

Siblings Negotiations in the Transnational Care of Non-Migrant Parents in Peru

Negociaciones entre hermanas y hermanos para los cuidados transnacionales de madres y padres no migrantes en Perú

Myrian Carbajal,¹ Robin Cavagnoud,² Carolina Ramírez,³ &
Carolina Stefoni⁴

ABSTRACT

Based on fourteen in-depth interviews with Peruvian migrants living in Switzerland, the article analyzes the family arrangements between migrant and non-migrant siblings on behalf of their parents living in Peru. The findings highlight that decision-making is affected by power relations, where gender and economic resources play a decisive role. Sibling negotiations are also related to the capacity to fulfill the filial duty of taking care and feeling recognized as the son or daughter who takes care of the parents, just as the parents did when the siblings were children. While the sample covers a group of migrants settled in Switzerland who achieved important levels of social, cultural, and labor integration, the results provide insights on transnational care issues that are applicable to other South-North migration contexts.

Keywords: 1. transnational care, 2. family, 3. siblings, 4. Peru, 5. Switzerland.

RESUMEN

A partir de 14 entrevistas a profundidad con personas migrantes peruanas residentes en Suiza, el artículo analiza los arreglos familiares entre las y los hermanos migrantes y no migrantes en favor de sus madres y padres radicados en Perú. Los hallazgos subrayan que la toma de decisiones está marcada por relaciones de poder, donde el género y los recursos económicos desempeñan un rol decisivo. Así mismo, las negociaciones entre hermanas y hermanos están relacionadas con la capacidad de cumplir el deber filial de cuidar y de sentirse reconocido como el hijo o la hija que cuida a sus padres, tal como estos lo hicieron cuando ellos eran niños. Si bien la muestra abarca a un grupo de migrantes establecidos en Suiza que logró importantes niveles de integración social, cultural y laboral, los resultados proporcionan pistas sobre la problemática de los cuidados transnacionales aplicables a otros contextos de migración sur-norte.

Palabras clave: 1. cuidados transnacionales, 2. familia, 3. hermanos, 4. Perú, 5. Suiza.

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¹ HES-SO University of Applied Sciences and Arts of Western Switzerland, Switzerland, myrian.carbajal@hefr.ch, <https://orcid.org/0000-0002-4393-0203>

² Pontifical Catholic University of Peru, Peru, rcavagnoud@pucep.pe, <https://orcid.org/0000-0002-0584-8620>

³ Universidad Católica Silva Henríquez, Chile, carolina.rmc@gmail.com, <https://orcid.org/0000-0002-5586-8961>

⁴ Universidad de Tarapacá, Chile, cstefoni@gmail.com, <https://orcid.org/0000-0001-6949-2312>



INTRODUCTION

Since the late 1980s, international migration has become an important social mobility strategy for families in Latin America, as well as a vector of personal and professional fulfillment for numerous middle- and lower-class women (Lube Guizardi et al., 2018). In the period from 1990 to 2018, a total of 3 165 894 emigrants were recorded in Peru, leaving for places in North America (33.3%), South America (32.1%), and Europe (28.8%), figures representing almost 10% of the total inhabitants in the national territory of that country when compared to the last census (Instituto Nacional de Estadística [INEI], 2020).

Peruvians who emigrated between the 1990s and 2010s were part of the young, or young adult, population (20 to 44 years), whose parents belonged to the adult population (45 to 59 years). Now, after several years abroad, they are faced with the aging of the latter and their own obligation towards their care needs.

In a context where the social protection system depends more on families than on the State (Sojo, 2017; Sunkel, 2006), and where only 26% of the economically active population (EAP) has a pension plan (Casalí & Pena, 2020), the material and care needs of the elderly must mainly be assumed by family members, particularly by their migrant daughters and sons.

The provision of remote care, also known as transnational care, requires coordination within the kinship network and, in particular, within the sibling group (Lloyd-Sherlock et al., 2018). This term designates a set of practices of a material, emotional, and logistic nature (Boccagni, 2015), in which the social and cultural dimensions of negotiated family obligations and commitments intertwine (Baldassar et al., 2007). Transnational care arrangements involve intra- and inter-generational negotiation processes between the multiple actors involved (Baldassar & Brandhorst, 2021).

This article is based on an investigation into the transnational care strategies provided by Peruvian men and women who migrated to Switzerland, to their elderly mothers and fathers, who are in Peru. Thus, it seeks to deepen, from the point of view of migrant daughters and sons, unto the dynamics of negotiation among siblings, as well as unto the gender and social class issues that cross through these arrangements. More specifically, it analyzes how these negotiations emerge as social relations that demonstrate the capacity and recognition of fulfilling the filial duty of care.

Following the Circulation of Care approach (Baldassar & Merla, 2014) and that of the norms of reciprocity between generations, filial duty is understood as the ability of each migrant daughter or son to address the needs of their elderly parents, just as their parents took care of them when they were children. The obligation to care was widely discussed from a gender perspective, where women are under the most social pressure for being seen as *natural* caregivers (Chan, 2017; Ho & Chiang, 2017; Lloyd-Sherlock et al., 2018). Thus, this article argues that, on the one hand, the fulfillment of filial duty differs according to the gender and economic resources of the migrant daughters and sons and, on the other hand, that the keeping of constructive relationships in the sibling group favors mutual recognition and reciprocity of exchanges, which are fundamental for participation in the care network.

