

**CARING FOR THOSE WHO CARE:
AN ANALYSIS OF LIVE-IN CAREGIVERS' EXPERIENCES AND WORKING
CONDITIONS IN METRO VANCOUVER**

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Tracy Kalaw
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Approval

Name: Tracy Kalaw

Degree: Master of Public Policy

Title of Project: *Caring for Those Who Care: An Analysis of Live-in Caregivers' Experiences and Working Conditions in Metro Vancouver*

Supervisory Committee:

Chair: Dr. Nancy Olewiler
Director, Public Policy Program SFU

Dr. Dominique Gross
Senior Supervisor
Public Policy Program

Dr. John Kesselman
Supervisor
Professor, Public Policy Program SFU

Date Approved: March 11, 2010

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Abstract

This study examines the deficiencies of Canada's Live-in Caregiver program. It researches factors that contribute to the vulnerability of caregivers to employment standards violations and suggests policies to reduce the risk of violations to caregivers. Using data from a survey administered in the fall of 2009, a regression analysis is conducted to determine significant factors that influence the likelihood caregivers will experience employment standards violations. The data analysis shows that caregivers' level of English-speaking ability, their experience working in Southeast Asian or Middle Eastern countries, employers' compliance with Employment Standards and Citizenship and with Immigration Canada regulations are the significant determinants of contract violations. As a result, the proposed policy options focus on monitoring employers, increasing caregivers' awareness of employment rights and responsibilities as well as enhancing their organization involvement. The study concludes by recommending that caregivers attend mandatory orientation sessions within 90 days of their arrival.

Keywords: Live-in Caregiver Program; temporary foreign worker; domestic; domestic worker; employment standards; caregivers: British Columbia; Canada

Executive Summary

This study examines Canadian immigration policy governing the temporary foreign worker special category of Live-in Caregiver Program (LCP). It assesses the LCP's many shortcomings that increase the risk of abuse to caregivers. My approach is to examine the factors that influence the vulnerability of caregivers to employment standards violations. Based on this analysis, I formulate, evaluate, and rank several alternative policy remedies.

In British Columbia, caregivers are covered by labour legislation in the Employment Standards Act (ESA), which is enforced by the employment standards branch (ESB) of the Ministry of Labour. The main purpose of the ESA is to ensure that all workers are protected by minimum working standards. Despite the inclusion of caregivers in the ESA, the literature on the LCP has identified caregiver vulnerability to employment standards violations as a result of the live-in care clause, temporary status of workers and minimum training requirements. Employment standards violations contribute to poor working conditions and to the de-skilling of caregivers who were once teachers, social workers, midwives, and nurses. One academic has further stated that the program has pushed many caregivers from being “registered nurses to registered nannies.”

The empirical analysis in this study is based on a survey that I administered in the fall of 2009 to current and former caregivers in Metro Vancouver. The survey data is used in a regression analysis to identify significant factors that influence caregiver vulnerability to employment contract violations. The following variables are found to influence caregivers' experiencing of contract violations: Ability to speak English; employers' compliance with CIC regulations; employers' compliance with ESA regulations; third country work experience.

Based on these results I formulate policy options for the provincial government. The long-term objective of these policies is to ensure that employers treat caregivers equally and fairly based on employment standards legislation. The policies focus on the provincial government because employment standards fall under provincial jurisdiction. The four policy options are: 1) Mandatory employer information sessions, 2) Caregiver orientation sessions, 3) Employer monitoring and 4) Non-governmental organization (NGO) mediation. The first option is designed to increase employers' compliance and awareness of responsibilities while the second option is designed to increase caregiver confidence and awareness of their employment rights. The employer monitoring option aims at increasing employers' compliance with CIC and employment standards regulations. Finally, the NGO mediation option is designed to increase caregiver confidence and employer compliance with regulations through negotiations.

Cost, legal feasibility, effectiveness, key stakeholder acceptability, and horizontal equity are the criteria used to assess each policy option. The evaluation recommends that caregiver information sessions be instituted. Information sessions will provide caregivers' with consistent information on their employment rights and contribute to increasing their English speaking ability and confidence levels through practice, networking with other caregivers and access to resources. This policy is most desirable because it is effective in reaching a majority of new caregivers, involves caregiver organizations in the design and facilitation of the sessions, and is moderate in cost to the provincial government.

To Mike

*For supporting and encouraging me to achieve all of my
hopes and dreams and aspirations.*

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Glossary

CIC	Citizenship and Immigration Canada
CDWCR	Committee for Domestic Workers and Caregiver Rights
CPP	Canadian Pension Plan
EI	Employment Insurance
ESB	Employment Standards Branch
ESA	Employment Standards Act
ESR	Employment Standards Regulations
HRSDC	Human Resources and Skills Development Canada
IRPA	Immigration and Refugee Protection Act
LCP	Live-in Caregiver Program
LMO	Labour Market Opinion
MHH	Multicultural Helping House Organization
NOCS	National Occupation Classification System
TEAP	Temporary Employment Authorization Program
TFW	Temporary Foreign Worker
WCDWA	West Coast Domestic Workers Association

1: Introduction

This study assesses Canadian immigration policy governing the Live-in Caregiver Program (LCP). The purpose of this research is to examine the LCP's shortcomings that can lead to employment standards violations. This research suggests alternative policies that the B.C. provincial government can consider to reduce the risk of employment standards violations.

Due to a shortage of Canadians or permanent residents willing to perform live-in care work, the government developed a temporary foreign worker program specifically targeting live-in caregivers. The Live-in Caregiver Program (LCP) came into effect in 1992, under the temporary foreign workers (TFW) program. The program provides Canada with temporary migrant workers known as caregivers, to fill an employment area where a substantial labour gap exists. Caregivers are individuals qualified to care for children, elderly persons or persons with disabilities in private homes without supervision (CIC, 2009a).

Like other workers, caregivers in British Columbia are protected through labour legislation, specifically the B.C. Employment Standards Act (ESA) that is enforced by the Employment Standards Branch (ESB). The Employment Standards Regulation (ESR) outlines detailed policies regarding employment standards. The ESA's main purpose is to ensure that all workers are governed by minimum work standards.

The LCP allows caregivers to enter Canada as TFWs and to apply for permanent residency as economic migrants upon completion of 24 months of live-in employment, within a three-year period. Access to permanent residency is an important motivational factor for caregivers because it provides the prospect of a better life for their families. Permanent residency allows caregivers to sponsor their dependants' migration to Canada. Moreover, the LCP also

appeals greatly to foreign migrants, a majority of whom are from the Philippines (CIC, 2006), because it allows them to send remittances to their families and provides them with affordable housing during their transition to Canada. These benefits do not come without significant challenges as literature identifies three major flaws that affect caregivers working conditions.

First, the live-in requirement leaves caregivers accessible to being on call 24 hours a day and working overtime to which they did not consent. Secondly, the temporary status of caregivers creates a weak and fearful workforce, as caregivers continually worry about job loss and deportation. This uncertainty coupled with their desire to gain permanent residency, makes caregivers weary of reporting any kind of abuse to authorities.

Lastly, the minimum education and training requirements create challenges for applicants from developing countries. This is so because in developing countries, Western education is restricted to the rich and is particularly difficult for women to access. To meet the LCP program requirements many caregivers seek employment in other countries such as Singapore, Malaysia, China or Saudi Arabia. Most of these countries have no formal employment protection for domestic workers often resulting in high rates of abuse. As a result, caregivers see working conditions in Canada as improved and are reluctant to report contract violations. Despite being protected by the employment standards act and regulations, there is a significant risk for caregivers to experiencing employment standards violations.

Literature focusing on the LCP finds that many caregivers continually experience employment standards violations with respect to wages, long hours, overtime, and job descriptions. The extent to which caregiver experience employment standards violations is unknown, as many are hesitant to report violations for fear of losing their jobs and not being able to complete the 24-month permanent residency requirement. This research seeks to explore the factors that contribute to the vulnerability of caregivers to employment standards violations.

I investigate this problem by administering a survey to current and former caregivers in November 2009. Using data from 156 observations, a regression analysis is undertaken and shows that the level of English speaking ability, employer compliance with Citizenship and Immigration Canada regulations and the ESR, and experience working in Southeast Asian or Middle Eastern countries are the main factors affecting the vulnerability of caregivers to employment standards violations. These factors influence the policy options aimed at ensuring fair and equal treatment of all caregivers.

This paper is structured in the following manner: section 2 provides background information on Canadian immigration policy; section 3 describes the history of domestic work in Canada, information on employment standards and the LCP today; section 4 describes structural flaws and benefits of the LCP; section 5 describes the policy problem; section 6 provides a detailed account of the methodology and data collection techniques used; section 7 presents the analysis of the survey data; section 8 presents the analysis of the policy options and policy recommendations and section 9 concludes with a brief summary.

2: Immigration Policy in Canada

Canada's immigration policy stresses populating the country for the purpose of economic growth. The policy has two components: permanent residents and temporary foreign workers. The Live-in Caregiver Program (LCP) is an element of the temporary foreign worker component. This section provides a brief overview of permanent resident policy and then focuses on the regulations for temporary foreign workers and for live-in caregivers.

2.1 Permanent Resident Policy

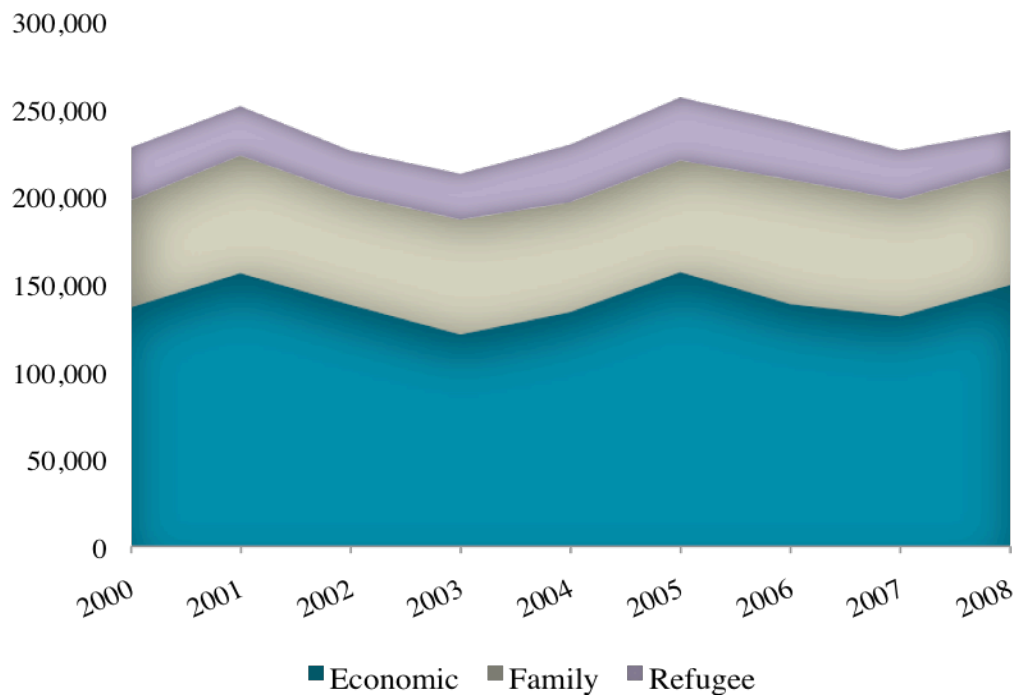
The Immigration and Refugee Protection Act (IRPA) outlines the governing principles of Canadian immigration policy. Under the IRPA, a permanent resident is defined as a foreign national who is authorized to live and work anywhere in Canada. Apart from not being able to vote, permanent residents have the same rights and responsibilities as Canadian citizens, particularly in terms of the individual's security to remain in Canada, access to services, and ability to engage in employment.

Permanent residents are admitted into Canada under three main categories: economic class, family class and refugee class. Figure 1 shows the total number of permanent residents who entered Canada between 2000 and 2008.¹ The economic class admits immigrants who can contribute to economic prosperity and consists of skilled workers, business migrants, and investors. Between 2000 and 2008, it accounted for the largest class of admitted permanent residents (58.3%). Economic class migrants are assessed using a point system that takes into

¹ The "other" category is not included in the figure (2.7% of total). It includes post-determination refugee claimants, deferred removal orders, retirees, temporary resident permit holders, humanitarian and compassionate cases, sponsored humanitarian and compassionate cases outside the family class, and people granted permanent resident status based on public policy considerations (CIC, 2008).

account English and/or French language ability, age, education, adaptability, and labour market skills deemed to assist immigrants in their integration and economic performance in Canada (CIC, 2010). The family class includes closely related family members supported by permanent residents or Canadian citizens for family reunification purposes. It accounts for the second highest share of admitted permanent residents (27%). Lastly, the refugee class is for migrants who fear persecution in their home country and are admitted for humanitarian reasons. This class represents the smallest portion of permanent residents (12%).

Figure 1: Total Number of Permanent Residents Admitted by Class from 2000-2008



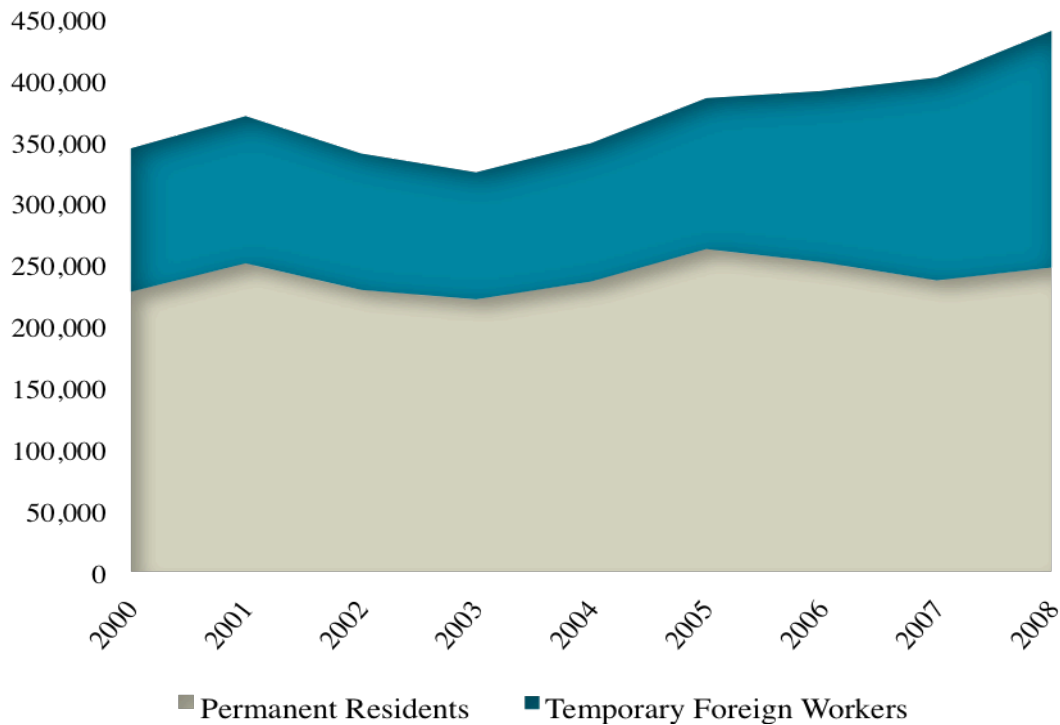
Source: CIC, (2009b)

Canada takes in a quarter of a million permanent migrants per year, yet labour shortages still exist. Immigration policy attempts to address labour gaps in particular areas through the Temporary Foreign Workers Program.

2.2 Temporary Foreign Worker Policy

The Temporary Foreign Worker (TFW) Program is the second avenue to enter Canada and be employed provisionally. Figure 2 shows the number of TFWs has been growing through time and that in 2008 there were almost as many TFWs admitted into Canada (192,519) as permanent residents (247,243).

Figure 2: Total Entries of Temporary Foreign Workers and Permanent Residents 2000-2008



Source: CIC (2009b)

The program is jointly administered by Citizenship and Immigration Canada (CIC) and Human Resources and Skills Development Canada (HRSDC). It was created under an IRPA provision that permits migrant workers to engage in paid employment in Canada, on a temporary basis, under similar employment rights as permanent residents. The goal of the program is to allow businesses to meet their labour needs during times of labour shortages. In addition, it also

outlines regulations to prevent worker abuse and negative employment affects on Canadians.

