

# When Care Work Goes Global

Locating the Social Relations of Domestic Work

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# Chapter 4

## Care Workers and Welfare: Foreign Migrant Women in Italy<sup>1</sup>

Laura Stefanelli

### Introduction

Over the last 30 years in Southern Europe, and in Italy in particular, foreign domestic migrant care workers have been replacing Italian internal migrants. The domestic workers' issue has evolved from one of class to one of ethnicity and nationality and become a structural and stable part of the gendered division of reproductive labour in many European welfare states. If welfare states are defined as 'institutions designed to ensure the commodification of labour thereby freeing workers from the discipline of the labour market' (Jenson and Sineau 2001: 6), then these welfare states have succeeded in freeing their male and female workers by purchasing the labour of migrant women to fill the traditional feminine role in domestic space.

In this chapter, my analysis of domestic work focusses on the nexus of care, gender and migration regimes (Lutz 2008a) to explain the living and working conditions of domestic workers in Italy and to examine how recent social, economic and political transformations have contributed to the expansion of care performed by women migrants. Selecting Italy as a case study among the Southern European countries allows me to demonstrate the interrelationship of the labour market, social welfare and the (im)migration model of entry. I argue that working in the care sector is a first step toward a higher paying occupation for many migrant women. I use an ethnographic approach to identify the reasons for migration and to understand the 'care chains'<sup>2</sup> that are established in leaving one's country.

Since the 1970s, and especially since the late 1990s, migration has become increasingly feminized. As well, in Italy, women's labour force participation has

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1 I would like to thank Dominique Caouette and Deena White for their invaluable comments on this chapter, which is part of a thesis conducted at the University of Montreal; and the editors of this volume for the remarks and review of this chapter. I express my gratitude to Matthias, Carlo and Lorenzo for their inspiration, joy of life and for providing an example of how to care for an aunt from afar.

2 Hochschild (2000: 141) defines a 'global care chain' as 'a series of personal links between people across the globe based on the paid or unpaid work of caring', where each care worker depends for care work on another.

increased, the population is aging, and the lack of welfare social services for dependent persons has created a crisis (Caponio 2008, Castagnone et al. 2007, de Filippo and Pugliese 2000, Degiuli 2007, Ferrera 1996). In this chapter, I argue that women immigrate for domestic and care work using either legal or illegal entry because it provides the first opportunity to be incorporated into the labour market and a chance for a work permit and a legal status. These contemporary flows of migrant women may lead to the emergence of a 'service caste' (Anderson 2000) in the host societies.

The supply and demand for low skilled jobs is affected by several characteristics of contemporary Southern Europe, including the newness of in-migration, the heterogeneity of immigration flows, the international division of reproductive labour, the structure of local labour markets and the processes by which migrants are inserted into them, the informal economy, the migratory projects of migrants, the inequalities of gendered relations and the enforcement of state immigration control policies through quotas (Lutz 2008a, Nakano Glenn 1992, Ribas Mateos 2000, Colombo and Sciortino 2004, Colombo 2007, Parreñas 2008b). These characteristics reinforce gendered and ethnicized labour market niches, particularly for unskilled workers.

The phenomenon of female caregivers, who care for non-dependent adults, has not changed, but the social characteristics of women who migrate for this work are different. Today, migrant women who do care work may still move for family reunion, or may leave kin and children behind. However, many women have more education from their countries of origin than in the past (Glick Schiller et al. 1999, Pessar and Mahler 2003, Hondagneu-Sotelo 2001, Russell and Zontini 2000, Ehrenreich and Hochschild 2003, Korac in this volume).

Economics alone does not determine care workers' migration to another country. Pull and push factors are not pertinent for understanding the complex and dynamic phenomenon of care and domestic work. Other issues need to be taken into account, such as women's agency in determining their migratory projects and objectives. Recognizing the significance of women's agency draws attention to women's empowerment and the experiences of their families in the countries of origin.<sup>3</sup> The agent-centred perspective adopted in this study addresses the issue of why women 'opt' to work as domestic workers/caregivers. This agent-centred approach goes beyond the passive victimization of women presented in certain feminist literature that tends to speak for women and considers them trapped by the unequal distribution of resources and 'global economic forces' (Sassen 1998, 2000). These approaches argue that migrant women are solely economic actors in need of money. However, migrant women also take risks (e.g. by leaving a violent husband or a militarized country) and act on their own volition in leaving their homeland. This chapter considers the decision to migrate

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3 Postcolonial scholars are committed to '[M]ake visible agentic capacities of formerly non-agentic non-subjects and underline their ability to resist/subvert Western hegemony' (Bilge 2010: 18). See Collins (1990) and Bilge (2008: 100–133, 2010: 9–28).

from an individual point of view without '[O]ver-romanticiz[ing] ... those who might be seizing such opportunities to escape poverty, [abuse], violence or to see the world', (Anderson 2006: 8).

I locate this research in two bodies of literature. Recognizing that political, social, and economic structures influence individual decision-making, I draw upon the literature concerning the Southern European welfare state and immigration model (Caponio 2008, Castagnone et al. 2007, de Filippo and Pugliese 2000, Degiuli 2007, Ferrera 1996). As well, transnationalism brings gender back into immigration studies by examining women's work in the domestic and care sector as part of the 'international transfer of reproductive work among women' (Parreñas 2000: 577).

### **The Southern Immigration System and the Labour Market**

Each year, countries such as Italy and Spain formulate immigration policy through quotas that accommodate demands for cheap labour in the catering, tourism, building services, care and domestic service industry. The underground economy is already well-rooted within Southern Europe and has been strengthened by the quota system which facilitates the movement of undeclared workers from the underground economy into the official sectors of the Italian economy, as I explain below. The entry of migrant workers consolidates ethnic niches in the labour market where migrant workers are hired as 'inexpensive and flexible labour in marginal areas of employment', (Chell 2000: 105). This process has nurtured the growing segmentation and fragmentation of the Italian labour market. New migrants often accept poor working conditions, and women especially, end up as live-in caregivers and domestic workers.

