GLOBAL CARE CHAIN & GENDER INEQUALITY:
THE CASE OF PHILIPPINES, SRI LANKA &
BANGLADESH

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Abstract

Revisiting the Global Care Chain literature, I reflect on the ways in which care chain presents an alternative picture of care work and reproduce and reinforce gender inequalities to promote neoliberalization. I argue that both the rhetoric meaning and practice of care work inflects the broadest moral contradiction, ambivalence and hybridity of our social and political world today. Critiques of inequalities in global caring, therefore, need to pay attention to the relative philosophical canon. The study is qualitative and based on empirical findings basically from secondary sources of data. Empirical evidence reveals that despite significant progress in the global female labor force through the global care chain, its construction is built on sexist stereotype practices and policies. Findings further demonstrate that this global care chain misrepresents and devalues care work. The study concludes that although female labor force has increased by promoting the global care chain over the decades, the reduction of gender inequality of the global labor market has not happened simultaneously, rather this relocation of female caregivers has reinforced and reproduced gender inequity to many extents.

Contact: shafiqul@bus.uiu.ac.bd The author declares that he has no relevant or material financial interests that relate to the research described in this paper. Also, the author declares that the submitted paper is his original work and that, upon publication, nothing contained in it will not constitute an infringement of any copyright. Paper received 17.01.2018. Approved 20.03.2018. This paper is licensed under the Creative Commons Attribution-Non Commercial-No Derives 3.0. License. This paper is published with Open Access at www.socioeconomica.info. The author would like to thank the reviewers of this journal for their valuable comments and suggestions on the earlier version of this paper. The quality of this paper has greatly improved from those comments.
1. Introduction

The onward process of globalization and the new economy encapsulate the transformation of economic and social relations across the globe. Since people and places are increasingly interlinked through the organization of work, the flows of goods and services and the exchange of ideas (Perrons, 2004:1). It is true that one of the significant achievements of globalization and new geography of economy is the increase of feminization of employment over the last few decades. But here the point of departure is that this relocation of gender-based labor displacement in the spectrum of globalization has aggravated the gender relations in most cases rather than to ease it (Nguyen, 2017:199 and Perrons, 2004:14). Many earlier studies along with anecdotal sources reveal that the global care chain especially from the global south to the global north has raised alarming situation of gender discrimination. According to Isaksen (2007:44) the new marketization and commercialization of care services seem to initiate increased social differentiation and at the same time do not necessarily affect the traditional gender based division of labor in more positive direction. As a result the contemporary world is characterized by difference rather than uniformity and widening rather than narrowing inequality; while some people and places are involved in highly interactive global networks others are largely excluded, creating new and reinforcing old patterns of uneven development (Perrons, 2004:1) in general and gender disparities in particular.

During the last few decades new economic multifaceted-characteristics along with new division of labor has undergone with lots of discussion and criticism mainly focused by feminist scholars. Although women participation in global labor market got some re-evaluation in the policy reformation, labor-based inequalities is still unfocused to a larger extent. Ball (2008:54) argues “scholarship regarding the effects of the economic reforms and growth of the last twenty-five years has focused on female labor force participation and feminization of the labor force, while less attention has been given to global trends in job segregation by sex.” However, the most common critiques those have been generalizing these feature of global care service and gender inequalities is that, the long-standing and widespread masculine ethics and practices along with patriarchal nature of society tend to favor the status quo in most cases of unequal gender relations. Since gender analysis has increasingly widened its scope to reveal the ways in which gender inequality is constructed and reproduced in diverse institutional settings,
including those pertaining to markets and macroeconomic flows. Many scholars have argued (i.e. Perrons, 2004; Parreñas 2001; Hochschild, 2000 and Yeats, 2004) that this phenomenon has to be considered within the context of globalization, which has embodied the transforming social, economic, political, and cultural orders and tended to the reinforcement of gender inequality from domestic to global arenas.

However, the aim of this paper is to discuss the new character of feminization of employment in general and the emerging breakthrough of global care chain in particular which represents an alternative picture of care work. This article examines the female immigrants experience who has become the part of the global care chain in the new geography of economy. More specifically in this article I intend to shed lights on how this global care chain might contribute in the reproduction and reinforcement of gender inequalities. Thus the principal research question throughout this study is: How the new feminization of employments (Global Care Chain) reinforces and reproduces inequalities in the global labour market in terms of gender differences?

