

Women on the Move

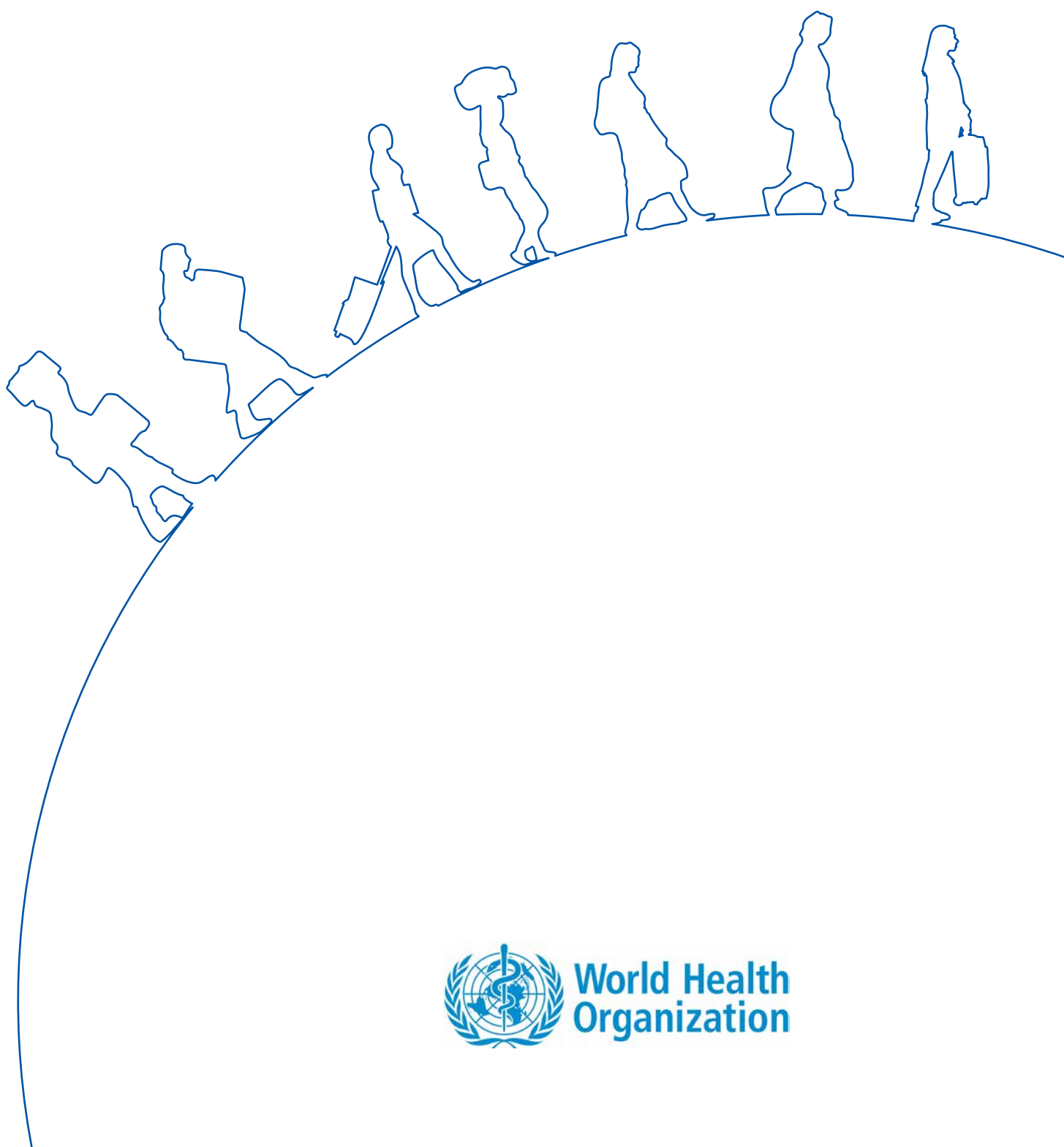
Migration, care work and health



World Health
Organization

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Women on the move: migration, care work and health

ISBN 978-92-4-151314-2

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Suggested citation. Women on the move: migration, care work and health. Geneva: World Health Organization; 2017. Licence: CC BY-NC-SA 3.0 IGO.

Cataloguing-in-Publication (CIP) data. CIP data are available at <http://apps.who.int/iris>.

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Printed in Switzerland

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Page 12 Matthias Zomer

Page 16 IOM / Jemini Pandya

A Sri Lankan labour migrant takes care of a 90-year-old Italian woman. Such essential family care assistants in Tuscany, Italy, have been recruited under a pilot IOM programme funded by the Italian Ministry of Labour and Social Affairs.

