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CARING OFF THE CLOCK: CAPE VERDEAN HOME CARE WORKERS IN LISBON, PORTUGAL

Judith opens her eyes at 5:30 am, though it almost feels like she'd only fallen asleep 10 minutes ago. Light penetrates softly through the window from the 10th floor apartment. This street corner, an area of the city that is heavily trafficked during the day, is serenely calm and quiet. A Black woman wearing a blue apron carries a bucket of cleaning supplies as she crosses the street and passes a White man and his small black poodle. A group of Black and White men, laughing and talking, walk together down the street towards the traffic circle. A few taxis and passenger cars speed by. Her three-year-old son, Carlito, sleeps beside her and lets out a soft moan as he pulls the blue floral comforter over his head. Maria, now sitting slouched on the side of the bed, looks over at Carlito and pats his snuggled head. “It’s time, Carlito.” She puts on her black robe, slips into her pink slippers, and makes her way to the kitchen. She places a large Dutch oven pot filled with water on the stove and reaches over for a match to light a burner. Then, as she quickly glances at her work cell to check time, she runs into the bathroom. Though the water boiler has been broken for nearly five months by now, a screech escapes her mouth when she slips behind the curtain and cold water hits her back.

At 6am it’s time to wake Carlito. Judith, wrapped in a yellow towel, enters the bedroom only to find a mound of blankets in his place. She sighs, and is all too familiar with the trick. “Not today, Carlito. I can’t do this today, no games.” She removes a pillow and finds a balled up Carlito hidden beneath the comforter, hiding towards the foot of the bed. He reaches for her and whimpers as she carries him to the bathroom; a basin filled with the heated water from the stove now sits in the tub. At this point, the boy knows what to do. He enters the tub, fills a small cup with the water and pours its contents over his head and shoulders. He reaches over for a bottle of liquid tear-free soap. “Tia Celeste. Look at me!” I look over at him and find him laughing and showing off his little bubble beard from behind the shower curtain.

Meanwhile, as the hour approaches 7 am, Judith prepares breakfast – cream of wheat and bananas – for Carlito. It’s at this time, like most days, that she begins to receive phone calls on her work cell. She sighs and picks up the first call. Her supervisor asks her if she can come in earlier than 8 am because another worker called out and an elder had a fall. She says it’s not possible because she has to drop her son off at day care and there’s no one around at the moment to help her. Still, she feels compelled to try. She calls her sister, her friend with a car, her cousin, but they all work for the same home care institution and also have the early morning schedule. On a whim she runs out the apartment door and knocks on her neighbor’s door down the hall. A Black woman wearing a white vest and pyjamas opens the door. Disparate sounds of Cape Verdean funaná and giggling children emanate from a back room. Judith, her eye’s meeting the familiar woman’s face, exhales in relief as she silences the incoming call on her work phone. “I’m sorry to do this to you again…but…can he stay with you today?”

The story of Judith outlines how her unpaid and paid workday begins as soon as she opens her eyes; she is immediately defined by the needs of her son and the needs of her colleagues who begin to call before 7 am. Much of the recent literature on care workers, which relies on interviews and participation observation, center on domestic or child care workers’ workplace experiences, though both groups are increasingly called upon to alleviate the impending eldercare crisis throughout Europe (Andall 2000; Constable 2014; Hondagneu-Sotelo 2007; Lan 2006; Lutz 2012; Parrenas 2001, 2005a, 2005b; Pratt 2012). Further, though scholars have developed an incredibly rich and important body of knowledge on women’s working lives, the implications of care work on migrant family life within the host society is an area of social inquiry that is relatively less developed
(but see Bettio, Simonazzi and Villa 2006; Stacey 2011; Cangiano 2014; Degiuli 2007, 2011). Judith reminds us above that even as citizen families rely upon her labor for their “work-care-life” balancing strategies, she, too, has a family of her own. Indeed, family is implicated in migration in both receiving and sending countries. In Portugal, over 50% of Cape Verdean migrants are women, many of whom make up an indispensable paid care workforce, replacing and supplementing the care of family members for elders (Wall and Nunes 2010). The global movement of women across borders is a global “care deficit” (Hochschild 2000), resulting from the combination of European’s women’s increased participation in the labor force, the rapid aging of the population, and the push to take care work out of institutions and back into the hands of the family (Andall 2000; Wall and Nunes 2010). In Cape Verde, the growing national debt and bleak job prospects, and the spillover effects of the economic crisis in Europe increasingly motivate women-headed households to resort to migration as a key strategy to support their families (Fikes 2009; Lutz 2012). However, once in the host society, migrant care workers face difficulties caring for their own families, as research finds that the demands of paid care work do not align with the demands with migrant women’s unpaid caring work among their own community. This is compounded for women who leave immediate and extended kin behind in home countries (Hondagneu-Sotelo and Avila 1997; Parrenas 2001, 2005; Vives and Silva 2016).

This CHESS report, building on prior work pertaining to migrant care work, draws on ethnographic fieldwork with a group of Cape Verdean eldercare givers in Lisbon, Portugal that labor with a contract. Placing their unpaid labor as my starting point, I offer an extended ethnographic look at life for these working mothers and how they attempt to secure a work-life balance. As findings reveal, while the Portuguese elder care deficit provides women access to work and a labor contract, they face tremendous difficulties when trying to juggle the demands of paid and unpaid work. Specifically, workers turn to non-kin and extended kin for help with caring for their own children, they often become transnational parents due to various structural constrains of the host society, and, in some instances, working Cape Verdean mothers call on younger kin to care for their children when they cannot.