2. Literature Reviews

Until recently, care has been marginalized in the Western canonical tradition of thought compared to other ethical concepts such as justice and freedom (Nguyen, 2017:199). In fact, although care works is deeply embedded with gender stereotypical practices and hence a critical reinforcement factor of gender inequality, the importance of care as a global public and political issue gained momentum in the late 1990s with the emergence of the Global Care Chain approach (Hochschild, 2000 cited in Nguyen, 2017:199). However, care is one of the original feminist concepts (Daly, 2002:252), which primarily focus on how women’s role as wife, mother, and daughter required that they undertake unpaid and paid domestic and personal services. Anderson (1997:38) states that it includes all the work of the household: cooking, cleaning, shopping, washing, sewing, serving at table ironing and may be extended to cover gardening, chopping wood, washing car, feeding, walking and caring for pets, performing intimate services for their employers such toweling them dry after a bath, care of children, disabled and elderly (Nguyen, 2017:199-200). Sociologically such roles were analyzed in terms of the power relations of marriage and kinship; economically they were linked to the division of labor and the distribution of economic privilege and power (Daly, 2002:252). Moreover, commercialization of care work now made the power relation more dynamic and visible as the organization and state play an important role in this commercialization, as a result gender
inequality become more intensified than ever in the public sphere through global care chain.

The concept of global care chains and the related body of work on the growth of the international market in domestic workers has contributed in important ways to a range of research agendas. In bringing social reproductive labor into the analytical frame, they have made critical contributions to our understandings of globalization and migration processes (Killey, 2010:127). However, it is a concept which first formally developed by Hochschild (2000, 2003, 2009) basing on the empirical data from the researches made by Salazar Parreñas, although few earlier feminist scholars e.g. Gilling (1993), Joan Toronto (1993) and Selma Seven-huijsen (1998) has made contribution in its literature. Hochschild has defined global care chain as: “a series of personal links between people across the globe based on the paid or unpaid work of caring (2000:131).” Although not explicit in this given definition, the “classical” global care chain scenarios as described first by her presents the “distribution” of care in the globalized scene as a “one-way traffic” from the rural to the urban, from the poor country to the richer one: a mother from a poor country or region migrates to a wealthier one to engage in paid domestic care work there. More broadly it focuses on the gender relations in a dynamic process in terms of migration, care works and gender relations as Yeats has argued that “it captures the significance of transnational care services and the international division of reproductive labor as integral features of the contemporary international economy that are otherwise neglected: by ‘globalization studies’ due to its fixation on states, markets and paid labor (Yeates 2004:370).” She further argues that by ‘migration studies’ which has failed to take account of the importance of gender roles and identities to household strategies, networks and transnational migration; and by ‘care studies’ which, although fully conversant with the importance of domestic care economies and the divisions of paid and unpaid care work, pays little attention to the transnational processes having an impact on these (ibid, p. 370).”

Another consideration in understanding the global care chain lies in the areas of new geography of economy. Until recently, in the changing fashion of its nature and focus, gender issue has come under the spotlight with a massive discussion to be included within this diaspora. As Cope (1997:91) has stated that “during the past 10 years we have seen an increased sensitivity to and understanding of gender perspectives of political geography, and traditional areas of political geography, such as geopolitics and trade, have recently been reconsidered from a gender perspective. More broadly, a gendered political geography has two sets of theoretical and empirical backgrounds and the first stems from developments within geography itself; the second derives from debates of the feminist critique of political theory and studies, as was
argued by Kofman (1990:314), for instance. In fact, developing a gender-sensitive perspective means recognizing that gender relations play a crucial role in shaping social, economic, and political systems. Processes of discrimination, differential power, and inequality are seen here as resulting from systematic gender-based power, where a variety of spatial scales play a significant role. As Brown and Staeheli (2003:247-248) argues that feminist political geography can be embedded within the spectrum to mean scholarship and practices that pay explicit attention to women, gender and sexuality, and the ways in which other axes of identity are entwined with these in the relationships of power, oppression and domination that organize and construct the social world. On the other hand, the social construction of gender refers to arrays of expectations, behaviors, and biases that are socially created, rather than specifically rooted in biological sex differences. Since the interrelations between socially constructed gender relations and socially constructed environments can easily be adapted to a gender-sensitive issues like ‘global care chain’. As with low-waged work, women are disproportionately employed in contingent labor (McDowell, 1991), meaning that they are over-represented among the workers whom this policy does not adequately cover. Thus the earlier literature revealed how the new geography of economy has led to the development of global care chain and at same time has reinforced and reproduced gender inequality in the global labor market.

