

Gendered migrations, social reproduction and the household in Europe

Eleonore Kofman

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Abstract As a framework for empirical studies, global chains of care has become the favored theoretical lens to capture the global transfer of physical and emotional labor from less wealthy regions, whether in the South or the poorer regions of the North to wealthy regions. However, the global chains of care literature has tended to channel research into a narrow set of sectors, skills and sites. In particular, its analysis is framed in terms of flows between households, thus rendering invisible the other sites, external agents and institutions of care interacting with the household as well as the diversity of familial arrangements within the household. Moreover, the household in feminist analysis had moved from being a site of unpaid work to a site of unpaid care. In this article, I suggest we need to unpack what is actually happening in the household in a period of economic, social and political change in which inequalities have increased massively, and state intervention is reshaping how and what activities are undertaken in particular sites and institutions. In order to do this, I suggest in this paper that revisiting the concept of social reproduction would enable us to better appreciate the complexity of the transfer of labor, both in relation to different institutional arrangements and the spatial extension of social reproduction. I firstly briefly review the relationship between social reproduction and its relationship with care in the last 30 years and consider some of the initial North American analyses applying the concept of social reproduction to migrant labor and its increasingly globally extended reproduction. The analysis of specific developments of social reproduction in the household focuses on the European Union.

Keywords Gender · Reproduction · Inequality · Migration · Labor · Europe

E. Kofman (✉)
Middlesex University, London, UK
e-mail: e.kofman@mdx.ac.uk

Introduction

In the past decade, the concept and discourses concerning care have come to dominate much feminist research on globalized migrations and the transfer of labor from the global South to the North. The older concept of (social) reproduction, especially that utilized in the domestic labor debate, around which there had been so much disputed and lively debate in the 1970s, is now primarily treated as the outcome of care (Hill Maher 2004; Misra et al. 2006; Perez Orozco 2010) without on the whole warranting much theoretical attention. The transfer of care from the Global South to the Global North is thus analyzed within the context of the international division of social reproductive labor (Parreñas 2001, 2012).

From the 1980s (Finch and Groves 1983; Waerness 1984), until the beginning of the last decade, the analyses of care and social reproduction ran in parallel. As Antonnen and Zechner (2011) noted, care as an independent concept also emerged from the domestic labor debate in which some feminists (Rose 1983) began to recognize the emotional as well as economic aspects of unpaid caring work as the basis of feminist political subjectivity and to conceptualize it as a “labor of love.” Care also became increasingly linked to social policy concerns and unpaid work by informal carers, especially among UK scholars (Antonnen and Zechner 2011; Ungerson 1990).

However, in the past few years, the term “care” has increasingly replaced reproduction in part due to its heightened policy salience, nationally and internationally. For example Lourdes Benería, in discussing the policies developed to address the crisis of care resulting from women’s increasing participation in the labor market in the North and the South, titled her original article “paid/unpaid work and the globalization of reproduction (2007).” In the revised article, a year later (Benería 2008), the title had been changed to “The crisis of care, international migration, and public policy” but with little substantial change in content.

As a framework for empirical studies, the global chains of care have become the favored theoretical lens to capture the global transfer of physical and emotional labor from less wealthy regions, whether in the South (Hochschild 2000; Parreñas 2001) or the poorer regions of the North (Kilkey et al. 2010), to wealthy regions. This movement in turn engenders further migrations in which each cascading chain of care results in its performance being less well remunerated, and indeed unpaid, except possibly through occasional gifts. However, the global chains of care literature has tended to channel research into a narrow set of sectors, sites and skills. In particular, its analysis is framed in terms of flows between households, thus rendering invisible the other sites, external agents and institutions of care interacting with the household as well as the diversity of familial arrangements within the household (Kofman 2010; Yeates 2009).

The household in feminist analysis had moved from being a site of unpaid work to a site of unpaid care which in terms of women’s ability to participate in activities outside the household has been seen as the most difficult to change (Himmelweit 2000; Razavi 2007: 7).¹ Now attention has turned to paid care which has

¹ The critique was that this preoccupation concerned white middle class women but that paid domestic labor had been a major sector of employment for racialized and working class women (Nakano Glenn 1992; Duffy 2007).

experienced one of the highest rates of growth in employment. In the past two decades, there have been numerous developments resulting from changing ideologies of care, such as the de-institutionalization of care into the community, especially in relation to mental health and the elderly, discourses of agency and choice, such as for the disabled and those in need of long-term care, and the shifting relationship between the market, the state, the voluntary sector and the family in the provision of care. We need therefore to unpack what is actually happening in the household, particularly in a period of economic, social and political change in which inequalities have increased massively, and state intervention is reshaping how and what activities are undertaken in particular sites and institutions.

