

Self-perceived burden of childcare on mother-substitutes of children of migrant women

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Abstract

Introduction: Large numbers of Sri Lankan women who annually migrate overseas for employment leave their children with substitute-carers. Despite direct influence these carers may have on left-behind children, their perceptions on responsibility of childcare are not adequately studied.

Objectives: To describe self-perceived burden of childcare on Primary Carers (PCs) of children of women migrants.

Methods: This qualitative study was conducted in Colombo, Gampaha, and Kurunegala districts. Semi-structured interviews were conducted with forty PCs using a pre-prepared, interviewer-administered, semi-structured questionnaire. Qualitative content analysis was used for data analysis.

Results: PCs attribute several physical health problems to childcare responsibility and have neglected continued care for chronic illnesses. More male than female PCs perceive their mental health to have suffered from childcare responsibility and feel that they are incapable of providing optimal care for children. Family and social relationships of PCs are adversely affected and other family members are neglected. Younger PCs have forgone their marriages. Earnings of migrant women filtering down to PCs are minimal, adversely affecting PCs financially. Older PCs have difficulties in continuing employments while younger PCs forgo educational and employment opportunities. It appears that many PCs consider childcare responsibility to be a burden on them affecting their normal lifestyles.

Conclusions: Adequate support services to arrange for suitable childcare facilities without it becoming a burden on PCs is required to be established and policy and policy instruments must be in place to ensure full financial and social benefits of women's migration is reaped by their families and country.

Key words: migrant; children; carer; burden; Sri Lanka

Introduction

The total number of Sri Lankan labour migrants today stands at over 1.8 million [1], 52% of which are females [2]. Each year, over 250,000 Sri Lankan women migrate overseas for employment [3], and remittances by overseas migrants have become the top foreign exchange earner for Sri Lanka [4]. When these women, most of whom are married [5], migrate for employment, they leave behind their children to be cared for by other members of their nuclear or extended families (and rarely by other close relatives) [6].

Both the migrant women and the left-behind children are reported to be adversely affected by women's migration [6-8]. Principle carers (PCs) substituting for mothers of left-behind children are also adversely affected. During the absence of spouses, the fathers of these children get addicted to alcohol and narcotic substances, engage in extramarital affairs and lose their employments [5, 6, 8, 9]. Health and financial conditions of grandparents of these children also suffers as a result of childcare [6], when they become mother-substitutes. If such problems lead PCs to perceive childcare as a burden, it would

affect quality of childcare and thereby have adverse repercussions on left-behind children. Despite this possibility, PCs' own perception on childcare as a burden and as causative factor for their health and other problems has not been adequately studied. Objective of this study was to describe self-perceived burden of childcare on PCs of children of women migrants. Qualitative methods were used to generate scope and variables for a subsequent quantitative study.

Methods

This qualitative study was conducted in Colombo, Gampaha, and Kurunegala administrative districts, from where the highest number of women migrate annually for overseas employment [2]. From a list of PCs of children of migrant women prepared through a community survey (conducted for different, but a parallel study), a total of forty were randomly selected to proportionately represent different categories of PCs, namely, grandmothers, fathers, grandfathers, aunts, siblings, and other relatives. Semi-structured interviews (SSIs) were conducted with these 40 PCs, using a pre-prepared, interviewer-administered, semi-structured questionnaire. The

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questions included the circumstances under which PCs undertook childcare responsibilities, the effects of childcare on their health, occupation/education, lifestyle, realising expectations etc, and whether the childcare is considered a burden. Data collectors were sociology graduates who have had extensive training and prior experiences with sociological research, especially the research involving migrant women. They were also skilled in counselling.

SSIs were tape recorded with participants' consent and notes were taken down. Tapes were transcribed immediately after each SSI. Qualitative content analysis of data was carried out.

Informed consent was obtained from all participants. Ethical approval was obtained from Ethical Review Committee of Faculty of Medical Sciences, University of Sri Jayewardenepura.