LITERATURE REVIEW

The theory of “global care chains” (Hochschild 2000) identifies a hierarchy of places that are involved in providing paid and unpaid care; migrant women cross national (and regional) borders to care for wealthier families, leaving behind their own children to be cared for by kin (often women) in sending societies. In some cases, less advantaged rural women migrate to urban centers to care for more educated migrant women’s kin as they migrate abroad and sell their labor power to even more class privileged families in the receiving society (Parrenas 2001). In other words, one group’s ability to outsource care responsibilities simply transfers this care deficit from one country to the next. At the heart of this chain that connects the local to the global is the reality that women remain primarily responsible for care activities, though class privileged women are better able to transfer the care down the chain (Constable 2014; Glenn 1994; Hondagneu-Sotelo 2007; Parrenas 2001, 2005; Romero 1988). Indeed, the value ascribed to care labor decreases and may become unpaid at the end of the chain, with the costs of these care transfers predominately felt most by less advantaged women.
While the theory of global care chains has been useful for examining the care transfer between sending and receiving societies, it has been applied less often to the care transfer that occurs among multigenerational migrant communities within the host society. Due to pull factors such as widespread drought and famine in Cape Verde and a history of Portuguese colonial and postcolonial labor recruitment\(^1\), Cape Verde has a complex history of migration with a continuous flow of men, women and children between Portugal and Cape Verde (Akesson, Carling and Drobohm 2012; Carreira 1982; Meintel 1984; Wall and Jose 2014). As a result, contemporary Cape Verdean migrants that enter Portugal are likely to have prior familial connections and migrants from PALOP areas (Portuguese speaking African countries, or Países Africanos de Língua Oficial Portuguesa) are more highly represented among holders of conventional residential permits (Oliveira and Fonseca 2012).

Still, research also finds that labor market experiences are challenging at best for African or African descendants in Portugal (Baganha, Marques and Fonseca 2000; Fassman, Reeger and Sievers 2009; OECD 2008). The main immigrant groups in Portugal (Eastern Europe, PALOP nations, Asia and Brazil) all experience a significant native-wage gap in formal employment that cannot be explained by differences in individual-level endowments (Cabral and Duarte 2013), and the PALOP community (with Cape Verdeans as the numerical majority) is also heavily concentrated in low-paid service work (Cabral and Duarte 2013; OECD 2008). This tenuous labor position occupied by Cape Verdean has been exasperated within the post-2000 economic downturn in Portugal, where both native and foreign workers search for limited employment opportunities (Weeks 2015). Further, low rates of fertility, an aging crisis and Portuguese women’s increased labor participation, along with the 1974 Portuguese revolution, have led to an increase in “state responsibility for families, with strong support for women’s full-time work and the provision of state-subsidized services to support working families” (Wall and Nunes 2010). As a result, the existence of a regularized African migrant community is also useful for employers, who seek to hire full-time formal care workers as there has been a steady increase in institutionalized home-help services, day care centers and residential care homes (Wall and Escobedo 2009).

The experiences of the diverse group of Cape Verdean workers in Portugal highlight how the community straddles a situation of social exclusion and inclusion. The reconciliation of work and family life is a critical issue faced by low paid African service workers and their community members (Baum 2002; Constable 2014; Meyers, Heintze, & Wolf 2002; Hondagneu-Sotelo 2007; Pratt 2012; Parrenas 2001; Uttal 2002; Edin 1997; Duffy 2011). The higher quality, paid reproductive labor provided by home care workers, results in lower quality unpaid reproductive labor in care workers’ own families, because care workers typically have less time to carry out reproductive labor in the home. As a result, families are forced to negotiate a landscape where caring for their own kin becomes an area of social life that is incredibly fraught with challenge.

But, what precisely are the mechanisms that shape these difficulties faced by families? For one, in Cape Verde and Portugal, the popularity of strong essentialist beliefs that assign caregiving duties to women creates a scenario where women caregivers juggle disproportionate amount of care

\(^1\) For example, Decree 60/97 approved an agreement between the Portuguese and Cape Verde Governments to facilitate access of citizens from Cape Verde to the Portuguese labor market (Baganha, Marques and Fonseca).
tasks, leading to higher rates of feeling overwhelmed and stressed for low-wage working mothers who possess less purchasing power (Akesson, Carling and Drobohm 2012). On top of this, inflexible work schedules, substandard pay and lack of childcare benefits for paid care workers places their children at an enormous disadvantage. Research highlights the constancy of irregular work shifts, atypical timetables, and unpredictability of work time for care workers, or for low-wage workers in general (Clawson and Gerstel 2014). This research finds that these work practices take a toll on workers because non-standard hours do not align with the other schedules of other pertinent institutions such as childcare facilities or educational institutions (Edin 1997; Lareau 2011). In this light, dropping off and picking up one’s child from childcare services is an area of life that is often fraught with incredible challenge for families (Edin 1997). Due to the constancy of unpredictable, last minute scheduling, a sudden call to work can lead to uneven earnings from month to month, making it incredibly difficult for low income families to budget (Gerstel and Clawson 2015). The children of care workers may experience considerable strain due to financial hardship or the minimal length of time parents and children spend together (Romero 1997; Romero 2002).

How do these families respond to these structural constraints around work and family? From an organizational standpoint, the structure of care work itself (in the case of home care in Portugal, long hours, working weekends, little time off and paid leave) also shapes family practices, such as the reliance on extended kin for personal childcare responsibilities (Clawson and Gerstel 2014; Hondagneu-Sotelo 2011). Indeed, individuals turn to non-kin and extended-kin for child and elder care support (Gerstel 2011). These individuals, in turn, “become” kin as a strategy for economic survival when states provide little care provision services for migrant workers that at the same time perform poorly paid care for other families. However, this reliance on kin need not only reflect working conditions. Lynet Uttal (1999) finds that U.S. community of color’s use of kin for child care also originates from an individual’s exposure to existing extended kin networks and the limited employment opportunities possessed by their kin in racially segmented and depressed job markets. Thus, in addition to working conditions alone, racial and ethnic stratification and one’s embeddedness in family networks may also shape family practices. This may especially be true for Cape Verdians in Portugal that face racially segmented job markets and reside in urban areas where networks of multigenerational migrant families are common.

