the elderly person as much time as possible in his or her usual environment, more rooted and with a higher level of activity.

3.5. What sort of hiring

The type of hiring is influenced by the higher or lower degree of dependency of the elderly person, whether he or she lives alone or accompanied and whether he or she lives in a rural or urban area:

- In the case of a person who fends for himself or herself, they look for some help and above all some company for some daily time. In these cases it is usual to hire someone for some hours a day to help the elderly person to clean the house, do the shopping, and keep him or her company.
- In the case of people with a high level of dependency which obliges the person to pay continuous attention, the decision of hiring a

day caregiver or a live-in domestic worker is determined depending on whether the elderly person lives alone or accompanied by any relative who is the main assistant. So the main caretaker takes over certain cares to the dependent person, such as the help to get up, take him or her to the toilet, feed him or her, the decision is to hire someone part-time. When the elderly person gets a worse condition, the type of hiring is a live-in home care service.

- The sort of hiring, as pointed out, is also determined by the rural or urban context where the elderly person lives. When the elderly person lives in small towns or villages, the hiring is carried out when there is a higher degree of dependence and the first hiring is usually a live-in home care service kind. One of the reasons why it is so is because in small towns and villages, like in the area of Ávila, there are not usually women who live there and also want to work as a caretaker. The bad communication among the towns and villages nearby and the capital or bigger towns or cities makes impossible that a person who does not live in a town can work part-time in that town and live somewhere else. That is why it is getting more and more difficult to hire domestic day workers who can be needed when the degree of dependence is not so high. Penelope pointed out that they brought up the idea of looking for someone from the town to help her mother with the house tasks and somebody else who accompanied her at night, "*but... well, the town is very small so there are not any young people, that's why there wasn't any possibility.*"

Therefore we can point out that hiring a caretaker and the type of hiring are given by several factors: the degree of dependence of the elderly person and whether he or she lives alone and in a rural or urban area.

3.6. Strategies developed by the family to face the increase of dependence.

It is usual that throughout time there is a process of worsening of the elderly person and at the same time some other strategies are developed to resolve the cares. For this we go through four phases which we can point out:

- Temporary supervision of the elderly person for some activities such as banking control, cleaning tasks, etc. In these cases the sons and daughters share the tasks.
- When a help or supervision for daily activities such as doing the shopping, preparing

the meals or house cleaning is needed, on some occasions we go to a state help which is held from two to ten hours per week. If it is not enough, we go to the hiring of a woman for some hours a day. This is the sort of hiring which is the most difficult to reach from small towns or villages.

- A woman is taken on with the living-in type of contract in case the elderly person cannot perform the daily activities such as personal hygiene, mobility, or feeding by themselves,
- When the hiring of a person doesn't make possible the elderly person stay at home because he or she is in a bad health condition or the family consider that the cares which are being given are not correct, we opt to join the elderly person in an elderly people's home.

4. Discussion and conclusions

The process followed in the outsourcing of the cares allows us to analyze social and cultural matters attached.

The decision of outsourcing the cares of elderly people is made within the family context, usually by the daughters and sons, and it is later communicated to the parents. Therefore, the care, in spite of its commercialization, is still a family matter and the solutions are set out from here, that is a sign of the continuation of the model of family cares in Spain and the lack of policies to long term care assistance developed in Spain and in the countries in the south of Europe as different authors point out (Benería & Martínez-Iglesias, 2014; García Sainz, 2011; Da Roit & Le Bihan, 2010).

The commercialization of the cares, as presented in the results, is produced by a change in the physical, psychological or social condition of the elderly person, developed by the family as a strategy to face the rising of the dependence, as different authors point out, it can be due to the difficulties to find a balance between the family life and the home care services shortage, in this sense Hoffman and Rodríguez (2010) ,in a comparative study of the cares to elderly people in European countries, note how in the north European countries, the cares to elderly people are more frequent than in southern European countries, but in these southern countries the care given is much more intense. The authors point out that the strong dimension of support from the family which is shown in Spain and Italy gets weaker when the elderly people live alone, and these two countries do not have the necessary infrastructure which makes the elderly easier to live on their own.

