



Labor migration and child mortality in Mozambique

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ABSTRACT

Male labor migration is widespread in many parts of the world, yet its consequences for child outcomes and especially childhood mortality remain unclear. Male labor migration could bring benefits, in the form of remittances, to the families that remain behind and thus help child survival. Alternatively, the absence of a male adult could imperil the household's well-being and its ability to care for its members, increasing child mortality risks. In this analysis, we use longitudinal survey data from Mozambique collected in 2006 and 2009 to examine the association between male labor migration and under-five mortality in families that remain behind. Using a simple migrant/non-migrant dichotomy, we find no difference in mortality rates across migrant and non-migrant men's children. When we separated successful from unsuccessful migration based on the wife's perception, however, stark contrasts emerge: children of successful migrants have the lowest mortality, followed by children of non-migrant men, followed by the children of unsuccessful migrants. Our results illustrate the need to account for the diversity of men's labor migration experience in examining the effects of migration on left-behind households.

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Introduction

The consequences of migration and immigration for families have received intense research attention in recent years. Urbanization, natural and political disasters, economic globalization and the fluidity of labor markets: these are some of the many forces that have increased migration and immigration across the world (e.g., Agadjanian, 2008; Barrios, Bertinelli, & Strobl, 2006; Berhanu & White, 2000; Castles, 2000; Orozco, 2002; Perz, 2000; Saldaña-Zorrilla & Sandberg, 2009; Samuel & George, 2002; Sanderson & Kentor, 2009; Singh, Karunakara, Burnham, & Hill, 2005; Zachariah, Mathew, & Rajan, 2001). Although some of these moves are undertaken by individuals migrating alone, even seemingly solitary migrants and immigrants often maintain ties to their areas of origin, where they have spouses, children, and other family members (Edwards & Ureta, 2003; Hildebrandt & McKenzie, 2005; Hollos & Larsen, 2003; Luke & Munshi, 2006; Mendola, 2010; Tiemoko, 2004).

Prior research has examined the associations between migration and child health outcomes but has mainly focused on the children of migrants or children who migrate. For example, Antai,

Wedrén, Bellocco, and Moradi (2010) found that under-five mortality in Nigeria was higher for children of mothers who were rural-to-urban migrants, compared to children whose mothers remained in rural areas. Avogo and Agadjanian (2010) detected elevated risks of child death in families of forced migrants in Angola. Moss, Stone, and Smith (1992) found worse health outcomes for children of refugee mothers in Belize, although this was mainly due to their socioeconomic characteristics, and Kiros and White (2004) reported that children of migrant mothers in Ethiopia were less likely to be immunized. Although there are still questions about reasons why children of migrants tend to have worse outcomes, mechanisms that have found common support include selection into migration (Moss et al., 1992) and diminished social network support in the receiving context (Kiros & White 2004).

The impact of one family member's migration on the health of children who remain behind, however, has received less research attention. The most common type of such migration, especially in settings such as sub-Saharan Africa, is male labor migration (Agadjanian, 2008). Male labor migrants, whether they travel internationally or domestically, many times are part of a family formation system in their places of origin. This link between migration and family formation has been documented in many settings. Single, unmarried males often use labor migration as a means of raising their wealth and economic prospects in order to

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increase their attractiveness as marriage partners (Stark, 1988). Research has documented this strategy in settings as varied as Mexico (Parrado, 2004) and Lesotho (Murray, 1977). In impoverished rural areas, male labor migration is a common marriage market decision that generates the financial and material resources necessary for marital payments. This has been observed in Botswana (Mookodi, 2004) and Mozambique (Lubkemann, 2009). Married men, too, engage in labor migration to support households that include wives, children, and potentially other dependents. Labor migration is viewed as a beneficial family strategy in many settings, including Cameroon (Fleischer, 2007), the Philippines (Lauby & Stark, 1988), Bangladesh (Mendola, 2008), Singapore (Rahman, 2009), and Nepal (Thieme & Wyss, 2005). In some cases, it may be the only viable option men have for providing for their families. Labor migration, however, entails many risks and uncertainties, and the absence of a family member may place diverse types of stresses (economic, social, emotional, and relational) upon the household.

