

DISTURBING MASCULINITY WITHIN THE CAREGIVING SPACES: PRAXIS OF  
PAID FILIPINO MALE LIVE-IN CAREGIVERS IN TORONTO

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## ABSTRACT

### **Disturbing Masculinity within the Caregiving Spaces: Praxis of Paid Filipino Male-Live-in Care givers in Toronto**

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This study is an attempt to understand the plight of paid Filipino male live-in caregivers in Toronto. Caregiving has historically been associated with women. Today, live-in caregiving is normalised as Filipino women's work. Cultures, language and policies promote this gendering. What happens when a Filipino man decides to undertake paid live-in caregiving? This study wants to understand the trajectories that surround caregiving and masculinity; particularly looking at paid Filipino immigrant man. By invoking trans-nationality and border crossing, this study lays bare issues of masculinity and paid caregiving in Toronto.

Key word:

Anti-colonial, Border crossing, Culture, Governmentality, Hybridity, Masculinity, Live-in caregiving, Post-colonial.

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## DEDICATION

I dedicate this work to my grandma Sophie Rwamba Joel for the kind work and love while I was growing up. You made me who I am today. I will always love you for teaching me our Embu traditions. *Cucu ngwendete muno.*

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## CHAPTER 1. INTRODUCTION

*More specifically, there are now a number of studies that have assessed the meaning of masculinity” to male caregivers against the backdrop provided by Connell’s (1987) work and other developments in feminist theory. Russell (2001), for example, has suggested that male caregiving poses a double threat to males: “they are judged to be deviant as caregivers if they offer types and amounts of care that differ from women, [and] are judged to be deviant as men if they care in the same manner as women”—and for that reason, Russell argues, it is a context in which feminist arguments that sensitize us to the diverse ways that men can do masculinity are especially useful. (Campbell & Carroll 2007, p.495)*

### *Research Focus*

Masculinity as a discourse identifies, shapes and shares responsibilities and roles for both men and women. Rubio and Green, (2009) describe masculinity as “historically situated norms, ideologies, and practices that cultures use to create various meanings of being a man” (p. 61). Therefore, masculinity focuses on linking men to particular behaviours within a given society. To that end, men are supposed to be rational, non-emotional and competitive characteristics mainly associated with public places (Alipio, 2013; Connell, 2000; Hall,1997; Odhiambo, 2003).Through daily performances of these masculine practices and culture (Coleman, 1998), men become rational being while women take up emotional and caring roles. Care provision range from looking after children, elders and disabled to house cleaning and hospitality. This kind of work is typically unpaid (Hall, 1997). Traditionally, it is assumed that men provide security to their families in the form of finances and prevention of external intrusion by enemies. To provide this security, men have to sell their labour to the owners of production.

In present day globalised world, masculinity is now being reformulated from ‘within and without’ the caregiving practices and processes. What we are witnessing are changes in role and

responsibilities for both men and women i.e., women are joining men in the public sphere. In the wake of these changes, the need for a paid caregiver becomes fundamental for families. The once unpaid private space is being paid. The public spectacle is now invading the privacy of the home (Bhabha,1994).

Women of colour have been predominantly represented within the paid live-in caregiving literature. Today in Canada, Filipino women are the main paid live-in care givers (Lindio McGovern, 2003,2004). Now that men are joining caregiving sector; there is currently a gap in the research on the experiences of paid Filipino male live-in caregivers. While this is happening, most socio-economic cultures and policies on caregiving continue to support masculine discourse (Alipio, 2013; Brickner & Straehle,2010). Talk of masculinity and care has been silenced in most cultures (Alipio, 2013). It is a taboo for a man to undertake paid caregiving in most cultures (Szinovacz & Davey, 2008;Szinovacz ,2003, 2007). It would be a curse in some cultures for a man to be found providing paid caregiving to the elderly within private spaces. This stigma has made the live-in caregiver program and policy gendered.

Therefore, one may ask why paid male caregiving has been silenced and depoliticised. Why it that there is laxity to this is endeavour; considering that economic and political structures are controlled by men? Why is the literature on paid Filipino male live-in care giver? Are Canadian and Filipino societies still lingering on totalising narratives that men are only supposed to be in the public sphere? What happen if this area of research is left unattended? Is there some

shame associated with bringing this aspect of paid male live-in caregiving to the core of academic discourse and hence making it public? Is the failure to acknowledge that men have been involved in caring part of concerted and well-designed way of reasserting the hegemonic masculinity? (Moffatt, 2004; Parada,2012) Is this trend an act of default or is it by design?

This study focuses on “paid Filipino male live-in caregivers” and how they navigate masculinity in Canada. Russell (2004) says that “caregiving is basically a solitary activity, carried out in social locations predominantly occupied solely by the care receiver-caregiver dyad.” (p.122) This identifies caregiving as an activity undertaken in private spaces. According to Lindio McGovern (2004) “paid domestic work involves the rendering of emotional labor, especially where childcare is involved” (219). Within that environment, there exist power dynamics between the caregiver and the care-receiver; one has the skills to offer, while the other has the money or affinity to exchange for the service rendered.

Most racialised immigrant women from the Philippines are paid to provide care for the elderly and children (Lindio-McGovern, 2004). This is because no one in Canada wants to take up paid live-in caregiving since it is considered low paying (Galabuzi,2006; Lindio-McGovern, 2004). Therefore the government provide permits to Canadian families to bring Filipino live-in caregivers to Canada. Most of the live-in caregivers from the Philippines have been women. However, this phenomenon is changing as Filipino men have started engaging in paid care provision.

Using the works of Alipio, Bhabha, Cornell, Coleman, Dei, Galabuzi, Odhiambo, and Walcott, this study hopes to understand and historicise the issues around caregiving and masculinity in the 'beyond'. In this study, masculinity is historicised, disturbed, contextualised, questioned and analysed in an effort to understand whether it is fixed or fluid; and to understand it within transnational theorising. Thus, border crossing pedagogy takes an important role in this research. Within border crossing pedagogy, bodies in transnational movement encounter conscious, unconscious and constant changes in their identity and culture (Bhabha, 1994; Coleman, 1998; Walcott, 2006). This leads to unwrapping of their masculine belief system (Walcott, 2006). This deconstruction of self enables migrant Filipino live-in caregivers to identify the discontinuities and temporalities present within the discourse of their national culture (on masculinity). This enables them to fill those spaces present 'within and without' the masculine culture, while recognising their instabilities (Coleman, 1998). Through this, a new contingent identity is born. This new and temporary forms of cultural identities created in the metro-pole brings about a new genre of 'identification' for the Diasporas.

Human beings are social and political animal who need each other for their survival. Due to the disturbances found in the 'beyond' none can accept other people's culture. The meeting of these cultures in the metro-pole allows for the negotiation and creation of new and contingent way of living that can accommodate all. It becomes a state of creating new knowledge for survival in new found lands. Coleman (1998) talking about masculine migration states that

*..since the experiences of migration involves a process in which the immigrant bring one set of cultural codes and assumptions into a setting where another set predominates, the immigrant is likely to have to negotiate between the two. In other words, values and beliefs that maybe unconsciously assumed at home are disrupted in migration, and the immigrant usually goes through a process of re-evaluation and adjustment. This means that often transparent codes such as those of gender-the same would be true of the codes about family, religion, class, ethnicity, and so on-are likely to be made visible in narratives by or about immigrants.(p xii)*

The meeting of Filipino and white masculinity in Toronto brings forth cultural and identity disorder for a Filipino male. The paid Filipino male live-in caregiver has to find a temporal cultural and identity 'balance' that suit him while in Toronto. This process is genealogical yet critical to the Philippines' totalising discourse on male caregiving. Each cultural group in the metro-pole brings their masculine cultures to the 'creole' table. The blending of these masculine cultures forms a new and provisional cultural beginning that offers freedom to paid male Filipino caregivers to provide care without social repercussion. The newly formed culture is distinct from other cultures that found it. It picks some aspects from the parent cultures and mixes them to form a hybrid metro-pole culture. This is what Walcott calls 'creoling' of cultures in the 'beyond' (Bhabha,1994). Paid Filipino male caregivers would like to exude their Filipino masculinity, but since the Canadian white masculinity denies them good jobs that can help them perform their gender, they enact their subordinated masculinity (Coleman, 1998) within the caregiving spaces. This is made possible through invoking the suppressed caring side of their identity in their work. As such, their subordinated masculinity exists for survival reason.

The 'third' space creates a conducive environment for participants to negotiate, create relationship and bring politics of identity in the masculinity discussions. The development of newly formed cultural identities happens in environments that are democratic to knowledge production. This space allows participants and researchers to see each other as co-creator/subject of new forms of knowledge (Harrington, 2005). Walcott (2006) calls this space 'creole' which means a space that allows for the discussion and destabilisation of normalised national culture. This space allows the paid Filipino male caregivers to question and critique highly held historical and cultural beliefs with intent of forming new possibilities of existence. It is also a space of agency and resistance to white masculinity, where racialised bodies apply a certain form of masculinity for survival purposes (Coleman, 1998). This is a space in the 'beyond' where newly formed identities bring together people and their cultures. This space is anti-thetical to the socially constructed masculine identity. It is a space that allows the decolonisation of the mind and spirit of the formerly colonised national bodies. It frees paid Filipino male caregivers from the everyday oppression brought about by masculinity. It has no geographical space hence becoming limitless in its words and possibilities. The space allows the growth of new ways of living.

Masculinity as a concept undergoes reformation and re-creation in the metro-pole. This study attempts to understand how masculinity works to control and manipulate male bodies. It asks: how does masculinity become an everyday mode of governing the way people act and

react? Why would a man opt out of a caring job just because he has been taught that it is a woman's work? Why would such a man limit himself to new possibilities just because he does not want to 'look' like a woman? How did this man become ingrained to the discourse that creates gender binaries?

Through transnational theorising by Daniel Coleman and Ronaldo Walcott, this study attempts to identify how masculine identity is troubled in the metro-pole. Using 'third' or 'creole' space thought processes, this study attempts to lay bare different ways through which Filipino male live-in caregiver circumnavigate masculinity. With the inclusion of Cornell as well as Filipino, Canadian and African writers in this study, an attempt is made to understand masculinity and its place within contemporary society. Cornell allows us to understand the metamorphosis of masculinity and the consequent new temporalities within masculinities. There are trajectories that surround representation and expertise even more when you include Filipino and African scholars in theorising masculinity (Gegeo&Watson-Gegeo,2001;Reyes Cruz,2001; Spivak,1996). Therefore, this study intends to include direct verbatim from the research participants.