Page 26 WHO / Fredrik Naumann

Isabella Nordby (left) and Aagot Dahlen give a course diploma to Saida Dostzada. The women provide diabetes information to migrant women as part of a course designed to teach them about healthier living. Preventing diabetes is part of the curriculum, and the women cook food from their home countries but with adapted, healthier recipes.

Page 30 Monica Campbell / PRI's The World

Live-in caregiver Joesy Gerrish, from Fiji, with her employer Florence Tratar, who had an accident that left her in a wheelchair.

Page 40 Kenneth Pornillos / World Bank

Older brother carries younger brother. Legazpi City, Albay, Philippines.

Page 42 Gerd Altmann

Page 44 Eric Miller / World Bank

Local hospital. In the waiting room, parent with sick children. Marracuene, Mozambique.

Page 47 IOM / Bashir Ahmed Sujan

Control over earning is an important dynamism in women's empowerment. A woman returnee migrant worker from Saudi Arabia exchange money at the money changer booth at the ZIA International Airport, Dhaka, Bangladesh.

Page 50 IOM 2009

How can migrant mothers stay in touch with their children left behind? In Ukraine, IOM targeted some high-migration regions where up to 25% of children are growing up with one of their parents – often the mother – working abroad. IOM invested in field-based research and took a number of steps to reach out to these families as well as improve key local actors' – such as teachers, psychosocial workers and local NGOs – knowledge about the needs of these children. IOM also organized "Creative laboratories," using theatre, role-playing and arts as well as sport events and theatre shows, to help several hundred children in Ukraine explore and express their feelings about their parents' absence.

Working with local authorities both in Ukraine and Italy – a major destination country for Ukrainian women migrant workers – IOM provided equipment and training on using Skype to children, teachers and migrant mothers. These mothers, many of whom are domestic workers and caregivers, also benefited from focus groups and psychosocial support where they could openly talk about the impact of the separation from their families on their well-being.

Page 53 (left) IOM / Tatiana Jordan 2009

Many Moldovan villages are populated with elderly people taking care of their grandchildren – Nicolae with one of the three that he looks after. According to a recent IOM study in the Eastern European country, two out of every 10 rural households which had been previously receiving remittances from abroad, were no longer doing so.

Page 53 (right) Tom Cheatham / World Bank 2013

Grandmother and grandson, Phalankone village, Myanmar.

Page 55 WHO / SEARO / Pierre Viot

Illustration about tuberculosis in India.

Page 56 Li Wenying / World Bank

For most of the rural migrants in Chinese cities, lack of skills is a big barrier for them to make a decent living. The government now offers a range of free training courses to get them better prepared for the job market. Chongqing, China.

Page 72 IDWF

In Bangkok, the Network of Domestic Workers in Thailand started the day by sharing information about their legal rights and the Network's goals with other domestic workers and passers-by in Rot Fai Park in downtown Bangkok.

Page 79 UN Women Cambodia / Charles Fox

In Cambodia, 70 per cent of women are engaged in vulnerable employment; more than 500,000 work in garment and footwear factories. Empowering women to exercise their rights to decent work, the UN Trust Fund to End Violence against Women (managed by UN Women on behalf of the UN system) is working closely with partners to ensure discrimination-free work environments in Cambodian factories. Chhun Srey Sros, 24, lives in Sangkat Chaom Chao and works in a Cambodian factory where the UN Trust Fund and its partner, CARE, have developed and distributed educational materials and a sexual harassment policy for the workplace. Sixth among 10 siblings, Srey Sros dropped out of school when she was in 10th grade to support herself and her family. She has worked in the garment factory for three years and makes up to US \$200 per month with overtime.

Foreword

In so many homes and places around the world, women of all ages, ethnicities, cultures and backgrounds are providing essential care to others, within and outside their own families, to sustain health, well-being and comfort. While men also contribute, available data show that the overwhelming proportion of care workers worldwide is women, and increasingly they are migrant women.

As women's economic empowerment builds, lives are being transformed, including decisions made to travel from their own homes, families and communities to earn a living. In the destination countries and territories, these migrant women are making a positive contribution to the health and well-being of others as they work in the care sector, often informally. They fill unmet needs for long-term care in our ageing societies and buttress health and social care systems in many countries as a kind of invisible subsidy. However, their own health is at stake. Are they able to access the services they need? If not, why not, and what can be done about it? What happens to the health and care situation for the families they leave behind? Although there are still more questions than answers and data gaps remains substantial, it is right and timely to ask such questions, and develop and implement workable solutions as a global community.

This report is unique and important for WHO. It breaks new ground in casting a wide net across disciplines –health, labour, employment, social protection, social services, law, immigration, cross-border movement and citizenship– to shed light on a particular population group that both provides care as well as needs it to maintain their own health and well-being. It looks at the lives of these migrant women care workers as well as the situation for their households left behind. It takes a transnational perspective appropriate to our interconnected world.

