Immigrant women’s occupational struggles during the socioeconomic crisis in Spain: Broadening occupational justice conceptualization

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**ABSTRACT**

Occupational scientists claim that further development of the concept of occupational justice is needed to enact the discipline’s commitment to social transformation. We argue that immigrant women’s experiences of occupations in Spain can contribute to this dialogue. Although research on occupations after migration has expanded internationally, limited studies have adopted a critical stance towards health and occupation simultaneously. Thus, we propose that advancing understanding of immigrant women’s experiences of daily participation in occupations and identifying health/well-being mediators to generate actions to promote health from a critical perspective might advance the conceptualization of occupational justice. A participatory health research study informed by Epistemologies of the South was undertaken with six women from Latin America. Data were generated through group discussion, interviews, diaries and Metaplan. A critical narrative analysis and a participatory thematic analysis were performed. Immigrant women's daily life in Spain (shared trajectories and experiences, occupational struggles, and health and well-being mediators and consequences) and an Agenda for change set by the participants (Daily challenges to overcome and possible formula to improve daily living) are reported. Findings are aligned with previous research revealing similar threats to occupational rights, impact on health and the strategies used to navigate both. New insights from the findings expand occupational justice conceptualization, portraying how structural elements such as class, gender and ethnicity shape occupational opportunities which create daily injustices negotiated through occupations, namely occupational struggles. These occupational struggles impact both
negatively and positively on well-being. A specific action agenda towards occupational justice is recommended by the participants.

**KEYWORDS:** Immigrants; Social determinants of health; Participatory health research; Health promotion; Metaplan

Over the previous decades, critical perspectives have been voiced internationally to approach global population inequities from an occupational perspective and contribute to social transformation towards a more just world. In order to do so, scholars emphasized the need to better understand the role of contextual elements, such as the social, political and cultural, that influence access and participation in occupations, health and well-being (Bruggen, 2014; Whiteford & Hocking, 2012).

The concept of occupational justice has served to successfully articulate those critical perspectives worldwide (Durocher, Gibson, & Rappolt, 2014) and expand occupational science and occupational therapy scopes (Hocking, Jones, & Reed, 2015; Whiteford & Hocking, 2012). Nevertheless, further theoretical development and empirical examples have been identified as crucial to advancing this concept and enacting occupational science’s emancipatory agenda (Durocher et al., 2014; Gupta, 2016). We argue that the example of immigrant women’s experiences of daily occupations in Spain during the socioeconomic crisis could contribute to this development.

**Latin American Women in Spain: Domestic Work and Health**

Worldwide, 244 million people are classified as international migrants, with Europe being the dominant destination with 76 million immigrants. In the last 15 years, Spain has become one of the 20 countries with the largest number of immigrants, having received more than 4 million people (United Nations, 2016). People from Latin America comprised the largest group, representing 12% of the population in 2008 at the onset of the socioeconomic crisis (Izquierdo & Martínez-Buján, 2014). This outstanding expansion was related to the Spanish economy’s rapid growth between 1994 and 2007,
which created new work niches, such as domestic service for women and the construction sector for men, as well as the cultural and linguistic proximity and administrative ties between Latin American countries and Spain (Colectivo Ioé, 2013; Izquierdo & Martínez-Buján, 2014). The impact of the global economic recession precipitated the disappearance of 3.7 million jobs in the first half of 2013 alone, with immigrants being the group that most frequently lost their jobs. This has triggered situations of vulnerability such as increasing poverty rates (from 36.1% to 43.5%), lower incomes and unexpected irregular administrative situations (suddenly being “illegal”) due to losing work contracts (Colectivo Ioé, 2013).

