

Care Drain as an Issue of Global Gender Justice

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ABSTRACT. The gendered division of labour in combination with the feminisation of international migration contribute to shortages of care, a phenomenon often called ‘care drain’. I argue that this phenomenon is an issue of global gender justice. I look at two methodological challenges and favourably analyse the suggestions that care drain studies should include the effects of fathers’ and other male caregivers’ migration and, in some cases, the effects of migration within national borders. I also explain why care drain is a problem of distributive justice, by looking at the background conditions that result in much of the caregivers’ migration.

KEYWORDS. Gendered division of labour, care drain, global justice

I. INTRODUCTION

Many issues of global justice that are currently the focus of scholarship on globalisation and global politics are gendered, because many issues of *local* justice are global and, at the same time, local and global issues of justice are often causally connected. For instance, if distribution of access to – and control of – resources within states is gendered, the effects of globalisation on the redistribution of resources between states and, in particular, on poverty, will also have an important gendered aspect. Here I contend that it is the gendered division of labour, an almost universal reality, which is the main source of the gendered nature of some issues of global justice. I illustrate this claim by analysing the drain of care-giving from poorer to richer parts of the world as one of the most deeply gendered challenges of globalisation.

The present contribution aims to show that ‘care drain’, a phenomenon resulting from a combination of the gendered division of labour and world-wide increasing levels of temporary migration, is an issue of global gender justice. Moreover, I will argue that the difficult choices it presses on temporary migrants who are also parents – and, in particular, on mothers – are an extreme form of a classical problem that is usually analysed in the context of domestic politics: namely, that of enabling parents – and, again, mothers in particular – to find a working balance between their family life and paid employment.

I start by clarifying, in the second section, what I understand by the gendered division of labour as well as by ‘care drain’, and I indicate two methodological criticisms that have already been levelled against scholarship on care drain. The worry behind these criticisms is that focussing on the effects of *women’s* migration across national borders will continue to reinforce unfair expectations from women and sexist blame for the problems that result from their migration. In the worst cases, this may lead to questioning women’s right to mobility, including the right to work abroad. While examining these worries, I will explain, in section three, and respectively in section four, why the issue of care drain is indeed both global and deeply gendered. While agreeing that the study of care drain should not be exclusively focused on mobility across international borders, I show why, nevertheless, most situations that qualify as care drain are likely to take place in international, rather than national, contexts. Similarly, I agree that in analysing care drain, scholars should focus on parents’ rather than mothers’ mobility, while at the same time acknowledging that, *unfortunately*, mothers’ and other women’s migration is likely to result in a larger amount of frustrated needs in the countries of origin than men’s migration. Section five explains why care drain is also a matter of justice. First, I discuss the foreground injustice involved in many instances of migration by asking to what extent migration is a voluntary choice. Second, I look at issues of background justice, such as the distribution of resources in migrants’ countries of origin. Putting care drain in a context

of global justice is a necessary step in addressing its undesirable consequences.

This article thus hopes to contribute towards framing care drain as a problem of global gender justice and towards a sound methodological frame for pursuing care drain studies.

II. BACKGROUND

Care giving is understood here as the activity of meeting needs (Tronto 1993), especially essential needs such as those for nutrition, security, clothing, proper socialisation, affection and, in the case of children, guidance. Some of the needs met through care giving are material, others are emotional and, in the case of children, the meeting of needs has an important developmental function. Some care giving can be done from a distance – for instance, by using communication technologies – but since many important needs can only be met in and through physical interaction, care giving requires significant face-to-face interactions. I will come back to this point below. Care giving is particularly important when the individuals whose needs are met are not able to meet their own needs but are dependent on others for having their needs met (Bubeck 1995). The feature that makes care – and its ‘drain’ – a central problem of gender justice is that most of it is still performed by women.

