Irregular but tolerated: Unauthorized immigration, elderly care recipients, and invisible welfare

Maurizio Ambrosini

*Department of Social and Political Sciences, University of Milan, Via Conservatorio 7, 20122 Milan, Italy.
Email: maurizio.ambrosini@unimi.it

Abstract

Immigrant female and also male workers are increasingly involved in the supply of care services in the countries of the Global North, and they are especially so in elderly care. In the countries of southern Europe, but to an increasing extent also in countries like Germany and Austria, the care work of immigrants is embedded in a specific care regime. It is undertaken mainly in the recipients’ households, often around the clock, and on a live-in basis, so that it supports a system in which the family remains the central locus of care delivery to frail people. Secondly, it employs a large number of workers irregular in regard to the employment relationship, and often also to their legal status. The paper will present the results of various research studies on the topic carried out in Italy within the time-span of a decade (2002–2012). It will discuss how irregular migration is in fact tolerated, when inserted in care work at the service of the growing needs of native families; how the system that I call “invisible welfare” works; and how immigrant care workers find possibilities of agency, despite the constraints of the legal order and the exploitation they often experience at work.

Keywords: irregular immigration, immigration policies, care regime, care work, elderly, Italy

Immigrant female and also male workers are increasingly involved in the supply of care services in the countries of the Global North (Anderson 2000, 2006), and especially in elderly care (Williams 2012). In the countries of southern Europe, but to an increasing extent also in countries like Germany and Austria (Lutz and Palenga-Möllenbeck 2010; Gendera 2011), the care work of immigrants is embedded in a specific care regime. It is undertaken mainly in the recipients’ households, often around the clock, and on a live-in basis, so that it supports a system in which the family remains the central locus of care.
delivery to frail people. Secondly, it employs a large number of workers who are irregular in regard to the employment relationship, and often also to their legal status (Triandafyllidou 2013). In this article I shall discuss how irregular migration is in fact tolerated when it is connected with care work at the service of the growing needs of native families; how the system that I call ‘invisible welfare’ works; and how immigrant care workers find possibilities of agency, despite the constraints of the legal order and the exploitation they often experience at work. My analysis is based on the results of various research studies on the topic carried out in Italy within the time span of a decade (2002–2012).

1. The sources

The analysis presented in this article develops further a series of studies conducted in northern Italy, in the regions of Lombardy, Liguria, and Trentino-Alto Adige. Some of them will be explicitly cited in the following pages. Here I recall the full list of the studies on which I have based the reflections presented in this article.

(1) An inquiry into the regularization programme of 2002–03, based on structured interviews with migrant workers, carried out in Milan in 2003, and 14 qualitative interviews with employers in families (Ambrosini and Salati 2004).

(2) A qualitative research study conducted in 2004 on the work of immigrant women delivering ‘live-in’ home care to elderly Italians in the areas of Milan and Brescia (Lombardy region). The following people were interviewed: 11 members of staff at centres matching labour supply and demand (mainly NGOs, voluntary associations, services related to trade unions); seventeen foreign workers, aged between 24 and 50, mainly from Eastern Europe and Latin America; five elderly people with carers, fourteen Italian care managers (mainly daughters or sons of elderly people requiring care) (Ambrosini and Cominelli 2005).

(3) A survey on transnational mothers in the province of Trento conducted in 2006–07 and based on 305 interviews with questionnaires administered to women from 33 countries. In-depth interviews were then conducted with 25 of the respondents to the questionnaire (Ambrosini and Boccagni 2007).

(4) A survey of female migration and transnational families conducted in Genoa and the Liguria region in 2009, based on: (a) 300 structured questionnaires administered to immigrant women with minor children who were still in the home country or who had been recently reunited with them; (b) 30 in-depth interviews with Latin American women and men with experiences of transnational family ties (Ambrosini and Abbatecola 2010).

(5) A qualitative research study on immigrant women hired as care workers for elderly persons in families in the province of Trento (2011–12) (Boccagni and Ambrosini 2012). The interviews were accompanied by ethnographic observation in the main informal gathering places for foreign care workers in Trento (churches, associative events, religious celebrations, outdoor markets, etc.).
2. The fragile regulation of immigration in southern Europe

The history of Italian immigration policies in the past 30 years has been one of failure, so much so that it can be stated that the main instrument for management of incoming population flows has been the amnesty. Despite the tightening of controls and the greater severity of sanctions, the past 25 years have seen enactment of seven amnesty laws, as well as other undeclared regularization measures like the ‘flows decrees’ (Colombo 2012). The four amnesties enacted between 1986 and 1998 regularized the positions of 790,000 immigrants; that of 2002, following approval of the Bossi/Fini Law, regularized 630,000. In 2009, the Maroni Law, relative only to the domestic care sector, prompted almost 300,000 applications for regularization. In 2012, amid a profound economic crisis, the Monti government enacted another amnesty, which, although it fell short of expectations, produced around 130,000 applications for regularization.1