Results

Most PCs were grandmothers (n=12; 30.0%) and fathers (n=10; 25.0%) of children. The rest were aunts (n=9; 22.5%), elder siblings (n=5; 12.5%), grandfathers (n=2; 5.0%), and other relatives (n=2; 5.0%).

Several themes emerged with content analysis of data. These were effects of childcare on PCs' physical health, mental health and stress, social and other relationships, finances, education and employment, help received from others, and self-perceived perception of childcare as a burden.

Effects on physical health

PCs attributed occurrence of new physical health problems as well as aggravation of existing illnesses to childcare activities. Common physical health problems freshly encountered by older PCs were backaches, joint pains, and excessive tiredness, while neck pains and headaches were common among younger PCs. Main reason for aggravation of existing chronic illnesses of PCs was defaulting treatment due to lack of time to seek health care, which resulted from childcare responsibility.

Mental health problems and stress

Many PCs considered them to have become psychologically unhealthy since they undertook childcare. Most of them perceived themselves to be under mental stress due to this additional responsibility. Perception of stress was less among grandmothers and aunts, but strongly held by fathers and grandfathers. Some male PCs had begun to abuse alcohol as a mean of coping with their stresses.

Further, many PCs, especially fathers and grandfathers, felt that care they provide to children is

not optimal, a feeling that caused them an ongoing mental stress. Such feelings were minimal among grandmothers and aunts.

Social and other relationships

Some PCs felt that their relationships with their family, relatives, friends, and others had suffered as a result of having to look after migrant women's children. On one hand they felt that responsibility of childcare left them with less time to interact with others and on the other hand, little time they had also could not be utilized successfully due to psychological burden.

Some PCs felt that responsibility of childcare prevents them from attending to needs of other family members, which also adds on to their mental stress.

Younger PCs have got more affected in their relationships. Not only they were unable to socialize with friends and relatives as a result of burden of childcare, some of them also have forgone their marriages due to same.

Finances

Most PCs faced financial difficulties resulting from caring for children. Although some migrant women sends money home, some do not (or do so rarely), and some families have not had any contact with migrant woman for a long time. Even when money is sent home, it is spent on paying debts they have obtained to send the woman abroad. Women usually send remittances to their spouses, and whatever left after paying for debts and essentials is used by these men on alcohol and narcotics, and at times on their extra-marital affairs. What filters to PCs (when this is not father of children) is minimal, and in many occasions these non-parent PCs are forced to bear cost of childcare all by themselves.

Education and employment

Almost all male PCs complained that their employment is adversely affected by having to look after children. Grandfathers and fathers either could not go to work because of children, or gets in to various difficulties at employment (and at times, lose employment) due to excessive leaves, short-leaves and absenteeism which result from having to care for children.

Inability to pursue educational opportunities was common among younger PCs. Many elder siblings of children have either dropped out of school or absent frequently from school due to having to look after their younger siblings. Some elder siblings and younger aunts have also forgone opportunities of higher education and employment due to the same.

Help from others

Some PCs, especially grandmothers, receive help from other family members to look after children. Although some aunts and grandfathers also get help from family members (or sometimes from neighbours), fathers get least help for childcare.

Perception of childcare as a burden

Although many PCs did not acknowledge that childcare has become a burden on them, nuances imbedded in their expressions indicated otherwise, and most PCs admit that they would be happier, stress-free, and healthier if they did not have childcare responsibility. This was especially the case among male PCs compared to females, although the expression was almost universal among all categories of PCs. Some PCs, especially males, openly admitted that childcare is a burden on them which adversely affect their mental health and hinders progress and/or sustenance in other aspects of life such as employment and social relationships. Only few PCs unequivocally stated that they are happy to look after children, and all of them were grandmothers.