In this study we focus on Latin American immigrant women working in domestic service since this social position, in combination with the socioeconomic climate, could create vulnerable situations that pose specific challenges for these women's well-being and occupational rights. In 2012, 54.3% of people working in the domestic service, which includes cleaning and/or care-giving in a private home, were immigrant women (Briones-Vozmediano et al., 2013). This over-representation has been related to triple discrimination based on gender, ethnicity and class: domestic service jobs are associated with feminine roles and are deemed to be unattractive by the local population. Further, some stereotypes associated to being a woman from Latin America, such as being compliant or caring, or the linguistic proximity, as Spanish speakers, contribute to this over-representation (Izquierdo & Martínez-Buján, 2014; Parella-Rubio, 2005). The low social position of immigrant domestic workers could be expected to impact their well-being, according to the Social Determinants of Health Framework (Solar & Irwin, 2010). The lower one’s location is in the social gradient, the more people face “exposure and vulnerability to health-compromising conditions” (Solar & Irwin, 2010, p. 46). Subsequently, it has been reported that, between 2005 and 2009, being female, an immigrant and working in this sector in Spain negatively impacted quality of life, mainly due to factors linked to the migration process and poor working conditions (Bover et al., 2015). Currently, these working conditions are likely to be even harder, due to the persistence of the socioeconomic crisis.
Perspectives of Occupation-based Research on Immigrants’ Daily Lives

Paradoxically, despite the rise of studies on post-migration occupations, literature focusing concurrently on immigrants’ occupations and health, especially from a critical perspective that could advance the concept of occupational justice, is limited. Usually, occupation-based research has focused on the settlement process or the relationship between occupation and culture. For instance, authors have described how occupations evolve after migration (Bennett, Scornaiencki, Brzozowski, Denis, & Magalhães, 2012) or the strategies used to participate in occupations, explaining how these facilitate resettlement (Nayar & Sterling, 2013). Researchers have also explored how family-orchestrated occupations are used to navigate multiple identities and cultures (Farias & Asaba, 2013), or the intersections between identity, occupation and place when participating in music-making within a religious context (Adrian, 2013). Other researchers have explored occupations as a way to understand multifaceted contexts for migrants, for example seeking to better grasp the occupational engagement experiences of Chileans who suffered human rights violations and migrated to Sweden during or after the military rule in Chile (Mondaca & Josephsson, 2013).

The relationship between health and occupation after migration has received some attention. For example, Krishnagiri, Fuller, Ruda, and Diwan (2013) studied how elder Asian immigrants in the US participate in occupations such as reading, meeting friends or practicing yoga to maintain well-being. Challenging the concept of the successful integration of Francophone immigrants in Canada also led Huot, Laliberte-Rudman, Dodson, and Magalhães (2013) to a detailed mapping of daily occupations from a critical position. However, those studies seem to be exceptions. Thus, we proposed that a critical conception of health, migration and occupation, when approaching immigrant women in Spain, could advance the conceptualization of occupational justice. Further, exploring possible actions to promote health and well-being in these situations could contribute to envisioning how occupational justice might be enacted. Consequently, this study aimed to advance the understanding of immigrant women’s experiences of daily participation in occupations and to identify health/well-being mediators to generate actions to promote health and wellbeing, from a critical perspective.
Methods

A participatory health research study (International Collaboration for Participatory Health Research, ICHPR, 2013) was conducted. Critical epistemologies (Farias, Laliberte-Rudman, & Magalhães, 2016), methodologies and theories are essential to unveil the role of power issues and contextual elements in the creation and maintenance of occupational injustices (Laliberte-Rudman, 2012). Specifically, Santos’ (2014) views informed the methodology. As Santos stated, asymmetrical social power relationships are rooted in capitalism and colonialism, both very much alive in today's global society. These dynamics operate from what Santos named abyssal thinking, characterized by constructing visible and invisible lines within knowledge, according to hegemonic structures, silencing everything that is not attuned to the interests of capitalism and colonialism, thereby producing absences. Therefore, to Santos, social justice could only be achieved if there was cognitive justice. As such, Santos proposed the Epistemologies of the South to achieve justice. The global South is thus not a geographical concept. The South is “rather a metaphor of the human suffering caused by capitalism and colonialism at the global level, and a metaphor as well of the resistance to overcome or minimize such suffering” (Santos, 2011, p. 11). It is of special relevance that those plural “knowledges” and social actors invisibilized by abyssal thinking may be equally legitimized and valued through what Santos named an ecology of knowledges (Santos, 2011, p. 18).

Santos’ standpoint clarifies how the vulnerable situations in which immigrant women live in Spain may evidence power dynamics present in the Global South. Therefore, these women and their knowledges, often made absent, should reappear to enact justice. Thus, a participatory health research methodology that seeks to co-create participative knowledge with the participants to transform their situation (ICPHR, 2013) resonates with Santos’ propositions and is an asset to achieve the study’s main purpose.