Despite claims to the contrary, in Europe as a whole regularization measures of some type have until recently been fairly common and recurrent, sometimes permanent. According to the REGINE report of the Vienna-based International Centre for Migration Policy Development (ICMPD) (2009), during the period 1996–2008, only five out of 27 EU member states did not introduce policies or practices to regularize unauthorized residents. Three of these, however, were new EU member states, little affected by the phenomenon. Over the past decade, three countries in southern Europe (Italy, Spain, and Greece) have engaged in extensive campaigns of regularization. Others, especially in northern Europe, have taken the route of regularization case by case, in particular to handle problems such as that of asylum seekers whose applications have been rejected or foreigners who, for various reasons, cannot be deported. On distinguishing among states more willing to regularize on humanitarian grounds (Benelux and Scandinavian countries), states reluctant to regularize, such as France and the United Kingdom, and ideological opponents to regularizations (Austria2 and Germany), the resulting picture is that of a demarcation line less sharp and insurmountable than has been claimed between legal and unauthorized immigration, and between strong and weak states. As a final outcome, a conservative count of the people involved in some type of amnesty in the EU of 27 member states estimates between five and six million cases in the period 1996–2008 (ICMPD 2009).

In any case, southern Europe is first in the firing line, mainly because of the large size of the black economy in those countries (for Italy: Finotelli and Sciortino 2009; for Spain: Miguélez and Recio 2008; for Greece: Fakiolas 2003). Approximately half of the regularizations recorded by the ICMPD survey (2009) concern these southern Europe countries, which on several occasions have enacted extensive regularization programmes: Italy, with 1.2 million regularized, Spain with one million, and Greece with at least 0.4 million.3 In all three countries, domestic services and care for the elderly at home is the least controlled sector of the labour market, notwithstanding its importance; and the presence of irregular immigrants is widely tolerated because they are perceived as socially useful and perhaps even necessary (Triandafyllidou 2013).

In Italy, the domestic and care sector has, over some decades, become a typical niche for immigrant women. Regular foreign workers registered in the INPS (Istituto Nazionale di
Previdenza Sociale) files (who were often criticized, however, for their shortcomings) were only around six per cent in the 1970s; in 1991 they had grown to 16.5 per cent. In 2010, out of 871,834 workers, 710,938 (81.5 per cent) were of foreign origin (Bonizzoni 2013).

According to a recent ministerial report, the market for domestic services is even larger. The overall number of workers (most often female) hired by families on various types of contract has risen from just over one million in 2001 to the current 1 million 655 thousand (+53%), where the foreign component represents 77.3 per cent of the total. In 2011 almost 2,600,000 families (10.4 per cent of the total) purchased domestic services, child care, or care for elderly or other frail persons (Censis–Fondazione Ismu 2012).

3. Immigration and invisible welfare

Especially in southern Europe, the care regime still revolves around families or, to be more precise, around women, first as wives and mothers and then as the daughters of elderly parents. Increased female participation in paid employment has not been matched by either an adequate growth of public services or a sufficient redistribution of tasks within families. The care of children, the elderly, and sick persons, as well as household services necessary for daily life (shopping, cleaning, preparing meals, washing and ironing clothes) continue to weigh mainly on adult women.

In this care regime, welfare policies are not only comparatively weaker but mainly consist in income transfers: relatively generous pensions (Ferrera 2010), and a cash benefit (attendance allowance) for dependent persons with severe disabilities which is not means tested or conditional on the family structure of the person in need (Bettio et al. 2006; Da Roit 2007). Families, therefore, must undertake the same tasks as in the past, but exacerbated by the ageing process. They have a lesser capacity to perform these tasks but a relatively greater amount of financial resources with which to purchase labour or services privately, and no particular controls on how they use financial aid from public institutions.

Households, consequently, have offset the reduced availability of women’s time and energy by hiring domestic workers. Jacqueline Andall (2000) spoke of a post-feminist revolution: women have not gained equality and are still socially required to take charge of many family and domestic services, but they relieve the weight by resorting to the paid labour of other women, sometimes also men. These workers are more and more often immigrants.

Unlike traditional domestic services, which are mainly associated with upper-middle social class conditions, ageing and the need for assistance involve individuals and families of all social levels. Thanks to pensions, public allowances and economic aid from their children, many elderly people of low economic circumstances also are cared for at home by a care worker.

At the opposite end of the social scale, it is noteworthy that even families that could easily afford to place a relative in a good quality residential facility for seniors, consider it more respectful and loving to keep that relative in his or her own home (see, for Germany, Lutz and Palenga-Möllenbeck 2010), hiring a care worker, or even two if necessary. A culture of home-care practices and distrust of institutionalization have found their way even into the conceptions of good elderly care. But the desire to maintain the elderly in their home
environment and to ensure them constantly available personal assistance requires the imposition of a highly restrictive work and life regime on the workers hired to take care of them.