Since participants in this study are racialised, the works of Grace-Edward Galabuzi, George Sefa Dei become important in understanding the discourse of colonialism, modern slavery and labour segregation. Anti-colonialism is important in this study because it identifies the formation of masculinity in the colonised lands of Africa and Asia (Oyewumi, 2006). Anti-

colonial theory lays bare historical injustices pitted on the racialised bodies. Racism, slavery and cultural genocide of the formerly colonised bodies become the centre of anti-colonial theorising (Dei, 2010; Galabuzi, 2006; Lindio-McGovern,2003). Furthermore, post-colonial theory connects caregiving to modern slavery and colonialism. Some of the questions that post colonialism asks are; what forces Filipino male live-in caregiver to leave their land? What are the forces behind these voluntary movements of social bodies in the transnational movements? What would make one leave the comfort of their land, culture and people, and head to new and unknown lands? Labour segregation looks at the kind of work that racialised people do in the West (Galabuzi, 2006). Through this, we are able to understand how caregiving in Toronto is modern day slavery.

### *Implicating the Self*

I was born in Nairobi and brought up by my grandmother in one of the rural areas of Kenya. Kenya is a masculine society; as such, the distinct roles and responsibilities of men and women are very visible. For example, my uncles and I would be allowed to prepare and harvest maize while my aunties and other women friends would be the one preparing the bean plantation. Beans were always planted haphazardly while maize would be planted in lines. It was easier to prepare a maize plantation than it was for the beans. By planting maize in line, it showed a well-planned and rational way of planting crops. This was man's domain. The planting of beans was



identified with irrationality and emotionality that were commonly associated with feminine body. That said, women were the only people who could take care of the bean plantation.

Women would cook food while men sat around waiting for the food to be ready. Women and children would till the land while their fathers met their friends or attend chief's *baraza* (meeting). Most men were concerned with politics. In the evening, they would converge in their compounds to discuss the state of affairs in the government. While men were doing that, women and their children would be in the kitchen preparing food. That considered, Kenyan women were the ones who spent more time with their children.

According to Onsongo (2009), Kenyan girls are socialised on how to cook, clean house and preserve food, while boys are involved with skills that will enhance their participation in public life. Muriungi (2002) says that a Kenya man is able to bully others and attain the status of a 'total man'. Boys are socialised to be macho and engage in sexual aggression toward girls (Greig, 2009) This has affected the girl child wherein even after women get education, they cannot access better paying public jobs.

Odhiambo (2007) connects masculinities in Kenya with colonisation and its aftermath. During colonial times, white men involved themselves in sexual escapades. They also owned capital properties like land. The Kenyan man wished that he would become like his white master. He had all along look-up at the coloniser with mixed feelings of amazement and envy (Fanon,1967 Freire,1973). Odhiambo says that after attaining independence, Kenyan man got

more freedom to engage in what they thought was only meant for the white coloniser. Odhiambo says that men started acting the 'freedom' through involving themselves in what they regarded as 'maleness'. Today in Kenya, land and other major assets are owned and controlled by men (Maragia, 2004). This involved occupying public offices in town centre like Nairobi, while their wives took care of children in the rural areas. They would also involve themselves in sexual escapades with sex workers, something they had not done during the colonial period.

This shows how colonialism and its aftermath became a point of creating masculinity in colonised lands. This not only denied women their right to public position, but also emasculated men to use their freedom to the detriment of women. Oyewumi (2006) says that women underwent double colonialism. Women in Kenya are supposed to ensure the continuity of the family, the immortality of the husband's name or the creation of wealth within the marital home. Motherhood and caring is synonymised with women (Odhiambo, 2007). Martin (2000) says that African-American women are more likely to provide care to the elderly and children than their male counterparts. Sex and gender define the politics of governance, leadership and property ownership in Kenya.

The main reason for undertaking this research is based on the experiences of my grandmother. She was able to take care of us even though my grandfather was not around to help her. She denied herself a lot just to make sure that we had enough to survive. Her example pushed me to question fathering and the role of men in caregiving. I started questioning the

discourse of masculinity at a tender age. I wondered why men were the only people who could own land and work in an office. I always questioned why men were the only people who took up leadership positions in our society. In Kenya, patriarchy continues to maintain masculinity. The Kenyan woman is supposed to be in the kitchen (private) and the man is supposed to be the provider of the family. These are utter practices of oppression against women, children and youths.

I am married to a Filipino woman. This has made me conscious of the oppression of Filipino live-in caregivers in Canada under the Live-in Caregiver Program (LCP). I always meet with them in cultural and spiritual gathering, where they speak of how oppressed they are in their workplaces. My closeness to the Filipino community has made it possible for us to start a human service organisation called I Care Foundation International in which I was a board member. I intend to delve deep into understanding their predicament through this organization.

I also attend some of the informal gathering where most of the time the discourse of masculinity plays out. Most women undertake cooking and cleaning of the house and utensils, which is considered feminine. If I want to mop my house, my spouse has to always stop me. The man in the Filipino and Kenyan culture is supposed to be a provider- macho and independent (Alipio, 2013; Muriungi, 2002). Alipio (2013) has shown how young Filipino associate provision for their children (through gainful employment) with masculinity. Having children and being

able to provide for them identifies a young Filipino man as man enough. This is what Thompson (2002) identifies as masculine ways of taking charge.

Filipino boys are socialised to be the paternalistic provider and protector of their family. In fact, fathers are identified as *haligi ng tahanan*, which means the cornerstone of the family. This connotes that they should economically provide for their family (Rubio & Green, 2009). The Filipino man is supposed to be alert and rational, manifest physical and emotional strength, and be aggressive (;Aguiling-Dalisay et al., 2000; Rubio & Green, 2009). These characteristics are identical to colonial masculinity.

## CHAPTER 2. LITERATURE REVIEW

### *Brief Description*

In the 17<sup>th</sup> century, British men used to be the primary care providers for their children. This changed when capitalism became the new economic order, wherein caregiving became synonymised with women (Gillis, 1995). This was because division of labour as well as capital accumulation were determinants of capitalist regime. It was a way of dividing people with an intention of controlling them. This way of control system was supposed to be reflected within the private and public sphere in a capitalist society. The public place was meant to provide employment to men. This space was paid, rational, competitive, lacking empathy and masculine (Bird, 2003; Cockburn, 1991; Gerstel & Gallagher, Hall, 1997; 2001; Pierce, 1995). Men were supposed to sell their labour to the market in order to survive. The non-paid private place became interconnected with nurturing, irrationality, femininity and emotions (Hall, 1997; Odhiambo, 2003; Spivak, 1996). Women were supposed to take care of the nuclear family through providing the necessary emotional and maternal unpaid services to their children, elderly and husbands (Martin, 2000).

After the women's rights social movements of 1960s in Canada, Britain and America, women started to be recognised in the public sphere. This movement was largely led by white middle class women. This feminist wave enabled white women to be recognized in economic, political and educational spheres. These changes challenged the notion of man as the sole bread winner in the nuclear family (Bird, 2003; Hochschild, 1989). Today, men are competing with

women in the public sphere. Due to increase in service industries, men are being squeezed out from the public arena. This phenomenon, coupled with recent job rationalisation is making men take an active role in caregiving responsibilities.

If men become jobless or take up part-time, temporary jobs, they are more likely to offer care to their children, more so if their spouse is full-time employed (Gerstel & Gallagher, 2001). This scenario coupled with a shift in downloading of care from the state to the family, has made men become active players in caregiving (Gerstel & Gallagher, 2001). Levine (2004) informs us that

*According to the Centers for Disease Control and Prevention, the average hospital stay for people 65 and older in 2001 was 5.8 days, or less than half the 1970 figure (12.6 days). Patients today are routinely being discharged to home continued medical care by family members. A burgeoning homecare technology industry is positioned to turn a home into a hospital ( p.6)*

This is what Bhabha (1994) refers as homes being attacked by the world. It is a position where the private, secretive and emotional space is being invaded by the public.

Studies have predicted that in the future, informal care provision will decrease, thus inviting the need for caregivers (Kramer, 2002; Spillman & Pezzin, 2000). When caregiving is downloaded to families and both spouses are in a fulltime engaged labour processes the need for a paid live-in caregiver becomes important and relevant for the neoliberal family. Due to these recent occurrences, many families in Canada are seeking the help of a paid live-in caregiver to look after their children and elderly.

Initially in Canada, Western and Eastern European women were employed as live-in caregivers. European female caregivers had a lot of prestige that accrued from their racial and linguistic orientation. They could marry white bachelors and hence have access to Canadian citizenship (Khan,2009). Anglophone caregivers received better treatment than their Eastern counterparts. Employers in Canada used language to reward and classify caregivers.

Later, Caribbean live-in caregiver women joined the fray. They were supposed to undergo rigorous medical tests to identify whether they had sexually or other transmittable diseases (Khan, 2009). They would also be asked whether they had children back home. The Filipino live-in caregiver women followed the Caribbean caregiver and became the key players of caregiving in Canada. Currently, the Philippines counts as the major provider of caregivers in Canada (Kalaw and Gross, 2010; Lindio-McGovern, 2003; Portilla,2010Tubo, 2010). In Canada, employment of caregivers is regulated by the Live-in Caregiver Program (LCP). The literature says that Filipino live-in caregivers continue to face many problems ‘within and without’ the Live-in Caregiver Program (LCP). Filipino live-in caregiving women are sexually and physically exploited. By being within the employer's house, they become victims of continuous, constant and unverifiable surveillance of their bodies by their employer. Whatever they are paid is not commensurate to their work. Thus, they are overworked yet paid lowly (Brickner& Straehle, 2010; Cohen, 1991; Kalaw & Gross, 2010; Khan, 2009; Magkaisa Centre, 2008; Portilla, 2010; Stiell and England, 2011; Tubo 2010; Walia, 2010; Zaman, 2004;).

Filipino women have been stereotyped as submissive and malleable. This discourse on submissiveness of Filipino women caregiver provides a standard for identifying the right female care provider. Many white employers look for a person who will not question their authority. This means that Filipino female caregivers can be oppressed and still remain silent and resilient. This narrative denies most of the unemployed Filipino male caregivers a way of subsistence. Parada (2012) says that Canadian white masculinity is a standard through which other men can emulate. The diasporan Filipino man is thus expected to live up to the dictate of white masculine verse while in Toronto. But this becomes a tall order for the Filipino man since the Canadian society does not provide better jobs through which they can exude masculinity. Thus, for a Filipino man to survive, he has to subjugate his masculinity and become the subordinated subject. This is done through taking caregiving as his livelihood.