According to many feminist scholars, the gendered division of labour represents one of the most salient issues of gender justice (de Beauvoir 1949; Okin 1989; Phillips 2001; Robeyns 2007; Gheaus 2012).¹ In a nutshell, gender justice demands that societies be organised such that nobody is made worse off due to their sexual characteristics or sexual identity. Thus, gender justice is relevant to the relative treatment of women and men, but also of what are usually referred to as sexual minorities. In this paper, the focus is on matters of social justice for women.² Yielding to widespread social norms, women and men typically perform different kinds of paid and unpaid work. Women tend to do most of the

housework and childrearing; and in many societies there are highly feminised professions, for instance in primary education, nursing and various services. The norms regulating the gendered division of labour are sometimes explicit – as in cases when, for example, job adverts specify sex as a criterion of eligibility – and other times implicit, as in cases when the sex of the individuals is informally allowed to influence hiring and promotion decisions. They are sometimes imposed on individuals – for instance, by educating girls and boys to adopt specific gender roles – and sometimes internalised by them and therefore effective without the need of external interference. I do not argue here for the thesis that the gendered division of labour is, when it results from gendered norms, unjust; instead, I assume it and I look at what happens when workers move across the world in search of temporary work, a phenomenon that scholars are calling ‘care drain’.³

Traditionally, men rather than women used to engage in temporary migration, seeking work in other countries and leaving their families behind (since they intended to eventually return home). More recently, however, temporary migration worldwide has become increasingly feminised (Castles and Miller 2003, 67). Of course, not all the women who migrate on a temporary basis leave behind close family members who depend on their care. But when they do, their migration raises a possible worry that is assumed to be absent in the case of men’s temporary migration. Unlike their male counterparts, the migrant women were likely, before migrating, to be the main providers of hands-on care for those members of their immediate or extended family who needed it: most obviously children, but also ageing parents, chronically ill or disabled relatives. When men migrate, the women in the family remain and usually continue to care for those who need care. Ideally, in the case of women’s migration, men should step in to provide the necessary care. This, however, does not seem to be the case (Isaksen *et al.* 2008, 410; SFR 2007). If men do not take up the caring role, children and other dependent individuals have to make do with less care, or to get it from alternative sources.

Two kinds of problems, however, appear with respect to getting care from other sources. One is principled, and it has to do with the personal relationship between caregivers and care-receivers, a relationship that is often non-fungible. Many forms of care, most conspicuously childcare, involve a strong emotional component that makes it difficult to successfully replace specific caregivers. When people are bound to each other not merely by caring obligations, but by love, *who* gives care matters as much as how well she or he does it. Ageing parents who lose regular contact with their children can and sometimes do suffer beyond the mere loss of essential help with daily chores or with looking after their health. And, in the case of children, continuing a relationship with main caregivers to whom they are already attached plays an important role in their development. Migrants' testimonies show that they also often suffer from having some of their most important relationships severed (Parrenas 2001; Hochschild 2005; Isaksen and Hochschild 2008).⁴

The second problem is practical, and structural within a global context. It is difficult to organise even the kind of hands-on care that has little emotional content for the individuals left behind and that does not raise issues of caregivers' non-fungible character. Many migrants come from countries with weak – and eroding – welfare states⁵; institutions do not have the capacity to respond to the newly created need for care. Families cope with varying degrees of success with the task of unplanned additional caring, and evidence suggests that they are not always in the position to provide adequate continuity in care and guidance to the children left behind (Pantea 2011; Gheaus 2013). Sometimes, migrants employ others to do the hands-on care they used to do – often, other women who are even poorer and may be migrants themselves. Thus, a sort of domino effect of care takes place in some parts of the world.⁶ This means that always, at the end of the 'care chain', there are individuals and communities that face a shortage of care. The paradigmatic example of a global care chain would be this: "An older daughter from a poor family who cares for her siblings while her mother works as a nanny caring for

the children of a migrating nanny who, in turn, cares for the child of a family in a rich country” (Hochschild 2000, 131). This is why the phenomenon is appropriately captured by the expression ‘care drain’.