There has developed—essentially in a spontaneous and informal way—a massive and misunderstood restructuring of elderly home care managed directly by households outside the control of the public sector, but tolerated and subsidized by the public authorities. Alongside the official welfare system, there is another which parallels it and is almost invisible. Today, in southern Europe and other parts of the world, millions of seniors depend for the quality of their daily lives on the work of immigrants, often undocumented or in questionable or uncertain circumstances. On the other hand, many families depend on immigrants to reconcile their care obligations to elderly relatives with their work, family commitments, and a normal social life. A decent life for a large number of seniors and families depends on the labour and harsh circumstances of care workers from poorer countries: mostly women, often mothers, often with irregular legal status, and hired without formal contracts and the attendant rights (van Hooren 2010).

The arduousness of the work, and especially the impossibility of having one’s own home and a private life, generates constant turnover, although it is currently being slowed by the economic crisis. Once they have been regularized, numerous domestic workers seek to leave the sector, but this means that the families look for others to replace them. In short, domestic work is a magnet for new irregular immigration.

Here I wish to emphasize the following point. In this case, unlike traditional domestic work, it is less feasible to redistribute domestic tasks between the genders as an alternative to hiring non-family personnel. If anything, recourse to irregular immigrant labour is the bottom-up reaction to the failure of the public welfare system to provide adequate responses to the increasing demand for elderly care services.

As I have already pointed out, not only in the countries of Mediterranean Europe, but also in central Europe (Austria, Germany) and elsewhere (e.g. Singapore: Huang et al. 2012), various forms of invisible welfare are gaining ground, often supported by transfers of public funds to families in the form of cash-for-care schemes (Ambrosini 2013). In various welfare regimes, not only is there growing dependence on the labour of immigrants and people of immigrant origin as part of a general strategy to reduce social expenditure (Williams 2012), but the domestic and self-managed component of welfare, and especially care for the elderly, is silently increasing.

4. Tolerance beyond the law

Various aspects—the requirement of cohabitation, the request for availability which may extend into the night hours and even around the clock, and living with illness and physical and mental decline—make this particularly arduous work. It prevents a normal social and family life and is socially devalued. For these reasons, it is unattractive to national workers and also to settled immigrants, especially when accompanied by family members.

In our case, the care demands of families in developed societies have met with people on the move looking for outlets for their aspirations to improve their life conditions and prospects. The availability of labour, in its turn, has fuelled the demand. For many families in southern
Europe, especially those with elderly persons and children to care for, it has become almost normal to entrust their loved ones to people from abroad, often recently arrived and without permission to live and work in the host country. The networks of migrants and other intermediary institutions have encouraged the match between the parties.

During the first phase of settlement by irregular immigrants, jobs in domestic work enable them to meet several needs at once: secure accommodation; the chance to save large part of their, albeit modest, wages; and substantial protection against possible, though unlikely, controls by the authorities.

Moreover, the expectation of future regularization measures helps alleviate the burdens of the immigrant’s life and work: as has happened in Spain and Greece, irregularity tends to be considered the first step in a career of settlement and ‘citizenization’ (see Glytsos 2005).

One can say that, with respect to certain irregular immigrants, the social alarm diminishes while acceptance increases. The lack of appropriate documents to stay and work is thus perceived as a minor problem, sometimes even as an advantage. The social construction of the danger of irregular immigrants consequently proves to be selective: very harsh for some, more tolerant for others. In one way or another, the controllers are obliged to take this into account. Social considerations regarding the usefulness and deservingness of immigrants, or conversely their danger or harm to the security or dignity of cities, thus influence control, detention, and deportation practices (Chauvin and García-Mascareñas 2014). Not all unauthorized immigrants are equal, and not all are treated equally.

A paradoxical resource for all irregular immigrants in the Italian context and elsewhere consists of the lack of effectiveness of the repressive apparatus and the connected expectation to access some kind of regularization (Ambrosini 2013: 128). One of the reasons for the continuous flow of undocumented migrants, and the necessity for regularization measures, is the modest results achieved by the interception, detention, and deportation system. The case of Italy is particularly interesting because of the gap between the claims of political representatives and the actual results. The tolerance towards domestic and care workers fits well in this frame: despite fierce declarations, in practice it is very rare that they are arrested, detained, and deported as illegal immigrants. As already mentioned, Italian regularizations have mainly favoured care workers and the domestic sector; the last but one, in 2009, was reserved exclusively to them in explicit and official terms.

5. How invisible welfare works

We are therefore confronted by a twofold phenomenon: a regulatory conflict, and a rewriting of the rules which effectively regulate the elderly care system.

