



# Gender or Gendered Demand of Care? Migration Decision-Making Processes of Nepali Care Workers

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## Abstract

The increasing demand for care workers in the global North has spurred the migration of the care workforce, especially of female nurses from the global South. This development is redefining women's roles as breadwinners and the instigators of family migration. However, the migration of nurses from the global South-to-North needs further investigation into how these women are empowered to lead the migration process and the factors that influence the decision. I will explore the roles of migrants' individual skills and competencies along with the demand for care workers in the UK's labour market. This study is based on data from 49 in-depth qualitative interviews with Nepali care workers in the UK and their parents in Nepal. I argue that in the case of the migration of trained nurses from the global South to the North, individual and contextual factors become more important and influential than gender and power relations in the family in the decision-making processes. As a step towards addressing human resource shortages in the health and social care sectors, the UK has recently reached a bilateral agreement with Nepal to recruit Nepali nurses. While the migration of Nepali nurses is likely to increase, empowerment to migrants and adherence to ethical recruitment could be mutually beneficial for participating countries, migrants and their families.

**Keywords** Gender · Migration · Decision-making · Patriarchy · Care work · Nurse · Global North · Global South

## Introduction

Migration from the Global South to fulfil the demands of the care workforce in the Global North has increased over the past decades (Ehrenreich et al., 2003; NNAUK, 2021; Yeates, 2012). Care work in general is racialised and gendered as lower-paid,

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less skilled and menial work meant for migrants, and nursing care and reproductive labour in particular are further feminised as women's work (Yeates, 2012). For participating individuals, however, migration to affluent countries in the global North is seen as an opportunity to improve life chances. In this context, a specific educational and occupational background could facilitate women care workers to move and become a strong determinant in family migration. For instance, studies on Nepali migrant women nurses in the UK show that their families supported them in migrating (Adhikari, 2013, 2020). It not only helped to redefine these women as independent migrants but also as leading instigators of family migration. Earlier studies establish men's sociodemographic characteristics, job experiences and preferences as major determinants in family migration (Brandén, 2013; Pailhé & Solaz, 2008). However, the migration of nurses from the global South to the global North needs further investigation into how these women are empowered to lead the migration process and the factors that influence the decision.

The literature on this topic shows that the decision to migrate is influenced by multiple factors at different levels. Literature on gender and migration considers migration and the decision-making involved as a gendered process (Hoang, 2011; Hondagneu-Sotelo, 1994; Paul, 2015). The rational choice approach considers the role of migrants' agency as well as structural factors such as destination-specific opportunities and social networks in the decision-making, including the prospect of family reunification and better life chances for the couples' children (Christensen et al., 2016; Haug, 2008; Krieger, 2020). Previous research puts a strong emphasis on analysing migrants as individuals and thus there is limited understanding of migration decision-making processes as a family matter (Bryceson, 2019; Guveli et al., 2016). Likewise, literature dealing with decision-making processes in the international migration of couples and families is scarce and lacks exploration into gender-specific influences on men and women (Guveli et al., 2016; Krieger, 2020). I consider the influence of social factors, specifically traditional gender roles, power relations and patriarchy in the family; individual factors, including human and social capital resources and competencies of women including their nursing education and training, professional work experience, social networks and connections in the destination country; and contextual factors such as occupational demand, possible opportunities and better life chances at the destination in the decision-making processes within families. Moreover, the dynamics of decision-making processes in families with special reference to the global South to the global North care migration context have yet to be explored. I argue that in the case of migration of trained nurses from the global South to the North, the individual and contextual factors become more important and influential than gender and power relations in the family as these factors empower women and provide them with negotiation power in the process. A combination of some or all of these individual characteristics might enhance their agency in the decision-making process. For ease of reference, I define the combination of some or all of these competencies as the 'competency combo', which creates a multiplier effect in enhancing a person's capabilities and independence and empowering them in the decision-making process. The theoretical underpinning of the 'competency combo' is Sen's (1989) and Nussbaum's (2003) 'capability/capabilities approach'. It considers capabilities as a person's freedom and liberties in their

life choices and empowers them to achieve what they want to do and to be. These capabilities are achieved and enhanced through a combination of different factors.

The position of women in Nepal, in general, is characterised by inequalities in education, participation in the labour force, obligations for care and family responsibilities (UNDP, 2020), and lesser opportunities in every aspect of life (Pigg, 1992). Whilst positive changes are taking place in Nepal's social and political context, including improvement in the status of women (Sharma, 2021), inequalities still exist in the family norms and expectations and the state's policies and practices. These inequalities could reinforce unequal power relationships, thereby imposing restrictive conditions and barriers for women's migration and undermining their role in the migration decision-making process. However, in contrast, the migration of women nurses to the global North has increased. In the case of the UK, it is estimated that more than 3,000 nurses have migrated from Nepal and are working in the health and social care sector.<sup>1</sup> They reside with a total of 10,000 dependent family members (NNAUK, 2021). Individual characteristics of migrants and destination-related factors could have influenced the decision-making processes, especially for those who have higher professional competencies and who are planning to migrate to the richer countries, whilst minimising the influence of traditional gender roles and power relations in the family. However, we do not have earlier evidence.