**Theoretical Framework:**

*Anti-Colonial/Anti-Racist:*

According to Dei (2010), “contemporary anti-colonial thought has its roots in the decolonising movement of colonial states that fought for independence from European countries at the end of the Second World War”p11. Anti-colonial theory helps in interrupting colonial discourses present within live-in caregivers programs and processes. To interrupt masculine discourse within caregiving spaces in Canada, we need to bring “language, identity and national cultures into anti-colonial debates for political and intellectual liberation” (Dei, 2010 p.11).

Dei (2010) says that



*dismantling colonial relations and practices has as much to do with studying whiteness and oppression as well as a study of the marginalised positions and their strategies of resistance (p.11).*

To understand colonialism, it is imperative to involve race matters. Racism was and still is the platform through which colonialism thrives. People who had different skin shade from white coloniser were deemed inferior by the coloniser. The coloniser believed it was his responsibility to save the colonised from their heathen and backward life (Dei, 2006).

The first colonial encounter was between Europe sailors and the Indigenous peoples of the world. In Kenya, we had Portuguese sailors who came to find new lands. Among them were Prince Henry the navigator and Vasco da Gama. It is said that they prepared the way for colonisation in Kenya. Later the missionaries came to Indigenous peoples' lands with an intention of spreading Christianity. The gospel was meant to civilise the Indigenous peoples and save them from their heathen lifestyles. In Kenya, Ngugi wa Thiong'o (1986) tells us of how the missionaries gave our people the Bible and then asked them to close their eyes to pray. When they opened their eyes, their lands, cultures and identity had been taken away.

Before colonialism, most of the communities in the Philippines and Africa were matriarchal. The cultural beliefs of most Indigenous peoples of the Philippines and Kenya honoured their women (Agoncillo, 1990; Aquilar, 1989; Odhiambo, 2007). Spanish colonial presence in the Philippines had many effects on the lives of Indigenous peoples. Aguilar (1989) says that

*Among women's rights and privileges effectively destroyed by Spanish Civil Law were the right to divorce, to have children regardless of marital status, property rights, freedom to contract business arrangements independently of the husband, retention of maiden name, and a central role in religious practices. (p.529)*

This Filipino matriarchal culture was replaced with portrayal of a Filipino man as the head of a family.

The original Indigenous family makeup was disturbed and replaced with patriarchy which espoused masculine identity. This initial masculine talk was allowed to thrive within the psyche of the colonised communities. Masculinity became a colonial construct that shaped the gender binaries within formerly colonised worlds (Coleman, 1998). Oyewumi (2006) says that colonialism was highly masculinised practice. Most women were seen as weak and emotional and thus could not qualify to undertake leadership role in colonial process. Even though colonialism was led by white men, black men would be considered as appropriate candidate in the lower ranks. That said, black women faced double colonialism based on their colour and gender (Oyewumi, 2006)

It should be noted that before colonialism, women held important positions within the Kenyan and Filipino societies. They were given the role of being administrator. Soon the colonial regime took away this role and instead bestowed it to a man. This was the essence of marginalising women using the coloniser's cultural and political belief (Oyewumi, 2006).

Anti-colonial theories help to historicise the essence of masculinity as a colonial discourse within Filipino communities. These theories also help us understand how racism and

colonialism are present within Canadian work places and policies, and the effect they have on the Filipino immigrant communities (Galabuzi; 2006). Anti-colonial/anti-racist theories help us understand modern slavery within the Live-in Caregiving Program (Galabuzi, 2006; Khan, 2009). To demonstrate this, we need to understand the role of imperialism and globalisation within the current world order. We need to recognize the role of International Monetary Fund (IMF) and World Bank within the caregiving processes.

Philippines continue to suffer the adversities brought about by colonialism and its vestiges (Lindio-McGovern, 2004). Philippines was colonised by Japan, Spain and United States of America. These colonisers introduced their masculine cultures to the Filipinos. Agoncilio (1990) tells us that women used to be equal to men in terms of leadership and property ownership. Due to conflict of Indigenous cultures with those of coloniser, the Filipino people started to resist colonial meta-narratives. In the Philippines there was armed resistance against colonial oppression. Led by Andres Bonifacio, anti-colonial movements applied diverse techniques against colonial masters. These were in form of armed resistance as well as pen and paper through the writings of Jose Rizal (Agoncilio, 1990). Today, Bretton Wood Institutions continue to use loans and grants as the carrot and stick to manipulate third world countries. Among Bretton Wood Institution's control mechanisms to the Philippines economy in the 1990s was the introduction of Structural Adjustment Programs (SAPs). The program called for a reduction in government spending. This meant that government had to retrench and rationalise some of its employees and

public services and embrace a new form of management. The program's policies had adverse effects on the economies and populations of the Philippines. Among the consequences of these policies was the high unemployment rate, leading to Filipinos seeking greener pasture in the West (Lindio-McGovern, 2004).

The current neoliberal regime uproots Filipinos from their ancestral lands in search of an evasive freedom in the West. Among diasporic Filipinos are those who decide to take up caring work as a profession. Caregiving in Canada is considered as second class kind of work (Galabuzi, 2006). Racialised Filipino immigrants are mostly the one who take up this kind of work (Galabuzi, 2006). When they arrive in Canada, they become oppressed by their employers. Live-in caregivers have to remit money to their families which become necessary in the repayment of state loan (Lindio-McGovern, 2004). This scenario can best be defined and described as modern slavery.

According to Galabuzi (2006)

*Historical structures of racial discrimination have influenced the incorporation of racialized immigrants into Canadian labour market. It can be speculated that without major interventions, Canadian labour markets will continue to slow patterns of racial and gender stratification. The continued racial segregation in the labour market is compounded by a key phenomenon of globalisation: the emerging dominance of precarious or non-standard forms of work. (p.41)*

Filipinos are supposed to undertake low-paying job. The rationale is that immigrants have lower human capital qualities necessary for integration into the Canadian labour process (Galabuzi, 2006). This enables those in power to continue

harvesting the gains of a racist society that creates hierarchies within the marginalised groups. For a white woman to join the public sphere, a Filipino woman has to take up caregiving work. This racially and gendered stratification has to be maintain for the survival of the privileged groups within Canadian society. Labour becomes intersected with race and gender consequently re-awakening the discourse of modern slavery. Galabuzi (2006) says that it is not the first time racially segmented labour in Canada has occurred. The live-in caregiving scenario replaced the Chinese worker in Vancouver before World War Two.

#### *Weaknesses of Anti-Colonial/Anti-Racist Theory*

This theoretical framework fails to recognise fluid masculine identity in transnational border crossing. It sees identity as static and immovable concept. It does not identify and explain how and why identities within a globalised world undergo changes. The inability to see fluidity in masculinity by far essentializes and maintains masculinity within a given society (Connell, 1995; 2000; Spivak, 1999). This theory sees active resistance as the only solution to current predicament of live-in Caregivers. Dei (2010) says that “ Memmi(1969) recognised the colonial encounter as a violent encounter creating an intense divide between the coloniser and the colonised” p.12. This creates an adversarial relationship between the colonised and the coloniser. Even though this theory offers active resistance as the solution to “fixing” the social ills facing

paid Filipino male live-in caregivers, it leaves more adversity and discord between the oppressor and the oppressed.

This theory creates a binary between the oppressed and the oppressor (Dei, 2010). The oppressor becomes the one who has power over the oppressed. Dei (2010) cautions that this “schism/divide has detrimental consequences in terms of depersonalising the colonised and simultaneously making the coloniser inhuman” p.12. The coloniser is seen as a demi-god that has supernatural powers to subjugate the depersonalised colonised body. Anti-colonial theory believes that one is either oppressed or oppressor. Being oppressed means lack of power. To that end, this theory sees power as a commodity. There are no grey areas in this theoretical stance.

#### *Post-Colonial*

Baskin (2011) says that post-coloniality is a discourse that comes from the colonised. This theory helps in examining the colonised discourses, thus enabling the colonised to have language and concepts that may explain their colonial experiences. It is important to note that post-colonial lens believes that colonialism is still ongoing. Coleman (1998) says that post-colonial studies signify “a bumpy geneology of continuity and disruption”. They represent the continued suppression and subjugation of colonised through neo-colonialism. This helps us not to fall prey to the belief that colonialism has ended and thus down our tools.

Bhabha (1994) says that post-coloniality reminds us of neo-colonialism and its relations within the ‘new’ world order and multinational division of labour. Through this, we can identify

places of historical exploitation of the colonised and subsequent strategies of resistance. Colonialism is seen as presenting itself in everyday process of modern slavery, racism and exploitation of Filipino women within the caregiving program (Bhabha, 1994; Galabuzi, 2006; Lindio-McGovern, 2003, 2004). Through this, we continuously question normalised texts yet do not forget their everyday posturing. Therefore, resistance becomes an everyday process, brought about by constant questioning and analysing colonial text and processes. This helps us to open up new fields of identification and cultural representation from the former colonised people. This theory helps to revitalise the subjugated knowledge of the colonised.

Bhabha (1994) says that post-colonial thought emanates from colonial testimonies of the colonised from third world. They identify the inconsistencies present within the current world order with the aim of diffusing the essentialist Western colonial thought. This helps to identify the ambivalence within the geo-political divisions of the world in terms of socio-political, cultural and economic aspects.

Through the marginalised people's narratives, they are able to resist discourses that have kept them in the edges. The margins become a site for transformative change (Bhabha, 1994). This theory can help in resisting oppression of the colonised bodies through applying critical discourse analysis on thought and ideas held for granted.

This theory is important in many ways. One of them is fostering a better understanding of the power of paid Filipino male live-in caregivers. This theory helps us learn that power is a

fluid concept. Power becomes a concept that is everywhere and can be exercised even by the paid male live-in caregiver (Coleman, 1998; Foucault, 1980). Both the oppressed and the oppressor become conduits of transmitting power. The theory also helps us to see colonialism as a process rather than an event. Colonialism and imperialism become interconnected with racism, slavery and displacement of social bodies from their lands and culture. Post-colonialism helps to theorise live-in caregiving within the framework of modern slavery.

Within transnational border crossing, Bhabha, Coleman and Walcott introduce the concept of hybridity. These theorists intentionally help in re-read, re-write and re-represent masculinity. The 'third' spaces enlighten us that identity of Filipino male live-in caregiver changes 'within and without' the transnational border crossing. Masculinity just like any other identity formation becomes a concept that is ever changing.

