15 Negotiating transnational caring practices among migrant families

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15.1   Introduction

Currently, there is increased political and academic interest in family migration and migrant families. This has led to theorisations of 'transnational living' that tend to assume that transnationalism has been made easy by advances in modern travel and digital communications. More recent studies are now exploring how and to what extent members of migrant families negotiate their long-distance relations and caring practices (Ryan, 2007; Zontini, 2006, 2007; Evergeti, 2006, 2008; Baldassar & Baldock 2000; Baldassar, 2007; Banfi & Boccagni this volume). Our aim in this chapter is to conduct a brief yet critical exploration of the relevant literature, highlight the complexities and changing character of transnational family links and explore how they are negotiated and managed through time and space and with the changing circumstances of migrants and their families 'here and there'.

In the first part of the chapter we give a short but critical examination of the term 'transnationalism', highlighting the importance of migrants' agency and family interactions in understanding how long-distance family relations work in practice. Often this field is theoretically driven, though recent empirical studies have shown that transnational caring practices are diverse and depend on the changing circumstances and living arrangements of migrants and their families. Our discussion explores some practices of transnational or long-distance caring through empirical examples from our own work and other relevant literature.

Recent increases in the migration of domestic workers and paid carers, and the ways in which women are involved in transnational caring, have led to the development of what has been called the 'global chains of care' paradigm. This theoretical model seeks to explain the phenomenon of domestic workers in terms of social disadvantages and power inequalities where Western women employ socially disadvantaged migrant women as nannies and maids who, in turn, leave a 'caring vacuum' back in their countries of origin. This concept could provide some interesting insights into the caring roles of domestic workers. However, as we will show in our discussion, it fails to capture the diversity and changing nature of caring responsibilities of migrants (whether domestic workers or not) and

the complex web of interactions that support and maintain transnational family links. In the second part of this chapter, we critically engage with the concept of global chains of care and explore its limitations.

In any analysis of transnational caring practices, we need to engage with the concept of family as a long-distance unit whose members are maintained through complex ongoing interactions. In this respect, we wish to question the concept of family as a static bounded unit and explore its fluidity, both in terms of household composition and the way in which family members negotiate relationships and caring responsibilities across borders. Furthermore, migration research has traditionally looked at the migrants and their families in the countries of destination, without giving much consideration to the role of family members and other relatives 'back home'. In the third section of this chapter we highlight the need for an interactionist approach that takes seriously into account the processes through which migrants and their families both 'here and there' manage relations and caring practices throughout the life course. Furthermore, we provide empirical examples from our studies of European migrants in the United Kingdom (namely, Greek, Irish and Polish) as well as other studies looking at the experiences of overseas immigrants.

Finally, we emphasise the importance of a methodological stance sensitive to the dynamism and diversity of the transnational experiences highlighted throughout our discussion. We argue that narratives, life stories and ethnographic observations can provide an invaluable account of the inter-subjective and 'processual' nature of migrant-lived experiences.

15.2   Transnational links and long-distance caring

Theories of migration have been undergoing rapid change in recent decades. During the 1990s, there was growing interest in the role of social networks in facilitating and perpetuating migration. While acknowledging that migration may take many varied forms, Jordan and Düvell (2003) argue that it is rarely an isolated decision pursued by individual agents, but rather a collective action involving families, kinships and other communal contacts. The decision to migrate is influenced by existence of, and participation in, social networks connecting people in different geographical locations (Boyd 1989). Networks may be defined as a process of maintaining and building ties that depends on and, in turn, reinforces social relations across space, linking migrants and non-migrants (Boyd 1989). Theories of migratory social networks led in the 1990s to what Vertovec (2001: 576) calls the 'shift to a transnational approach toward migration processes and migrant communities'. The sending of remittances, regular communication and travel back home, maintaining an interest in home events and culture and reciprocal caregiving have all been

interpreted as evidence of transnationalism. The concept of transnationalism has proliferated through social sciences research on migration. According to Cano (in Vertovec 2007: 964), while in the early 1980s there was only a handful of articles that used the terms 'transnational' or 'transnationalism', by 2003 there were over 1,300 using these terms in relation to migration and movement. Glick Schiller, Basch & Blanc Szanton (1992) have defined transnationalism as a process through which migrants create and maintain social relations connecting their societies of settlement and origin.

