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## **Typologies of Caring Roles in Filipino Transnational Families: An Analysis of Care Circulation from a Life Course Perspective**

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# Typologies of Caring Roles in Filipino Transnational Families: An Analysis of Care Circulation from a Life Course Perspective

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## Abstract

Due to increased international mobility and improvements in transportation and communication technologies, coupled with desires/needs for better economic opportunities, enhanced lifestyles and social safety, more and more people of various demographic profiles are experiencing the dynamics of transnational family life. Hence, researchers are now focusing on how families and their members are affected by separation across international borders. To adequately understand the complexity of issues involved and theorize the plurality of transnational family types, in this paper, I use a life course perspective to identify common roles played by Filipino transnational family members. Specifically, I look at how individual family members' age and stage of life affect who provides care, who receives care, what kind of care is provided and how that care is provided. The key findings reveal that stereotypical constructions of fathers, children and grandparents as dependent, incapable and resistant to providing certain types of care are no longer accurate and must be reexamined and appropriately conceptualized. This paper also highlights the active role played by individual family members in the family's care network, regardless of age and gender.

**Keywords:** Philippines, Family, Gender, Care, Transnational Migration

## 1. Introduction

Over the last few decades, developed, as well as emerging economies across the globe, have sought workers from less developed countries. The Philippines has proven to be a steady source of such labour. Indeed, migration, particularly labour migration, from the Philippines has become commonplace, desirable and highly institutionalized. The Commission on Filipinos Overseas (CFO) reported that as of December 2013, more than 10 million Filipinos (about 10% of the country's population) were living overseas. Of the almost 2 million Filipinos living in South and East Asia, Japan accounts for approximately 11%. The commission also reported that between 1981 and 2015, Japan ranked as the third major country of destination of Filipino emigrants behind the US and Canada. Despite Japan's traditionally restrictive immigration policies, Filipinos continue to settle in the country.

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This can be attributed to the aging population and the increasing demand for nurses and caregivers. Additionally, Filipino-Japanese marriages are becoming more popular (Asis & Battistella 2013).

Broadly speaking, due to increased mobility and improvements in transportation and communication technologies, coupled with desires/needs for better economic opportunities, enhanced lifestyles and social safety, more and more people of various demographic profiles are experiencing the dynamics of transnational family life. As a result, this phenomenon has received much attention from various stakeholders. In fact, much research has been done on how families and their members are affected by separation across international borders (see Baldassar et al. 2007; Bryceson & Vuorela 2002). One key area of focus is on care and how it is exchanged within these families. To adequately understand the complexity of issues involved, researchers have adopted numerous perspectives to theorize the plurality of transnational family types, and by extension, the typologies of roles played by these family members. In this paper, I use a life course perspective to identify common roles played by Filipino transnational family members. Specifically, I look at how individual family members' age and stage of life affect who provides care, who receives care, what kind of care is provided and how that care is provided. A life course is defined as "a sequence of socially defined events and roles that the individual enacts over time" (Giele & Elder 1998: 22). This theoretical approach was developed in the 1960s to analyse the structural, social, and cultural contexts of people's lives. It, therefore, interrogates the connection between individuals and the historical and socioeconomic context within which they exist or existed.

This paper draws on data that was collected via in-depth interviews, coupled with participation in and observation of family life. Fieldwork was conducted from July 2016 to February 2018 and spanned five prefectures in Japan (Nagano, Aichi, Shizuoka, Gifu and Mie) and several regions of Metro Manila and the neighbouring province of Bulacan in the Philippines. Some interviews were also conducted in Cebu city. In total, I have conducted interviews with and observation of members of forty-three families; some of whom are living in Japan while others live in the Philippines. Of the eighty-one participants in the study, fifty-four are adults and twenty-seven are children. In terms of gender, I interviewed twenty men, thirty-four women, twelve boys and fifteen girls. The data collected were analysed both vertically and horizontally because it was important to capture the unique stories of individual families as well as a comparative perspective across families. This was done by manual content analysis whereby common themes and patterns were identified and interrogated. To protect the identity of the participants in this study, pseudonyms are used in the narratives.

The key findings of this paper are related to how Filipino transnational families exchange mutual care across borders and generations. It primarily focuses on the identification of specific caring roles at different life stages and reveals that stereotypical constructions of fathers, children and grandparents as dependent, incapable and resistant to providing certain types of care are no longer accurate and must be reexamined and appropriately conceptualized. This paper highlights the active role played by

individual family members in the family's care network, regardless of age and gender.