The article is organized into four sections. The first positions the problem of sibling arrangements in the literature on transnational care, while the second describes the research methodology applied to Peruvian migrant daughters and sons in Switzerland. The results are then first presented in the third section, which also analyzes the way in which the reference person in the provision of care is defined, as well as the central role occupied by this person in solidarity networks. The fourth section presents a typology built from two

variables: the sense of inclusion or exclusion from the solidarity network, and carrying weight or not in the negotiations and decisions made among siblings in emergency situations. The conclusions discuss the main results, and outline a number of hypotheses for future research.

Family Arrangements Among Siblings in Studies on Transnational Care

In contexts of international migration, organizing to take care of elderly parents who stay in the country of origin depends mainly on the ties among siblings, daughters and sons of the parents in question, as well as on the quality of their relationship to make decisions and organize mutual support and help practices. These aspects refer to the formation of *transnational families* and the permanence of a sense of *familyhood* between migrant and non-migrant relatives (Bryceson & Vuorela, 2002).

Unlike transnational motherhood, which has been widely studied (Hochschild, 2000; Salazar Parreñas, 2000; Yeates, 2012), the negotiations among siblings that underlie transnational family arrangements constitute a less delved-into phenomenon. Baldassar and Brandhorst (2021) explain that the links between migrant and non-migrant siblings include the role of the kinship network in the organization of family care, as well as the exchanges and relationships between different generations and within each of them. From the same perspective, the *Circulation of Care* approach (Baldassar & Merla, 2014) takes into account the entire family network and the multiplicity of actors involved in transnational family solidarities. This model also highlights the importance of the bonds of reciprocity, obligations, love, and trust, as well as the tensions, questionings, and power relations that cross these inter-generational and intra-generational interactions.

Filial duty involves expectations of support from parents, as well as solidarity norms in relation to the responsibility of (adult) children to care for them. After migration, geographical distance usually generates feelings of guilt (Baldassar, 2015; Baldassar et al., 2007), and encourages transnational care strategies to compensate for physical absence and satisfy parental demands. The concept of *filial piety* describes the obligation of migrant daughters and sons to care for the needs of parents, and is related to the reproduction of gender patterns, given that women tend to be seen as *natural* caregivers (Chan, 2017; González & Guizardi, 2021; Ho & Chiang, 2017; Lloyd-Sherlock et al., 2018; Stefoni et al., 2022). By the same token, the history of intra-family relationships usually has an effect on the organization of care, the distribution of responsibilities, and the dynamics of mutual help (Baldassar & Merla, 2014; Castellani & Martín-Díaz, 2019).

On the other hand, Zechner (2008) introduced a difference between the acknowledgement of the care required (*caring about*), the assumption of responsibilities to initiate and maintain care activities (*taking care of*), the concrete work of providing care in terms of time and resources (*caregiving*), and the response of the person receiving this care (*care-receiving*). In this sense, there are three conditions that determine transnational care activities: geographical distance, available resources, and circumstances related to the physical and economic status of the elderly. Given that many of the latter do not accept help, the work of *caregiving* decreases, but *caring about* and *taking care of* become complicated by the emotional burden and concerns they generate in migrant daughters and sons. In these situations, non-migrant siblings, particularly sisters, play a decisive role in directly identifying the care needs of their parents, and in deciding their respective organization.

After one or more members of the group of siblings migrate, men and/or women, they tend to take care of their parents. Skornia and Cienfuegos Illanes (2016) analyze this reproduction of gender patterns in the

division of care tasks in transnational families, which deepen the asymmetries between the sexes, and affect intra-generational relationships. Likewise, the notion of *main caregiver* designates the sisters who assume practical care as a form of extension of domestic work. Still, Lloyd-Sherlock et al. (2018) also observe that, when non-migrant parents find themselves in a situation of dependency, the role of the main caregiver can refer to one of the male siblings who appropriates the authority and responsibility for care, as a strategy aimed at inheritance.

As highlighted by Brijnath (2009), crisis episodes related to illnesses or accidents reveal the work of family networks of solidarity where mainly migrant sisters, altogether with other family members (granddaughters and grandsons, spouses, aunts), participate in the care by providing emotional and moral support by means of communication technologies. Although they are exempt from practical care, the emotional burden they endure is important. According to this same author, in the lack of a sister in the country of origin, migrant daughters tend to become more involved in the practical and personal care of their parents through regular trips to the country of origin. This last aspect was also highlighted by Baldassar et al. (2007), who emphasize gender in relation to birth order in the sibling group (older daughters and sons tend to take on more responsibilities) and to marital status (unmarried sisters and brothers tend to be considered more available to care) as the main variables that influence the greater or lesser involvement in the provision of care. These authors explain that geographical distance generates a certain dependence of the migrant on their siblings in the country of origin.