When bodies meet in the metro-pole, their once held belief, cultures, identities and symbols undergo a conscious or unconscious change (Bhabha, 1994; Walcott, 2006). This is because people have to form new ways of being that allow for peaceful co-existence. This creation of new knowledge happens in the 'creole' space. Within the 'Creole' space people recreate and rewrite new identities distinct from their former national formations (Bhabha, 1994). It means going 'beyond' and 'between' colonial interstices that hold hostage subaltern subjects.

Masculinity as a discourse becomes a raw material that needs to undergo textual processing. Spivak (1999) tells us that by re-reading the in 'between' and 'beyond' of masculine



identity, we are made to find those moments that can bring forth resistance. She tells us to disturb the static discourse of fundamentalism that informs the private and public space schisms. Through questioning trajectories present in dominant discourses that inform masculinity a new possibility of resistance is founded. It is in the 'between' spaces that normalised discourses are troubled, hence enabling the growth of multiple and diverse identities (Bhabha, 1994). Spivak (1999) tells us to be careful of fundamentalism that blind us from seeing what lies beyond what we know. She invites us to epistemologically walk two worlds in order to understand what lies 'beyond and between' our own understandings. This is the very essence of this study.

#### *Weaknesses of Post-Colonialism*

This theory engages in many deeper understanding of concepts, discourses and language. However, this has a detrimental effect on how we seek justice through our everyday active resistance. The theory also talks of temporalities and contingencies present in narratives, stories, languages and identities in the 'beyond'. What happens when the colonised bodies choose to retain their experiences and identity as permanent? What happens to the colonial and racist histories and experiences of the Filipino male live-in caregiver?

#### *Convergences of Post-Colonial and Anti-Colonial*

Even though the anti-colonial and post-colonial theories differ, there are instances where their ideas converge. Both theories believe that colonialism is still ongoing (Bhabha 1994; Dei, 2006). There is an agreement between the two theories that colonialism has presented itself through the discourse rife within the neo liberal regime. These two theories call for the

involvement of the formerly colonised populations in creating ways of emancipating themselves. The two theories call for the emancipation of the subjugated knowledge of the former colonised bodies.

Within the post-colonial and anti-colonial knowledge production process, the participant and the researcher become co-subject, co-creator of knowledge (Harrington, 2005; Reyes Cruz, 2008). The participant becomes the teller and constructor of a story that tells his lived experiences. Through telling and retelling of stories, participants are able to organize their experiences into meaningful episodes (Chilisa 2012; Dei, 2011; Gegeo & Watson-Gegeo, 2001). Dei (2011) says that we can learn a lot from stories. They can help us appreciate our successes and failure and thus enable us disrupt Eurocentric research methodologies.

Post-coloniality identifies power within the marginal spaces. This power can be emancipatory through creating spaces of collaboration within “the margins of the nation-spaces and across boundaries between nations and peoples” (Bhabha, 1994: 252). By identifying the possibilities present within the narrative study, one is able to invoke areas of emancipation for the formerly colonised bodies. Storytelling, language, culture become a continuum space that the marginalised group can bring their own ways of thinking without fear of retribution. The story teller becomes an outsider to his sentence and is able to disturb normalising sense informed by the national meta-narratives (Bhabha, 1994). Bhabha (1994) says that “post-colonial prerogative consisted in the reinterpreting and rewriting the forms and the effects of an ‘older’ colonial

consciousness from the later experience of the cultural displacement that marks the more recent, postwar histories of the Western metropolis”p249. This newly formed way of thinking is meant to resonate with the participant. It becomes a way of self-expression for the participant.

### *Critical Masculinity*

Present hegemonic masculinity is a colonial concept present in third world (Alipio, 2013; Coleman, 1998; Odhiambo, 2007; Rubio and green, 2009). Current hegemonic masculinity emanated from changes brought about by changes in economic regime, culminating in capitalism (Gillis, 1995; Oyewumi, 2006). Capitalism has played a role in the creation and sustenance of masculinity. In Canada, white hegemonic masculinity presents itself as the superior over other forms of masculinity (Coleman, 1998; Parada, 2012). There is an expectation that other forms of masculinity should strive to mirror white hegemonic masculinity. Having understood masculine identity as a colonial construct, this theory creates opportunities to engage in unmasking the concept. Hegemonic masculinity defines how and what men need to do and behave within a given society (Coleman, 1998; Doherty, 1964; Hall, 1997; Nzioka,2001; Odhiambo, 2007; Rubio & Green 2009). To go against these set down guidelines, one is deemed a social deviant. It takes energy to explain and rationalise your deviancy toward your ‘unbecoming’ behaviour and performances (Connell, 1995, 2000; Connell & Messerschmidt, 2005; Lamont, 2000; Moffatt,2004; Parada, 2012).

Parada(2012) says that we should look at economic processes as areas that bring forth identity formation in terms of being male or female. Neoliberalism as process can thus be seen as a colonial vestige that continues to sustain masculine discourse. This is very common within the Live-In Caregiver Program, where policies and expectations of the society are geared toward making man not undertake paid caregiving. Through this theory, masculinity within the context of transnational movement takes a temporal and contingent tangent (Coleman, 1998). Masculinity as a concept becomes theorised as fluid and ever changing. This theory is important in explaining consequences of globalisation to masculinity from the standpoint of caregiving.

#### *Masculinity as Governmentality*

Masculinity is a social construction that depicts differential practices, characteristics, roles, beliefs between men and women and within men themselves (Brittan, 1989; Carrigan, Connell,& Lee, 1985; Coleman, 1998; Collinson & Hearn, 1994; Hall, 1997; McGuffey & Rich, 1999). The discourse of hegemonic masculinity places men and women within a clear set of roles and responsibilities. One who Fails to follow these binaries, is conceived as abnormal, hence punished or ridiculed (Mahalik, Lagan & Morrison, 2006; Parada, 2012; Russell, 2007). Masculinity has been applied as a technology to police social beings (Coleman, 1998). Everyone has to work toward achieving the set standards to be recognised as normal within the masculine culture (Foucault, 1980; Parada, 2012; Rubio & Green, 2009). Men and women thus become a tool to monitor their own self so as to fit within a preconceived gender identity as perceived by

masculinity. As a consequence, men are more likely than women to try to measure up to masculine beliefs (Bird, 2003; Mahalik, Lagan & Morrison, 2006; Ridgeway, 1997).

To that end, masculine policing becomes a technology meant to exercise power efficiently, effectively, constantly, unverifiably and consistently on men (Foucault, 1980; Moffatt, 1999). This masculine power technology is meant to be economical yet intrusive. It creates a lot of stress for male live-in caregivers, which can lead to low self-esteem, substance abuse, higher levels of anger as well as psychological disorders (Hayes & Mahalik, 2000). When one fails to screen oneself, the society take over the act of invigilating that person (Coleman, 1998; Kirsi, Hervonen & Jylhä, 2000; West & Zimmerman, 1987). Cultural beliefs and customs become the conduit for creating and maintaining masculine identity.

## **Literature**

### **Caregiving**

#### *Live-in Caregiving Program*

Literature informs us that initially white women from the Western and Eastern Europe used to undertake live-in caregiving in Canada. (Brickner & Straehle, 2010; Khan, 2009). Being a European live-in caregiver brought with it some privileges and prestige (Galabuzi, 2006; Khan, 2009). The European nannies would get Canadian citizenship by getting married to Canadian bachelors. The literature tells us that they had few chores and responsibilities compared to the latter live-in caregivers (Khan, 2009).

Caribbean women were the first racialised group to take over paid caring from white nannies through a program dubbed Caribbean Domestic Scheme (Brickner & Straehle, 2010;

Khan, 2009). Before being accepted by an employer, they had to undergo disease and pregnancy tests measures meant to protect the white Canadian society. These women faced a lot of oppression in the hands of their employers.

Currently, the Philippines is the major provider of live-in caregivers globally, equivalent to 95% of caregivers (Alipio, 2013; Kalaw & Gross, 2010; Khan, 2009; Lindio-McGovern, 2003; Portilla, 2010; Tubo, 2010). The World Bank ranked the Philippines as ninth migrant sending countries in the world (World Bank, 2011). Literature on live-in caregiving by Filipino women can be connected to issues of race and modern slavery present in neoliberal capitalist regime (Galabuzi, 2006; Khan, 2009; Lindio-McGovern, 2004). Many Filipinos continue to face economic challenges due to global economic upheavals coupled with Structural Adjustment Programs (SAPs) introduced by the Bretton Wood Institutions (Lindio-McGovern, 2004). The only alternative for them is to move to Canada where they believe they can have a better life. Most of them end up taking caregiving jobs. The uprooting of Filipinos from their land to work in precarious labour as caregivers in Canada can be equated to modern day slavery.

Initially, live-in caregivers from the Philippines were denied permanent residence. This prompted human rights advocacy groups to seek redress from the federal government (Khan, 2009), which led to the restoration of permanent residency within the caregiving program by the Canadian government. This culminated in the formation of Foreign Domestic Movement (FDM)

which would later be called Live-in Caregiver Program (LCP) in 1991 (Brickner& Straehle, 2010; Khan, 2009).

The change from Foreign Domestic Movement (FDM) to Live-in Caregiver program had fundamental effects on the roles and responsibilities and subsequent oppression of the live-in caregivers. In the live-in caregiver program, live-in caregivers were supposed to work for one employer for a period of two years, after which they would get their Canadian permanent residency (Brickner& Straehle, 2010; Khan, 2009). They were supposed to live in the employer's house. This was a great move by the federal government, but it also allowed oppression to thrive within the Live in Caregiver Program (Brickner & Straehle, 2010; Khan, 2009). Literature on the oppression of live-in caregivers depicts sexual and physical abuse, labour exploitation, dismissal from work and final deportation to their home countries as major areas of contention (Brickner & Straehle, 2010;Khan, 2009; Magkaisa Centre, 2008; Stiell & England, 2011;Tubo, 2010; Walia, 2010;Zaman, 2004). Payment for their service was not commensurate with their work. Sometimes they work overtime yet they did not receive pay for the extra work done. There have been cases of women being sexually and physically abused by their employer

Under the new program, live-in caregivers are supposed to not only take care of children but also look after elders and disabled people within the employer's house (Brickner& Straehle, 2010). They work beyond the statutory number of hours yet are not well compensated. If they wish to visit friend, they have to be accompanied by their employer. They also have to live

within the employer's house (Khan, 2009; Lindio-McGovern, 2004). This strains their privacy and mobility. Galabuzi (2006) describes this as discrimination based on mobility and payment of the service rendered to the employer by the live-in caregiver. Galabuzi says that racialised Filipino live-in caregivers women are "ghettoized in private domestic service" p.52. To him, this is exclusionary discrimination.