Hence, in responding to these research gaps, I consider two primary research questions: *'How do the migrant care workers and their families come to a decision to migrate from Nepal to the UK?'* and *'What role does gender play alongside other individual and contextual factors in this decision?'* This study advances the literature on the global South to global North care migration context by bring new empirical evidence. It introduces how and when other factors such as individual characteristics and contextual factors have more influence in the migration decision-making processes than the influence of traditional gender role expectations and power relations. It also contributes for considering that the drivers of the migration decision-making processes are multiple and the mechanisms behind the decisions involve much more than just gender and patriarchy.

In the next section, I present a conceptual framework where I review the literature on different factors influencing decision-making processes in individual and family migration. Then I present the research design and the methods used in the study. The findings and analysis are presented as thematic patterns in the decision-making process, highlighting the role of different factors. The paper ends with a conclusion summarising the key findings.

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<sup>1</sup> In addition to nurses and their families, migrants from Nepali heritage are much wider and diverse in the UK. Likewise, the Nepali population involved in care work in the health and social care sectors in the UK have come from diverse visa routes. Hence, the number could be much higher than just that of nurses. However, there is lack of data both on the Nepali population and on those working in the health and social care sectors in the UK. A 2011 UK census shows a figure of 60,000. Different surveys and estimates by UK-based Nepali organisations suggest a population of around 100,000 Nepali in the UK in 2014 (Laksamba et al., 2016).

## Migration Decision-Making is Beyond a Gendered Process

Migration decision-making involves several factors that interplay with each other. Literature on migration and gender (Guveli & Spierings, 2022; Hoang, 2011; Hondagneu-Sotelo, 1994; Paul, 2015) considers the reflexive relationship between migration and gender, in which migration is taken as a gendered process where traditional gender role expectations shape migration patterns, and in turn, migration experiences reshape gender role expectations. Dealing with this relationship, Hondagneu-Sotelo (1994) uses gender as means of understanding how a set of social relations and power dynamics based on gender organise the migration of both women and men and how it facilitates or constrains their migration and settlement. This approach is instrumental to seeing how expected gender roles and established gender norms provide access to power and control to certain members of the family and shape the migration process. Hondagneu-Sotelo (1994) further emphasises the role of patriarchy in creating unequal relations among men and women within the family, which further facilitates or constrains the migration of men and women differently based on the ideological and cultural expectations of each member. Due to the unequal power relations and different roles of men and women, migration for men is seen as a patriarchal rite of passage towards independence and establishing themselves as providers for their families. Women, however, are confined to the household sphere, an expectation that is further guided by safety concerns based on the gendered ideology that women are fragile and need protection (Hondagneu-Sotelo et al., 2006). In the South Asian context, this could be further linked to the importance given to maintaining the chastity of women in order to retain family dignity (Adhikari, 2020; Radhakrishnan, 2009; Shaw & Charsley, 2006). Hence, the people holding power in the family could restrict women's independent mobility with the concerns of the security of 'fragile' women and maintaining 'purity'. Therefore, patriarchy could create obstacles for women whilst expecting men to migrate. Since Nepal is a patriarchal society, consideration of patriarchal ideology and expectations in the family is an important aspect of this study.

Other literature (for instance, Hoang (2011), Krieger (2020), Paul (2015), Radcliffe (1991), Shihadeh (1991)] supports the role of gender and power relationships within the household as major factors in the migration decision-making process and identifies its unequal consequences on men and women. Shihadeh asserts that migration decisions are a family affair where often husbands decide with their authoritative power in the family (Shihadeh, 1991). Hence, wives occupy a subordinate role in the process, not because of a lower level of resources, competencies or income, but because of 'normative pressure arising out of traditional gender-role distinctions' (Shihadeh, 1991: 442). Paul's study on Filipino migrant domestic workers argues that women reach a migration decision-making stage only through negotiation within their household, potentially by convincing the family members that their migration is part of their gendered duty to support the family (Paul, 2015). Hence, Paul defines the process of reaching the decision as 'gendering practices' and 'gender performances', where their agency

is limited due to gender role expectations (2015: 287). Likewise, West and Zimmerman emphasise that ‘doing gender is unavoidable’ as people try to stick to the accepted gender roles (1987: 145). However, the generalisation may not apply to all women as the processes can have other influences, such as the macro socio-economic context, social networks, family ties, individual women’s statuses and their professional competencies. For instance, studies on Nepali nurse migration to the UK emphasise family support rather than resistance or restriction (Adhikari, 2013, 2020). This could be because of the demand for trained nurses in the UK, and their migration could be seen as a guarantee to bring other opportunities to the family, such as a substantial increase in income, the possibility of family resettlement, and better life chances in the UK. In addition, socio-economic changes (Sanders & McKay, 2014; Sugden, 2009) such as women’s increasing education, purchasing power and labour-force participation, reliant on mobility due to increased emphasis on cash resources, and increased access to market and migration brokers, could be some of the factors in the case of Nepal that alter or challenge expected gender roles in the family and enhance women’s agency in the migration decision-making process.