TFWs are classified using a combination of occupation and skill. The four main worker groups are the skilled, unskilled, seasonal agricultural workers, and live-in caregivers; each of which has slightly different roles and regulations.

In addition, HRSDC's National Occupation Classification System (NOCS) categorizes TFWs using a standardized framework based on skill level and skill types (HRSDC, 2009b). Skill levels are defined by the type and/or amount of training or education required to work in a specific occupation and are represented by the letters A, B, C, and D. Skill level *A* requires workers to have a university education; *B*, a college education or apprenticeship training; *C*, secondary school and/or occupation-specific training; and *D* requirements for on-the-job training. Generally speaking, based on the NOC classification system, TFWs fall into one of two broad categories: skilled (A, B) and unskilled (C, D) workers.²

Employers looking to hire TFWs are required to first obtain a positive Labour Market Opinion (LMO).³ To obtain a positive LMO, employers must demonstrate: a) that they have made efforts to recruit and/or train willing and available Canadian citizens and permanent residents; b) that the wage being offered is comparable to the current wage rate paid to Canadians in the same occupation in the region; c) the working conditions for the occupation meet the current provincial labour market standards; and d) that there are potential benefits to the hiring of a TFW such as the creation of new jobs or the transfer of skills and knowledge (CIC, 2009d). In addition to the general requirements noted above, employers looking to hire unskilled TFWs (C, D) are required

² There is also a second tier associated with occupational skill type. Skill types are based on numbers 0-9 and on the nature of work performed and field of training/experience. Within this second tier live-in caregiver work is classified as "Childcare and Home Support Workers" in group 6. For details, see HRSDC (2009a).

³ An LMO is not required for all employment authorizations. Certain categories of workers are exempt because of the emergency services they provide or because they offer unique skills that are difficult to measure in terms of the effects on the employment of resident Canadian workers (entrepreneurs and intra-company transferees, participants in exchange programs, academics and students, religious and charity workers; HRSDC, 2009a).

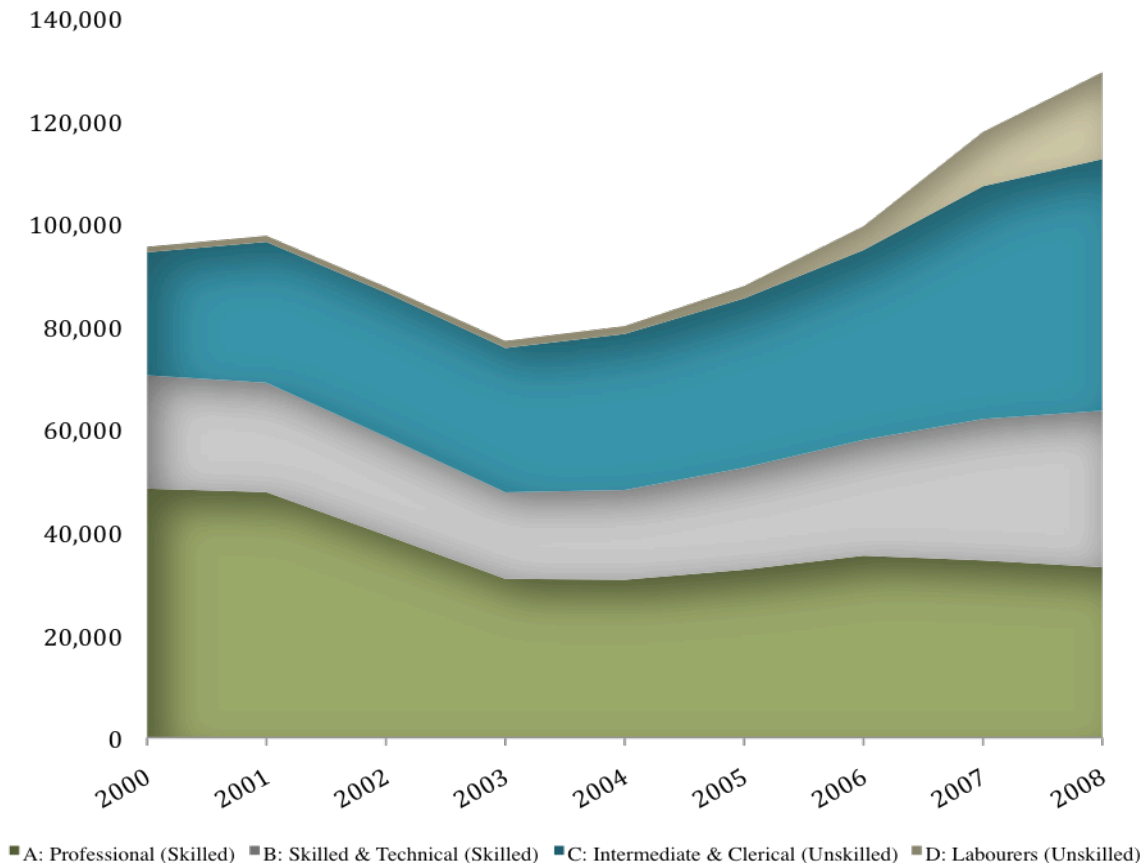
to pay return air-fare, ensure the availability of reasonably priced and suitable accommodations, provide temporary medical insurance, register workers with provincial workplace safety insurance plans, sign a contract, and display continual efforts to hire and train Canadian workers (CIC, 2009). Generally, temporary foreign workers are not eligible for permanent residency except if they are skilled (A and B).

In 2008, total entry of TFWs⁴ was the highest ever with 192,512 skilled and unskilled workers being admitted. Figure 3 shows the total entry of foreign workers by skill level between 2000 and 2008.⁵ Although the D skill level accounts for the smallest total percentage of admitted TFWs (3.3%), it has experienced the largest increase, 1508.7% between 2000 and 2008, occurring as a result of the introduction of the unskilled worker class in 2002. Category A workers make up the largest group entering Canada at 27.3%. However, since 2000 this is the only category to experience a decline in workers (- 46.1%). The C skill level, in which live-in caregivers belong, has experienced the second highest percentage increase (104.5%). The workers in this category also make up the second highest group of admitted migrants, accounting for 24.7% of total entries to Canada. In total, Canada experienced a 65% increase in TFWs.

⁴ Total entries of temporary foreign workers are calculated as the sum of re-entries and initial entries (CIC, 2009b).

⁵ The *level not stated* category is not mentioned in the figure. This category admitted a total of 261,180 TFWs between 2000 and 2008 (CIC, 2009b).

Figure 3: Total Entries of Foreign Workers into Canada by Stated Skill Level 2000-2008



Source: CIC (2009b)

The Live-In Caregiver program is designed to address the shortage of Canadian citizens or permanent residents in live-in care work. Participants enter Canada under the TFW program and after 24 months of live-in employment, they are given the opportunity to apply for permanent residency under the economic class (CIC, 2009b). In the skill/occupation classification, live-in caregivers belong to the C category, the only category of unskilled TFWs eligible for permanent residency under the federal program. Employers wanting to hire a live-in caregiver must not only

meet the LMO requirements, but also demonstrate that they have sufficient income to pay a live-in caregiver salary. They must also demonstrate that the caregiver will be employed full time, that they will provide a private furnished room equipped with a lock on the door within their home, and that the primary duties of the caregiver will be to care for children, elderly or disabled individuals. A LMO under the LCP can be requested for up to three years and three months.⁶ Employers receiving a positive LMO can make an offer of employment. Once a caregiver has signed the employment contract, an application must be made to CIC for a work permit. This application must include the contract and proof that the employer received a positive LMO (CIC, 2009).

The criteria for live-in caregiver entry states that applicants must have successfully completed the equivalent of Canadian high school education and a minimum of six months full time training, or at least one year of full time experience in a field related to caregiving, within the past three years.⁷ Applicants must also be able to read, write and speak English or French to the satisfaction of a CIC official. Caregivers are allowed to work only for the employer whose name appears on their work permit. If they are fired or resign from a job, they are permitted to seek new employment, but must apply for a new work permit under their new employers name. If caregivers change employers, they do not lose the time they have accumulated towards the 24-month permanent residency requirement. However, they are still required to complete the remaining time within the three-year period. Caregivers are also required to pay taxes; they contribute and have access to the Canadian Pension Plan (CPP) and employment insurance (EI). Lastly, caregivers qualify for worker protection under provincial Employment Standards Legislation

⁶ Except in Quebec, where the maximum is three years (CIC, 2009d).

⁷ Except in Quebec where there is an agreement between the Government of Canada and the Province of Quebec, allowing Quebec control over the administration of the LCP. Live-in caregivers in Quebec must obtain a *certificat d'acceptation du Québec* (Certificate of acceptance) (HRSDC, 2009a).

Canada has long been dependent on the contributions of permanent migrants and temporary foreign workers to maintain economic growth and live-in caregivers have historically been part of the flow of immigrants. The need for workers to fill domestic positions is not recent, as the next section shows.

3: Domestic workers

This section provides the history of domestic work in Canada and describes the various policies and programs that have been in place.

3.1 History

The existence of foreign workers as domestics became more visible after women gained the right to vote in 1918, as their improved positions in society engaged them in various work outside of the home (Brigham and Bernardo, 2003). Western society's belief remained unchanged and domestic work still fell under female responsibility, thus requiring women to obtain help to perform household tasks and assist with child rearing. Domestic work was formally recognized as an immigration tool in 1955, when Canada adopted its first foreign domestic worker policy, the West Indian Domestic Workers Scheme. This scheme brought women from the Caribbean to work as domestics. Women were admitted as permanent residents on the agreement that they work as live-in domestics for a minimum of one year. To qualify, women also had to meet the criteria of being unmarried, be between the ages of 18 and 40, have no dependents and have a minimum eighth grade education (Macklin, 1992). Prior to the scheme, employers preferred European women who were familiar with Western culture. The Scheme, recognized that the *preferred* European women who were no longer interested in domestic employment and also allowed Canada to meet the needs of the domestic sphere while augmenting relations with Caribbean countries (Hodge, 2006; Spitzer and Torres, 2008).

The West Indian Domestic Scheme began the process of bringing women of colour from developing countries into Canada to service the needs of the middle class family. While educated European domestics were seen as more desirable workers and given full citizenship rights

unconditionally, Caribbean workers were admitted in limited numbers, paid less and subject to strict monitoring and discriminatory practices (Brigham and Bernardo, 2003). Workers were given conditional permanent residency status that could be withdrawn if they were deemed unsuitable, violated their contracts or became pregnant. These workers were also subject to discriminatory practices such as medical testing for venereal diseases not given to other foreign workers, permanent residents or citizens. These restrictions went unchallenged by the Caribbean countries as they saw the Scheme as a way to reduce unemployment (Bakan and Stasiulis, 1997).

This new class of domestics was seen to be less educated and less skilled than their predecessors; however, employers preferred them because they were more likely to continue with their domestic duties after their initial contract was completed. The negative perceptions associated with domestic labour still lead many domestics to change employment once their contracts were completed, continuing the shortage of workers (Brigham and Bernardo, 2003).

By the late 1960's, continuous labour shortages forced the government to introduce new changes to immigration policy on permanent residency. Specifically in 1968, Canada introduced the *point system*. At the time, the point system undervalued domestic work by attributing lower points to those with little education or experience. Moreover, points were based on Western education and training, resulting in people with recognized certificates, such as that of British nursemaids or nannies, being favoured. This system allowed British subjects to continue to access permanent residency in Canada, while those from developing countries with no recognized formal education were denied entry. As a result, workers from developing countries no longer qualified as independent immigrants.

Canadian immigration policy was amended again in 1973 with the introduction of the Temporary Employment Authorization Program (TEAP). This program issued temporary work visas to domestic workers, valid for a maximum of three years. The temporary visa restricted

employment to a single employer with no chance of access to permanent residency. After the three years was completed, domestics had to return to their country of origin.

Following criticisms by domestic support groups at the issuing of temporary permits, the Foreign Domestic Movement (FDM) program was established in 1981. The FDM was a program that targeted foreign-born women to work in Canada as caregivers for children. It formalized criteria surrounding domestic workers' entry into Canada; it no longer allowed entry as general domestics and restricted primary work to childcare (Macklin, 1992). The program also provided the opportunity for domestics to apply for permanent residency.

To qualify for entry under the FDM program, domestics needed to have a minimum of one-year, full-time paid employment or recognized formal training in domestic or childcare work. They also needed sufficient education to perform the required duties and the ability to communicate orally in English or French. Domestics had to commit to living in the home of an employer for a minimum of two years. In cases where domestic workers needed to change employers, they could do so only with approval of a federal immigration officer. The addition of the live-in clause was a significant modification because under previous programs, it was not mandatory for domestics to live in the home of their employers, although many did (Bakan and Stasiulis, 1997). However, the addition of the live-in clause was a direct result of the growing family dependence on two incomes, coupled with the critical shortages in childcare and the increased cost of regulated public childcare. The accommodating nature of live-in care work allows employers to have low cost, flexible childcare that suits employers' work schedules (Langevin and Belleau, 2000; Bakan and Stasiulis, 1997).

The FDM program allowed domestics to apply for permanent residency under the conditions they had completed two years of live-in employment and fulfilled criteria proving their *self-sufficiency* and adaptability to Canadian society. To demonstrate self-sufficiency, applicants had to show that they were financially stable. This was difficult to prove because the low wages

paid for domestic work often resulted in domestics turning to unauthorized work during their days off to meet the financial stability requirements (Spitzer and Torres, 2008). Furthermore, the FDM program placed a significant onus on domestic applicants to prove they had developed personal qualities that assisted in their successful integration into Canadian society. To provide proof they had adapted to Canadian society, domestic workers had to show that they had developed the qualities of maturity, stability, initiative and resourcefulness — requirements no other permanent resident applicants were required to fulfil (Langevin and Belleau, 2000).

The current LCP replaced the FDM program in 1992. The LCP changed the word “domestic” to “caregiver” and diversified the scope of responsibility. It no longer focused solely on childcare and added the care of the elderly and disabled into caregivers’ roles and responsibilities (Langevin and Belleau, 2000). Compared to the FDM, the LCP requires higher minimum training requirements. Caregivers must complete the equivalent of a Canadian high school education and a minimum one-year paid work experience in a field related to caregiving or six months of full time recognized formal training.⁸ The LCP program does not require caregivers to prove self-sufficiency when applying for permanent residency and gives caregivers the right to apply for permanent residency after 24 months of continuous live-in employment.

Canada has a long history of benefitting from the work of domestic workers. Since the early 1900’s, upper middle class families have employed domestic workers to act as household managers, servants, cleaners, cooks, and caregivers for children, the elderly, and the physically disabled. Canadian immigration policy surrounding domestic workers has continuously changed to reflect the needs of these families, and immigration policies have long targeted foreign nationals from developing countries to perform domestic jobs no other resident has been willing to do. These domestic workers have not always received the same employment protection as other workers; however, in 1995 domestic and caregiver associations succeeded in lobbying

⁸ This must be done within three years prior to the application.

government to give them access to legislation that would assist in the protection of domestic workers (Tumolva and Tomeldan, 2004).

3.2 Employment Standards

In Canada, the power to enact and administer labour laws belongs to both the federal and provincial governments. The shared responsibility of labour legislation originates from the Constitution Act, 1867 that dictates the scope of authority for each government. The protection of most of the workforce falls under provincial authority (HRDC, 2009c).⁹

In British Columbia, employer-employee relations are regulated by the *Employment Standards Act* (ESA), enacted in 1995 and as amended, and enforced by the *Employment Standards Branch* (ESB). The main function of the ESA is to ensure B.C. workers have minimum standards for wages and terms of employment. To achieve this, the ESA creates basic rights for employees and basic obligations for employers that are detailed under Employment Standards Regulations (ESR). The ESR covers three categories of labour rights: minimum wages, hours of work, and minimum working conditions. Employers who hire caregivers are required to register with the ESB domestic directory, and they must have an employment contract outlining the terms and conditions of employment, caregiver responsibilities, hours of work, and rate of pay.¹⁰

The ESR outlines limits on hours of work; caregivers are not salaried employees and are paid hourly based on B.C.'s eight-dollar per hour minimum wage. Full time employees are paid their regular wage up to eight hours a day or 40 hours a week. Caregivers who work longer hours are to be paid one and a half times their regular wage for every overtime hour worked up to a maximum of 12 hours daily. For overtime worked beyond 12 hours a day, the rate is two and a half times the basic wage. In cases where caregivers work split shifts they are required to end no

⁹ For details on the industries under federal government employment legislation, see HRSDC's website under *Federally Regulated Businesses and Industries* (2009c).