The regulatory conflict concerns the contrast between two socially endorsed demands. In fact, a stark contradiction has been produced between closure to immigration and the expectation that families should continue to assume responsibility for the delivery of essential services to persons, the frail elderly included.

The political will to defend borders and the central importance given to households as providers of personal services have a common origin which we can identify as the desire to preserve the social order. Both instances refer to the vision of a stable, cohesive society able to satisfy its needs for labour and care with its own resources. In times of great turbulence
and uncertainty about the future, the need for stability increases and results in political demands. Governments seek to meet these demands by claiming that they have closed the borders and by calling on families to perform their traditional tasks, possibly subsidizing those that must cope with increased care loads.

The two instances, however, can no longer hold together. This is demonstrated every day by families that resort to the underground market for irregular immigrant labour so that they can continue to provide home care for elderly relatives who depend on them. Confirmation of the centrality of the household as the locus of care and response to fragility contradicts immigration rules; and effective compliance with the restrictive provisions would upset the ‘curoscape’ (Lopez 2012) based on the household. This would require a much greater deployment of public services of various kinds, as well as a change of cultural paradigms regarding the most appropriate sites and ways to meet social needs, especially for elderly care.

The practical solution of the regulatory conflict has come about through a spontaneous process of recodification of the rules on entry, stay, and work by immigrants. Breaches of the rules on immigration and on work contracts tend to be framed culturally as ‘unlawfulness by necessity’ whose main perpetrators are employer families.

I shall discuss these issues by referring to the research studies carried out in the past ten years and already presented in Section 1. I shall quote from interviews with immigrant care workers (cw) and employers, or more precisely, care managers (cm): the person, usually a daughter or a son, who takes care of the elderly relative by hiring a care worker and managing the contract with her (Degiuli 2010). The interviews are taken from the above mentioned studies.

The first stage in my analysis is the identification of various actors involved in the process of hiring, employing informally, and then regularizing immigrant care workers. The first group are the employers: the distinctive and non professional employers represented by households, and in particular the care managers. An example can illustrate the widespread and almost banal nature of irregularity, the habit of employer households to move without too many problems between the legal and informal domestic-care markets, and the coverage provided by an Italian NGO, in this case a religious congregation:

That first one, yes, she was hired regularly, this one, no, because the regularizing process is blocked. So she’s here illegally[. ] . . . Can I say that? I talked to the nuns, and they told me that now it’s not possible, and I asked them how to act if somebody stops us. They told me to answer that C. is under their protection, and when the time comes [to be regularized] they will let me know. Then we’ll put everything in order . . . . It’s important to put them in order, for them but also for us, if they get hurt . . . well, it’s always a risk. But the nun told me so, and I’m pretty calm. But I hope to regularize her soon. (cm 10, daughter-in-law, about 55 years, in Antonioli and Cominelli 2005: 143)

The idea of a deliberate endeavour to keep the worker in illegality so as to prolong a situation of asymmetric power relations and severe exploitation is contradicted by the willingness—as confirmed by the data on regularizations—of numerous families to regularize the employment relationship. It is relationally and psychologically difficult to maintain such a particular relationship based on cohabitation in the restricted space of the home, to entrust loved ones to a person external to the family, to grant her full responsibility and great autonomy in everyday management, and then deny her the legal right to acquire the dignity of regular immigrant status and a formal work contract.
This step is sometimes taken with a certain enthusiasm, with a sense of fulfilling an ethical obligation, or at least relief at resolving a situation perceived as threatening and potentially embarrassing:

We were waiting for the amnesty just like manna from heaven, and as soon as the regularization was announced, we applied for it. (cm 10, in Corrias 2004: 96)

Because I find it absolutely fair! Because they have rights, because there are rights and duties[. . .] they perform their duties, why shouldn’t they have rights? And it also sets my mind at rest, it seems right after all! (cm 12, in Corrias 2004: 96)

In other cases, use of the regularization procedure is less spontaneous and induced by fear of sanctions. It is felt to be an unnecessary burden, almost an injustice, but it still occurs—as in the following testimony:

It’s the law; we must do it[. . .] if we don’t, they can cause you problems because they’re always right. I’ve always paid, I’ve always left her free, and she’s lived in the family . . . but, unfortunately, you don’t know who you are dealing with. Because I have friends who’ve had foreign domestic workers [and] they gave them everything, they had their children come here, helped them, and then one complained, and the unions say that the worker is always right, and so, you understand? But I wanted to be regular in these things anyway. Apart from that, it costs, but what can I do? (cm 13, in Corrias 2004: 96)

Note that in this case, as in many others, regularization is depicted as a concession, a ‘favour’ done by employers for their employees. Indeed, it is common in Italy to saddle workers with the costs of a procedure and bureaucracy which, until recently, was long and difficult, with hours of queuing, even at night, and repeated returns to the designated offices. The practice of declaring the minimum number of hours worked necessary to obtain permission to stay—lower than the actual number, is widespread. Sometimes, the employment relationship is subsequently dissolved, and it returns to the black economy.