It makes that the increase of the dependence and the impossibility to live on their own of the elderly lead the families to hire a care service.

This phenomenon has also happened in other countries with similar characteristics to the welfare state, so in Italy between 1990 and 2005 the number of domestic caregivers quadrupled at the same time that the proportion of foreign caregivers rose from 5% in 1990 to approximately 85% in 2005 (Lamura, Mních & Döhner, 2006).

This fact can be attributed, as Hoffamn and Rodríguez (2010) point out, to the lack of professional services which are available to the attention of the dependence, that makes the families look for attainable alternatives such as the hiring of migrant care providers, which makes the model go on being based on informal cares, as other researches note, it shows the limitations of the state system of attention to elderly people, and the scarcity of services of formal care. When the care of elderly people falls to the families, and due to such a high economic cost of the cares offered by the private companies cannot be put up with by all family budgets, going to immigrant women care providers emerges as an strategy or solution to solve the problem (Agrela, 2012; García-Navarro & Gualda, 2015).

The results presented indicate (as pointed out in other researches: Molano Mijangos, Robert, García Domínguez, 2012) that the hiring of a domestic employee does not mean a weakening of the gender role. The decision of hiring itself makes clear the gender role involved in the field of cares, so this decision falls to women showing that this sphere is considered as something typical of them, allocating it as their own task, besides as pointed out in the results the management and supervision of the work of the domestic employees are still in the hands of the women of the family.

On some occasions, on the elderly person behalf, there are reservations about the hiring, having less reservations when the elderly person makes the decision or takes part in it directly, and the hiring is carried out in a day care modality, as well as when the person has acquaintances who have hired a woman to take care of them before.

What is searched by the hiring is, so from the sons and daughters part as from the elderly people part, that the elderly person keeps as much independence as possible, and also to free a part of the cares. On some occasions the hiring of a caregiver causes a guilty feeling to the relative who carries the hiring out, the development of other researches on it have shown the influence that the gender and the kinship have on the development of the guilty feeling. The daughters, with

higher levels of guilt and the ones who do not take part in leisure activities, are the most likely ones to suffer psychological problems (Romero-Moreno, et al, 2014).

In the case of elderly people, what is basically expected is to avoid that the daughters have to do this job, because they are considered responsible for giving those cares, either because of the physical distance and the difficulties it involves or because of the fact that the daughters work outside the home.

In the case of sons and daughters it is valued to keep the parent as much time as possible in his or her usual environment, more rooted and with higher level of activity, reaching in this way to keep his or her interpersonal relationships, which is directly linked to their psychological welfare, as several researches have shown (Ferguson & Googwin, 2010; De-JuanasOliva, Limón Mendizábal & Navarro Asencio, 2013).

The sort of hiring depends on:

- The capacity of the elderly person to perform daily activities by himself or herself.
- The living context: urban or rural

- Whether the elderly person lives alone or with somebody else.

In this way, if the elderly person lives in a rural area, the hiring is carried out when the elderly person has a higher degree of dependence and the first hiring is in a live-in care giving type of contract. In an urban context if the person is a dependent one and he or she lives with the main care giver, the hiring is usually carried out in a day care giving sort of contract. The influence that the context of residence has on the life of elderly people takes us to consider the necessity to deal with it as a variable of the study in the research on elderly people.

We can conclude that the used hiring strategy of a migrant woman is a phase within a wider range of strategies that the family uses progressively to deal with the care of an elderly person who is influenced by the current gender system, the current model of welfare, the suggested policies to the attention to the long term cares, the physical distance between the relatives, the degree of dependence of the elderly person and the rural or urban context where the elderly person lives.

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