

**THE PHILIPPINE WOMEN OF CANADA'S LIVE-IN  
CAREGIVER PROGRAM: ETHICAL ISSUES AND  
PERSPECTIVES**

by

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## **ABSTRACT**

The Live-in Caregiver Program (LCP) exists under Canada's immigration policies. Working as live-in caregivers for two years gives individuals the opportunity to apply for permanent residency. The proportion of LCP workers has been overrepresented by Filipinas. By 2000, Filipinas made up 87 percent of all LCP caregivers. Using an ethics lens, this paper explores issues surrounding Filipina caregivers in the LCP. Joan Tronto's (1993) work on '*moral boundaries*' helps examine how existing societal boundaries perpetuate some of the issues negatively affecting Filipina caregivers. Kant's Categorical Imperative and Michael Burawoy's (1990) typology of labour lead discussions around the choice and consent of Filipinas in entering and remaining in the LCP. Young's (2006) '*structural processes*' was employed to direct attention to socially structured injustices experienced by Filipinas. This paper concludes with the moral duties and obligations of the various actors involved and recommends changes to relevant aspects of the LCP.

**Keywords: Filipina; Filipino women; live-in caregiver; ethical issues; live-in caregiver program; Canadian caregivers; domestic labour**

*mo anam cara Aileen, go déo na ndéor mo shíorghrá. Your love and unwavering support has turned dreams and aspirations into possibilities and realities...*

To my daughters Alleia Brianna and Mika Sophia – you girls make our home the best place on earth to live!

To my mom, whose strong will and strength of character continues to inspire me.

To my dad, sister, and brother, whose belief in me lends me strength.

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## INTRODUCTION

The Philippines<sup>†</sup> has become one of Canada's top source countries for immigrants since the turn of the century, trailing only China and India in the rankings. The number of Philippine citizens accepted as permanent residents into Canada has more than doubled compared to a decade ago and according to Citizenship and Immigration Canada (CIC, 2007), Filipinos now account for more than eight percent of all migrants entering the country annually. There are different routes towards acquiring permanent residency under the Canadian government's immigration strategy, and not all Philippine migrants go through the more widely used *points-based* (CIC, 2008) immigration system. Instead, thousands of Filipino women who cannot "claim" enough points under the current system can become permanent residents (i.e. be granted landed immigrant status) by going through the Canadian government's Live-in Caregiver Program (LCP).

I would like to stress at the outset that the factors discussed, while relevant and important, are only some of the most obvious representations of the myriad challenges that these women face. The issues regarding Filipina caregivers and the LCP, separately and combined, are numerous and their consequences far reaching. The goal of this paper is to use an ethics lens to explore the issues surrounding Filipina caregivers working under the Live-in Caregiver Program. Although it is not the intent of this paper to approach this issue using a feminist perspective or to perform a gender-based analysis of the LCP, I will briefly discuss race and gender as applies to Filipina caregivers working under the LCP. A framework drawn from Joan Tronto's (1993) work on "moral

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<sup>†</sup>The noun Philippines and the adjective 'Philippine' relates to the country, while 'Filipino' relates to the nationality of the country's citizens. The word 'Filipina' refers specifically to Filipino women.

boundaries” will help this paper examine how existing societal boundaries perpetuate some of the issues negatively affecting Filipina caregivers working under the LCP. Her work will also serve as a moral framework from which this paper will shape ethical arguments. I will also provide arguments around the ethics of choice regarding the decision of Filipina women to emigrate in general and in choosing to enter the LCP specifically. Burawoy’s (1990) typology of mechanisms on labour will help explore the choice and consent of Filipinas in entering and continuing caregiving work under the LCP. The construct of Young’s (2006) ‘*structural social processes*’ will also be used as an ethical framework to direct attention towards how the LCP contributes to the socially structured injustices experienced by these women. While this paper utilizes Tronto’s work to conceptualize ethical arguments, Young’s model of ‘*social responsibility*’ provides direction towards practical solutions and alternatives. This paper will conclude by discussing the moral duties and obligations of the various actors involved and recommend changes to relevant aspects of the Live-in Caregiver Program.

## **1.1 Canada’s Live-In Caregiver Program (LCP)**

The Live-in Caregiver Program exists under Canada’s immigration program and policies. Canada accepts several “classes” of immigrants which include the “family,” the “investor, entrepreneur, or self-employed,” and the “skilled-worker” class under which the majority of migrant worker applications are filed. The Federal Government controls the flow of immigrants by using a “points-based” system. This system evaluates applicants based on factors such as level of education, language ability, work experience, and age (CIC, 2008a). Once approved and processed, immigrants acquire landed

immigrant status conferring all the rights and privileges accorded Canadian citizens with the main exceptions of voting or holding public office (CIC, 2007).

The Canadian government's Live-in Caregiver Program (1992 to present) had its origins as the Foreign Domestic Movement (FDM) program that started in 1980. Both programs provide individuals willing to live and work in the home of their employers work visas for the purposes of carrying out care-giving work for young children or the elderly. Compared to the FDM, the LCP adopted more restrictive eligibility criteria requiring grade 12 education, the ability to speak, read, and understand English or French, and 12 months of training within the three years prior to application (Bakan & Stasiulis, 1997). By complying with the requirements of the LCP to work as live-in caregivers for two out of (a maximum of) three years, individuals in the program are given the opportunity to apply for landed immigrant status thereafter. Caregivers admitted under the LCP are therefore entering Canada not technically as actual immigrants but rather, as pre-immigrants. Statistics on the number of Filipina caregivers in the FDM/LCP have been difficult to come by. McKay and the Philippine Women Centre (2002) reported that from 1990 to 1994, Filipinas coming from the FMD program made up 42% of the 51,885 newly landed immigrants admitted into Canada from the Philippines. The same study presented that in 1996, 36% of Filipino permanent residents processed in Vancouver came from the LCP.

The LCP has become a special immigration category that provides an alternative pathway for immigration to individuals who would not have otherwise garnered enough points under the other immigrant classes. As reported in one of the interviews from a study on Filipinas working in the LCP, "Filipinos have a very different motivation... they

are coming to immigrate, to get citizenship, to bring in their families” (Pratt, 1999, p.221). True enough, over the years, the proportion of mostly women caregivers entering the LCP has been increasingly overrepresented by Filipinas. By the late 1990s, the Philippines had already become Canada’s *de facto* source for live-in caregivers, contributing 87 percent of workers to the woman-dominated program (Pratt, 1999). While the Philippine government has played a role in creating the impetus and has encouraged the migration of its skilled workforce, the Canadian government has provided a vehicle to respond to the demand for live-in caregivers in the country.

## **1.2 Migration from low and middle income countries**

Migration is a human right under the United Nations’ (UN, 1948) *Universal Declaration of Human Rights*, adopted and proclaimed by the UN assembly 60 years ago. By 2005, three percent of the world’s population had left and were living outside the country of their birth (Global Migration Group, 2008). Although this global movement of people can occur between any two countries, this paper will discuss the migration of people for the purposes of caregiving work from low and middle income countries (LMICs) to more economically-developed countries. In this paper, I focus my attention on the Philippines as an example of an LMIC and Canada as a more economically developed country.

Globalization as defined by Giddens (1990) is an ‘intensification’ of social relations around the world. As a result, events occurring in various localities around the world are shaped by individual or collective actions and decisions that transcend regional and national borders. The socioeconomic implications of this current trend go beyond local and national borders by enhancing interconnectedness and interdependency between

peoples and nations and by steadily breaking down barriers to trade and the movement of goods across the world (Pappas, Hyder & Ahkter, 2003). The importance of ‘the nation state’ has become uncontroversial in the present context of the ‘*global village*.’