Accounts of care drain have focussed on migration across national borders, rather than within the different regions of national states, and on women’s, rather than women’s *and* men’s migration (Hochschild 2000; Parrenas 2001). For this reason they have been charged with two methodological failures, a challenge that questions the idea that care drain is, indeed, a matter of *global* and of *gender* justice (Dumitru 2011). The first charge is that their exclusive focus on migration across *national* borders is illegitimate: much intra-national mobility also results in prolonged absence of caregivers, and thus in ‘care drain’. Second, Dumitru asks why the focus should be exclusively on women’s mobility, instead of looking at the mobility of all individuals who have care-giving roles and, in particular, at female *and male* parents? After all, fathers and mothers are supposed – both morally and legally – to share equally the privileges and the responsibilities of parenthood, and thus to be equally accountable for their children’s wellbeing. Is the exclusive attention paid to women migrants not a sign of sexist assumptions concerning women’s role in society, or, at the very least, a way of reinforcing the gendered division of labour? Since I reject the legitimacy of a gendered division of labour, I agree with Dumitru’s worries concerning the study of care drain. Her challenge is important precisely because widespread public opinion continues to represent parenting as (primarily) ‘women’s work’. Indeed, the mass media often discusses the drain of care resulting from women’s migration, and the effects this has on their children, as being entirely the mothers’ responsibility (Piperno 2007; Michel 2010; Lutz and Palenga-Möllnbeck 2012). It is understandable that feminist scholars do not want to ignore the important issue of systematic care deficits; at the same time, paying exclusive attention to *women’s* migration in the study of these issues may entrench sexist expectations.

The next two sections address these methodological concerns, which I think should inform future scholarship on care drain. Nevertheless,

I demonstrate that care drain is likely to always be a global, rather than a domestic, issue, and – as long as the gendered division of labour endures – a deeply gendered one.

III. WHY ‘GLOBAL’: THE RELEVANCE OF BORDERS

A first methodological complaint brought against ‘care drain’ scholarship is that it focuses exclusively on migration across borders (Dumitru 2011). Is migration within the same state not equally likely to result in a loss of care for children and other dependants? In this section I zoom in on those features of migration that make it likely to result in care drain. Some cases of migration within national borders do involve long periods of separation, which make them very similar to the transnational migration discussed by care drain scholars with respect to the loss of care they can entail for family members left behind. And indeed, there are recent studies examining the effects of intra-national migration on the wellbeing of children left behind, for instance, in China (Qin and Albin 2010).

As noted in the previous section, the non-fungible nature of our attachments to people we love makes it difficult to replace caregivers when it comes to some sorts of care – in particular, emotional care. This is most prominently so in the case of children, whose developmental needs may be hurt unless they enjoy some continuity of care with respect to the person providing it. In other words, children not only need to have their physical, mental and emotional needs met, but they need to have primary caregivers⁷ who continuously meet some of these needs. This prompts the question of how much physical contact with primary caregivers is necessary in order to enjoy continuity of care. Gender conservatives have sometimes argued that children need continuous contact with their primary caregivers, i.e. mothers, in order to fare well. This was, and often still is, a popular argument against allowing women into the labour market. But this is implausible: we know that even very young children can do well while being in full-time day-care or kindergarten – indeed,

children can be at least sometimes better off if exposed to some non-parental care (Waldfogel 2006). It is hardly contestable that a few hours of daily quality contact with one's primary caregiver is enough.⁸ And it is plausible that less frequent contact need not frustrate children's developmental needs: perhaps one or two days a week can be enough.⁹ But often children of international migrants see their parents a great deal less frequently. If migration is to a neighbouring country, families may reunite a couple of times a year, mostly for Christmas. By contrast, in the case of inter-continental migration, home visits are much rarer. In some cases, enough years without contact may go by for parents and children to find it difficult to recognise each other (Kittay 2011).

In light of the above, care drain resulting from international migration is more likely to have significant adverse consequences for children than care drain resulting from migration within national borders. While both kinds of migration can result in daily separation between parents and children, international migrants tend to find it much harder to return home frequently and periodically. Not only distance, but also legislation and the availability of cheap travel contribute to this. Parents who migrate within the borders of the same country where their children live may be able to afford to visit their children more often because – other things being equal – they need to travel less, but also because they do not have to worry about legal constraints concerning crossing borders and, in the case of illegal migrants, border controls. Thus, in spite of some examples of countries where the internal mobility of parents does result in care drain with significant negative consequences for children – China, a very large country, is such an example – care drain is likely to remain a global rather than a domestic issue. The cross border dimension is in itself interesting due to legislation, and also because it is typically – although not necessarily – connected to distance. And, while the economic circumstances of parents are relevant – better off parents can afford to travel more than poor ones – there are time and energy constraints on how much long-distance travelling one can do.