Though an increased fragmentation of kin ties may shape reliance on non-family members who are willing, present, and able to provide care within host societies, other research finds that the availability of these sources of kinship support networks actually decreases for low-income families because constraints of a hostile economic system diminishes families’ ability to participate in exchange networks (Miner and Uhlenberg 1997; Roschelle 1997). As result, individuals may become transnational parents as they leave their children behind with other paid or unpaid caregivers in the sending society (Abbots 2012; Hondagneu and Avila 1997; Lutz 2012; Parrenas 2005a, 2005b). While the separation of parent and child is most common, there are cases where children born abroad are sent back to Cape Verde to be fostered by (mostly women) kin because their parent’s and parents’ kin’s wages are too low and work schedules are too unpredictable and unsocial to participate in social support networks within the host society (Andall 2000; Fikes 2009). Cape Verdean transnational mothers, who often shoulder the most care responsibilities, pool economic resources with other kin in the diaspora in order to remit regularly and address extended family household needs in Cape Verde (Carling 2014).
Transnational family connections also go beyond the material exchange. Mothers innovate strategies to sustain emotional ties with their children in their absence, and multiple communication strategies—whether through telephone calls, video-chat, photos, or SMS messaging—become centralized in the everyday lives of transnational families (Peng and Wong 2013). Still, despite these constant acts, mothers and children experience various forms of emotional strain as they negotiate migration’s transformation of family life and connection (Akesson, Carling and Drotbohm 2012; Drotbohm 2015; Parrenas 2001, 2013; Pratt 2016). In this chapter, I place the unpaid care work of Cape Verdean institutional home care workers at the center of analysis. I detail how the questions of who cares for whom, and under what grounds and conditions this care is carried out, are constitutive in promoting the integration of racial ethnic minorities in Portugal.

METHODS
The ethnographic data presented here is primarily from participant observation with Cape Verdean eldercare workers in their home and neighborhood settings in the periphery of the Lisbon metropolitan area. I conducted participant observation of public, leisure and private spaces and venues such as public transportation, public squares and parks, labor and immigrant marches in Lisbon, African night clubs, churches, housing projects, and workplaces. I also conducted one-on-one, in depth and semi-structured interviews with Cape Verdean eldercare workers (n=32). With the use of chain referral sampling techniques (Bernard 2011), I recruited 32 Cape Verdean women participants who work in home-care in Portugal. I initiated chains by securing the assistance of Cape Verdean women that were employed in eldercare work. I distributed recruitment flyers and documents and began assembling potential research participants through these referrals and multiple networks were strategically accessed to expand the scope of investigation. Each interview lasted 60 – 90 minutes on average, and I paid each participant 15 for their time (eldercare workers make on average 2.95 - 3 Euros an hour). In addition to these interviews, of which all took place in the private homes of my field informants, I engaged in extended conversations with family members in Cape Verde during a supplementary field visit to Praia, Cape Verde. In Portugal, I engaged in extended conversations with grandmothers, husbands, partners, children, cousins and friends of workers. I also systematically observed interactions between eldercare workers and their family members, employers, and the individuals they care for in pertinent sites such as the work place, their work office building, the trolley, bus and train and private residences.

RESEARCHER SUBJECTIVITY
Though I entered the field with initial contacts, I did face some initial barriers as an American researcher and had to navigate a sense of initial distrust. However, a few things worked in my favor: 1) being of color and racially ambiguous of African American background, and 2) having insider knowledge pertaining to migrant families. As a person of color from the United States I was equipped with insider knowledge pertaining to the experience of being marked as other in society that is entrenched in racial hierarchy. Thus, while in the field I quickly realized that the Portuguese political and social climate has become somewhat ambivalent towards migrants and their families. While walking through predominantly white Portuguese neighborhoods, I noticed how pedestrians of all ages sometimes gazed and stared at me though my presence was subtler when walking through Amadora.. While the gaze of White men may be indicative of my status as a young women, their use
of the word “preta” or “pretinha” when calling me out– which my field participants passionately argued is a derogative term towards Blacks when said by White Portuguese- suggests that my experiences were shaped not only by gender, but also by race. Indeed, on one occasion a White man stared at me as I passed a corner and screamed out, “Are you lost Preta!,” which invoked a similar incident that occurred in Philadelphia in 2011 when a White man approached me and a friend of mine as we strolled through the University of Pennsylvania’s campus and similarly asked us if we were lost, in a hostile tone.

My racial ambiguity also worked to my advantage in some ways. As someone who is mixed racially background, I was able to more readily blend in with others in “Center City” that are of a similar phenotype; a long history of racial mixture – whether forced or voluntary – in Cape Verde has influenced the emergence of a “creole” identity which influenced my experience of often being mistaken for Cape Veridian in Portugal. This is not to suggest that I was an insider. Of course, throughout fieldwork my status as an outsider and an American emerged and re-emerged constantly. I addressed this tension in multiple ways. Throughout fieldwork I spent the night at my informants’ homes for 5 days a week, at a minimum, and helped my research participants in any way possible– I provided childcare for many of my informants and also participated in the transportation of (legal) goods between the U.S., Portugal, and Cape Verde (hair products, food, clothing, etc.). This provided a basis for stronger research relationship. Indeed, “gift-giving” and reciprocity are especially important for establishing rapport with the Cape Veridian community and follows a cultural and economic tradition of “Djunta Mon,” a Cape Veridian socio-economy of mutual-help practices (Weeks 2014). Recognizing the enormous privilege I had as researcher and the class-divide that stood between many of my participants and me, I did my best to establish reciprocity as the cornerstone of my relationship with my field informants. I constantly recognized that at the end of the day, however, I was researcher – a privileged status that carries with it enormous responsibility when discussing the lives of any community.

INCOMPATIBLE SCHEDULES

Maria

Maria came to Portugal in 1993 and found work as a domestic worker. At the time, she travelled alone and left one son behind in a small village in Cape Verde to be cared for by her aging mother. In Cape Verde, she worked in several types of jobs, mainly as a field hand alongside her relatives or as a domestic worker, but she explained to me one evening in her apartment that she migrated out of necessity: “I was there for about two years and then it closed. And after it closed the only solution was to immigrate. I left my family and came here in 1993. I wanted a better life.” Like other Cape Veridian women at the time, she entered Portugal on a tourist VISA that she outstayed and found informal domestic work employment in a Portuguese woman’s – a senhora’s 2 – home. While the job was not the best work, it provided Maria with the opportunity to remit regularly to her family left in Cape Verde, and her son joined her ten years later on a student VISA to study at a local University. She set down roots, had two children with a Portuguese man of Cape Veridian descent, and today lives with her 11-year old son and 14-year-old daughter in a public housing complex that is located in the

2 Domestic workers often use the local term “senhora,” which means “ma’am” or “lady,” to refer to their employers. This highlights how it is often a woman who hires or predominately interacts with hired care workers (hondagneu-Sotelo 2001; Uttal and Tuominen 1999; Romero 2002).
outer skirts of Lisbon and is home to predominantly migrants and Portuguese citizens of African
descent. In 2001, Maria was able to take advantage of the short-term regularization program in
Portugal that granted residency status to unauthorized migrants, she secured work as a home care
worker through an employment agency, and eventually became a naturalized Portuguese citizen, as
are her children. For the past few years, her daughter, Elisa, has helped care for her little brother
during the weeks and weekends, when Maria returns home late.