Caregivers cannot sue the employer; otherwise they lose their employment and suffer the consequences of deportation. This dims the dream of getting Canadian citizenship (Brickner& Straehle, 2010). Most of these women caregivers toil in these situations hoping that one day they will bring their families to Canada to live a better life (Alipio, 2013).

According to Brickner& Straehle (2010)

*... in so far as policy makers focus simply on the work and membership aspect of the LCP, they neglect the gendered conditions of labour that structure caregiving work in the context of the LCP in Canada. This is surprising given that CIC has embraced the need for a gender-based analysis (GBA) of the LCP (p.310)*

This normalises live- in caregiving as women's work and ultimately marginalises men who may want to undertake paid live-in caregiving. Live-in caregiver policy stereotypes and maintains the discourse of a feminised live-in caregiving program. This policy mechanism becomes a technology for surveying the male live-in caregivers so that they can fit within a desired and normalised gender performance.

Even though live-in caregivers face these oppressive circumstances, they can still afford to be resilient. This is seen by the way these women overcome their adversity, all in the name of



survival (Lindio-McGovern, 2004). The literature is silent on the resistance and agency of live-in caregiver while providing care services to their employers. This gap in the literature will be ‘filled up’ through centering the voices of strength, resiliency and agency by the paid Filipino male live-in caregiver in Toronto. This will be visible through the diverse narratives of paid male Filipino live-in caregivers on how they interrupt hegemonic masculinity. Through masculine discourse, society is made to believe that these gender demarcations are natural and not socially constructed (Coleman, 1998; Pessar & Mahler, 2003).

McKay (2011) and Alipio (2013) say that respect was an important way of acting out masculinity. Filipino men would display their machismo through their earnings, leadership, self-discipline, ability to abstain sexually and ability to create fear. This Filipino cultural masculinity allowed men to ‘take control’ even in times of problems. To be a respected Filipino man, one has to exude rationality and composure of reassurance to those who are ‘under’ his protection. This is something that a Filipino man has to grapple with constantly and consistently.

Available literature on masculinity and caregiving features how men rationalise their masculinity while providing care in their households. Fathers, sons and husbands have devised ways of maintaining their masculinity as they provide care to their loved ones (Bird, 2003; Brandth & Kvande, 1998; Calasanti & Bowen, 2006; Calasanti & King, 2007; Campbell & Carol, 2007; Evan, 2011; Gallo, 2006; Gerstel & Gallagher, 2001; Hirsh & Newman, 1994; Kirsi, Hervonen & Jylha, 2000; Kramer, 2000; Robinson, 1979; Russell, 2004, 2007; Thompson, 2002).

Fathers, sons and husbands say that their caring is allowable since it is within the family. Through invoking affinity in caregiving, men are able to sidestep masculinity (Brandth & Kvande, 1998; Calasanti, 1998). By providing unpaid care, men have a reason to re-assert their masculinity within caregiving sector. This is because private feminine space is supposed to be unpaid. This new form of thinking allows men to do their caring without any ramification from society. In the literature, men invoke strength as one form of masculinising their kind of care (Calasanti, 1998). They also brought their experiences from the military into the care of their families, to assert rationality, strength and non-emotionality of their care (Calasanti & Bowen 2006, Calasanti & King 2007).

Some fathers, with the help of their wives, brought a new way of understanding masculinity (Acker, 1990; Martin, 1985; Ridgeway, 1997; Williams, 1992) . When taking care of their children, men would bring them to public spaces like parks and their work places. While the men were out with their children, their wives would be left behind doing private house chores. This would be done with the support of their wives, who would claim that fathers were better caregivers than them (Brandth & Kvande 1998). This hieratical positioning of care allowed glorification of men in caring while simultaneously relegating the woman to the private space (Bird, 2003; Martin & Harkreader, 1993; Williams, 1995).

Men would also be used in re-writing masculine texts within the public space. By taking the children to public space, men would be able to masculize their care while simultaneously

troubling the private-public gender divide. This time the world would become the home. The public would be invaded by the private. Spivak encourages us to interrupt the private and public schisms. It is a way of dismantling fundamentalism present within masculine discourse.

Men have to constantly justify their care so that they can be accepted in their society. Male caregivers have to constantly explain why they are doing feminine work. Parada (2012) says that we need to “reconsider troubling social relations that allow the social construction of macho-ness to further marginalise immigrant men” p.24. This depiction of a Filipino man as macho (McKay, 2011) is surveillance disguised. This mode of policing makes it impossible for men to provide paid caregiving. Employers are more careful of employing men as care providers. This is because of the construction of man as non- emotional, hence not the right candidate for the job. A male caregiver has to be careful when touching care receivers due to sexualised nature of man’s touch.

Parada (2012) says that his

*naming by white Canadian males of my brown body as loud, posturing, intense, and 'high performance' recreates me as a macho Latino man who is deviant and deserving objection (p.35)*

Through depicting the Filipino man as macho, it is easy to define what he needs to do while shaming him if he fails to live up to the expected masculine caricature. This is done through sexualising the male touch as well as through making him jobless. This creates a dissonance to

the Filipino male live-in caregiver who has to cut a new masculine niche in Toronto (Coleman, 1998). He always has to explain why they are doing paid care.

#### *Paid male caregiver*

The available literature on paid male caregiving is associated with nurses and daycare men; and shows how they try to reconcile their masculinity with paid caregiving. Paid male caregivers are constantly and consistently reminded of their unsuitability for caregiving by their women folks (Best, 2001; Kirsi, Hervonen & Jylhä, 2000; West & Zimmerman, 1987); this allows upward mobility for the male caregivers while at the same time squeezing them out of caregiving professions (Bird, 2003; Ely and Meyerson, 2000; Evans, 2011; Martin, 2001; Ridgeway, 1997; Robinson, 1979; Stielle & England, 2011). Consequently, this enables masculinity to be enhanced and maintained by privileging some (men) while dis-proportionally disempowering others (women and some men) (Bird, 2003).

There is research gap on paid Filipino male live-in caregivers in Canada. Many of the available studies have largely reinstated that caregiving is female-oriented (Gerstel & Gallagher 2001). This leaves no consideration for Filipino man as paid live-in caregiver; and consequently silences their voices. When caregiving is paid; a man loses his 'machismo' (Parada, 2012). There is more ridicule from the standpoint of cultural masculinity when a man is found to be involved in paid live-in care giving (Mahalik, Lagan & Morrison, 2006; West & Zimmerman, 1987). Men who provide paid care have to juggle a few concerns. Among them is

payment of what is considered as private feminine work. Then, they have to explain why they are doing feminine work.

Due to these underlying masculine issues, Filipino male live-in caregivers continue to maintain silence on the kind of work that they do. This could be construed as being complicit and earning dividends of masculinity (Parada, 2012). One would also argue that maybe they do not want to be identified (West & Zimmerman, 1987).

### *Touch and Caregiving*

Men may join caregiving out of necessity or choice (Levine 2004). Studies on caregiving claim that men achieve more benefits when they provide care (Davidson, Arber & Ginn, 2000; Laditka & Pappas-Rogich, 2001; Thompson, 2002 ). According to Campbell and Carroll (2007), “male caregivers experience strong emotions” p. 500. However, since caregiving is highly connected to ‘touching’, it becomes a big problem for men to attend to care receivers. This is because male touching has historically been sexualised (Evan, 2011).

Russell (2004) says that

*although scholarship on men and masculinities continues to expand beyond sex-role socialization perspectives and traditional notions of patriarchy, the gendered experiences of many groups of men remain marginalized in gender studies by the hierarchies of masculinities (p. 121)*

The marginalisation of paid male caregivers continues to persist (Kramer, 2002; Russell, 2007); this negatively negatively studies and subsequent policies that inform the experiences of male live-in caregivers. Due to lack of representation in both research and policies and subsequent

static masculine culture, male caregivers have to adopt diverse ways to explain their presence within a female dominated profession (Brandth & Kvande, 1998; Hirsch & Newman, 1994). Among the many ways in which men rationalise their masculinity while providing care is silence. Moffatt (2004) informs us that silence and denial are grounds for growth and mushrooming of cultural masculinity. This growth helps with maintenance of social inequality. Silence is a subtle means of sustaining hegemonic masculinity; whereby even men who do not conform to the norm continue to sustain and maintain the non-displacement of masculinity (Campbell & Carroll, 2007).

Individual dissimilarity is silenced by placing men as one group that fits a common definition of masculinity (Coleman, 1998; Collinson & Hearn, 1994). This has a great effect on socio-economic relations when men choose careers. Men have historically avoided those professions that are deemed feminine. Therefore, you find very few men in social work, nursing and other caring sectors. Men are constituted to fit within a static gender role that denies them ability to realise that which lies 'beyond and between' interstices of gender groupings (Spivak, 1996).

#### *Masculine Identity and Border Crossing*

The fluidity of masculine identity within the transnational movement of social bodies has brought theorising within the caregiving sector to a new horizon (Coleman, 1998). According to Parada(2012) immigrant masculinity occupies a temporal space. Masculinity has taken up a fluid

position, such that each social or geographical space calls for a different form of masculinity (Coleman, 1998). According to Rubio and Green, (2009), masculinities that run counter to hegemonic masculinity “account for variations in the male role according to age, culture, race, ethnic group, social class, sexual orientation, life stage, marital status, and historical era” p. 61. Through this, we learn that masculinity is an ever changing terminology in the metro-pole.

### *Challenging Masculinity*

A certain percentage of men in care provision believe that caregiving is part of who they are, which is in tandem with changing times. This current crop of men are against cultural masculinity were brought up by single women or without father figures, a scenario that was created by capitalism’s identification of man as a great provider (Odhiambo, 2007). Men left their families and forgot their roles as fathers. Odhiambo (2007) says that after independence, men took positions of power left by the coloniser in all literal mean. Women were left in their homes (rural areas) taking care of children, as men went to town to look for the family ‘bread’. In town, they would get involved in sexual escapades and drinking beer while forgetting the plight of their families.

The absence of father figure was a fertile ground for overcoming and deconstructing masculinity based on what young boys saw from their fathers as well as what they learned from their mothers. This challenging of masculinity reconstructed what had historically been defined

as masculine territory. This scenario coupled with transnational border crossing of cultures is a big challenge for the survival of masculinity.