Place, Context and Means to Study these Women’s Everyday Occupations

This study was conducted in Galicia, Spain, between 2012 and 2015. Different recruitment strategies were used to contact immigrant women who met the inclusion criteria (see Table 1): Two women agreed to participate via briefings, three via gatekeepers and one via snowball strategies.
Table 1. Inclusion criteria

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Female</td>
<td>• Gender</td>
</tr>
<tr>
<td>• From Latin America</td>
<td>• Ethnicity</td>
</tr>
<tr>
<td>• Is or was engaged in domestic employment, or searching for employment in domestic service</td>
<td>• Class</td>
</tr>
<tr>
<td>• Has asked for support from social services or other social caring entities</td>
<td>• Indicator of a vulnerable situation that challenged well-being and occupational rights</td>
</tr>
</tbody>
</table>

Participants

Six women from Latin America, aged between 36 and 42 years old, participated in the study. Two of them had a university education, three had vocational education, and one secondary education. Four of them had one or two children. Two participants were married and three divorced. Two were in irregular administrative situations. All of them were working, had worked and/or were searching for a job in domestic service. Five of the participants had been in Spain between 8 and 14 years, and one more than 1 year.

Data generation

Data were generated using the four techniques listed in Table 2. First a group discussion was used to collectively generate data about the participants’ shared understandings of their daily life as domestic workers. This information was deepened with semi-structured individual interviews and personal diaries inspired by Krishnagiri et al. (2013). Both techniques aimed to create opportunities for participants to share their experiences of daily occupations as well as health and well-being while performing them. Interviews were conducted at a time and place convenient to the participants. Some of the locations were public parks, shelters, cafes, and rarely at private homes. During the field work, we
became very aware that participation in data collection strategies should remain flexible as participants’ daily occupations and demands changed abruptly. Although this flexibility was consistent with participatory health research, we established a minimum of participation in two of the data generation activities, as this would ensure a level of richness and depth. The mean time of the interviews was 1 hour and diaries varied from 1 to 20 pages.

<table>
<thead>
<tr>
<th>Technique</th>
<th>Examples of questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group discussion (GD) and Interview (I)</td>
<td>If we had to write a book about the daily life of a woman who immigrated from Latin America to Spain and works or has worked in domestic service, what should we include? How would you describe what a woman in this situation does in a week? What other things does she do in her daily life?</td>
</tr>
<tr>
<td>Personal diary (D)</td>
<td>We would like to know what you do and how you feel on a regular weekday and on a weekend day?</td>
</tr>
<tr>
<td>Metaplan (M)</td>
<td>What are the difficulties that we, who migrated from Latin America to Spain, face in our daily lives?</td>
</tr>
</tbody>
</table>

Finally, we used a group facilitation tool named Metaplan to collaboratively find alternatives for action to change participants’ situation by a permanent visualization of the discussion (Hughes, Saadi, Madoz, & Gonzalez, 2009). During this activity, participants individually wrote their answers to the trigger question (table 2) on paper cards. The researcher read the cards to the group and displayed them on a canvas. Participants decided how to cluster the cards according to their similarities. Then they further elaborated on the content of the clusters using more individual cards, and named the clusters. Using stickers, participants weighted the clusters (the more important the issue described in one cluster, the more stickers it would get), choosing three to be tackled. Then, for each one of the three prioritized issues, participants agreed on actions
that could be performed to improve the situation, repeating the process with the paper cards. Finally, these actions were categorized as achievable or difficult to achieve.

**Data analysis**

Data from the group discussions, interviews and diaries were analysed using critical narrative analysis (Chase, 2005). *Participatory thematic analysis* occurred during the *Metaplan*.