The paper is organized into six sections. In Section 2, I discuss how family relationships are affected by transnational migration and the subsequent temporal and spatial separation. Next, Section 3 explains how transnational caregiving is conceptualised and discussed in current research. The following section details how transnational motherhood, fatherhood and childhood are experienced and addressed in the existing literature. A short literature review on elderly care in transnational families is also included here. Based on empirical research, in Section 5, I present eight typologies of caring roles in Filipino transnational families and discuss how they affect and are affected by care circulation. Section 6 concludes the paper.

## **2. Family Relations in a Transnational Context**

Research on transnational families, until more recently, focused on migrants as individual actors and where they were viewed as groups, they were categorized based on sex, race and class. Migrants were largely not seen in terms of their relational embeddedness in larger social structures such as the family. Ironically, migration research has shown how families influence the migrants' decision to migrate, their actual migration process, their assimilation into the host country and how they behave in their transnational social fields, particularly, as it relates to maintaining kinship ties and bonds with their home country. In essence, family relations are usually attributed to normative understandings or simply taken for granted (Mazzucato & Schans 2011). Nevertheless, current literature discusses the multifaceted and asymmetrical relationships, which exist in families transformed by spatial and temporal separation across national borders. Bryceson & Vuorela (2002) conceptualized transnational family life as social reproduction, which transcends nation states. Furthermore, they posited that transnational families are families whose members may be separated across borders but who actively preserve their sense of unity and kinship and secure the collective welfare of the family despite spatial separation and dispersion. Unlike other families, which are domiciled together, transnational families are more like 'imagined communities' with members who are unequal in terms of location, resources, lifestyles and mobility.

In the negotiation of various familial roles and social demands, family members and their families are exposed to opportunities and risks, including the reconfiguration of social norms regarding family life and relationships. Many studies suggest that migrants often leave children and other dependents behind when they migrate. However, despite physical separation, their sense of responsibility to the family does not diminish. In fact, Zentgraf and Chinchilla (2012) pointed out that many migrant family members seek to affirm their commitment by reorganizing and redefining conventional ways of performing familial roles such as motherhood and fatherhood. In doing so, they demonstrate that geographical proximity is not a requirement for the preservation of kinship bonds and the execution of

familial duties, particularly regarding caregiving.

### **3. Transnational Caregiving**

Arlie Hochschild coined the term 'global care chain' to explain how employing migrant domestic care workers in the Global North created care deficits and care drain situations in the migrants' home countries in the South (Hochschild 2000). The articulation of this theory was supported by Parreñas (2001) who further explained how 'care' as an economic commodity is transferred and traded internationally in the context of globalization. She asserted that domestic care workers should be viewed as 'servants of globalization' (ibid., p. 243). Grounded in the larger theory of the global value chain, the proponents of the global care chain analysis assert that social reproduction and the provision of care is intimately linked to economic globalization and the international division of labour.

The global care chain analysis highlights the commodification of care work and global inequalities as it relates to the socio-economic wellbeing of domestic care workers. While this analysis has garnered much attention in academic and policy circles, it still has many critics who argue that it does not adequately represent the care work done by men and the institutionalized care provided by doctors and nurses. They also criticize the analysis for overlooking local inequalities by focusing too much on the global domain (Parreñas 2012). Another point of contention for many is the underestimation of migrants' abilities and efforts to provide care despite seemingly insurmountable challenges (Zentgraf & Chinchilla 2012).

Recent scholarship has sought to document and articulate a more nuanced view of transnational care work. Increasingly, focus has been placed on the reproductive work of men, the care of elderly family members and the active role children play in the provision of care. This not only emphasizes how gender impacts on caregiving but also demonstrates the necessity of caregiving across the generations. Documentation and discussion of the role that children play in care exchanges has been emerging in current literature (see Lee & Pacini-Ketchabaw 2011). Previously, research on transnational caregiving focused on children as recipients of care. On the other hand, much research has been done on the provision of transnational care to elderly family members and while they have mostly been framed as recipients, they have also been widely documented as providers of care, especially for children who remain behind in the home country when their migrant parents leave (see Baldassar & Baldock 2000; Baldassar et. al. 2007). As suggested by Leinaweaver (2010), going forward, more studies may focus on how left-behind children and their grandparents take care of each other in the absence of migrant parents. These studies will then highlight the multiple roles/duties of individual family members. This kind of perspective enriches our understanding of family life in transnational spaces since it provides insight on the nature and endurance of family relations that are based on reciprocity and mutual care. One such perspective is the relatively new analytical framework of 'care circulation' put forward by