IV. WHY ‘GENDERED’? AND WHY SHOULD WE NEVERTHELESS SPEAK ABOUT ‘PARENTS’ RATHER THAN ‘MOTHERS’?

Is it true that women’s temporary migration impacts, to a larger extent than men’s, on the care needs of migrants’ dependants – such as left-behind children, frail elderly or severely disabled? In this section I argue that, due to the gendered division of labour, this is indeed the case. At the same time, scholars of care drain need to be careful to spell out that the gendered division of labour is itself unjust and hence undesirable. This should encourage us to pay more attention to the – very possibly fewer – instances of care drain resulting from the migration of fathers and other men with primary caring responsibilities in their countries of origin. As I argue below, it also represents a good reason for focussing on the effect of parents’, rather than mother’s, migration on the children left behind.

As already mentioned, a second methodological complaint about studies of care drain is that they focus on women’s/mothers’ migration (Dumitru 2011). The ambiguity between women and mothers is important, since, as noted above, care drain affects other dependent individuals as well as children. Most of the hands-on care for these dependants in the country of origin is also ‘women’s work’. Dumitru argues that such a focus inevitably entails sexist assumptions about the social role of women as main caregivers. How, otherwise, should one explain the absence of studies, *within the care drain literature*, on the effects of fathers’ and other male caregivers’ migration? Dumitru’s criticism seems adequate. In the literature about migration in general a great deal of attention is being paid to this issue, and while fathers’ migration is often considered in relation to the social status and security of non-immigrating children, some studies also indicate that children can suffer emotional and developmental losses such as loneliness and lack of guidance from their fathers who migrate (Farooq and Javed 2009). Why then not assume, within the care drain literature, that all parents’ migration – independently of the parents’

sex – is capable of having a similar impact on the emotional and developmental needs of children?

At the same time, care drain studies can hardly ignore that, in reality, it is women who do most of the work of care. That most of the ‘drained’ care is through women’s, rather than men’s, migration, is documented by studies on how migrants’ children are reared. Isaksen and Hochschild noted that, in general, “when husbands migrate [...] wives usually assume the role of father and mother. But when wives migrate, husbands tend to stand aside from child rearing, leaving childrearing to female relatives” (2008, 410). Care drain from Romania, for instance, confirms this: 94% of the children whose father is the only migrant parent continue to live with their mother; but only 58% of the children whose mother is the only migrant parent continue to live with their father (SFR 2007, 8). Moreover, even children who continue to live with their fathers sometimes say that they have to turn to other women – mostly grandmothers and other female relatives – for emotional care (Pantea 2011).

This fact imposes a difficult methodological choice. On the one hand, discussing care drain exclusively, or primarily, in terms of ‘women’s migration’ is unfair to the men who do give hands-on care before migrating, and cannot but send out the message that hands-on care is to be understood as ‘women’s work’ and thus condone the gendered division of labour. This has serious direct consequences for migrant women: as already mentioned, the mass-media in various sending countries often blames the harms of care drain directly on migrant women (Michel 2010). Even if one believes that migrants should not be blamed for the harms of care drain – and I explain below why one should not – it seems doubly unjust to consider only *women’s* role in generating care drain, given that they should, in the first place, be able to share more equally with men the hands-on care for children. Men as well as women can and should assume direct responsibility for the well-being of their children. Indeed, the last decades have brought a cultural shift in men’s attitudes towards more hands-on parenting. While this shift has been more marked in

developed countries, cultural models of involved fathering are having some impact in countries of immigration.¹⁰ To take but one example, parental leave regulations in Romania have been steadily adjusted to make possible and to encourage paternal leave, and some men make use of this opportunity. Why then look exclusively at women's choices in analysing the effects on children? On the other hand, adopting a gender-neutral language in describing care drain, and seeking solutions to the challenges it raises, seems unfair to women because it fails to give them credit for doing the larger share of the difficult and high-responsibility work of caring for dependent others.