Kordasiewicz et al. (2018) are interested in the care practices of Polish emigrants in European Union countries towards their parents in their place of origin. They make use of the *moral equation of care* concept to emphasize the game of comparisons engaged in by siblings, depending on the amount of care that their parents provide to each daughter or son (for example, through care of granddaughters or grandsons), and that allows determining who should contribute more than the others to balance out the equation. For his part, Buchanan (2021) questions the mechanisms that structure support among siblings at different stages of their life, and highlights the cultural practices, family obligations, and specific situations (such as migration) that guide the different types of support. The author explains that the support and closeness between these members are related to parental practices and bonds during the first years of life of their children. As for the care of the elderly, sisters usually play a more important role and they do so, in a transnational context, thanks to communication technologies. The support among siblings can be decisive at advanced ages, and may even be the only support available. According to Coe (2013), the importance of this link in international migration contexts, and its contribution in terms of economic and emotional support are explained by the potentially more lasting nature of relationships among siblings, unlike relationships with other relatives.

This review of the literature available on the subject highlights, on the one hand, the importance of the filial duty to care and the central role of siblings in transnational solidarity networks and, on the other hand, the different variables in family agreements. However, the issue of negotiation among these migrant and non-migrant members in the provision of care to their parents has been little studied. This article is aimed at filling this gap by investigating, from the point of view of migrant daughters and sons, in the dynamics of negotiation among siblings, and in the gender and social class issues that these relationships go through. From the *Circulation of Care* approach (Baldassar & Merla, 2014), the relationships within the sibling group are analyzed, and the situations of trust, tensions, and constant negotiations that permeate them are accounted for. To examine this phenomenon, this study is based, on the one hand, on the concept of trust that Marzano defines as the ability to “abandon oneself to someone safely” (2012, p. 89). According to the

author, it is important to distinguish between *trust* and the feeling of being able to count on someone, *reliance*. Conversely, the possibility of turning to a person (someone *reliable*) requires noting his or her moral, social, and/or professional competencies, as well as objective evidence of his or her reliability. While this person may disappoint by not fulfilling their role, they cannot betray because they have not been a repository of trust. In this sense, there is continuity between the feeling of being able to count on someone, *reliance*, and *trust*.

Finally, according to the sociology of social transactions, negotiation is understood as a semi-structured situation permeated by uncertainty (Rémy, 1996). This concept highlights both the open nature of negotiation and the role of power relations: “if negotiation is central, the social sphere is understood as a game of power and counter-power” (p. 11), also taking into account the room for maneuver that individuals have to reverse certain dynamics.

METHODOLOGY AND CHARACTERISTICS OF THE INTERVIEWEES

This article is part of an exploratory and qualitative research, with a multi-situated and intergenerational strategy, which seeks to analyze the transnational care methods employed by Peruvian migrants living in Switzerland and Chile, as well as the way in which their parents in Peru perceive and experience the care provided by them (Carbajal et al., 2023; Cavagnoud et al., 2023). This article focuses on the analysis of data from interviews carried out in Switzerland, and reports the point of view of migrant daughters and sons.

In year 2020, Switzerland welcomed 13 203 people from the four countries of the Andean Community: Bolivia, Colombia, Ecuador, and Peru (Office Fédéral de la Statistique [OFS], 2021a). This figure represented 64% of the total migrant population from the Spanish-speaking countries of South America. This study focuses on Peru, the country of origin of the third largest number of foreigners from Spanish-speaking South America (after Colombia and Chile). In year 2020, there were officially 2 864 Peruvians in Switzerland, in addition to nearly 4 000 who acquired Swiss nationality between years 1991 and 2020 (OFS, 2021b).

This article analyzes 14 in-depth interviews carried out with nine women and five men; eight of them arrived in the 1990s, and six in the 2000s. Their ages range between 39 and 59 years, and their time living in Switzerland between 10 and 31 years. Nine people interviewed had obtained Swiss nationality, while three had a C permit⁵ and were processing their naturalization. Eight of these individuals (five men and three women) had lived in Switzerland as undocumented immigrants, while six had obtained a residence permit upon arrival, either through educational institutions (three women) or through marriage (three women). Nine of those interviewed had completed a bachelor’s degree (six in Peru and three in Switzerland), and several have completed postgraduate programs at Swiss universities. In this way, seven participants in the research had managed to overcome the obstacles faced by immigrants from non-European countries, thus successfully integrating into the labor market by practicing professions in the fields of psychology, architecture, nursing, and engineering. Conversely, two had their credentials not validated. Finally, four of the five interviewees who did not attend university in Peru attended vocational training programs at Swiss institutions in fields such as cooking, restoration, and health. The characteristics

⁵ Someone can obtain a C permit (settlement) after having lived in Switzerland for ten years, as long as the person has held a residence permit for the last five years and can demonstrate social integration.

of the participants reflect the profile of Peruvian migrants in Switzerland since the late 1980s, who have achieved important levels of integration, that is, high educational levels and access to the middle and upper classes (Seminario, 2018).

As a selection criterion, participants had to have at least one mother or father of legal age living in Peru. Family reunification is not an option, since in Switzerland it is only available to nationals, and only in cases where the family members reside in the European Union (EU) or the European Free Trade Association (EFTA), are holders of permanent residence permits, and are dependent on the applicant (Federal Act 142.20 of 2005; Secrétariat d'État aux Migrations, 2013).