An individual occupational narrative was created for each participant by reading the transcripts and searching for relevant events that illustrated their occupational lives, and health and well-being mediators. Thus, we searched for contextual and personal elements that promoted or hindered participants’ physical, mental or social well-being. We were interested in aspects such as living and working conditions, personal strategies to navigate their context or interpersonal relationships, among others (Gastaldo, Carrasco, & Magalhães, 2012). Once the six narratives were created, a cross-sectional analysis was performed to search for the common threads amongst them. For that, we codified the raw data, being mindful of the socio-political and economic factors as well as power relations that could impact participants’ occupations, health and well-being. We looked for similarities amongst the codes. During this dialogical process, we came back to the individual narratives to retain the context and meaning of participants’ lives within the emergent themes. Atlas-Ti v.7® was used to support the creation of these cross-sectional themes, named *Immigrant women's daily life in Spain*.

Data generation and analysis were performed simultaneously during the Metaplan. The steps performed (individual cards, assembling them by similarities, further elaboration and interpretation, and naming the clusters) resonate with thematic analysis (Vaismoradi, Turunen, & Bondas, 2013). As it was carried out by the participants, we denominated this process a *participatory thematic analysis* that resulted in what we called *Agenda for change*. This session was audio recorded and transcribed to illustrate participants’ interpretations of the themes.
Trustworthiness

To enhance credibility and plausibility, we kept consistency between our theory, methodology and methods. We performed the steps taken in the critical narrative analysis several times, searching for nuances within the contextualized individual narratives. Coherence between the cross-sectional themes and the Metaplan findings also supports the study’s trustworthiness. The use of different data generation techniques enhances the study’s plausibility (Polkinghorne, 2007). The research process was conducted in Spanish, the native language of the first author and participants. English translations of quotations were double-checked by the three authors, advanced users of both languages.

Ethics

The study was approved by the ethics committee at the University of A Coruna. Informed consent was obtained prior to data gathering and throughout the study (continuous consent). Personal information has been disguised and pseudonyms are used to ensure confidentiality. During fieldwork, the first author emphasized how participants’ anonymity would be ensured, and clarified withdrawal opportunities and strategies to manage emotional distress, for example phone calls after highly sensitive meetings to support participants’ stability. Consistent with our epistemological position, reciprocity was explored to keep the relationship with participants as horizontal as possible. Therefore, some participants requested advice regarding complex situations they were facing. Services and professionals that could help participants were identified and referrals made.

Results

The data analysis yielded three cross-sectional themes and related subthemes, articulated as Immigrant women's daily life in Spain, and An agenda for change, set by the participants.
Immigrant women’s daily life in Spain

**Shared trajectories and experiences: Weaving vulnerability situations**

Arriving in Spain meant downward mobility for the participants, as they used to work in positions associated with their education levels (e.g. accountant) or other jobs outside domestic service in their home country. Once in Spain, participants suffered different types of gender violence, either related to their intimate partners: “[he] set fire to our house, he wanted to kill us [her and her child]” (Elena_I, 2013); “I was a victim of harassment by my ex-partner” (Ana_D, 2014), in their jobs, or both. For instance, a potential employer asked Elena to live in his home to work, but at night “I should go to bed with him: [What] disrespect!” (Elena_I, 2013). She refused the job. Participants also described how the economic crisis had worsened their circumstances, forcing them to accept hard working conditions in the domestic sector (later elaborated), which was the only real option available for work in Spain, as they have experienced throughout the years.

“They [employers] tell you, ‘You have to be at my disposal’. It is like, like saying, ‘you have to be here enslaved, to do what I say’. To what, of course, you have no job, you have nothing, eh, then well, you kind of accept it.” (Lucía_I, 2014)

Ana summarized the context as “the fact of being a woman, single mother, with limited resources and in many cases with none, the best definition is vulnerability. Society sees in these situations the very tempting possibility of exploitation” (Ana_D, 2014).

**Occupational struggles in daily life**

**Productive occupations: Working in the domestic service and the “survival route”**

These were the two major clusters of productive occupations in participants’ daily lives, in which most of these women’s time and energy was spent. Working in this sector was characterized by strenuous and difficult conditions and common experiences of frustration, helplessness and anger.
The husband of the person where I worked eh, ... his underwear was always stained ... on the first day of that [job], the woman arrives and tells me ... ‘you have to wash it by hand’ and, and what?! but ‘wash it by hand?’ And I never washed my father’s or my clothes like that! And of course, you have to humiliate yourself to do that ... ‘every day the same, get, get up, go to work, work like donkeys, ... every day the same, ... the same feelings, the same impotence, the same anger, but knowing you have nothing ..., no other income, you have to endure, and endure. (Lucia_I, 2014)

The “survival route” details the occupations performed on a regular basis to seek food, clothes, economic aid to pay bills, or employment in the domestic service, provided by social entities (non-governmental organizations, religious institutions, public services, etc.).