However, some analysts argue that transnationalism has been defined too loosely, making it difficult to evaluate the content, intensity and importance of transnational relations (for a critique, see Rusinovic 2008). In addition, there has been some discussion about the sustainability and durability of transnational links, especially through the life course, as migrants' age and their needs and mobility change (Portes, Guarnizo & Landolt 1999). Therefore, as we will show in our discussion, in the lived experiences of migrants and their families, transnational links, and especially transnational caring, can take many different forms that can change over time.

In the 1990s, transnationalism was discussed mainly in relation to remittances, the movement of capital and the policies and legal framework that regulated them (Bryceson & Vuorela 2002: 3-4). A concern with the processes and implications of 'globalisation' and different forms of family migration led to an increased attempt to re-think the notions of culture, migration, family and caregiving (Vertovec 1999, 2002; Portes et al. 1999). More recently, the discourse on transnational families has focused on the activities and practices of people who are members of long-distance families and have multiple identities and loyalties (Zontini 2006; Evergeti 2006, 2008). However, we could argue that even the families of the early migrants to the US during the turn of the twentieth century were 'transnational' in that they maintained some important family links and relations across borders (mainly through remittances). What has changed fundamentally in the more recent migration trends is the intensity and the types of relations migrants maintain with their kin and families back home, including caring roles and responsibilities and the way the ease of travelling and advances in telecommunications have made such links possible (see e.g. Varrel this volume). However, what is missing from more recent theoretical literature are the ways in which migrants and their families negotiate such long-distance relationships and the difficulties they encounter in doing so (but see the empirical work of Zontini 2006, 2007; Evergeti 2006, 2008). In addition, it is important to acknowledge that transnational social relations may not necessarily provide positive sources of support and caregiving, but instead may place a heavy demand, both financial and emotional, on migrants (Ryan 2004, 2007).

Until recently, studies of transnationalism have focused on 'transmigrants', their lives, economic activities and assimilation in the country of destination. However, a focus on transnational families and their caring practices across the borders requires a broader theoretical and methodological focus on both sending and receiving countries and cultures. This emphasis can provide us with an important insight into the decisions to migrate and the role that families, communities and kin staying behind have played in such decisions. In this respect, state responses to migration, international relations between sending and receiving countries (for example, special arrangements between different countries), but also the historical context (in terms of the time and circumstances of migration) all give important insights for the macro-reasons of migration (Baldassar 2007). On the other hand, a methodological turn towards 'transnationalism from below' focuses on family as a flexible social practice, providing an understanding of culturally produced notions of roles and obligations towards caring responsibilities and how family relations develop over time (see e.g. the cases discussed in Banfi & Boccagni and Bonizzoni this volume).

In studies of migration and transnational care practices, the focus is often on settlement and employment policies in the receiving country. These do play an important role, especially when we are talking about parents' and other relatives' migration restrictions. For example, migrants may decide to bring their ageing parents over in order to look after them properly. Although it might be easier for EU migrants, the situation is different in Australia and United States or for parents of third-country nationals trying to enter the UK. The problem is that elderly migrants are sometimes seen as a 'burden' for the social and health services. The frequent assumption is that ageing parents are not in good health or that the caring is one way – that is, from the migrant children and the state to the ageing parents, with no consideration of older migrants as active members in transnational caring provision (Baldassar 2007). This assumption fails to see that ageing parents who join or come to visit their children might also be capable of looking after grandchildren or provide other important practical support (Baldassar 2007; Zontini 2007). In this respect, we need to move beyond a narrow focus simply on state policies and towards a more interactionist analysis that takes seriously into consideration the individuals involved in migration. It is only then that we will be able to explore how norms and values about care change over time, through movement to different cultures and changing circumstances for both migrants and their families back home.