The 'domestic help' phenomenon is related to important changes in the southern welfare system, typically sustained by conservative familial practices. Purchasing foreign labour force involves a de-familialization of welfare services, a form of externalization of domestic tasks achieved by the employment of migrant women.<sup>4</sup> Rather than the state taking responsibility for aiding families in the social reproduction of everyday life, market-based strategies have led to an international division of care work that places the burden of care work on migrant women workers. The term 'social reproduction' is used by feminist scholars to refer to the set of activities and relationships involved in maintaining people both on a daily and intergenerational basis: '[R]eproductive labour includes activities such as purchasing household goods, preparing and serving food, laundering and repairing

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4 De-familialization as per Esping-Andersen (1990) is a key concept in understanding the central role of households in the new post-industrial economy. The de-familialization process refers to policies that lessen an individual's reliance on the family and maximize the individual's command of economic resources independent of familial and conjugal obligations (Esping-Andersen 1999).

clothing, maintaining furnishing and appliances, socializing children, providing care and emotional support for adults and maintaining kin and community ties' (Nakano Glenn 1992: 1).

### *Transnational Care Work*

The 'globalization of care' (Parreñas 2008b) that is exemplified by the global migration of women to fill the demand for care work raises questions concerning gender relations, the status of local and migrant women in the labour market and the construction of gender in migrant women's labour. Nonetheless, the progressive tertiarization of care work employment, the high cost of maintaining a welfare state and insufficient social services for dependents result in a market-based<sup>5</sup> recruitment of migrant workers to fill the 'care deficit'. To meet the need for care work, migrant women feed, nurture and care, in other words, they carry out the work of reproduction, outside their own homes. Paradoxically, this arrangement reaffirms the notion that women's domesticity belongs in the home. Migrant women do this work in informal and formal labour markets, as documented and undocumented workers, in the private and public spheres.

Migration to domestic work may represent a significant movement of ethnic minority women, constituting a *transnational transfer* of reproductive labour from origin to destination countries. The segmented and ethno-stratified market for low-skill and care jobs contributes to wage inequalities, power differences, ethno-cultural preferences, subordination, 'occupational stigma' (Ozyegin and Hondagneu-Sotelo 2008) and social marginalization, which involves the invisibilization of women, both in the work sphere and in the socio-economic sphere. Most domestic workers are employed without a regular labour contract. In Southern Europe, this emerging 'service caste' is characterized by preferences for migrant workers from Central and South America in Spain, Portugal and Italy, and from Eastern European in Italy and Greece.

As my research demonstrates, the 'international transfer of caretaking' (Parreñas 2000, 2008, Lutz 2008a) has consequences in both the destination societies and in the countries of origin. In the latter, the departure of adult females results in better social and economic conditions for their families left at home, whereby a care chain to care for dependents is established. According to the literature on remittances, regular money transfers are important economic resources for families left behind and contribute significantly to the GDP of many sending countries. Families back home have the possibility of accessing higher education for their children, building larger homes and upgrading social and well-being levels. However, the tasks of looking after children, the sick or elderly relatives seems to be passed on to other mainly *female* family members (grandmothers, aunts, adult daughters) or by hiring women who may need to migrate internally

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<sup>5</sup> Market-based strategies and bargaining are used to buy migrants' work for households (Williams and Gavanas 2008).

within the country of origin to perform this care work.<sup>6</sup> In a few cases, men also take on the responsibility of caring.

Located 'in the middle', between two countries, migrant women working as caregivers/domestic workers are agents of 'Transnational Welfare' (Piperno, Tognetti and Bordogna 2012). This new form of producing well-being is framed simultaneously by social, cultural, and economic factors in both countries. Transnational migration recognizes more than one *modus vivendi* in the migration project and goes beyond identifying the predominant form as unidirectional and consisting of a one-time change in residence from one country to another. Rather, transnational migration suggests another way of thinking about migration, which involves migrants encompassing a number of different residences or geographical spaces (Pries 1999). This is particularly true for the growing movement of women into domestic work, a migration project which is neither one-time nor unidirectional. Transnational welfare workers maintain multiple homes, defined not by nation-states or geography, but by social relations with siblings and other family members located in different places. This contemporary form of migration can be considered a 'third way' that may need to be added alongside the classical forms of assimilation or pluralism experienced in continental Europe (Glick-Schiller et al. 1999, Nakano Glenn 1992, Pessar and Mahler 2003, Pries 1999). Migrant women develop forms of 'reterritorialized homes' through their social relations, development work and social positioning, which enable well-being in their households at home and abroad. These women contribute to socio-economic well-being and growth in the destination country as well as back home, redefining the nature and the scope of welfare. Transnational welfare is here understood as a conceptual vehicle that requires the articulation of space, time, and well-being, beyond the national boundaries of nation-states. It requires a conceptual re-engagement with women's multiple tasks that are accomplished simultaneously, such as development of the home community, well-being, personal empowerment, family responsibility, keeping home and providing care.

The chapter is divided into three main parts: the first tackles the Italian case study, outlining Italian legislation about immigration, the field of research, the methodology and the interviews. The second part analyses the interviews, examining the social consequences of the migration; the support networks; women as active subjects; patterns of employment; and lastly the future plans of women migrants. The third part proposes a mobility model for the migration of workers in the domestic/care work sector.

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6 Parreñas argues: '[In] the [global] international transfer of reproductive labour, women do not subvert but instead pass on their reproductive labour responsibilities to women less privileged. Consequently, the burden of reproductive labour poses challenges to, instead of supporting, solidarity between women' (2008b: 17).