Studying the impact of male labor migration on child health outcomes in sending areas is important because such migration is very different from situations in which the entire family moves, a mother and child migrate together, or a child is born to a migrant mother in a destination area. First, and most importantly, the child and remaining family members do not move. The child and mother who remain behind do not experience the potential stressors from directly participating in the migration experience, such as separation from extended family (Rousseau, Drapeau, & Corin, 1997), limited access to health services (Lu, 2010), and discrimination in the receiving context (Wang, Xiaoming, Stanton, & Fang, 2010). In addition, social support networks are not disrupted in the same way they would be if the entire family moved. On the other hand, these networks may change if the father's leaving places more burden of care on the mother, or if extended family members assert control in the father's absence (Yabiku, Agadjanian, & Sevoyan, 2010). Second, the role of remittances is greater for male labor migration, as it becomes the primary way the absent father supports his family. In this case, the remaining family members are in a potentially more dependent role because they cannot enforce the sending of remittances and otherwise monitor the man's behavior (Kothari, 2003). Third, male labor migration removes an individual from the family unit, unlike a migration move that incorporates an entire family. Even if a man's remittances can make up for his absence economically, there are other dimensions of the family unit that are stressed in terms of the daily support he no longer provides to wives and children, as well as direction of household management in settings in which women typically have low autonomy (Yabiku et al., 2010).

In this paper, we examine the association between men's labor out-migration in southern Mozambique and a key dimension of their non-migrating family's well-being: child survival. Rural southern Mozambique, the setting of this study, is characterized by traditionally high levels of male labor migration to South Africa that has been historically fueled by both employment opportunities in the much richer neighboring country and the lack of jobs outside of subsistence agriculture in the local labor market (Crush, Jeeves, & Yudelman, 1991; First, 1983). Although this migration has been a core part of southern Mozambique's social and economic system for generations, recent times have seen considerable changes in both the type and outcomes of Mozambican migrants' employment. While crossing the international border has become much easier thanks to the growing regional integration, finding legal, reliable, and well-paying jobs in an increasingly xenophobic South Africa has become more and more difficult (SAMP, 2008). As a result, while the economic stagnation of rural areas continues to push men into migration, financial returns to this migration

become ever less stable and predictable leading to an increasing socioeconomic inequality in rural society (De Vletter, 2007).

There are some studies that have examined the association between labor migration and health outcomes of children in sending areas (Creighton, Goldman, Teruel, & Rubalcava, 2011; Frank & Hummer, 2002; Kanaiaupuni & Donato, 1999; Schmeer, 2009), but this developing research has yet to reach consensus. An important innovation of this paper is in going beyond the simple dichotomy of migrant versus non-migrant. In considering the impact of men's migration on the well-being of their non-migrating household members, including survival and health of their children, a simple migrant versus non-migrant comparison obscures the uncertainties of the migration process and may also be a contributor to conflicting results in the prior literature. Instead, a refined measure of men's migration experience, based on its success or failure, is needed to gain a clear assessment of its impact upon child mortality and other family outcomes.

We develop our hypotheses by conceptualizing male labor migration as a household-level, rather than an individual-level, decision, which is consistent with a new economics of migration approach (Massey et al., 1993). An important feature of this approach is that the costs and benefits of migration are evaluated not only by the individual migrant, but by others who are affected by the migration decision, e.g., family and household members (Massey et al., 1993). We refine our migration categories based not only on the migrant's behavior, but we also include information about the sending household's characteristics and the labor migration's success or failure.

Hypotheses

There can be divergent hypotheses of the association between men's labor migration and child mortality. Thus there are several reasons why we hypothesize a positive association between men's labor migration and child mortality (i.e., higher rates of mortality among children of male labor migrants). An absence of a household member often puts strain on the remaining members to organize, manage, and run the household. In this rural Mozambique setting, women's autonomy can be quite low, and women must often ask permission for routine, daily household activities, such as purchases, to visit markets, and to seek medical care. Thus in the husband's absence, these decisions are often left to the wife. Although this autonomy may have beneficial aspects, there is some evidence that it is also accompanied by strain due to increased, new responsibilities (Yabiku et al., 2010). The negative consequences of male absence have been documented in other settings, as well. For example, using multilevel longitudinal analysis of data from Mexico, Kanaiaupuni and Donato (1999) argue that the effect of migration on the risk of death is a complex process – at the initial stage, as larger numbers of community residents migrated, infant mortality increased in sending areas. In later periods, infant mortality improved with increasing remittances (Kanaiaupuni & Donato, 1999). Schmeer (2009) found that father absence due to migration was associated with higher levels of child sickness. There is no guarantee that the financial successes of labor migration and the expected remittances will outweigh the drawbacks of male absence from the household. Several authors have reported, for example, that among thousands of undocumented, less educated and farm working foreign labor migrants in South Africa, many are barely able to remit to their families left behind (Bloch, 2008; Crush, 1999; Crush, Williams, & Peberdy, 2005; De Vletter, 2007).

There are also good reasons why we hypothesize that men's labor migration would be negatively associated with child mortality, i.e., the children of migrant men have lower rates of mortality. First, the main reason men engage in labor migration is

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