Other studies point to the paucity of research on couples’ migration decision-making processes that deal together with the role of expected economic gains at international destinations and expectations of gender roles between couples (Krieger, 2020). Based on panel survey data on migrants in Germany, Krieger delineates that migration decisions are influenced by the combination of economic prospects as well as expected gender roles (Krieger, 2020). This indicates a rare chance of reaching a migration decision based on possible benefits to wives only when there are relatively huge gains to wives compared to husbands. Moreover, she argues that regardless of whether the decision is based on the possible benefits to husbands or wives, since the women’s migration motivations are usually oriented towards family well-being, women are relatively disadvantaged compared to men in the labour market position. This argument, however, leaves room for contestation in the context of care migration, where (women) nurses are in high demand and their integration into the labour market is relatively easy when compared to other professions. Likewise, confining women’s migration motives primarily towards family well-being is a biased interpretation as both men and women aim to achieve individual or family well-being or consider both. Although Krieger’s study makes key contributions to our understanding of family migration (Krieger, 2020), there are a few important limitations, which I will address in this research. First, the data underpinning her research is on employment trajectories in the host country, which ignores the dynamics of the decision-making process. Second, the study lacks consideration of the family members’ perspectives on the decision-making processes. Finally, the study fails to address the role of the host country’s specific contexts including opportunities and demands related to specific occupations, such as care work and nursing, the possibility of family reintegration, and better life chances for children.

Only a few studies find the wife’s level and nature of education and/or occupation as major determinants in a family migration decision. Lichter highlights the high probability of migration among families where the wife is either unemployed or a white-collar professional and manager (Lichter, 1980). Likewise, Shields and

Shields present the role of the wife's education in general as one of the major factors for migration (Shields & Shields, 1993). It suggests that couples prioritise migrating to a destination they are relatively familiar with, where there is more possibility of suitable employment for both of them. Literatures on the global care economy explore women's stakes in international migration (Ehrenreich et al., 2003; Parreñas, 2015; Yeates, 2012). These literatures present the gendered demand for care workers in the global North as one of the main reasons for increasing migration from the global South, especially for women. Though care workers are often racialised, gendered and low-paid, associated opportunities in the global North are taken as one of the major factors that encourage families to make the migration decision. Hence, the individual factors of the migrants together with the gendered demand of care workers, and the possibility of the eventual migration of the whole family, could be the reasons for increasing women's agency in the decision-making processes.

While exploring the reasons behind the possibility of a more important role of the individual and contextual factors than that of traditional gender roles, patriarchy and power relations in the family in the decision-making process, I have considered aspects of the rational choice approach (Christensen et al., 2016; Haug, 2008; Wood, 1981). In contrast to considering the major role of gender in the migration process, the rational choice approach takes migration as an adaptive or reactive response taken by the family (Wood, 1981). This shows that individuals, couples and families try to make the pragmatic decision to migrate or not to migrate and choose the best options from available alternatives. In this process, migrants are seen to decide by calculating the available resources and competencies they have and the possible outcomes—both monetary and non-monetary—the migration can bring (Haug, 2008). Broughton considers migration decisions as the process of calculating the risks and benefits and reaching a decision (Broughton, 2008). Other proponents of the rational choice approach again suggest that the power to use the agency or the negotiation power in decision-making processes depends on factors such as the destination country's welfare provision, availability of different opportunities, and the migrants' social network in the destination country (Christensen et al., 2016; Hoang, 2011). This approach supports the view that the migrant's agency and negotiation power enhances or diminishes in the decision-making process based on individual as well as structural factors such as social networks and destination-specific opportunities including the prospect of family reunification and better life chances for the family's children. Hence, we may interpret the possibility that the accumulation of more of these factors increases negotiation power at the same time these factors become more influential and important in decision-making processes. Meanwhile, a lack of those factors diminishes negotiation power, leading factors such as traditional gender roles, patriarchy or power relations in the family to become more influential.

This review shows that in both independent and family migration, the decision-making process is beyond a gendered process, but is also influenced by individual and contextual factors. These individual and contextual factors can become more influential in the decision-making process especially when migrants are equipped with skills and knowledge that are in higher demand in the destination and when the destination holds higher social capital. In this research, I aim to demonstrate that Nepali nurses having the professional skills and competencies that are highly in

demand in the UK helped minimise the influences of traditional gender roles, patriarchy or power relations in the family.

## Research Design and Methods

I am interested in presenting both the lived experience of the migrants and their family members and their perceptions of how they went through migration decision-making processes in their families. The methodology is guided by an interpretive paradigm (Snape et al., 2003) to gather the opinions and experiences of the respondents' context-specific perceptions of their migration. The interpretation of the data is guided by a critical orientation (Braun et al., 2014) in order to unpack the meaning of migration decision-making processes and how different factors provide access to power and control to males and females in the decision-making process.

I gathered qualitative data through in-depth semi-structured interviews with Nepali migrant care workers in the UK and their family members in Nepal. The interviews for most of the care workers were approximately one hour long, ranging between 45 and 90 min. The interviews with the care workers' parents were around 30 min long. The care workers in the study included care assistants, health care assistants, support workers and nurses in the UK. A total of 49 in-depth interviews were conducted. The participant group included 35 care workers, 27 women and 8 men in the UK, and 14 family members of care workers in Nepal. Among the care workers interviewed, 30 (24 women and six men) were married and 16 of them had children before migrating. Seven women had migrated by marrying UK-resident Nepali men. Three women and two men were unmarried during the migration. The participants were selected purposively through the snowball technique. While recruiting the participants for the interview, the contacts were initially obtained through Nepali organisations in the UK.

All the interviews were conducted in Nepali and were audio-recorded and transcribed into English. The names of the interview participants were changed to maintain anonymity. The interviews were first conducted with the migrants in the UK and then their family members were traced and interviewed in Nepal. Interviews with the parents provided the left-behind family members' perspectives and their role in the migration decision. It also aimed to address the lack of research in the Nepali migration context based on the data from both migrants in the host country and their family members in the home country (Ghimire et al., 2017). Although men are in a minority of care occupations when compared to women, I have included them to study the decision-making processes for both men and women.