I therefore suggest in this paper that revisiting the concept of social reproduction would enable us to better appreciate the complexity of the transfer of labor, both in relation to different institutional arrangements and the spatial extension of social reproduction. The meanings, scope and emphases of social reproduction vary considerably. It may refer to individuals, families (biological and social aspects), communities or society as a whole (identities, population). It may also extend to an entire social system, but this will not be taken into account for the purposes of this article.

It is also not my intention to produce a genealogy of social reproduction and its relationship with care in the last 30 years but to briefly outline some of the critiques of the concept as enunciated in the earlier domestic labor debate that are relevant to contemporary concerns. I will also consider some of the initial North American analyses applying the concept of social reproduction to migrant labor and its increasingly globally extended reproduction. As previously highlighted, much of this analysis, especially in European research, has directed its attention to the household, and within it mainly to female migrant workers employed in care (Kofman 2013). Yet the household encompasses a variety of activities beyond care and which have been commodified and outsourced to varying degrees among different classes and within different welfare regimes, and where the boundaries between households, markets, states and community organizations have shifted. In this article, the analysis of specific developments of social reproduction in the household focuses on the European Union. In particular, we see the state in different welfare regimes making the household a preferred location of social reproduction. Some households rely entirely on the market, and others are able to benefit from state financial support either through direct transfers or subsidies. Similarly, different levels of labor regulation and contracts apply to workers within the household in European states. Hence, in this paper, I want to focus on unpacking what goes on inside the household, especially those employing migrant labor, such as professional and high-income households and those with care demands.

From reproduction to global social reproduction

The notion of reproduction was widely debated by feminists in the 1970s in terms of the distinction and relationship between production and reproduction and the contribution of unpaid domestic labor to the reproduction of the labor force as in the domestic labor debate (Beneria 1979; Dalla Costa 1973; Eldholm et al. 1977; Harris

and Young 1981; Molyneux 1979). It should be remembered, however, that the discussion assumed a male breadwinner model with a family wage consonant with a Fordist mode of production in advanced capitalist societies. However, by the end of the decade, and over 50 articles published on housework in the Anglo-American socialist press, it had run out of steam. Molyneux (1979) directed three major critiques against this approach based on its economic reductionism, abstraction from specific societies and histories, and narrow focus on labor undertaken in the household, the latter being inadequately placed within a wider socio-economic context. More specifically, she critiqued its narrow concentration on housework and housewives and its tendency to focus on female labor underpinning the everyday reproduction of the (male) worker rather than that of childrearing. She contended that reproduction served both the “day to day needs of existing wage earners” as well as “the needs of future agents of production, i.e., children.” The latter entraps women far more than housework itself and would require a much more radical allocation of resources to overcome women’s responsibility for it. The reproduction of the next generation also entails socialization as particular kinds of gendered and classed individuals. Furthermore, she incisively notes that reproduction was not always the preserve of the family and could be carried out by extra-familial agencies. However, shifting such labor to other women was never part of the scheme. The spatial reorganization of labor was simply not envisaged, yet internal and international migrant labor has come to be an important source of reproductive labor (Kofman and Raghuram 2006).

In the 1980s, though still based on a feminist materialist analysis, a more open and less ethnocentric exploration of the relations between production and reproduction was taken up by feminists concerned with developing capitalist, post-revolutionary and less stable societies (Harris 1981; Pearson et al. 1981). In its shift of attention away from advanced capitalist societies, this analysis also marked a period of a broader discussion of the meaning of reproduction and a clearer feminist contribution. Thus, Mackintosh (1981: 11) distinguished two meanings of reproduction. The first broader one of economic reproduction or production of people involves biological, care and socialization processes and the maintenance of adult individuals to fit into the social structure of a given society and ensure the continuation of that society into the next generation. The second narrower one of human reproduction focuses on the relations of marriage and kinship in a society where the sexual division of labor and behavior are often the most rigid. However, Laslett and Brenner (1989: 383) in an historical review of gender and social reproduction in advanced capitalist societies applied the term “social reproduction” to the production of people through various kinds of work—mental, manual and emotional—aimed at providing what is necessary to maintain existing life and to reproduce the next generation. It includes:

how food, clothing and shelter are made available for immediate consumption, the ways in which the care and socialization of children are provided, the care of the infirm and the elderly, and the social organization of sexuality...And the organization of social reproduction refers to the varying institutions within which this work is performed, the varying strategies for accomplishing these tasks, and the varying ideologies that both shape and are shaped by them