This problem is not specific to the study of care drain; it affects all aspects of social life that are informed by a gendered division of labour. In family law, for instance, both acknowledging and failing to acknowledge the different roles that women and men have traditionally played in the family *de facto* as well as *de jure* has costs for women. This is how a legal scholar puts it:

Any legal regime that acknowledges the gendered roles of those bearing family responsibility appears to create a trap which keeps people in their gendered role. And any attempt to undermine the gendered imperatives that operate in family work has the consequence of prejudicing those who actually do that work. Structuring law in this (gender neutral) way has the consequence of fostering social inequalities that are profoundly gendered (Lind 2008, 272).

The question then is whether the analysis of care drain should be about women's, or about parents', migration. Sara Ruddick (1989) has suggested a creative solution to this methodological dilemma: her choice is to call 'mothers' all individuals who assume the hands-on care of children, independent of their sex. Social fathers, therefore, can also be 'mothers' in this sense, and thus receive due recognition for their work, without obliterating the fact that most of the recognition should go to women. But in the study of care drain this solution is not likely to lead far, since the

problem of care drain is not only about giving women due recognition for the work of care, but also about assigning responsibility and, potentially, blame for failed care. If we continue to talk about ‘mothers’, blame will inevitably tend to be directed towards women. It remains a question whether Ruddick’s solution can do much to dislocate the gendered models of the division of labour.

The *empirical* study of care drain is, of course, also affected by the choice of looking at women’s/mothers’ or at all parents’ migration in order to assess the magnitude of care drain. If the focus is on the former, one may underestimate the magnitude of care drain, while if one looks at the latter, one is likely to overestimate it.

On balance, I believe that care drain should be studied by focussing on all parents’, rather than on mothers’, migration. The reason for favouring a focus on parents’ rather than mothers’ migration when studying the effects of care drain is double. First, justice requires that we acknowledge the important contribution of involved fathers to care giving, and therefore the loss of care when they migrate. Second, if we are to resist efficiently the gendered division of labour it is important to make explicit that men can and should provide hands-on care to their children – and continuing to ignore fathers’ contribution to hands-on care-giving is detrimental to this goal. The practical upshot of this choice is to draw attention to the fact that we need more studies about the children (and other dependants) of those migrant men who had, in fact, played a central role in caring before migration.

This methodological choice, however, is not normatively unproblematic. The expressive value of talking about ‘parents’ instead of ‘mothers’ is sufficiently significant to outweigh the risk of failing to give credit to women for doing most of the hands-on care. This risk can be minimised by carefully explaining that so far it was mostly women who found themselves in the difficult situation of deciding which of their dependants’ important needs will be ultimately jeopardised. The suggestion, of course, is not that if researchers find the right terminology necessary to assign

care responsibility to both men and women, then more men will suddenly become responsive to their care obligations. It is merely about finding the best solution among several unsatisfactory ones.

V. WHY DISTRIBUTIVE JUSTICE?

Care drain, I have argued, is a gendered global issue. In which way exactly is it an issue of justice (beyond the gender injustice involved in the gendered division of labour)? In this last section I look at care drain and distributive justice. Care drain can involve both questions of foreground injustice, having to do with the degree of voluntariness of individuals' choice to migrate, and issues of background justice, having to do with the distribution of resources within the migrants' own countries and between their sending country and other countries. I analyse these distinct, but closely related, issues in turn.

Presumably, most care drain is not the result of migration under conditions of coercion, such as migration caused by political persecution or other types of extreme violations of human rights. If care drain is the result of individuals' aspiration to improve their and their families' economic and social circumstances, does it mean that it is a voluntary choice to a sufficient degree to make them the main person responsible for the fate of the dependants left behind? Some authors who look at the case of female migration from Romania to Italy believe that it is (Ottonelli and Torresi forthcoming). They argue that the migrants' decision is often motivated by social and economic aspirations to upward mobility. This assessment, however, must depend on what exactly social and economic aspirations mean in particular cases. If migrants merely wish to 'keep up with the Joneses', then probably their choice to migrate is fully voluntary and hence they should bear full responsibility for its consequences.