As for the ages of the parents, they ranged between 71 and 91 years. In eight cases, both were married and living together. In four cases, both received financial income from retirement, and in the remaining four cases only one of the two received a pension. In six situations, the mother was widowed (four), divorced (one), or was a single mother (one); and out of them, five received retirement financial income. From the 14 cases studied, 13 people benefitted from public health insurance, and half received help from an employee who is in charge of cleaning or cooking at home. All of these people were physically and cognitively autonomous. However, some of them began to show signs of problems related to visual and hearing impairment, or loss of balance. Others had controlled health problems, such as high blood pressure, diabetes, and depression.

In-depth face-to-face interviews (Riessman, 2008) were carried out with the aim of collecting the point of view of migrants in relation to migration, the transnational family, and filial care. These interviews were carried out in Spanish between June and July of year 2020 in places chosen by the interviewees (including cafes, parks, and their homes). Their duration varied between one and a half hours, and two and a half hours (except for two subsequent shorter interviews, which lasted between 45 minutes and one hour, carried out through calls using the WhatsApp application). All interviews were recorded and fully transcribed. The names of the participants were modified to keep their anonymity.

Based on the information collected, a thematic narrative analysis was carried out that consisted of identifying previous concepts (such as *care*) and new theoretical categories. The topics were addressed taking into account the context of the case studied. In the narratives of the interviewees, the siblings appear as the main figures in the organization of care. This is how the issues of negotiation among such members and of the image of the *reference person* or *main caregiver* were fundamental. These two terms are used interchangeably in this article. Although the term *reference person* seems more appropriate, given that the sample focuses on parents who are physically and cognitively autonomous, when emergency situations arise, the *reference person* is equivalent to the figure of the main caregiver. Finally, the analysis was assisted by the MAXQDA software, which keeps the entire interviews intact and facilitates analysis by themes that are understood in light of the particular cases.

The Reference Person in the Provision of Care to Non-Migrant Parents

The people interviewed, whether women or men, feel involved in transnational care by the sending money, trips, and phone calls. However, most women travel on average once a year, while men travel on average every two or three years. Due to their physical absence, it is not possible for migrant daughters and sons to provide practical care and need a reference person for care provisioning. In 13 out of the 14 cases studied,

this person is a woman, a daughter in Peru, or a migrant daughter inside or outside the country, assuming responsibility for the care of the elderly parents (Table 1).

I transfer money to my sister's account and she is the one who administrates [...]. She is the boss of the house there. She is the one who has control over the brothers, she is the one who talks to everyone, and through her we get to know everything. She also tells us what is happening in the neighborhood, because my mother tells her about that (Enrique, 40 years old, living in Switzerland for 18 years, personal communication, June 23, 2020).

Like other people interviewed, Enrique, a nursing assistant and musician, related that the reference person in Peru is a sister who, due to her "qualities of sensitivity, honesty, and responsibility, her organizational and administrative skills, and her strength of character" is perceived as a reliable family member and is trusted by her sisters and brothers (Enrique, personal communication, June 23, 2020). Despite distance, she is responsible for providing information about the health status, needs, and well-being of her mother and father, contacting her siblings, and managing a bank account for parental care. In other cases, the reference person lives in the same city or lives with the mother and/or father, and assumes all personal care and the organization of specific aid. Isabel, an engineer for a private company, describes such a situation.

My brother lives his life, I mean, he visits my parents once a week anyway, but he does not assume that role. In Peru, it is the women who take care of their parents [...] I am very lucky, and my sister, above all, the one who takes care of my parents, she's such an earner and is so available that everything happens naturally [...] She stops by practically every day to see my parents, and buy them stuff or help them with something (Isabel, 59 years old, living in Switzerland for 29 years, personal communication, June 11, 2020).

If primary caregivers are considered reliable and trustworthy, non-migrant siblings are rather described as *distracted*, *indifferent*, *selfish*, or driven only by their destination families due to the influence of their respective wives. The tasks they perform are one-time and practical: financial contribution, providing mobility for the mother or father, and/or making purchases. When siblings display attitudes such as self-interest, greed, and/or selfishness, they become not trustworthy to others. Some discourses describe non-migrant, single, or divorced male siblings as those who benefit the most from the care given by mothers (cooking, washing clothes, caring for grandchildren), and/or from the financial aid of their fathers.

It is noted that the reliable person is not necessarily the person who lives with the parents. Cohabitation was relatively common in the sample (in seven cases, parents live with one of their daughters or sons; Table 1) and was evidenced, rather than as a care strategy by them towards their parents, as a strategy of economic, emotional, and practical support of the latter towards daughters and sons in a situation of economic dependence resulting from a divorce or separation. Furthermore, in emergencies of the parents, such as illnesses or accidents, it is cohabiting daughters and not sons, who assume the role of caregivers, followed by daughters-in-law and granddaughters and/or grandsons.

On the other hand, situations were observed in which siblings apply the idea of the moral equation of care to request greater intervention from some of the siblings, but this is directed more towards women, since less involvement is usually expected from men. The image of the *freeloading* sister does appear, yet very infrequently. Concepción, architect for a private company, related one of such instances.

My sister is the one who lives with them, she had been asking for someone to live there full-time for five years, but I disagreed [...] It was also convenient for her because her children were very young;

and, of course, an employee could also take care of them, so I thought that if she wanted that, she had to pay for it, but she thought otherwise, that my parents had to pay (Concepción, 50 years old, living in Switzerland for 14 years, personal communication, June 3, 2020).