Globalization is also a process that not only involves the flow of ideas, material goods, and capital but of people as well (Spitzer and Torres, 2008). People decide to leave their homeland for various reasons that fall along the spectrum of being “forced” to and freely deciding to do so. Utilizing an altered version of Hardin’s (1974) ‘*lifeboat ethics*’ analogy, imagine countries made up of a multitude of lifeboats as varied in size and shape as the resources and abilities of their occupants and all adrift in the ocean. Each country holds its collection of lifeboats together. The most powerful members or groups stay at the centre or in places where the currents are most favourable. Those occupying lifeboats near or at the fringes are the most disadvantaged and most exposed to the “elements.” The worsening status of various LMICs has made people in some lifeboats emigrate and leave the rest. Depending on the political, social, and economic situation in LMICs, coercive forces can occupy a spectrum from direct physical threats to individuals’ safety and well-being, social and civil unrest, political instability, poverty, to poor living standards and the loss of life opportunities. Because of the “push” of these coercive forces, people leave in search of other countries to attach themselves to.

The factors that push and pull people to migrate from one country to another are diverse and complex and are likely rooted within the broader social and structural underpinnings of today’s global society. Included among the many such factors are technological improvements in information and communication that have served to raise awareness among people from LMICs who are disadvantaged by global economic

inequalities. Similar changes in other areas enhancing peoples' interconnectedness have contributed to the increasing pressure on people from LMICs to emigrate. These changes include the speed of travel to and from opposite regions of the world. All these changes have exposed people to varied cultures and have allowed relationships to foster across the world's regions. Following neoclassical economic theory, the migration trend of people from LMICs seeking higher wages will persist if the more economically developed economies continue to work towards a competitive free global market (Scott, 2001).

### **1.2.1 The Philippines – A source country of migrant workers**

Filipinos have been leaving the Philippines for a variety of reasons. These reasons include considerations such as the country's worsening economic situation, ongoing corruption within the country's political system, the promise of higher paying jobs overseas, and for many, a chance to leave the legacy of citizenship (and its attached "privileges") in a more economically developed nation for their children. Migration has become an important tool for the country's men and women to support and create livelihood and education opportunities for their families (Barber, 2004). Globalization and trade liberalization, by heavily influencing the international exchange of goods and capital, has created an international market for human services and labour. International migration, however, occurs within specific frameworks that individual sovereign nation states have adopted and continue to set. I propose that in the context of global forces and trends today, nation states have become *the* key players whose roles include drawing out parameters and creating boundaries that heavily influence or discourage the movement of peoples out of or into their respective borders.

In 1974, the Philippine government instituted a labour export policy as a major strategy. This was adopted as a response to the Structural Adjustment Policies imposed

by the International Monetary Fund as preconditions for economic support. Exporting labour became a way for the Philippines to address the growing unemployment rates but, more importantly, to generate foreign remittances used to pay down foreign debts (Lindio-McGovern, 2004). In the more than 30 years since then, the country has become Asia's largest labour-exporting nation (Lindio-McGovern, 2003). A study by Barber (2004) estimated that by the late 1990s, 3.5 million Philippine citizens were engaged in labour overseas in 140 countries. In 2002, a report released by the country's Department of Labour and Employment provided data showing that nearly three thousand migrant workers, on average, were leaving the country every day (Araneta, 2002). The remittances from these migrant workers have continued to be a major source of foreign exchange for the country. In 2000, Filipinos living overseas remitted more than US\$7 billion to the Philippines representing nine percent of the country's gross national product (Go, 2002). Of this amount, US\$3.3 billion have reportedly come from the United States and Canada (Araneta, 2002).

Filipina workers make up more than half of all Philippine overseas workers. Since the 1990s, separate reports have repeatedly pointed towards a *feminization* in the ratio of women to men overseas workers. From the mid to late 90s, women reportedly already represented as much as 60% of migrant workers (Grande and Kerr, 1998). This proportion further increased to as high as 66% by the turn of the century (Lindio-McGovern, 2004). Most Filipinas working overseas are involved in one service work or another but the huge majority, approximately 95 percent, are engaged in domestic labour and caregiving in over 130 countries (Parrenas, 2001). With the amount of remittances

that these women send back, ‘care’ has become one of the Philippines’ largest exported products (Grande and Kerr, 1998).

### **1.2.2 Canada – A destination country for immigrants**

Immigration plays a huge role in Canada’s population and economic growth. According to Citizenship and Immigration Canada, the country’s federal agency overseeing immigration, “Canada is one of the major immigrant-receiving countries in the world (CIC, 2005).” The Federal Government of Canada has been accepting increasing numbers of immigrants since the 1990s. Between 1991 and 2000, the country admitted close to 2.5 million immigrants representing 8.4% of the country’s total population (CIC, 2007). By 2001, the number of immigrants who arrived after 1985 represented close to half of all immigrants who had ever arrived in Canada (CIC, 2005). Aside from immigrants, the country has also been keen on attracting other individuals to support various sectors of society. History shows that Canada has been importing domestic care workers for the past century. Beginning in the late 1800s up to the periods after the Second World War, Canada had been recruiting British single women who were willing to reside within their employer’s domicile for domestic work including caring for children. The practice later included women from Eastern Europe and the Caribbean who met certain age, health, and educational criteria (Schechter, 1998) and continued up until Canada adopted a *points-based* immigration system in the 1960s. A decade later, the Foreign Domestic Movement (FDM) was born attaching the right to apply for landed immigrant status – when previously there had been no such opportunity – after 24 months in the service of caregiving. In 1992, stricter eligibility criteria resulted in the transformation of the program into the current Live-in Caregiver Program (Bakan & Stasiulis, 1997).

### **1.3 Filipina caregivers: A disadvantaged population**

The Canadian Charter of Rights and Freedoms (Department of Justice, Canada, 1982) gives legal power to the nation's value of equality by stating that: "*Every individual is equal before and under the law... in particular, without discrimination based on race, national or ethnic origin, colour, religion, sex, age or mental or physical disability.*" This does not seem to be the case when it comes to the Canadian Government's Live-in Caregiver Program (CIC, 2008b). In relation to the values stated in the Charter, the country has been failing to meet and enforce the rights of Filipina caregivers working under the LCP. I propose that these women represent an already disadvantaged population at the outset due to various factors that act individually and whose intersectionality imposes an indeterminate burden on their lives. Some of these factors include gender, the stigma attached to Filipina women as domestic helpers, the undervalued nature of caregiving work, and the unfair restrictions and working conditions as a direct or indirect consequence of the LCP and its policies.

The existence of hierarchies of all kinds influences the health of individuals and populations because they (artificially and as a result, unjustly) determine the types, degree, and quality of opportunities in life that people have access to. Racial and gender discrimination have become internalized within cultural practices and traditions, social institutions, policies, and other conditions of everyday living. Race as a concept has been employed historically for political domination, exploitation, and exclusion, enabling dominant groups within societies to exercise control over members of "other" races. This has resulted in the '*racialization*' of groups of individuals, who as a result experience inferior treatment (Raphael, et al. 2006).