3. Theoretical Approach

The primary theoretical approaches to which I want to address in this course paper is the feminist scholarships on the basis of globalization and gender based labor market mostly featured by postcolonial and postmodern feminists. Since my attempt will go at drawing on theoretical and analytical insights to construct an interdisciplinary space which will enable the assemblage of my project. The first important dimension to this space is that of globalization. Numerous scholars have contributed in analyzing globalization. In this light, my analysis will take a feminist approach as many works on globalization have shown by (1) highlighting the “g-local” interconnections and power dynamics among people and institutions and (2) having an integral gender perspective. Perrons (2004:3) has provides an overview of critical studies on globalization which I’ve found pertinent. Centralizing the phenomenon of contemporary global economy, she has conceived of globalization as a frame within which the interconnectedness of places and people as well as contextual changes in economic, political, social, and cultural processes are explored. She argues that while the framework of globalization can be interpreted
as a kind of “new meta-narrative,” it does not impose some deterministic structures or explanations. It is rather seen as an open space for intellectual reflections (2004:5). Studying globalization from a cultural anthropologist perspective, Appadurai has called special attention to the radical disjunctive “-escapes,” in which global cultural and political economies take shape and are transformed (2008:97-98). Sassen’s (2003) discussion also adds to developing a feminist’s systematic review of the uneven global hierarchies. She emphasizes on the two-facedness, or the double movement, of the global capitalism: the advanced postindustrial economy embodied in superstar zones and global cities is supported by the downgraded and in formalized labor of women at the bottom of the economic structure.

The second dimension to the framework of my analysis will allow me to elaborate on the power dynamics seen in this global care chain. Firstly, integral to the analysis of power is a materialist perspective. Material aspects such as time, space, mobility, ‘race,’ resources, as well as symbolic aspects such as cultures, nationalities, genders are all interrelated (Barad, 2001; Sultana, 2007) and can influence the analysis of the care chain phenomenon. While Perrons (2004:105) has observed that although globalization in some cases brings about the sense of empowerment and mobility of people, human resources from poorer countries are often undervalued. She further argues, complexity of care work involving emotional ties might be exploited to disempower the poor migrant (women) care workers economically (2004:112). On the other hand, the exercise of institutional power manifested through ‘public’ and ‘private’ spheres also an important dimension of power in understanding gender relations. For example, classical theories of ‘the social contract’ which are widely influential in understanding western social and political order, also divide the spheres of civil society into the public and private domains. This division of public and private sphere indicates that the ‘social’ came to occupy the space between private families living in the households and public domain of the market and the state” (Lewis, 2000:32). As Perrons (2004:241) has stated that women are largely confined to the home or the private sphere where gender inequality is the norm and historically, therefore, the state developed as a patriarchal state, which for the most part concerned itself with public issues such as international affairs and the reproduction of the economy. Thus woman is considered as less important, private, reproducer of domestic, and care, which is also applicable in global care chain in understanding the gender inequalities.

The third dimension to the framework is masculinity and patriarchy. Gender is a way in which social practice is ordered (Connell, 1995:69). In gender process, the everyday, conduct of life is organized in relation to a reproductive arena, defined by the bodily structures and process of
human reproduction, where care work is the basis. This arena includes sexual arousal and intercourse, childbirth, and infant care, bodily sex difference and similarity. Thus, gender is masculine practice that constantly refers to bodies and what bodies do, it is not social practice reduced to the body (Connell, 1995:71). But why cares work is for women? The answer of this question mostly lies in this long-standing and widespread masculine ethics and practices. A common essentialist approach in sexual division of labor is the attributes or personality traits women and men bring with them into work place (Marsh, 1984). While another alternative approach in understanding gender as something that people do, rather than something they are (West and Zimmerman, 1987). However, both the approaches are the practices of masculine ethic that indicates the sexual division of labor, where certain types of work are assumed for women (i.e. care, nursing) and certain types of work is for men (i.e. managerial, doctor). Thus the supremacy of masculinities and subordination of femininity is visible in the understanding of practices, dynamics, and interactions within a system of gender relations (Coleman, 1990) that is often divisible by sex role of labor. Moreover, patriarchy and masculinity are also manifested in the exercise of power. As Ikeda (2007:112,126) has argued masculinity is culturally and historically constructed on norms that regulated male identity and behavior, while patriarchy is the practice and culture of male domination and/or female subordination based on the unequal distribution of power between men and women at various levels in a social organization, including at home, workplace, and political arena. Thus the rational of sex segregation in work place is based upon the patriarchal dominance and masculine reflection.