The daily life, one tries to look for a job ... [one] goes to the organizations, goes here, goes there .... You go to [entity X], it’s almost the same as [entity Y] ... ‘No, yes. We don’t have [job offers]’ ... then you have to wait. Aha, you have to wait for them to call you, let you know, but in the meantime the days pass by and your need gets sharper, and sharper. (Cristina_I, 2013)

In the survival route, women participate in a daily work schedule, mostly walking from one place to the next because they cannot afford public transportation. When interacting with the professionals or volunteers responsible for these services, participants reported situations of discrimination, lack of empathy and value judgments. “When I divorced, my lawyer, she was 26, and you know what she told me, very bold? ‘This is happening to you because you had your child too young’” (Elena, 2013).

These two clusters were not mutually exclusive. The uncertainty and volatility of the context seem to generate an oscillating movement in which participants, in a short time period and without notice, could go from having to not having a job in domestic service, which meant entering the “route”, or combining both occupations to survive (working in this sector and regularly asking for support) because what they earned was not enough. If
participants had children, they needed to orchestrate these occupations with their children’s obligations: school, doctor appointments, caring, etc.

**Occupations to navigate daily hardship**

Whenever these women could, they participated in other occupations that helped them to navigate these challenges. They participated in occupations with other immigrant female workers with whom they shared values and experiences. They gathered “at her home, in a park, a café and we eat. We talk about how [her week] was” (Elena_I, 2013). When doing these things together, they provided emotional and logistic support to each other, as Elena explained. When her friend was down, she encouraged her: “Well, cheer up! You have to go out, come and talk to them [professionals of an entity]” (Elena_E1, 2013). They shared tips about the best institutions to search for a job, or where they could find other resources (e.g. food). Occupations to “disconnect” or negotiate the everyday hardship were often performed, like watching TV, reading or even lying on a bed. They reflected on how their daily life was about “spending energy, spending energy, here, there, and you do not see that the sun rises. Let me take my … let me take my bed [go to bed]. I spend 2 or 3 days there: [then] ‘Well, to the fight again’” (Cristina_I, 2013). Inversely, some women made an effort to participate in restorative occupations like going for a walk on the beach or playing with their children, which had a powerful positive impact on their well-being: “And to be with them [my kids], that little time I have left … it is a way to de-stress” (Maria, 2012). Finally, transnational occupations were an important part of their daily lives. They connected with their families back home using the internet, writing letters, calling by phone, etc. “I go to the library for an hour, daily, every day in the morning … I talk to my siblings … They think I’m writing from my computer. If they knew I sold the computer in a time of crisis” (Elena, 2013).

**Health and well-being: Mediators and consequences**

Participants shared experiences of pain, muscle aches (mainly work related), physical and emotional fatigue, stress, frustration, despair and anger. Some occupations, previously described, helped participants to function in daily life, such as being with their children
or meeting with friends. Their resilience stood out in their search for ways to survive. As Ana pointed out:

*I have a fighting spirit ... Going with the rhythm of life with no resources but my feet, my back and an attitude of overcoming the struggles to achieve what is proposed ... I am proud to be raising [my kid] with my example, honesty and responsibility.* (Ana_D, 2014)

In terms of social well-being, the occupations in which they participated were situated in peripheral spaces of society, limiting opportunities for social inclusion. For example, their job opportunities were linked to domestic service, or their social networks mostly included other immigrant women in similar situations. María captured these interconnections as follows:

*Coming from so far to work and to see so many things, so much suffering ... I did not see it right, and put on a scale, my family ... I, and if it was worth working, if money was everything, what about my health? Nobody knows at night, when I sleep, my hand bones ache, my legs and so on ... I stand in silence ..., sometimes I feel lonely.* (María_I, 2014)

**An agenda for change**

During the Metaplan, participants first described what they named *Daily challenges to overcome*, then prioritized three main challenges, and associated *Possible formula to improve daily living*.