An analysis of transnational caring practices raises a number of pertinent questions about how migrants and their families manage such practices and relationships across and within national borders. A focus on ageing and changing needs through the life course illustrates the dynamism of transnational caring roles and responsibilities. An examination

of the different roles performed by men and women suggests the gendering of caregiving practices and the ways in which households and families may be reconstituted through migration. Studies of different migrant groups reveal how caring strategies and options may be shaped by migration structures and institutions, for example, transnational mobility may be limited or facilitated within different migration contexts (Burholt 2004). These issues are illustrated in the literature on global chains of care. Nevertheless, as we will show, this paradigm with its emphasis on power relations and social divisions, has failed to address the multiple contexts and diversity of transnational care provision in which migrants and their families are involved.

15.3   Global chains of care

In recent years, there has been a huge growth in demand for domestic workers as well as for carers of children and the elderly. As several chapters in this volume have illustrated, this can be explained by changing labour markets, the increasing numbers of women combining motherhood and paid employment, changing family structures, an ageing population in many societies and the shortage of public care services (Yeates 2005). As many of these caring and domestic jobs are undertaken by migrant women, there is increasing interest in how care chains operate across national borders (Hochschild 2000). Global chains of care may be defined as 'a series of personal links between people across the globe based on the paid or unpaid work of caring' (Hochschild 2000: 131).

The global chains of care paradigm is based on a model of affluent women in the West employing poor migrant women (usually from the South) within their homes as nannies and domestic workers. The paradigm assumes that these migrant women have left families of their own, along with caring responsibilities, behind in the country of origin. The caring of these families is then undertaken by other local women and is likely to involve unpaid caring work within extended families. Thus, the caring of children in affluent Western families is done at the expense of poor children in developing countries. As Yeates (2005: 3) notes:

> These processes embody major social divisions and inequalities. Most obviously, they reflect the social divisions of class, wealth, income and status, with richer households located in richer regions or countries outsourcing (part of) their care labour requirements to members of poorer households drawn from poorer areas within the same country or from a poorer country ... it is important to indicate that the outsourcing process is structured by 'race' and ethnicity (and caste) as well as by gender and social class.

Although the global chains of care literature focuses mainly on migrant nannies and child minders, Yeates (2004) argues that professional women, such as migrant nurses, may be particularly implicated in caring roles not only as paid professionals but also, for example, as unpaid carers of ageing relatives 'back home'. This concept may provide a useful tool for understanding the shifting relationships and caring roles within transnational families. While drawing on Yeates' work, Ryan (2007) has suggested that it is necessary to go further and look at how nurses' roles within transnational caring relationships may change over the life course, especially as they have children and require assistance with child-care. Also, through their remittances, these migrant women not only contribute to the economic well-being of their families back home, but also to the wider community and indeed even the national economies of their countries of origin.

Following on from the work of Yeates (2005), it is necessary to highlight some ways in which the concept of global chains of care may be questioned or further developed. Firstly, it is important to state that this is not an entirely new phenomenon. Although women have long made up significant numbers within particular migrant streams – to Britain, for example – there appears to be a historical myopia, even within gender-sensitive approaches to the study of migration. 'The amnesia about past migrations held back... an awareness of female migration and its incorporation into mainstream theories'. This was not only a missed opportunity to incorporate gendered analyses into migration theories in the past, but it also means that current waves of female migrants are often regarded as entirely new and different from earlier migratory movements.

Women have been migrating to work as domestic servants since at least the nineteenth century. Irish women migrated to work as maids in the US (see Diner 1983). In the early twentieth century, such was the massive outflow of young Irish women to work in households in Britain, that the subject was regularly debated in the Irish press and among religious leaders and politicians. In the post-war period, large numbers of young Caribbean and Irish women were recruited to fill specific roles in the British labour force (Ryan & Webster 2008). While the Irish women migrants were usually young and childless, it was common for women from the Caribbean to migrate, leaving their children to be looked after by grandmothers or aunts (Chamberlain 1998). Thus, while the countries of origin may be changing in recent years – a notable example is the Philippines – it is important to acknowledge that the phenomenon of women migrating to work as domestic servants in affluent metropolitan households while leaving children behind, is certainly not a recent practice.

Secondly, in the context of EU enlargement and the massive increase in mobility within the region, especially from the new accession countries, it is important to consider the implications for caring work and transna-

tional caring responsibilities (Morokvasic 2004; Elrick & Lewandowska 2008). What impact will the availability of large numbers of female migrants to undertake caring work have? How will ease of mobility across national borders impact transnational ties and caring 'here' and 'there'?