Though recognizing other institutions, Laslett and Brenner's definition focuses on the family. We should of course remember that many functions of the family have been taken out of the household yet are very central to social reproduction, including preschool education, school education and health services as well as laundering and cooking. As Bakker and Gill (2003: 3) have affirmed, in "today's world, social reproduction involves institutions that provide for socialization of risk, health care and other services and ...where the state intervenes to offset or offload the high costs of social reproduction onto or away from the family at different moments in different locales."

Nowadays, the concept of social reproduction is enjoying a revival across a range of social science disciplines, such as anthropology (Bjeren 1997; Constable 2009), geography (Mitchell et al. 2004); international relations (Petersen 2003), and political economy (Bakker 2007; Bakker and Gill 2003; Bakker and Silvey 2008; Bergeron 2011; Ferguson 2010; Luxton and Bezanson 2006; Pearson 2013). Far less attention has been paid to biological reproduction (Bledsoe and Sow 2008) and cultural reproduction as transmission of identities (Gedalof 2009). Yet, despite the revival of interest in social reproduction, especially among North American scholars, there has been relatively little application of it among scholars of gendered migration (but see Bakker and Silvey 2008; Beneria 2007; Bjeren 1997; Kofman 2012).

The interlocking nature of sexual and racial divisions in reproductive labor in capitalist societies was highlighted in US writing on domestic labor (Duffy 2007). Nakano Glenn has been the most influential in the use of reproduction to analyze historically the labor contribution of migrant and minoritized women in the US. She defined (1992, 1) reproduction as "the creation and recreation of people as cultural and social as well as physical human beings who engage in an array of activities and relationships involved in maintaining people both on a daily basis and intergenerationally." Her work examined the interlocking and interactive gendered and racialized dimensions of reproduction through the study of three groups of racialized and ethnicized women—African American, Mexican–American and Japanese American in different regions of the United States in the course of the twentieth century when there was a shift for such women from working in households as commodification moved to low-level institutional service work, e.g., nursing aides. Subsequently, in the postwar years, and especially after the opening up of immigration in 1965, migrant women, often undocumented, begun to occupy the lowest levels as some of the older minority groups entered the caring professions, thus creating a racialized hierarchy within reproductive labor.

Based on the experiences of West Indian women, who had migrated to New York after 1965, Colen (1995) developed the concept of stratified reproduction to analyze their economic and familial positions. This concept described the power relations through which some categories of people gain greater sustenance and support (material and normative), while others face greater obstacles and hardships in sustaining their own reproduction and care. She demonstrated how physical and social reproductive tasks of bearing, raising and socializing children, and of creating and maintaining households from infancy to old age are achieved, experienced, valued and rewarded differently according to inequalities of access to material and social resources in particular historical and cultural contexts (Colen 1995: 78).

The resultant transnational system of inequality plays itself out in intimate, daily and local events in sending and receiving states in which a number of different institutions (state, labor market, families, local communities, and media) contribute to particular living and familial arrangements and their representations as being legitimate or marginalized. Thus, the provision of reproductive labor for wealthier professional women in turn shapes the ability and modalities of different categories of migrants to reproduce their own families. The latter's reproduction is facilitated by the work of the former but for migrant families it often meant disembedding the family and accepting forced transnational separations for varying periods of time. This is not just a matter of families living apart, but also of interrupting a sense of solidarity and community of shared events in a particular locality. How rapidly migrant women could reunite their families depended to a great extent on their position within the domestic labor market (live in work was often occupied by the undocumented seeking to get their employer to sponsor them) and their immigration status (from undocumented to Green Card and citizen). A close relationship with a citizen, such as marriage, can also be a means of facilitating the entry of other members of the migrant's family through family reunification.