4. Method and Materials

This is a qualitative study and based on findings of basically secondary sources of data. Although qualitative research is a diverse enterprise (Denzin and Lincoln, 1998:2) in understanding normative views with with interpretive analysis, my aim in this study is mainly to reflect upon normative views of subject matters. In addition I intend to make some interpretive analysis as empirical evidence mainly from secondary sources of data conducted on Bangladesh, Philippines and Sri Lanka. However, the aim of this qualitative research is to provide a picture of the current scene that can be used for understanding or reflecting and improving it on how new feminization of employment (i.e. global care work) are reinforcing traditional sex segregated role for women in the new geography of work and are reproducing gender inequality in the array of globalization. For the secondary sources of data I have relied
on available literature and documentation such as books, academic articles, periodicals, specific surveys and official reports, county specific yearly statistical reports, daily and other periodical newspapers etc.

5. Discussion of the Findings

Before entering into the details, I want to assure that the term ‘Global Care Chain’ for this study would not be considered from solely economic perspectives and consequences, rather also from social, cultural and political perspectives and consequences. As Kofman (2006) has argued that illustration of the nature of global care workers needs to be sensitive to cross-national variations in first, “care regimes” (i.e. the extent and nature of public and market care provision, women’s employment and policies facilitating work and care) second, “migration regimes” (i.e. immigration policies, forms of regulation, and paths and histories of immigration) and third, “care cultures” (i.e. dominant national and local cultural discourses on what constitutes appropriate child care, or elder and disabled support) which may also be constituted through differences and inequalities of race, class, ethnicity and geographical relocation. In addition Yeates (2004) in a wide-ranging critique suggests that the concept of ‘global care chain’ could also usefully be broadened to embrace the full diversity of migrant care workers in accordance with skill and occupational hierarchies (i.e. semiskilled and skilled, as well as unskilled); second, locations of work (i.e. institutional, as well as domestic); and third, types of care (e.g. domestic, health and education). However, the following discussion would relate all most all of these related features as the perspectives and consequence of global care chains in articulation of gender inequalities.

Globalization and new economic process has opened the frontier among the states to move people from one geographical location to another more easily than ever. Since an increasing proportion of the earth’s population around 180 million people moves each year from one country to another (Isaksen et al. 2008: 405), and among them a significant number is women. These trans-border routes for women are categorized into five main stream geographical locations-from Eastern Europe to Western Europe; from Mexico, Central America, and South America to the United States; from North Africa to Southern Europe; from South Asia to the oil-rich Persian Gulf; and from the Philippines to much of the world-Hong Kong, the United States, Europe, and Israel (Castles & Miller, 1998 cited in Isaksen et al.2008). However, the basic objectives of these immigrant women are not to reunite with family rather to get the job in these new geographical locations and support their families that they leave in their home.
country. For many, these jobs are to care for the young, elderly, sick, and disabled of the first world (Isaksen et al. 2008: 405). Thus, many maids, nannies, eldercare workers, nurse’s aides, nurses, and doctors leave their families and communities in the weak economies of the South to provide care to families and communities within the strong economies of the North. In such countries as the Philippines and Sri Lanka, female migrants outnumber male migrants, and many are young mothers (Isaksen et al. 2008: 405). Once in the North, female migrants also tend to stay longer than male migrants do. In the case of Bangladesh, although male migrants outnumber female migrants in total, for care giver jobs female outnumbers their male counterparts.

Just as poor countries suffer a brain drain, as trained personnel move from South to North, so too they suffer, we argue, a care drain (Parreñas, 2001). Then ultimately what happens to these female care workers? Seemingly there is no difference between brain drain and care drain, but significantly it matters to gender relations. ‘Care drain’ in most cases generates the methodological sexism (Dumitri, 2014:203). Although from the brain drain the poor countries are discriminated by the rich countries where gender inequality is a minor option to be noted, care drain from poor to rich countries intensify the gender inequalities widely. Because most of these care workers are female and their gender works as major discriminatory factor. Poor pay, relatively long hours, and sexual exploitation are very common that the female care workers faces in the North (Anderson, 2000) as well as in the Middle East and Gulf (Krich, 2018).