Ethical approval was obtained from the relevant university authority. I considered positionality and my power position and used reflexivity while collecting and interpreting the data. I also used my 'subjectivity as resource' (Braun & Clarke, 2022) and used reflexivity to interrogate their subjective understanding of gender position and power relations based on both the Nepali context as well as the context of Nepali migrants in the UK while interviewing men and women and in the interpretation of the dataset.



My analytic approach was guided by reflexive thematic analysis (Braun & Clarke, 2006, ). I followed an interpretive paradigm and critical orientation, as mentioned earlier in this section. I predominantly used an inductive approach in developing meaningful patterns from the dataset, where I focused on analysing semantic meanings of the respondents' experiences and perceptions of migration decision-making processes. I followed a flexible and iterative process to analyse the data. I read and re-read the interview texts throughout the process to develop familiarity with the dataset. I used NVivo software to code the interview transcripts that had the potential to address the research questions. In order to draw meaning from the data I then actively produced themes while interpreting and finding meaningful patterns from the whole dataset. Hence, the themes that I developed present patterns of meaning in decision-making processes for independent and family migration.

## Findings and Analysis

Data from the in-depth interviews show that the Nepali care workers' decisions to migrate were influenced by several factors. The decision-making was taken as a family affair where aspiring migrants and family members participated in and influenced the processes. These findings are reported under two major themes and seven associated themes. The themes represent some of the meaningful patterns and stories of the decision-making process in the family as below.

### Influence of Gender and Power Relations

The decision-making processes in individual and family migration for both men and women were influenced by gender and power relations in the family and other individual and contextual factors. Family members, especially parents, had varying degrees of influence in the independent migration of unmarried men and women, whereas partners influenced the migration of married men and women. Both men's and women's choices on education and career and thereafter their migration and its destination were explored and initiated either by the individuals or their family members or together. Then through the processes of unanimous agreement or negotiations and compromises at different steps, the decisions were reached generally together in the family. Influence of gender and power relation in the family (Hoang, 2011; Hondagneu-Sotelo, 1994; Paul, 2015) or other factors in enhancing the migrant's agency (Broughton, 2008; Christensen et al., 2016) were driven by several factors, such as education and training, profession and its demand in the destination, and gender. Some of the relevant patterns relating to the influence of gender and power relations in the family are presented below.

### Women Marrying to Migrate

The first of the findings from this research is that in the cases of the independent migration of unmarried women, family members intruded into the processes and put



pressure upon women to get married before the migration. Despite the women were aspired to migrate, initiated preparations and able to use their agency to explore the migration possibilities, they lack autonomy to make decision on their own. This was mainly because of the traditional gender-role expectations for women and parents maintaining power relationships. It was reflected through parents' active involvement in the migration decision as well as their concerns for ensuring the safety of their daughters.

For instance, Aarju (a female nurse) who had migrated to the UK after getting married to a Nepali UK resident, shared her story below:

After completing my nursing degree, I was planning to go to the US and preparing for the TOEFL exam. While sharing my ideas with my *mommy-daddy*, they... they didn't like it and told me to get married and go to *bidesh* [foreign country – I have kept the Nepali term *bidesh* as it has a specific meaning as migration to a foreign country other than India, which has an open border with Nepal].

Aarju asserts her lack of autonomy in making the decision on her own. She had migration aspirations and initiated preparations. She said she was sure that she will not be able to decide on her own, but she took the initiative to explore the possibilities and started preparations by using her 'agency' (Hoang, 2011). Only then did she consult her parents for their support. An interview with Aarju's mother further highlighted the parents' perspectives.

As she shared her interest in going *bidesh* after completing her nursing degree, I became scared about her but didn't show my disagreement outright. I tried to convince her by saying that going *bidesh* alone at an early age is not safe for girls. Then I presented two options before her: either to get married to a person residing in the UK from whom a marriage proposal had come to us or to wait until she gets mature enough - as she had just turned 21 at that time.

In a similar vein, Trishna's mother (a mother of a female nurse) added her specific concerns against the migration of unmarried daughters and shared that she had convinced her daughter to agree to get an arranged marriage<sup>2</sup> before the migration:

After completing her nursing [degree], my daughter was working in a hospital. She was interested in going *bidesh* but I didn't have an agreement with her to send an unmarried daughter alone... But in the meantime, we got a proposal of her marriage with *keta* [a man] residing in the UK through our relatives... We accepted the offer and she [my daughter] also agreed with us to get married to him.

<sup>2</sup> Though the practice of getting married through the consent of partners based on their own choice is gradually increasing, it is still common practice in Nepal to get an offer of marriage through relatives or family members or friends. The marriage goes ahead if both the man's family and the woman's family agree to the arrangement (*arranged marriage*).