Thirdly, it is important to question the ways in which transnational families are being constructed in the global chains of care literature. The assumption that migrant women leave young children behind to be looked after by relatives simplifies the diversity of women's experiences. Migrant women may not have children (see also the discussion in Banfi & Boccagni this volume). Their caring responsibilities may involve a range of other relatives, such as aged parents or siblings. In addition, as Yeates (2004, 2005) suggests, moving beyond the narrow focus on migrant women as live-in nannies and maids opens up other possibilities. For example, migrant women may have brought children with them to the host society or they may have had children after their arrival. Some women, especially those who are not live-in domestics may have migrated as part of a conjugal unit and may be living with partners, with or without children.

15.4 Transnational care practices and importance of the family 'here' and 'there'

In gaining a broader understanding of migration patterns, there is much to be learned by combining the study of migration with family studies. Recent research on migration has helped to complicate previous assumptions about 'the family' as a bounded geographical unit (Baldassar & Baldock 2000). 'Families represent a social group geographically dispersed. They create kinship networks which exist across space and are the conduits for information and assistance which in turn influence migration decisions' (Boyd 1989: 643). Thus, through transnational mobility, families and households become extended through space and time as geographically dispersed relatives form part of 'multi-stranded social relations which link together migrants' societies of origin and settlement' (Baldassar & Baldock 2000: 63).

In the field of migration and, more widely, in the study of transnationalism 'the family' has been recognised as significant in providing some form of support, often through the continuation of familial transnational links (Zontini 2004b; Evergeti 2006). For example, there is some evidence (Baldassar & Baldock 2000; Zontini 2004b; Evergeti 2008) to suggest that migrants' notions of belonging and formulations of their diasporic identities are produced and transformed through participating in family occasions and the continuation of family relationships. Through dynamic and complex interactions the ethnic home and the family (both 'here' and 'there') can provide a basis through which people reproduce and ne-

gotiate cultural values about ethnic identification and caring roles and responsibilities. In order to understand such complex processes and the diversity of transnational caring practices, we need to start with a consideration of 'family' close to the lived experiences of migrants and their non-migrant family members.

Therefore, as has been argued at length elsewhere (Ryan 2008), an examination of families' roles in migration narratives complicates any simplistic notion of the family as a nuclear household unit. While the household unit, defined as a co-resident group, is important in migration research (Boyd 1989: 642), this is not to imply that family-led migration always involves the mobility of entire households. In studying family migration and transnational relationships, perhaps there has been a tendency to adopt the definition of 'the family' used officially in immigration policies, rather than examining the actual diversity with which people migrate through kinship links. 'There has been a tendency to make the family synonymous with the household' and this 'woefully fails to capture the composition and structure of transnational families' (Bryceson & Vuorela 2002: 28). While discussing the diverse roles that families play transnationally, Chamberlain's (1998) work has highlighted the importance of transgenerational and intragenerational links, in particular, those of siblings. Chamberlain (1998: 131-132) argues that:

> The conjugal relationship may not always be the focus of a family unit, nor the most important one, and may marginalise the role of siblings and collaterals, the roles of family members located elsewhere, and the importance and nature of families dispersed.

In this respect, we need to adopt a theoretical and methodological stance that explores family as a flexible social practice based on negotiated interchanges and ongoing processes (Pruss 1996). Thus, rather than simple conjugal, nuclear or household units, families involve complex webs of relationships across generations and locations. They are reproduced and redefined through dynamic interactions and the meanings that individuals attach to various familial encounters. Hence, in the context of migration, it is more useful to understand families as 'fluid and constantly being reconstituted and negotiated, adapting across spaces and through time'. Furthermore, it is important to recognise that most migration is related to family in that it often (but not always) entails decisions that involve and have a great impact not just on the migrant, but also other members of his or her family (Nauck & Settles 2001). This is particularly true in the case of caring roles and responsibilities and the way they must be negotiated throughout a lifetime.