Participants identified six common challenges that summarized their daily difficulties (Table 3). Although disconnected in the table, participants highlighted that these challenges need to be understood as interrelated. For example, not having extended family or other close people to take care of their children when they work was identified as an emotional difficulty. It also impacted their job opportunities, identified as *employment difficulties and scarcity of resources*: they need to combine their jobs with taking care of their children, which is not always possible due to time or resources constrains. Similarly, racism is connected to employment: “the Latin stereotype, if you are from South
“America ... men are all drunk and women are for something else ... sex” (Ana_M, 2015). This will have consequences at work: “if you go to work to a house [domestic service] and ... you have to be with the Mr. ... uff ... my God! The guy is always going to want to put his hand on your buttock” (Ana_M, 2015). At the same time, participants emphasize that all these challenges have negative consequences for their self-esteem.

<table>
<thead>
<tr>
<th>Theme</th>
<th>Priorities (number of stickers)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment difficulties and few resources</td>
<td>10</td>
</tr>
<tr>
<td>Emotional difficulties</td>
<td>5</td>
</tr>
<tr>
<td>Language problems, lack of knowledge of context</td>
<td>3</td>
</tr>
<tr>
<td>Racism</td>
<td>0</td>
</tr>
<tr>
<td>Acceptance</td>
<td>0</td>
</tr>
<tr>
<td>Uncertainty</td>
<td>0</td>
</tr>
</tbody>
</table>

Therefore, when they prioritized the challenges to tackle and suggested actions to promote their well-being (Table 4), participants hoped for a domino effect: changing these areas would improve several layers of the challenges that negatively impact their well-being. Thus, most of the alternatives they proposed signpost actions that foster opportunities for them. For instance, they suggested the municipality could hire people that have difficulties in the current market, “such as women victims of abuse, evicted, single mothers” (Elena, M_2015), or provide better access to information and communication technologies in public spaces, such as libraries, for example increasing available hours “if it was open on Sunday afternoon, when I am free” (Ana_M, 2015), or making professionals in social services more aware that each one of the women they talk to is different and has singular strengths and needs, instead of throwing at them: “you do not
have job of this [participant expertise] but we are going to send you to work as a domestic worker” (Ana_M, 2015).

**Table 4.** Metaplan results, second part

<table>
<thead>
<tr>
<th>Prioritized challenges</th>
<th>Achievable</th>
<th>Difficult</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment difficulties and few resources</td>
<td>Personalized itineraries by social care professionals</td>
<td>The municipality shall employ single mothers, parents with difficulties</td>
</tr>
<tr>
<td></td>
<td>Volunteers to track support programs and plans</td>
<td>Training programs for employment and self-employment from municipalities</td>
</tr>
<tr>
<td></td>
<td>Protected jobs in each municipality</td>
<td></td>
</tr>
<tr>
<td>Emotional difficulties</td>
<td>Improve access to information and communication</td>
<td>Own folk activities</td>
</tr>
<tr>
<td></td>
<td>Technologies to connect with all, with family and other</td>
<td>Spanish-Latino conversation spaces</td>
</tr>
<tr>
<td>Language problems, lack of knowledge of context</td>
<td>Volunteers informally teaching</td>
<td>Galician language courses: better access and more quantity</td>
</tr>
</tbody>
</table>

**Discussion**

The cross-sectional themes *Immigrant women’s daily life in Spain* and the *Agenda for change* illustrate these women’s experiences of occupations, health/well-being mediators and directions to promote health in this context. These findings are aligned with previous occupational science literature, suggesting a common space for participation in occupations for migrants. The results also brought new insights that expand how occupational justice is conceptualized.
Migrating: Occupations in the Global South?

We suggest that the Global South (Santos, 2011, 2014) evidences the context of migrants’ occupations reported in occupational science literature due to the similarities between our findings and previous research. This study reports on the process of downward mobility, both work-related and social, that the participants experienced after migration. This is in line, for example, with what people from non-English speaking countries experience when migrating to New Zealand, such as multiple barriers to the accreditation of their credentials as health professionals which results in them working in positions below their abilities (e.g. taxi driver) (Mpofu & Hocking, 2013).