In the same breath, there is no research tied to transnational men who do paid domestic work Canada. There is no literature that depicts how these men negotiate their multifaceted identity within a cloud of masculinity while in Canada. This research wants to fill up that gap by putting the role of Filipino male live-in caregivers into the research platform hence adding their voices into the discourse of gender theorising.

Within the male caregiving literature, identity was the major theme, with masculinity as an identity featured in most literature. Most men had to rationalise their masculine identity when they provide care to their loved one. Masculine identity would become more complicated when men provided paid caregiving as nurses or day care worker. The other theme was representation of their identity when they provide care to their loved one. For the caregiving Filipino women, resiliency, agency and love were the main themes. On the whole, many of the Filipino live-in caregivers were depicted as resilient because of how they were able to overcome adversities- a theme explored in depth in this study.



### CHAPTER 3. METHODOLOGY AND STUDY DESIGN

#### *Method*

This study is qualitative narrative research meant to understand various ways paid Filipino male live-in caregivers negotiate masculinity in Toronto. The study employed semi-structured narrative interview questions. The research question is; *How do paid Filipino male live-in caregiver navigate masculinity?* The interviews were in form of stories/narratives from the participants. A narrative could consist of short or long stories explaining events and happenings in one's life (Chase in N. Denzin & Y. Lincoln, 2005, p. 652). A narrative study is a conversation between a participant and the researcher geared toward creating new forms of thinking and practice. Narrative research is a way of re-presenting marginalised stories through the voices of the colonised, meant to trouble colonising totalising theories. This re-presenting helps in showcasing the subjugated epistemologies of the colonised (Bhabha 1994; Coleman, 1998; Dei, 2006; Foucault 1980; Spivak, 1996).

Fraser (2004) tells us that we tell stories to others; as a form of expressing emotions yet creating a state of agency and resistance against the totalising liturgies. Fraser (2004) and Creswell (2013) say that narrative interviews bring forth hidden or subordinated knowledge (Foucault, 1980). The stories told by participants question and disturb the held-for-granted ideas and notions that inform the national or modern discourse, history and culture. This enables the paid Filipino male live-in caregivers to tell and re-write stories based on their own lived

experiences. These subjugates knowledge may question the official accounts thus establishing new ways of knowing, that resonate more with people's lives. This can only happen if stories are seen as political.

The narrative approach challenges the taken-for-granted ideas. Narrative study interrogates why and how events are storied. Through narrative approach, there is plurality of truths. This allows for an understanding of discussions in groups. Hence inclination of expertise is subdued, which helps stimulate different kinds of discussion and knowledge production (Frazer 2004). The narrative approach validates the stories told by the research participants. Narrative method may help in democratizing the professional relationships between a researcher and the 'researched'

In narrative study, telling and retelling of stories by participants takes a temporal stand, such that today's ideas, notions, sentences become prone to change. This happens when the teller (participant) takes an outsider position to the sentence, allowing the story to stand on its own and inviting other stories to challenge its authenticity (Bhabha, 1994). The narrator is now free to identify the gaps present in his own story and sentence and accept other ways of knowing as valid.

The study employed the snowballing technique as a method of recruitment. The researcher used informal groups to recruit participants. Filipino community in Toronto organizes family, spiritual, cultural celebrations every week. The researcher attended these informal gatherings to look for participants. The researcher individually asked his networks whether they knew of any Filipino man who was doing paid live-in caregiving. If anyone within his networks knew a Filipino male live-in caregiver, the researcher gave that person a flier. The flier had the researcher's contact address on it and was supposed to be given to the potential research participant as an invitation to join this study. If he agreed to take part in this research, he contacted the researcher through the contact address provided on the flier.

The researcher briefed participants on their rights and responsibilities. He also informed the research participants that they had the option of not answering question, opting out of the research without consequences or withdrawing their data. If the participants felt that they could continue with the research, the researcher then invited them to the study. Participants were then provided with a written consent to sign after which the research commenced. After getting one participant, the researcher asked him whether or not he knew another man who was doing live-in caregiving. If he did, the researcher provided that participant with a flier that was supposed to be given to the new participant and the process of briefing commenced.

One reason for using the snowballing recruitment method was that there is scarcity of paid Filipino male live-in caregivers in Toronto. The other reason is that Filipino paid male live-

in caregivers do not want to be identified based on the social stigma associated with their feminized work (West & Zimmerman, 1987).

Data was collected using semi structured narrative interviews. While collecting data, the researcher used voice-recorder and took notes to gathered information from research participants. Due to social risk brought about by social construction of participant's work as feminized labor, the researcher conducted individualized narrative interviews (Bird, 2003; Cockburn, 1991, 83; Pierce, 1995 Roper, 1994; Weiss, 1990). The researcher personally transcribed and coded the data collected.

#### *Sample*

The researcher interviewed three paid Filipino male live-in caregivers in Toronto. The participants were supposed to be Filipinos who were living and working in the employer's house or had done so in the past. The participants were supposed to have been paid or were being paid by an employer for caregiving services. The age of the participants was between 18-60 years. The participants were supposed to be living in Toronto.

The qualitative narrative approach was employed in analyzing data. The data was transcribed immediately after the interview. This was meant to maintain the emotional and contextual content of the raw data. Later, the researcher sent the transcribed data to the participants for authentication. Files were later created from the transcribed data. The researcher read through the participant's data; and made some side notes as well as creating codes. The

research open coded the data using the words from the participants as themes. The open codes were later compiled to form axial codes. The themes brought about by codes came out of actual words used by the participants. The researcher chronologically described each participant's narrative bringing forth their experiences. In the classification phase, the researcher identified participant's stories as well as located epiphanies (Creswell, 2013). The investigator identified the contextual materials. To interpret the data, the investigator connected personal stories to the larger masculine discourse. Within the representation section, the researcher presented the stories and focused on processes, theories and unique as well as the general features of the participant's life. Later, the researcher sent the analyzed data to the participant for authentication.

## CHAPTER 4. FINDINGS

After doing narrative interviews with paid Filipino male live-in caregivers in Toronto, a couple of issue came up. For instance, there were some vital reasons as to why they had chosen this kind of work. Stepping stone, culture and payment were each seen as an impetus for being a paid male live-in caregiver.

### *Stepping Stone*

There was an agreement among them that they got into caregiving because they wanted better opportunities in Canada. Jackson (not real name) said:

*Coming from a good professional work at home and also I have done some work and experience in Saudi Arabia, I was looking for a continuation of my career as a physiotherapist, but this challenged me ..you know to seek for greener pasture. I know my first intention was to penetrate the United States. So instead of me continuing as a physiotherapist, I had to step aside my goal because this was the only way for me to get an upgrade or some licensing to become a physiotherapist. So it is a stepping stone for me and I try my best to be polite and a good worker as a caregiver.*

Peter(not real name) said that being a caregiver is a stepping stone to better opportunities in the West for most Filipinos. He noted:

*Maybe because it is like a stepping stone for Filipino people; but the main reason for Filipino people is security for the future. As a stepping stone, it is very easy to come here through .....caregiving job. The main reason for Filipinos doing care is because it is like a stepping stone. I know that. After you get landed, you can do whatever you want.... You can go to school to pursue your degree..your career..yes.*

His sentiments were also echoed by Jeff (not real name) who said:

*Because my sister was here and the opportunities here are better than in the Philippines. In the Philippines, I worked for two years and I did not have any money in the bank. It was like I a very low salary in the Philippines. So I decided to come here because my sister encouraged me to come here for greater opportunities*

When I asked Jeff whether he could do unpaid live-in caregiving he said “no”. In contrast both Peter and Jackson seemed to agree that they loved their caregiving job. Jackson called caregiving decent work.

Peter seemed very close and connected to his service receiver. He kept referring to his service receiver as “my kid”. I asked him why. He said:

*Because since I left in November 29<sup>th</sup>, the mom brought him to a group home for two months. This is because I had gone to the Philippines for two months. And then only last Thursday, we took him from the group home to bring him home. And then when he saw me he was very happy and smiling. But before that, you could not see Jack (not real name) like that. I love him because my kid (care-receiver) is very very..he does not hit anybody but he has some tantrums and then when I saw the bruise in his head because he had hit the wall in the group home, I felt like ohhh my God what is happening to him? Yes.. I cried for that. Even my employer saw me doing that. Because I felt upset with myself because I had gone to the Philippines. I am very connected to him*

### **Culture**

Filipino culture was a main determinant of whether one could do caregiving. Peter said:

*"I really like to take care of old people because that is the culture of Filipino..to take care of the older people".*

Jackson said that sometimes Filipino culture can constrain giving care. He said: *“reason for that would be ...you know they are always thinking of sexual immorality and gender difference . I think it would not be accepted in the culture. The norm would not be men taking care of women.”*

### **Trust and gender**

Jackson said that there was minimal trust from employer when it came to male live-in caregivers. He said:

*It is really really hard for me to get somebody to sponsor me. It is only here in Toronto where there are some patients or family who trust men to take care of their loved ones. Mostly they will look for a female caregiver.*

This could have been because most employers are scared of men taking care of their family based on how male caring has been sexualised. Jackson said:

*The reason for that would be ..you know they are always thinking of sexual immorality and gender difference . I think it would not be accepted in the culture. The norm would not be men taking care of women. Which is absolutely true, because we all know that we respect ladies . We have that..you know. Probably you are aware of some sexual accusations against the men. I think that it is permissible for us to continue with the same norm that men should be limited to work(ing) with men, but if certain cases like ....the women cannot take over full responsibility to a duty to provide the same care ... probably as a family we should consider men as well in conjunction with female caregiver. I mean they should be combined rather than a sole male caregiver working with the female. Especially with the tasks related to lifting, or cleaning or some other stuff. With the activities of daily living especially self-care you know washing them, bathing them; I think that women should be in that position.*

This creates a gender division of labour where men and women do different kinds of work in

caring. This becomes essentialised based on strength and construction of man as untrustworthy.