The demands of the Canadian labour market dictate the selection criteria for immigration into Canada based on education, training, and work experience. While Filipinas enter the LCP because they cannot claim sufficient points under the regular immigration process, it is not an indication of their poor educational attainment or lack of work experience. Filipina migrants are in fact, 29% more likely to have a university degree than do native-born Canadians (CIC as cited in McKay, 2002, p. 10). Rather, their failure to claim sufficient points can be attributed to Canadian Government labour market trends and analyses. For example, during periods of heavy infrastructure and housing development, preference is given to workers skilled in construction-related trades. At the height of the information technology boom, people educated in computer programming, web development, and other related areas could claim additional points under the immigration points system. Labour under the LCP is not commonly regarded as real work or skilled labour. Therefore, the general Canadian population tends to view Filipinas entering the program as ‘unskilled’ and/or ‘uneducated’ (McKay, 2002). Filipino women are also marginalized whenever comparisons are made between them and European women entering the LCP. Canadian society segregates these two groups of women based on cultural and social identity forming processes. Recruitment agents and agencies refer to European women as “nannies” or *au pair* while Filipinas are housekeepers or domestic help. In a study by Pratt (1999) “from registered nurse to registered nanny,” results from nanny/agent interviews showed a misrepresentation on the part of agents on the educational attainment of Filipina domestic workers. Agents utilized a gradient in distinguishing between Filipinas who are “just housekeepers” – even though the work should only involve caregiving – against “British girls that are

NNEB (Nursery Nurse Examination Board)” despite the fact that those same Filipinas held university degrees. Colonialism and racism continue to play a role in modern social processes and the definition and hierarchy among caregivers have not been an exception.

Gender is also an ideological social construct that establishes roles and relations between sexes within the context of traditions, behaviours, and society in general. This relational concept and, as a result, the organization of societies based on these concepts affect the way men and women “acquire” opportunities, have access to resources, and receive benefits in society. Although biological differences exist between men and women, when it comes to gendered roles, an imbalance should not exist. An inequity has been consistently documented favouring one gender over another, leading to biased effects among various outcomes (Raphael, et al. 2006). In the context of migration, familial expectations, structural biases, and labour market constraints have led to significant differences in how women experience the push and pull factors of working overseas when compared to male migrant workers (Tastsoglou and Dobrowolsky, 2006). Canada’s national policies influencing and controlling the flow of its immigrants and the stereotyping of Filipina migrants continues to have a significant impact on the labour market experiences and social identities of Filipina caregivers working under the LCP.

## **THE LIVE-IN CAREGIVER PROGRAM: ISSUES AND ETHICAL PERSPECTIVES**

The intersectionalities among race, gender, and various other social ‘classes’ point to an underlying commonality in the dynamics of power that lays the background for how they are dictated and experienced in society. This section will utilize ethical perspectives to explore the issues the Filipina caregivers of the Live-in Caregiver Program.

### **2.1 Joan Tronto’s (1993) ‘*Moral Boundaries*’**

Care is a universal aspect of life and living. Regardless of societal and cultural differences that influence the types and degrees of care, all human beings require care. In ‘*Moral Boundaries*,’ Joan Tronto proposes two aspects to care. First, care “implies a reaching out to something other than the self” and second, care “will lead to some type of action” (Tronto, 1993, p. 102). In other words, care can only be authentic if an individual assumes the burden of whatever action is required in support of providing care to another. It is unarguable therefore that care is a diverse concept. Tronto herself proposes that care encompasses up to four phases: caring about, taking care of, caregiving, and care-receiving. This paper focuses on the caregiving phase or “the direct meeting of needs for care” (Tronto, 1993, p. 107) which involves direct personal contact between a care-giver and the object of care.

In our present society, caregiving work has been undervalued and those performing it have been taken for granted. In the case of Filipina live-in caregivers, some of the challenges that they face under the LCP had already been determined by pre-existing moral boundaries drawn around the issues of women and their assigned roles in

caregiving. Caregiving has been stereotypically glossed over as women's work, occurring within the confines of the home and existing as part of the informal economy. In part due to the ostensible presentation of motherhood and childbirth, caregiving work has been delegated to women who society insists are "naturally" inclined to do it. The longstanding practice in societal expectation is for women to perform unpaid work within the privacy of the home. Women bear the burden of taking charge of household work including upkeep, childcare, and care for the elderly. Although women have become and continue to be more empowered today, the ideology that care is incumbent within the sphere of women's work remains rooted in societal structure. At the same time, the construction of caregiving as being "natural" to women has resulted in its dismissal from being "real" work. This ideological approach not only undervalues and trivializes the work of providing care but, more importantly, of the (mostly female) workers engaged in the work as well.

Tronto emphasizes the need to recognize that certain boundaries exist, limiting relevant discourse regarding an ethics of care (and of women). These boundaries keep the issues and concerns of the relatively powerless in society out of mainstream societal concerns and at the periphery of moral and political discourse. Tronto refers to them as:

1. The boundary between morality and politics
2. The boundary between public and private life
3. The moral point of view boundary

I will employ these three boundaries as a framework for discussing some of the major issues surrounding Filipina caregivers in Canada. Although the first two boundaries are supportive of my arguments and discussions, I will argue for a balance between Tronto's position for an ethics of care and a more objective moral point of view.

### **2.1.1 The boundary between morality and politics**

The first boundary Tronto proposes is the one that exists between *morality and politics*. For purposes of consistency, I will use Tronto's definition of the terms "morality" and "politics" as defined in her work. Tronto adopted a definition of morality as "considerations of what one thinks it important to do and in what ways; how to conduct one's relations with other people; and being aware and prepared to be critical of one's basic approvals or disapprovals" (Tronto, 1993, p. 6). She defined politics as "the realm in which resources are allocated, public order is maintained, and disputes about how these activities should occur are resolved" (Tronto, 1993, p. 6). Because the two ideas seem to address different areas of how we live and interact, contemporary political thinkers approach that divide by emphasizing one over the other. They either adopt a "morality first" view, advocating that political life conform to "right" moral principles; or a "politics first" view, asserting that moral values are subordinate to the central concerns of politics (e.g. power, resources, territory). Keeping in mind the existence of social structures as previously discussed, I propose that the Federal Government of Canada is guided by a "politics first" view when it comes to the issue of caregivers working under the LCP.

Globalization as informed by the politics of neo-liberal policies has encouraged increasing privatization in the public sector and a shift towards reduced social spending (Appadurai, 1991). In Canada, this reduced public spending has affected various health and social areas, in particular homecare and day-care. The burden of care has fallen more commonly on women whose tasks have traditionally included care-related work (Armstrong & Kits, 2004). In addition, macroeconomic factors and women's empowerment have resulted in Canada's changing labour workforce. The country's

labour market witnessed a rise in the workforce participation of women. The steady growth in the annual proportion of women entering the workforce reached a peak of around 80% in the late 1980s and has since hovered around those levels (Human Resources Development Canada, 1999). One result of this has been the rise in Canada of the demand for caregiving labour. Women from LMICs, in particular, have increasingly filled live-in caregiving work. These women are willing to provide labour at a relatively cheaper cost in exchange for the promise of permanent residency. In Canada, the Live-in Caregiver program focuses on meeting the requirements of Canadian households needing assistance in the care of children, the disabled, or the elderly (CIC as cited in Spitzer & Torres, 2008). This type of labour however, has resulted in unequal power structures and “relations within households structured by social class, ‘race’/ethnicity, as well as gender inequalities” (Yeates, 2005, p. 232).