The complexity of orchestrating their occupational repertoire described in the findings likewise matches earlier studies. The lack of a support network (e.g. extended family), and especially the division of occupations by gender within families (e.g. women as responsible for childcare) impacts their negotiation of daily occupations, generating a great intricacy (Dyck, 1993; Nayar & Sterling, 2013; Suto, 2009, 2013). Thus, immigrant women with higher education in Canada are, in their new context, responsible for cooking, cleaning or caring for their children, as well as participating in occupations for settlement or working part-time (those who are not unemployed), which creates stress in their daily lives (Suto, 2009, 2013). Likewise, in New Zealand, the lack of support and the need to find a job compels participating women to adapt to the available occupations (Nayar, Hocking, & Giddings, 2012). This is not, however, a recent phenomenon. More than 20 years ago Dyck (1993) reported on the difficulties encountered by immigrant women in reconciling low-status or precarious jobs with childcare in a context of the gender division of family responsibilities.

Participation in precarious employment in contexts of vulnerability impacts the health and well-being of immigrants in a comparable way. For instance, the participants of this study felt exploited, humiliated, impotent and angry about the conditions of their jobs. Nevertheless, they were forced to assent to demeaning circumstances, such as irregular administrative situations or the impossibility of accessing other jobs due to discrimination. These perceptions of exploitation and its subsequent impact on the mental health of immigrants have been highlighted in literature. For example, Bailliard (2013) reported the occupational injustice experienced by undocumented Latin American immigrants in the United States, including situations of exploitation at work, accentuated
by economic recession: greater workloads for less money, combined with the constant threat that others will take the job if the person fights back. This has repercussions on the mental health of immigrants, who explain that they feel they lose their dignity or that these jobs are “psychological slavery” (Bailliard, 2013, p. 350).

Parallel to these experiences, our results illustrate how the participants took part in some occupations that helped them navigate this hardship. One strategy was to meet other immigrant women with whom they shared values and experiences. These occupations, in which immigrants participate with other immigrants, have been widely reported. Participating in these occupations serves to maintain values and traditions (Farias & Asaba, 2013) or contributes to gaining comfort in a context in which occupations are challenging, since the context, implicit norms (Nayar & Sterling, 2013) and language (Wright-St Clair & Nayar, 2017) of the new environment are unknown. At other times these occupations provide the necessary emotional and logistical support in a complex day-to-day life (Dyck, 1993; Peralta-Catipon, 2009).

Therefore, despite differences in the geographical contexts where the studies have taken place, migrants report common trends: threats to occupational rights in daily life (related to downward mobility, complexity in orchestrating occupations and health and well-being repercussions) and similar uses of occupation to cope with harsh environments. These circumstances led us to suggest that the common ground of these occupations is the Global South, “not [as] a geographical concept [but as] a metaphor of human suffering caused by capitalism and colonialism and resistance to overcome or minimize it” (Santos, 2011, p. 35).

**Broadening occupational justice conceptualization: Lessons learnt from immigrant women in Spain**

We argue that the theoretical perspective adopted in this study and its results contribute to broadening occupational justice conceptualization. To support this argument, we articulate recent identified areas for occupational justice development with new insights provided by our findings, in three interrelated levels that will be elaborated throughout the section: overcoming individual foci, challenging a unidirectional relationship between occupational justice or injustice and health and proposing specific actions to work towards occupational justice.
A context based approach to participation in occupations

Scholars have contended that further development of occupational justice conceptualization and its contributions towards social transformation can only be achieved when overcoming the individual foci that dominates the studies of occupational justice (Bruggen, 2014; Farias et al., 2016; Gerlach, Teachman, Laliberte-Rudman, Aldrich, & Huot, 2017; Gupta, 2016; Hocking, 2017). This research contributes to this ongoing dialogue by unpacking how occupational opportunities for these women are shaped by the context. As elaborated in the introduction, the type of work they perform or seek is available for participants as the result of global (i.e. migration) and local (i.e. labour market in Spain) social constraints. In fact, results show how this job sector was perceived as almost the only real possibility of labour insertion available to them, which is consistent with Vidal-Coso and Vilhena's (2015) findings: Most Latin American women working in this sector have not been able to achieve upward labour mobility during the economic crisis in Spain.