In general, and as suggested by this testimony, situations linked to money arouse suspicion. Other stories insist on the importance of all siblings contributing financially to the care of the parents, even if only symbolically, and that the financial aspect should not fall solely on those who are abroad. The discourses reveal a sort of fear related to bad habits that some siblings may acquire in the country of origin upon receiving money easily, that this money may be used for personal expenses and not for the care of their parents. These latent tensions, as well as the feelings of love and trust that permeate the relationships between migrant and non-migrant siblings, emerge more readily in emergency cases where it is required to make prompt decisions.

Table 1. Organization of Care and Roles of Siblings,
According to the Point of View of the Interviewee

Pseudonym	Location/age of the mother and father	Total number of siblings and birth position of the interviewee in the sibling group				Location of the siblings	
		Total men	Total women	Birth position in the sibling group	With the parents	Same city	Another city or country
Fany	Lima / Mother (72 years old) *	1	1	1/3			1 brother and <u>1 sister in Switzerland</u>
Juan	Provincia / Mother (84), father (85)	5	3	5/9		<u>1 sister</u> and 2 brothers (in the same house)	3 in another city; 1 brother and Juan in Switzerland
Agucho	Lima / Mother (71)**	2	1	3/4	<u>1 brother</u>		1 sister and <u>Agucho in Switzerland</u>
Concepción	Lima / Mother (76), father (85)	1	4	3/6	<u>1 sister</u>	1 brother	<u>1 sister in Provincia</u> ; 1 sister in Germany; Concepción in Switzerland
Daniela	Provincia / Mother (90)**	1	4	5/6	<u>1 sister</u>	1 brother <u>1 sister</u>	1 sister in Lima; Daniela in Switzerland
Rafaela	Lima / Mother (91)**	2	2	4/5	<u>1 sister</u>	<u>1 brother</u> 1 brother	Rafaela in Switzerland
Luna	Lima / Mother (83)**	2	2	3/5			2 brothers in Peru; <u>1 sister and Luna in Switzerland</u>
Cintia	Lima / Mother (73), father (74)	1	2	1/4	1 half brother		<u>1 sister in Japan</u> ; Cintia in Switzerland
Paula	Lima / Mother (75), father (76)	2	1	3/4		<u>1 brother</u> 1 brother	<u>Paula in Switzerland</u>
Isabel	Lima / Mother (81), father (86)	1	4	1/6		<u>3 sisters</u> 1 brother	Isabel in Switzerland
Fernando	Provincia / Mother (82), father (84)	2	1	3/4	1 brother		<u>1 sister in the United States</u> ; Fernando in Switzerland

(continue)

(continuation)

Enrique	Provincia / Mother (70), father (75)	6	1	7/8		3 brothers	<u>1 sister in Peru</u> ; 2 brothers in Lima; <u>Enrique</u> in Switzerland
José	Provincia / Mother (74)*	2	2	3/5			<u>1 sister in Peru</u> ; 1 brother in Peru; 1 sister and José in Switzerland
Elena	Provincia / Mother (72), father (73)	1	2	2/4	<u>1 sister</u>	1 brother	Elena in Switzerland

* Parents divorced or not married; ** deceased father.

Note: The underlined individuals are identified as reference personas in the organization of care.

Source: Own elaboration based on the empirical information collected.

Negotiation Among Siblings in Emergency Decision-Making

Decision-making reveals processes of participation in the transnational care network, and implicit or explicit negotiations among siblings, wherein the geographical, economic, and social position of each person is evidenced. Physical distance puts the migrant at a disadvantage, as they find themselves in a relationship of relative dependence on the reference caregivers in the country of origin. Still, situations are much more complex when the reference person is himself far from the country of origin. Although migrant daughters and sons seek to keep direct ties with their parents in Peru, communication may be limited due to the latter, for example, not using the messaging platform WhatsApp, specific health problems, or due to the parents providing incomplete information to their daughters and sons. Cintia's case illustrates this situation; while her sister lives in Japan, a brother on her mother's side lives in Peru, with her mother and the half-brother's father. However, she cannot count on him for parental care, much less for him to pass on information about the health status of the parents. Faced with this situation, she tries to keep ties with her 20-year-old niece and with her network of friends in Peru.

The truth is, I don't talk to him [her brother] [...] Sometimes I get very angry because it's of no use for him to be there. That is, at least his daughter, she's the granddaughter, my niece. Sometimes, I write to her and tell her: "Hey, you have to take care of my parents because you are living there and you have to help around the house... bring something in, right?" Because, they also don't, they don't have [...]. [My parents] never tell me anything. They never tell me if they need any medicine. [...] That also makes me sad, because I never know what is happening to them (Cintia, 46 years old, living in Switzerland for 10 years, personal communication, June 5, 2020).

These situations of relative dependence on people who are in the country of origin can be reversed through financial and material help to sisters and/or brothers, nieces and nephews, different relatives and/or circle of friends (cousins, daughters-in-law, friends, neighbors, etc.). These remittances make it possible to cover expenses related to check-ups, health treatments, or businesses, among others, and contribute to creating positive relationships among siblings, as well as to nurturing solidarity networks. However, not all migrants are in a position to send remittances to their siblings or to the circle of friends involved in caring for their parents to any extent. Particularly in emergency situations where it is necessary to make decisions, these differing extents of participation in solidarity networks and of negotiation capacity come to light, generating feelings of inclusion or exclusion.