¹⁰ Ministry of Labour (2005).

later than 12 hours after their initial shift began. Caregivers must not work more than five hours per day without receiving a 30-minute meal break. Those who work 15 out of 30 calendar days, prior to a statutory holiday, are entitled to holiday pay at their regular wage. Caregivers are also entitled to two weeks vacation time and pay after working for an employer for one full year.

The ESR sets minimum requirements related to timely payment of employee wages. Employers are obligated to pay wages at least twice per month, within 8 days of the end of each pay period. Payments must be made in Canadian dollars, and employers must provide proof of wage and payments in the form of a pay stub, or receipt, at every pay period.

The ESR also regulates employer deductions. Employers must deduct income tax and premiums for employment insurance, Workers' Compensation and Canada Pension Plan. Any additional deductions need to be authorized, in writing, by the caregiver. Employers are not allowed to deduct money from wages to recover costs of doing business such as the accidental breaking of items. Employers are permitted to charge caregivers room and board fees to the maximum of \$325 a month.

The ESB is the provincial government office that handles employee complaints (Ministry of Labour, 2008). Prior to lodging formal complaints, the ESB requires employees to attempt to resolve issues directly with their employer using the Employment Standards Branch *Self-Help Resolution Kit*. Caregivers are one of the few groups exempt from having to complete the kit prior to lodging a formal complaint; however, the ESB highly recommends and encourages all groups to use the kit to reduce government involvement.

The kit is a nine-page document available only in English. Sections A to E focus on wage compensation and pay, while section F focuses on all other disputed issues. The kit provides caregivers with resources to make a written request to employers to obey ESR. It provides employees with a standard letter, a form to describe the problem, and information on the complaint resolution process. Once the employee completes the forms they send the information

to their employer. Employers have 15 days to respond and reach an agreement. If an employer fails to respond or an agreement cannot be reached, an employee can file a formal complaint with the ESB.

Employers who do not comply with the ESR are subject to administrative penalties set out in the ESA under section 29. Penalties are in monetary form and are given out in three increments beginning with a fine of \$500 then increasing to \$2,500 and then to \$10,000 for employers who continuously violate the same requirement of the Act.

In short, caregiver employment rights around wages, timely pay minimum rest periods, mandatory salary deductions, and maximum daily and weekly hours of work, are detailed in the ESR. The ESB provides resources and information to caregivers concerning adequate working conditions and filing complaints against their employer. Each year thousands of caregivers enter B.C. and are automatically the beneficiaries of the safeguards provided by the ESA.

3.3 Live-in Caregivers

From 2003 to 2008, there was a 220% increase in the number of caregivers entering Canada (see Table 1). The number of caregivers entering B.C. between those years increased by 103%, representing on average, 35% of those admitted into Canadian (see Table 1).

Table 1: Total Inflows of Caregivers Entering B.C. and Canada (% of Canadian total in Parentheses)

<i>Year</i>	<i>Canada</i>	<i>B.C.</i>
2003	3,304	1,278 (38.7)
2004	4,292	1,551 (36.1)
2005	4,552	1,606 (35.3)
2006	6,895	1,819 (26.4)
2007	6,117	2,986 (48.8)
2008	10,511	2,597 (24.7)

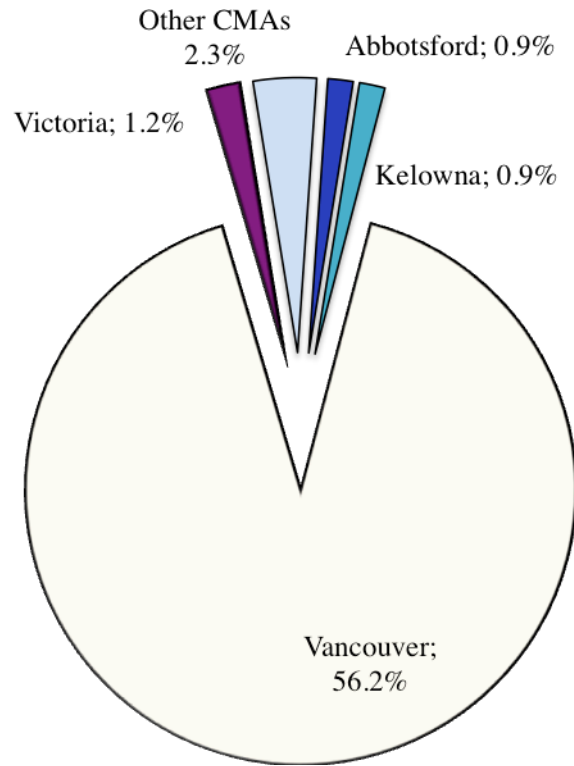
Source: Data provided by the Ministry of Advanced Education and Labour Market Development, Immigration Partnerships and Initiatives Branch (2009) CIC (2004-2009f)

The majority of caregivers are located in Ontario and B.C. with the largest number residing in the largest two urban centres of Toronto and Vancouver (Cheung, 2006).¹¹ Figure 4 shows that the majority entering B.C. live in the Vancouver Metropolitan Area (56.2%).¹² This is consistent with the fact that 51.5% of the provincial population lives in the Vancouver area (BC Stats, 2006). Victoria is the second most popular area for caregivers accounting for 1.2% of the caregiver population stock in B.C. (see Figure 4).

¹¹ Cheung (2006) focuses on lengthy employment gaps among live-in caregivers. She examines the factors that contribute to some caregivers experiencing longer employment gaps than others; she finds that loss of status is a significant contributor to employment gaps.

¹² Figure 4 does not include the 38.5% of caregivers who did not state their intended CMA.

Figure 4: Stated CMA Locations of Live-in Caregivers in B.C. from 2003-2008



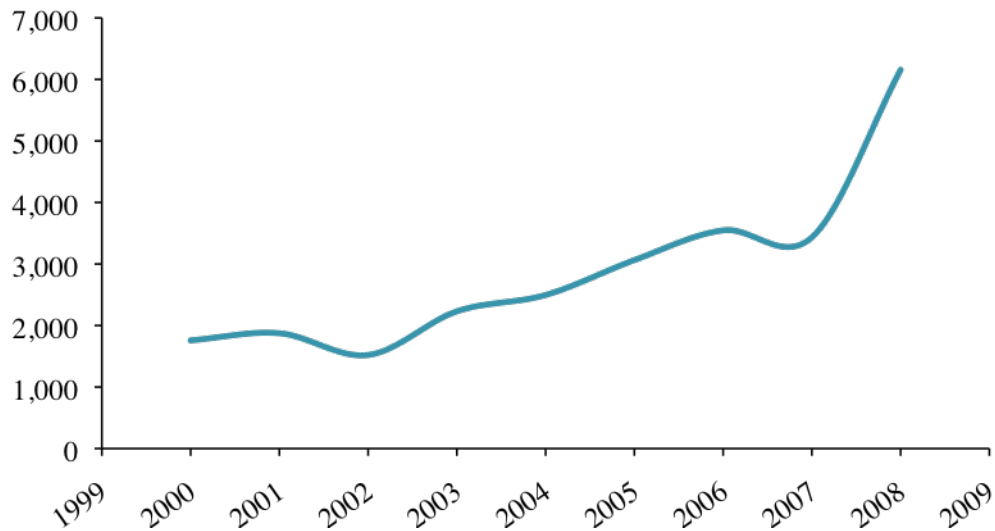
Source: Data provided by the Ministry of Advanced Education and Labour Market Development, Immigration Partnerships and Initiatives Branch, 2009

Spitzer and Torres (2008) develop the most recent profile of live-in caregivers based on the total number of LCP entrants between 1993 and 2006. Overall, females make up 98% of caregivers, with the majority being 25 to 44 years of age. Most caregivers are single (68%), a quarter are married or in a common-law relationship, and a small portion is separated, divorced, or widowed. More than half have two years of job training or work experience or one to four years of post secondary school education. The majority of caregivers are of Filipino origin (78%).

After 24 months of full time employment, caregivers become eligible to apply for permanent residency. Figure 5 shows that the number of caregivers becoming permanent

residents was stable from 2000 to 2002, this number gradually increased until 2007 and has accelerated in recent years.

Figure 5: Number of Live-in Caregivers to Transition to Permanent Residency 2000-2008



Source: CIC (2009b)

In conclusion, because of a continual lack of Canadian citizens or permanent residents willing to perform live-in care work over time, Canada has implemented various immigration policies to attract foreign nationals. The LCP appeals to foreign workers, many from developing countries as it offers many benefits. However, the LCP also provides challenges some of which are discussed in the next section.

4: Challenges and Benefits of the Live-In Caregiver Program

This section reviews structural flaws and describes the benefits caregivers can access within the program.

4.1 Structural Flaws

Shortcomings in the LCP increase caregiver vulnerability to employment standard violations. They include the live-in clause, temporary status of workers, and minimum training and educational requirements. Each is discussed in detail.

First, the live-in clause that requires caregivers to live inside their employers' residence leaves them susceptible to being on call 24 hours a day. Their visible presence in the home leaves caregivers at risk to working overtime to which they did not agree. The small room provided and the sharing of general living areas restricts mobility and leaves little privacy (Spitzer and Torres, 2008). The live-in requirement isolates caregivers from public view and those who enforce labour standards, thereby reducing the likelihood that violations will be reported or detected (Spitzer and Torres, 2008).

Second, the temporary status of caregivers creates a highly vulnerable workforce, as caregivers fear job loss, deportation and greater uncertainty regarding their permanent residency. Many caregivers believe that their temporary status does not entitle them to employment protection or access to social programs such as EI. Coupled with their desire to gain permanent residency and integrate into Canadian society, this stress makes caregivers wary of reporting employment standard violations to the ESB (Spitzer and Torres, 2008).

Third, the minimum training and educational requirements create challenges for applicants from developing countries, such as the Philippines. Arat-Koc (1999) suggests that in developing

countries Western education is restricted to the rich, and it is particularly difficult for women to access. To meet requirements many caregivers seek employment in countries such as Singapore, Malaysia, China and Saudi Arabia. These countries are known to have no formal employment protection for domestic workers resulting in high rates of exploitation and abuse (Yeoh and Annadhurai, 2008; Chin, 1997). As a result, caregivers see working conditions in Canada as improved and view any employment standards violations as insignificant even though (Bakan and Stasiulis, 1997; Sabban, 2002).

4.2 Benefits of Participation

The LCP program is one of the few avenues women from developing countries can use to come to Canada. The program also helps caregivers' families as they benefit immediately from money remitted to them, and in the longer term from sponsorship toward permanent residence in Canada. Participation also provides caregivers with affordable housing throughout their transition and settlement in the new country.

The prevalence of Filipinos as caregivers benefits not only Canada but the Philippines as well. As an answer to high unemployment and low incomes, the Philippine government initiated an *Overseas Employment Program* in 1974 (Yang and Martinez, 2006). The program encourages the migration of citizens to other countries through a labour export policy. This policy sees workers sending approximately \$17 billion in remittances each year (Ratha et al. 2009). Individuals in the country view this export policy positively, and caregivers are deemed *heroes* for their large contribution to the country's economy (Boyd et al. 1986). Remittances to their families allow caregivers to supplement low income and improve household conditions. Yang and Martinez (2006) find that families who have members working overseas experience

reductions in poverty allowing them to invest in childhood education and enter into entrepreneurial activities.¹³

In Canada, the ability to apply for permanent residency through the economic class is a benefit not offered to other unskilled TFWs. This is an advantage for caregivers, as they would not qualify for entry under the other permanent residency classes. Live-in caregivers are also able to take advantage of Canada's commitment to family reunification and can apply to sponsor their spouses and dependants at the same time as they apply for permanent residency.

Lastly, the live-in requirement may ease caregivers' integration into Canadian society, as they do not have to look for immediate housing upon their arrival, giving them a secure place to live. Furthermore, the \$325 room and board fee caregivers' pay includes accommodation, utilities, and food and is significantly less than the average individual rental housing price of \$982 in Metro Vancouver, which covers only lodging, but typically more space (BC Stats, 2006).

In short, participating in the LCP carries both benefits and costs. The program provides benefits around financial assistance, sponsorship and housing; however, it also embodies flaws that have the potential to lead to significant problems for live-in caregivers. These flaws leave room for policy changes that are discussed in the next sections.

¹³ Tan (2006) also suggests that migrant workers have a much strong motive to remit, as a majority are unable to bring their families with them due to the cost of migration and overseas country policies.

5: Policy Problem

My research focuses on the vulnerability of caregivers to employment standards violations. It investigates the policy problem that the LCP, in its current state, embodies too many shortcomings that can lead to the risk of abuse.

Canada has a legal commitment to minimum standards of labour as set out by labour laws and implemented through employment standards regulations. These legally binding standards govern employer-employee relations ensuring fair and equal treatment of all workers. However, various studies focusing on caregivers' employment experiences show evidence of huge potential for abuse. The scope to which caregivers experience employment standards violations is unknown as many are hesitant to come forward and report employment standard issues for fear of job loss and the inability to complete the 24-month requirement. Furthermore, the private nature of work and the live-in requirement reduce the probability that others will observe or report abuses. To investigate this problem, I explore the factors that affect the vulnerability of live-in caregivers in their employment, to employment standards violations.

The primary stakeholders of this research are the caregivers, employers, federal and provincial governments and caregiver non-profit organizations. Caregivers have a valuable stake in the research because it represents their life experiences. Recommendations have a direct influence on their admittance into the program, working conditions, applications for permanent residency and employer relationships. Employers are also primary stakeholders because they employ caregivers and are the reason the LCP exists. The federal government, in particular CIC and HRSDC, has a stake in the research as they manage and regulate policies directly related to the LCP. The provincial government through its ESB is responsible for enforcement of the ESR.

Finally, caregiver non-profit organizations are also primary stakeholders because they provide settlement and integration assistance to caregivers.

The next two sections outline the analysis of the policy problem. They describe the methodology and analysis undertaken to determine the factors that influence the vulnerability of caregivers to employment standards violations.

6: Methodology

This section addresses my research question. It describes the analytical methodology and the basic source of information, which is a survey.

6.1 Survey Design

The primary source of data is a non-random survey of current and former live-in caregivers in the Metro Vancouver area.¹⁴ I conducted the survey between November 4 and December 2, 2009. It contains 40 questions, divided into three sections: “Tell me about yourself” (i.e. personal characteristics), “Tell me about your work as a live-in caregiver” (i.e. employment responsibilities) and “Tell me about your work conditions as a current or former live-in caregiver” (i.e. employment conditions). All but one of the survey questions are closed and multiple choice. Questions that do not have choices require participants to provide a specific answer. The last question is open-ended and asks participants if they would like to share thoughts regarding their experiences with the LCP.

Questions are organized in three sections (see Table 2). The first section focuses on personal characteristics, immigration avenues and prior work as a caregiver. The initial questions identify personal characteristics such as age, gender, birth country and level of education. The next set of questions asks about current immigration status, birth country, use of agencies, employment in other countries, prior working experiences and year of entrance to Canada. These questions identify how caregivers’ transition from other countries, the type of work performed in those countries and if they use agencies to assist them in finding employment in Canada. This section concludes with questions identifying marital status, family statistics, sponsorship

¹⁴ See Appendix A for a copy of the full survey.

intentions, financial dependence, number of employers and the longest period worked for a single employer. This section also provides a scale asking caregivers to rate their level of comfort with the English language.

The second section identifies participants’ employment responsibilities by asking questions on the type and number of individuals looked after, duties and hours of work. The objective of these questions is to identify the type of work caregivers are performing outside of child, elder and adult disability care and to identify the number of hours they usual worked in a day.

The third section addresses employment conditions. Questions ask about employment contract violations and employer compliance with CIC regulations and the ESR.