Colen and Nakano Glenn explored the experiences of specific groups of racialized minority women but it was Truong (1996) who subsequently extended the analysis to a more general thesis of the relationship of production and reproduction through the globalized transfer of labor. She argued “[n]o production system operates without a reproduction system² and it should not be surprising that the globalization of production is accompanied by its intimate ‘Other’, i.e., reproduction.” A global perspective would need to explain a number of aspects, such as the structural gaps of labor in reproduction (withdrawal of state from services for children and elderly, increased participation of women in waged work without concomitant change in the sexual division of labor in the household, demand for sexual services from the spatial mobility of the male work force) which affected different classes and economies; the processes by which the transfer occurred, and the implications this has for states, capital, communities and the reproductive workers themselves. She also noted, though does not develop, the role of multicultural marriages in supplying care work for family members of their partners (p. 29). The articulation of labor and marriage migrations too can be brought together under the framework of the global transfer of reproductive labor (Constable 2009; Kofman 2012; Lan 2008). It allows analytical space for a range of economic agents from the macro of the corporation to the micro of the household which is being extended globally across space and time (Douglass 2006).

And as Katz notes, “Reproduction always involves a complex interplay of a variety of actors in different sites so that it is secured through a shifting constellation of sources encompassed within the broad categories of the state, the household, capital and civil society” (Katz 2001: 131). And how reproductive work is assigned to particular groups of people across the sites is, as Bakker and Silvey (2008) point

² For her the feminist conception of reproduction encompasses three interrelated meanings—human reproduction, maintaining and sustaining human beings throughout their life cycle, and systemic reproduction which enables a given social system to be re-created and sustained.

out, very much a question to be addressed in contemporary processes of global restructuring. We therefore need to engender greater clarity into who performs what tasks, with which skills and in which sectors and sites. While this issue cannot be addressed comprehensively in this article, some researchers (Kofman and Raghuram 2010; Ochiai 2009; Razavi 2007) have elaborated a care diamond based on a plurality of welfare provision across four key institutional sites, that of the family/household, the market and the private sector, the state at different levels, and community organizations covering not for profit and voluntary organizations or what has been called the Third Sector. These sites also comprise what Lyon and Glucksman (2008) call configurations of care meshing different forms of work and employment relations in the provision of care.³

The ways in which each of these sites interact with each other and support social reproduction have shifted considerably with changing ideologies of care provision and since the increasing liberalization of economies and social provision from the 1980s, and especially the mid 1990s. The result, depending on the varying degrees of neo-liberalization in different welfare regimes, has taken a number of forms. These have included the withdrawal of the state from direct provision of services, the shift from public to private and market-driven provision, with new forms of social support such as personal budgets or tax subsidies, often as a replacement for the provision of services, changing conditions of work making contracts more flexible and temporary, and decreasing regulation of conditions of employment. The latter has rendered work less secure and with fewer social benefits, and contributed to a redrawing of boundaries between formal and informal employment.

Public bodies such as local authorities, states and the EU (European Commission 2012) have seen the household as a cheaper site of social provision and reproduction with employment potential as they have sought to cut back publicly available social provision, on the one hand, and expand employment opportunities, though of course not at the same level of security, regulation and recompense as in the public sector, on the other. Though household services have been one of the largest generators of employment, especially for women, and much of it in the field of social care of children, people with disabilities and elderly people (European Foundation for the Improvement of Living and Working Conditions 2006; Razavi 2007), we should be careful not to assume that the vast majority of employment is exclusively for care or performed by women. Though not exclusively performed by migrant women, attention has in recent years overwhelmingly focused on their role in the transfer of reproductive labor from the global South to the global North to fill care deficits in the household (Kofman 2013) through global chains of care (Hochschild 2000). It is, however, not always clear what migrant workers are undertaking in the household (Leon 2010) and the extent to which they are performing caring tasks. In the next section, I probe into some of the developments that have resulted in recourse to migrant labor in the reproduction of individuals and families within the household.

³ They studied four countries (Italy, Netherlands, Sweden, UK in relation to elderly care.

Inside the household

Households are diverse in their composition (Bergeron 2011) but are usually defined on the basis of two criteria that of space (house dwelling) and function (housekeeping) (UN 2006). Though European households often consist of family members, their composition is highly varied. Some types, such as single persons, have increased substantially. Sweden, a social democratic welfare regime where the state provides a high level of social protection and support, has the highest level of persons living on their own with 47 % (Klineberg 2012). In France and the UK it is 34 %. The household is thus both a place of reproductive work (paid and unpaid) and consumption for the able bodied and those more dependent on others to look after them. The paid labor within it operates with different employment contracts, some informal, but others more regulated.