Rufina

35-year old Rufina came to Portugal in 2009, leaving behind three children in Cape Verde
that were to be taken care for by her ex-partner’s parents. As a child, Rufina’s godparents took care
of her, while her mother lived away and worked in the capital city, which is not uncommon among
contemporary families in Cape Verde. After she graduated from high school, she was able to secure
a visa to Portugal through her eldest sister whose contract job in eldercare made Rufina eligible to
benefit from family reunification. When she came to Portugal, she moved in with her sister and
cousin. After experiencing several bouts of unemployment in the food service industry, it was her
sister’s referral that brought her to her current employment. As a migrant on legal work visa she will
be eligible in two years to secure permanent residency status. In 2014, she brought her youngest 3-
year-old daughter with her back to Portugal. Today, her three sisters join her in eldercare work and
she tries her best to send gifts and small amounts of money to her older children. Sometimes,
however, it becomes difficult to send as much as she would like because she uses a portion of her
monthly earnings to pay for day care for her 4-year old. She always makes sure to call her two other
children two to three times a week.

Despite Maria and Rufina’s different migration histories, their settlement into Portugal point
to shared similarities on the basis of work and caring. For both Maria and Rufina, home care
provided a type of stability that their previous employment did not. Indeed, home care work may be
appealing to some mothers because they are able to live outside of the house and secure a labor
contract that provides social security, vacation and family-leave benefits. Their situation may also
provide the possibility for bringing kin to Portugal through family reunification, as in the case of
Rufina. Indeed, given the pre-eminence of the Portuguese ex-colonies in the dominant immigration
flows spanning back to the 1960’s, earlier waves of Cape Verdean nationals met the necessary
requirements for the legalization of their status, which then facilitated later migration of Cape
Verdean kin and family.3 Of the 30 individuals interviewed, for example, 9 were naturalized citizens,

3 Within the last 30 years, Portugal has devised three waves of regularization programs to manage the undocumented
population. These programs resulted, in part, from Portugal’s entry into the European Union and agreement to
harmonize with EU norms. Program 1992-1993 was open to workers and non-workers who had been in the country
prior to April 15th, 1992 and regularized 38,364 individuals. Program 1996 required proof of involvement in a
professional activity, a basic ability to speak Portuguese, a clean criminal history and authorized housing. This program
regularized 31,000 people. The Law-Decree no 244/98 reduced the required period of residence from twenty to ten
years for a permanent resident visa. Family reunification was also included as a right. Decree/Law 4/2001 offered
regularization to individuals residing with Portugal who had secured a valid work permit and regularized 170,000 people.
The creation of the 1 year ‘stay permit’ accompanied this law, which was in practice a temporary work stay visa granted
based on the possession of a work contract and could be renewed for a maximum of five years. This permit made it
possible for immigrants to sponsor relatives and immigrants could apply for a resident permit at the end of 5 years (see
Levison 2005; Picarra & Gil 2012).

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4 were Portuguese born citizens of Cape Verdean descent, and 17 were legal residents. All but two participants had children of their own in Portugal. Naturalized citizens’ migration story often fell in line with that of Maria; they entered Portugal initially through family reunification or an informal domestic work agreement with an employer, and later became naturalized citizens. The 3 of 4 Portuguese-born participants benefited from the various changes in Portuguese Nationality Law. Older participants with a longer history in Portugal were able to take advantage of a regularization program in 1992-1993, 1996, and 2001, which then facilitated pathways for their own citizenship. The most important of these was in 2001, which led to an increase in the legalized resident immigrant population by 70%. Participants that were residents like Rufina often had naturalized citizen or legal resident relatives living in Portugal who sponsored their migration (some of these sponsoring relatives also benefitted from changes in Portuguese nationality law and the short-term regularization programs).

Thus, unlike informal care work where workers are excluded from the resources associated with a labor contract, most workers in this formalized home care sector are either residents or naturalized citizens. Yet, I observed firsthand how these workers lacked the resources to secure quality care for their children and negotiated an occupational structure that did not align with their own familial schedules. When I first entered the field, I realized quite quickly that making myself available to care for others’ children was a good way to establish rapport and learn about my informants’ private lives. What I observed was that eldercare workers and their families faced tremendous challenge in the realm of unpaid household labor. The challenges they faced varied, however. Workers with younger children and single mothers faced considerable more challenges than workers with older children and workers’ that had live in partners that actively participated in unpaid household work. Further, the few workers with cars of their own (two only) were able to offset the commuting time expended when workers are forced to rely on public transportation for dropping off and picking up children from school and day care, as workers often began their unpaid workday in the morning, at 6 am, and entered work by 8 am. Regardless of this variability, all workers described how their own work schedules make it difficult to care for their own kin. Rufina, for example, responded in the following way when I asked her about the work schedules:

Raising a child here is difficult. It is very difficult. It is very difficult because of the schedules. Because a person has to deal with their work schedule. When a person works, the child is in school. The time that you go home

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4 Portuguese nationality law shifted in 1974 (Decree-Law 308-A/75 of 24 June 1974) in response to changes that accompanied African decolonization; citizenship was restricted from many individuals that hailed from the five newly established independent African nations (Cape Verde, Guinea Bissau, São Tomé e Principe, Angola and Mozambique), which resulted in the retrospective loss of Portuguese nationality for many of the African native population and inflows of PALOP migrants to Portugal. Further, in an attempt to address the growing number of Portuguese emigrants and to move towards European traditions by reducing ius soli, the Portuguese state broadened its nationality law to center on ius sanguinis (2.6 Law 37/81 of 3 October 1981 and 2.7 Law 25/94 amending Law 37/81); the grounds for citizenship for a child born to foreign parents in Portugal became more restrictive under these changes. Portugal adopted a more inclusive arrangement in 2006, which included a mixture of ius sanguinis and ius soli principles (2.9 Organic Law 2/2006); one of the many reforms included the ability for children of a Portuguese (mother or father) who was born on Portuguese territory to acquire citizenship (see Picarra & Gil 2012).
from work you have to begin to prepare for the next day, you have to rest, you have to give attention to that child. It's very, it's very complicated. You don't have time to take care of your child, you wake up very early in the morning and you have to drop your child off at day care. Sometimes you get home at 6, you go to the daycare to pick up the kids, give them something to eat and then you have to go immediately to bed because you have to get up early again for work. You see, that's the routine of us immigrants.