The Filipino community in Italy is one of the oldest communities of migrants in southern Europe, with the first arrivals in the 1970s and most Filipino women in Italy are employed in the domestic care sector, as caregivers for old people, or as carers for children (Basa et al. 2011:12-13). In fact, such global transfers of care reflect acute sex segregation in the labor market, where some women have to enter the care work irrespective of their higher qualities. Parreñas (2003) shows in her study that in the Philippines those women could income on an averaged $176 a month as teachers, nurses, and administrative and clerical workers, by doing less skilled though no less difficult work as nannies, maids, and care-service workers, they earned $200 a month in Singapore, $410 a month in Hong Kong, $700 a month in Italy, and $1,400 a month in Los Angeles. But does this higher income (though less than male and below the global standard) become commensurate with their educational qualities and previous professional skills? In most cases the answer is no. Because, most of these women are well educated and have skills in their own profession apart from care works, but in the new geographies of work they become bound to enter into the care work, because still gender
imbalance in performing care services persists globally (Perrons, 2004). Moreover, their families’ economic burden is also a big factor in this respect. As Basa et al. (2011:16) states that it is not so much individual choice, rather family demand that leads to continue working in unhappy conditions. In addition, though this incensation in their salaries could ensure some material helps to their family members, but their status, position and honor has not been increased simultaneously. Rather in many respects their position in the society as well in the family become lower for many reasons mainly resulted from long-standing and widespread patriarchal norms and practices of the society.

In this respect, one study conducted by Uma Devi (2003) in Kerala revealed that the mother who works as care worker in the Gulf region has to suffer from social stigmatization for not being a good or ideal mother. Many mothers face accusations of being a “bad mother” or a “materialistic person” and themselves feel anguished about long separations from their children (cited in Isaksen et al. 2008:409). She further argued that mothers who use to come overseas countries as care workers often experience a conflict, between wanting to be an “ideal mother” and wanting to be a “community heroine”. By migrating, these mothers are defying the prevailing local notion of an ideal mother. Though there are some difference among the population on the meaning and understanding of an ‘ideal mother’ in terms of religion, locality and cultural beliefs, but all of them share a vision of the ideal mother as one who lives with her own children and the ideal mother may work outside the home during the day but she returns to her children in the evening. Thus, the cultural acceptance of shared care does not, in Kerala, automatically extend to an acceptance of the prolonged absence of mothers (Devi cited in Isaksen et al. 2008:411). However, although ideologically we say about ‘ideal mother’, there is no such ideological construction for men as ‘ideal father’. That’s why we never become introduce with the concept of an ‘ideal father’. In addition, when husbands migrate, wives usually assume the role of the father and mother. But when wives migrate for care works, husband tends to aside, leaving child rearing to female relatives (Parreñas, 2003), because family care works is not the responsibilities for fathers. Thus mother’s staying out side family is often questioned and mistrusted by their family members, relatives whereas father’s staying outside family are rationalized as the importance of breadwinner for the family. Moreover, if the child makes a bad score in their education and become wayward in their life style, the responsibility always has to shoulder by mother no matter she stay at home or stay outside of home. In this respect Isaksen et. Al (2008:419) states “Mothers are still mothers. But, children forget what they look like. Mothers make great sacrifices for their children but the trust
concerning that great sacrifice has been undermined. Absent mothers leave for their children’s sake, but children manage private, often profound doubts about why, in fact, their mothers left.”

The case of Bangladeshi female caregivers is the worst who mostly works in the Middle East and Gulf region. Bangladesh, the world's eighth most populous country and among the least developed, has 7.5 million citizens living outside the country—the fifth highest national total, according to a 2017 report by the United Nations Population Division (Krich, 2018:1, and Ullah, 2018:1). According to the BMET report a total of 1,008,525 people went abroad for work in 2017. Of them, 121,925 were women workers, accounting for 12.1% of the total migrant workforce from Bangladesh (Bari, 2018:1). To comply with the rising demand of domestic workers from the Middle East finding and processing migrant labor has become a big business in the country, with 1,300 recruiting agencies licensed by the Bangladeshi government, and many others operating outside the law (Krich, 2018:1). In fact women migrant workers to the Middle East as the caregivers have been increased in the recent years. While a total of 20,952 Bangladeshi female workers went to work in Saudi Arabia in 2015, this number quadrupled to 83,365 in 2017, when Saudi authorities relaxed restrictions to respond to a need for more domestic labor (Ullah, 2018:1). Apparently although it seems that Saudi Arabia favored to flourish Bangladeshi labor market, the practical scenario is completely different. Earlier studies shows that Middle Eastern liberal attitude to the Bangladeshi female workers was due to a ban introduced by the Philippines government on its women working in Kuwait, after reports of Filipina maids being physically and sexually abused (ibid, p.2). Likewise, in 2014 Indonesia also imposed a ban on its domestic workers in 21 Middle Eastern countries, including Saudi Arabia. Thus while Bangladesh encouraged more women to work in Saudi Arabia, other countries have introduced measures to stop women heading for the kingdom and other parts of the Gulf following reports of abuse.