Table 2: Survey Questions

Section 1: Tell me about yourself (i.e. Personal characteristic)
<ul style="list-style-type: none"> • Age, gender, birth country, education, marital status, number of children, knowledge of English language, current immigration status, family sponsorship, financial dependence • Program entering, year of entry, country of origin, use of an agency • Prior work experience, caregiver experience, length of time as a caregiver, number of employers, longest worked with one employer
Section 2: Tell me about your work as a live-in caregiver (i.e. Employment responsibilities)
<ul style="list-style-type: none"> • Type of care performed (children, elderly, adult with disability), duties inside the home
Section 3: Tell me about your work conditions as a current or former live-in caregiver (i.e. Employment conditions)
<ul style="list-style-type: none"> • Employers do for work, contracts, employer compliance with CIC regulations • Employment contract violations, engage in uncomfortable work, knowledge of worker rights, employer compliance with the ESR

6.2 Data Collection

The isolation of live-in caregivers makes it difficult to obtain a random survey¹⁵ I therefore used the following three contact venues: caregiver non-profit organizations, Internet, and public areas.

I worked with the Multicultural Helping House Organization (MCHH), the West Coast Domestic Workers Association (WCDWA), and the Vancouver Committee for Domestic Workers and Caregiver Rights (CDWCR). They are three Vancouver based non-profit organizations that assist caregivers in their transition, settlement, and legal issues. All three organizations are well known in the caregiver community and have a total client base of over 3,000. All three organizations sent out emails to their membership encouraging them to fill out the online survey. WCDWA also gave out and collected paper surveys in their offices. MCHH allowed the paper surveys to be administered at two of their workshops on November 14th and 28th 2009. CDWCR allowed me to administer the paper survey at their November 29th, 2009, workshop.

The Internet was another avenue to distribute the online surveys. I became a member of an online social group of caregivers named “Vancouver Nannies and Au Pairs Meet Up.” This group organizes and supports social interactions and gatherings among caregivers, communicating events solely by email. I also looked at online ads through “Craigslist Vancouver” and “Kijiji Vancouver.” Craigslist and Kijiji are centralized networks of online communities, featuring free online classified advertisements. They have sections dedicated to employment, housing, personals, and items for sale. Each network was searched for postings using the following terms: caregivers, live-in caregiver, live-out caregiver, nanny, nannies, and

¹⁵ Although the ESB requires employers to register caregivers and also keeps records of caregiver names, employers and addresses, the data is not accessible by the public for privacy reasons.

Au Pairs. Once identified as current or former participants of the live-in caregiver program, the address provided was sent an email with an introduction on the research and a link to the survey.

Finally, participants were recruited in various Metro Vancouver locations such as community centres and schools in wealthy areas, churches, parks, bus stops and on the sky train. Caregivers were identified through the process used by Oxman-Martinez et al. (2004). Researchers in this study used a caregiver's ethnic composition in relation to the children or adults they were looking after. For example, if a Filipino woman was with a Caucasian child or adult, she was asked if she was a caregiver. In order to attempt to diversify the sample and avoid over-representation of one ethnic group, caregivers were also asked to identify other known caregivers in the immediate area such as Mexican, American, Swedish or British caregivers. Those who did not have the time to fill out the survey in my presence were given pre-addressed stamped envelopes and asked to mail them once completed. Some caregivers were also given extra surveys to distribute to caregivers they knew, with surveys returned either by mail or through the initial contact.

One limitation of this research design is that the sample may not reflect the experiences of isolated caregivers such as those who care for the elderly. This is the case because they may not have access to social groups, the Internet or transportation to attend workshops. Self-selection bias is also another limitation as caregivers who feel comfortable voicing their concerns are more likely to fill out the survey. Although this is a concern with all research surrounding caregivers, larger samples allow attributes to be associated with characteristics of a general population. The standardized questions of the survey also make measurement more accurate through the multiple choice answers placed upon the participants. The non-randomness of the sample may also under-represent other ethnicities and male caregivers. However, literature surrounding the live-in caregiver program uniformly finds that a majority of caregivers are women from the Philippines.

Research conducted on live-in caregivers has been primarily through personal interviews and focus groups. The select nature of the samples and their small sizes allows for the sharing of experiences between a few chosen caregivers. The experiences shared by these caregivers, although real and valid, may be extreme and not necessarily applicable to the majority. In the case of focus groups, confidentiality and anonymity is difficult to achieve since the caregiver community is small. It is also likely that participants influence one another with their responses.

To my knowledge, this is one of the first attempts to survey caregivers in Canada. The advantage of my methodology is that it covers a much broader sample of caregivers and not only those that have had negative experiences. The anonymity of the survey also allows caregivers a safe environment to describe their real experiences. As well, the standardized questions of the survey make measurement more accurate and reliable.

6.3 Description of the Sample

In total 181 surveys were collected, and 25 were excluded from the sample because of missing answers. The final sample has 156 observations. Table 3 shows the basic frequencies for the major variables that are discussed below.

Table 3: Sample Frequencies (156 Observations)

Sample Characteristics	Categories	Sample Frequency	Reference Sample	Source
Status	Current	73.7	44.8	PINAY, 2008
	Former	26.3	55.2	
Age	19-25	3.8	5.8	PINAY, 2008
	26-35	48.7	44.8	
	36-45	30.1	33.1	
	46-55	14.7	14.9	
	56+	2.6	1.9	
Gender	Female	98.7	97.5	Spitzer and Torres, 2008
	Male	1.3	2.5	
Birth Country	Philippines	94.9	78.0	Spitzer and Torres, 2008
	Non-Philippines	5.1	22.0	
Completed Education	College/University	92.3	81.1	PINAY, 2008
	No College/University	7.7	18.9	
Marital Status	Married	36.5	24.5	Spitzer and Torres, 2008
	Other	9.6	6.7	
	Single	53.8	68.8	
Experience in Southeast Asia/Middle East	Yes	56.0	67.0	PINAY, 2008
	No	44.0	33.0	
Remittances	Yes	78.2	83.0	Oxman-Martinez et al., 2004
	No	21.8	17.0	
Number of Employers	1 Employer	59.6	59.1	PINAY, 2008
	More than 1 Employer	40.4	40.9	
Plan on Sponsoring Family	Yes	50.6	NA	NA
	No	49.4		
Level of comfort with English	Reading level	5	61.5	NA
		4	29.5	
		3	7.7	
		2	0.6	
		1	0.6	
Level of comfort with English	Speaking level	5	35.3	NA
		4	45.5	
		3	16.7	
		2	1.9	
		1	0.6	

Almost three quarters of the sample are current caregivers (73.7%). This is significantly higher than in the study done by PINAY (2008), where only 44.8% of survey respondents were current live-in caregivers. Consistent with the PINAY study sample (77.9%), almost half of the caregivers in my study sample are between the ages of 26 and 35. A large majority of caregivers are from the Philippines (94.9%); because this frequency is higher than the 78.0% identified in

the profile created by Spitzer and Torres (2008), it is likely that Filipinos are overrepresented in my sample. Ninety-two percent of caregivers in my sample have completed college/university level education, which is a greater than the participants in the PINAY study (81.1%), again indicating possible overrepresentation.

One-third of caregivers surveyed are married, in comparison to the Spitzer and Torres' (2008) figure of 24.5%. Consistent with the PINAY study, the number of participants who have worked in a Southeast Asian or Middle Eastern country is evenly distributed with 56.0% reporting they had experience working in those countries and 49.4% indicating they had not. Three-quarters of caregivers also remit funds outside of Canada (78.2%); this is slightly lower than the Oxman-Martinez et al. (2004) study, which had 83% remitting funds. A majority of participants report working for one employer while in the LCP (59.6%), and 50.6% plan on sponsoring their children to come to Canada. Lastly, 61.5% of caregivers indicated that they are more comfortable reading than speaking English (35.3%).

7: Survey Analysis

This study utilizes the information obtained from the survey to perform an econometric analysis to identify factors that influence the vulnerability of live-in caregivers to employment contract violations.

7.1 Basic Model

I use the following linear functional model for the experiencing of contract violations (ECV) based on the literature surveyed in the previous sections:

$$ECV = f(\textit{Age}, \textit{Birth}, \textit{Edu}, \textit{Married}, \textit{Other}, \textit{Eng}, \textit{Third}, \textit{Family}, \textit{Remit}, \textit{Emps}, \textit{Longest}, \textit{IMMIreg}, \textit{ESR}, \textit{ESBinfo})$$

The variables *Age*, *Birth*, *Edu*, *Married*, *Other*, *Eng*, *Third*, *Family*, *Remit*, *Emps* and *Longest* relate to personal characteristics. *IMMIreg*, *ESR* and *ESBinfo* relate to employment conditions. The variables are now described in detail.

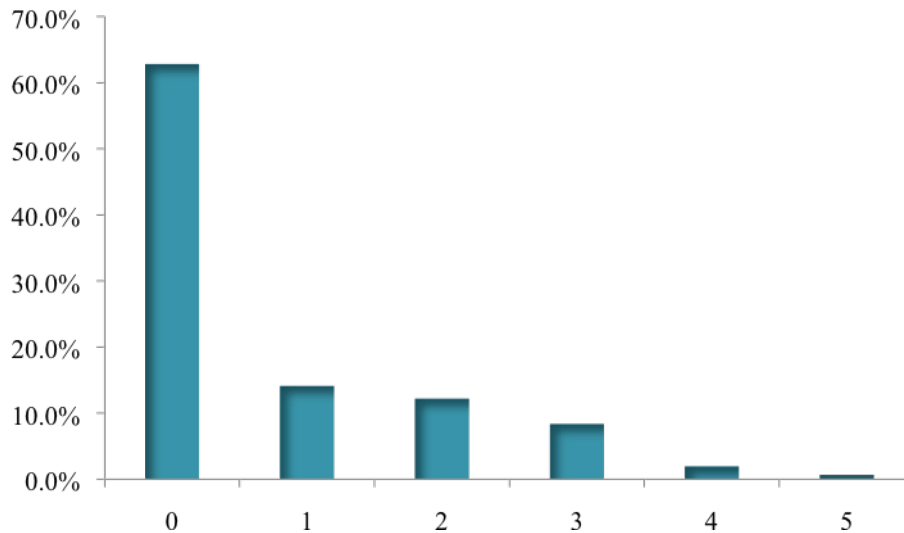
7.1.1 Dependent Variables

The dependent variable is the intensity of employment contract violations (*ECV*). As described earlier, the ESR sets minimum standards on wages, hours worked and overtime pay. The survey measures this variable using question 29 that asks whether the caregiver has experienced not receiving the wage stated in the contract, working unpaid overtime without consent, working outside of their job description, working long hours without consent, or having to pay for anything broken or damaged while working (see Appendix A). The dependent variable

is defined as the substantive rights and duties of caregivers as set out in the employment standard act.

An index between 0 and 1 is created using the five alternatives. Answers are coded 1 when responding “yes” and 0 when “no” to experiencing the contract violation in the question. The average is taken to represent the dependent variable, where the closer the number is to one the higher the intensity of the violations. Figure 4 shows the distribution of the variable.

Figure 6: Distribution of Dependent Variable



The majority of caregivers in the sample experience no contract violations (62.8%). For those that have experienced contract violations (37.1%), the majority indicate just one (14.1%), with the next highest number experienced two (12.2%).

7.1.2 Explanatory Variables

The first explanatory variable is *Age*.¹⁶ In the question, it is defined in intervals of 19-25, 26-35, 36-45, 46-55 and 56+. For the purpose of the estimation, each class is represented by the average of the interval. In the Philippines finding work after the age of 25 is difficult; therefore women tend to migrate seeking better employment opportunities (Oxman-Martinez et al., 2004). However, older migrants may be less likely to learn and understand their employment rights and they may be less comfortable voicing their concerns so, it is expected that an increase in average age has a positive impact on the dependent variable.

The second variable is the country of birth (*Birth*). It is measured as a dummy variable where 1= Philippines and 0= not the Philippines. It is relevant because immigration policies aimed at filling the labour gap for live-in caregivers target women from third world countries with a large majority of caregivers coming from the Philippines. The Filipino culture has women playing roles as second-class citizens to the rich. As such, Filipino women who have experience in a domestic role might not perceive abuses and violations in the LCP as such (Oxman-Martinez et al., 2004); hence, it is expected that there will be a positive relationship between caregivers who come from the Philippines and the dependent variable.

The third variable is education (*Edu*). It is measured using question 6 that asks the caregiver to indicate their highest level of completed education. Answers are separated into three categories Primary/Elementary School, High School and College/University. Observations are coded where 1= when “no” to the completion college/university education and 0 = when “yes.” Individuals who have lower levels of education are less likely to understand their employment rights and responsibilities and identify contract violations. They are also likely to have difficulty analyzing problems and are unable to effectively communicate concerns. Hence, it is expected

¹⁶ See Appendix B table 2 for correlation coefficient table for all variables.

that not completing college/university level education will have a positive impact on contract violations.

The fourth and fifth variables relate to marital status. The first variable, *Married* is coded 1 = married, 0 = otherwise, and *Other* is coded 1= other and 0= otherwise. Single is the omitted group. Caregivers who are married have an obligation to reunite, support and sponsor their spouses to come to Canada and may be more likely to accommodate violations for fear of job loss (Torres and Spitzer, 2008). Therefore, being married is expected to have a positive effect on the dependent variable. Those who are in the *Other* category may also not want to return to their home country because they have no obligations. They may see Canada as a place where they can start a new life, career and family, viewing the 24 months as a simple sacrifice to a better life; hence, being in the “other” category is expected to have a positive effect on the dependent variable.

The sixth variable is the number of employers a caregiver has had since their arrival in Canada (*Emps*). Question 20 measures this variable by asking caregivers how many employers they had as a live-in caregiver. Literature states that some caregivers are deterred from changing employers because they must pay new fees and are also subject to long wait times for work permit processing. Delays are viewed detrimentally as the waiting time extends the process of applying for permanent residents (Langevin and Belleau, 2000); hence, I expect a positive effect of the caregiver’s number of employers on the dependent variable.

The seventh variable is the longest, in months, respondents have been with a single employer (*Longest*). Caregivers remain with a single employer for a lengthy time period for two reasons: first, they are happy with their employers and feel appreciated (Brigham and Bernardino, 2003) or, second they are not happy with their employers and working conditions but stay because of faster access to permanent residency or fear of job loss (Spitzer and Torres, 2008). The

varying findings in the literature make it impossible to hypothesize the effect of this variable on the dependent variable.

The eighth variable is third country experience (*Third*). It is defined as caregivers who have been employed in a Southeast Asian or Middle Eastern Country prior to coming to Canada. Questions 11 and 11a measure this variable by asking caregivers if they worked as a domestic/caregiver in another country prior to entering Canada and, if so, in what country. Answers are coded into a dummy variable where 1 = when “yes” to working in Southeast Asia/Middle East (excluding home country) and 0 = when “no.” To meet the training and experience requirements of the LCP many individuals work in other countries. Once they gain a minimum of one-year of experience as a caregiver they are able to apply under the LCP. As previously mentioned, countries in both regions do not have protection for domestic workers often resulting in their mistreatment; hence third country experience is expected to have a positive effect on the dependent variable.

The ninth variable is the commitment to sponsor family (*Family*). It is defined as caregivers who intend to sponsor their children to come to Canada. The variable is measured using questions 15 and 16. These questions ask whether caregivers have children and if they intend to bring them to Canada. Answers are converted into 1= when “yes” and 0= when “no,” the respondents do not plan to bring family to Canada or the question does not apply to them presumably because they do not have dependents.

Prolonged family separation is seen as a cause of alienation from children (Langevin and Belleau, 2000). Spitzer and Torres (2008) state that caregivers will remain silent on employment violations to complete the 24 months of live-in work as fast as possible and reunite with their children. It is expected there is a positive relationship between those who plan to sponsor their children and the dependent variable.