Discussion

Several problems faced by PCs are mostly dependant on their sex and relationship to children. Attribution of physical illnesses such as backaches, neck pains and headaches to childcare by many PCs may indicate either organic conditions in elderly PCs (induced by excessive exertion) or somatisation symptoms of psychological distress in younger PCs. Forgoing medical treatment due to burden of childcare is common. For those who have chronic non-communicable diseases such as hypertension, cardiovascular and cerebrovascular diseases, and diabetes mellitus, poor management of their conditions would lead to dire complications and premature death. Such physical health problems resulting from childcare responsibility has also been reported in earlier studies [6]. When poor management of chronic non-communicable diseases continue to give rise to complications, it may overburden health sector as well, thus diminishing monetary benefits Sri Lanka earns through women's migration.

Many PCs acknowledged that they feel psychologically unhealthy. Previous researches have shown that looking after children of migrant women could be a stressful task [6, 9]. Males were most stressed psychologically as a result of childcare responsibility. However, female PCs, who have raised their own children (grandmothers and older aunts) as well as those who have not (elder sisters and younger aunts), felt quite comfortable with tasks of childcare. This difference in two sexes could be genetically and culturally mediated. Psychological

stress becomes more harmful when added on to by feeling of failure in responsibility among male PCs and results in negative coping methods such as alcohol abuse. Such negative coping methods among fathers have also been repeatedly confirmed in previous studies [5, 6]. Most families of migrant women are in socially disadvantaged positions with poor educational and socio-economic backgrounds [6], which may fuel negative coping methods. These commonly reported psychological stresses and maladaptations especially affect left-behind children negatively [6, 10], and adverse consequences of negative coping methods could spiral out to affect entire family and community. If measures to screen for and remedy such health problems could be introduced through preventive health care teams (without overburdening them), such adverse consequences could be minimised.

Childcare responsibilities adversely affect relationships PCs have with their families, relatives, friends, and neighbours thus diminishing social capital available for them, which could have long term adverse repercussions. In addition, inability of some younger females to marry could have far-reaching psychological and social implications, both for them and their families.

Although labour migration is the top foreign exchange earner for Sri Lanka [4], families of migrant women do not seem to benefit from these earnings. Some have taken loans to arrange their migration, and once these are re-paid, not much remain to spend on family and/or invest. Some other migrants do not send money home at all, which could be a result of widely reported non-payment of salaries by their employers [6, 10]. Whatever that is sent to their spouses are often wasted on alcohol and other misbehaviours. As a result, non-parent PCs have to face numerous financial difficulties while looking after left-behind children. Although Sri Lanka Bureau of Foreign Employment offers scholarships to children of migrant women [2], it covers only a fraction of those who are in need. On the other hand, need for such assistance itself negates desired gains from women's migration.

It is a matter of concern that employment and educational opportunities of PCs, especially those of young persons, suffer as a result of childcare responsibility. Education is an investment for future, for individual, family, and society. On the other hand, PCs losing employments as a consequence of childcare responsibility resulting from women's migration negates very benefit of such migration.

Although majority of PCs did not openly acknowledge that childcare is a burden, underlying currents were obvious, except in the case of some

grandmothers. It appears that migration of women is not adequately planned, and ad-hoc arrangements usually take place regarding childcare. This disrupts usual family functioning, and PCs unskilled in childcare are unable to cope with the additional responsibility. It is interesting that respondents of this study as well as previous similar studies [6, 11] have openly admitted that childcare responsibility is a burden on them, despite social unacceptability of such statements.

Conclusions

Lack of adequate planning regarding childcare responsibilities and making ad-hoc arrangements adversely affect mother-substitutes of children of migrant women in a number of domains. Not only their health is affected, financial and social benefits of women's migration are also not optimally reaped. Loss of employment and educational opportunities could affect productivity of entire country and relationship problems could have far-reaching social repercussions. Adequate support services to arrange for suitable childcare facilities without it becoming a burden on PCs is required to be established and policy and policy instruments must be in place to ensure full financial and social benefits of women's migration is reaped by their families and country.

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