In order to understand the participation processes in decision-making in emergency cases and the capacity for negotiation, a typology has been built taking into account, on the one hand, feelings of inclusion or exclusion in such situations and, on the other, carrying weight or not in the decisions to be made. Inclusion and exclusion are situated on a *continuum* of positions, and moving towards one extreme or another is the result of power relations wherein gender and economic standing are determining factors. As such, three configurations have been identified, set out below.

*Carrying Heavy Weight in Decision-Making:
Feeling Included*

In this first configuration, the migrant daughter or son actively participates in decision-making and the search for solutions. Their point of view is usually decisive. The reference person in Peru quickly makes contact with the migrant, in the hope that he or she can provide solutions. Geographic distance and birth order play a secondary role, since the migrant enjoys, above all, the trust of his or her siblings in Peru. The narratives underline a recognition of the capacity for reflection and the economic and symbolic resources of the migrant, giving them legitimacy to participate in decision-making. Their negotiation skills are important, and the person feels included in the solidarity network. In the sample, this group comprises three women and three men.

When it comes to gender, it is observed that sisters more frequently discuss care options with their siblings, so as to make consensual decisions. This is the case of Fernando, an architect for a private company, whose sister will call him immediately to make joint decisions.

[When there's an emergency], my sister calls me and says: "Fernando, what do you think about this?," or "Fernando, there is this problem," and I say: "Well, let's do this." I don't know, maybe I always lean to the more practical side. It depends on what it is, but generally we solve things between her and I [...] and then we tell my brother in Peru what has to be done (Fernando, 50 years old, living in Switzerland for 27 years, personal communication, 15 June 2020).

Economic resources, along with other symbolic and social resources, reinforce the capacity for negotiation and prominence in decision-making. This allows reversing the hierarchies related to birth order, according to which the older brother or sister has a heavier say than the younger ones. This is the case of Juan, who, as a freelancer, does informal jobs (as an electrician and driver), and does not have a permanent job position. However, his musical success among the Latin community in Switzerland and Peru, as well as his ability to mobilize a large network of friends and acquaintances, secured him a major role in decision-making, despite being the fifth child in the family.

[When there's an emergency] Yes, they communicate quickly, so I also coordinate with my brother [in Switzerland]. So, "what do we do? What do you think?" Being well-related in Peru is also very useful in those cases. [...] We come to terms, we just decide that he goes to Lima, and there is no way around it... but we organize all the logistics from over here, what is going to happen? Where is he going to arrive? How is it going to be then with our relatives? (Juan, 50 years old, living in Switzerland for 28 years, personal communication, June 29, 2020).

These situations illustrate the interplay between gender and economic standing. Although women are seen as caregivers *by nature*, when it comes to making decisions in case of emergency, the participation of male siblings tends to be greater than their daily involvement in care. Men (three out of five) are more represented in this group. The birth order in the sibling group plays a secondary role compared to economic,

social, and symbolic resources. The heavy weight of men in decision-making does not involve a lack of coordination with other sisters abroad and, in particular, in Switzerland.

*Moderate Weight in Decision-Making:
Feeling Included*

In this type of configuration, the migrant daughter or son is informed and consulted regarding the given problem, and their point of view is taken into account; but overall it is the siblings in Peru who make the decisions, and so the participation of the migrant is lesser in this case. The narratives of the interviewees emphasized the fact that the sister, the reference person in terms of care in Peru, does not make the decision alone, but rather she does so after coordination with the brothers in the same country. Non-migrants are considered to be the ones holding all the authority and capacity to decide. They recognize and value the financial, moral, and emotional support of the migrant sibling. Their negotiation skills are important; still, the migrant does not seek to have a leading role in decision-making, but rather feels included and satisfied with the functioning of the solidarity network. In the sample, this group comprises five women and two men.

Rafaela, an administrative employee and the youngest sister in the family, illustrates this configuration.

[When there's an emergency], my sister immediately calls my brother to make the decision, because, sometimes, she doesn't dare to make the decision alone, and he tells her: "Okay, take a taxi," or "I'll get there and we'll take you to the clinic..." They agree and then tell me what will happen [...] I always think that one helps to the extent of one's ability. [...] For example, my sister, financially, would be very limited, but she is always there and that is priceless. And well, I can't visit every Sunday... (Rafaela, 54 years old, living in Switzerland for 29 years, personal communication, June 3, 2020).

Although financial contributions allow participation in the solidarity network, they play a less important role in decision-making than in the first configuration analyzed. However, male siblings, despite being less involved in practical care, tend to play a more important role in decision-making. Here, the birth order in the sibling group also plays a secondary role.

Not Carrying Weight in Decision-Making: Feeling Excluded

In this configuration, the migrant daughter or son has no weight in decision-making; it is the people in Peru who decide, and so the person is only informed and their point of view is not taken into account. The narratives express powerlessness to make their opinions heard and valued. Due to their economic limitations, the interviewees cannot contribute financially and their contribution to care is rather emotional and practical towards their parents. However, this participation is not acknowledged or valued by the group of siblings; their negotiation capacity is very limited, resulting in feelings of exclusion from the solidarity network. In the sample, this type of situation refers specifically to a woman, the youngest sister in the family, who works informally (as a translator and teacher) and has a limited economic situation, in addition to being a divorced mother.