Examining the dynamism and fluidity of familial and caring relationships, it may be useful to adopt a life course perspective emphasising how

relationships develop in the context of social roles and change in salience as the individual moves in and out of roles, for example, changing jobs, moving house, becoming a parent or retiring. Viewing social support and the networks that provide it through the lens of a life course perspective focuses attention on the social roles in which personal relationships are formed. Life course events and transitions usually involve a change in social roles and situations, often altering the basis for the social relationships that were formed in the context of the role (Cochan et al. 1990: 182).

While transnational links may remain important for migrants, it is necessary to consider the dynamism of such ties as needs and social relationships change over time. Migrants may adopt strategies that are 'spatially extensive' incorporating 'multiple members in diverse places' (Creese, Dyck & McLaren 1999: 3). Thus, with changing needs and experiences, migrants may draw upon 'local, national and transnational networks that include kin, friends and contacts' (Creese et al. 1999: 4). Growing attention has been paid to the difficulties that child-care can pose for women migrants (Ehrenreich & Hochschild 2003; Salaff & Greve 2004; Zontini 2004a). While some migrant women may leave their children back in the home country to be cared for by relatives, it is apparent that other strategies are also utilised that may involve combinations of local and transnational support. For example, Filipana women in Spain (Zontini 2004a), Chinese women in Canada (Salaff & Greve 2004), Polish women in London (Ryan, Sales, Tilki & Siara 2009) and Indian parents in the US (see Varrel in this volume) may bring grandparents from their home country to look after young children.

Salaff and Greve (2004: 160) argue that 'transnational migration affects women and men in gender specific ways', and places a heavier burden of responsibility on women because they 'undertake the meshing of work and family systems'. Societies rarely acknowledge the informal work that people do to mesh institutional structures. People draw on personal relations to resolve inconsistent demands. The plight of international migrants outlines the problems encountered in using personal solutions to meet public issues (Salaff & Greve 2004: 160)

Transnational caring practices are 'temporal and relational': relational in that they provide a source of identity and support through relational ties and temporal in that they are linked to individual life cycles (Bryceson & Vuorela 2002: 3-30). This is very much connected to what Baldassar (2007: 280) has termed the 'mobility of care'. The mobility of care is informed by the 'negotiated commitments' of migrants and their families back home, as they develop through time, and cultural expectations about caring obligations within the family. The provision of care between migrants and their parents and siblings also depends on capacity (access to resources, time constraints, finances) and the sense of obligation to participate as well as individual negotiated priorities –for example, whether

a migrant has children, can take time off work, has the financial means to travel or send money home.

While relatively young and mobile parents may be a source of practical support in terms of providing care for their grandchildren, with the ageing process comes the possibility that parents may become the recipients of care. Baldassar (2007: 277) argues that few studies 'focus on transnational care giving and ageing'. Caring for sick or elderly relatives may be done in different ways and in different locations. Baldassar (2007: 276) presents a critique of the assumption that caregiving requires proximity.

> [E]mpirically, the general pre-occupation with geographical proximity means that very little research has been done on the relationships between ageing parents and adult children who live at a distance, with the result that transnational practices of care have remained largely invisible or are assumed to be unfeasible.

As other research, such as Baldassar and Baldock (2000), has shown, it is possible to undertake some forms of caring at a distance and new technologies such as emails, mobile phones, texting, as well as cheaper air travel have all made that more possible in recent years (Horst 2006). In addition, it is also important to recognise and acknowledge the significant role of the non-migrant family members. In the relevant literature, transnational care is often explored through the perspective of migrants and the kind of support they might provide to their families back home (for an overview, see Baldassar 2007). However, the life stories and experiences of the homeland kin are very important in analysing the different types of transnational care and uncovering the mutuality of support. By looking at the role of those who have stayed behind we can properly acknowledge that care provision at a distance is not unidimensional (that is, from the person who moved away towards those who stayed behind), but can also be multidimensional and often mutual. An examination of the ways in which family members in both places (sending and receiving countries) participate in caring responsibilities has shown that the networks of support are more complex than initially thought (Evergeti 2008; Zontini 2007; Ryan 2007). Thus, as in the case of 'family', we need to redefine the concept of 'care', move away from the dominant reification of these notions and adopt a more flexible orientation that will allow us to explore and understand the complex dynamics and the everyday reality of care provision at a distance. In order to do so, we need to take seriously into account the agency of migrants and explore the interpretive schemes that they and their families use in negotiating their lives and their support for each other.