Now the question is raised while female caregivers have been decreased in the Middle East for the recent years, why female caregivers have increased from Bangladesh? Basically two reasons works here simultaneously- one is these women are so poor, low and unskilled labor in most cases who take this profession as manifestation of push factor of migration. Another important reason is due to lack of government monitoring on the recruiting agencies that misguide these poor female workers by promising better job, money and other facilities in such types of domestic jobs in the Middle East and Gulf. And comparatively female workers pay less than their male counterparts who wish to work in the Middle East and Gulf. Thus female workers are misguided and once they travel to these countries they can face the actual realities. Recently
hundred of Bangladeshi female workers have reported sexual and physical abuse against their master in the Middle East and Gulf region. Around 5,000 female Bangladeshi workers have returned from Saudi Arabia since 2015, due to torture, sexual abuse, and irregularities in the payment of their wages (Hasnat, 2018:1). Recently on May 119, 2018 66 women workers has returned from Saudi Arabia and they reported to the journalists in the airport on their arrival that they were suffering abuse, harassment, and inhumane behavior everyday in the home where used to work. Many of these women bear injury marks and wounds on their body. One of these women told the Bangla Tribune (a local newspaper) “I dusted a total of ten rooms every day, but they did not give me proper meals. My employer abused me and prevented me from quitting the job. Whenever I wanted to quit, my employer physically assaulted me (Bari, 2018:12).” The history of torture, harassment, and abuses and irregularities of payment of all the returned female workers were more or less same.

Thus although relocation of women has risen their participation into the labor market worldwide (MacDowell, 2001:448), this increasing rate of female jobs has not necessarily changed the situation of labor market gender inequality. Rather in some cases it has intensified the gender inequalities adversely. Bradley et al. (2000) state that the most marked gender difference, however, is in hours of employment and sex segregation of labor. Despite the rise in nonstandard patterns of work in the new flexible post-fordist economy, standard full-time jobs still significantly outnumber non-standard contracts and it is men who dominate here. On the other hand, part of the explanation for women’s rising participation rates lie in the continued growth of service sector employment and this service sector which include a large number of care workers is considered at the bottom end of the labor market (MacDowell, 2001:449). Thus the quantity of female workers has increased but the qualitative change in terms of equality in general and gender equality in particular is still a far cry.

Earlier research further reveals that although the rich countries have been using the poor countries female care workers in a large amount and these amounts are increasing every year, their policy as well as other measures for the protection of the female worker’s rights has not been considerably changing. For example, women status as permanent immigrant in the host countries is also is also very complex and obscure. Among the female temporary immigrants many suffer from lack of supports to get permanent residence (PR) status in the host countries. Basa et al. (2011:14) argued that legal papers also a barrier to get the better job and many women hold a college degree and could take on better jobs if their documents allowed them to
stay in Italy permanently. In most cases the government seems very reluctant and takes this issue as less important for not being part of their formal economy, which is also clear gender discrimination. Because these discourses of formal and informal economy is derived from the power relations that make distinction between male and female to get the access in public private sphere (Nguyen, 2017:199). Thus women caregivers in the host countries face multiple forms of gender discrimination.

Secondary sources of data further reveal that there is also mark indifference among the sending country’s government to preserve the rights of the female care workers, though receiving their remittance in large amount benefits these countries. As the World Bank Report (2018) shows that the Philippines, Bangladesh and Sri Lanka is the third, fifth and eighth highest remittance-receiving countries respectively which means immigrants workers contribution to their country’s economic development is very significant. They also become the principal breadwinner for their family at their home country. As Basa et al. (2011:14) has stated that Filipina migrants thus take on multiple economic and social roles: as migrant workers, they may be distant mothers and wives, and the source of remittances for the family at home (for children, husbands, parents, and younger brothers and sisters); and care workers in the informal service sector of the host community. But their economic contribution is not valued in most cases. It is also same for Bangladesh and Sri Lanka as these two countries cultural practices in relation to gender discrimination is more or less same.