The tenth variable is remittances (*Remit*). It is defined as a transfer of money from a foreign worker to their family in their home country (Boyd et al. 1986). It is measured via question 18 that asks if caregivers have family members financially dependent on their income inside and outside Canada. Based on the definition, any observations that indicate having family dependent on income in Canada are combined with no family dependent on income. Answers are coded into a dummy variable where 1= when “yes” and 0= when “no” to having family dependent on income. A large majority of foreign workers are young providers who leave their immediate families behind because of immigration and residential restrictions and the high cost of living in the host countries (Boyd et al., 1986). Caregivers remit a large percentage of their earnings to their families and are constrained to put their own needs on hold (Torres and Spitzer, 2008). The financial responsibilities caregivers have to their families’ pressures them to stay in their employment situation regardless of contract violations; hence, it is expected that remittances have a positive effect on the dependent variable.

The eleventh variable is English ability (*Eng*). It is measured using question 19 that asks caregivers to rate on a scale of one to five how comfortable they are in their ability to write, read and speak English. The reading and speaking are averaged to build the variable. CIC requirements state that caregivers must be able to speak, read and understand English (CIC, 2009a). The requirements make specific mention of a caregivers’ ability to read and speak only, therefore, the writing scale is not used in the regression analysis. This variable is important because caregivers who are more comfortable with their English language skills are more likely to report contract violations (Zaman et al., 2007); hence, it is expected that English ability will have a negative effect on the dependent variable.

The twelfth variable is employer compliance with immigration regulations (*IMMIreg*). Survey questions 28, 28a and 28b measure this variable by asking caregivers if they are provided a private room, if their room has a lock and if there is an intercom. An index is created using the

three alternatives. Questions 28 and 28a ask if the participants are provided with specific elements regulated under by CIC and are coded 1=when “yes” and 0 = when “no.” Question 28b asks if they have an intercom, an item that reduces privacy and answers are coded 0 = when “yes” and 1 = when “no.” An average is taken to represent the variable. This variable is important because studies have found that some caregivers are not provided private rooms instead sharing rooms with children, an elderly person or sleeping on the couch (PINAY, 2008; Oxman-Martinez et al., 2004). The level of compliance an employer has for immigration regulation is an indication of the likelihood that a caregiver will experience employment standards violations. Hence, it is expected that increased employer compliance with CIC regulations will have a negative effect on the dependent variable.

The thirteenth variable is employer compliance with the ESR (*ESR*). It is defined as the level of administrative compliance an employer demonstrates with Employment Standards Act regulations. Questions 38, 39 and 40 measure this variable by asking if a caregiver receives pay slips, is paid on time and has annual vacation time. An index is created using the three answers. Observations are coded 1 = when “yes” and 0 = when “no” for an employer complying with the specific ESR referred to. The answer “I don’t know” is combined with the “no” answer because there is no certainty that employers follow ESR requirements. This variable is measured using the average of the three alternatives. The closer the average is to 0, the less likely employers are complying and the closer to 1 the more employers are complying. Administrative compliance is different from the experiencing contract violations because it is procedural in nature. Procedural rules are different from the substantive rules of contracts because they create the method and means by which substantive rules are made and administered. Therefore, this variable is different from the dependent variable, because it represents administrative violations that are not associated with contract violations, as those who do not comply administratively with the ESR do

not necessarily break the substantive rules of contracts. It is therefore hypothesized that increased employer compliance with the ESR has a negative effect on the dependent variable.

The final variable is caregiver awareness of ESB information and processes (*ESBinfo*); it is defined as the level of knowledge a caregiver has with current ESB processes. It is measured through questions 31 to 34 that ask caregivers if they believe they have enough information on their employment rights, if they know how to file a complaint, if they know what the self-help kit is and if they can state what the current minimum wage in B.C. is. Although caregivers are not required to complete the self-help kit, the ESB recommends all employees and employers attempt to resolve issues prior to filing a formal complaint (PINAY, 2008; Oxman-Martinez et al., 2004). Interviews conducted in various studies show that informally caregivers attempt to talk with their employers about concerns prior to filing complaints. This indicates the possibility that some caregivers will use the kit if they were aware of its existence. Observations are coded in the following manner: questions 31, 32 and 33 are coded 1= when “no” and 0= when “yes” to being aware of the regulation or process in question. Question 34 asks caregivers to identify the current minimum wage in B.C., answers are coded 0= when answers identify eight dollars an hour and 1= otherwise. The average of the four alternatives is taken to create an index. Caregivers who are unaware of their rights are arguably at greater risk of employment standards violations because they are less likely to recognize that they are experiencing contract violations (Spitzer and Torres, 2008). Hence, it is expected that an increase in the lack of ESB information will result in a positive effect on the dependent variable.

Table 4 provides a summary of each hypothesis with reference to the expected effect for each explanatory variable on employment contract violations.

Table 4: Summary of Hypothesis for Explanatory Variables

Variable Name	Hypothesis (Effects on ECV)	Measure
Age	+	Average of intervals
Birth	+	1= Philippines 0= Not the Philippines
Edu	+	1= Did not complete College/University education 0= Completion of College/University education
Married	+	1= Married 0= Single/other
Other	+	1= Other 0= Single/married
Emps	-	Total number of employers worked for since coming to Canada
Longest	+/-	Total number of months worked for one employer
Third	+	1= Worked as a caregiver in Southeast Asia/Middle East (Excluding home country) 0= Did not work as a caregiver in Southeast Asia/Middle East
Family	+	1= Yes plan on bringing family to Canada 0= No do not plan on bringing family to Canada or the question does not apply to them
Remit	+	1= Yes has family financially dependent on income 0= No does not have family financially dependent on income or dependents are inside Canada
Eng	-	As an average of the reading and speaking scales (scale 1-5)
IMMIreg	-	Index between 0 and 1 0= No compliance 1 = Yes full compliance
ESR	-	Index between 0 and 1 1= Yes full compliance with ESB 0= No compliance with regulations
ESBinfo	+	Index between 0 and 1 1= No awareness of ESB 0= Yes awareness of ESB

7.2 Regression Results

Ordinary Least Squares regression is used to estimate the model. Two empirical specifications are developed. Model A is the basic specification such that:

$$\begin{aligned}
 ECV_i = & \beta_0 + \beta_1 \text{Age}_i + \beta_2 \text{Birth}_i - \beta_3 \text{Edu}_i + \beta_4 \text{Married}_i + \beta_5 \text{Other}_i + \beta_6 \text{Third}_i \\
 & + \beta_7 \text{Family}_i + \beta_8 \text{Remit}_i - \beta_9 \text{Eng}_i + \beta_{10} \text{Emps}_i + \beta_{11} \text{Longest}_i - \beta_{12} \text{IMMIreg}_i \\
 & - \beta_{13} \text{ESR}_i + \beta_{14} \text{ESBinfo}_i + \varepsilon_i
 \end{aligned}$$

Model B introduces some interactive variables:

$$\begin{aligned} ECV_i = & \beta_0 + \beta_1 \text{Age}_i + \beta_2 \text{Birth}_i - \beta_3 \text{Edu}_i + \beta_4 \text{Married}_i + \beta_5 \text{Other}_i + \beta_6 \text{Third}_i \\ & + \beta_7 \text{Family}_i + \beta_8 \text{Remit}_i - \beta_9 \text{Eng}_i + \beta_{10} \text{Emps}_i + \beta_{11} \text{Longest}_i - \beta_{12} \text{IMMIreg}_i \\ & - \beta_{13} \text{ESR}_i + \beta_{14} \text{ESBinfo}_i + \beta_{15} (\text{Years}_i * \text{ENGspeak}_i) + \beta_{16} (\text{Years}_i * \text{IMMIreg}_i) \\ & + \beta_{17} (\text{Years}_i * \text{ESR}_i) + \beta_{18} (\text{Status}_i * \text{ENGspeak}_i) + \varepsilon_i \end{aligned}$$

In model B the estimation the interactive variables are introduced one at a time. The first interaction is with the number of years the caregiver has been in Canada (*Years*). The second interaction is with the current status of the caregiver as a current or former LCP participant (*Status*). The interaction with *Years* tries to measure effects from time and the *Status*, the effect of no longer being a caregiver. Table 4 presents the results for model A. Table 1 in Appendix B gives the descriptive statistics of the variables.

In column 1 five variables are significantly different from zero and two of these have the opposite sign of what was expected. This model is tested for serial correlation and heteroskedasticity to ensure relationships found are statistically valid. Although, serial correlation is associated with time series data, it can also happen with cross sectional data when data is not ordered randomly. The Durbin-Watson score (not reported) of 1.92 confirms that there is no serial correlation.¹⁷ Heteroskedasticity relates to the variance of errors and therefore to the standard errors, of the coefficients. Although heteroskedasticity does not bias the coefficients there is a possibility that an effect may be found to be statistically significant, when in reality it is too weak to be confidently distinguished from zero. The LM value of 23.24 shows no sign of heteroskedasticity.¹⁸

The lack of significance of the English variable (*Eng*) is surprising, and therefore I separated the variable into two components to test the possibility that the level of comfort in reading (*ENGread*) and speaking English (*ENGspeak*) have separate effects on the dependent

¹⁷ Critical value of Durbin-Watson $d_o = 1.53$ and $d_u = 1.83$.

¹⁸ This specification passes the test for heteroskedasticity as the LM value is 37.6 with 140 d.f at 1%

variable. The specification in column 2 shows that in addition to the other significant variables, the speaking (*ENGspeak*) variable is significant with the expected sign. Therefore, for the rest of the analysis I keep the reading and speaking variables separate. The Durbin-Watson score for this model is 1.91 showing no sign of serial correlation. The LM value of 27.3 indicates no evidence of heteroskedasticity. There is also no indication of multicollinearity between any two variables because the simple correlation coefficient never surpasses .70 (see Appendix B).

The significance but incorrect sign for the level of information on ESB processes (*ESBinfo*) variable is also surprising. This variable is computed using four components, with question 31 asking for slightly different information than the other three. In the next specification, I removed question 31 (*ESBinfo – Q.31*) from the index because unlike the other questions, it does not ask participants specific information pertaining to the ESR. Column 3 shows that the removal of the question resulted in little noticeable effect. It also did not affect any other variables. However, the LM value of 31.0 indicates the presence of heteroskedasticity at a 10% level of significance.¹⁹

To try another avenue to address this variable, I split questions 32 (*Complaints*) and 34 (*Self-help*) because they address specific ESB process used to resolve employment violations. Column 4 shows that the complaint (*Complaints*) variable is significant; however, it has the incorrect sign. There is no obvious rationale for the difference in the sign indicating the possibility that this variable must be picking up something else. The split also had little effect on the other variables. It also shows no sign of heteroskedasticity with a LM value of 24.6.

¹⁹ The chi-square value with 140 d.f at a 10% = 28.4

Table 5: Estimated Regression Results for Model A

Variable Name	1. Original	2. Separate Read & Speak	3. Remove Q. 31 from ESInfo	4. Split Q. 32 & 34 from ESInfo
Constant	0.816 (3.835)	0.796 (3.751)	.802 (3.865)	.734 (3.576)
Age	0.001 (0.41)	0.001 (0.527)	0.001 (0.474)	0.001 (0.509)
Birth	-0.124 (-1.407)*	-0.131 (-1.485)*	-0.120 (-1.373)*	-0.124 (-1.401)*
Edu	0.034 (0.499)	0.039 (0.573)	0.048 (0.702)	0.038 (0.553)
Married	-0.058 (-0.980)	-0.060 (-1.020)	-0.061 (-1.035)	-0.053 (-0.904)
Other	-0.071 (-0.919)	-0.071 (-0.913)	-0.073 (-0.952)	-0.057 (-0.737)
Emps	0.020 (0.873)	0.014 (0.614)	0.016 (0.696)	0.018 (0.758)
Longest ¹	-0.002 (-1.270)	-0.002 (-1.387)	-0.002 (-1.324)	-0.002 (-1.207)
Third	0.070 (1.883)**	0.076 (2.037)**	0.082 (2.180)**	0.071 (1.885)**
Family	0.038 (0.667)	0.044 (0.762)	0.042 (0.733)	0.033 (0.569)
Remit	0.019 (0.399)	0.012 (0.258)	0.014 (0.296)	0.011 (0.227)
Eng	-0.031 (-1.197)	—	—	—
ENGread	—	0.027 (0.825)	0.024 (0.749)	-0.031 (0.956)
ENGspeak	—	-0.054 (-1.812)**	-0.052 (-1.768)**	-0.053 (-1.784)**
IMMIreg	-0.158 (-1.511)*	-0.171 (-1.633)*	-0.184 (-1.758)**	-0.155 (-1.474)*
ESR	-0.349 (-4.644)***	-0.345 (-4.603)***	-0.337 (-4.550)***	-0.340 (-4.513)***
ESInfo	-0.137 (-2.162)**	-0.136 (-2.154)**	—	—
ESInfo (- Q.31)	—	—	-0.137 (-2.446)**	—
Complaints	—	—	—	-0.058 (-1.447)*
Self-Help	—	—	—	-0.031 (-0.716)
Observations	156	156	156	156
D.F	141	140	140	139
Adjusted R ²	0.120	0.126	0.135	0.110
Schwarz	.14	.17	0.15	0.20
LM hetero. ²	23.2	27.3	31.0	24.6

t-value in parentheses for one-sided tests *** Significant at 1% ** Significant at 5% * Significant at 10%

¹ t-value for a 2-sided test

² The critical value for LM test at 10% is 28.4 and 5% is 31.4

Based on these results, the specification in column 2 offers the best overall explanatory fit. The adjusted $R^2 = 0.125$ indicating that this specification explains approximately 12.5% of the change in the dependent variable. Although the equation in column 3 has the highest adjusted R^2 , as mentioned, its LM value indicates the possibility of heteroskedasticity. This indicates the possibility that an effect in this specification may be found to be statistically significant, although it may not necessarily be confidently distinguishably from zero. The specification and coefficients in column 2 are used for more comments.

The English speaking (*ENGspeak*) variable is significant at 5% indicating that as the level of speaking ability increases by one unit on the scale, the intensity of contract violations declines by 0.054 (as a reminder, the dependent variable ranges between 0 and 1). Employer compliance with CIC regulations (*IMMIreg*) is also significant at 10%. So, when compliance with CIC regulations increases by one, such that if an employer were to go from no compliance to full compliance, the intensity of employment contracts violations declines by 0.171. Employer compliance with the ESR (*ESR*) is significant at 1% and indicates that an increase of one, for example when an employer goes from not complying at all with the ESR to full compliance, results in a decrease in the intensity of the dependent variable by 0.345. Lastly, the third country experience (*Third*) variable is significant at 5%; meaning that when participants have experience working in Southeast Asian or Middle Eastern countries there is a .076 index increase in the intensity of dependent variable. Therefore, employers who comply with regulations are less abusive and caregivers who do not speak English well or have transited through a third country are more likely to be contractually abused.

Model B introduces two interactive variables. The first interactive variables test to see if the relationship between significant explanatory variables and the dependent variable are different depending on how long participants have been in Canada or if they are current or former live-in caregivers. The first added variable is the length of time caregivers have been in Canada (*Years*).

This variable is measured in years, using 2009 as the ending point and may provide insight into the effect of recent immigration into Canada on vulnerability to experiencing contract violations. The second interactive variable is the status of participants (*Status*) at the time they filled out the survey. It is measured as current or former LCP participant and coded 1= “current caregiver” and 0 = “former caregiver.” Both variables measure the participant’s time in Canada and are therefore closely related. Each of the interactive variables is separately included in the specification to test which one offers the best fit. The number of years in Canada (*Years*) variable is multiplied by each of the following variables: the level of English speaking ability (*ENGspeak*), employer compliance with CIC regulations (*IMMIreg*) and employer compliance with the ESR (*ESR*). The variable measuring the current status (*Status*) of participants is multiplied by the level of English speaking ability variable (*ENGspeak*) only. Table 6 presents the results.