Baldassar and Merla (2014: 22). They defined 'care circulation' as 'the reciprocal, multidirectional and asymmetrical exchange of care that fluctuates over the life course within transnational family networks subject to the political, economic, cultural and social contexts of both sending and receiving societies'. Rather than conceptualizing care as dyadic and linear (as the care chains analysis does), Baldassar and Merla argued that care flows in a circular way around family and kinship networks. According to them, this conceptualization of care is able to better capture the increased mobility of family members and the portable nature of the care, which they exchange with other dispersed members of their family networks. Moreover, it also highlights the fact that family members are, simultaneously, care givers and care receivers, who are participants in various 'circuits of care' consisting of both kin and non-kin members (*ibid.*, p. 49).

But, what exactly constitutes 'care' and what are the basic factors that determine its exchange? The analysis of caregiving in transnational families requires a closer examination of what exactly is involved in caregiving and the multiple factors, which affect the capacity and obligation to provide care across borders. The term 'transnational caregiving' refers to the exchange of care across national borders (Baldassar et al. 2007: 14). There are various forms of caregiving. Finch (1989) defined five categories of familial care: emotional/moral, economic, accommodation, personal and practical. In her study, she found that the care exchanged among family members fell within certain categories and that these forms of care were exchanged at varying degrees of intensity and frequency. However, the provision of care is not automatic and cannot be assumed as such. Whether or not care is provided depends on 'normative obligation' and 'negotiated commitment' (Finch 1989: 143; Finch & Mason 1993). According to them, 'normative obligation' depends on one's sense of duty and responsibility to family and is grounded in a particular society's definition of what is moral and right. They asserted, however, that family members do not necessarily abide by these normative expectations and, therefore, the actual care provided is an outcome of a process of negotiation with other family members and societal norms and expectations. What results from this negotiation process is called 'negotiated commitment'. Baldassar et al. (2007) augmented this theory by adding another variable: capacity, which they argued is necessary in any analysis of the provision of care, particularly as it relates to transnational families. They pointed out that even if a family member has a strong sense of duty to other family members, he/she might not be able to provide care due to various factors, which limit the ability to provide care.

## **4. Caring Roles in Transnational Families**

### **4.1. Transnational Motherhood**

Hondagneu-Sotelo & Avila (1997) first coined the term 'transnational motherhood' to describe a situation where a woman migrates and leaves her child/children behind and as a result is forced to perform her role as mother across international borders (*ibid.*, p. 548). Despite widespread gender

norms which dictate that mothering necessarily involves physical care and nurturance, migrant mothers often decide to physically separate from their children in order to take care of their material needs (Hondagneu-Sotelo & Avila 1997). Hence, these mothers often face social criticisms of being bad mothers (Bernhard, et al. 2005) and many suffer emotionally due to peer pressure (Hondagneu-Sotelo & Avila 1997). In fact, many studies on transnational motherhood explore how culturally grounded gender norms create added social demands on migrant women. Moreover, rising economic challenges in developing countries are forcing mothers to seek employment outside the home and even outside their home countries. Driven by the increasing opportunities for women's employment overseas, many women are crossing international borders - often leaving their children behind - to take up these opportunities. Maher (2010) asserted that these migration systems reshape family life and reconfigure how children who are left behind are cared for. With the physical absence of the biological mother, 'other mothers' or 'substitute mothers' such as: grandmothers, aunts, elder female children, cousins, or other female family members and friends, must act as caregivers (Hondagneu-Sotelo & Avila 1997; Illanes 2010: 209). Moreover, as research on Caribbean and Cape Verdean child fostering practices demonstrate, many discourses do not adequately recognise the role that extended family members and kin play in providing care (Åkesson et al. 2012).

Transnational mothers are finding alternative ways of caring for their children. Constant emotional and moral struggles compel migrant mothers to get involved in "intensive mothering" from afar by regularly communicating and sending home money and other gifts, which serve the dual purpose of expressing motherly love and meeting societal expectations (Parreñas 2005: 123). Moral expectations regarding motherhood and the resultant self-sacrifice on the part of transnational mothers often limit their socio-economic wellbeing and assimilation in the host country, and in some cases, may lead to protracted poverty, even while they consistently send remittances to their home countries. Often, the emotional requirements of motherhood are satisfied through letters, cards and technological media. Madianou's (2012) ethnographic study of Filipino transnational mothers showed how they used their access to mobile telephones to actively participate in the daily lives of their children.