## Case Study: Italy

The choice of Italy as case study is justified for two reasons. On the one hand, Italy combines the ‘mercantile logic’ of a quota system, the (in)effectiveness of the Southern welfare state model, and the flexibility of a labour market, with a high proportion of undocumented immigrants working in an underground economy (Ferrera 1996). The quota system reserves special entry slots for seasonal workers, as well as care and domestic assistants, as was the case for the ad hoc legalizations for non-EU domestic and care assistants in 2009, 2010 and more recently in October 2012.<sup>7</sup> This ad hoc legalization concerns a precise category of workers, whose employers’ families bear the costs of their legalization. If this migratory system dies away, Italian households requiring live-in workers and the Italian welfare state reliant on the ethnicization of care work will be seriously compromised (Colombo 2009). On the other hand, Italy is an example of a ‘recent immigration country’ in Southern Europe that receives large, heterogeneous, and rapid flows of (im)migration. As a result, the large availability of foreign caregivers reinforces the Italian welfare system for assistance and care of elderly people.

Institutionalizing care work in Italy also has two aspects: i) as a public and local responsibility and ii) as a private and familial burden. On the one hand, in some cases, support for care work consists of ‘cash for care’ transfers, which subsidize daily living expenses and pay for essential medications for the elderly. In other cases, the cash for care payments are used to supplement the minimal incomes of the elderly, rather than to pay caregivers. Some who receive the bonus cash for care payment, use it to pay ‘off the book’ caregivers or helpers. On the other hand, personalized family-based care is endorsed as opposed to commercialized, hospitalized, institution-based care. Welfare states are increasingly pushing care work out of hospitals and institutions and handing it back to families. The ‘family is expected to substitute for welfare measures and services’ (Trifiletti 2009: 2), and particularly, the women within these families. In the last 15 years, Italy has turned the responsibility for social assistance over to the regions<sup>8</sup> and has quickly (but unevenly) developed social policies at the local level to help families in caring tasks in general. Increasingly, Italian families are reluctant or unable to institutionalize elderly or dependent people, either for moral or economic reasons. In this new framework, care work relies on the employment of migrant women as a systemic solution for the publically provided care deficit. To provide individualized care for

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7 At least three factors have contributed to an ‘unsuccessful’ ad hoc legalization. First, incorrect estimates by the Home Office about the number of workers holding a legal residence permit, but employed without regular contracts; and the number of illegal workers. Second, the costs of regularization were high and burdensome for many families. Third, the effects of the last European expansion to include Romania and Bulgaria in 2007 affected the status of new European citizens of those countries who were employed in the domestic sector.

8 For more details on Bill nr. 328/200 see Italian Parliament 2000.



their elders, families hire foreign live-in eldercare assistants who will provide care in a more familiar environment, in which it is believed that elderly people are more comfortable. The cost of employing migrant workers is relatively low – wages vary greatly, from 1200 Euro per month for a live-in worker with a residence permit to 750–450 Euro per month for a live-in worker who has just entered the country illegally.<sup>9</sup> Thus the institutionalization of elderly or disabled people in hospitals or care homes is, if possible, postponed or avoided.

### *Italian Legislation*

Italian immigration legislation has always been porous, since the first attempt of Law 39/1990 (The Martelli Law), the main concern of which has been to define the migrant as an asylum seeker or refugee; establish control through quotas that specify the number of migrants allowed to enter the country; and provide frequent amnesties, whereby irregular immigrants are regularized. The main endeavour of regulating immigration was established by Law 40/1998 (the Turco-Napolitano Law). Law 40/1998 – created by the centre-left coalition when it was in power from 1996 to 2001 – allowed a generous part of the quota to be allocated for immigrants<sup>10</sup> to enter and ‘seek work’, guaranteed by a sponsor (a person who could be foreign, or an organization) who undertook to support the immigrant for a year, until he or she was employed or repatriated. Each Italian region, province and city is assigned a specific quota in each category of labour. If some slots are not used – a rare occurrence – the Welfare and Labour Ministry (*Ministero del Lavoro e del Welfare*) may redistribute them.<sup>11</sup> The new centre-right government, elected in 2001, modified the way of subdividing the overall slots by regions, provinces and cities and increased the number of seasonal slots.

A significant attempt to establish a domestic workers’ employment profile occurred after the last mass amnesty in 2002<sup>12</sup> (Law 189/2002 art. 33, the Bossi-Fini Law), which was the largest amnesty of foreign migrants ever seen

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9 For more details consult (National Collective Labour Contract – Contratto Collettivo Nazionale di Lavoro Colf e Badanti [CCNL] 2013). It has been effective since 1 July 2013.

10 The slots are available for specific national groups, who have contracted bilateral agreement and/or partnership between their country of departure and Italy. As for example 1,000 out of 80,000 slots are reserved for Libyan citizens in accordance with the partnership between Libya and Italy signed on the 30th of August 2008. For details on Law no. 2699 see Ministero del Lavoro, della Salute e delle Politiche Sociali 2010 and Ministero del Lavoro e delle Politiche Sociali (Circolare 19 aprile 2010, n. 14) 2010.

11 To give an example, at the end of December 2008, the Work Department re-allocated 8,436 slots of the quotas from the previous year. The unused slots represented 5 per cent of the total number of immigrants to be admitted and were distributed to domestic and care workers.

12 There has not been another amnesty in Italy since 2002. In 2005, the last amnesty occurred in EU, specifically in Spain. After that, the European Parliament branded amnesty as an ‘immigration tool of managing the income and outcome of flows’.

in Europe, attracting 700,000 applicants (Reyneri 2004). Following the 2002 amnesty, legislation aimed at establishing stronger restrictions on the legal entry of economic immigrants by introducing more restrictive quotas than those established by Law 40/1998. The number of long-term permits – theoretically attainable after four years of staying in Italy – was curtailed. As well, the definition of domestic work in relation to the earlier vague and unclear definition that had been in effect was improved and strengthened.<sup>13</sup> This definition became part of the framework of the National Collective Labour Contract (CCNL). The first legal definition for a care worker was introduced within the finance bill in 2005 (Law 30 December 2004, no. 311 ‘Finance Bill for the year 2005’).<sup>14</sup> On the 1st of March 2007, the new National Collective Labour Contract for domestic work defined care workers as ‘home care assistants’. In June 2010, the International Labour Organization (ILO) approved the international convention on decent work and rights for domestic workers, entitled ‘*Domestic workers across the world: global and regional statistics and the extent of legal protection*’. The Italian government ratified it on the 22nd of January 2013 as the first country to have signed the ILO Convention<sup>15</sup> (ILO 2013a). According to the ILO Italy is ranked as the third-largest European country to employ foreign domestic workers (429,500), after Spain and France, with 747,000 and 589,900 workers, respectively.