Regulation from below acts mainly downwards, in that it seeks to comply with the law to the minimum extent necessary but not always with complete formalization of the employment relationship.

A second group of actors involved in the decision to hire a domestic worker, often with initial reluctance, consists of those that we may term ‘trust intermediaries’. We have already seen in a previous interview how advice was sought from a religious congregation.

The following case is interesting because it evokes the figure of the family doctor as an authority who guarantees the reliability of an ethnic stereotype, but at the same time persuades a hesitant family to accept an immigrant live-in care worker:

The doctor told us: Look, you can’t force her to keep on someone she doesn’t like. And it’s damaging to her health if she doesn’t like a person. If she is so negative towards this person, then change her. I recommend a Peruvian, because Peruvians are particularly suited to the care of the elderly. They have traditions of great reverence and respect for the elderly, so they have a lot of patience. (cm 3, in Corrias 2004: 82–3)

A third group of actors comprises organizations which have redefined their roles, assumed new tasks, and opened offices which mediate between labour demand and supply, help with bureaucratic procedures, and provide consultancy to the parties concerned. A typical case is
that of the trade unions, which are involved in various ways in governance of the market for domestic and care services, starting with regularization procedures, for which they have periodically campaigned together with the main Catholic organizations. At present, more than one million immigrants are members of trade unions in Italy: this is the category of workers with which unionization has achieved its main success in recent years (IDOS–UNAR 2013). Also domestic and care workers often become union members, in order to access union services in regard to information, regularization procedures, renewal of visas, check of payrolls, or grievances with their employers. Their unionization is a delicate and crucial task, but it is often also an awkward one, because the unions must intervene in a largely informal market to mediate between the claims of Italian families (not infrequently the families of pensioners or workers who themselves belong to the unions) and the rights of immigrant workers.7

It’s a union where I go to ask for information, where I fill in the forms required for a residence permit for family reunification. (Gioconda, Ecuadorean, in Abbatecola 2010: 122)

Access is facilitated when co-nationals work for the trade union—a practice which has spread in Italy in recent years, at least in regard to the largest national groups. Here I report a case recorded in Genoa:

We always go to the union, the union is in Piazza Campetto [Genoa], Peruvians work there[,] we’ve always gone to them to ask about things, even reunification. (Raquel, Ecuadorean, in Abbatecola 2010: 122)

The employers, for their part, found in the services provided by NGOs support and advice that they needed for regularization procedures that were often far from straightforward. An interviewee in Milan said:

I went there with my husband [the reference is to the SAI: the Immigrant Welcome Service run by Caritas, Milan], we asked two or three questions, they explained things to us, we checked, because certain things were a bit vague, then maybe I’d say, ‘I’ve found out so and so’, and then we’d draw the conclusions, so in short, let’s say I was satisfied. (cm 10, in Corrias 2004: 97)

A fourth actor can be identified in the charitable organizations which furnish immigrants with the services necessary for them to satisfy various personal needs, in particular those of persons unable to access the network of institutional services: free sopu kitchens, Italian language courses, and health care. They often also become sources of psychological support, as in this case, again referring to Genoa:

I only went out on Sundays. I made friends with people in the Recco area [a little town near Genoa]. They invited me to church. Eventually it became a therapy for me. We cried, me and my friends, we’re all mothers . . . . The Church has helped us very much. There was a South American lady who listened to us, [and] she told us about her own experiences. Then I realized that we had to bring all three of our children here, otherwise I’d return to Peru. (Alicia, Ecuadorean, in Abbatecola 2010: 121)

An important aspect of spontaneous regulation is the transformation of the traditional role of family ‘care giver’ into that of ‘care manager’. This enables numerous adult women
to combine paid employment, care of their family, and looking after elderly parents. The care manager tends to assume responsibility for bureaucratic and economic matters, and for relations with institutions, doctors, and other external figures. S/he supervises and coordinates the work of the family helper, who undertakes the most laborious routine tasks. I report here a case referring to Brescia:

Specific duties are those of the type... you know, bureaucratic... you know, going to the bank, paying bills, getting the documents for her tax returns, things like that... All that part of the home management, the service charges, everything else, that is, day by day and current expenses are her job. My mother now has regular medical examinations, so all these things are my responsibility, all the rest, the normal management of the house is M’s [the care worker]. (cm 22, son, about 45 years, in Antonioli and Cominelli 2005: 138)

However, the delegation rarely becomes complete and definitive: when family helpers have their days off or are on holiday, when necessary it is mainly the care managers who replace them, resuming their role as the direct carers of their elderly parents.