#### **4.2. Transnational Fatherhood**

Literature documenting and analysing transnational fathers, especially from a gender perspective, have been increasing recently. This may be due to the dearth of such analyses and/or in response to criticism from scholars like Pribilsky (2012) and Waters (2009) who highlighted the disproportionate focus on migrant mothers. They also pointed out that gender should not be interpreted to mean women only. Others have argued against the inappropriate framing of men as deviant and irresponsible, particularly as it relates to providing care (see Mazzucato & Schans 2011).

Much of the studies on fatherhood in the context of transnational migration focus on the division of labour in the household. They reveal that fathers are usually somewhat reluctant to rearrange their

household duties and reconfigure their paternal roles. They prefer to be household disciplinarians as opposed to emotional nurturers (Parreñas 2008; Ryan et al. 2009). However, Pribilsky (2012) documented how Ecuadorian migrant fathers became more appreciative of the domestic work women do after they were forced to cook and clean for themselves after migration. They also felt that the migration experience had afforded them the freedom to transgress traditional gender norms related to masculinity. In their assessment of how fatherly roles are transformed in transnational families, Lutz and Palenga-Möllnbeck (2011) identified three strategies adopted by fathers whose female partners had migrated: sharing of care, withdrawing from caring and single fathering. They reported that ‘...fathers to a large extent leave or delegate childcare to female relatives, particularly to grandmothers. By doing this, they adopted a strategy of sharing care work with female persons...or of transferring the entire care duties on them.’ (ibid., p. 21). In the same study, single fathers argued that their idea of manhood made them ‘incompetent’ with regards to providing emotional care.

Some researchers have found that for various reasons, men are less likely to conform to gender expectations than women. They also found that men are more likely to abandon their children (Landolt & Da, 2005). Even though men experience greater flexibility in terms of social expectations, it does not necessarily mean that they are not equally affected by separation from their families. Asis (2002) pointed out that the impact of migration on fathers in transnational families remains under-researched. Despite this gap, we know that men’s coping strategies tend to be more self-destructive. Research shows that men often resort to excessive alcohol consumption and womanizing to cope with their separation from their families and their inability to satisfy social standards of masculinity (Worby & Organista 2007).

Notwithstanding the foregoing discussion, Fresnoza-Flot (2014) and Waters (2009) have reported that not only are men willing to take care of their children, but they are keen to provide care to their migrant spouses. Furthermore, some men desire to be more reliable fathers than their own fathers (Kilkey et al. 2014).

#### **4.3. Transnational Childhood**

Research surrounding transnational families and the provision of care are usually focused on the children who are left behind and how the migration of parents affects their wellbeing (Lutz & Palenga-Möllnbeck 2011). Previously, research was fixated on transnational children as passive subjects/victims of transnational processes and actors and less as active agents in their own lives. Recent literature has featured children as key agents in the maintenance of transnational kinship bonds (Dreby & Adkins 2012).

The impact of familial separation on the children left behind is also influenced by gender norms. Parreñas (2005) found that more responsibilities were given to girls as opposed to boys. Moreover, Moran-Taylor (2008) reported that if they were not monitored closely, girls were more likely to get

involved in sexually promiscuous behaviours, which could lead to early motherhood. Nevertheless, boys are perhaps equally vulnerable to negative influences such as involvement in gangs and other criminal-related activities (Smith 2006).

#### **4.4. Elderly Care**

Recent studies on ageing and the wellbeing of older people, particularly in transnational families, have examined the intergenerational transfer and exchange of care in the context of migration. To elaborate the adaptation process undertaken by families to deal with the dispersion of family members due to migration, Douglass (2006: 423) deployed the term ‘householding’. According to him, this term captures how the creation and sustenance of a household is a ‘continuous process of social reproduction that covers all life-cycle stages and extends beyond the family.’ In this process, elderly care and the care of other dependent household members feature prominently.

Western gerontology studies usually frame ageing as somewhat problematic and burdensome for the family and/or the state. However, Maynard et al. (2008: 41) called for a ‘post-gerontological’ approach in order to ‘explore difference and the ways in which different cultures and systems of belief give meaning to stages and conditions of life and how these meanings might contribute to well-being in old age’. Therefore, stereotypes regarding ageing and elderly care are questioned and appropriately contextualised. To answer this call from Maynard et al., a deconstruction of the dichotomy between dependence and independence is necessary. In both academic and political circles, old age is viewed as the time when people lose their independence and need to be taken care of. Moreover, this dependence is constructed as negative and burdensome. This simplistic construction, grounded in Western individualism, does not adequately capture the reality in many cultures (such as the Philippines) where mutual interdependence across generations is highly valued (Bowly et al. 2010).