Within our own research, we have found evidence of the varied ways in which migrants are implicated in transnational caring practices, both as recipients and givers of care. Our study of Irish nurses (Ryan 2007)

who migrated to Britain in the post-war period illustrated the ways in which reciprocal transnational caring relationships shift through the life course. After the birth of her first child in the late 1950s, Fiona decided that the best and most flexible career pathway was to become a district nurse. However, she first had to complete her general nursing qualification, which meant further study and training. Fiona achieved her goal with a considerable amount of help from her kinship networks, both local and transnational.

> I had my mother with me for a while, I had my mother-in-law with me for a while, oh I had a friend minding [my baby] as well, she'd come here and stay til I came back…My sister was living next door to me at the time and she used to help out. You are always juggling with your children, like I'd mind yours and you'd mind mine. (Fiona, migrated to the UK in 1951)

Reading Fiona's description of her support network, it is easy to forget she is a migrant. As a nurse she was part of a global, or at least transnational, chain of care. While she cared for patients in a London hospital, both her mother and her mother-in-law came from Ireland to help with child-care. In addition, Fiona also appears to have been adept at building and drawing upon local networks. As other researchers have shown, the levels of support available locally may influence the extent to which migrants rely upon transnational networks (Zontini 2004; Salaff & Greve 2004). Apart from her sister, who lived next door, Fiona also had a large number of friends living in the area. In addition, her husband did most of the cooking for the family. Fiona had four children and continued to develop her career, eventually attaining a managerial position. Transnational families can stretch women's caring roles across national boundaries (Zontini 2004; Evergeti 2006, 2008). Irish migrant women are often involved in providing care and support to ageing relatives in Ireland (Walter 2001; Gray 2004). Fiona illustrates the reciprocal nature of transnational caring: in later life, she took on the role of caring for her aged mother who came to live with her in London.

Our study of Greek women in Britain has also shown the changing patterns of transnational caring as people move in both space and time (Evergeti 2006, 2008). In their narratives the research participants referred to the dual responsibilities that they had towards their own families as well as their parental families in Greece. They also described how living faraway from their parents resulted in not having enough support in bringing up and caring for their children.

> The first impact on my family through living abroad is a huge lack of help with the kids, especially in the first years, but also to a lesser

> degree in older childhood, adolescence. For the children, they have to adjust to new cultures, social settings, habits and peculiarities... They see other kids in extended families and they feel the void. Even more so when my parents come over and then leave. (Miranda, migrated to the UK in 1991)

However, care does not always have to be hands-on. Miranda and other women in the study explained how their home country became an important source of support for themselves and their children. This was notable during the summer and other important holidays when they would go for extended periods of time so their children could enjoy the extended kin and socialise with other members of the family within their own cultural environment. Zontini's (2006, 2007) research on Italian migrant women has revealed similar patterns of transnational caring practices and keeping in touch with the 'home culture'.

In our studies of migrants' narratives, journeys of migration are often described not as one-off movement from the countries of origin to the UK, but as an ongoing dynamic process of self-searching and identity-forming through visits back home and contacts with family and friends both 'here and there'. This ongoing interactional process can also facilitate the mutual provision of care.

> I try to go back every few months for ten days or so. This gives me the opportunity to see my ageing mother, but also my other relatives and friends. It's good to keep in touch because this will always be my base and I also make sure my mum is doing OK...at the moment, she doesn't need looking after as such, but it's good for me and for her to have these times together. (Anna, migrated to UK late 1960s)

Such journeys and dual responsibilities are not without conflicts and tensions. Anna explained that she often felt guilty for leaving her four children (though they were all grown-up now) and husband, but she saw spending quality time with her mother as an important component of her filial and cultural obligations.

Other studies of migrancy and transnational care, outside the EU context, have revealed the importance of 'keeping in touch' through 'visiting home'. Exploring the case of Pakistani immigrants in the UK and their families and relatives in Pakistan, Mason (2004) argues that 'the visit' involves a co-presence with people, which has a symbolic and practical importance for creating common family narratives and maintaining the familial relations over space and time. This is a point also made by Baldassar (2007) and Baldassar and Baldock (2000) in their studies of Italian immigrants in Australia. 'Caring' about family from a distance has two important components.