The Filipino migrant cares workers with a median age of 29 and having 2.74 children on average, who stay in the Philippines (Parreñas, 2003) is considered either family woman or economic woman, but not family and economic woman. To her employer she is an economic woman and to her family she is a family woman. It is because though employers give them value for care services at the same time they are deprived to get the opportunity to give care to their own children. On the other hand her economic contribution is turned down by the family (basically by husband). Since gender inequalities occur both at home and work place. Family balance for this global care working mother is a big challenge what was focused in Parreñas’s study (2003) on both the Filipina migrating mother and the children she leaves behind. Thus global female care workers face multiple problems as Stiell & England (2010:242) has stated that the literature on the experience of paid domestic workers highlights a set of commonalities and it tends to be characterized by oppressive material conditions, including isolation, loneliness, powerlessness and invisibility. Even for the live-out domestic workers exploitation is a frequent experience, imposed by long working hours, unpaid overtime, and limited time
Another most important gender inequality in delivering global care services is to undermine of its commercialization as the market economy. Since, ‘global care chain’ could not be compatible with ‘global commodity chain’ in the new geography of economy, although global commodity chain and global care chain have been developed as a result of globalization and new liberal economic advancement (Yeats, 2004:377). The main problem, however, is that global commodity chain analysis is concerned with the sphere of market production, whereas global care chain pertain non-market spheres. It means that though there was the commercialization of domestic services, but it could not gain the status of formal economy as Lier and Stoke (2006:806) has stated that one of the most characteristic effects of the globalized world economy has been a high degree of informalisation and the brunt of this informalisation has found place among working women in the global South. Since, while global commodity chain analysis focuses on industrial production of ‘things’, care services entail the physical and social (re) production of ‘beings’ and the solidarity-affective bonds between them (Hochschild, 2000). Finally, it is assumed that orthodox global commodity chain analysis is unsuited to elucidating global integration in the care services sector due to problems relating to the focus of orthodox economic analysis generally on market production and exchange and the focus of global commodity chain analysis specifically on industrial production by firms, and the consequent neglect of services and household production (Yeats, 2004:377). However, this systematic escaping in integrating the care services into the mainstream of market economy as well as into the global commodity chain tends to ignore the gender inequalities that are prevailing in the household/domestic care services. As Dunnaway (2001:10) argues that “we need to re-embed commodity chains in the everyday lives of the laborer households at every node in the chain. We must think of the commodity chain as first and foremost an inter-connected network of nodes at which human laborers and natural resources are (a) directly exploited and/or (b) indirectly exploited (c) to permit surplus extraction by a few.

6. Concluding Remarks

The impact of the feminization of employment can, however, be overstated (Perrons, 2004:121). Women participation in labor market has increased, this is true, but this new feminization of employment made the gender relation more worsen by commercialization of care services globally over the decades. As Perrons (2004:111) has argued that in its present form the marketization of care services is likely to both reinforce and to some extent undermine
gender divisions and buying childcare and domestic work may liberate some women from these traditional responsibilities, but these tasks are generally only transferred to other women, thus effectively leaving the gender distribution of roles unchanged. Findings shows that still the care work is considered as feminine and informal jobs although their contribution through these works for the both the host and home country’s economic development is undeniable.

Women caregivers are discriminated both in the workplace of the host countries and at their home country once they return. Because their recognition as the contributor in the family is neglected as the males are still thought to be the primary breadwinner of the families. On the other hand state polices both at the host and home countries of these female caregivers are very reluctant, as these jobs are still considered informal not valued equally with other formal jobs. Thus the massive entry of women into the global labor market as care workers has not necessarily reduced women’s subordination and segregation within society, rather has been reinforcing and reproducing gender inequality in a transformed system of public patriarchy and masculinity which resulted into the outburst of public private domain, formal and informal economy, exercise of unequal power and so on. To conclude it would be suffice to say that ‘global care chain’ should not be an alternative way of discrimination for female workers, rather policy should be taken by both the host and home country to ensure the equal rights of these female workers by safeguarding sufficient payment, standard working hours and making the workplace free from physical and mental torture and sexual harassment.

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