## **5. Typologies of Caring Roles**

Based on my analysis from a life course perspective, I was able to identify eight distinct types of role identity among transnational family members. Organized under two broad categories (childhood and adulthood), these role typologies include: dependent child, resourceful/helpful adolescent child, sacrificial mother, breadwinner father, nurturing father, caring adult child, dependent versus dependable grandparents and supportive kin. In this section, I will describe each type and discuss how these role identities affect and are affected by care circulation in transnational families.

### **5.1. Childhood**

#### **5.1.1. Dependent Child**

Children, particularly younger ones, are generally viewed as helpless, unequipped and in need of

guidance and care. The focus at this stage is constant attention, intensive nurturance/emotional care and total economic dependence on adults. No doubt, care must be provided on a daily basis. Because of the intense and hands-on nature of the care required at this stage of the life course, parents, particular mothers, experience greater scrutiny when they cannot be physically present with their child/children. Children like Paulo (aged 9) and Chris (aged 10) are at this stage. Paulo lives with his maternal grandmother and is regularly visited by his father who lives nearby. Both parents financially support him but his mother's remittances are what cover most of his expenses, which are managed by his grandmother. Chris also lives with his maternal grandmother but he visits his father's family from time to time. Financially, both parents equally support him. Both boys communicate frequently with their parents by Skype and telephone calls. During these sessions, the main focus is on affirming love and affection and confirming that the boys are being respectful to their grandmothers and other elders.

Paulo [Interviewed on September 8, 2017]:

"My grandmother takes care of me because my mother is working overseas and she sends many nice things for us. I love her and I love my Lola too!

Chris [Interviewed on October 17, 2017]:

"My mother and father are over there in Japan. I think they have a beautiful life because they can travel and live in a nice country like Japan. I would like to live there too one day. I think they will send for me soon."

Chris' statement implies that children at this stage may not really understand why they are separated from their parents and what exactly their parents are doing overseas. As Bushin (2009) highlighted, children's role in transnational care relationships and their scope for agency are affected by their cognitive development. Moreover, their age is key in their understanding of their role and care arrangements at this stage.

### **5.1.2. Resourceful/Helpful Adolescent Child**

As young children get older and become adolescents, they gain a deeper understanding of their social settings and their family's migration projects. In addition, while they are still largely financially dependent on their parents or older family members, they also become resource persons in the provision of various forms of care including emotional/moral, personal/nurturance and practical support. For example, Kristina's (aged 17) father has been migrating for as long as she can remember. He has worked as a seafarer and also a construction worker in Saudi Arabia. Now, he works in Japan as a factory worker. Kristina [Interviewed on August 29, 2017] helps to take care of her two younger siblings because her mother is also a circular migrant to Singapore where she works as a domestic

helper. She is the one who receives the remittances from her parents and makes major decisions regarding allocation of resources in her household. This concurs with Parreñas' (2005) finding that girls are sometimes expected to take care of younger siblings and engage in household management. A caveat, though, is that Kristina is closely monitored by extended family members and her mother often gives strict instructions and sends detailed text messages. Her mother also does video calls periodically and when there is an emergency. Another child, Julius (aged 16), lives with his paternal aunt and her family. His grandfather also lives in that household and Julius helps to take care of him. Because of his interest in Biology and his dream of becoming a doctor, he takes pleasure in administering his grandfather's medicine and visiting the pharmacy to buy prescribed medicines. He related: "I enjoy doing it. I love to check his blood pressure and blood glucose. It is good training for my future and I can take care of my grandfather" [Interviewed on December 10, 2016]. Julius also worries about his mother's wellbeing and whether she is eating properly and getting enough rest. Whenever he talks to her, he reminds her to take care of herself and not to worry about him. As a gesture of appreciation for the sacrifice of his parents, he studies very hard and is diligent with his schoolwork. This demonstrates that in addition to the practical care that Julius gives to his grandfather, he also provides emotional care to his migrant mother. Furthermore, his diligence in school is a form of symbolic care, which he offers in exchange for the care he receives from his parents and other extended family members.