But what precisely about schedules makes caring for their own kin so difficult? Most parents discussed how their absence due to the long working hours created a sense of emotional strain on two fronts. On the one hand, the job itself encouraged the extraction of emotional labor from workers. In this light, workers felt that their performance of paid emotional labor during long hours created a feeling of, as one participant put it, “being emotionally brain dead” by the time they were able to be with their children after work. Workers described the feeling of returning home and feeling that their emotional energy was expended on a non-relative at the expense of their own children. Indeed, the implications of the workers’ psychological exhaustion also seep into their private lives. After greeting their children and other relatives or roommates, some informants would lay down on a nearby sofa as their children ran around with other kin. Some quickly closed their eyes and sighed or yawned, and asked me to look over the kids as they rested. Patricia, a 55-year old home care worker and mother of a home care worker, echoes these sentiments:

It's very difficult because...here people begin to work early in the morning. And if that person has a child, the child has to wake up very early with us so that we can bring them to the nana. The child suffers and we suffer at the same time, we suffer together. We practically don't have energy. Because we spend more time working with others, the older people, than we do with our own children. We practically don't live with our children. Only when we return at night to sleep. When we wake up in the morning we already have to drop them off with the nana or at a daycare. People just don't have time to be with the children! And it's very difficult.

In this sense, it’s both workers’ absence in their children’s’ lives due to long hours and the type of emotional care work performed for pay that together shape their subjectivities concerning this work and family conflict. In fact, home care workers have very little flexibility and control over their scheduling, and are unable to plan far in advance because their times and days off are determined on a bi-weekly basis, with very little patterned routine week-by-week. Similar to the nursing assistants described by Gerstel and Clawson (2014), home care workers are handed a schedule and are more likely to volunteer or be asked by managerial staff to add time. Further, workers with young children also strongly voiced opposition to the structure of their work schedules and indicate that their opening and closing times creates incredible challenges that they are forced to navigate daily. The case of Rufina, for example, clearly highlights this tension. I slept over her home on several occasions, and on some mornings I was quite surprised to wake and find her four-year-old daughter playing in the corner of the room after her mother had gone to work. Naturally, I was perplexed because I had not been asked to take care of her daughter. But, after many occasions of this happening, a formal interview with Marcia, Rufina’s colleague, provided important insight on what was going on behind the scenes:

It's hard because I enter at work at 8, but my son's day care opens at 8. It opens at 8. And my schedule begins at 8. I have to get up EARLY [emphasis], so that I can be there at the day care's front door, waiting, waiting
just so that I can leave him there and get to my work's office. I almost always enter work late. Always. A friend of mine is always late, too. Because the day care has the same opening schedule as my work. So the only way to change your schedule is if you change your work! That's the only thing you can do.

As elucidated by Marcia above, Rufina and others with young children encounter a situation where the opening of their work does not align with their children’s own schedules. As could be imagined, giving an infant or toddler a bath or even pressuring children to eat or dress quickly becomes a challenging situation for mothers running on tight schedules. I observed how Rufina and other mothers would routinely juggle the task of answering incoming calls on their work phones while they prepared for the work day by getting ready while they simultaneously instructed their children to prepare for school or day care. Further, this constant juggling act between work and family is made even more complicated by the incompatibility between workers’ schedule for paid work and their children’s schedule for school or day care. Thus, in ways that I was not aware of when I first entered the field, my presence as “researcher” was valuable to Rufina because she was able to leave her daughter with and therefore bypass the morning struggle to get to work.

This difficulty does not end at the start of the workday, however. Others discussed how picking up children at the end of the workday also created stressful situations because day care usually ends by 6 pm, and guardians are charged money if they arrive any later. Celia, a mother of a 2 and 5 year old, describes how this creates a difficult situation because she is the only one that brings in income. The work schedule needs to be changed! Because I enter really early around 7 and I leave around a quarter till 6. And it’s very late for me. I would like to leave a bit earlier because of my children's schedules. Sometimes I leave at 5:45, and have to pick them up from pre-school and day care at 6 pm. I can’t go later. And so sometimes I arrive after, around 6:05, 6:03 and I have to pay every time I arrive late! And that means that is less money for all us of.

Further, there is important variability in the degree of challenge faced by families. Neusa, a mother of one, describes how raising a child alone in Portugal without the help of a partner complicates the situation:

And I say it’s difficult to raise them alone because I have a husband, right. He lives with me. And we divide the work. For example, he’s the one who takes the child to day care and I pick him up after work. Because it’s easier. For example, my husband went to France to work because there was no work here, right at the same time that my son started going to day care. I had to wake up at 5 in the morning every morning, give a bath to my son, give him breast milk, dress him. I would get up early and take him to day care at quarter till 8, just to stay there at the door waiting. The moment the door opened, I would leave him there and I had to run to catch my bus just to arrive late to work at 8:30. So that's thirty minutes late and I'm docked that pay. Unless I had a colleague that would help me, take care of an elder. But sometimes you have an elder that doesn't like you or doesn’t want someone new, so they become upset. And then I would just have to run and do it again after work, pick up my son. And it’s very complicated [voice lowers, stern]. It's very complicated to have only one son! Now imagine what it is like for those that have three! With three it's almost impossible to work.

Some mothers with live-in partners were able to split child-care responsibilities, as in the case of Neusa when her husband is working in Portugal. Still, I observed how most women tend to shoulder the majority of caring responsibilities, even in dual parent households. For example, Celia,
indicates that as mother she is the one who is expected to be near the children most of the time because her husband “needs to have his own personal time,” though he is unemployed. Neusa described how she felt compelled to take her daughter to the hospital one morning because of chicken pox, although her husband was around at the time. “I’m the mother so I just feel it’s more of my responsibility,” she explains, “he doesn’t do well at the hospital, he doesn’t know what to ask the doctors.” My purpose in bringing up these nuances is to stress that while having a partner does alleviate some of these pressures, gendered expectations of caring still shapes women’s role in performing more unpaid household tasks than men. These gendered expectations concerning caring, on top of home care workers’ inflexible work schedules and atypical timetables, creates strain for workers who must constantly negotiate the often conflicting demands of work and family life. The result is that workers often scramble at the last minute to find someone to help them to care for their kin—whether it be an aunt, a sister, a cousin or a friend. This goes in line with Samuel Weeks (2012) work on the Cape Verdean community’s employment of “djunta mon” in Portugal. Weeks finds that extensive mutual-help support from family and friends, which may take the form of child care, are important survival strategies employed by Cape Verdean migrants.