Numerous reports have documented a multitude of problems surrounding contract violations and the low employment standards that caregivers under the LCP have been experiencing. These include problems such as unpaid salaries, unpaid and unlimited overtime, lack or absence of sick leaves, substandard living arrangements, work outside of what is stipulated in their contracts, and termination without justifiable cause (Alcuitas, Alcuitas-Imperial, et al., 1997; Grandea & Kerr, 1998; Diocson, Sayo, et al., 2001). The responsibility for ensuring the rights and freedoms for caregivers under the LCP is also a political inter-jurisdictional issue. While their status under the LCP as a special pre-immigration entry pathway falls under federal purview, provincial legislation dictates labour legislation. The Canadian Government has in fact encouraged that employer-employee disputes should be resolved in private and has refused the

responsibility for arbitrating caregivers' grievances regarding unfair labour practices (CIC as cited in Spitzer & Torres, 2008). For this reason, caregivers restricted to working in the confines of their employer's domicile lack a clear venue for obtaining real or even minimally adequate legal protection (Langevin and Bellaeau, 2000). To complicate the issue, employment regulations vary by province. In British Columbia for example, prior to 1995, provincial regulations governing overtime pay and hours of work did not apply to live-in domestic workers (Pratt, 1999). It is as if the potential for immigration implicitly legitimates the dismissive approach of failing to address adequately gaps in the jurisdictional responsibility over LCP workers. Ultimately, I can only surmise that the LCP has become a political tool that is tantamount to providing foreign domestic labour at low cost to Canadian households.

### **2.1.2 The boundary between public and private life**

The second boundary separates *public and private life*. Drawing on the ideas of feminist scholars, Tronto argues that in much of the West – where a deliberate line exists between public and private life – most women's work is ensconced within the private realm. Women's perspectives therefore are more easily contained within the private sphere rather than an equal or even dominant voice in public discourse. By imposing a live-in requirement for caregivers, I would argue that the LCP effectually hides relevant issues from the public's view – preventing advocacy or political action – making negative experiences on the part of caregivers seem more happenstance and isolated than they are.

The lives of Filipina live-in caregivers have been hidden from the public's eye and have gone relatively unnoticed by the authorities responsible for enforcing employment legislation (Langevin & Belleau, 2000). It has become too easy to disregard the rights of live-in caregivers because they conduct work behind doors closed to public

scrutiny. Among live-in caregivers themselves, the lack of knowledge or awareness of laws that protect them, the absence of formal inclusion in an organization that will advocate for them, and low social capital to advocate for themselves can all contribute to the lack of public awareness on the issues affecting them. Beyond the public-private divide, most people generally do not consider the home to be a place of work and therefore the lines between contractual demands and obligations between employer-employee are unclear. Despite pre-agreed-upon contractual obligations, there might still be a lack of clarity in the number of work hours, sick-leaves, employee benefits, or even around job descriptions that may not be subject to regulatory labour-standard evaluations. In contrast to live-out caregivers who have greater latitude in setting the terms and conditions of their work, live-in caregivers experience more dissatisfaction and stress (Young & Dickerson, 1994). With regard to the LCP, there appears to be an unwritten position among agents and employers that live-in caregivers will willingly endure short-term hardship in exchange for obtaining landed immigrant status (Pratt, 1999). As a result, among all types of employment, Filipina migrant workers regard live-in domestic work as one of the least desirable (Parrenas, 2001).

The issue of work *per se* including unfavourable demands and restrictions is not the only major point of concern for Filipina caregivers under the LCP. Another pressing and equally major concern involves the 'live-in' component of the program. In the same study by Parrenas (2001), remarks from Filipina live-in caregiver interviews had them likening the lack of privacy, restricted movements, and isolation to the feeling of imprisonment. This lack of control over their living conditions and working environment spills over into other more personal areas of their lives including a lack of freedom in

choices such as food preferences (Spitzer & Torres, 2008). A study by Spitzer (2005) found that Filipinas leaving the LCP were more likely to rate their health as poor compared to women entering the program (Spitzer, 2005). In addition, the live-in requirement exposes Filipina women to various forms of violence including verbal, psychological, and sexual abuse (Oxman-Martinez, Hanley & Cheung, 2004). For some of these women, the negative effects of these abuses on their overall well-being will linger after they leave the program.

### **2.1.3 The “moral point of view” boundary**

The third boundary Tronto proposed is the *moral point of view boundary*.

According to Tronto, acceding to the philosophical view that moral judgements should arise from a distant and disinterested point of view creates a boundary against an ethics of care. Our moral judgements arise out of our shared understandings as moral actors, of what we expect moral theory to be. She proceeds to argue that this type of morality arising out of reason and objectivity places it beyond the world of emotions and feelings. In effect, “any account of morality that draws upon emotion, daily life, and political circumstance, will necessarily seem corrupted” and therefore “concerns raised by women’s morality” become secondary (Tronto, 1993, p. 9-10).

According to Tronto’s argument, because care giving in society resides within the sphere of women’s work, its place and relevancy in political discourse has invariably become increasingly overburdened. At the same time, I would argue that dismissing an objective moral point of view would also disadvantage Filipina caregivers. Political advocacy and arguments employing a strictly objective point of view that deals with evidence-based facts show Filipina caregivers in a much more positive light. As I had previously presented, despite their higher than average educational status, Filipina

overseas workers have borne the stigma of ‘*domestic helper*’ or ‘*housekeeper*.’ In fact, the experiences of newly arrived immigrant Filipina women in Canada are influenced by the predominance of those arriving and working under the Live-in Caregiver program. In a study for the B.C. Philippine Women’s Centre, McKay (2002) documented the Filipina experience of being stereotyped as caregivers. The same study cited a report by Hiebert (1997) showing that Filipinas were 8.6 and 6.9 times more likely than women in general the Canadian population to be classified as “housekeepers” or “childcare workers” respectively. As a result, stereotyping in this regard has shaped the identities and experiences of all Filipinas in Canada (Faralles, 1998). The overrepresentation of Filipina women in the LCP combined with the societal labelling of Filipina workers has (unintentionally) served to *racialize* the definition of live-in caregiver working under the Live-in Caregiver Program.

Stereotyping Filipinas into the role of domestic help has undeniably created a pervasive cycle based on structurally determined hierarchies, as they exist in Canadian society. The other end of this cycle is that Canadian households now actively seek out Filipina women specifically for the purpose of domestic work. According to Tronto, caregiving work by its very nature is associated with emotion, is necessarily a part of daily life, and therefore argues for an ethics of care based on “emotion and daily life.” She proposed that the boundary created by an ethics of objectivity excludes a discourse on care and that reason-based arguments limit the discourse on a morality of care. The advantage of Tronto’s perspective and one that can be disregarded by a more objective point of view, is that it gives moral value to the activity of caring. On the other hand, when moral actors elevate reason over emotion, their objectivity disallows the gender-

and race-based stigmatization and discrimination levied against Filipina caregivers. To adopt a moral theory based purely on women's ethics as defined by Tronto would be no more effective than to adopt a strictly objective moral viewpoint. She makes the point herself that moral arguments exist within a political context. In this instance, working inclusively with these two opposing moral positions will more effectively break the cycle that Filipina caregivers are caught up in. Discussions around Iris Young's '*structural processes*' in a proceeding section provides this alternative middle ground.

## **2.2 Individuals' autonomy**

Nations are not the only actors when it comes to migration. It would be incorrect and an injustice against Filipina migrant workers to disregard their role as actors who engage in conscious and rational thought. Recognizing this, the question remains why – despite the reported low wages, stigmatization, exclusion, and real possibility for abuse and victimization – Filipino women continue to subject themselves to the inherent challenges attached to the LCP. I propose that Filipinas are actors whose limited options diminish their capacity to make reasonable choices.