Here the mothers conveyed their traditional gender-role expectations for women and mentioned their concerns for the safety of young unmarried women. These remarks also suggest that the parents wished to maintain gender power relationships (Radcliffe, 1991) over their daughters by either influencing the migration decision-making process or imposing conditions that their daughters were required to meet in order to gain parental approval and support. However, in these negotiations, parents did not restrict their daughters to migrate but tried to ensure safety by marrying them. It also shows that the parents too were aware of the occupational demand and better opportunities for nurses in the UK. Hence, they also supported their daughters to migrate after ensuring their safety. It was not only the preference of the parents to marry their daughters before migration. Nepali single men residing in the UK also had a preference towards marrying nurses from Nepal, a finding that echoed those of Adhikari (2020). In some cases, irrespective of women's initiatives to migrate, parents receiving a marriage proposal had convinced their daughters to marry and move to the UK for their 'good future'. Hence, the preference for parents to have their daughters married was also driven by the demand for nurses in the UK. By matching the demand, they endeavour to ensure the safety and security of their daughters as well as fulfil their daughter's migration aspirations. Hence, even in this gendered account, the demand for a trained nursing workforce in the UK played a role in increasing the demand for nurse brides among the Nepali men residing in the UK, which facilitated meeting aspirations of both the parents and migrants.

### Migration as a Rite of Passage for Men

The second of the findings is that in contrast to the migration of unmarried women, migration for men in the study received unconditional support from their family members. It can be interpreted as the family's patriarchal-based gender role expectation on men to become breadwinner for family in which migration is seen as a rite of passage towards becoming independent men.

For instance, Bikki's father (a father of a male nurse) had supported his younger son to migrate to the UK under a student visa. He proudly shared the story of how he and his elder son immediately intervened in the nearly failed migration of his younger son and supported him to achieve 'success' as follows:

Since I had already sent my elder son to the UK, my younger son was studying at that time and he had also started applying for a US visa. As he failed to secure the US visa, my elder son [residing in the UK] immediately arranged his admission to a college and I supported him financially to go to the UK.

In Bikki's case, since his first attempt to migrate to the USA became unsuccessful, his father and elder brother offered immediate support in migrating to the UK. Bikki's brother used his network in the UK to explore the colleges and secure admission, whereas his father provided the necessary financial support. While comparing women and men, this form of unconditional support and urgent action was rarely found among women. Likewise, the pressure to get married before migration was not present among the unmarried men, as there were no issues of security or chastity for them. Rather, the parents tried to ensure the 'patriarchal rite of passage' of

developing their sons as independent men (Hondagneu-Sotelo, 1994) and helped to make their migration successful. This demonstrates how the patriarchal-based gender role expectations on men to become independent breadwinners in the family can support them in the migration decision-making process.

### Husbands' Leadership in the Decision Processes

The third of the findings is that among the family migration, husbands' leadership and sometimes even dominating roles in decision-making processes were seen among the families across diverse backgrounds, such as the ex-*Gurkha*<sup>3</sup> families, families with husbands having a higher level of education and professional jobs in the UK, and some families of nurses. In some cases, the husband was granted a leadership role in the decision-making irrespective of whether the initial visa application was being made on the basis of the husband or wife's employment competencies. Among the families of nurses, decision-making was based on the consideration of the education and occupation-related power of the nurses as discussed earlier. It is interpreted that since the husbands had assumed their patriarchal power as the household head, they were leading the decision or expected to make the decision on behalf of the family. The nature of the couple's work and its demand in the UK had further influenced the decision-making process.

For instance, Dev (a husband of a female nurse) stated how he explored the prospect of migration and initiated the process on his wife's behalf:

She [my wife] had passed the *Public Service Commission* exam [a centrally controlled exam to enter into a permanent government job in Nepal] and started a permanent nursing job in a government hospital... [He laughs]... But I explored the NMC registration process [the Nursing and Midwifery Council, registration with which is mandatory to practice nursing in the UK]... She didn't know exactly what I was doing but I had already succeeded in submitting some forms and registering her with the NMC.

Thus, considering that his wife's migration would bring benefits to the family and assuming patriarchal power as a household head, Dev decided on behalf of the family. However, despite having no role in the process, Dev's wife accepted it as their mutual decision. It echoed Shihadeh's view that in a family with traditional gender role expectations, the husband's decision is taken as the family decision and the wife follows it because of a 'normative pressure arising out of traditional gender-role distinctions' [35: 442]. However, since the migration of nurses was a well-established trend, Dev's wife could have accepted it as a supporting step for migration. Either way, despite having the power to lead the decisions and being the main instigator of family migration, she accepted her subordinate role in the decision-making process.

<sup>3</sup> *Gurkha* is a special brigade of Nepali soldiers in the British army for the last 200 years and the persons serving as *Gurkha* in the British army or the retired and their family members have got re-settlement rights in the UK since 2004. Hence, the retired *Gurkha* (men in most of the cases) based on their service in the British Army are lead migrants in these families.

Likewise, Mahendra, a male nurse with 11 years of work experience in Nepal, was determined to migrate to the UK. Because of the culture of migration among nurses in Nepal, he felt pressured to follow his friends, colleagues and even his nursing students who had migrated. He was already feeling left behind and believed that he was missing the opportunities which others were enjoying in the UK. However, as is the case with some exceptions among nurses, he did not succeed in getting a visa on his own. Therefore, he pushed his wife, who was also a nurse, to initiate the migration process to the UK, even though she had a high-salary job in an international organisation in Nepal. Mahendra's wife (a female nurse) shared their story below:

He [my husband] was very interested in coming to the UK and used to tell me time and again that we should also go now... I was not at all interested in going. But as my husband's applications were not successful despite his huge interest, I agreed for his happiness and asked him to start applying for me. Though I got the documents [for migration], I was not interested in coming here.