The trials and tribulations of extended and fictive kin support

During fieldwork, I was called on to help out with child-care and parents sometimes instructed their children to call me “Tia Celeste.” Was I “turning into kin” through these reciprocal relationships based on mutual support within the context of economic scarcity? Indeed, some scholars suggest that impoverished families rely on an extensive web of kinship networks when faced with limited mechanisms of social support (Roschelle 1997; Stack 1974; Gerstel 2011). While this argument is tempting, I consider the opposite to also serve as adequate explanation: the role of family kinship networks is actually diminishing for working class and poor families in Portugal. While in the field I quickly realized that many women family members of my field informants were working in similar care professions—eldercare, domestic work, cleaning services—so turning to other kin for help with care was not a viable option. They, too, had to navigate atypical timetables. In other words, the same forces shaping women’s need for kin care also limits the availability of viable unpaid care givers among the community (Brewster and Padavic 2002; Presser 1989). Weeks also (2012) notes that these mutual self-help, or djunta mon, practices are diminishing among the Cape Verdean community and within the context of the economic downturn in Portugal. Further, Roschelle’s (1997) research finds that the availability of these sources of kinship support networks actually decreases for low-income families because constraints of a hostile economic system diminishes families’ ability to participate in extended family exchange networks. Thus, in Portugal, the current economic crisis creates a situation where every last member of the family needs to be earning, therefore diminishing the availability of unpaid caregivers. This is compounded for African families, however, who are concentrated in care and service economies where atypical and unpredictable work schedules are common.

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5 Djunta mon is translated from Cape Verdean kriolu and loosely means “joining hands.” Djunta mon is a cultural practice of self-help, shaped by periods of extreme drought and famine on the islands or Cape Verde. Originally associated with collective rural labor practices in Cape Verde, Samuel Weeks (2012) finds that the contemporary community in Portugal (neighbors, friends, relatives) work together in the Lisbon periphery to overcome barriers, in a reciprocal fashion.
Indeed, when asked about family support with child-care, only one participant was able to clearly describe a scenario where a relative cared for her children. Sandra, a mother of two and a 39-year-old Portuguese citizen of Cape Verdean descent, indicated that she did not struggle too much in this area because her mother and grandmother took turns and cared for her two children before they both attended school. Sandra was able to bypass some of the earlier difficulties experienced by mothers as they race to drop off and pick up their children because her mother picked up the two children from school while her grandmother stayed at home. Sandra is the outlier in the data. During interview and participant observation, very few informants had relatives that could always be at their disposal to perform unpaid household labor. In response to my question about family support, for example, respondents said the following:

Marcia: So look at the example of my sister. She has her son here, but she doesn’t have the father's support. She doesn’t have… how do I say it, the only person she has is us. But we all work, and she has our mother but she's older and she works, too. It's difficult for all of us.

Elisa: People have to work, you know. My mother has to work, my brother sometimes has things to do. He, now, is on vacation from school but sometimes they call him to work, as a day worker. So sometimes he has things to do and its difficult because you have to look to your mother, or your niece, and they aren’t always there you know. It's a bit difficult.

Seila: I practically had to do it alone. Alone. I am the mother, I am the father. I'm the one that had to pick up the children, I'm the one that had to do it...with the help of my children...with myself and the help of my children once they got older.

The above comments add nuance to the notion that minority and migrant communities simply rely on extensive kin networks to care for children in the context of economic scarcity. Kin support for child-care is a negotiated process, that is both fulfilling and emotionally rewarding, as well emotionally taxing (Hansen 2004). Further, the economic system either facilitates or diminishes a groups’ ability to benefit from the positive benefits of providing kin care, which, in the case of the Cape Verdean community, relates to cultural underpinnings and understandings of gender and the role of family (Åkesson, J Carling and Drotbohm 2012). While reciprocity in Portugal does occur among the Cape Verdean community as individuals re-pay others by providing care to one another and vice versa, the resultant emotional strain experienced by mother and unpaid caregiver cannot be underestimated.

While in the field, I observed how single and partnered mothers felt overwhelmed when they could not find a caregiver for their child. This usually occurred when mothers were called into work due to unpredictable scheduling or when they had to settle personal affairs (such as going to the Cape Verdean consulate, The Foreign Affairs Service, etc) that required that they leave their child behind. In these occasions, finding help involved apologetically asking a friend or relative, who may then consult other friends or relatives, trying to come up with a solution for the care gap. On one occasion I entered a home care worker’s apartment and encountered an unknown woman sitting in the living room, crying, as her three-year-old boy ran around the house with my informant’s younger son. The woman, a friend of my informant, needed someone to care for her child because she had been called into work in the morning. My informant promised that she would do her best to help her, though she also had work the next day. At 12 in the morning, my informant’s cousin called the
house and informed the mother that she was able to find a male friend to watch the child. This exchange was not easy. It highlights the process by which families and friends turn to others for help, and the difficulties this process entails. During a conversation about finding support for child care, two participants highlighted how leaving kin with others is a negotiated and sometimes challenging process:

Karina: It’s hard because you want to be there with them, but you have to work. So you find yourself thinking to yourself, “is he ok.” It’s so hard to just leave them behind, you want to be there with them, you know! [Touches chest] The separation is hard.

Leyde: [Interrupts] Exactly! Sometimes my friends they get upset with me because I always call when I leave my daughter with them. And they think, “what’s wrong don’t you trust me with them?” But they don’t understand that it’s not about that. You see how I am Celeste. I don’t leave her with any person. I need to know that the person is capable. And I call just to hear her voice, make sure she’s ok. Because it’s on your mind when you are working, like “what is she doing, how is she? Is she ok?” This is something you can understand only once you have a child.