### *The Research Field Site*

Turin and Bolzano exemplify the large Italian metropolitan cities (Turin) and small cities (Bolzano) with high concentrations of women migrants employed as domestics, caregivers and housekeepers. To shed some light on the dimensions of their work: foreigners living in Turin at the end of 2011 numbered 124,172 (13.6 per cent) out of a total population of 906,874. Female foreigners come mostly from Morocco, Peru, China, Albania, Moldavia and Philippines.<sup>16</sup> In Bolzano,

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13 The legal definition of ‘care worker’ is ‘anyone who is a non-EU citizen and works as an employee in a family in which there are dependent people or members affected by pathological ills’. Author’s translation from the original: ‘[chiunque sia] occupato alle proprie dipendenze personali di origine extracomunitaria adibendolo ad attività di assistenza a componenti della famiglia affetti da patologie o handicap che ne limitano l’autosufficienza’. For more information on Law 189, art. 33 (30 July 2002) see Italian Parliament 2002.

14 The financial bill specifies ‘[care workers are] employees for non-autonomous people in their daily reproductive labour’. Author’s translation from the original: ‘addetti alla propria assistenza personale nei casi di non autosufficienza nel compimento degli atti della vita quotidiana’. For more information on Law 311 (30 December 2004, see Italian Parliament 2004.

15 The ILO Convention became law on the 5th of September 2013 (De Nesi 2013).

16 Data elaborate by Divisione Servizi Civili, Ufficio di Statistica-Osservatorio Socio-economico (ILO 2013). The ILO Convention became law on the 5th of September 2013 (De Nesi 2013). See also: (Divisione Servizi Civili, Ufficio di Statistica -Osservatorio Socio-economico e redazione editoriale n.d.).

at the end of 2011 the foreign population was 44,362 (8.7 per cent) out of a total population of 105,774. Sixty-three per cent of the total foreign inhabitants (44,362) are women from the Ukraine, Albania, Morocco, Russia and Moldavia, who arrived thanks to family-reunification. And 16.5 per cent are of Pakistani or South East Asian origin.<sup>17</sup>

In particular, Turin exemplifies the decentralization of public, social and immigration services, such as the renewal of residence permits, and provides services through a mix of voluntary associations and the communitarian sector. Turin has a leftist tradition that differentiates its local policies in three ways. First, a 'specificity approach' towards immigrants reveals a *reactive* policy style, i.e. immigrants have to be dealt with through *specific* policies and *ad hoc* institutions, as was the case for mainstream Italian social policy at least until the 2000s. Second, the government has adopted a 'mixed' approach to welfare encouraging the involvement of voluntary organizations and local institutions in delivering social services, particularly to immigrants, and the development of specific patterns of social integration. Third, communitarian organizations and the voluntary sector are polarized between leftist-feminist organizations such as the intercultural centre *Alma Terra* and the Catholic Church that sponsors organizations such as *Caritas Femminile*.<sup>18</sup> In Turin, local social policy requires a 'willingness of negotiating solutions directly with all the other public and private actors already active around specific issues' (Caponio 2000: 81). Furthermore, as a big European municipality, Turin participated in European and international projects designed to facilitate the accommodation of cultural difference that have led to common strategies for immigrants' recognition and participation.<sup>19</sup>

The city of Bolzano is a Northeastern Italian town on the border with Austria in the autonomous Province of Bolzano with specific criteria for accessing permanent residency. The municipality acquired its autonomy in 1948, when Italy became a Republic, after the defeat of the Monarchy and the exile of the Savoia royal family in the Second World War. The Province of Bolzano has been declared

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17 A significant percentage (43 per cent) of the total foreign residents in Bolzano come from Germany. This is due to the Germanophone origin of the city (see a short explication below in the section) (ASTAT – Ufficio Statistico Provincia Autonoma di Bolzano 2012).

18 For more references see Caponio et al. 2000, Caponio 2009 and Trifiletti 2009.

19 In the mid-1990s in the context of international developments, Turin participated in projects such as the UNESCO project: Multicultural Policies and Modes of Citizenship in European Cities (MPMC), promoted in 1996. Eleven cities took part: Amsterdam, Antwerp, Athens, Barcelona, Birmingham, Brussels, Cologne, Liege, Marseille, Milan, Oeiras (Lisbon), Paris, Rome, Stockholm, Tel Aviv, Turin and Zurich. In 2001, thanks to a contribution of the Italian government and a number of European foundations, the International Research Network on Interethnic Politics and Migration launched the Ethnobarometer programme which reviewed local policies in managing ethnic minorities in nine European cities: Lisbon, Rotterdam, Stockholm, Brussels, Manchester, Mannheim, Toulouse, Murcia and Turin. For more references see <http://www.unesco.org/most/p97.htm> and <http://ethnobarometer.org/> (accessed on 14 April 2010).

autonomous because of its historical status as a territory of the former Austro-Hungarian Empire and its proximity to German-speaking countries. Italy obtained the Northern Provinces of Bolzano and Trento, as well the region of Friuli-Venezia Giulia (in the East), from the former Austro-Hungarian Empire in 1919, after the First World War. In 1972, the Province of Bolzano acquired more legislative power in the fields of health, immigration, education, schools, labour, tourism, transports, road networks, construction, handicraft, fishing and agriculture.