Mahendra shared that he felt a discrepancy between his education and income in comparison to his colleagues and friends in the UK and even to his wife in Nepal and tried to move to the UK to reduce this gap. However, as he failed to migrate on his own, he put pressure on his wife to move so that he could increase his income. Hence, pressure to establish himself as a key provider in the family alongside a calculation of the benefits of migration (Krieger, 2020), such as the increased income for both he and his wife and increased life chances for their son, could have increased Mahendra's drive to migrate. But again, as mentioned earlier in Dev's case, despite feeling pressure from her husband initially, after the family had resettled in the UK Mahendra's wife appreciated her husband's initiative and push for the migration. Hence, the nature of the couple's work and its demand in the UK influenced the decision-making process in addition to Mahendra's gender-based role in the family as the primary decision-maker. Since the women did not initiate the process on the basis of the power derived from their professional competencies, their husbands made the decision as household heads on behalf of their families.

### **Influence of Individual and Contextual Factors**

The interviews revealed different factors that influenced the decision-making process among both unmarried individuals and married couples. In some households, individual and contextual factors had more influence than gender and power relations. Access to the leadership role in this process depended on several factors, including mainly individual factors such as the competency combo, and destination-related occupational demand and opportunities. Some of the relevant patterns that show the major influences of individual and contextual factors in the migration decision-making processes are presented below.

## Women Using Their Competency Combo to Migrate

The fourth of the findings is that women's roles in decision-making were influenced differently based on their competencies, such as educational attainment, professional work experience, earned connections and networks, and their combinations, i.e. their competency combo. Women with a competency combo, especially those with a nursing degree, additional years of work experience in the healthcare profession, and a friend with an established network in the UK to support the migration process, were able to be more independent in the decision-making process. It is interpreted that women's competency combo had enhanced agency and enabled them to take independent decision.

For instance, Luna, a female nurse with more than 12 years of work experience, shared as follows:

After getting ideas from my friends [who were already in the UK], I decided on my own and applied directly to register for the NMC. Then one of my friends supported me in arranging a training centre (nursing home) for the adaptation course [in the UK]. Because of having years of experience in Nepal, I had a lot of friends who had already come and settled here. So, it was easier for me to get their support in any part of the UK.

Luna's confidence in her capacity to plan and execute the migration process without the assistance of professional service agents was enhanced by her years of work experience in diverse organisations and strong ties with friends and former colleagues in the UK who were ready to provide guidance and support at every step. Furthermore, Luna made references to her earlier nursing colleagues' migration experiences and job prospects in the UK. Because of her access to information through her social networks, nursing education and work experience, she was able to foresee the possible outcomes of her migration and lead the process with confidence. It further demonstrates how the competency combo enables migrants to use agency (Christensen et al., 2016; Hoang, 2011) in the migration decision-making process.

These factors gave her the strength and confidence to convince her family members and get support from colleagues. Hence, her combination of resources (her competency combo), was instrumental in empowering her in the decision-making process.

## Migration as Freedom and Emancipation for Women

The fifth of the findings is that as in the cases of unmarried men, some unmarried women also received the support of their parents to migrate despite the lack of all or some competencies. Their parents paid college fees and associated costs and supported recently graduated nurses to pursue further nursing study in the UK. It is interpreted that the women's aspirations to migrate, their motivation to pursue further study in nursing, and their parents' interest in providing support, were

also influenced by the women's nursing skill sets and the increased demand for nurses in the UK.

In one case, the mother's negative experience with strict gender role expectations became a positive factor in reaching the migration decision. Sanu (a female nurse) shared a story about how her mother encouraged her to migrate:

*My mommy had encouraged me [to migrate]... The main reason was that my mommy had got married at an early age. So, as she had gone through a strict life of being a daughter-in-law since an early age, she wished me to grow in such a way that I can travel around the world, see everything and do whatever I like before getting settled in my life. I was hesitant to make my family invest a lot of money in me. So, it was solely because of my mommy's encouragement and support that I started the process.*

Sanu's mother echoed the same views when I interviewed her in Nepal:

It is a common perception among us that our daughters will be spoiled if they go *bidesh*. We as daughters are suppressed in our society but we also need freedom and support for our development. *Chhori haru lai pani khulla aakash ma udna dinu parchha* [an idiom which connotes that daughters should be given the opportunity to live freely]. And they should be given the opportunity to make their future bright. Since I didn't get that opportunity in my time, I was determined to give it to her. Hence, despite financial difficulties, I managed to send her to Britain.

Sanu's mother shared that while being a daughter-in-law, she had been faced with several restrictions from family members in power and was also responsible for maintaining the household and caring for the elderly from an early age. Hence, she tried to live her dreams through her daughter and took steps to ensure her daughter's freedom and emancipation by encouraging her to migrate to the UK. The negative experience of gendered restrictions and traditional gender-based responsibilities influenced her to be more liberal with her daughter, which became a positive factor in contributing to the decision to migrate. These findings again suggest that the individual quality of having a nursing degree and the contextual factor of occupational demand for nurses in the UK can support women in the decision-making process as both these migrants and their parents were convinced that the migration to the UK would benefit them.

### **Couples Mutually Deciding to Migrate**

The sixth of the findings is that migration of trained nurses to the global North, mainly to Australia, the UK and the USA, has become a common trend in Nepal. Hence, gathering information on migration possibilities and prospects was found to be common among unmarried men and women, as well as couples, in which cases the process was undertaken either individually by either the husband or wife or mutually. It is interpreted that the migration decision was influenced by calculating collective gains in the UK based on their competencies and the occupational

demand of nurses where traditional gender roles and power relations did not influence the process.