Above, Karina, a first time mother of an infant, and Leyde, a mother of a toddler and teenager, describe the feelings associated with leaving their kin with others. Their dialogue clearly highlights that turning to others for kin care to alleviate workers’ own care deficit at home can both be a viable solution to a care deficit and an equally emotionally straining process for mothers. This strain is not one-sided, however. When asked whether her work schedule had any effect on her ability to care for her child, Helen a mother of one 13-year-old son, responded in the following way:

It makes it difficult. Principally, when you don’t have your own car. You have to rely on public transportation and that takes time. But you have to go to work in the morning, if you have a younger child, you have to leave them at day care, you have to go and pick them up at the day care. During the weekends, there’s no day care or school so then you have to them at a family member’s house, a friend’s house, you have to find someone, you understand? So my child is grown now, but I still have to pick up my cousin’s children in the morning because I have a car. So even I go through this, even though my child is grown.

As indicated above, though Helen’s son is older, she still faces some of the strain that working mothers with younger children face because she also helps with the provision of care for younger kin in the family. Further, the gendered nature of this strain is central, in that most workers shoulder the majority of unpaid household labor responsibilities in their own families.

Expectations relating to familial caring are best described by the case of Julia. I met her during a fieldwork visit to Cape Verde in March of 2015. At the time, Julia was 45-years-old and worked for a Cape Verdean social support agency for the sick or elderly. She was living with her youngest 14-year-old daughter and 25-year-old son and his wife and two young children in a small apartment located in the heavily urbanized area of Praia, Santiago Cape Verde. I was then surprised to come across Julia and her youngest daughter in Lisbon, Portugal. While Julia indicated to me during our encounter that evening that she came to Portugal because she needed to find better paying work, her youngest sister, Selma, suggested another factor. One evening, during a family dinner in Portugal, Selma alluded to the utility of Julia’s presence: “Now that she’s here, I can drop my son off whenever Julia is around! Maybe on the weekends, especially when school is out!” Indeed, on several occasions I observed that Julia cared for

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several small children while her siblings (all eldercare workers) were off to work. On other days both she and her daughter could be found working behind the counter at a cousin’s local Cape Verdean local pastry shop.

This arrangement speaks to how the existence of migrant families in a given setting also shapes caregiving expectations of migrants, even while these expectations are not easily met. It’s important to stress, however, that these often unspoken familial expectations concerning kin care do not go uncontested or unnoticed. It’s actually quite the contrary. I visited Julia’s eldest sister’s house one evening only to find Julia and her daughter alone with her two nieces and two nephews, all below the age of 6. It was her sister Selma’s day off from work and she dropped her son off with Julia without communicating a concrete pick-up time. Julia was clearly upset. She stood with her back against the kitchen sink as she cut pork into small cubes for the *torresma* that she and her daughter were preparing together. The group of toddlers ran around in the living room, toppling over one another as they jumped on a small pillow fort they constructed near the sofa. Julia asked me if I had spoken to or seen Selma, and whether I could watch the children for a while because she wanted to run errands with her daughter. I, apologetically, replied that I already had plans. Julia, in an annoyed tone, reported, “*She [Selma] always does this to us, it’s not right!*” Julia’s family expectations of her once in Portugal both speak to women’s gendered role as care providers and how the strain associated with a care deficit may also be transferred to other relatives. Overall, migrants with children in the host society face a dilemma: performing eldercare work is often incompatible with providing primary care for one’s “own” family in Portugal (Datta et al. 2006; Romero 1998, 1997).

**CHILDREN’S PROVISION OF FAMILY WORK**

During a field visit to Praia, Cape Verde, a participant invited me to stay with her family during her home visit. There, I met Mario, an 8-year-old child of a child care worker in Portugal. His mother had immigrated to Portugal when he was 3 years old, and he stayed behind in Cape Verde to be looked after by an aunt. Mario entered and exited the home on his own throughout the day as teenage cousins looked after him. One 14-year-old cousin who stayed at her aunt’s house over the week as she attended high school picked up Mario in the morning and made sure that he bathed and ate, while another 16-year-old cousin picked him up from school on her way home and dropped him off at his aunt’s house in the early evening. His 13-year-old male cousin with whom he shared a bedroom assisted with homework in the evenings and made sure she Mario prepared for bed at a reasonable time. There was no single one person that cared for Mario, and, instead, younger kin worked together, though his aunt delegated most of the responsibility. One morning I sat around the table with Mario and I observed how his group of four cousins, ages ranging from twelve to seventeen, all took turns reviewing his mathematics homework. As they passed the worksheet around the table they asked Mario to explain the errors, so as to make sure that he understood the logic behind the mathematical problems.

While the previously described family dynamic may be shaped by cultural meanings of childhood, the socio-historical context is just as consequential in shaping family practices and cultural meanings of family and childhood (Coontz 1992; Mintz 2004). Indeed, “cultural repertoires

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6 *Torresma* is a typical snack food of fried marinated pork belly.
are valuable resources that families use—or not—depending on their economic and social circumstances” (Brewster and Padavic 2002: 547). Due to widespread drought and famine, a long history of colonial labor recruitment of men throughout the Diaspora, and the more recent feminization of migration, Cape Verde has a complex history of migration to Portugal and some studies report that “the dominant view in Cape Verde is that separation is a normal part of life” (Akesson, Carling and Drotbohm 2012: 248). What is less addressed, however, is how children and young adults’ provision of family care may become exaggerated within highly diasporic communities. Research finds that women in Cape Verde have historically been deeply engaged in paid work and currently, only 52 percent of Cape Verdean households are headed by men (Instituto Nacional de Estatistica 2010). Thus, the international labor transfer between Portugal and Cape Verde is also felt among the youth because the availability of full-time caretakers is not common among all families. While caring activities seem to be highly gendered among older caretakers with Cape Verdean women providing the majority of unpaid care for kin in Cape Verde and in Portugal, young boys and teenaged men in Cape Verde did engage in caring acts such as dressing, helping with homework, and looking after children throughout the day. The result is that both adult women and youth (girls and boys) may provide intermittent care for younger kin throughout the day. More affluent families, however, were able to offset this care transfer to youth by hiring paid domestic and care laborers. Of the 32 people interviewed, however, only three participants indicate that they or their families hired some form of paid help in Cape Verde.