One option open to Filipina women towards immigration is to enter through one of Canada's immigrant categories, the most applicable being the "skilled worker" class. This is difficult for many reasons from which I will highlight two. Firstly, most Filipina women might not have the "skills in demand" based on Canadian labour market analyses. This potentially excludes them from acquiring enough "points" to pass. Secondly, processing times for permanent resident applications in the Philippines take longer than 60 months on average (CIC, 2009). During this period, individuals are at the mercy of the local Canadian consulate that, from time to time, requires them to obtain and present

various requirements in the form of additional or updated documents. This means time away from work and/or family, travelling back to their town or province of origin, processing and documentary expenses, dealing with corruption in and the inefficiencies of the various Philippine agencies, and other challenges. After all the fees and numerous years spent waiting, these women still face the possibility of having their application rejected for one reason or another. If the alternative avenues to immigrate are through programs like the LCP then I would argue that their choices for Filipinas are restricted.

### **2.2.1 Choice**

Individuals from LMICs commonly face highly restrictive choices around their decision to emigrate. The most apt instance in terms of restrictive choices might be of international refugees faced with persecution in their home countries. Immigration can become a wrong when the choice to do so arises out of desperation for people who otherwise lack a safe and peaceful place to live. Migration should not be an individual's only viable option for peace, safety, security, and a meaningful existence. The choice then for a large number of refugees is essentially minimized to either leaving their country or dying in their country. As I will show in proceeding sections, Filipina migrant workers while they certainly are not refugees in the fullest sense, face issues that can result in dire consequences for themselves or their families. For a significant number of individuals from LMICs, poverty can be such a real threat that when given an opportunity to migrate and work for a better future, individuals' refusal to do so allows for a continuous existence of poverty for them and for future generations.

In his work on "Immigration and the Ethics of Choice" Sullivan (1996) argues for the lack of choice some immigrants face due to widespread poverty. I do not mean to imply that all of the Filipino women entering the LCP are suffering from poverty. In fact,

I would expect that to have grade 12 education or better also means that their families somehow found the means to support them. The important aspect to highlight here is that these migrant workers represent Filipinos who have the “need to escape societies in which there is no longer a reasonable expectation of securing the necessities of life, an education, or a job” (Sullivan, 1996, p. 97). Beyond arguments for or against the just division of the world’s nation states or the distribution of the world’s resources, certain aspects of people’s lives – including peace, safety, and reaching potential goals and aspirations – are basic human expectations that should never be predetermined. To reiterate an earlier point on the intersectionality that occurs among various socially determined factors, I would like to point out that gender, race, and now social status, class, and wealth heavily influence people’s lives. Because of how these factors come together, people can become more vulnerable to coercion, domination, or deprivation (Young, 2006). When people are made vulnerable in this manner, they are forced to choose a course of action that arises out of need and necessity. If they were truly free actors, these women would have chosen a different life course. I previously mentioned that Filipina migrant workers view live-in caregiving as the least desirable form of labour (Parrenas, 2001). I therefore propose that theirs is a form of modern slavery. By “modern slavery” I do not mean that they have become the owned property of other individuals. Theirs is a form of slavery because their services have been “sold” by their own country and are taken advantage of by other countries through the type of work offered and the imposed conditions under which such work is rendered.

The Philippine economy reaps significant profits in terms of foreign remittances. As a result, domestic migrant workers have become resource goods for the country to

exchange. On the other end, the Canadian government's answer to the burden of care borne by Canadian households was to create the Live-in Caregiver Program. Ultimately, Filipina and other foreign caregivers have filled in work that Canadian citizens have themselves shunned. The international and domestic policies of the Philippines and Canada as related to migration, have inevitably served to influence the lived experience of Filipina women under the LCP (Stewart, Neufeld, et al. 2006). The exportation of domestic work on the part of the Philippines may have its roots in historically determined socioeconomic and political considerations made more complex by its interrelationships with individuals' choices and circumstances. However, it has essentially resulted in the commodification (Lindio-McGovern, 2004) of Filipinas in their work as caregivers. An argument in support of the Philippine government's strategy is that the country actually exports service rather than people. I would argue that such a viewpoint misses the mark and fails to do justice to the humanness of these female migrant workers as beings with feelings, emotions, goals, and aspirations that are equivalent to those of other persons. Work *per se* is not in contention and is something good in itself because it allows individuals to affirm themselves as productive members of society. For most people, labour also allows them to achieve goals and aspirations and accords them with a measure of self-respect and dignity. This is not necessarily the case for Filipina caregivers. I posit that a moral wrong occurs resulting from two factors. First, migrant labour is wrong when human beings have little choice but to work in occupations that not only reduce their dignity but that also occur under exploitative conditions. Secondly, caregiving for Filipina migrant workers becomes a moral wrong when in the course of

providing that labour, other actors reap significant profits with little benefit to or even to the detriment of the worker herself.

### **2.2.2 Consent**

According to Kant's *Categorical Imperative* (Harrison, 1957), human beings should never be treated as mere means to another's end. Although the LCP provides them with the possibility of reaching their "goal" of immigration, Filipina women serve the ends of other actors in the course of arriving at that goal. Genuine consent is a key provision of Kant's proposition and I argue that it is diminished in this instance. There are two aspects to the lack of consent as relevant to the case of Filipina caregivers. The first involves consent in general as applies to their choice to enter the LCP. As I previously argued, the choice of Filipina women to work overseas as caregivers and domestic helpers is one that has been imposed on them. I have also argued that these women are not truly free actors when the only real choice they have left is between poverty and obtaining real life opportunities (for themselves and their families). The second aspect requires a distinction between the choice of Filipina women to enter the LCP and their consent to the various injustices they experience under the program. Even if it were to be argued that Filipina women enter the LCP knowing that the duties and responsibilities required by the program necessitate some measure of self-sacrifice, they certainly did and do not consent to the various injustices reported in the literature.

One problem with the LCP is in the way that women sign themselves into the program. As previously mentioned, the LCP (and its predecessors) has been and continues to be the only caregiver program in the world tied to a country's immigration program. I would actually make an allegorical comparison between the LCP and a form of contest, the promise of landed immigrant status being the major prize. The minor

prizes come in the form of relatively higher salaries or living in a developed country, but it is winning the major prize that entices women to choose Canada over other countries. As with all contests, there are rules and it is important to point out that in almost all of these, the onus is on the individual to “read the fine print.” In this instance, there are issues with the fine print that I would argue, are not what rational actors would consider as reasonable, ordinary, or expected. The major components of the program in terms of the required length of service, the live-in requirement, and the need for employer sponsorship are straightforward enough. Although these requirements are clear in themselves, there are numerous other unmentioned issues at play from unfair labour practices, working conditions, and various forms of abuse to the more intangible issues of segregation, loss of dignity, and social isolation. I would therefore argue that the presence of an element of harm (including its high probability based on reported instances) requires that individuals are carefully and completely informed in that regard.

I propose that diminished consent on the part of Filipina women is akin to the lack of informed consent when choosing to become subjects in an experiment. Research subjects have special protections because of presumed inherent vulnerabilities. Throughout this paper, I have and will continue to discuss issues affecting Filipina women such as gender, race, their country’s “third world” status, stigma, discrimination, historical and political processes, and the type and the nature of work they are entering. These arguments show that similar to research subjects, Filipina caregivers are a vulnerable population as well. I would think that because of the educational/language requirements of the LCP, all the Filipina women entering the program will be able to

understand any properly administered form of informed consent. It therefore is wrong when conditions that can be harmful to individuals are relegated to “the fine print.”