Information and support were gained either through social networks or commercial service providers/migration brokers. Poshan (a female nurse's husband) who had run his own business in Nepal and started working as a care worker after coming to the UK, shared the process of their migration decision as below:

Since we were not able to meet our expenses out of our income [in Nepal] and my wife's friends were migrating one after another, we basically followed their footsteps. We visited the Consultancy [the private firm providing service to support the migration process], gathered information on the whole process and our possible income in the UK, then we started the process... So in order to fulfil our minimum needs, we decided to come here.

Poshan's couple realised that their friends who had migrated and started nursing jobs were eventually also able to take their family to the UK. In another case, Sewa (a female nurse) described how:

I was interested to do both the BSc nursing degree and work in *bidesh* as I always had a drive to progress through further education and earn more money and make our future bright. So I discussed it with my husband who found a good consultancy through his friend. Then me and one of my friends started the application process to the UK. Hence, we [my husband and I] planned and decided to migrate to the UK together.

Because of the demand for care workers and nurses, the ability to move to affluent countries in the global North along with their family members was taken as a guarantee in these households. Realising their opportunity, they explored the possible gains in the UK and mutually reached the decision to migrate. Here the migration decision was taken together by the couple by calculating their collective gains in the UK based on their competencies and the occupational demand of nurses in a situation where traditional gender roles and power relations did not influence the process.

In these cases, both husbands and wives mutually shared their power. Wives gave up the power they had gained through their nursing degree, whereas the husbands gave up their patriarchal power as household heads and they negotiated with each other and mutually reached the decision. They considered the benefits of migration for them individually as well as for the family. In addition to the possible increase in income, they considered 'destination related social capitals' (Broughton, 2008), such as the possibility of family reunification, better life chances for them and especially for their children, and the availability of their social networks. The men's education and work experience were neither equally recognised nor in demand in the UK and they had become disadvantaged in the labour market. However, while calculating the differences in income between Nepal and the UK, they were convinced that even the switch to a disadvantaged labour position for the husbands would yield more income overall, in addition to other opportunities including better prospects for their children. It further supports the argument that even in a patriarchal setting, individuals' and couples' migration decisions were more influenced on the basis of



their resources, i.e. specific human capital, which was in high demand in the destination countries, and the destination-related occupational demand and opportunities.

### **Wives' Leadership in the Migration Decision Process**

The seventh of the findings is that as in the case of the migration of unmarried women, married women with the competency combo, such as more years of experience in the healthcare profession, nursing education, and a strong network of friends and colleagues, were more independent in leading the migration decision-making process in the family. It is interpreted that because of the competency combo, they were confident that the migration would bring more benefits to them and their family. This confidence empowered the women to initiate and make the decision themselves or else convince their husbands to assist or at least follow in the decision.

For instance, Sita (a female nurse) described how:

In the beginning I consulted with my friends and followed their advice on the whole process and used the same consultancy service they had used earlier. After initiating the process, I shared it with my husband who became happy about the opportunity to go to the UK.

Traditional gender roles and power relations did not have much influence on the migration decision processes here. Likewise, despite different reasons for the wives leading the migration process, their competencies and the gendered demand for care workers in the UK were acknowledged as the leading factors. Husbands followed their wives' decisions to migrate either by supporting them in the process, remaining passive without active involvement or trying to influence the process. In some cases, the husbands came to know about the process only after the wives had taken a major initiative, such as after NMC registration or correspondence with potential adaptation course providers. A husband mentioned family reunification and their children's future prospects as the reasons for his agreement to migrate to the UK. Krishna's (a male care assistant) narrative reflects this situation:

I didn't want to come here [to the UK] in the beginning as I had a good job in Nepal. But she [my wife] kept on insisting to me, saying that since our children will be with us and every opportunity is there, we need to go to the UK. So, with these compromises, I came here, I stayed here and became used to it later.

Though Krishna lost his 'good job' and his role as the main provider for his family in Nepal, he migrated to reunite and maintain his family's well-being in the UK. Reflecting on the decision-making process, Krishna described the pressure on him in the beginning, on whether to migrate or not by leaving his job, but later on he acknowledged his wife's decision to migrate as the right choice because of the increased family income and better education for their son. These views echoed those of the wives who had followed their husband's decisions. Here again, the husband's subordinate role in the decision-making was determined irrespectively of their level of education, professional experience or income. Hence, these decisions were driven by the wives' education and employment prospects in the UK more than

gender role expectations and power relationships in the family (Hondagneu-Sotelo, 1994), as they were relatively advantaged in the labour market when compared to their husbands.

One of the commonalities among these migration decision-making processes was that the women were empowered in discovering their options due both to individual factors (their competency combo) and contextual factors. Even the women who got married before migration, for instance Aarju, Trishna and others, explored every possibility on their own before making negotiations with their parents. They also did not revolt against their parents' conditions. This was not because they were unable to resist their parents' demands, but because they were able to use their agency to negotiate a solution with them based on the knowledge they had independently gained about their opportunities. This is in contrast to Paul's observation that Filipina women are able to negotiate their migration by 'doing gender' and convincing family members that the migration will enable them to perform their gendered duty to support the family (Paul, 2015). Thus, when the Nepali unmarried women agreed to get married before migrating, or the married women accepted their husbands' leadership, they had already explored the best possible options and used their agency based on their competencies to convince and negotiate with their family members. Hence, they were undoing gender and were able to challenge gender norms and use of their agency in the migration decision-making process. The women equipped with a better competency combo were in a stronger position.