Another component of the care managers’ activity is mediation with the public or private social services on behalf of their employees. The latter are thus able to access specialist medical services, or to receive prompter responses from the bureaucratic apparatus than they could by relying on their own resources. In the bottom-up regulation of domestic assistance, care managers are able to delegate some of their duties, but they take on others by extending the group of persons whose needs they meet to include the family assistant. Another interviewee in Brescia reported the following experience:

She’s also had, poor thing... she suffered from depression and luckily we got her out of it..., but I’ve had bad moments, because I didn’t know what to do, because I know that if I’d sent her to hospital with her disorder, the hospital might have found the right treatment, but most of the time with these problems... and if you’re sent to the psychiatry department and they begin to bombard you with psychiatric drugs... I had my father who was permanently depressed and I’d met a doctor at the Centre for Public Health (CPS)... so I called her and told her: ‘Look, I have this problem here...’ and she told me ‘Bring her to me and we’ll see...’ and thankfully now she has come out of it well, but she had reached a point where she said that she didn’t want to live anymore. (cm 1, son, about 50 years, in Cominelli 2005: 170)

6. Immigrant care workers, co-protagonists of the construction of the invisible welfare

Reconstruction of the bottom-up reorganization of domestic care of the elderly based on the care regimes approach or on other structural arrangements must be integrated in a crucial respect: participation by those directly concerned in destructuring of the formal regulatory order and the formation of new practices and rules. In other words, it is necessary to give salience to the action of the persons directly involved. These are not passive victims (Anderson 2008), forced to move by shortcomings of receiving welfare systems and by the needs of their families; on the contrary, they are actors able to take the initiative, albeit within a system of constraints and inequalities (van Meeteren 2010; McIlwaine 2014).
I shall therefore focus on the resources and social practices deployed by immigrant domestic workers to enter the sector, to cope with living and working conditions which are in many respects onerous, to provide for the needs of their loved ones left behind in the home country, in particular their children, to obtain regularization, and perhaps to achieve complete or partial family reunification (Bonizzoni 2007).

These resources consist partly of external support that can accompany and assist them, as in the case of the services furnished by the charitable organizations mentioned above. They are partly produced through participation in social networks and interpersonal ties (with co-nationals in the host country and the home country, for example). And they are partly of a psychological nature: for example, the expectation of eventually being able to regularize one’s position.

Of salient importance among these resources is a distinctive aspect of care work: a sense of social usefulness, even of pride, which is sometimes explicitly contrasted by care workers to the devaluation of care work culturally prevalent in the receiving society. A recurrent aspect in the interviews with care workers was emphasis on the complexity and sensitivity of care tasks, which often also involve para-nursing services (Tognetti Bordogna 2009), in contrast with the explicit or implicit rhetoric and social devaluation of their occupation.

I cite here some examples drawn from the research carried out in Brescia:

Here, I clean the house, I cook, I take care of the patient. I take care of everything for him: cleaning, feeding, therapy, medication [...] Eyes, face, hands, nasal swabs as well, because he uses internal and external medication. (cw 9, Chilean, 54 years, in Davi 2005: 118–19)

There emerges pride at the skills acquired, at the willingness and ability to learn:

In Naples, I learned how to measure blood pressure, the lady was diabetic, and I checked her blood sugar, I did the injections [and] then I learned how to cut hair with scissors, and I did that as well [...] those who want to can learn to do everything. Those who don’t want to learn, do nothing! (cw 18, Ukrainian, 36 years, in Antonioli and Cominelli 2005: 154)

Another crucial aspect of the practices of immigrant workers consists in sponsorship and networking by relatives and co-nationals. I provide an example taken from the testimony of a care manager:

Some time ago the care worker came here with her niece, who had gone through quite difficult vicissitudes. I told her: ‘She’s young, she’s a minor, don’t make her come to Italy because if such a young girl, a minor, is hired to work, if checks are made, you go to jail. It’s a risk’. Moral [of the story]: the niece came to our house at five o’clock in the morning on a bus full of young girls with a sports visa, so with a permit for seven days [...] Well, how did it end? I said: ‘We’ll put her up while my mama is in hospital’ because, being a minor, she couldn’t stay at a hotel, and we all settled down here for ten days [...] And then E. [the care worker] said that this niece was her responsibility, that we shouldn’t take care of her. Moral of the story, by word of mouth we found a person who needed someone to do a little cleaning, cooking, and then to lend a hand when they needed it in a wholesale fruit shop. (cm 1, son, about 50 years, in Cominelli 2005: 169)
Another key resource concerns what may be called ‘familiarization’: that is, the well-known tendency of many employers to seek to attenuate the asymmetry of status by attributing to the worker, at least in words, the status of an adjunct member of the family, not infrequently developing an emotional attachment to them. The density of the relational dimension and the overlap between labour relations and family relations emerges with particular force in the case of the care of elderly people. In particular, the elderly expect their care workers to relieve them of loneliness and depression, to substitute for children and other relatives who cannot be as close to them as they would like. The point is certainly fraught with ambiguity, for numerous studies warn that this apparent inclusion in the family circle concerns duties much more than rights, and that it may translate into subtler forms of exploitation. Nonetheless, the workers can draw from these semi-familial relations advantages and resources that enable them, for example, to meet pressing demands made upon them by family members in the home country. I cite here an example taken from the most recent research conducted in Trento:

I loved her with all my soul, when she died I cried like I cried for my mother. My Italian mother, because she was tough but she helped me a lot, when my dad died I went to see her, I said, ‘Last night’ . . . I was in tears. ‘E., What happened?’ She understood immediately. I said: ‘Last night my dad died. So?—First, I can’t go to [the] funeral because I don’t have the visa; second, I don’t have money to send home for the funeral . . . he died suddenly’.—‘How much do you need?’ I said, ‘At least 1,000 euros, and I don’t know where to turn because everyone I know is like me, they earn, they send and they have problems’. And she was not feeling well that day. She said: ‘Bring my clothes into the bedroom’. I brought all her clothes [and] I helped her get dressed. She said: ‘Let’s go to the bank’. We went to the bank, she lent me the money. I cannot forget that time[.] . . . Yes, my presence was not in Moldova, but my help arrived and they were able to hold a normal funeral and everything. And then I needed money for my daughter, and she gave me an advance on my wages, she lent me money. I put these things high up, then when she died I cried so much. (E., Moldovan, 55, in Italy for nine years, in Boccagni and Ambrosini 2012: 78–9)

Another resource—although it is rarely recognized by the immigrants themselves—consists in what are called in the literature ‘reverse remittances’, i.e. the flows of help received from the home country (Boccagni 2012). In the case of female domestic workers, this help consists of care given to their children, increasingly often to their parents or other elderly relatives. Another frequent form of help is supervision of investments made to construct a house, or to purchase or manage land for cultivation. Other forms of help requested have to do with bureaucratic procedures and, in certain cases, medical treatment.

But the family network also provides help of an immaterial, psychological kind. A house, a family, and social contacts in the homeland are sources of emotional support: commitment to care at a distance gives sense to the migratory project; it gives the strength to resist loneliness and exploitation. It translates into a base of personal consistency (Boccagni 2012).

There is a last aspect: having a home and a sense of social belonging to the homeland help migrant workers—especially those with children left behind—to maintain a kind of delocalized identity. This identity, in turn, has soothing psychological effects for people who are abroad alone, distant from their loved ones often for years. Care workers work and live in the receiving country, but the focus of their affections and interests remains in the homeland (Ambrosini, Bonizzoni and Caneva 2010). They have a wealth of links and memories
binding them to the past of their family life. At the same time, they may aspire to a future better than the life of hardship that they lead in the host country, and in these aspirations family and home are crucial aspects. This requires them to maintain a second option—the return home—imagining that they can count on the affection, welcome and support of family members who have received help from them. It is for this reason that pictures, typical products or small gifts sent by their families become so important for transnational mothers (Fedyuk 2012). I report another testimony collected in Trento:

At the parking lot . . . our guys come [and] we are so happy, because it is convenient. For example, we send the packages on Sunday, and on Wednesday they arrive at home. This type of . . . bridge, a very rapid connection to make contact with our families. Our children are always curious: ‘What will ma send’, ‘what’s inside?’ . . . what toys, what clothes . . . sometimes something to eat . . . (V., Moldovan, 29 years old, in Italy for four years, in Ambrosini and Boccagni 2007: 96)

This testimony recalls what has been observed by Burton and Gammage (2004) in their study on Salvadoran viajeros and viajeras: As they note, ‘sending and receiving money and goods becomes literally a life-giving flow of hope, regret, loss and inspiration for those women who live with their employers, and their children who live with relatives at home’ (Burton and Gammage 2004: 13).

7. Conclusions: The bottom-up redefinition of the system of elderly care

Numerous studies on irregular immigration emphasize the contradiction between politics and the market. The former, under pressure from hostile public opinion, tends to close borders, while the latter tends to open them, in order to obtain the workers needed in sectors with an inadequate supply of the national labour force (Cornelius et al. 1994; Düvell 2006). In the case of domestic care work, it is necessary instead to specify that it is a divergence of interests that opposes politics and society, or at least politics and families: those same families which in various countries have often voted for parties which propose stricter legislation on unauthorized immigration. The contrast between the political attitudes of voters and the social attitudes of employers tends to be resolved through a cognitive operation that assumes key significance in the disavowal of formal regulation and definition of a new regulatory order: the separation of women employed as domestic caregivers from the broader category of irregular immigrants. Working in the same direction is insistence on the individual case of the known worker, with a name, a face, and a specific place in the household organization, compared with the indistinct and threatening mass of immigrants outside the front door. It is thus possible to legitimize the former while deploring the latter.