The truth is that it hurts me that I cannot take responsibility for my mother, I believe that I should have responsibility as a daughter, towards my mother, and I would like to participate more, but since I am the youngest, the fourth daughter, my older brothers always look at me, like "not her," and that's

how it's been my entire life since I was a child. So, I'm always fighting for my opinions to be taken into account [...] Anyway, when I go to Peru, I always take my mother to the doctors to have her checked (Daniela, 52 years old, living in Switzerland for 15 years, personal communication, June 2, 2020).

The birth order in the sibling group altogether with economic limitations results in lack of power and a very limited participation in caring for elderly parents. Although Daniela tries to compensate for this feeling of exclusion from the solidarity network through annual trips to Peru, her point of view not being taken into account and her limited room for maneuver leave a mark on her transnational care experience. This feeling of exclusion casts doubts on the fulfillment of the moral duty to care. This suggests the importance of acknowledgement by non-migrant siblings of the contributions of migrants to the care network, which are not limited to sending remittances.

DISCUSSION AND CONCLUSIONS

The analysis of the family configurations described above reveals at least three processes underlying the relationships and negotiations among siblings. First, as in other studies (Baldassar et al., 2007; Brijnath, 2009; Buchanan, 2021; Lloyd-Sherlock et al., 2018; Skornia & Cienfuegos Illanes, 2016), the results highlight the continuity and reproduction of the gender patterns in the division of domestic care tasks in transnational families, by reaffirming gender asymmetries. It is the sisters, to whom the familial and reproductive sphere is attributed, who assume responsibility for care. However, it is about being able to count on reliable siblings, which is essential for the proper functioning of care networks. At the same time, those qualities considered necessary to determine if the person identified as the reference caregiver is actually *reliable* (Marzano, 2012) refer to characteristics related to traditional representations of the female gender: empathy, unconditionality, willingness to sacrifice, selflessness, etc. Thus, there is feedback between gender expectations and care practices, so that women, due to the characteristics they are expected to possess, are deemed most suitable to take charge of care. Although they assume leadership tasks in the sibling and care management group, particularly by managing a savings account, these tasks are still limited to the familial and reproductive sphere.

Likewise, gender asymmetries are perpetuated in the generation of older adults, given that several mothers reveal themselves as the caregivers of single and/or divorced adult children, and of their granddaughters and grandsons. Furthermore, to the extent that the assessment of the reliable or unreliable character of the main caregiver is carried out constantly, there is a permanent evaluation of the correspondence between gender qualities and care, which reinforces existing stereotypes and asymmetries. These results reveal the power relations underlying the organization of care. The differentiated involvement between sisters and brothers is thus legitimized, and women are considered caregivers *by nature* (Chan, 2017; Ho & Chiang, 2017; Lloyd-Sherlock et al., 2018).

Furthermore, the analysis evidences continuity between the feeling of being able to count on someone (*reliance*) and *trust* (Marzano, 2012). Determining the sister's reliability based on her personal, moral, and social competencies invites siblings to place trust in this person. For the migrant, being geographically far away, placing trust, particularly in a sister, is a source of tranquility, as it makes it possible to alleviate their absence and the consequent feelings of guilt and worry related to the care of parents, which increase in emergency cases. As Rafaela related: "My sister [...] is always there, and that is priceless" (Rafaela, 54 years old, living in Switzerland for 29 years, personal communication, June 3, 2020). Nonetheless, migrant daughters and sons are aware that the people in whom they place their trust can betray them; which is why

reliability is subject to constant re-evaluation. Trust is constantly tested and then granted again, as long as it is not betrayed.

On the other hand, the configurations presented here are also crossed by differences in action in terms of economic resources (Zechner, 2008). Siblings of a better financial standing are in a greater capacity to negotiate. The interviewees, migrants settled in Switzerland, with greater financial stability, are characterized by their independence and autonomy with respect to mothers and fathers, which is not the case of several non-migrant daughters or sons. Economic independence is more difficult to obtain in low-income countries. Under these conditions, migrants are marginalized from practical care due to physical distance, but participate in care networks, negotiating thanks to the resources acquired after the migration process. These resources vary according to the stability reached in Switzerland, and can be economic (money, savings), social (friendships and relationships in Switzerland and Peru), and symbolic (knowledge of another language, sense of pride and feelings of satisfaction). Thus, providing financial help to siblings, or nieces and nephews, contributes to nourishing the feeling of a *good* sister or brother, of a *sensitive and generous* aunt or uncle, to improving relationships between these members, as well as to increasing one's legitimacy and ability to negotiate. When it comes to mobilizing the argument of the equation of care (Kordasiewicz et al., 2018), migrant daughters and sons are less obliged to provide support in practical care, since, upon emigrating, they are those who have received lesser support from parents. Research shows the importance of keeping strong ties among siblings and, although not everyone can be counted on in the same way, the discourses did highlight the need to overcome personal differences (Coe, 2013), a need explained by the existence of feelings of affection and shared experiences during the first years of life (Buchanan, 2021). Indeed, although there are tensions, different points of view, and a vague sense of mistrust, there is also a relatively important dependency between migrant and non-migrant siblings (Baldassar et al., 2007; Zechner, 2008).