According to Jackson:

*What happened was that I just needed to help him with some of..you know...we call it instrumental ABLs , in driving, some errands in the house that he cannot perform . Some self-care he could do it..That is the basic ABLs. Bathing he does it on his own. The man lives with his wife. Basically I do some housekeeping. It was light because I had some lady caregiver..but the lady comes in to finish up all those other errands like washing clothes, laundry , ironing and all that stuff. So, I used to drive them to their doctors appointment and because that gentleman is..even if he is.... past 65 years old, he still works in his company. So I am guiding him and driving him and some stuff for his medical appointment.*

### **Support**

Most of the participants seemed to be supported and respected by their employer. Jackson said:

*I showed how compassionate Filipinos are in giving such service. I was able to complete the caregiver program without any hesitation and my employer was really happy and they really support me after I was done with my program as a caregiver ..they really support me today. They are in contact with me and they were saying that keep it up and if you have any problem*



*financially or any support you need, we are here. So, I think that I am very blessed to become a good worker as well. They were very fair couples and they abide to the rules that the Canadian government has set for people who are hiring caregiver. I started with a very low caregiver fee and then they increased for me every year. I think am very blessed that financially they were able to pay me more than other caregivers are receiving; and with a lighter type of work.*

Peter said:

*But before when I worked for her just for a couple of months, she did not pay the extra. But I asked her... Did you know our contract is only for 40 hours, but I work more than 50 and you did not pay? I think she gave me only 80 for those extra hours. I told her that I am not happy about that. And she paid. Right now she pays.*

Peter could also negotiate many work issues without any problem or hesitation. He said

*And then we talk. Because before I kept the job, I asked her whether she will take Jack to group home when he turns 18. Because that's the rule. I told her that if Jack reach 18 we cannot talk again. So I gave my condition and she gave her condition to me and then we agree about that. Maybe starting next week, am gonna work night shift; and then somebody from the government will go to her home from 2:30 to 9. Then I work for only four weeks.*

Even though he would negotiate for some issues, Peter would sometimes face problems

with the employer on when to go out. He would be reminded that he is a live-in caregiver

*The problem that I encounter from my employer right now is she is a female and she does not understand what I mean. For example I want to go out for ...you know like a party. But she tells me that you need to live here because you are a live-in. That's the only thing.*

The other two participants did not face the same issue with their employers.

## **CHAPTER 5. ANALYSIS**

Filipino masculinity is facing numerous challenges due to free movement of Filipino men through the porous national borders. For survival purposes, Filipino male live-in caregivers have to trouble their masculine identity. This allows them to challenge and re-represent the once held-for-granted masculinity in Toronto. Their situations opens up new possibilities for social work practices and research on the plight of paid Filipino male live-in caregiver. Spivak (1996) says that we should walk two worlds in order to understand what lies ‘between and beyond’ a discourse. This idealism can help understand how globalisation and its resultant masculinities can be employed for the betterment of paid Filipino male live-in caregivers.

As social bodies cross nation borders, there is greater reformation and transformation from cultural beliefs. Back in the Philippines, they exude a masculine self through their profession as well as feminine self through caring for their family. But since there is lack of better paying masculine professions in the Philippines, they opt to seek greener pasture in Toronto. To achieve their dream and goal in Toronto, they have to undertake live-in caregiving work which is considered feminine. Consequently, they have to downplay their masculinity and bring forth their Filipino male ‘feminine’ self. This is because Canadian society denies them better profession that could help them display their masculinity.

In Toronto, we envision a ‘third space’ in terms of the way masculinity undergoes temporal changes (Coleman, 1998). Masculinity become like a pendulum where Filipino male

live-in caregivers identities swing from less masculine to more masculine based on prevailing circumstances. The space allows interplay of diverse identities of paid Filipino male live-in caregiver. When paid Filipino male live-in caregivers display their masculinities, normal discourses are troubled and new forms of practices are freed and allowed to blossom. This 'space' allows resistance against oppression and repression brought about by cultural masculinity. Subjugated voices are reclaimed and given positions to challenge totalising knowledge (Foucault 1980) on masculinity allowing multiple ways of knowing and practising. According to participants, they had to do caring work because that was the way to better their life. This allowed them to display their caring self which they asserted was their culture.

Masculinity as a concept needs to be seen as fluid and hybrid more so in transnational movements of an economic Filipino live-in caregiving man (Coleman, 1998; Pessar & Mahler 2003; Russell, 2007). It should also be noted that these "hybrid identities may also intersect with other forms(race, sexual orientation, ability, class) and are disconnected from the essential notion of belonging to a particular nation or particular space" (Parada,2012 p.24). 'Male' culture becomes a state of temporality (Coleman, 1998). We encounter this scenario with the paid Filipino male live-in caregivers whereby their masculinity becomes subjugated by the white masculinity in Toronto. The economic system denies them better jobs that can help them showcase their Filipino masculinity in Toronto. As a consequence, they subjugate their

masculinity provisionally, while seeking masculine careers and professions as explained by participants.

Filipino male live-in caregivers have to downplay their cultural masculinity temporarily in order to survive and overcome detrimental effect of globalization in the Philippine (Lindio-McGovern, 2004). For this study, global movements as well as future career opportunities seemed to subdue the strength of Filipino masculinity. When asked why they chose to take up paid caregiving, all participants agreed that they wanted to achieve their dream financially and career-wise.

Most of the participants had good professions in the Philippines even though the pay was low. Some said that they could not save enough money in those professions while in the Philippines. Most of the professions that they held in the Philippines were masculine. Even though one participant was a physiotherapist, his duties were more masculine. What this study can conclude is that the participants were also ready to exchange this masculine profession for 'better opportunities' in Canada. It should be noted that even though they wanted to shelf their masculine profession, they seemed to look back at their former professions with admiration.

Coleman (1998) says that as much as the migrant cultural masculinity undergoes cultural refraction,

*migrant narrative does more than this. It also situates the ideologies of a given masculinity in what we call, after Foucault, a specific discursive and historical genealogy. Because the migrant man moves physically from one geo-cultural location to another, his narrative emphasizes in spatial and temporal, as well as social and political,*

*terms the uneven history of his masculine subjectivity. His story delineates the continuous, though distorted, trajectory of a specific practice of manhood (p.7 )*

One of the participant said “They were calling me sir back home and now I am the one calling someone else sir. It is really the opposite”. This shows that if the participants were paid well in their professions while in the Philippines, they might have stayed there.

Most of the third world countries have been impoverished by the new economic order, leading men like these participants to take on new roles. The Philippines, just like all third world countries, continue to bear the brunt of Britton Wood Institution policies (Lindio-McGovern, 2004). Most Filipinos have to seek other ways to earn a living, having lost their jobs in the Philippine. This forces most people to head to Canada in search of the evasive ‘Canadian dream’. Caregiving happens to be the key to unlock the Western borders. This can be equated to modern slavery. Slavery uproots people from their ancestral homes to work for someone else with minimal or no pay. This is what happens with Filipino male live-in caregivers in Toronto. They have to seek better opportunities elsewhere. Global economic imbalance becomes the impetus meant to transport paid male Filipino live-in caregivers to Canada.

After arriving in Canada, they have to work to overcome their masculinity in order to stay alive. This is because they are faced with their masculine Filipino culture that determines what to do and not to do (Alipio, 2013). Men will always rationalize their care so that they can fit within their masculine society. Among the tools that men employed in care was strength. Strength was used to divide labor such that Filipino male live-in caregiver would do more masculine chores

like driving and using scientific instruments, while the female counterpart would take up feminine work. One of the participant also suggested that employers should take a man and woman as live-in caregivers. This was to enable men to do more masculine work like lifting while the women undertook feminine work like cleaning the care-receiver. The reason given by the participant was that men cannot do that based on the sexualized nature of male touch.

Most participants would also look back at what they used to do in the Philippines. To compensate for that, most participants were preparing themselves to go back to school after their two year stay as live-in caregiver. They seemed to prefer the more masculine professions like engineering for their future careers so that they could be seen as manly. Most of the participant created an impression that they were doing caregiving as a stepping stone to future masculine profession. This is because the paid Filipino male live-in caregiver felt uncomfortable with their caring work.

What comes out of this study is that hegemonic masculinity still governs paid Filipino male live-in caregivers. Even though the participants were doing caring work, masculine control would lead them to look back at their former masculine professional status with admiration. Thus, it seemed that male Filipino live-in caregivers will always look for other masculine professions in order to maintain their masculinity as described by the participants. Through this, we learn that identity is subjective, even more so when the social bodies are in transnational movement to new territories. Any role that men play is theatrical in nature in sense that we

perform our gender as situation requires (Campbell & Carroll 2007, Coleman, 1998). What may have been static becomes fluid through time, circumstances and space.

To assert this point, Pessar (2003) says that

*multiple dimensions of identity also shape, discipline, and position people and the ways they think and act. We imagine a social location continuum from most disadvantaged to most privileged and locate people in different sites along it, roughly identifying the places and predicaments from which they may take action. Social locations must be viewed as fluid, not fixed, for people's social locations can and usually do shift over time (pg.816).*

Therefore, Filipino masculinity undergoes cultural refraction allowing different changes in its formation. This is common in post-colonial transnational Filipino male live-in caregivers' ways of male cultural construction while in Toronto. Due to intense border crossing, many Filipino men find themselves going beyond their national borders in search of employment. While in Toronto, they consciously or unconsciously reformulate their masculine identity to allow their survival and thus 'resist' mainstream social constructions (Coleman, 1998; Walcott, 2006).

In this study, authenticity of theories in analysing the experiences of the Filipino male live-in caregiver was imperative. Post-coloniality claims that identity is not fixed. What happens when the Filipino male live-in caregiver opts to circumvent masculinity for survival purpose and then revert back or admire his former masculine self? I would agree that Filipino masculine identity undergoes a change in the 'beyond'. But then that identity change is temporal (stepping stone) waiting for an opportunity to go back to older masculine self. Though this argument is sufficient, one cannot fail to recognise the effects of a two-year caregiving period on Filipino

masculinity among this study's participants. This argument is based on the responses of two participants who seemed ready to continue doing live-in caregiving. What we pick up from this is that as much as the male Filipino male live-in caregivers were governed by masculinity, they too intercept its effects on them.

All the paid Filipino male live-in caregivers seemed to negotiate their positions with their employers. They were able to receive pay raises as well as bonuses. They were also able to negotiate what they could do and what they could not do. In cases where they went beyond the legal working hours, they would ask for extra pay from their employer without hesitation, unlike their female counterparts. Being paid Filipino male live-in caregiver allows one to harvest dividend from hegemonic masculinity even within the caregiving places. Participants were not worried about the repercussion of asking or negotiating with the employer. This is because the society has created an impression that men are entitled bodies; therefore they can access whatever resource they need without any problem. Given the fact that they were doing this work, the employer also felt pity for them. To compensate for this, they would become more generous and offer them more than their female counterparts.