The Council for International Organizations of Medical Sciences (CIOMS, 1991, p. 3) laid out three elements to guide epidemiological studies in ensuring informed consent. Let us test to see how the LCP would hold up if we were to apply it against those same elements. *Respect of persons* pertains to the “right of individuals and groups to be informed and to have a say... with particular safeguards for persons with impaired autonomy.” From my previous arguments on choice and autonomy, it seems clear that the LCP fails in this regard. The second element is *beneficence* or “the requirement that the benefits outweigh costs.” I acknowledge that there is a lot of room for argument here in either direction. In a large number of cases, arguments may point out that the long-term benefits potentially outweigh the short-term costs. To break this impasse, we should include this element’s additional consideration of “do no harm.” By applying this provision, I would argue that the LCP fails again by allowing various (reported) forms and degrees of harm to befall these women. The last element is *justice* and involves “the obligation to protect the weak and to ensure equity in rights and benefits.” I previously presented arguments showing why Filipina caregivers are a disadvantaged population and therefore represent the “weaker” segment of Canadian society. An inequity actually persists as long as these women lack the equal rights and benefits accorded the rest of the Canadian working population. Based on the LCP’s failure as a program when applied against these three elements, it is unarguable that no justifications can exist for allowing the injustices suffered by Filipina caregivers to continue.

### 2.2.3 Coercion and consent: The “lesser of two evils”

Michael Burawoy is a prominent American sociologist who conducted ethnographic studies on labour processes and organizations. In his article “Coercion and Consent in Contested Exchange,” Burawoy (1990) explored the forces behind individuals’ drive to perform labour. The conditions in the Philippines might encourage migration but failing to consider the role of the Filipina actor disregards the range and nature of individual motives. Elements of Burawoy’s work give some insight into my question of why Filipino women enter and continue working under the LCP despite all the reported injustices. He proposed two general dimensions within which labour effort can vary. It is important to point out that these dimensions do not operate apart from one another. On the contrary, they likely result in a mixture of considerations and conditions that leads to individual action.

The first dimension involves *cognitive mechanisms* that explain behavioural compliance. These can be either *strategic rationality* or *non-strategic* mechanisms. In *strategic rationality*, individuals perform a cost/benefit analysis of the consequences of alternative courses of action. For Filipinas, they must weigh choosing migrant domestic work against the absence of a guarantee that their children and/or families will have a better (brighter) future. This absence of surety is unarguably true of all individuals around the world regardless of wealth, social class, or social status. The difference in the case of Filipina and other LMIC would-be migrant workers is the surety that not choosing certain courses of action made available to them will eventually result in the full effects of poverty on themselves and their families. Compared to working as domestic helpers in countries such as Saudi Arabia, Taiwan, or Singapore, Filipina caregivers can better tolerate the conditions of the LCP (personal communication with Filipina caregivers,

2009). From the perspective of economically better-off people, two or three years of servitude under the conditions of the LCP are intolerable. This might be because people in better “life-situations” have the better and wider array of choices in their lives. From the perspective of the Filipina women of the LCP, their (or their families’) situation in the Philippines and/or the working conditions in other countries represents the “greater evil.” However else they come to view the LCP, while in the Philippines, the LCP still represents a good opportunity for them to improve theirs and their families’ lives.

*Non-strategic* mechanisms that lead to the performance of labour do not stem from a rational consideration of the costs and benefits. Individuals engage themselves because they feel “they ought to exert effort, (and) that it is the moral thing to do” (Burawoy, 1990, p. 252). This mechanism legitimates the effort for individuals on a personal level. For Filipina caregivers, a multitude of factors contributes to this mechanism. Filipino culture is highly centred on the notion of family. In fact, it is customary even for extended family members to offer assistance financially or otherwise. Duties arising out of kinship are central ideologies in Filipino culture and society. Migrant workers send money (i.e., remittances) and gifts from abroad to the Philippines to support family members. In a study by Oxman-Martinez, Hanley, and Cheung (2004), 83% of Filipina live-in caregivers interviewed reported supporting family members in the Philippines. In another study, 87% of Filipina caregivers indicated “the need to earn money for family responsibilities” as their main motivation in entering the LCP (Mikita, 1994). The LCP provides a relatively easy alternative to earn higher wages and so, the onus has fallen on Filipina women to improve the quality of life “back home.”

Burawoy calls the second general dimension the '*immediate relational basis*' under which he cites the problems of (1) *domination* and (2) *asymmetrical reciprocity*. With *domination*, the presence of various kinds of threats "forces" the worker to continue performing her work. In the case of Filipina caregivers working under the LCP, the largest threats they fear are problems with immigration and their temporary status. As I previously pointed out, Filipinas have been using the LCP as a back door towards immigration. The possibility of obtaining landed immigrant status in the future is a powerful force driving Filipinas to complete the LCP's required 24 months of service. In the same way, any problems with their immigration status discourage Filipino women from being too vocal about their opposition or from defending their rights as workers. In an ongoing case involving Ruby Dhalla, a Liberal MP from Brampton-Springdale, two Filipino women working under the LCP allege that the MP's family mistreated them while under their employ. According to the two women, the greatest fear they had in testifying before a Commons Committee was that their testimony would result in their deportation (Delacourt, 2009).

Filipina caregivers in the LCP chose to enter the program and entered into a contract with their employer. In a best-case scenario, they leave the program with as much of a positive experience as possible based on a mutually consented upon and adhered to contractual arrangement. Although there is consent in the performance of labour in this instance, *asymmetrical reciprocity* recognizes that the power dynamics of the employer-employee relationship will always remain unequal. As Burawoy points out, "consent is always surrounded by the armour of coercion" (Burawoy, 1990, p. 253). The main point of this mechanism is that coercion does not need to be directly applied

routinely to generate labour. Filipino women's fears are largely attached to their temporary work status under the LCP. Employers can play on this fear and are known to threaten Filipina caregivers with calls to immigration or with threats of deportation whenever or if they ask for better working conditions (Oxman-Martinez, Hanley & Cheung, 2004). These mechanisms give us a small glimpse of why Filipino women continue to toil under the LCP. Studies and reports on how Filipinas fare after leaving the LCP are largely unavailable. I can only surmise that for these Filipino women, the benefits of relatively better working conditions, higher wages, the ability to support families in the Philippines, the time-limited nature of the LCP, the promise of permanent residency, and being able to bring their immediate family to Canada as landed immigrants far outweigh all the other "costs" they are faced with.

### **2.3 Iris Young (2006) – Structural processes**

The actions of the different actors involved in the LCP occur within national and global structural frameworks as influenced and dictated by historical and current social, economic, and political processes. Iris Young (2006) proposed that people suffer harm as a consequence of the structural social injustices that exist in today's societies. Structures "constitute the historical givens in relation to which individuals act" while social structures are the "multidimensional space of differentiated social positions among which a population is distributed" (Young, 2006, p.112). These differences in social positions can be due to gender, racial, ethnic, or other factors that result in exclusion or discrimination. This does not only result in unequal opportunities but also means that the limitations for some individuals often occur in conjunction with greater benefits for others. I would argue that due to the previously mentioned social, political, and

economic ‘facts’ surrounding Filipina caregivers, these women have become caught up within the structural injustices of caregiving and its commodification in the context of globalization.