Unlike the previous type of children, parental concerns at this stage go beyond health, nurturing and schooling to focus also on discipline and the prevention of social deviance. Bonizzoni and Boccagni (2014) pointed out that adolescent children of migrant parents often force families to rethink and renegotiate their care arrangements. Simon's case demonstrates this. Simon is sixteen years old and has generally managed to stay out of trouble. However, since both parents migrated five years ago (his mother went to Japan and his father went to Abu Dhabi), he has had some disciplinary problems at school including alleged drug use. His grandparents whom he lives with have not been able to adequately deal with his problems. As a result, his mother is seriously considering terminating her employment and returning to the Philippines to deal with the problem before it gets worse. Here, we see that children are not always resourceful and helpful but can sometimes disrupt the livelihood strategies of the family. Nevertheless, in this study, the majority of children were demonstratively resourceful by helping with mundane tasks like cleaning, running errands and troubleshooting technological problems during transnational calls or video chats.

## **5.2. Adulthood**

### **5.2.1. Sacrificial Mother**

Studies on transnational caregiving and the physical separation of family members often apply a gender-based analysis and when the migrant is a female, especially a mother, a discourse of

abandonment and adverse effects on family life usually ensues. To counter this narrative and somehow justify their migration, migrant mothers often tell stories of hardships and sacrifice for the benefit of their children and extended family members.

In this study, all twenty-two mothers (young adults and middle-aged adults) identified as sacrificial mothers. This identity was even more pronounced for those mothers who had irregular migration statuses and/or were from low socio-economic backgrounds. Marianne (aged 39) has been living in Japan for the last fourteen years and left her two children in the Philippines with her mother. She initially migrated to Japan as an entertainment worker/hostess in a bar and subsequently has been working as a domestic caregiver. She describes a life of severe poverty and lack of opportunities before her migration. According to her, she migrated to ensure that her children could get a good education to secure a better future. She also highlighted that she did not get much help from the children's father.

Marianne [Interviewed on September 17, 2016]: "I didn't have a choice. My children were growing up. I could not earn enough money to take care of them and their father is not a good man. I was working three jobs and it was still not enough. I was a merchandiser and a washer lady. I also sold snacks at a nearby school. Can you believe it?"

While this narrative suggests that poverty and lack of opportunities usually necessitate sacrificial migration on the part of mothers, Luisa (36), who is relatively wealthier and who had a project management job with the Philippine government, also asserted that her migration to pursue a masters degree at a Japanese university was also an act of sacrifice for the betterment of her child.

Luisa [Interviewed on July 11, 2017]: "Yes, of course it was a sacrifice. Many people think you have to be poor to make a sacrifice when you migrate but that's really not true. After I complete my studies here [in Japan] and return to the Philippines, I am sure that I can get a promotion or find a better job. It is not easy to be separated from my child; he is so young. But I do it for his future."

These narratives show that even with very different socioeconomic and immigration statuses, migrant mothers, more often than not, invoke a discourse of sacrifice and identify as sacrificial mothers.

### **5.2.2. Breadwinner Father**

Unlike mothers, father's migration is generally not perceived as a disruption in family life and a cause for alarm. Indeed, it is seen as a natural expansion of their caregiving role, that of breadwinning. As many studies have shown, this is grounded in socially constructed norms, meanings and practices of care in various parts of the world including the Philippines (see Parreñas 2008).

Samuel (aged 42) is a middle-aged father of two girls whom he left behind in the Philippines with his

wife who is an office worker. He has been living in Japan for four years and religiously remits money to his wife to take care of the household expenses. While he sometimes sends packages with friends who are visiting the Philippines, he has not yet visited his family since he migrated. When asked about this, he responded that he does not earn enough money to afford a visit. Furthermore, he asserted that it is more important to send money for the family because that is his duty.

Samuel [Interviewed on January 18, 2018]: “I am sure that my children are getting enough care. My wife is there so it’s fine. I just need to make sure she has money for their food, bills and the children’s schooling. I am the man; I am supposed to go out and find the money wherever it is.”

However, breadwinner fathers are not just those who migrate. Even those fathers who are left behind in the Philippines sacredly guard their roles as breadwinners. Manuel’s (aged 35) female partner migrated to Japan three years ago. Their son now lives with Manuel’s elder sister and although his son’s mother regularly sends money (sometimes to him and other times to his sister), he makes a significant effort to contribute to his son’s expenses. He also tells how he was the one who paid for his partner’s migration expenses and financially supported her when she had just arrived in Japan. Although Manuel knows that his partner’s remittances are enough to take care of the household expenses, he continues to actively contribute financially [Interviewed on September 3, 2017]. Perhaps, as Fresnoza-Flot (2014) also found, he does this to reaffirm his manhood and conform to gendered expectations of masculinity.