To gain an idea of the distribution of reproductive activities and recourse to migrant labor, one needs to examine changes in time allocation to different tasks as well as the degree to which and how the state supports such reproductive activities. Since the 1990s there have been a number of studies of time use data by feminist economists (Himmelweit 2005) and sociologists (Bittman et al. 1999; Gershuny 2000; Gershuny and Yee Kan 2009) seeking to investigate the interaction between unpaid labor in the household and paid labor and participation outside the household, the trend in different types of household work and the extent to which different types of activities are outsourced. Mostly these authors do not discuss the use of migrant labor except peripherally but their analyses enable us to understand reasons for the deployment of migrant workers, especially in different types of welfare regimes (Gershuny and Yee Kan 2009).

Gershuny and Yee Kan divide unpaid work into three categories—firstly, the domestic core covering routine household cleaning, cooking and laundry; secondly, caring for family members; and lastly, other, that is, non-routine activities of shopping, gardening and household repairs. According to time use studies, while technology and increased productivity came to replace labor in the household and time spent on the routine activities decreased compared with the 1920s (Himmelweit 2005), the time devoted to care did not decrease (Gershuny 2000). A word of caution is required here for it may not be easy to distinguish caring from catering and cleaning since the latter tasks for a child or frail older person constitute care but not for an able bodied person (Waerness 1984). The routine activities cover all members of a household, including able bodied adults and the carer her/himself. In a comparison of 12 EU states across the welfare regimes, Gershuny and Yee Kan) found there has been a 20 % fall in unpaid labor over four decades from the 1960s but that the time devoted to household tasks remained highest in conservative corporatist states such as Italy.

Gendered ideologies have remained strong to varying degrees with women still spending far more time on routine domestic and care activities than men. Men, on the other hand, were prominent in the time they spent on the non-routine activities. So while the amount of time spent on routine activities decreased for women, it did not increase a great deal for men. In terms of care, modern parenting norms demand

that parents spend more active time with their children and hence that careers be combined with good motherhood and fatherhood.

Another way of looking into household activities has been through the concept of domestic outsourcing which refers to the process of replacing unpaid household production with market substitutes. This literature has highlighted the fact that both female and male services are outsourced. In their study of Australian data from 1984 to 1994, Bittman et al. (1999) point out that the most commonly outsourced item was restaurant meals (by 90 % of households), 30 % of households with children under 12 years used child care, 9 % gardening and 4 % cleaning. Although outsourcing of domestic labor seems to be more common among stereotypical male tasks, it has received hardly any attention compared with the large literature on female tasks, mainly focusing on care (Perrons et al. 2010). The conceptualization of caring labor as face to face service and based on emotional and relational dimensions means that those areas of reproduction based on non-relational tasks such as cleaning and cooking, and which may be done in restaurants, canteens or in the home, are not considered (Duffy 2005).⁴ According to the UK Time Use Study 2000, child care accounted for 4 % and elder care 1 % of outsourcing compared with household repairs 6 % and gardening 6 %.

Different types of outsourcing have different implications for the sites of employment of replacement labor. The replacement of meals consumed in the household, both restaurant and take away, is supplied by labor sited outside the household unlike the introduction of paid labor into the household for routine domestic work and care. Unlike the thesis in the 1970s that domestic workers represented what was considered a pre-modern or archaic form of labor (Coser 1973), households have, in the past decade, increasingly become the site for paid work both in the North, particularly among dual earners, and among the expanding middle classes in the global South.

Outsourcing is accounted for by the time squeeze among dual earner households and is surprisingly highest among one and half earners in the UK due it is thought to the fact that having someone external in the household involved management of them which fell to the female (Kilkey et al. 2010). For Sassen (cited in Kilkey et al. 2010), the expansion of the demand for domestic work forms an integral part of the social reproduction of the high level professional in global cities, many of whom are increasingly female. Work is demanding and requires long hours be put in. This results in the proliferation of what she calls “the professional household without a wife” in a situation where the household has to function smoothly, and hence the return of the “serving classes.” It should be noted that Sassen is not necessarily referring to caring labor in terms of looking after those who are dependants. Domestic labor may involve a whole range of activities, such as cleaning, cooking, gardening, household maintenance as well as child care which ensure the smooth reproduction of the professional household. As we shall see, reproductive work

⁴ Duffy’s clarification of the meaning of care divides it into two formulations, that of nurturance involving direct contact and reproductive labor extending to non-relational tasks such as cleaning and cooking which may be done in restaurants, canteens or in the home and where the language is not about relations but about maintaining existing life and the reproduction of future generations. The latter highlights the “back-room work of social reproduction” (p. 79) undertaken by low wage workers.

performed by migrants extends well beyond the households of well-paid dual career couples (May et al. 2007).