In Portugal, the context is both different and similar, as all participants did not have the disposable income to hire paid help. All participants discussed how adult family members in Portugal are less readily available to care for younger kin because adults have very little time outside of work due to the scheduling demands of the community's service work. In this sense, young and teenage children are also called to provide family support and alleviate the care crisis for families that have children with them in Portugal. A body of literature finds that children's provision of childcare prepares children for adulthood and is an essential contribution to family sustainability among families of the Global South (Weisner 1987; Whiting & Edwards 1988). Similarly, Linda Burton (2007) finds that impoverished, urban and immigrant families in the United States often rely on children’s family work.

Casey, a mother of one toddler boy, a 6-year-old boy, and one teenage girl, is able to bypass the difficulties described earlier because her 15-year-old daughter picks up her siblings and cares for them after school and on some weekends. Another mother of one toddler girl and a 10-year-old son, Sela, relies on her son to bathe and feed her daughter in the morning, as she gets ready for work. When I asked Isabel, a single mother who receives support from her child's father, whether she felt that her work schedule had any effect on caring for her daughter, she responded in the following way, passionately:

A lot. When the child is young! But when the child is older, no. Basically things are hard until they [children] can at least stay at home alone. My daughter stays home and she can because she is very independent. Because at 10, 11 or 12 years old you can stay home alone, but there are people here that have children that at 8 or 9 years old and they already can stay home alone. They leave the house and buy groceries for the family. The kids that stay at home alone, it's out of necessity because their families have no one with whom they can leave them. I think there's a lot of risk there, leave the house and do things on their own like buy groceries because they are still children so any adult could persuade them to do things. But, I think it's a risk but the issue is that sometimes necessity outweighs the risks. The father isn't around, or the father and mother both have to work
and if they don’t the children can’t eat. So, they have to leave the children at home alone because they have family that live too far away, because they don’t have family here. Principally this happens to us immigrants.

Above, Isabel elucidates the reason why workers often clearly distinguish two different stages of childhood; workers cite that raising infants and young toddlers is most difficult, and a time squeeze loosens up once one or all of their children are older and able to care for themselves and provide direct care for younger kin while adults work. Though her ex-partner did help out by visiting her daughter, taking her on some weekends, and providing some monetary work, Isabel still felt that it was not always enough and she had to raise her 11-year-old daughter to learn how to take care of herself from a young age. Indeed, Isabell’s daughter, Nilda, is remarkably independent; she wakes in the morning, sometimes waking her own mother, makes her bed, leaves for school and returns home on her own. Nilda is able to go about her full day with little assistance from her mother. Isabel proudly refers to her daughter’s mature and adult-like demeanor. “She has to be like that,” Isabel remarks with a smile, “She is very mature, almost like a little adult, and it just has to be that way, you know.”

Likewise, Nilda provides care for her three-year-old cousin, Jose, while both mothers work. This is particularly pronounced over the summer once school is out because her aunt is able to offset the costs of daycare by leaving the three-year-old with Nilda during the day as she works in home care. Indeed, Jose is attached to her cousin and follows her around like clock-work. When the two of them are alone or when their mothers are busy, Nilda may have her cousin sit on top a chair in front of the stove and stir or watch over a pot as Nilda prepares dinner. Nilda also helped bathe her cousin and did so by using games and humor to encourage the toddler’s cooperate; shower gel and soap were “magic potions” to be applied all over Nilda’s cousin’s body because there were small “microscopic insects” that needed banishment; the towel (and the child wrapped in the towel) was actually a potato sack that needed to be dropped on the bed; the loofa was actually a magic sponge. But Nilda also disciplines or calms the three-year-old boy during altercations. This, however, may result in frustration or quarrel between the 11 and 3-year-old. I once entered the home in the late afternoon and found the three-year-old crying because Nilda was giving her the silent treatment after a dispute over compromising on a T.V. station. I found Nilda sulking in the corner with her headphones on and unwilling to talk to anyone. This exemplifies how this care transfer may cause some amount of conflict or overwhelm among children.

CONCLUSION

This article highlights the difficulties faced by home care workers in the realm of unpaid household labor. I have outlined how working mothers in Portugal find that performing eldercare work is often incompatible with providing primary care for one’s “own” family in Portugal. In some cases, mothers will send Portuguese-born children back to Cape Verde or to other nations to be cared for by extended kin, while other mothers negotiate an occupation structure that does not align with their own children’s schedules. In these cases, due to atypical timetables and unsocial work hours as well as the constancy of unpredictability, mothers increasingly face a time squeeze as they go about their daily routine. This squeeze, however, is most pronounced when workers’ kin are infants, toddlers and young children, as participants indicate that it loosens up once one or all of their children are older and able to care for themselves and provide care for younger kin while the adults work.
These findings speak to the multidimensionality of precarious work. Research on the labor position of migrants finds that contemporary immigrant women in Portugal, often from the PALOP countries, Brazil and the Ukraine, negotiate precarious work conditions; contracts either are short term or do not exist at all within the informal labor market, or they are not complied with by employers who expect workers to perform excessive working hours (Dias et al. 2002; Peixoto 2009; Peixoto and Sabino 2009; Wall and Nunes 2010). Yet, contracts are becoming even more common within certain occupations such as care work as the state imposes more stringent penalties on employers that hire undocumented workers and responds to the resultant care deficit from women’s increased labor participation. Further, immigrant workers’ need for legal status (as shaped by Portugal’s compliance with EU immigration standards) has led to an increasing number of formal relations in this sector, given that the state’s immigration policy now requires contracts to legalize immigrants. The experiences of Cape Verdean home care workers not only challenges European scholarship and policymakers to address the insecurity experienced by a seemingly stable workforce (read as naturalized, resident and contacted), but also to center research on the unique experiences of the legalized PALOP community in Portugal.

Still, the ability to earn money and care for their families provided a source of pride and empowerment among many of my informants. Several of my informants spoke of the importance of their work and all agreed that eldercare work is an essential service required for the development of Portuguese society. However, as demonstrated, low-wage immigrant Cape Verdean care workers must also deal with the difficulties they face in managing their own personal and family-needs. These experiences must be considered when considering policy development that will address inequality in minority communities. This involves looking at institutional and individual-level racism towards people of African descent, which concentrates a disproportionate amount of citizen and non-citizen women of African descent and their family members in similar occupations such as care and service work, raising wages and restructuring opening and closing hours in the care sector, and addressing the state’s support mechanisms in terms of child and kin care for multi-generational migrant families. Social policies that fail to address these areas will not adequately improve the livelihoods of families of African descent in Portugal.
References