If, by contrast, migrants are fleeing poverty, structural unemployment and underemployment, all set in a political climate of hopelessness then, *contra* Ottonelli and Torresi, their choice to migrate is not a fully

voluntary one. One analysis of voluntariness, which distinguishes it from mere lack of coercion, defines as voluntary an action that is *not* performed because there are no acceptable alternatives to it. If the motivation of action is that all alternatives are unacceptable, that action is not voluntary (Olsaretti 2004). Many Romanian, and other, migrants' choice to migrate lacks voluntariness in this sense: their migration is often motivated by the fact that all alternatives are unacceptable. Alternatives include one or several of the following: the economic insecurity of unemployment or precarious employment, the social disempowerment experienced by citizens living in a corrupt state, or a dire lack of appropriate accommodation, which results in many generations being forced to live together although this leads to deteriorating relationships. Being poor in some of the sending countries – such as Romania – is often perceived as a serious hazard, especially when ill or old or having ill or old people in one's family: access to medical care becomes increasingly expensive and may very often require bribery. These predicaments are aggravated by having dependants. Indeed, countless testimonies of migrants who leave behind children explain the decision to migrate through their hope to offer those children acceptable material, educational and health care conditions.

To conclude, inasmuch as immigrants' aspiration to social mobility means a desire to escape poverty, material insecurity and the anxiety that comes with them, and/or the peculiar feeling of vulnerability one has in the context of a failing and corrupt welfare state, then migrants' choice to work abroad is not voluntary although it is not coerced.

Nor is it plausible to say that although the choice to migrate is voluntary, migrants should nevertheless be held fully responsible for the fate of the children they leave behind because they had chosen to have children and that was a voluntary act. *Especially* when the decision to have children was voluntary, it is likely that it was made under conditions of insufficient information about the prospective parents' future ability to secure adequate care for their children.

That people may face situations like the above has to do generally with issues of background injustice.¹¹ These may be obvious, as in cases when widespread corruption is involved in making migration the more acceptable choice. Or the injustice may have to do with the distribution of resources amongst the citizens of the sending countries. At least some of these – such as EU sending countries – arguably have sufficient material resources to eliminate poverty, tackle structural unemployment and under-employment and provide adequate welfare services.

The above are widely acknowledged desiderata of distributive justice. Recently, Daniel Engster (2008) has defended a conception of distributive justice centred on the importance of care in people's lives. One, if not the most, important reason why we engage in economic activities – says Engster – is in order to be able to care for ourselves and those who are near and dear to us. Engster proposes a fundamental principle of social justice according to which societies should ensure basic care for their members. If states fail to live up to this requirement, even when they do not face the challenge of extreme scarcity of resources, the migration that results in care drain is set against a background of injustice (Gheaus 2013).

Finally, the background injustice can be located at the global level instead of, or alongside, domestic injustice. Some sending countries may be too poor to ensure that all their citizens' basic needs are met, even if their resources are, or were to be, fairly distributed. Such cases raise concerns of global justice – especially when richer countries of the world bear responsibility for poverty in sending countries.

The phenomenon of care drain brings to the fore questions of justice in receiving countries. First, a very significant proportion of temporary female migrants are being employed by other women in their destination countries in order to provide household services and care for needy members of the employers' families. Sometimes – although by no means always – the work of migrant women whose own dependants are left behind is necessary if their female employers are to be able to combine having a family and maintaining paid employment. The very fact that such

employers cannot find a work-family balance in the absence of domestic and care services is often a form of gender injustice. Second, sometimes female migrants perform care work in countries that, although relatively rich, do not provide adequate institutional care to their citizens. Women's migration, inasmuch as the latter work in care occupations, saves receiving states social expenditure costs (Williams 2010) and thus relieves them, in part, of their duty to provide care resources to their citizens.

VI. CONCLUSION

In this article, I set out to show how the gendered division of labour in combination with the feminisation of international migration contribute to shortages of care in some communities around the world. Recent scholarship on women's migration refers to this phenomenon as 'care drain'. I have assumed, but not argued, that care drain is an issue of gender justice because it reflects a gendered division of labour; and I have argued that in various contexts it is also a matter of distributive justice – both within sending and receiving states and, possibly in some cases, between poor and rich countries. I have also defended the claims that, regrettably, the effects of migration on those in need of care is a gendered issue, although the migration of some men is likely to contribute to care drain. Similarly, I explained why care drain is mostly a global phenomenon, although migration within the borders of the same state sometimes contributes to it as well. Ideally, future empirical studies of care drain will account both for internal long-distance migration and for the migration of male carers in order to provide a more complete and accurate picture. This will in turn serve to better identify ways of mitigating shortages of care.