> The notion of caring from a distance...incorporates both the practices and emotions of caring (as in caring about exemplified in frequency of contact, the sense of loss when apart, and the importance of return visits) and the practices and emotions of care-giving (as in caring for, through participation in decision-making about issues of health and well-being, and the actual 'hands-on' care-giving during return visits back home). (Baldassar & Baldock 2000: 63)

A recent study of Polish migrants in London illustrated many similar practices of transnational caring (Ryan, Sales, Tilki & Siara 2007). Many people spoke about their regular, even daily, communication with family and friends in Poland via e-mail, texts, cheap phone cards, etc. While these transnational contacts could be an important source of advice or emotional support at a distance, proximity was required for some kinds of hands-on support and assistance. Many of the respondents described how relatives, usually parents, came to London on extended trips to help look after children. When Iza and Staszek had a baby in London they relied on their transnational networks for help with child-care. Iza explained: 'Firstly, my mother-in-law came, when the baby was a month old, and she stayed for six months, and then I asked my mum if she could come... and mum stayed.' For this couple, bringing relatives from Poland to help with child-care is an ideal solution. While transnational contacts are important sources of emotional caring and advice, child-care could not be done at a distance and so, at least temporarily, it necessitated relatives' geographical relocation. Thus, while migrants' social networks may be conceptualised as spatially dispersed, propinquity remains important for certain kinds of support (Wellman 1979; Oakley 1992; Ryan 2007).

However, that is not to underestimate the varied and complex ways in which caring roles could be performed at a distance. Jola, a 57-year-old widow, who works as a nanny in London, presented one of the most poignant examples of transnational caring. Although she had been a teacher in Poland, Jola found it impossible to support herself and her son who suffers from a long-term illness. She describes herself as 'bitter' about the economic situation in Poland. She received no help from the state and had to pay for her son's medication and all his medical expenses out of her own salary. Jola migrated in 2004 out of a sense of desperation, and is convinced that staying in Poland would have resulted in 'a nervous breakdown'. As a live-in nanny, her food and accommodation are provided, so she sends virtually all her wages back to Poland to pay for her son's treatment. As Hochschild (2000) suggests, care provided by migrants in households in affluent societies may lead to a care deficit back in their country of origin. This is a view also supported by the empirical cases discussed in Bonizzoni's chapter in this volume. However, while Jola cares for a child in London, she is unable to take care of her sick son in Poland.

Her story also points to the distinction between caring and caregiving (Baldassar & Baldock 2000). Although she is not physically present to give hands-on care to her son, she cares for him by paying for professional care. She felt that getting a job in London was the only way she could continue to help him. Hence, her migration has not created a care deficit, but rather enabled her to afford professional care for her son. Jola hopes eventually to bring her ill son to join her, though is worried that the money she earns as a nanny will not be enough to keep both of them in London (Ryan et al. 2009).

Boyd (1989) reminds us that transnational familial links are formed and sustained within the context of immigration policies and controls. The lack of immigration restrictions, close geographical proximity and the relative affordability of taking a ferry (in the days before budget airlines) gave Irish migrants the opportunity to create and maintain transnational ties long before most other migrant populations could do so. Nonetheless, freedom of movement and cheap travel within the EU have not only given European migrants increased mobility, but also have consequences for maintaining family relations across borders (Ackers 1998). While such contacts may provide practical support, they can also place increased caring responsibilities on migrant women (Ackers 1998). Far from the unfettered mobility often celebrated in the literature on transnationalism, migration and transnational relations may involve complex and conflicting roles and juggling competing responsibilities in two locations.

In the Polish study, we interviewed a middle-aged migrant named Karolina who had come to London to assist her daughter with child-care. Karolina provided illuminating insights into the potential tensions that transnational caregiving may cause. While she felt obliged to continue caring for her pre-school grandchild in London, Karolina was anxious to return to Poland to care for her sick, elderly mother. Thus, Karolina was caught in transgenerational, transnational caring roles as mother, grandmother and daughter. When we spoke to her these competing responsibilities remained unresolved and were clearly a source of great stress.