A salient dimension of bottom-up regulation therefore consists in redefinition of the conceptual categories employed in the discourse (between immigrants and domestic workers, for example) and the tendency to produce hierarchies and distinctions (typically between deserving and dangerous irregular immigrants) not envisaged by the formal
regulations, but in some ways ultimately influencing them (Chauvin and Garcés-Mascarénas 2012, 2014).

A second conclusion concerns the unexpected consequences of official normative regulation and the regulatory conflict that derives from it. Closing the doors on immigration entails costs. Above all, it prevents employers from hiring the workers that they need. In the case of families, consistently maintaining this prohibition would require furnishing the elderly care services that families need either through public interventions or through formation of a private market delivering services of adequate quality at accessible costs. In the absence of these alternatives, unlawfulness becomes tolerable and even regarded as necessary. The silent strategy of the public institutions of southern Europe has been to assume a flexible and pragmatic attitude by accepting a posteriori as legitimate the spontaneous self-regulation constructed in society. More contradictory is the fact that, thanks to attendance allowances, the public administration subsidizes breach of the rules on immigration. In any case, when the resources to furnish better responses are lacking, it may be wise to recognize as valid the resources produced on the margins of the system.

A third consideration concerns the tradition/modernity dichotomy. It is often asked whether the phenomenon discussed here, and the expansion of domestic work more broadly, marks a retreat by society to pre-modern arrangements (see e.g. Carchedi et al. 2003). The problem exists, but it must be placed in the context of the modernization of families. The desire of an increasing number of women to work outside the home, as well as their emancipation from very burdensome care workloads, entails in contemporary Italy and in various other countries reliance on the work of other women. Families and the adult women within them, confirm their central social importance by supplying care and services to persons, widening their range to include external (subordinate) persons. We may thus speak of ‘asymmetric modernization’: adult Italian women are able to access paid employment and at the same time maintain the roles socially expected of them by devolving the most burdensome tasks to other women (Andall 2000).

This relates to a more theoretical consideration: to resort to Polanyi’s classic distinction, families today find it increasingly difficult to fulfil the social obligations of reciprocity still incumbent on them. If redistribution by the state is of insufficient help to them, they must resort to the market to find the resources that they need to fulfil their obligations of reciprocity, even at the cost of subverting the regulatory order on a highly symbolic issue like control of the borders.

A final consideration shifts the question to the normative level. Invisible welfare arrangements are pragmatic responses, almost emergency ones, to an extremely serious and inadequately addressed problem. It could be improved, even if only through better public supervision of the employment relationship, closer collaboration between formal and informal welfare services, greater socialization (if possible with the home care service being shared among several recipients), inclusion of a third party, as employer, between the elderly care recipient and the domestic worker. Also to be considered is the great question of the transnational dimension of invisible welfare (Piperno and Tognetti Bordogna 2012): i.e. the depletion of the emotional and relational resources of the societies and families of origin (Boccagni 2009) due to the departure of mothers, who come to prop up the precarious equilibria of families of receiving countries (Kräler et al. 2011; Widding Isaksen et al. 2008). What for some (the elderly and families in the host countries) is the benefit
brought by invisible welfare, is for others (the families in the countries of origin) a flow of remittances but also the psychological and social cost of the care drain.

Conflict of interest statement. None declared.

Notes

1. It should also be noted that the two major amnesties of 2002 and 2009 were implemented by the centre-right political proponents of sensationalist campaigns against immigration branded as ‘clandestine’.
2. Austria has more recently introduced an amnesty for immigrants working in domestic services.
3. The Greek data are deficient. Also the figures for Italy are actually higher if we consider that the yearly ‘flows decrees’, which are supposed to bring immigrants legally from abroad to work in the country, in fact serve mainly to regularize the situations of workers already on national territory and informally employed in homes and businesses (Colombo 2012; Author 2013).
4. This is an expression used in Italian political discourse (‘abusivismo di necessità’) to justify behaviours which are formally illegal, but justified in some way in practice by social conditions or economic circumstances: e.g. the occupation of flats or public property by homeless people.
5. I have inserted the biographical details of the interviewees as they are published in the research reports. They are not homogenous because of different choices made in the original research reports.
6. The Italian state, on the occasion of regularization, requires employers to pay a lump sum in compensation for the social security contributions evaded. In the last but one amnesty (September 2009), the amount was 500 euros per worker regularized; in the most recent one (September–October 2012), the amount was doubled: 1,000 euros per worker.
7. For a critical view, see Marchetti 2012.

References