### **5.2.3. Nurturing Father**

In dominant discourses regarding family life, the role of fathers usually relate to breadwinning. However, in this study, fathers (both those left behind in the Philippines and those in Japan) were keen to provide nurturance to their children and other family members. Reynaldo (aged 43), for instance, has been the primary care giver for his two children (aged 10 and 12) since his wife migrated to Japan four years ago. While his wife’s sister sometimes assists him, he is usually the one who does the daily cooking, cleaning and other household chores. Reynaldo also considers discipline as a part of his nurturing role, although he is careful not to alienate the children. According to him, he sees the absence of his wife as an opportunity to bond with his children.

Reynaldo [Interviewed on August 25, 2017]: “Since my wife migrated, I became closer with my children. We spend a lot of time together and I am always playing with them. Before, I didn’t have much time because I was always working. Now that my wife is away, I spend more time in the house.”

He also said:

“Discipline? Yes I discipline them but I try not to be too strict. I don’t want to be a scary father. I want them to have good manners but I also want them to see me as a good, loving father.”

We see that Reynaldo takes his nurturing role seriously and is careful to ensure that he performs this role properly.

Hideki (aged 40), a Japanese man who is married to a Filipina, is also a nurturing father. Because of the health of his mother-in-law in the Philippines, his wife is often required to return to the Philippines to take care of her. During these trips, which could last up to two months, Hideki takes care of their eight-year-old son. The care he provides is by no means limited to breadwinning and includes various forms of emotional and reproductive care such as bathing his son, cleaning the house, preparing meals and comforting his son when he cries for his mother. This kind of care is ‘abnormal’ for Hideki but he has since adjusted to it and takes pride in being able to take care of his son.

Hideki [Interviewed on June 15, 2017]: “Yea. It’s difficult. It’s not so normal for Japanese men to do this. But, you know, I am married to a Filipino woman so I am already different. At first, it was difficult but now I am already used to it. I enjoy doing it.”

These narratives show that fathers in transnational families are surpassing the normative understanding of their roles as breadwinners. They have demonstrated their willingness to perform caregiving tasks, which are necessary for the social reproduction of the family and the wellbeing of its members.

#### **5.2.4. Caring Adult Child**

More and more studies are finding that people of all ages are migrating as a part of a wider family livelihood strategy as opposed to a personal agenda. Moreover, elderly parents in the Philippines support the migration of their children as they hope it will enhance the economic prosperity of the family and act as a form of insurance policy for them if they become sick or need financial help. Beyond the material wellbeing of their own children, many migrants, both male and female, consider the care of their elderly parents as important and make efforts to send remittances to cover medical costs and pay for institutionalized care when necessary. In Anna’s family, she is the eldest daughter (aged 48) [Interviewed on February 5, 2018] and while she also has two sisters who have migrated to the USA and Hong Kong, she is the one who pays most of the medical and household bills of her elderly parents. Her sister who lives in the Philippines provides the hands-on daily care needed by their parents while her other sister who is a nurse in the USA helps to make the major decisions regarding what kind of

medical care is needed and the best institutional providers. Here, we see that these sisters provide various forms of care to their parents based on their spatial realities and their varying endowments of resources.

Another transnational family member, Raymond (aged 37) [Interviewed on October 8, 2017], lives in Manila and often helps his sister to take care of their elderly father; unfortunately, their mother already passed away. He runs errands for the family and helps to drive his father to his doctor appointments. He is also the one who receives and manages the remittances from his brother who lives in Japan.

#### **5.2.5. Dependent Grandparent versus Dependable Grandparent**

As demonstrated in the description of the ‘caring adult child’, one of the dominant perceptions regarding elderly members of transnational families is that, like young children, they are dependent on others around them to provide care. In my study, I found this to be true, to an extent, although it depends on their age and state of health. In the Philippines, like many other places where childbearing starts early, sometimes unplanned, grandparents can be relatively young and healthy. This challenges long-established normative constructions of grandparents as old, helpless and in need of intensive care.

Carmela (aged 52) has two grandchildren who have been living with her since their mother (her daughter) migrated to Japan and their father to Dubai. Other than occasional visits to the doctor due to her hypertension problem, she is healthy and active. She is able to take care of the daily needs of the children and even plays with them regularly. Carmela sees this as her role in the family project and takes pride in being able to do it. When she does not receive remittances on time, she uses her own money to take care of the children. She jokes that, perhaps, she is better equipped to take care of the children.