15.5   Methodological considerations

As illustrated above in our discussion of transnational interactions, there is a need to adopt a flexible theoretical orientation towards 'family' and 'care' that will take into account the inter-subjective and 'processual' nature of the migrant lived experiences (Blumer 1969; Pruss 1996). By attending to the each other's viewpoints, migrants and their families back home develop their lines of action to take into account both their own and other family members' circumstances and caring needs (Evergeti 2008). Often, decisions to move and settle in a new country are inter-subjective in nature. That is, migrants' choices reflect not only their own situation, but also their orientations to their families' perspectives and reality. Exploring migration and transnationalism from such a theoretical stance allows us to realise the impact of migration not only on the person that moves, but also on what Baldassar (2007: 279) calls the 'left-behind kin'.

Such an orientation requires a methodological stance that respects and uncovers the fluidity of changing practices of transnational caring and the interpretive nature of migrant experiences. Recent studies of transnationalism have stepped away from the nation/policy paradigm and have put emphasis on individual migrants and their families 'here and there', thus exploring the everyday realities of migrancy and how those involved in it cope with the demands of distant family relations and caring (Bryceson & Vuorela 2002; Bauer & Thompson 2004; Burrell 2005, 2006; Evergeti 2006, 2008; Evergeti & Zontini 2006). Such studies have highlighted the importance of using a methodology sensitive to the experiences of migrants, such as family narratives, life stories and ethnographic observations (Bauer & Thompson 2004; Christou 2002; Ryan 2002, 2004). However, this is not a new direction in migration research. The importance of biography, life story and narratives was recognised early on within the Chicago School of interactionist research on migrants in the US. *The Polish peasant in Europe and America* by Thomas and Znaniecki (1918-1920) is one of the classic and most influential studies of the Chicago School, with one of the four volumes being entirely devoted to the autobiography of one migrant. This important piece of work has provided us with a methodological scheme of understanding the human experience of living between two cultures from the perspective of the subjects themselves (Blumer 1969). In addition, it is important to acknowledge that the extent to which migrants can operate transnationally is shaped by national policies, for example, on immigration, family reunification and free movement agreements.

Transnational families and caring practices are complex, fluid and dynamic (Castles & Miller 2009). Understanding them requires the use of observational techniques, narratives and ethnographic interviews in order to capture the experiences and emotions of the migrants and their

immediate and distant families (Evergeti 2006). Furthermore, narrative analysis can provide research participants with the opportunity for self-representation by allowing them to relay and reconstruct the everyday experiences of their transnational family ties.

15.6   Conclusion

There is growing interest in how migrants, particularly women, are implicated in transnational families. This has led to a consideration of the 'global care chains' as migrants fulfil caring roles as nannies, nurses and maids in affluent societies. While this concept provides a useful tool for understanding the shifting relationships and caring roles within transnational families, the focus on socially disadvantaged female migrants, such as those coming from the South and those 'contained' within domestic settings, underestimates the diversity of migratory experiences and strategies. This chapter focused on migration across the EU. The ability to move across 'open borders' impacts, in particular ways, women's caring roles and responsibilities. Thus, it is important to consider how caring may be mediated through sex, age, family situation and immigration status. Recent work on transnationalism and the migrant family has started exploring the practices of long-distance family relations and, more specifically, the dual responsibilities that migrants and their families may have both 'here and there'. In this chapter we provided a critical review of research on transnationalism and caring practices in which migrants and their kin participate across national borders. We explored different forms of distant care responsibilities and the ways in which these change according to intergenerational relations and the needs of (transnational) family members.

Our discussion has tried to illustrate that in order to understand the fluidity and diversity of migrants' commitments, rather than focusing on broad theorisations of 'transnationalism', we need to explore in detail the practices and processes of long-distance family relations and the caring responsibilities they may entail. Finally, we highlighted the importance of utilising ethnographic and qualitative methods, including narratives and life stories that are sensitive to the everyday reality of transnational family care, capturing both the local and global context of such practices and responsibilities. These arguments have been illustrated with reference to our research on Greek, Irish and Polish migrants and the varied dynamics and shifting of caring relationships throughout the life course.

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