Social structure is not a state of societal existence *per se* but is rather a process, and one that exists only through action as society allows or has gotten used to. Young emphasizes that – based on more than just individual intentional actions – the concept of social structure relies on the outcome of multiple actors acting individually and in concert. It therefore becomes difficult to trace cause-and-effect due to the myriad of mediating actions and events. Young makes a good argument for a ‘*social connection model*’ of responsibility that is not based on determining liability but instead recognizes that we all “contribute... to the production and reproduction of social injustice” by following the “rules of communities and institutions in which we act” (Young, 2006, p. 120). Without going against her argument, I think that it is important to take into consideration that despite the fact that all actors in a given situation bear some measure of responsibility for it, the way that society is structured allows some actors to wield greater power than others. A balance should therefore exist between the rights and responsibilities of people and the government. The Canadian government created the LCP as part of its responsibilities presumably as a response to meeting its citizens’ needs. Filipina women working as caregivers made a choice to assume the responsibilities and obligations as determined by the LCP. I will not argue against the fact that Canada is only one of many countries where caregiving work is available. At the same time, Filipina women have assumed duties and responsibilities to Canadian society by virtue of having entered the LCP. By screening and accepting these women, the Canadian

government develops its own duties and obligations towards them. Filipina caregivers working under the LCP are therefore entitled to have comparable rights and freedoms as the rest of Canadian society.

The lived experiences of Filipina caregivers occur within the national borders of Canada. The policies and regulations of the LCP influence these Filipino women's lives. In Young's argument on social structural processes, "all agents who contribute by their actions to the structural processes that produce injustice have responsibilities to work to remedy these injustices (Young, 2006, p. 103)." As it applies to this case, there is no need to argue about the boundaries of social justice and its extension/non-extension beyond national borders. I am neither arguing against the injustices borne by Filipina caregivers beyond Canada's national borders nor that the *Canadian Charter of Rights and Freedoms* should be applied to migrant workers all over the world. These Filipina women have been legally accepted into the country's borders. By accepting Filipina women into the LCP, a program carried out by one of its federal agencies, the Canadian government should rightly become responsible for ensuring and protecting the totality of these women's rights. The Canadian government not only wields the necessary power but it is also in the best position to act towards abolishing the injustices that Filipina caregivers are experiencing. Filipina caregivers have given up their families, their homes, and certain aspects of their freedom in assuming certain duties and responsibilities towards Canadian society. It is only just that the Canadian government assumes the duty and responsibility of ensuring that these women enjoy the same rights as the rest of Canadian society.

## **MORAL DUTIES & OBLIGATIONS**

All of the actors contributing to the scenario of Filipina caregivers working under the LCP share a certain measure of responsibility. The Philippines has a duty to protect the rights and dignity of her citizens and to work towards long-term solutions to improve Filipino lives and livelihoods nationally. At the other end, Canada should ensure that migrant workers' have rights to safeguard their well-being while within the country's borders. Whether or not Canada actively seeks out these women workers or merely "processes their application" should not detract from the fact that Filipina workers suffer various injustices as a result of the LCP. While it would be easy to criticize both governments for the roles that they have played in exploiting Filipina caregivers, it is difficult to do the same from a purely ethical point of view. The ethical justification behind labour immigration policies can occupy various points along a spectrum depending on the values of government. If we were to follow Nozick's (as reviewed by Nagel, 1975) version of libertarianism, policies would be created strongly based on their consequences on individuals' rights that supersede the collective interests of society. The other end of the debate would have immigration policy strictly based on classic utilitarian principles, the ultimate goal being in the service of the greatest amount of good among society's members (in a lecture to HSCI-891 in September 2008 by Prof. J. Snyder). This is where I will leave this discussion hanging because to analyze further will require arguments on who a country's citizens are. Filipina caregivers working under the LCP are technically migrant workers. Discussing who should be considered as citizens and therefore who immigration policies should benefit is beyond the scope of this paper. My recommendations therefore originate from my own internal version of utilitarianism

being that the greatest amount of good should be vested in the best interests of human well-being.

I have argued against treating migrant workers as resources that are goods in international trade. The most effective approach would be to address the structural problems at the head of the process. Despite the value of such an exercise, I will avoid proposing ideological recommendations that rely on the actions of global actors and their complicated roles within the global context. As for the Philippines, I recognize that the country – through its labour policies and because of global forces influencing its economy and its citizens – plays a crucial role in the emigration of her Filipina citizens. However, the country’s labour policies are dictated by political and economic factors that are increasingly influenced by external (i.e., global) forces. Focusing on Philippine policies might address some of the structural problems affecting Filipina caregivers but will likely require that I delve into arguments against neo-liberal trade policies, debt restructuring, and the fundamentals of global politico-economic world order. Ultimately, what is of paramount importance to this paper is that the rights of Filipina caregivers be protected and that the injustices against them are addressed. I would therefore like to focus my recommendations on aspects of the Live-In Caregiver program that I believe, if reformed, will have the greatest potential to impact the aforementioned outcomes. I would like to emphasize at the outset that these recommendations are not based on a determination of blame. Rather, “the point is... to enjoin those who participate by their actions in the process of collective action towards change” (Young, 1996, p.122).

According to Young’s *social connection model*, all of us as individuals are accountable for the structural injustices that occur through actions that contribute to

processes that result in unjust outcomes. I would extend my interpretation of this and contend that it is not only our actions but our inactions as well that contribute and allow for those unjust outcomes. Among the general Canadian population therefore, even if families do not take advantage of the LCP or allow themselves to discriminate/stigmatize Filipina caregivers, they still have a moral obligation to advocate against the injustices of the LCP. Two arguments against this point are that (a) not everyone is fully informed or is knowledgeable about this issue, and (b) there are other larger – in terms of scope and number of people affected – issues that involve “real” Canadian citizens. Although these arguments do not necessarily discharge Canadians from their moral duties, in this instance I will give in that these points are valid mainly because they are based on realities. However, a substantial representation of the general Canadian population is made up of current and past Filipino citizens. At least in this specific instance, sharing the same nationality should foster ties that carry a greater sense of obligation among fellow countrymen. I would therefore argue that the duty to advocate and speak out on behalf of Filipina caregivers rests on the shoulders of all Filipinos in Canada. As a Filipino, I would like to think that I am discharging my own moral duties to Filipina caregivers, in small measure, by adding my voice to their plight. Filipinos should educate and inform the Canadian public and whenever possible, highlight the injustices experienced by their fellow countrymen.

I previously discussed how the effects of globalization and neoliberal policies have shaped the macroeconomic forces within nation states. These global forces in conjunction with structural social processes influence the lives of individuals and “get under their skin,” so to speak. In fact, from a purely moral standpoint of what *ought* to

be, the capitalist foundation of today's global political and economic system undermines the concepts of fairness and justice. Filipina caregivers are rational and capable actors in their own right. The existence of such powerful forces acting against their best interests does not necessarily mean that Filipina caregivers are powerless; nor should they just resign themselves to the injustices of the system. Being the subjects of maltreatment and abuses should not preclude Filipina caregivers from mobilizing themselves against the various injustices they experience. Previously "successful" Filipina women of the LCP who currently live comfortable lives in Canada can lead the way. In fact, they should bear an equal if not greater moral obligation to take up the cudgels towards voicing injustices and reforming the program. It is exactly because they used to be pawns in the process – and therefore had been subject to the same injustices and potential abuses – that they should be part of Young's "collective action towards change."

Community based organizations can carry out various activities or play significant roles. Some of their activities can involve advocating for and protecting workers' rights, providing information and avenues for fighting against employer's disregard of those rights, providing legal advice and support, and helping newcomers into the LCP integrate into Canadian society. Filipina-led groups, especially those who went through the LCP, would be more effective because they share the same cultural ties and because they understand the challenges better. Live-in caregiving work oftentimes occurs in isolation. Support groups can organize events and can represent a social network that Filipina live-in caregivers can access. Ultimately, the role of such groups should foster empowerment by encouraging Filipinas to take control of their lives and be responsible for themselves.