The different areas of work are also highly gendered. In particular, household maintenance is a largely male dominated sector (Cox 2010; Kilkey 2010) as are gardeners, a niche filled by Mexicans in the US (Ramirez and Hodagneu-Sotelo 2009). For Perrons et al. (2010: 204), it is not just feminized domestic work which has been commoditized, but also that such male labor “represents another dimension in the global chain of social reproduction and transnational social divisions.” Thus, the various forms of outsourcing may be seen as a strategy for professional households with dependant children to make more time for parents to spend with their children. Parents are expected to read with their children, help them to do homework and generally stimulate them. Ochiai (2009) in her study of six Asian countries also notes that there is a tendency for mothers and grandmothers to undertake care with migrant female workers doing cooking, cleaning, laundering and shopping.

The analysis of replacement labor in the household in the time budget and outsourcing literatures is primarily based on the greater participation of women in the labor market, emphasis on households with young children and hence child care and the use of technology. There is little consideration of single person households and the needs of older people. What is also missing is an analysis of the role of the state in supporting social reproduction in the household. To understand how this plays out in different European welfare regimes, we need to examine the influence of neo-liberalization on labor market and social policies, such as the shift to flexible working conditions and the marketization of service provision together with the varying persistence of gendered ideologies of the division of domestic work. Yet equating these processes with the withdrawal of the state is too simple. What is evident is that the state has withdrawn in many countries from direct provision, outsourced provision to the private sector (from small firms to multinationals) and facilitated cash for care to individuals in households. In others, the state never provided formal services either through institutions or home care. Given the reduced cost of maintaining infrastructure and more flexible labor with lower social benefits, the household has become a preferred site of social reproduction with diverse relationships to external agencies and professionals.⁵

The relationship between the state and the household varies between childcare, on the one hand, and elder care, on the other. In Europe, the inclusion of childcare as part of the European Employment Strategy has led to greater investment in child care services, although there remain large differences in the extent and the forms of provision. In the age category 0–2, the use of formal childcare arrangements in 2006 varies from 73 % in Denmark to only 2 % in the Czech Republic and Poland (Plantenga and Remery 2009). Differences arise through policy measures and cultural norms. In social democratic Nordic states, child care is a social entitlement (parental leave and formal provision). Yet even here the au pair system has expanded substantially in the past decade, officially treated as cultural exchange

⁵ The EU too is now seeking to develop personal and household services in its strategy to create job opportunities (European Commission 2012).

rather than labor migration, and in effect a means of importing cheap labor primarily by dual career families (Stenum 2010). In countries with high levels of overall provision, such as France, tax exemptions have been part of an employment generation strategy pushing care into the home though using registered child minders (Scrinzi 2009). In familial welfare states such as Italy there is still very poor provision of formal services for very young children, although in Spain this had been increasing more rapidly.

In terms of elder care, there are also large variations between countries (Lethbridge 2011) but general trends of home care, private sector provision, targeted access to services, and use of cash transfers, may be discerned (Simonazzi 2009). Long-term care has also been seen as a way of providing employment in home care for migrants and minorities deemed as having low employability, for example in Denmark, Germany and especially France⁶ (Rostgaard et al. 2011; Theobald 2011). Some states have maintained public provision, though often incorporating public management techniques, as well as home care services (state, private and community), as in Denmark and Sweden. Others have medium levels of home care service, increasingly outsourced to the private sector by local authorities, for example, liberal UK, or undertaken by the voluntary sector, as in Germany. In the last few years, the introduction of personalized services and personal budgets, which allow the individual older person to receive a cash payment rather than a service have led to the growth of “personal assistants” whose conditions of work may be unregulated, as in the UK or regulated as in France through a degree of supervision by social service and administrative professional (Du Roit and Le Bihan 2011). A third type has low levels of institutional as well as home care provision, where cash transfers have led to the transformation from a family to a migrant in the family welfare model (Bettio et al. 2006).