Carmela [Interviewed on September 16, 2017]: “Nowadays these young people don’t know how to take care of children. They are better off when they are with me. I will take care of them better than their parents. I know more about life than they do. Who is better to take care of them?”

Even though Carmela’s child-raising days are over, she is still zealous about raising her grandchildren.

Another grandmother, Georgina (aged 49) [Interviewed on December 11, 2017], has been living in Japan for more than twenty years since she migrated in the late 1990s as an entertainment worker. Once an undocumented migrant, she has been able to regularize her immigration status by marrying a Japanese man. As a result, Georgina is able to visit the Philippines whenever her children and grandchildren need her. In fact, she was there for the birth of her first grandchild and when her son’s wife was sick and could not take care of her baby. In addition, Georgina’s relatively good socioeconomic status affords her the ability to support her adult children if they have financial problems or other emergencies.

These narratives show that grandparents are not just dependent recipients of care; rather, they are resourceful and active participants in 'circuits of care' based on reciprocity and continuous investing in social capital, which becomes useful later in life.

### **5.2.6. Supportive Kin**

Other than young children and elderly parents, members of transnational families often support other family members and kin. As we have seen earlier in Section 3, 'care' can be broadly conceptualised to include 'a range of activities to promote and maintain the personal [and collective] health and welfare of people' (Yeates 2009: 5). These include 'cooking, cleaning, shopping and general maintenance work' as well as 'income-generating activities'. From this perspective, most, if not all, regular activities carried out by family members and extended kin constitute the provision of care.

In my study, most respondents spoke of the care they provided to their immediate family members, primarily husband/wife (romantic partner), children and parents. However, there were narratives of care exchanged with extended kin and even non-kin. By non-kin, I mean those whose relations are not based on consanguinity. Although, Widner (2010) cautioned us to not exclude friends and other close associates from discussions of transnational care exchange because even if they are not blood relations, they still share strong affinities and may be perceived as family.

Eva (aged 32) [Interviewed on October 3, 2016] could be identified as a supportive kin by virtue of the care she provides to her extended family members. After graduating from nursing school, she worked as a nurse in the Philippines before migrating to Japan as a care worker under the Japan Philippine Economic Partnership Agreement (JPEPA). Eva regularly sends remittances to her uncle in the Philippines to help with her cousin's university tuition and her uncle's medical bills. Since she is a medical professional, she is also able to advise her uncle regarding his health.

Miguel (aged 37) [Interviewed on September 9, 2017], while not a migrant, financially supports his sister who is studying in Japan as well as his nephew whose mother migrated to Abu Dhabi two years ago. His nephew sometimes stays with him and his wife in Manila. Miguel also provides financial assistance to an elderly lady in Manila who, he says, helped to raise him when his biological parents migrated in the past. He appreciates the care given to him by this woman and considers her to be as close to him as his own mother. He therefore feels a sense of obligation to help take care of her. In addition to the economic care he provides, he often spends time with her and drives her to the doctor when she has an appointment.

## **6. Conclusion**

In this paper, I have explored the concept of caregiving in Filipino transnational families from a life course perspective. Focusing on different stages of the life cycle, I identified eight types of role

identities among transnational family members. These include: dependent child, resourceful/helpful adolescent child, sacrificial mother, breadwinner father, nurturing father, caring adult child, dependent versus dependable grandparents and supportive kin. While some of these roles confirm to normative constructions, others give a new perspective on the changing dynamics of transnational family life, particularly as it relates to the exchange of care. For instance, contrary to previous studies which focus on only women as caregivers and frame men, children and grandparents as dependent, incapable and resistant to providing certain types of care, this paper highlights the willingness and ability of these actors to perform a wide variety of care. This shows that caregiving in Filipino transnational families is flexible and links various family members in a web of material, emotional and symbolic exchanges. Care work, then, moves out of the realm of 'women's work' to include the contributions of other family members, irrespective of age or gender. This paper showed evidence of men who provide nurturance in addition to financial support. Also, stories of mutual care between grandparents and their grandchildren are shared to give a full picture of how care circulates in Filipino transnational families.

Moreover, the paper revealed that transnational family practices change over time given the family's contextual situation. Particularly, family obligations, needs and abilities to provide care are shaped by the realities of different life stages. Therefore, migration and the exchange of different types of care must be seen not as significant moments in time but rather as dynamic processes taking place across the life course. Against this background, individual family members and the role they play in the family's care network, regardless of age, are brought to the fore and appropriately recognized. Also highlighted are the challenges and constraints encountered in the provision of care.

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