After completing interviews in Turin and Bolzano, and by comparing these two diverse management systems, this chapter sheds light on a topic that has received little attention so far. On the one hand, the leftist and metropolitan city of Turin has a long tradition in welcoming flows of immigrants and providing services to new arrivals, as expressed in its mixed approach (leftist and Catholic organizations) to providing services. On the other hand, Bolzano is a small and autonomous town that 'selects' its foreign migrant workers, supplies them directly with integration tools, such as linguistic training courses (German and Italian are taught), primary education for illiterate adults, and financial support as part of a 'social citizenship' package. The unique and respective management systems of these cities inform my selection of these sites for this research.

### *Methodology and Interviewees*

Six in-depth interviews with migrant women were completed in December 2009. Respondents were selected on the basis of snow-ball references. They were mothers with high levels of education (which is consistent with the last wave of migrant workers, who arrived in the last half of the 1990s and the beginning of the 2000s), and are employed in unskilled jobs despite their qualifications. All the interviewees were married, three out of six to Italian men, and all are between the ages of 30 and 65. They all arrived with regular documents. Four of the six arrived between 1999 and 2009, following the economic crisis in Europe, the accession of several Eastern European countries into the European Union and short stays in other European countries. Two interviewees came to Italy in 1985, through the family-reunification programme and in 1994, after a mass migration of Albanians toward South and North Italy. All but one of the interviewees now lives with her children or adult sons or daughters in Italy. Some of the children were born in Italy and in one case an unaccompanied boy joined his mother through family reunification. Another woman lives with her adult son in Italy, but he was born in the country of origin.

All my interviewees acquired postsecondary training in their countries of origin and were employed in an industrial factory, in the service sector, in catering, or in an educational institute before their departures for Italy. The interviews with these migrant women reveal that all of them worked as live-in or live-out domestic workers when they first arrived in Italy (or in the first country of arrival, as is the case of one interviewee who moved from Spain to Italy). Two out of six are still domestic workers, but they are working for a pool of families on an hourly basis in

Turin. One interviewee lives with the disabled person for whom she cares. Three of six interviewees gained further educational training in Italy, which allowed them to leave domestic work and work for the migrant women's association *Donne-Nissà* in Bolzano as a secretary, accountant and educator, respectively.

All the interviewees discussed their intentions to ultimately change fields (but also the difficulties therein) and work either in the social services for migrants, as cultural mediators, or in the health sector, as licensed practical nurses.<sup>20</sup> Some of the migrant women argued that being engaged in the labour market in a foreign country is a sign of 'knowing how to go on', knowing how to cope with the difficulties of entering a segmented labour market, not being passive actors, and being responsible for the well-being of their families abroad and/or at their destinations. Some of the women interviewed have achieved some social mobility thanks to improving their knowledge of Italian and taking advantage of on-going training. They have been able to leave the domestic/care sector for employment as an officer, cultural mediator and nurse. In fact, enhancing their qualifications and language fluency allowed the women to upgrade their social status and move beyond the domestic/care sector.

Before turning to the interviews themselves, I will briefly introduce the six interviewees. *Doina* is a Romanian 37-year-old live-in domestic worker. She arrived in Sicily in November 2009, after having spent two years and three months in Madrid as a live-in care worker. She left Romania on her own, leaving her adult son and daughter with her husband. She has two sisters, one who lives in Italy and one in Spain. This interview was conducted in Spanish, since her knowledge of Italian was limited.

*Lidia* is 34 years old and comes from Poland. She came to Italy for the first time 10 years ago and before getting married to an Italian man, she travelled back and forth between Poland and Italy. She settled in Turin seven years ago and has a five-year-old child. For two years, she worked as a cleaner for different families. Previously, she worked as a live-in domestic worker, waitress and babysitter for another Italian employer.

*Ileana* who is 30 years old arrived in 2002, after Italy, along with other European countries, abolished the requirement for a valid visa for Romanian citizens to enter Italy. She left Romania alone, leaving her young child with her parents. After a year and a half, she obtained a valid resident permit, and through a family reunification policy, she was allowed to bring her child to Italy. She married an Italian man and they have two young children. After her third pregnancy in 2007, she began working as a cleaner and domestic worker for a pool of families.

*Irene* is 61 years old and left Argentina, her country of origin, after the last economic and financial crisis there in 2001. She left her third adult son

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20 In Italy, migrant women are employed as Operatrice Socio Sanitario (OSS), after having completed 1,000 hours of training organized by the regions with municipalities. The training includes studies in social and health systems, in order to professionalize domestic assistants and authorize them to work in hospitals, retirement and nursing homes.

in Argentina and joined her husband and her two adult sons, who migrated to Tuscany before 2001. She was first employed as a live-out domestic worker for a family. In 2003, she and her family moved to Bolzano where she was able to obtain additional education that allowed her to look for a job similar to her previous employment as a teacher in Argentina. Nowadays, she works as a secretary at *Donne-Nissà*, the association for foreign migrant women.

*Bahija* is a 45-year-old Moroccan woman who has been living in Italy for 24 years. She came to Italy through the family-reunification programme, after her husband left Morocco at the end of the 1970s. She has three children, two of whom were born in Italy. Bahija experienced poverty at the very beginning of her migratory project and had no place to live. She worked as a cleaner and this work allowed her to learn Italian and subsequently enrol in secondary school. Now she works as a counsellor for *Nissà-Care* at the *Donne Nissà* migrant women's association and studies for her secondary school degree.

*Fatbardha* is 60 years old and originally from Albania. She has been living in Italy for 15 years. After getting married to an Albanian man and having three sons, all of them born in Albania, she left Albania on her own. Later, her husband and sons joined her in Italy. She was employed initially as a care worker and became a cultural mediator after gaining further training and language classes. Now she is responsible for the kindergarten *Mafalda*, an intercultural kindergarten for native and foreign children from 0 to 6 years of age, organized by the *Donne-Nissà* association. As well, Fatbardha is a counsellor for the *Nissà-Care*<sup>21</sup> service help desk, which offers assistance and counselling to care workers who are mostly migrant and newly arrived women.