Table 6: Estimated Regression Results for Model B

Variable Name	1. Years*ENGspeak	2. Years*IMMreg	3. Years *ESR	4. Status*ENGspeak
Constant	0.842 (3.785)	0.884 (3.867)	0.816 (3.763)	0.949 (3.769)
Status	—	—	—	0.226 (-1.100)
Age	0.000 (0.149)	0.001 (0.240)	0.000 (0.181)	0.001 (0.475)
Birth	-0.121 (-1.354)*	-0.130 (-1.456)**	-0.123 (-1.386)*	-0.122 (-1.391)*
Education	0.043 (0.603)	0.048 (0.683)	0.036 (0.511)	0.042 (0.605)
Married	-0.046 (-0.752)	-0.055 (-0.912)	-0.050 (-0.815)	-0.054 (-0.921)
Other	-0.050 (-0.616)	-0.057 (-0.713)	-0.056 (-0.704)	-0.067 (-0.861)
Years	-0.009 (-0.271)**	-0.013 (-0.597)	0.006 (-0.359)	—
# Employers	0.014 (0.601)	0.013 (0.513)	0.013 (0.553)	0.014 (0.602)
Longest ¹	-0.002 (-1.284)	-0.003 (-1.987)**	-0.002 (-1.580)	-0.001 (-1.137)
3 rd country	0.073 (1.915)**	0.076 (2.036)**	0.075 (1.999)**	0.081 (2.154)**
Family	0.037 (0.638)	0.041 (0.721)	0.041 (0.694)	0.031 (0.543)
Remit	0.015 (0.313)	0.023 (0.485)	0.012 (0.264)	0.014 (0.311)
ENGread	0.029 (0.876)	0.028 (0.848)	0.027 (0.834)	0.026 (0.806)
ENGspeak	-0.066 (-1.753)**	-0.058 (-1.926)**	-0.056 (-1.878)**	-0.086 (-1.839)**
Years*ENGspeak	0.003 (0.413)	—	—	—
Status*ENGspeak	—	—	—	0.046 (0.944)
IMMreg	-0.165 (-1.555)**	-0.244 (-1.696)**	-0.164 (-1.540)*	-0.181 (-1.713)**
Years*IMMreg	—	0.022 (-0.828)	—	—
ESA	-0.343 (-4.503)***	-0.340 (-4.480)***	-0.343 (-3.514)***	-0.335 (-4.515)***
Years*ESR	—	—	-0.001 (-0.076)	—
ESBinfo	-0.136 (-2.156)**	-0.140 (-2.214)**	-0.136 (-2.140)**	-0.130 (-2.303)**
Observations	156	156	156	156
D.F	139	139	139	139
Adjusted R ²	0.120	0.123	0.118	0.133
Schwarz	0.215	0.212	0.217	0.200
LM hetero ²	29.51	28.54	31.44	29.29

t-value in parentheses for one-sided tests *** Significant at 1% ** Significant at 5% * Significant at 10%

¹ t-value is for a 2-sided test

² The critical value for LM test at 10% is 28.4 and 5% is 31.4

Columns 1, 2 and 3 test the possibility of different effects on the relationships between the dependent variable (*ECV*) and caregivers' ability to speak English (*ENGspeak*), employer compliance with CIC regulations (*IMMIreg*) and employer compliance with the ESR (*ESR*) depending on how many years caregivers have been in Canada. The results in these columns find that there is no effect. Thus, compliance and language ability are not related to the time spent in Canada by the caregivers. However, the introduction of this interactive variable has some effect on the entire specification as it causes the heteroskedasticity problem. This can result in the variance and therefore standard errors of the coefficients to be underestimated.

An important change in column 2 occurs with the variable representing the longest amount of time a caregiver has been with a single employer (*Longest*). This variable that previously was not significant is now significant at 5% with a negative sign. So longer work experience with an employer lowers contract violations. Another change occurs in column 3 with the significance level of the employer compliance with CIC regulations (*IMMIreg*). This variable decreases from 5% to 10% when the interactive variable is multiplied by the employer compliance with ESR (*ESR*) variable.

Column 4 introduces the status (*Status*) variable to assess whether the relationships between the dependent variable (*ECV*) and the level of speaking English variable (*ENGspeak*) are affected by whether participants are current or former live-in caregivers (*Status*). Column 4 results indicate no effect of participants' status (*Status*) on the relationship between the dependent variable (*ECV*) and participants' ability to speak English (*ENGspeak*).

Although the introduction of the interactive variables does not result in statistically significant results, it is clear that they have some effect in this model as their addition creates heteroskedasticity.

To summarize, my results show that the factors that influence the experiencing of employment contracts violations are knowledge of speaking English (*ENGspeak*), employer

compliance with CIC regulations (*IMMIreg*), employer compliance with the ESR (*ESR*) and experience working in Southeast Asian or Middle Eastern Countries (*Third*).

The significance of caregivers' ability to speak English (*ENGspeak*) is supported by the fact that caregivers who are experiencing employment standards violations must feel comfortable verbally expressing themselves in English to navigate, understand and acquire information on their working conditions and workplace rights. Stiell and England's (1997) study on domestic workers in Toronto found that language ability plays an important role in employer-employee relationships, as workers are better able to negotiate and communicate their situations with stronger language skills.

Employer compliance with CIC regulations (*IMMIreg*) and the ESR (*ESR*) are two important indicators associated with employment contract violations. These two variables are a signalling effect as employers that do not comply are more likely to abuse their employees. Literature tends to show a correlation between employer non-compliance with CIC regulations and non-compliance administratively with the ESR. Employers who do not abide by the basic CIC regulations are also employers who do not respect the procedural requirements of the ESR. Failure to comply with the administrative processes of the ESR, which outlines rules around timely payment of wages, proof of payment and vacation leave indicates that employers are more likely to violate substantive rules found in contract.

The significance of the third country variable (*Third*) in participants' vulnerability to contract violations is supported by a focus group reported in Oxman-Martinez et al. (2004). The group suggests that workers who have past experiences in the Middle East or "Asian Tiger" countries find contract violations in Canada to minor compared to their previous experiences and therefore more likely to view violation as minor accepting them as the norm.

My empirical findings suggest that policies should address the language and third country experience issues as well as the lack of general compliance by employers. The rest of this paper offers some policy avenues to alleviate contract violations with caregivers.

8: Policy Analysis

This section develops policy suggestions based on the results of the analysis. It includes both long and short-term policy objectives, suggested policy alternatives and it outlines the criteria used in the evaluation of policy alternatives.

8.1 Policy Objectives

To identify feasible policies, short and long-term goals must be defined. For the purpose of this study, short term is within the next 5 years (2010-2015) and long-term is defined as the subsequent 10 years (2015-2025).

The long-term objective is to have live-in caregivers treated equally and fairly by their employers. A study by Human Rights Watch (2006), states that “Estimating the prevalence of abuse is difficult given the lack of reporting mechanisms, the lack of legal protections and restrictions on the freedom of movement of domestic workers” (p.3). Statistics from March 2008 to March 2009 show that 104 caregiver complaints were filed and resolved.²⁰ However, due to privacy legislation this data does not account for open, unresolved cases. It is also important to consider that because of the isolated nature of caregiver work many employment standards violations go unreported and the number is probably much higher.

Hence, to achieve the long-term goal, short-term goals focus on increasing employer compliance with CIC regulations and the ESR, improving caregivers’ confidence levels and ensuring that all caregivers are aware of their labour rights within a short time frame of the start of their employment.

²⁰ Employment Standards Branch Statistic provided to me from West Coast Domestic Workers Association

8.2 Policy Options

My analysis shows three causes of concern: English speaking abilities of caregivers, third country working experience and employer non-compliance with CIC regulations and the ESR. In turn, these inform the design of the policy option.

Much of the research surrounding the LCP argues for the removal of the live-in requirement. Because there is a correlation with employment abuse and the live-in requirement that caregivers should be allowed to live out of their employers' homes. However, there are challenges that would be detrimental to caregivers and employers should the live-in requirement be removed. First, it would greatly reduce the flexibility employers have in the ability to complete their own employment. The purpose of the LCP is to assist working parents with the flexibility of employment and its removal could result in families seeking childcare elsewhere. Secondly, the objective of the LCP is to fill labour gap in live-in care work, as there is not a shortage of workers in live-out care work. As a result, the removal of the live-in clause could lead to caregivers no longer having to access permanent residency or potentially result in the elimination of the LCP program, being more detrimental to caregivers.

Secondly, if caregivers were required to find their own place to live they would face many challenges as new immigrants around affordability, references, and transportation. Because of high rental costs and low vacancy rates caregivers would have to live far away from their employer and use public transit to commute. They would also likely have to provide references they do not have to rent their accommodations. It is for these reasons that I do not consider the option to remove the live-in requirement in this research. In addition, this research focuses on employment standards violations, which are under the responsibility of the provincial government. Due to the division of responsibilities any changes associated with the LCP program are the responsibility of the federal government.

The current process and regulations for employment standards were described in detail in previous sections and will be only briefly discussed. Under CIC regulations employers must provide a private room with a lock, free from intercoms. Employers are also required to comply with the ESR surrounding contracts, minimum wages, hours of work, and job descriptions. However, there are currently no penalties in place for employers that do not comply with any regulations.

The following policy options build on the current LCP framework and requirements and are based on the findings of my regression analysis and literature review. They are also designed to meet the long- and short-term goals described above.

8.2.1 Option 1: Mandatory Employer Information Sessions

This option addresses the compliance with CIC regulations (*IMMIreg*) and the ESR (*ESR*) variables through educating employers on their responsibilities under CIC and the ESR. Employers who are aware of employee rights and of their obligations are more likely to comply with regulations.

The information sessions would be mandatory for all employers looking to hire live-in caregivers. Completion of the session would be a condition of hiring a caregiver and an employer would have to submit a completion certificate with their Labour Market Opinion application as proof of participation. Individuals from the ESB, caregiver non-profit organizations and employment agencies would work together to structure and deliver the content. Including these groups in the process will allow a diverse viewpoint to be delivered to employers. ESB staff would facilitate the information sessions.

The sessions would be modelled after the *Parent Information Sessions*,²¹ offered through Ontario's Ministry of the Attorney General. The purpose of these sessions is to assist parents in

²¹ Ontario Ministry of the Attorney General (2007).

identifying their roles and responsibilities in the separation process. The sessions cover parenting responsibilities and strategies for problem solving, community resources, assistance with paper work, the role of staff, employer obligations, and types of enforcement. The information is delivered in 2.5 hours and allows for questions and discussion.

In my analysis, I find that employer compliance with CIC regulations and the ESR have an effect on the intensity of contract violations experienced. Therefore, sessions would cover the following: the supplying of a private room, with a lock and no intercom, wage requirements, hours of work and overtime rules as well as who pays for the accidental breaking of items. Employers would also be informed of what to expect from caregivers in terms of cultural differences, attitudes and employee expectations.

This option benefits both the employer and caregiver. Employers are provided information on their responsibilities and liabilities and cultural sensitivity training, increasing their knowledge and the likelihood that they will comply with regulations. Caregivers can be confident that their employers are aware of their employment rights and expect positive experiences. As a result, caregivers may have more incentive to find out information on their rights and obligations as employees. Combined, there is potential for successful employer-employee relationships and the possibility of increased retention of caregivers in this industry.

8.2.2 Option 2: Caregiver Information Sessions

This option addresses the significance of the third country experience variable (*Third*) and English language speaking ability (*ENGspeak*), through education and language practice. Its goal is to increase caregivers' awareness and knowledge on employment rights in B.C. as previously mentioned, caregivers who have worked in another country often experience poor working conditions and see employment standards violations as of no consequence. Currently, caregivers can access information from agencies, friends and family, caregiver associations and

out-of-country training institutions. The diverse sources of information provide inconsistent and unreliable information to caregivers on Canadian culture, employment expectations and standards. Information sessions would provide caregivers with clear and consistent information. It also makes employers aware that caregivers have been taught their rights and understand their employers' responsibilities, thereby indirectly influencing employers' level of compliance.

Caregivers would be asked to take the orientation session within 90 days of their arrival in Canada. This is an appropriate period because it allows caregivers time to get to know their employer, their responsibilities and the Canadian culture. As well, once a caregiver arrives in B.C. employers have 30 days to provide their name to the domestic registry. Once completed the registry staff would inform caregivers and employers of the orientation sessions. The employer would receive a letter detailing information about the orientation session, the upcoming session dates and asked to give their caregiver a paid day off to attend. The caregiver would be sent a similar letter with details on the session dates. The letter would also advise the caregiver that their employer has been asked to provide them with a day to attend. They would also be encouraged to talk to the employer about their attendance.

Orientation session facilitators would be Ministry of Labour and caregiver non-profit organization staff. The Ministry of Labour staff would speak to specific employment regulations applicable to caregivers, and non-profit staff would speak to specific experiences common to caregivers i.e. working in third countries, accepting gifts as payment, pressure to work overtime and family commitments. The non-profit organizations would play an important role in articulating what is acceptable and unacceptable employer behaviour. Sessions would be predominantly presented in English, although facilitators would speak Filipino as well because they account for such a large majority of LCP participants. This would allow caregivers to practice speaking in English, but also allow those who are not yet as comfortable in English the

opportunity to express themselves. Sessions would be in an interactive format where caregivers ask questions, engage in discussions and share experiences.

The orientation sessions would be administered by the Ministry staff; however, caregiver organizations would play a large role facilitating and developing the structure, and content of the sessions. Sessions would be structured in a similar way as that offered to immigrants by the Government of Quebec²² and split into the following topics:

1. Getting established (2 to 3 hour session): introduction to Canadian culture and social services and programs available to caregivers. Open forum to talk about employer challenges and to ask questions.
2. Knowledge of employment rights (3 hours session): wage rates, pay statements, record keeping, allowable deductions, and hours of work, overtime rules, time banks and averaging agreements, statutory holidays and annual vacation pay, pregnancy and parental leave and termination of employment.
3. Available resources (1 Hour): information on the dispute resolution and complaint process and caregiver settlement and transition organizational resources, roles and responsibilities.

8.2.3 Option 3: Employer Monitoring

This policy option addresses employer compliance with CIC regulations (*IMMIreg*) and the ESR (*ESR*) through warnings and fines. Currently, employer compliance with CIC and ESA regulations is not monitored, leaving the onus on caregivers to report violations. This option involves investigating employers more proactively through random and scheduled checks similar to those performed by Child Protective Services Investigators in the Texas Department of Family and Protective Services program.²³ Investigators are required to inspect foster homes to determine compliance with applicable law, administrative rules, and minimum standard rules. The homes inspected are selected through a random sampling process. A report by the United States Department of Health and Human Services' Administration for Children and Families (2009)

²² *Gouvernement du Québec* (2010)

²³ Texas Family and Protective Services (2009)

found that stakeholders reported that the proactive efforts of the protection investigation program was very positive.

Under this option, employers in B.C. would be randomly selected for investigation to ensure they are complying with CIC regulations and the ESR within their homes. Investigators would be employed by the provincial government and use a warning system that gradually penalizes employers. The system would consist of warnings escalating to fines and only in extreme cases and after several incidents of non-compliance might there be a removal of the caregiver. Investigations would consist of home inspection visits by ESB staff. The home visits would be used to assess whether the employer was complying with CIC regulations, such as a private room for the caregiver with a lock. Investigators would also request other forms of evidence of ESR compliance such as caregivers' paystubs.

Due to the nature of the LCP and the fact that most caregivers apply for permanent residency after the completion of 24 months of live-in employment, investigations would be conducted within four to eight months of employment with any employer. Allowing four months to pass before investigations allows caregivers to become familiar with their employers and working conditions. Informal discussions with caregivers indicate that a majority of transgressions occur within the first three months of employment. The eight-month maximum ensures that those in worst-case situations are identified before it is too late.

Monitoring employers would ensure they learn their responsibilities and are held accountable when they do not. The random monitoring will increase the likelihood of employer compliance with regulations because employers will never know in advance whether they will be investigated. Moreover, the initiation of investigations by the public agency rather than at the caregiver's request gives greater comfort for the employer-caregiver relationship.

8.2.4 Option 4: NGO Mediation

This policy addresses the significant effect of the variable associated with third country experience (*Third*), compliance with CIC regulations (*IMMIreg*) and the ESR (*ESR*) and ability in speaking English. It aims to create an avenue for caregivers to address employment concerns with employers via a neutral third party through negotiation. This policy encourages caregivers to learn and understand their rights and employers to learn their responsibilities and obligations. The possibility of being taken to mediation by caregiver encourages employer compliance with CIC regulations and the ESR as complaints. It also allows caregivers to practice their English speaking ability by having to communicate issues with a mediator and their employer.