In all countries care work is of low status. Specific care regimes, which encompass cultural attitudes and policies, employment models and migration policies determine the use of migrant labor in home care (Theobald 2011; Williams 2010). Women tend to do more of the paid caring although there are higher proportions of migrant men in caring, whether it be in Denmark, Italy or the UK (Rostgaard et al. 2011) than among men in the labor force more generally. For example, in the UK, there were 31 % of migrant men in the care sector (home and institutional) compared with 13 % of UK born workers. As carers, men may emphasize their “masculine qualities” such as physical strength in handling older people or the ability to do repair jobs around the home and thus often obtain higher remuneration. Care work is better paid than other low paid occupations such as sales and retail work, check out operators, kitchen and catering and cleaning (Cangiano et al. 2009; May et al. 2007). Especially in Northern European countries with a long history of immigration, including refugees, people with a variety of immigration statuses and citizens perform care work. In Denmark, most are second generation

⁶ This has been particularly the case in France since 2005 where subsidies for personal services as part of an employment strategy include the whole range of domestic services and not just those directed towards care for specific groups. Whilst certain groups of migrant women from Africa (Maghreb and sub-Saharan) are concentrated in the sector, older women previously employed in other occupations, especially in regions of high unemployment, are also to be found (Devetter and Horn 2011: 9).

whom the state sees as suitable workers due to their upbringing in a tradition of family solidarity (Rostgaard et al. 2011: 151). In the UK, institutional and home care is undertaken by students 9 %, UK nationals 28 %, EU nationals 20 %, permanent residence 14 % and work holder permits 19 % (Cangiano et al. 2009). In Italy 90 % of domestic workers (840,000) are foreign-born (Rostgaard et al. 2011) with over half of the migrant care workers working without a regular employment contract.

Conclusion

While activities within households have been crucial for social reproduction, there has been in the past few decades a shift in attention from the unpaid labor of the middle class housewife within a largely male breadwinner model, as in the domestic labor debate, to the paid labor of the migrant worker enabling women to participate in employment external to the household and/or ensure the care of older populations unable to support themselves. In much feminist writing on the globalization of migration since the 1990s, the focus has been on domestic services and particularly, care in the household. Care, as noted in the introduction, has come to dominate our understanding of gendered migrations (for further discussion see Kofman 2013) and has displaced not only social reproduction as the pivotal concept, but also converted domestic work into care. The reasons for this are multiple and cannot be explored more fully in this article. I would suggest they have to do with the combination of the ethical, emotional, relational and material dimensions of care and its centrality to female subjectivities. Though until recently not concerned with migrant labor, the gendered migration literature is now connecting up with that on the ethics of care (Bergeron 2011; Tronto 2011).

In policy terms, care has moved to center stage with women's increasing participation in the labor market and the aging of the population requiring resources beyond the unpaid care traditionally provided by women. The use of the concept of care rather than domestic work has thus been used to raise the economic and social value of household labor, both paid and unpaid. It can be deployed to argue for the increased valuation of this embodied form of labor and its need to be trained, as has happened in the European Union.

However, as we have seen in this article, care is only one of the activities undertaken by families and households. Many of them are not restricted to those who are unable to support themselves as tends to be the focus of care. Social reproduction encompasses all the labor devoted to the maintenance of all members of the household on a daily basis as well as generationally, whether they require support or not. The concept of social reproduction enables us to capture what is happening to different kinds of labor processes, and how these have been assigned to members of the household and to those external to it. We should also consider how replacement of one form of labor by a migrant worker may enable a family member to undertake another form of labor which is valued more highly. There is some evidence that the replacement of domestic services, such as cleaning and laundering, may leave time for parents to devote more time to care and socialization

of their children. In studies of the use of male migrant labor for gardening and household maintenance among professional couples, it seems that for men it was an opportunity to spend more quality time with their children that led them to employ external labor.

Another missing element to be addressed is the complex ways in which the household interacts with external institutions such as the state, the market and community organizations. Across different welfare regimes, social reproduction of those requiring care has been increasingly pushed into or maintained in the household. The attraction of the household as a site of social reproduction has not just occurred in states with liberal or family welfare regimes. It is happening in states where public provision was at a high level, as in Scandinavia and in France for child care. Discourses of consumer choice and provision of employment play a major role in encouraging this trend.

This does not mean the state has withdrawn in a simple fashion but that it has, often using the ideological discourse of choice of services, pushed, facilitated and encouraged the uptake of services in the household as a means of reducing the cost of labor and infrastructural maintenance. This means we should open up the way we conceptualize the household and situate it in relation to other institutional actors and agencies.

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