## Analysis of the Interviews

The personal narratives of women interviewed for this research illustrate how the experiences of migrant women are influenced by their positions at the intersection of multiple identity categories including gender, migrant status and labour market status all of which are interpolated with prejudices and stereotypes concerning

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21 Association *Donne-Nissà* is a non-profit organization founded in 1995 and since that time it has led projects financed through the public funding of the Autonomous Province of Bolzano, the Social Services and Health Office, the Equal-Opportunity Unit, the Department of Labour and Social Security and the European Social Fund of the European Commission. The association was created by and for foreign women living in the province of Bolzano. Besides the organization of cultural events, the association offers several services, from helping foreign women find work to language training. It has organized a kindergarten, called *Mafalda*, for children of migrant and Italian women, to assist with bridging and accommodating ethnic diversity. Since 2006 the association has created the *Nissà-care* consulting counter in order to meet offers of and demands for care and domestic workers.

ethnic minorities.<sup>22</sup> As occurs in other European countries, the Italian labour market is mostly segmented on the basis of ethnicity (Reyneri 2004, Ozyegin and Hondagneu-Sotelo 2008). Foreign workers are employed in low-skilled labour: construction, seasonal work, domestic care, agriculture, tourism and manufacturing. Even though the foreign labour force is better educated than in the past, their degrees, qualifications, experience and skills are not acknowledged and/or not sufficiently valued in Italy.

The sections that follow examine: 1) the social consequences of the migration process; 2) the support networks that facilitate migrants' entry into the local job market; 3) women as active subjects and 4) the patterns of employment as a live-in or live-out worker and 5) future plans.

### *1) The Social Consequences of the Migration Process*

Four of the women decided to migrate alone, leaving their children in the care of their parents and/or spouses or other relatives. In the countries of origin these relatives balance the 'welfare and the well-being' of the kin and children left behind. The labour of care, nurturing and loving is mainly in female hands, especially those of grandmothers, and in rare cases, care tasks are undertaken by husbands. Some migrant women benefitted from Italy's family reunification policies. As the experiences of Ileana and Irene demonstrate:

I came to Turin alone with a friend of mine in 2002. I had known a man from Turin and I decided to come here because it's closer to my country, it's better to arrive there so when I want to go to Romania, it's nearer. I left my first child with my parents and I didn't see him for a year and a half. He joined me thanks to the family re-union policy in 2003. (Ileana, 30, Romanian)

I joined my husband and two out of three sons in Italy in 2001, after the last economic, financial and political crisis in Argentina. The third son has always stayed in Argentina, trying to 'resist' the crisis. (Irene, 61, Argentinean)

In the case of Doina, after more than two years of separation, she hopes her husband will join her soon. She describes it like this:

I have lived alone in Madrid for two years and three months. I came to Italy because I have a sister who works as domestic worker. I might stay alone until March 2010 and then my husband might join me ... I have a son of twenty and a daughter of seventeen who have stayed with my husband in Romania. (Doina, 37, Romanian)

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22 McCall claims that complexity is managed 'from the analysis of a social location at the intersection of single dimensions of multiple categories, rather than at the intersection of the full range of dimensions of a full range of categories' (McCall 2005: 1781).

The international division of reproductive labour<sup>23</sup> generates care chains, wherein female relations such as grandmothers, adult daughters, sisters and aunts become responsible for childcare and household chores. In other cases, migrant mothers pass down their care responsibilities to less privileged migrant women. The care chain not only frees men of household work in the country of origin but also frees female employers in the destination countries. It has the potential to create strains between women in households in the homeland. Based on my interviews, Ileana and Doina, moved alone and left their children and husbands behind. The childcare and care of other needy family members was taken up by female relatives of the older generation, including grandmothers and other relatives. While the care deficit is seen to at the migrants' destinations, such as in Italy, a 'welfare' system based on grandparents and other relatives is created in the countries of origin to address the care deficit in that site. This arrangement forms new meanings of motherhood 'from afar'; it expands mothering to encompass breadwinning 'from afar' (Hondagneu-Sotelo and Avila 1997 and Parreñas 2008b). Rachel Parreñas argues that '[In] the [global] international transfer of reproductive labour, women do not subvert but instead pass on their reproductive labour responsibilities to women less privileged. Consequently, the burden of reproductive labour poses challenges to, instead of supporting, solidarity between women' (2008b: 17). In this chapter, I illustrate just one case of a practice of 'motherhood from afar', since my other empirical findings were based on mothers who raised their children in Italy, or joined adult sons in the destination country or reunited with children under the age of 18 thanks to family reunification policies.

The decision to migrate depends on socio-economic opportunities and access to the destination countries. The spatial distance, the criteria for obtaining a national visa and residence permit, and human smuggling operations influence the accessibility of each destination. The greater the spatial distance and the more restrictive the entry policies, the more important the infrastructure of care in the country of origin that facilitates illegal immigration becomes.

## *2) The Support Networks that Facilitate Migrants' Entry to the Local Job Market*

Kin and friendship relationships are 'support networks' for hosting and orienting new migrants. In the field of domestic work, job offers are circulated by 'word of mouth' among migrants who share information with friends and relatives about families who are interested in hiring domestic workers. While some interviewees experienced an initial deskilling through migration, they generally found it easier to work as domestics as a first step prior to entering the Italian job market. As my case studies indicate, some migrant women have succeeded in leaving the

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23 Reproductive labour refers to the work of raising and caring for children as well as to the housework, care giving and nurturing required to sustain the lives of other families. In care work literature, the '3Cs', cooking, caring and cleaning, are synonymous with the label *reproductive labour*.



domestic sector to work for a migrant women's association. Three of the six women work for the *Donne-Nissà* association and one might consider their trajectories as 'success stories', since they have left the domestic sector. This is the case for Irene, who takes advantage of the professional expertise acquired in her country of origin as secretary of the association. This is also the case for Fatbardha, a 60-year-old woman from Albania who was a live-in domestic worker when she first arrived in Italy and now works as a counsellor and manager of the kindergarten *Mafalda*. Bahija, a 45-year-old woman from Morocco, who is employed as an accountant and counsellor on care work at the *Nissà-Care* counter at the *Donne-Nissà* association, also was a domestic worker upon arrival in Italy.