Hegemonic masculinity tries to lump men into one general category. This is contrasted by critical masculinity and post-colonials theory; which see temporalities in identities (masculine) and cultures (masculinity) (Bhabha, 1994; Coleman, 1998; Connell, 1995, 2000; Lamont, 2000; Parada, 2012). Critical masculinity maintains that masculinity is like a staircase, where



each stair brings with it new challenges and contradiction for a paid Filipino male live-in caregiver. This is because men have unique experiences that make them identify themselves differently. These identities can only be envisioned if paid Filipino male live-in caregivers provide their diverse stories. Based on participants' narrative interviews, there were conflicting thoughts on how they saw paid caregiving. One participant saw caregiving job as messy while the others saw it as dignified. One of the participants kept referring to his care-receiver as my kid. When I asked him why this was so, he said that he had greater connection to the boy than that of a mere caregiver. He seemed emotional while expressing his feelings for the boy. Masculinity has defined man as a rational and non-emotional being. Though this was manifested in other men, this particular participant contradicted this masculine belief system. This confirms that some men can also be emotional and caring. Since masculinity deters some men from manifesting feminine trait, they are left out of caregiving professions. Instances of Filipino male being denied caregiving jobs in Canada are a common place.

Due to post-colonials' position on cultural representation (Spivak, 1996), social workers become bystanders when aiding and 'helping' Filipino male live-in caregivers from colonial text present in masculine cultures and policies. This allows oppression of Filipino male live-in caregivers by the employers, cultures and policies. Post-colonial theory does not offer a quick fix to social issues that face edged out communities like paid Filipino male live-in caregivers. For these inconsistencies present within post-colonialism; anti-colonialism offers a way forward to

actively question micro and macro oppression found in colonial masculine dogmas. Anti-colonial theory can be important in bringing together different people in engaging actively against oppressive masculine cultures, policies and theories present in the live-in caregiver program.

## CHAPTER 6. CONCLUSION

### *Contribution to Transformative Practice*

Campbell and Carroll (2007) say that occupations like “.... (nursing, social work, librarianship, elementary school teaching) ” (p. 492), are historically dominated by women. Social work just like live-in caregiving profession is an area that is widely associated with women. This research attempt to sheds light on issues faced by men who get involved in feminised labour as well as how they negotiate their identity through space and time. The study tries to understand ways through which masculinity is sustained and maintained through diverse male identity performances. This research showcases some tactics and strategies that the male live-in caregivers apply in order to overcome their discomfort within the feminised labour process.

This study attempts to understand how paid Filipino male live-in caregivers in Toronto interrupt masculinity. Payment is normally associated with public sphere. What happens when the public enters the private sphere? What happens when the home becomes the world? It was therefore imperative to understand the role that payment of caregiving service had to a Filipino male live-in caregiver. The entrance of a man to a space historically associated with women was also important. As indicated men who give care have ways of rationalising their masculinity while providing care.

Through this study, narratives from Filipino male live-in caregivers became important in unravelling our understanding of masculinity. Though we may claim that Filipino male live-in

caregivers are governed by masculinity, they also hold power to govern their masculine identity. Through controlling their masculine identity, they can circumvent masculinity. This masculine disturbance by Filipino male live-in caregiver is for survival purpose. This survival is brought about by the global economic disturbance in the Philippine.

Through this study, post-colonial theory seemed to be under attack. One point of contention was the way it seemed to deny the static identity of paid Filipino live-in caregiver man. Post-coloniality believes in temporalities of identity in the 'beyond'. Through their stories, participants showed a great admiration of their previous masculine professional self. But as much as this was the case, the two years live-in caregiving experience had some effect on the identity of the Filipino male live-in caregivers as portrayed in their narratives. Post-colonial theory seemed to lack a ready answer to the oppression the participants brought about by masculinity present in cultures and policies. For this, anti-colonial offers active resistance as a counter-masculine discourse. This resistance would be possible where there are masses. For post-colonial, there is a need to understand differences within masses. This creates more misunderstanding hence preventing resistance.

This study had very few participants, which means that it cannot represent the stories of all paid Filipino male live-in caregiver. There is a need for future research in this area to have several participants in order to understand the issues that surround Filipino male live-in caregiver. There is need to have a longitudinal study on this topic. Future studies on live-in caregiving should

bring on board the stories from Filipino women live-in caregivers. This will provide a comparative understanding of their experiences and how masculinity plays its role while giving care. We are living in a world that is in transition. Cultures are facing constant disturbance in the metro-pole. There is also a need to undertake research on cultures and their temporalities while in the 'beyond'.

APPENDIX: A  
Research Flier  
Research Participants Needed

Are you a Paid Filipino Live-in Caregiver?

Purpose: I am a Social Work Masters candidate at Ryerson University. My research is on the experiences of paid Filipino male live-in caregivers in Toronto.

To be eligible you should be:

- Between 18-60 years.
- Filipino male.
- Living in Toronto.
- An immigrant from Philippines.
- Working/worked as a live-in caregiver.
- Provided or is providing paid care services to the elderly or /child/children.

Benefits:

This research might help in creating awareness on the plight of Paid Filipino male live-in caregiver. This research is a step toward future research. This research and the future researches may help in bringing forth new policy development geared toward helping you in the future.

Participants will not be compensated.

Contact Email Address: [dnyaga@ryerson.ca](mailto:dnyaga@ryerson.ca)

## APPENDIX:B

### Interview Guide

1. What kind of work were you doing in the Philippines before you came to Canada?
2. What made you apply for live-in caregiving work in Canada?
3. What were reactions from your friends and family after learning what you do here in Canada?
4. For how long have you been working/did you work as a male-live in caregiver ?
5. Explain your experiences in your workplace as a male-live in caregiver
6. Tell me some problems that you face as a male live-in caregiver
7. How do you handle those problems?
8. If you were to go back to the Philippines, would you do this kind of job?

APPENDIX:C  
Consent Form

**CONSENT TO PARTICIPATE IN RESEARCH**

**Disturbing Masculinity within the Caregiving spaces: Praxis from Paid Filipino Male Live-in Caregivers in Toronto**

**You are being invited to participate in a research study. Please read this Consent Form so that you understand what your participation will involve. Before you consent to participate, please ask any questions necessary to be sure you understand what your participation will involve.**

**INVESTIGATOR**

This research is being conducted by: Dionisio Nyaga; Social Work Master student at Ryerson University. This research is being undertaken under the supervision of Dr. Henry Parada - BSW, MSW, PhD, Associate Professor, Ryerson University. This research will contribute to a master's Major Research Paper.

**PURPOSE OF THE STUDY**

To explore the experiences of Paid Filipino Male Live-in caregivers in Toronto.

**DESCRIPTION OF THE STUDY AND YOUR PARTICIPATION**

**If you volunteer to participate in this study, you will be asked to do the following things:**

- Participate in an interview
- Opt to answer or not to answer questions
- Identify the location for the interview(The participant and the researcher will identify the interview location, which could be a public library, a secluded room in Ryerson University or in a community centre.
- May opt to stay for the 2 hour interview session or leave before time.



## **POTENTIAL RISKS AND DISCOMFORTS**

Due to stereotype associated with men doing feminised work, you may become uncomfortable.

To manage this risk, the researcher intends to do individual private interview. You and the researcher shall choose the location for the interview which may be public library, Ryerson private rooms or in a community centre. In case of discomfort, you will be asked to take a break.

In case of discomfort, you can opt to stop the interview temporarily or permanently. You can choose not to answer certain question.

## **POTENTIAL BENEFITS TO PARTICIPANTS AND/OR TO SOCIETY**

This research will help understand the various issues you face as a paid caregiver in Canada.

This research is a step toward future research. This research and the future research may help in bringing forth new policy development geared toward helping you in the future. This research will identify the strengths that you exude while doing your work.

## **COMPENSATION**

You will not be paid to participate

## **CONFIDENTIALITY**

The interview will be done privately by the researcher because of privacy issues. You and the researcher will choose the interview location which maybe in a public library, Ryerson University private room or a community centre. You will be recorded during the interview. After the interview, you will be allowed to listen to the verbatim and you can opt to delete any information that you feel is uncomfortable to you. The data will be stored in a password protected computer for a period of 2 years. The researcher is the only one who will transcribe/analyse the data. The researcher will personally transcribe the data. The transcribed data will be sent back to you for your authentication after which writing of the Master's major research paper will start. During

the writing of the Major Research Paper, codes will be used to identify you. This study will use the snowballing technique of recruitment. This will enhance the protection of your identity. The researcher will edit some of your information in order to hide your identity. Such information will not be included in the final research document.

## **VOLUNTARY PARTICIPATION AND WITHDRAWAL**

**Participation in this study is voluntary. You can choose whether to be in this study or not.**

**If you volunteer to be in this study, you may withdraw at any time without consequences of any kind. If you choose to withdraw from this study you may also choose to withdraw your data from the study. You may also choose not to answer any question(s) and still remain in the study. Your choice of whether or not to participate will not influence your future relations with Ryerson University**

## **QUESTIONS ABOUT THE STUDY**

**If you have any questions about the research now, please ask. If you have questions later about the research, you may contact:**

### **Principal Investigator**

DIONISIO NYAGA

Masters Candidate

School of Social Work

Ryerson University

dnyaga@ryerson.ca

### **Faculty Supervisor**

Dr. HENRY PARADA BSW, MSW, PhD

Associate Professor

Graduate Program Director and Associate Director

School of Social Work

Ryerson University

416-979-5000 ext. 6223 or [hparada@ryerson.ca](mailto:hparada@ryerson.ca)

**This study has been reviewed by the Ryerson University Research Ethics Board. If you have questions regarding your rights as a research participant in this study, please contact:**

Toni Fletcher, Research Ethics Coordinator

Research Ethics Board

Office of the Vice President, Research and Innovation

Ryerson University

350 Victoria Street

Toronto, Ontario M5B 2K3

416-979-5042

toni.fletcher@ryerson.ca

#### **SIGNATURE OF RESEARCH PARTICIPANT**

Your signature below indicates that you have read the information in this agreement and have had a chance to ask any questions you have about the study “[insert title]” as described herein. Your questions have been answered to your satisfaction, and you agree to participate in this study. You have been given a copy of this form.

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**Name of Participant (please print)**

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**Signature of Participant**

**Date**

## **AUDIO RECORDING**

**As part of this project, an audio recording will be made of you during your participation in this research project. You have the right to request that the recording be stopped or erased in full or in part at any time.**

**You have read the above description and give your consent for the use of audio recording as indicated above.**

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**Signature of Participant**

---

**Date**

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