When it comes to decision-making in emergency situations, relationships among siblings are characterized by interactions, coordination, and negotiations that reflect power relations (Castellani & Martín-Díaz, 2019), wherein gender and financial capacity play an important role. It is the sisters in Peru, Switzerland, or other countries who, from near or far, regardless of their economic situation, usually play a key role in daily emotional care and in coordination among siblings by means of communication technologies and/or regular travel (Brijnath, 2009).

However, male siblings tend to be more involved in decision-making when it comes to emergency situations than during their usual collaboration in daily care. As such, there is higher representation of men in the *Carrying heavy weight in decision-making: feeling included* type of participation, while women are the majority in the *Moderate weight in decision-making: feeling included* type of participation. Both express satisfaction with the functioning of the solidarity networks, emphasizing the complementarity of all contributions. This type of arrangement reflects the gender inequalities that exist outside the familial sphere; men, due to their *capacity for reflection* and *practical spirit*, are linked more strongly to decision-making, while women, who are more *prone to dialogue* and *conciliatory*, appear as less capable of making decisions by themselves. This way, gender patterns are reproduced and accentuated.

Regarding the hierarchy relative to birth order in the sibling group (Baldassar et al., 2007), the results show that this can be altered by means of acquiring new material, social, or symbolic resources thanks to migration. Still, these changes are more noticeable among men. The remittances sent by women do not translate into a greater role in decision-making. However, the lack of economic stability can be a reason to feel excluded from care networks, calling into question the ability to fulfill the filial duty to care (Baldassar

et al., 2007; Chan, 2017; Ho & Chiang, 2017). To the extent that the financial, emotional, and practical contributions to the solidarity network are valued differently, participation in them reveals itself as dependent on the financial capacity of the migrant daughters and sons.

In conclusion, the analysis shows that transnational family arrangements are the product of negotiations among siblings. Although feelings of affection and shared experiences during the first years of life tend to reinforce bonds among siblings (Buchanan, 2021), these do not prevent exclusion processes. Now, the power relations reflected in the negotiation, far from being defined and fixed, are rather subject to transformations. Unemployment, illness, etc., can change the type of participation in the solidarity network and, therefore, the negotiating position and the weight carried in decision-making. That is, economic resources may vary according to the life cycles and integration processes in the host countries.

Likewise, parents changing from physically and/or cognitively autonomous into dependent can reverse the current assessment and result in practical care acquiring greater importance, this in turn resulting in greater room for negotiation and greater weight in decision-making for the main caregiver. These situations reflect the open nature of the negotiation, that although reflecting power relations, are also subject to the room for maneuver that individuals have to reverse certain dynamics (Rémy, 1996).

From the perspective of the migrant daughters and sons, the hypothesis raised in relation to these negotiation processes is that what is at stake is participation in the care network, which is essential to fulfilling the filial duty to care. As has been demonstrated in another article (Carbajal et al., 2023), this filial duty is the driving force of transnational care strategies, yet at the same time it is subject to reinterpretation. Although this cultural mandate is not questioned, the narratives of the people interviewed evidence the possibility to attribute new meanings and senses to them. Thus, far from understanding filial duty as self-denial and self-sacrifice (Ho & Chiang, 2017), the narratives of the people interviewed emphasize the search for balance between personal fulfillment with family responsibilities and concern for the well-being of parents. Although the way of responding to filial duty requires the validation and recognition of the parents towards those providing care for them see themselves as *good daughters and sons*, in light of the analysis of the relationships between siblings, it is hypothesized that the fulfillment of filial duty also requires the recognition of the group of siblings.

Thus, the results reveal that what is at stake in the negotiations between migrant and non-migrant siblings, beyond mere participation in care networks, is the ability to fulfill their filial duty of caring and to feel recognized as a person who takes care of their parents. As such, what is important for the people interviewed, especially for women (since they are the majority in the *Moderate Weight in Decision-Making: Feeling Included* type of participation), is not that the migrant's opinion prevails in decision-making, but for their participation and contribution to the solidarity network to be recognized, which allows them to feel included. Constructive relationships among siblings foster recognition, reciprocity in exchanges, and feeling included in the solidarity network.

Although there is a set of parties involved in solidarity networks, most of the care responsibilities tend to fall on specific people. For those who are far away, although exempt from daily work, the burden and emotional weight is still important (Brijnath, 2009). Although this topic has not been explored in this article, it is a reality that emerges from the multiple narratives of the people interviewed and that deserves to be further investigated. The weight and responsibility are much greater in the absence of sisters in the country of origin, and when the overall responsibility for organizing care is assumed single-handedly and from afar.

Furthermore, in these cases the role of migration policies that limit South-North mobility and represent important obstacles in the fulfillment of moral duty is evidenced with greater clarity (Bolzman, 2021).

In closing, despite its exploratory nature, this research provides clues for understanding important aspects related to negotiations among siblings. However, the specificity of the sample (migrants living in Switzerland, legally and economically stable, with parents in Peru in conditions of physical and cognitive autonomy), invites us to wonder how these dynamics are presented in cases of legal and economic instability of the migrant daughters and sons, as well as in cases of parents in Peru in conditions of dependency. These aspects need to be explored in order to achieve a more comprehensive understanding of the functioning of solidarity networks, according to the life cycles and power structures that govern care practices.

Translation: Fernando Llanas.

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