### 3) *Women as Active Subjects*

An agent-centred approach towards domestic work considers women as capable of acting in their own self-interest, rather than being mere victims of global inequalities and objects of commodification. Such an approach underlines that the migration process has multiple features: not only does migration function to fulfil an economic strategy in order to maximize resources and minimize the time spent abroad, but it may also encompass 'instrumental' jobs (i.e. that are useful and are followed by better jobs) that migrants may take upon arrival, at the beginning of their insertion into the labour market. An agent-centred approach regards migration as a conscious choice that may be characterized by empowerment and personal achievement.<sup>24</sup> Emphasizing migrant women's agency draws attention to 'the social, political and economic power structures at the national and international level, which limit and influence [women's] actions' (Zontini 2004: 1114). As Irene explains:

My immigration pattern has been an adventure and a personal 'challenge' and I lived it with optimism. Before immigrating, I had never been outside Argentina and when I left, I took four planes by myself! And this has grown me up. At that time, I was 52 and I was only permitted 35 kilograms of baggage: what do I carry in merely 35 kilograms of my 52 years of life? I did not carry any photos, because it hurt me too much; actually I did not carry too much stuff. The first time I was here, I was afraid of losing my identity, taking the bus and going outside alone. I did not know the habits and customs of here and I was afraid of speaking Italian, because for me it was like losing my identity. (Irene, 61, Argentinean)

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24 The agent-centred approach underlines that the 'choice' of being caregivers is not always a constraint, but can represent an opportunity for self-reliance. However, one also has to recognize that not everyone who works in the domestic sector necessarily wishes to be incorporated into civil society as a 'domestic worker', due to the 'invisibility' of this work and the neglected rights related to it.

#### 4) *Patterns of Employment as a Live-in or Live-out Worker*

Despite their success finding and keeping jobs, half of the interviewees, namely, Doina, Lidia and Ileana, are still working in the domestic sector, two as live-out domestics and one as a live-in. Some care workers either chose or are forced (by the birth of children, for instance) to move to other occupations, usually live-out or hourly-paid cleaners or domestic workers. For example, Doina, who works as a live-in domestic worker, recently arrived in Italy from Spain, where she was a live-in domestic worker for a family in Madrid. Irene, on the other hand, was a full-time live-out worker for a family in Tuscany where she settled after migrating from Argentina. Lidia and Ileana, decided to work for a pool of families, cultural associations, or restaurants. Often, workers who have multiple families as employers supplement their earnings from full-time jobs by taking on additional work during their free time. Lidia, for instance, was a cleaner in a cultural association but she worked additional hours as a babysitter and waitress in the bar and restaurant of the association. Ileana, alternately, had a five-hours-per-day work contract with a family employer but was working eight hours per day for the same family. For the additional hours she was paid ‘off the books’. For women who remain in the domestic sector, the tendency is to move away from live-in work to work as an hourly-paid cleaner or domestic worker. This is the case for Lidia and Ileana, both married and with little children. They prefer to have multiple employers and to be hourly-paid cleaners and to pay their own social security contributions while working for several employers. Working as an hourly-paid cleaner is convenient because it offers more flexibility and manageable arrangements with regards to family, personal time and work balance. As Lidia and Ileana state:

If I stay in Italy, I would like to quit domestic work (and find another job), but I would have problems reconciling working hours with the school life of my child. (For now), to be a cleaner is the best temporary solution (for me) in order to manage the work and family balance. (Lidia, 34, Polish)

To be a cleaner allows me to balance the organization of my hours in regards to the family-work equilibrium (and the hours of the kindergarten). (Ileana, 30, Romanian)

As the women left live-in work for hourly-paid work, they had to deal with reconciling their work hours with the care of their own family and their children, as do all women who balance family and paid work. Thus, being an hourly paid domestic worker is a strategic way for these women to deal with the issues of balancing the care needs of their families with work outside the family. For Italian working women, substituting the reproductive labour of foreign women for their own labour, as new family needs develop, is their strategy for creating more time for themselves and their families.

### 5) Future Plans

My interviewees disclosed their intention to either change work or acquire additional training in order to work in other sectors, such as health services, social services for migrants, unions, Catholic associations such as *Caritas*, and voluntary associations. Working as a cultural mediator in the unions or in voluntary associations is an important achievement because the women feel that they act as a ‘bridge’ between different cultures; they are able to understand the problems of their fellow migrants and render them intelligible to Italian institutions, as is the case for Fatbardha and Bahija. One of the main concerns for migrant women who are legal residents in Italy and informally employed as domestic workers is having a regular labour contract that guarantees social assistance, social benefits and the right to a pension. As workers for a ‘patchwork of families’, Lidia and Ileana expressed concern that they do not hold a regular labour contract.

I am taking evening courses organized by the Red Cross in order to join its Voluntary Medical corps. It takes six months. After that, I would like to get a degree as a licensed practical nurse. I would also like to continue with my studies and get a degree in accounting. (Ileana, 30, Romanian)

Lidia’s desire to go back to Poland is strong and her professional expertise acquired in Italy will be an advantage in Poland, where she might have a better life. For the moment the choice to remain in Italy is a ‘necessity’ for her child and his future, rather than an opportunity for her to gain professional promotion. As she points out:

The idea is to go back to Poland and change job because there I have a family network and I know better the ‘milieu’, with the professional expertise gained in Italy I would have a better life there ... Living here is necessary for the sake of my son. In Italy I [don’t] see [a positive future], here [it seems to me that] there is work but not [money]. (Lidia, 34, Polish)

Here it is important to underline that being a care and domestic worker represents a *temporary choice* or a *strategic and functional decision* that allows migrant women to draw together migratory patterns that may otherwise have opposing goals. Some women express their intention to *climb the economic ladder* and find employment for which they are more qualified; others transform the domestic job from full-time, live-in work to a part-time activity. Still others hope for family reunification, while some plan to migrate to other Western countries or return to their countries of origin.