In the study of care drain one can see how the classical problem of the work-life balance is brought to a new level in the case of (usually women) migrants who must leave their children behind. Like women in the domestic context, migrants often have to choose between family life

and holding paid employment; if they choose the latter they have to sacrifice, amongst other things, the possibility to give sufficient hands-on care to their children. The choice of migrants, however, is often more radical. Women who pursue family-unfriendly paid employment without relocating themselves may nevertheless continue to see their children on a regular and frequent basis; many migrants must wait months and sometimes years for a reunion. And women who make family life a priority can, at least in the domestic context of developed countries, take part-time jobs with lesser benefits and career prospects than in regular jobs. Prospective migrants who forego the opportunity to migrate may be unable to find any work, if they live in regions hit by structural unemployment.

Chronic shortages of care as well as the possibility to combine paid employment and family life are important issues of justice because they tend to affect some of the most vulnerable people: the children, the frail elderly, the disabled and their main caregivers. Care itself is defined by reference to essential needs, and the meeting of essential needs, especially those of dependent people, is morally important and urgent. Care drain, it has been argued, negatively transforms the very fabric of social relationships of care (Hochschild 2000), unless concerted efforts are being made to mitigate its effects. Like the ‘brain drain’ phenomenon – which has been acknowledged as a major issue of global justice – the drain of care can deepen the vulnerability of those living in countries from the global south.¹²

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NOTES

1. That the gendered division of labour is unjust is certainly a disputed claim. I offer an elaborate argument of why the gendered division of labour is in tension with liberal egalitarian conceptions of justice in Gheaus (2012).

2. The sex/gender distinction, and the concept of 'woman' are themselves contentious issues; here I cannot engage with these debates.

3. The next paragraphs represent an account of care drain that corresponds to the methodological choices for which I argue in the following sections. Accounts of care drain given by its most prominent scholars would also refer, in describing the phenomenon, to the kinds of work that migrants perform in the destination countries, i.e. domestic services and care for children, the elderly or the ill. As I explain here, I agree with Dumitru (2011) that this is a mistake.

4. I discuss this at more length in Gheaus (2013) and other work presently under review for publication. For children's need of continuity in care see Alstott (2004). For how the non-fungible nature of those we love shapes the moral issues raised by care drain see also Kittay (2011).

5. Such as the case of Romania, with which I am most familiar (Piperno 2007).

6. According to Isaksen and Hochschild there are five migratory streams of women who leave behind their dependants: "from Eastern Europe to Western Europe, from Mexico, Central and South America to the United States, from North Africa to Southern Europe, from South Asia to the oil-rich Persian Gulf and from the Philippines to much of the world – Hong Kong, the U.S., Europe, and Israel" (2008, 405). An example of the domino effect within Europe relates to Polish migrants moving to Germany or further West, while Lithuanian migrants do the care work

that used to be done by Polish women before their migration (see, for instance, the recent research project *Landscapes of Care Drain. Care Provision and Care Chains from the Ukraine to Poland and from Poland to Germany* coordinated by Helma Lutz at the Goethe University in Frankfurt).

7. The choice of the expression ‘primary caregiver’ is meant to indicate that the person who in effect parents the child need not be his or her mother, or his or her biological parent. All that children need, on this theoretically modest account, is carer who can provide adequate continuous care.

8. Of course, the exact amount will vary significantly with the children’s age and special needs if any.

9. Otherwise, parents who send their children to boarding schools may be liable for mistreating their children.

10. For evidence that the relationships between fathers and children in Romania – to stick with the main example I use in this paper – have been strengthening during the three decades between 1970 and 2000 see Tomescu-Dubrow (2006).

11. I develop this by taking Romania as a case study in Gheaus (2013).

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