We expect this report to inform international, regional and local debates about migration, care work, and health and well-being for women. It is a call for more policy coherence, and for political decisions and leadership, to counter negative narratives on migration with the positive examples of the important contributions that migrants make.

The top priority of Dr. Tedros Adhanom Ghebreyesus, Director-General of WHO, is to progress universal health coverage (UHC). This is the aspiration that all people can obtain the prevention and treatment health services they need without suffering financial hardship. UHC can improve population health and promote economic development by lifting the barriers created by unequal access to quality health care services. UHC must effectively and equitably include all people, including the millions of migrant women working in the care sector around the world, who may suffer from discrimination and exclusion in their host societies despite their contribution to health and well-being.

As the only international organization in health accountable to all the world's governments, WHO will rise to meet this challenge. Underpinned by our commitment to equity, gender and human rights, it will be the role of WHO to ensure that this population group can benefit from our efforts for achieving universal health coverage. We will play our part in ensuring that all those working in the health and social care sectors, including migrant women, are counted and recognised for the contribution they make to protecting and promoting health and well-being for so many individuals, households and societies around the world. We will hear them. We will involve them. We will not leave them behind.



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Acknowledgements

This report was developed under the overarching **leadership** of Veronica Magar (Team Leader for Gender, Equity and Human Rights, GER, at WHO HQ in Geneva), with **guidance and strategic direction** from Flavia Bustreo, Assistant Director General (ADG) of the Family, Women's and Children's Health Cluster and strategic shaping by Anne Marie Worning (as Acting ADG). They collaborated with both Ilona Kickbusch (Graduate Institute of International and Development Studies, Geneva), who helped develop the original concept and framing, and Sarah Gammage (International Centre for Research on Women) who supported the team advance the report to its final shape.

Extensive expert technical content was provided by: Sarah Gammage (International Centre for Research on Women), Olena Hankivsky (Simon Fraser University), David Ingleby (University of Amsterdam), Ilona Kickbusch (Graduate Institute of International and Development Studies, Geneva), Sonya Michel (University of Maryland), and Mary Manandhar of GER HQ. The technical contribution on legal frameworks was provided by Elena Abrusci and Andrea Nicholson (University of Nottingham).

The project was coordinated by Mary Manandhar, in collaboration with Adama Diop and Gerardo Zamora, building on early stage coordination by Gemma Hunting who also contributed technical content. The **GER HQ team** – Adama Diop, Ahmadreza Hosseinpour, Theodora Koller, Eva Lustigova, Rebekah Thomas and Gerardo Zamora – contributed throughout, during consultations and providing feedback on drafts. We thank Evelyn Finger for administrative and logistical support, and Kate Bagshaw and Kristie Khatibi for their contributions.

Over the course of the project, several **interdisciplinary, multistakeholder and international consultations** took

Ahounou Gaston, Abraham Rojas Joyner, Nata Menabde, Saseendran Pallikadavath and Irudaya Rajan. Other UN agency colleagues also contributed – see the list below. Special thanks are due to Joe Thomas (Population Partners in Development) for supporting this meeting.

A global panel of expert reviewers provided key literature and valuable feedback on early drafts, with some also attending the international expert consultations cited above: Pascale Allotey, Veronica Birga, Krishanti Dharmaraj, Anjali Fleury, Asha George, Wendy Harcourt, Jenna Henneby, Eleonore Kofman, André Laliberté, Helma Lutz, Rianne Mahon, Elizabeth Mason, Bandana Purkayastha, Ann Singleton and Cathy Zimmerman.

WHO Regional Office focal points for gender, equity and human rights contributed their expertise and identified regional literature. Isabel Yordi Aguirre merits particular mention for her extensive contribution throughout the process. We also acknowledge other regional colleagues: Hala Abou Taleb, Britta Baer, Benedicte Briot, Anjana Bhushan, Anna Coates, Lilia Jara, Aasa Nihlen and Triphonie Nkurunziza.

Colleagues across WHO HQ contributed in various ways. We acknowledge the partnership of Edward Kelley and Kanokporn Kaojaroen in the team coordinating work on migration. For their ideas, data and feedback, we also particularly thank Ibadat Dhillon, Chris Dye, Rachel Baggaley, Megan Gerecke, and Tana Wulji.

Experts from other UN agencies and international organizations generously provided insights and generous collaboration throughout the process. From IOM, Jacqueline Weekers and Eliana Barragan provided substantive input and shared key resources. We also thank: Veronica Birga (OHCHR), Letty Chiwara (IIN Women), Claire Hobden (ILO), Petra ten Hoopen-Bender

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