Non-governmental organizations (NGOs) support improvements of human conditions and play an important role in averting and resolving conflicts. Their non-governmental nature improves their ability to negotiate and settle disputes (Mawlawi, 1993). Allowing NGOs to act as third party mediators between caregivers and employers provides a neutral party to assist in the resolution process, without governmental involvement. It could be modeled on the Family Service of Greater Vancouver, which is an NGO that runs a mediation program for teens and parents. The program has a mandate to provide a creative and effective format for parents and teens experiencing disagreement to come together and resolve their problems. Mediators provide the forum to assist the participants to arrive at mutually acceptable resolutions to disputes. Staff qualifications are based on education, training in conflict resolution and experience working with youth (Family Services of Greater Vancouver, 2010).

A case study analysis of mediation programs in the United States Post Office and the Equal Employment Opportunity Commission found participants reported high degrees of satisfaction in the mediation process (Berggren 2006). Results were also positive when mediations were scheduled promptly and all participants had the opportunity to present their views separately prior to the beginning of the first session.

NGO caregiver organizations would design, implement and deliver the mediation program. NGO staff would work with Ministry staff to ensure a clear understanding of the ESR. The staff would also undergo extensive training highlighting their neutrality.

Mediations would be structured similar to those describe by Berggren (2006). There would be three stages in the mediation process 1) the pre-mediation stage, 2) the mediation stage, and 3) the post-mediation stage. The pre-mediation stage begins with caregivers making contact with the NGO organizations. After this contact, all other affected individuals are contacted and asked if they are willing to participate in the mediation process. During these initial contacts with all parties, mediators find out some of issues that will be discussed in mediation. The mediation would also occur in a neutral environment, such as the NGO offices or community centres, to allow all parties to feel comfortable. Parties would be advised that mediator suggestions are not legally binding; however, their notes and information could be provided to the ESB as background should a formal complaint be filed. In cases where any involved party refuses mediation, a formal complaint would be filed directly with the ESB.

The mediation stage begins with each party describing their complaints. Overall, the mediators' role is to facilitate discussion, clarify points of concern and determine agreed-to facts. Caregivers state their position first, and then employers have the opportunity to respond. Mediators ask question and attempt to clarify points. Once discussions conclude and mediators have as much information as possible, they propose solutions to the problems using the ESR as a guide. Caregivers and employers have the choice to agree or not agree. If they do not agree, the complaint would formally be referred to the ESB, accompanied by the information and background of the mediation for a decision. Similar to what is currently done, ESB decisions would be final and binding. The post mediation stage would include a follow-up call to both groups to ensure that both parties are following the agreed conditions.

8.3 Criteria

To determine the policy option that best accomplishes the goals and objectives mentioned above, five criteria have been selected. The criteria are cost, legal feasibility, stakeholder acceptability, effectiveness and equity. Each criterion is assigned a measure that is converted into a benchmark. Benchmarks represent an index of values from one to three. When a criterion has several components, the average of the index is taken to maintain an equal weight for each criterion. The policy scoring the highest number is deemed to be the most desirable. Criteria are equally weighted to allow as much information as possible to be taken into account by decision makers. Each criterion focuses on different components, which must be considered to ensure the success of the policy, however decision makers are the ones who ultimately determine what criteria is most important to them. Furthermore, the dynamic relationship of all stakeholders requires that they be considered equally because each will be affected differently by each policy.

Table 6 describes how I measured and valued each criterion.

Table 7: Criteria and Measures Matrix

Criteria	Definition	Measurement	Benchmark	Value
Cost				
<i>Government operating costs</i>	Financial cost to province to staff each policy	Number of new employees required to implement policy	Hiring ≥ 4 employees..... Hiring 3 employees..... Hiring ≤ 2 employees.....	Low (1) Moderate (2) High (3)
Legal Feasibility				
<i>Legislative requirements</i>	Can the policy be implemented within the current employment standards legislation?	Extent to which policy fits within current legislative framework	Within current legislation Requires a legislative amendment..... Requires new legislation.....	High (3) Moderate (2) Low (1)
Effectiveness				
<i>Rights awareness</i>	How well does the policy educate caregivers about their rights under BC Employment Standards	Percentage of caregivers reached through policy	>51%..... 31-50%..... <30%.....	High (3) Moderate (2) Low (1)
<i>Employer compliance</i>	How well does the policy inform employers about their responsibilities under the BC Employment Standards	The percentage of employers informed through the policy	>51%..... 31-50%..... <30%.....	High (3) Moderate (2) Low (1)
Key Stakeholder Acceptability				
<i>Acceptability among caregiver settlement and integration organizations</i>	The extent to which the policy is supported by caregiver non-profit groups	How much consultation and participation will these groups have under the policy?	Involved in all 3 steps of the process Involved in 1-2 steps of the process.. Involved in 0 steps of the process ...	High (3) Moderate (2) Low (1)
<i>Acceptability among employers</i>	The level of participation employers are required to have in each policy	What level of choice do employers have in their participation under the policy?	Employers do not have to comply with the policy..... Employers must comply with certain aspects of the policy and have the option to comply with other aspects..... Mandatory compliance with policy.....	High (3) Moderate (2) Low (1)
Horizontal Equity				
<i>Equality for all caregivers</i>	Does the policy treat all caregivers in the field equally?	Equal access to all caregivers in the field	Universal to all caregivers..... Partially applicable to caregivers... Not applicable to any caregivers....	High (3) Moderate (2) Low (1)

8.3.1 Cost

The cost of each policy option is the number of new workers that needs to be hired by the province to implement the policy. It is evaluated in the short term on an annual basis. The benchmark for cost is determined using the ratio of B.C. child protection workers to active cases as identified in a study of former protection workers by Bennett et al (2009). In this study the ratio of workers to the average number of active child protection cases is one worker for every 30 cases.²⁴ In 2008, there were 8,072 live-in caregivers present in B.C. To determine the number of caregivers that may require worker assistance, I used Trocmé et al., (2005) Canadian study on child abuse and neglect, that found 1% of children in foster care experienced maltreatment. This results in 81 potential caregivers requiring the assistance of three provincial workers.

Policies that require the hiring of four or more provincial employee are considered high in cost and assigned a value of 1, policies that require the hiring of three employees are considered moderate in cost and valued at 2, and policies that require two or less new provincial employees to be hired are considered low cost and represented by the value 3.

8.3.2 Legal Feasibility

This criterion evaluates how difficult each option would be to implement based on provincial employment standards legislation. It is measured on the degree to which the policy fits into the ESA. A policy is deemed to have high legal feasibility if it fits under the current ESA; moderate feasibility if it requires an amendment to a section of the legislation and low feasibility if it requires the addition of a new section to the legislation. Therefore, highly feasible policies are assigned a value of 3, moderately feasible policies are equal to 2 and low feasibility polices are represented by the number 1.

²⁴ Bennett et al., (2009) found that B.C. protection workers had between 26 and 35 active cases at any given time. An average of these numbers is taken to get the ratio of 1 worker for every 30 cases.

8.3.3 Effectiveness

This criterion measures the extent to which the policy educates caregivers on their employment standards rights and employers on their responsibilities. It is measured based on the number of caregivers reached and employers educated. If the policy reaches 51% or more of caregivers or employers, it is considered to be highly effective. If it reaches 31-50% of each group, it is considered to be moderately effective and if it reaches 30% or less of the targeted group, it is considered least effective. Policies that are highly effective are assigned a value of 3, moderately effective a value of 2, and least effective a value of 1. Caregivers and employers are evaluated separately so the average of the total score is computed to maintain an equal weight for each criterion.

8.3.4 Key Stakeholder Acceptability

The analysis of policy criteria must take into account the level of acceptance for the policy from two key stakeholder groups: caregiver settlement and integration organizations and employers. Settlement and integration NGOs are familiar with the challenges caregivers face and frequently act as their voice and representation. The measure to determine non-profit organization acceptability will be based on the level of involvement the groups will have in each policy. The policy process has the following steps: 1) consultation over policy 2) implementation of processes and 3) delivery of policy. An option is deemed to have full acceptability when non-profits are involved in all three steps; moderate acceptability when non-profits are involved in one to two steps of the policy and low acceptability when they have no involvement in the policy. Policies that are highly acceptable to caregiver settlement and integration organizations have a value of 3, moderately acceptable a value of 2 and low acceptability a value of 1.

Employer support of the policy alternative is an important consideration since employers hire and house caregivers. It is also employers' need for caregivers that has resulted in the LCP being implemented. Employer acceptability is defined as the level of participation employers are

required to have in each policy. It is measured as the level of choice employers have in their participation in the policy option. High acceptability occurs when employers do not have to comply with the policy option; moderate acceptability occurs if employers must comply with certain aspects of the policy and have the option to comply with the other parts, and low acceptability occurs when employers are mandated to comply with the entire policy. Again, policies that are highly acceptable have a value of 3, moderately acceptable a valued of 2 and least acceptable a value of 1. The average of the score of the two groups is computed.

8.3.5 Equity

This criterion takes into account other caregivers that are not part of the LCP and are described in the Census (2006) as babysitters, nannies and parents' helpers. Other caregivers who do not live in their employers home also have the potential to be abused, so that a policy also needs to consider their equal treatment. Equity is measured as the level of access all caregivers have to the suggested policy. Universal application of the policy to all caregivers is considered to be highly equitable; a policy that is partially accessible to caregivers is deemed to be moderately equitable and a policy that is not accessible to any other caregivers is considered to have low equity. Highly equitable policies are given a value of 3, moderately equitable policies are assessed a value of 2 and low equity policies have a value of 1.

8.4 Evaluation of Policy Options

This section evaluates the suggested policy options using the evaluation criteria outlined above. The results of this analysis will be the foundation for my policy recommendations. Table 8 at the end of the section shows a summary of the policy evaluation.

8.4.1 Evaluation of Policy Option 1: Employer Information Sessions

Cost: The cost to the provincial government would be low. The cost for this option is calculated based on the five-year short-term period. Assuming that the number of caregivers present in 2008 (2,597) is stable over the short-term period means that there will be 12,985 caregivers over the next five-year period. Based on the historical literature presented earlier, I assume that once caregivers complete their 24 months they apply for permanent residency and change employers. This results in the average employer having two caregivers over the course of the five years. Employers are only required to attend the information session once and therefore not all employers every year will require training. Dividing the 12,985 caregivers by 2 (average employers will hire two caregivers) results in 6,492.5 employers that require training over five years. This number divided by five results in 1,298 employers that would be required to attend the information session, annually or 108 employers monthly. Session would be delivered once per week with a maximum of 27 employers in attendance. Based on the ratio (one worker to 30 caregivers) this option would require the province to hire one new worker to manage, the program, deliver and facilitate the information sessions over the short-term period.

Legal feasibility: This policy option ranks moderate in feasibility. Mandatory attendance at an information session fits under the jurisdiction of the ESB and, therefore, requires no changes to the ESA. However, the requirement that the employer would have to submit a certificate of completion with their LMO application to the federal government would require some legislative amendments and an information sharing agreement between the ESB and CIC.

Effectiveness: The effectiveness of this policy to inform caregivers about their rights is low. Since this option targets the educating of employers it does not directly reach any caregivers. However, the effectiveness of this policy to inform employers is high. The requirement that any employers must provide proof of an information session attendance with their application for an LMO ensures that a majority of employers is reached.

Stakeholder acceptability: Acceptability for this policy among caregiver organizations is moderate. The knowledge these groups have on the issues and types of violations frequently occurring to caregivers qualifies them to be consulted on the content of the information sessions. However, they will not be involved in the implementation or delivery of the sessions. This policy is mandatory for employers wanting to hire a live-in caregiver for the first time. Employers will have limited flexibility in completing the session, as they will have to work with pre determined dates; possibly having to take time away from their employment or leisure and family activities. Due to the mandatory nature and lack of flexibility available for employers this policy ranks low for acceptability among employers.

Equity: Lastly, this policy only focuses on employers who participate in the LCP. It does not include caregivers of any kind and therefore is not equitable and ranks low.

Evaluation of Policy Option 2: Caregiver Orientation Sessions

Cost: The initial cost of this policy to the provincial government, when applied only to LCP participants, will be low. Using the number of caregiver entries from 2008 (2,597) and dividing this number by 12 results in approximately 216 caregivers entering B.C. every month. If one orientation session were run per week (i.e. divide by 4) there would be 54 caregivers attending. Using the ratio of one worker for every 30 caregivers, this would require 2 provincial workers to manage, implement and facilitate the information sessions. This option could be opened to all other caregivers in the industry such as those employed as babysitters, nannies and parents' helpers. Opening up the orientation sessions to this group would result in an increase in the

number of workers required. The total number of female workers in the caregiver industry in 2006 was 10,385.²⁵ The total number of these types of workers inside private households was 7,790 and represents 70% of workers. Using this number as a proxy for those who are live-in caregivers, indicates that there are a remaining 30% that could be included in the information session. This increases number of attendees to the sessions to 70.2. This divided by 30 (one worker for every 30 caregivers) results in approximately 2.5 provincial workers required to administer the orientation sessions to all caregivers in the industry. Therefore, including caregivers that are not in the LCP marginally increases the number of workers required by 0.5, making it a moderate cost policy.

Legal feasibility: This policy falls within the current ESA legislation and therefore ranks high in legal feasibility.

Effectiveness: The effectiveness of this policy to educate and reach caregivers is high. Since caregivers are required to attend the sessions, almost all caregivers will be reached through this policy. The effectiveness of this policy to ensure employer compliance by informing them of their responsibilities is low. Employers are not targeted by this policy, resulting in 0% of employers gaining information directly. This results in employers being less likely to learn about and comply with the ESR.

Stakeholder acceptability: Acceptability for this policy by caregiver organizations is high. The organizations will be involved in the entire process from consultation to implementation and delivery. Acceptability among employers will be moderate, as they have to comply with certain requirements of the policy such as providing their caregivers with a day off to attend the sessions but are not required to attend the sessions themselves.

Equity: Opening up the information session to other caregivers employed as babysitters, nannies and parents' helpers allow this policy to be highly equitable. These groups would benefit from

²⁵ Data for this paragraph is taken from Statistics Canada (2010).

gaining increased information on basic ESR as they are also susceptible to some of the similar abuses as live-in caregivers, because they work in a private home.

8.4.2 Evaluation of Policy Option 3: Employer Monitoring

Cost: To determine the annual cost of this option I use the number of caregivers that entered B.C. in 2008 (2,597). To calculate the number of employers that will be investigated I use the number of caregivers in my sample that indicated that they had experience contract violations (37.1%) as representative of the population that will experience violations in their contracts in 2008. This results in the investigation of 963 employers per year (i.e. 2597 multiplied by 0.371) and approximately 80 (i.e. divide by 12) per month. Using the ratio of 1 investigator for every 30 cases, and factoring in the administration work, this requires the hiring of approximately 3 provincial investigators, making it a high cost policy.

Legal Feasibility: This option requires an amendment to legislation and is considered moderately feasible. The ESB has no authority to enforce federal legislation and remove caregivers from the home of their employers. Their jurisdiction would be restricted to ESR contraventions only. The system would be one of gradual penalties consisting of warnings and fines, where removal would occur only in extreme situations. To convey information to CIC, an information-sharing agreement would be necessary. This would take time and commitment from the CIC and ESB.

Effectiveness: This option is ranked low for educating caregivers on their employment rights because it focuses on employers and not on caregivers. All employers looking to hire live-in caregivers will be informed of their responsibilities and are more likely to ensure they understand them due to the possibility of random investigations. With this policy, it is likely that most employers are informed of their employment responsibilities and therefore ranks high.

Key stakeholder acceptability: Caregiver organizations will be involved in the consultation of this policy because of their intricate knowledge on the types and forms of violations that occur. They

will assist provincial staff in identifying abusive situations and determining processes around removal and support of caregivers. However, they do not have the power to implement the policy or deliver the policy (i.e. investigate complaints or monitor employers). Thus, this policy option is considered to rank moderately. Since all employers that hire live-in caregivers are subject to random monitoring and must comply with investigations if selected, this policy is considered to have low acceptability among employers.

Equity: This option is not equitable because it cannot be applied to any caregivers.