Demand for human resources due to shortage of health and care workers in the UK was one of the contextual factors influencing the decision-making processes. Brexit further pushed the UK to explore and recruit additional health and care workers from the countries in the global South. One of the examples is the UK reaching a bilateral agreement with Nepal in August 2022 to recruit Nepali nurses. It is likely that the migration decision-making processes of Nepali nurses to the UK would be further facilitated due to the bilateral agreement and that the participating countries could benefit from this study's findings.

Therefore, decision-making processes within the families were informed by several factors, including gender, education, profession, and context. The strength of women's agency in the decision-making process was relative to the individual and contextual factors. For example, women with more competencies were in a better position to use their agency and lead the decision-making process. Likewise, the demand for trained nurses and opportunities in the UK created new dynamics, facilitating women's say in the migration decision process. This highlights the role of factors beyond gender-specific dynamics in the decision-making process, as these women were able to use their power based on their competencies to instigate their family's migration.

## Conclusion

With the increasing demand for care workers in the global North, men and women are migrating independently or as families from Nepal to work in the health and social care sectors to improve their life prospects. The demand for care workers

enhances the capacity of women with a nursing education to use their agency in the migration decision-making process. Some of the major findings of this study were that in the global South to global North care migration context, the nature of the work and the gendered demand for trained nurses in the global North together with opportunities to enhance life chances at the destination facilitates the migration of women and their families amidst gender-based restrictions on mobility. Moreover, resources, capabilities, and their combinations (the competency combo) were seen to empower women and enhance their independence. These factors also stood out as more important than traditional gender roles or power relations in the family in decision-making processes.

The decision to migrate was seen as a family affair where family members influence the process. The study of migrants both as individuals and couples showed different influence of family members among married and unmarried men and women. The inclusion of family members' perspectives further enhanced the data by bringing insight into the home country context and its influence on decision-making processes. Different gender role expectations between men and women influenced the decision-making process. The dynamics differ between women and men and even among women, depending on factors such as education, profession, and social networks. Men had a relatively advantaged position in the processes. However, individual and contextual factors such as nursing training, years of experience and occupational demand for nurses in the UK had enhanced women's capacity to use their agency and negotiation power. Therefore, despite the influence of traditional gender roles and the patriarchal association of women with the responsibilities of domestic work, family care, and maintaining the honour of the family, the women's professional competencies and the UK's workforce needs played decisive roles in the decision.

These findings support my argument that in the case of the migration of trained nurses from the global South to the North, individual and contextual factors become more important and influential than traditional gender roles and power relations in the family, as they empower women and provide agency and negotiation power. These findings contribute to the existing knowledge on the global South to global North care migration context by bring new empirical evidence. These findings are original and contribute to the literature on gender and migration and migration decision-making processes in family, providing insights that can inform academics and society for considering the contextual factors and role of women's sociodemographic characteristics including their competencies. These also contribute for considering that the drivers of the migration decision-making processes are multiple and the mechanisms behind the decisions involve much more than just gender and patriarchy.

Inclusion of research participants as only those who work as nurses or paid care workers in the health and social care sectors in the UK is one of the limitations of this study. Hence, future research could extend the participant group by including migrants from diverse care sectors and other occupations, which could provide insights into whether migration decision-making processes may also depend on the care professions of the migrants. Furthermore, research on care workers who remain in the source country could reveal the influences on care workers who may have

been prevented from migrating, possibly because due to gender-based or other constraints. It could further focus on the influence of source country and destination-specific factors such as care and migration policies, and socio-economic changes such as the increased role of migration brokers, people's increased aspirations for migration, and women's increased competencies and purchasing power due to their participation in the labour market.

Migrants are one of the major contributors to sustaining global health and social care services. One of the major issues linked with the mobility of care is the shortage of health and care workers. Since the UK is on the brink of shortages of human resources in the health and social care sectors, it is working to attract and recruit trained nurses internationally after the Brexit, including from countries in the global South. It reached a bilateral agreement with Nepal in August 2022 to recruit Nepali nurses. While the migration of Nepali nurses to the UK is likely to increase in the coming years due to the bilateral agreement, this study's findings could inform the participating countries on how the prospective migrants can be empowered in their decision-making processes. The empowerment to the migrants and adherence to the principles and practices of ethical recruitment (WHO, 2010; Yeates & Pillinger, 2018) could ensure effective management of the migration and yield a mutually beneficial outcome among the participating countries, migrants and their families.

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## Declarations

**Conflict of interest** The author has no relevant financial or non-financial interests to disclose.

**Ethical Approval** This study was approved by the departmental Director of Research (DoR) / Ethics Officer (EO) for the Department of Sociology of the University of Essex, on behalf of the Faculty Ethics Subcommittee (ESC). It was assessed to be of low risk involved to research participants and researcher. This study was performed in accordance with the ethical standards as laid down in the 1964 Declaration of Helsinki and its later amendments or comparable ethical standards.

**Consent to Participate, Record, and Publish** Informed consent was obtained from all individual participants regarding participation, recording of interview and publishing their data.

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