## **The Care Worker Mobility Model**

Care worker migrants are typically, but not exclusively destined for the unskilled labour market. Countries such as Moldavia, Ukraine, and Russia, are currently a flourishing export base for (live-in) domestic workers, but the intensity and rapidity of the drain on care work at home may decline in the near future. The temporality of care work in the destination country means that care workers are likely to return to their countries of origin. As well, if the pattern that I have uncovered in Italy persists, then many women are only using care work as a step to a higher skilled form of employment and will move from domestic work to other occupations.

My interviews reveal that migrant women in the domestic work sector have specific working trajectories. The heterogeneity of immigrant flows and the articulation of economic and social life among migrants have produced new patterns of labour market insertion and rapid labour mobility out of care and domestic work. In most cases, women migrants consider the care and domestic sector as instrumental for achieving social mobility and better job opportunities. As soon as language requirements are met or further education is achieved, migrant women ‘succeed’ by leaving the domestic sector and obtaining employment in other sectors. Their departure creates openings for other newly-arrived women who are willing to do care and domestic work as their entry point into the labour market.

The ethnicization of domestic labour, which is already highly gendered influences the duration of the migratory project. Ethnic prejudices often reflect cultural stereotypes about minority women. For example, Eastern Europeans, mainly Romanians, Ukrainians, Moldavians and Polish, as well as Filipinas, Peruvians and Ecuadorian women are preferred as both live-in and live-out caregivers in relation to Moroccan women (Zontini 2004). Irene, a Latina, experienced this ‘ethnic stratification’ and discrimination:

I was a cleaner, [but I was employed] without a legal employment contract. The lady [for whom I worked] was already cared by a live-out Ukrainian woman. After four months of cleaning, the lady needed more help due to her worsening health conditions and she needed a live-in care worker. The lady’s family wanted to hire a Polish live-in worker, because [in their opinion] Polish women are more patient and open-minded. I wasn’t her live-in caregiver, I was [just] a live-out domestic worker. Once the family hired the Polish domestic worker, I [left the job and] moved [from Tuscany] to Bolzano. (Irene, 61, Argentinean)

She describes the gender hierarchy that Parreñas says is ‘... based on race, class and nation [which] establishes a work transfer system of reproductive labour among women’ (2000: 577). Some women are defined as better able to engage in the temporal and spatial separations needed to accommodate the reproductive labour and care work required in Italy and in many other countries. In summary there are two mobility scenarios to which my research points. First, domestic work has poorer and less regulated labour conditions and longer work hours

that newly-arrived migrants are more likely to accept. Live-in domestic service constitutes the ‘fastest’ way of getting a job and is situated at the beginning of the process of integration. Nevertheless, domestic work is abandoned at the first opportunity of a better job, which normally comes once an immigrant becomes a legal resident (which is usually achieved after five years in Italy) (Colombo 2007). Second, care migration affects not only external migration (i.e. from the departing country to the destination; or from a first country of destination to a second one), but it also affects internal migration in the country of destination. Based on my interviews, many Eastern Europeans, including Romanians and Poles engage in step-wise and circular migration. Doina moved from Madrid to Sicily, while Lidia travelled back and forth from Poland to Italy several times before her settlement in Turin. Here is how Lidia explains her internal and regional ‘mobility’:

The first job I found when I arrived in Rossolini, near Siracusa in Sicily, was as a live-in care worker for a self-sufficient elderly person. I was employed without a contract. I stayed there for four months, and then I moved to Milan for two months. After that I came back to Rossolini for just one month before going back to Poland for one year ... [and so I went back and forth]. (Lidia, 34, Polish)

## **Conclusion**

My findings show how two Italian cities (Turin and Bolzano) are tackling the care deficit and how they rely on the availability of foreign workers for low-skilled jobs. The employment of migrant domestic workers fills the care deficit in Southern European countries as women’s participation in the labour force increases, the population ages, and new household structures replace the nuclear family. Restrictive migration policies that limit migrants’ entry, along with ad hoc liberal legalization amnesties have strengthened the ethno-stratification of domestic labour. The growing migration flows toward Southern European countries have a variety of origins. My interviews demonstrate that certain migrant women who perform domestic and care work are preferred (i.e. from South America and Eastern Europe). Gender, class, religion and ethnicity are criteria of selection for migrant women and demonstrate how discrimination contributes to stratified inequalities in the domestic and care sector.

To conclude, I argue that the Italian social assistance system relies on the systematic availability of foreign workers to care for dependent people and to do household work. Personalized family-based care allows families to hire foreign eldercare assistants because families are also reluctant for moral reasons or unable for economic reasons, to hospitalize siblings and elderly family members. In this chapter, I have analysed care work from an intersectional perspective to consider how gender, ethnicity, and migrant status interconnect to shape the experiences of migrant women. I attempted to clarify the social, cultural and economic forces that promote the ideology of women’s domesticity for reproductive labour and

encourage women's migration. Migratory processes engender relations of inequality, vulnerability or detachment between women. Once women migrate on their own, they start a care chain of kin and siblings at home that connects the care and domestic sector with the transnational movement of women. When women arrive at their destinations, they face a labour market characterized by segmentation and ethno-stratification that identifies them as appropriate for and locates them in care and domestic work. I argue that migrant women are positioned in this labour sector, because on the one hand, Italian families are more inclined to hire a foreigner to provide care due to a lack of affordable social services for elderly; and on the other hand, migrant women act strategically to achieve their migration goals by working as care givers or domestic workers.