8.4.3 Evaluation of Policy Option 4: NGO Mediation

Cost: The cost of this policy to the provincial government in the number of workers hired is low because NGOs would administer the mediations. However, the government would have to provide funding to the organizations to assist with set up and ongoing administrative costs to pay staff. NGOs would be responsible to administer and facilitate the mediations with employers and employees. The only staff resource the provincial government would have to supply is access to current ESB staff for information on regulations. This policy could also include mediation services for other caregivers not in the LCP. This group represents approximately 30% of those employed in the caregiving industry. If this option were opened up to these caregivers, the number of workers seeking mediations services would increase by 30% thus raising administrative costs.

Legal feasibility: Part of the ESB's mandate is to encourage open communication between employers and employees and to provide fair and efficient resolution of disputes. However, having third party mediation requires a legislative amendment to allow the ESB to contract out this service.

Effectiveness: The effectiveness of this policy to inform and educate caregivers is low. This policy does not aim to educate and share information regarding their employment rights. To

participate in this policy, caregivers must have some awareness of their rights and are likely to educate themselves on their responsibilities. However, using the number of caregivers that filed formal complaints to the ESB in 2008 (104) as the number that would use the mediation services indicates that less than 30% of caregivers would be reached through this policy. The effectiveness of this policy to reach and inform employers about their responsibilities is also low. This policy does not aim to directly educate employers; however, employers who are served with requests for mediations are likely to educate themselves on their responsibilities. Using the formal complaints numbers above, this policy is expected to reach less than 30% of employers.

Stakeholder acceptability: Acceptability from caregiver organizations is high due to their full involvement. The groups will work with the ESB to develop the process, implement and facilitate the entire mediation program. Employers have the option to decline participation in the mediation and go directly to the ESB adjudication process. They also have the option to agree or not agree to the solutions proposed by the mediator. Their discretionary participation results in this policy ranking high for employer acceptability.

Equity: Other caregivers are able to take part in the NGO mediations and therefore this policy is highly equitable.

Table 8: Policy Evaluation Matrix

Policy Option	Option 1 Employer Orientation Session	Option 2 Caregiver Information Session	Option 3 Employer Monitoring	Option 4 NGO Mediation
Cost				
Number of Provincial Staff	High 3	Moderate 2	Low 1	High 3
Legal Feasibility				
Legislative Requirements	Moderate 2	High 3	Low 1	Moderate 2
Effectiveness				
Caregivers Rights Awareness	Low 1	High 3	Low 1	Low 1
Employer Compliance	High 3	Low 1	High 3	Low 1
<i>Average</i>	2	2	2	1
Stakeholder Acceptability				
Caregiver Organizations	Moderate 2	High 3	Moderate 2	High 3
Employers	Low 1	Moderate 2	Low 1	High 3
<i>Average</i>	1.5	2.5	1.5	3
Horizontal Equity				
Equality for all caregivers in private households	Low 1	High 3	Low 1	High 3
Total (Max 15)	9.5	12.5	6.5	12

8.5 Policy Recommendations

The policy option that is recommended based on the evaluation is the Caregiver Orientation Sessions. This policy has the highest total value. The orientation sessions provide caregivers with reliable information within a short period of beginning work. It provides them with the resources and increased confidence to correct employer behaviour prior to employment standards violations. The information sessions will also provide them with the opportunity to speak to other caregivers and experts and address concerns carried forward from working in other

countries. All of this will ease their transition into Canadian culture and standardize expectations. These sessions are a proactive way to reduce the vulnerability of caregivers to contract violation. Therefore, I recommend implementing this policy as a way to reduce the vulnerability of caregivers to employment standards violations.

Interviews of two stakeholder groups were conducted to gain feedback on the recommended policy options. The interview with a representative of the ESB²⁶ found that education is a large component of many of their programs, although they are optional. The ESB representative stated that more education is always beneficial and thus approved of orientation sessions.

The second policy interview was done with the CDWCR.²⁷ This group is highly involved in the caregiver community and runs information sessions for members. The interviewee indicated that the sessions were always well attended and provided much needed information to many caregivers. She cites the information sessions as a “must for caregivers” and states that many caregivers are not aware of all their employment rights. Based on her experiences she feels that caregivers are more trusting of settlement organizations because governments in third world countries are often corrupt and do not have the best interest of their people at heart. She supports the partnership between the ESB and caregiver organizations and states that caregivers are likely to be more receptive to both groups presenting information together. She also believes that requiring employers to support their employees in their attendance would encourage employers to learn about their roles and responsibilities.

²⁶ Personal communication via email correspondence on February 19, 2010 with Jennifer Hagen, Program Advisor, Employment Standards Branch.

²⁷ Personal communication via email on February 23, 2010 with founding member, Lorina Serafico.

9: Conclusion

This research examines the deficiencies of the Live-in Caregiver Program. It investigates the factors that contribute to caregivers' vulnerability to employment standards violations and suggests policies to reduce caregiver risk. Historically, domestics have played a large role in assisting the needs of Canadian families. Over time, domestic work has become increasingly formalized, and policy around domestic workers has evolved into the current Live-in Caregiver Program.

Data for this research was gathered through the administration of a survey to current and former live-in Metro Vancouver caregivers. Using a statistical regression analysis, I found that the three factors influencing the vulnerability of caregivers to employment standards violations are of level of English-speaking ability, employer compliance with regulations and experience working in Southeast Asian or Middle Eastern countries. These factors, guided by the objectives, contribute to the creation and are exploited by each policy options.

In order to combat caregiver vulnerability to employment standards violations, the best alternative is the introduction of orientation sessions for caregivers. The sessions would provide an avenue for preventing employment standards violations through education and awareness. They would increase caregivers' knowledge of employment rights, confidence and allow them the opportunity to improve their speaking abilities through discussions. Sessions would also provide access to valuable resources such as access to English language courses.

On December 12, 2009 the federal government proposed changes to the LCP; however, the changes do not reflect the results of this study, and, therefore, I strongly suggest that the province follow with changes focused on increasing the English-speaking ability of caregivers,

educating caregivers about their employment rights, and ensuring employer compliance with CIC regulations and the ESR. Implementing information sessions targeting caregivers is a good short-term start to increasing their protection.

My capstone addresses major factors that contribute to the vulnerability of caregivers to abuse. One limitation of this research is that it is based on a relatively small sample at a single point in time. One possible area to consider for future research would be to investigate caregiver employment violations in B.C over time. This could be done through the initial surveying of caregivers as they enter B.C with on going interviews, surveying or follow ups throughout their first 24 months in the LCP. An extensive study such as this would identify frequency and intensity of employment abuse within a larger group, over a longer period of time. This may assist in demonstrating how serious the problem is in B.C and also provide greater insight to the types of abuse occurring.

Appendix A – Live-in Caregiver Survey

The Live-In Caregiver Program: A Survey of Vancouver Caregivers Working Experiences



Survey information: The objective of this survey is to gain an understanding of the experiences and employment conditions of current and former participants of the Live-in Caregiver Program (LCP). The purpose of this survey is to document and understand live-in caregivers' experiences under the LCP. The information acquired will be used to develop and inform a public policy report on the LCP being undertaken by Tracy Kalaw, a Simon Fraser University graduate student as part her degree requirements.

Your answers are CONFIDENTIAL: any identifying details will not be used in the reports or publications. Your confidentiality will be respected to the full extent of the law. However, I am required to report any illegal activity (such as child abuse). All Survey data will be stored on a flash drive, which will be kept in a locked drawer when not in use. As per university policy, the data will be stored for a period of two years following the completion of the study and then be destroyed. If you have any concerns or complaints, please contact Dr. Hal Weinberg, Director of SFU's Office of Research Ethics, at hal_weinberg@sfu.ca or 778-782-6593. Research results can be obtained by contacting tkalaw@sfu.ca

Permission has not been obtained from your employer to conduct this study. However, there are no risks associated with the study other than those encountered by you in the aspects your everyday life. Refusal to participate will not have an adverse effect on your employment, or the evaluation of your organization/company. You are free to stop your participation and exit the survey at any time. The principle researcher for this study is Tracy Kalaw (tkalaw@sfu.ca). The faculty supervisor for this research is Dr. Dominique Gross (dgross@sfu.ca).

If you are a current or former live-in caregiver in the Lower Mainland please volunteer your time to answer these questions. The survey will take approximately 10 minutes of your time. ****Please only complete this survey once****

By Filling out this survey you are consenting to participate in the study.

- 1) Please tell me if you are a current or former live-in caregiver: Current Former

Tell me about yourself

- 2) Age 19-25 26-35 36-45 46-55 56+

- 3) Female Male

- 4) In what country were you born? _____

- 5) What city do you currently live in? _____

- 6) What is your highest level of completed education?
Primary/Elementary School High School College/University

- 7) How did you first come to Canada?
Live-in Caregiver Program Other Please specify _____

- 8) What is your current immigration status in Canada?
Live-in Caregiver Program Open Work Permit
Permanent Resident Canadian Citizen
Other please specify _____

- 9) What year did you enter Canada? _____
- 10) Did you come directly from your country of birth? Yes No
- a) **If not**, from which country did you travel to Canada from? _____
- 11) Did you work as a caregiver/domestic before coming to Canada? Yes No
- a) **If yes**, in what country? _____
- 12) If an agency assisted you to come, did you really have a live-in caregiver job for you upon your arrival?
Yes No Does not apply to me
- A) **If yes**, did you pay a fee to your agency? Yes No
- 13) Prior to becoming a caregiver, what type of work did you do in your home country?
Please specify: _____
- 14) What is (or was at the time you were a caregiver) your marital status? (Check only one):
Single Married Other
- 15) How many children do you have? _____
- 16) Do you (or did you when you were a live-in caregiver) plan on bringing them into Canada?
Yes No Does not apply to me
- 17) Is (was at the time) your family in Canada? Yes No Does not apply to me
- 18) Do you (or did you at the time) have family members who are financially dependent on your income?
In Canada: Yes No Outside Canada: Yes No
- 19) Please rate how comfortable you are (or were at the time you were a caregiver) in your knowledge of the English language (1-not comfortable at all – 5 very comfortable):
Reading 1 2 3 4 5 Writing 1 2 3 4 5 Speaking 1 2 3 4 5
- 20) How many months have you worked (or did you work) in Canada as a live-in caregiver since you arrived?

- 21) How many employers have you had (or did you have) as a live-in caregiver? _____
- 22) What is the longest you have (or had) ever worked for an employer as a live-in caregiver? _____ (months)

Tell me about your work as a live-in caregiver

23) In your work, are (or were) you a live-in caregiver:

- a) Of children? Yes How many? _____ No
- b) Of an adult with a disability? Yes How many? _____ No
- c) Of an elderly person? Yes How many? _____ No

24) What are (or were) your duties inside the home of your employer?

- Take care of/or supervise children, adult with a disability or elderly person? Yes No
- Other? Please be specific. Yes No

25) What are (or were) your usual hours of work (if it varies please put your most common)?
(for example: 8am-5pm) _____

Tell me about your work conditions as a current or former live-in caregiver.

The following questions applies to the longest employer you have worked for:

26) Do (or did) you know what your employer(s) do for work?

- Yes No **If yes**, and you know it, what is it? _____

27) Did you sign a live-in caregiver contract with your employer? Yes No

- a) **If yes**, do you have a copy of your contract? Yes No
- b) **If yes**, did someone go over this contract with you? Yes No

28) If you are (or when) you were a live-in caregiver, do/did you have a private room? Yes No

- a) Does/did your room have a lock? Yes No
- b) Does/did your room have an intercom? Yes No

29) Have (or had) you experienced any of the following on more than one occasion as a live-in caregiver:

- Not receive wage stated in contract Yes No
- Not agreed to unpaid overtime Yes No
- Working outside of job description Yes No
- Not agreed to long hours (over 8 hours day/40 hours a week) Yes No
- Had to pay for anything you break or damage while working Yes No

- 30) Have (or had) you ever experienced:
- | | | |
|--|------------------------------|-----------------------------|
| Pressured to engage in unsure or uncomfortable work? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Verbally/physically mistreated by your employer? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
- 31) Do you believe you have enough information about your rights as a worker in B.C? Yes No
- a) **If yes**, where did you get the information?

- 32) Are you aware of how to file a complaint about your working conditions? Yes No
- a) **If yes**, where _____
- 33) Do you know what the employment standards branch “self help kit” is? Yes No
- 34) What is the current minimum wage in B.C? _____ I don't know
- 35) Do (or did) you usually get uninterrupted breaks (time for yourself) during the day Yes No
- a) **If yes**, usually how long are (or were) your breaks? _____ (Minutes)
- 36) What is the longest period of time you worked during the day without getting a break? _____
- 37) Do (or did) you get days off for statutory holidays? (Example: Thanksgiving, Easter Monday, Canada Day, Christmas)
- Yes No Sometimes Given alternative day off
- a) **If yes**, are you paid for these days off? Yes No
- b) **If no**, at what rate are you paid for those days? Regular rate Overtime rate (double-time)
- 38) Do (or did) you receive a pay slip from your employer that details your hours, deductions and final pay every week or every 2 weeks? Yes No I don't know
- 39) Are (or were) you paid on time? Yes No I don't know
- 40) Do (or did) you have vacation time every year? Yes No I don't know
- a) **If yes**, are (were) you paid for this vacation time? Yes No I don't know
- b) **If yes**, how much vacation time do (or did) you get per year? _____

Appendix B – Data Analyses

Table 1: Variable Descriptive Statistics

	ECV	Age	Birth	Edu	Married	Other	Emps	Longest	Third	Family	Remit	ENGread	ENGspeak	IMMIreg	ESR	ESBinfo
Mean	0.15	36.75	0.95	0.08	0.37	0.10	1.56	24.55	0.56	0.51	0.78	4.51	4.13	0.88	0.81	0.49
Maximum	1.00	60.50	1.00	1.00	1.00	1.00	5.00	84.00	1.00	1.00	1.00	5.00	5.00	1.00	1.00	1.00
Minimum	0.00	22.00	0.00	0.00	0.00	0.00	1.00	2.00	0.00	0.00	0.00	1.00	1.00	0.33	0.00	0.00
Std. Dev.	0.23	8.57	0.22	0.27	0.48	0.30	0.81	15.13	0.50	0.50	0.41	0.72	0.80	0.18	0.24	0.31

Table 2: Correlation Coefficients Between Explanatory Variables

	Age	Birth	Edu	Emps	ENGread	ENGspeak	ESAinfo	ESR	Family	IMMIreg	Longest	Married	Other	Remit	Status	Third	Years
Age	1																
Birth	0.131	1															
Edu	0.065	-0.260	1														
Emps	0.186	-0.053	0.037	1													
ENGread	-0.020	-0.038	0.031	0.060	1												
ENGspeak	0.033	-0.072	0.074	-0.062	0.656	1											
ESAinfo	-0.208	0.010	0.119	-0.060	-0.234	-0.193	1										
ESR	0.157	-0.061	-0.041	-0.026	0.105	0.147	-0.194	1									
Family	0.345	0.235	-0.052	0.181	-0.018	0.014	-0.034	0.028	1								
IMMIreg	-0.065	0.013	-0.039	0.142	-0.028	-0.108	-0.096	0.109	0.106	1							
Longest	0.283	-0.028	0.131	-0.169	0.047	0.038	-0.079	-0.001	0.006	-0.090	1						
Married	0.220	0.176	-0.019	0.113	0.021	0.012	-0.039	0.039	0.643	0.170	-0.080	1					
Other	0.262	-0.023	-0.013	0.122	-0.018	0.029	-0.064	0.014	0.279	-0.075	0.096	-0.247	1				
Remit	0.076	0.300	-0.081	-0.112	-0.081	-0.149	0.087	-0.068	0.286	0.066	0.081	0.272	0.014	1			
Status	-0.015	0.041	0.028	-0.174	-0.014	0.016	0.023	0.020	-0.104	0.055	0.056	-0.064	-0.028	-0.001	1		
Third	-0.010	0.203	-0.082	-0.097	-0.126	-0.051	0.191	-0.070	0.102	0.174	0.045	0.086	0.072	0.124	0.075	1	
Years	0.416	-0.100	0.178	-0.006	0.067	0.130	-0.045	0.083	-0.032	-0.158	0.548	-0.127	0.021	-0.055	0.066	-0.041	1

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