## **RECOMMENDATIONS**

### **4.1 Should the Live-In Caregiver Program be retained?**

The LCP is one of the avenues available to Filipina and other women from LMICs to immigrate to Canada. The fact that it is the only caregiver program in the world tied to immigration cuts both ways. From one perspective, Filipina women have successfully been using it as a backdoor toward immigration. On the other hand, the promise of immigration serves to draw Filipina women into the program. As a result, they legally enter into a form of indentured labour for a maximum of three years during which time they can be subject to various forms of abuse. From a rights-based point of view, the LCP has the vestiges of neo-colonialism. Despite this view and a sense of duty to my compatriots as a Filipino, I would argue for the continued existence of the program. According to a number of Filipina caregivers (personal communication, 2009), their experiences of work conditions in Canada are relatively better than similar labour in other countries. Once permanent residents, they are able to bring their families into Canada to enjoy a relatively better life. During time in the LCP, they are also able to send remittances back home to support their families. It is also important to point out that no other developed country among the top destinations of choice for Filipina women, including the United States and the United Kingdom, offers the advantage of acquiring permanent residency. My proposal to retain the program does not imply my approval of its policies or the way it is carried out. To best protect and ensure that Filipina caregivers' rights are protected, changes to the LCP are warranted. In the proceeding section, my limited discussion on labour legislation limits my ability to make specific

recommendations. Instead, I will propose two major changes to the overall structure of the LCP where obvious gaps exist. These recommended changes have repeatedly surfaced in advisory committee or organizational reports and so I will refrain from expounding on them beyond the scope of this paper.

## **4.2 Reforming the Live-in Caregiver Program**

In my discussion on choice and consent, I made reference to the requirement for informed consent in experimental studies. One way of properly informing Filipina caregiver applicants about the negative aspects of the program is to remove recruitment agencies from the whole process. Rather than contributing to the minimization or outright prevention of unjust structural processes, allowing these agencies to thrive adds to the exploitation and commodification of Filipina women. Without having to argue about the manners in which these agencies profit from and exploit Filipina women, theirs is a delegated responsibility that should ideally be borne by official representatives of the Canadian government. In the same way that researchers administer consent forms themselves or through members of their research team, Canadian Government agencies should directly take charge of any arrangements made regarding the LCP. Although this is far from addressing the issue of choice – which requires grander conceptual and ideological propositions – this does move towards improving the element of consent. Recruitment agencies are able to paint the picture that they want and are free to make promises or misrepresent themselves. This robs applicants of their right to make an informed choice. Being prepared with their “eyes wide open” will allow Filipina workers entering the LCP to validate their decision and strengthen their convictions. Although the real life situation of some or even most of these Filipina women might lead them into

making the same choices, according them the respect and dignity they deserve affirms their humanity.

I previously mentioned the need to determine who a country's citizens are. Granting permanent residency to Filipina caregivers at the outset will tear down the *boundary between morality and politics*. This recommendation is not revolutionary in itself as the Canadian government during the 1950s gave landed immigrant status (with some attached conditions) upon arrival to individuals from the Caribbean arriving to work as caregivers (Arat-Koc, 1997). Conferring such status bridges the gap that exists in terms of the rights that are due citizens as opposed to temporary members of society (i.e., migrant workers). In an official manner, this change recognizes the important role that caregivers play in society and therefore, the act of caregiving indirectly as well. Admittedly, this does not remove the possibility for discrimination or stigmatization. What revising the "status" of Filipina caregivers in society can do is to make it easier for them or other organizations to advocate for their privileges and rights. Politically, it becomes justifiably easier to enact protective policies or ensure that regulations are enforced. The inter-jurisdictional issue between the federal government and provinces will no longer be an issue and these women will no longer face the threat of deportation. Women will also have more freedom in choosing and/or changing employers depending on individual circumstances and preferences. They will be able to keep their skills current or update their education and other credentials as currently, the work permit that they have prohibits them from pursuing any form of education. This can lead to a better outlook in terms of employment opportunities once they are ready to leave live-in caregiving work. In effect, coming in as live-in caregivers does not necessarily relegate

Filipina women to a lifetime of domestic labour. Instead, the LCP can become a program that will support and allow them to pursue other dreams and aspirations.

The possibility for immediate changes along the lines of this recommendation may not be realistic. In the meantime, smaller incremental steps can lead towards a policy revision that will achieve similar outcomes. One step can involve reducing the length of time required for these women to serve as caregivers before they are allowed to apply for permanent residency. Instead of the current 24 months, this could be cut down to half that time. This proposed reduction in length of time is reasonable as past length of service requirements as a condition for permanent residency application for caregivers was set at 12 months. Another additional step can be in the form of granting caregivers an “open” work permit. Currently, work permits issued restrict caregivers to one employer (i.e., the employer is specifically named) and changing employers requires additional fees and paperwork. Removing this restriction will give caregivers the freedom to choose their employers especially if they are abused or taken advantage of.

Young’s (1996) *social connection model* places the responsibility for correcting injustice on those participating in the process through their actions (or inaction, as I had proposed). Although all actors contribute to the process in one way or another, I posit that individuals in some instances, even as moral actors, are constrained by external forces from acting towards the moral good. For these “instances,” there are enabling factors that can motivate people towards just action. In this instance, reforming the LCP by conferring Filipina caregivers with equal rights as the rest of the Canadian population can dissuade unjust actions against them. Granting permanent residency at the outset is a message from the Canadian government that they are serious about protecting these

women's rights. I would construe Young's model to imply that we, as individual and collective actors in Canada, are all participants in this particular process. Among all participants, some actors have more power and are therefore more capable of having a real impact. In this instance, the Canadian government wields the largest amount of influence on the regulations of the LCP. Moving towards the recommended or similar courses of action will clearly indicate that they are performing their part in dismantling this particular structural injustice.

## **BACK TO THE BEGINNING: A RECAPITULATION**

In this paper, I laid the groundwork for migration in the context of trade and globalization – including political, social, and economic aspects as they relate to the Philippines and Canada of today – in the face of historical and current national and international trends and policies. Beginning from a general global overview of migration, I moved on to the national level. I explored the situation in the Philippines as a major source country of Filipina caregivers and touched on relevant aspects of Canada’s immigration history the country of destination. As the country hosting a live-in caregiver program, Canada is unique in that workers under the program have the opportunity to attain permanent residency (landed immigrant status) after meeting certain conditions. I then provided a discussion about issues of gender and culture, as they loom large in the context of how the issue of Filipina caregivers – as Philippine emigrants and as Canadian pre-immigrants – has unfolded. I utilized Tronto’s work on *‘moral boundaries’* to guide my discussion exploring why injustices against Filipinas in the Live-In Caregiver Program tend to persist. Although the governments of the Philippines and Canada have significantly contributed to the diaspora of Filipina domestic workers, I alluded to Filipina workers as actors capable of rational and conscious choice. Borrowing from Burawoy’s typology of mechanisms on labour, I evaluated the choice and consent of Filipinas in entering the LCP. Utilizing Young’s work on *‘social structural processes,’* I argued that the confluence of structural processes on the lives of women in the Philippines results in a more limited array of options. In the final sections, I discussed the various actors’ moral duties and obligations and concluded by proposing recommendations towards revising some of the LCP’s policies.

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