However, this lack of perceived opportunities in Spain differs greatly from what is perceived in other geographical locations, such as Canada (Suto, 2009). According to the participants, the lack of opportunities in Spain is linked to the context of the socioeconomic crisis that has been going on since 2008, which has exacerbated the discrimination towards them. Furthermore, structural violence linked to being a woman (gender), having a precarious job (class) and being an immigrant (ethnicity) (e.g. racism in everyday life, employer proposals linked to prostitution, exploitation in jobs, oppression by professionals, gender violence, etc.) not only provides limited space to participate in productive occupations, but also in other occupations (e.g. limited available time, insufficient economic resources, discrimination, difficulties with orchestrating occupations or extenuation, among others).

Occupational justice and health: Insights from immigrant women’s occupational struggles

Gupta (2016) claimed that the relationship of occupation, health and well-being needs to be further investigated to embrace the potential of occupational justice to contribute to social transformation. Occupational justice is frequently presented as promoting health and well-being, while occupational injustice is interpreted as health compromising...
(Wilcock, 2006; Wilcock & Hocking, 2015; Wilcock & Townsend, 2013). Where these understandings are widely accepted in the occupational science community, the present findings suggest that this apparent unidirectional relationship can be problematized. Within the described challenging societal space available, occupational struggles in daily life illustrate how structural elements such as gender, class and ethnicity can be identified as weavers of spaces where inequities and injustice are created (e.g. productive occupations) but also contested (e.g. occupations to navigate daily hardship). This is in line with Angell’s (2014) proposal: An analysis focused on occupation is useful to visualize how occupation can constitute a site of resistance or reproduction of the status quo. In this case, some of the participants’ strategies to thrive and challenge the status quo are negotiated when participating or offered engagement in denigrating occupations (e.g. refusal to sleep with a potential employer), while others are occupations per se that help them to navigate this compromising milieu. When further analysing the relationship of these tensions with health, our findings show how participation in occupations that make occupational rights vulnerable, such as working in precarious jobs, negatively impacts on health and well-being (e.g. frustration or desperation). Similar issues have been reported about undocumented Latin American workers in the Great Toronto area (Gastaldo et al., 2012). Yet, in this study, participants were aware of their strengths to survive in such adverse circumstances, which positively impacted their self-perception and increased their pride (e.g. “fighting spirit”). Conversely, occupations that promoted well-being, such as the women’s meetings, were performed in limited peripheral social spaces that prevented participants from fully engaging in the new society. This negatively impacted their health and well-being by prompting isolation, loneliness or limited opportunities to prosper, among others, and preventing further societal gains associated with inclusive communities (Solar & Irwin, 2010). Thus, for these participants, the mechanisms by which occupational struggles impacted on health and well-being are complex, multilayered and even contradictory.

Immigrant women’s agenda: “Unblocking” an occupational science contribution to social transformation

Hocking (2017) argued that an occupational understanding of injustice is an asset for social transformation as it makes tangible people’s “immediate and intergenerational suffering” (p. 41). Despite occupational science potentialities, researchers have identified
the difficulties inherent in moving beyond commitment to real life action (Farias et al., 2016; Magalhães, 2012): “it seems that we are ‘stuck’ in our ability to move forward” (Farias et al., 2016, p. 23). Critical theorizing and critical epistemologies have been identified as essential to the study of complex social issues and occupational injustice (Farias et al., 2016; Gerlach et al., 2017). Consistently, in this study, we have unpacked how to identify strategies towards occupational justice by working with the communities. Specifically, most of participants’ suggested actions to tackle their occupational struggles and promote their well-being were linked to political actions. For example, working with the local government to foster better occupational opportunities for people living in similar circumstances (“the municipality shall employ single mothers”, M, 2015). This suggestion supports previous work that signposts the social arena as one of the most suitable tactical positions from which an occupational approach could contribute to social transformation (Gerlach et al., 2017; Huot et al., 2013; Pollard, Sakellariou, & Kronenberg, 2008; Wilcock & Hocking, 2015).

Overall, these limited occupational opportunities, which shape participants’ occupational struggles, and the tensions within their daily negotiation, situate the participants’ proposed agenda for change. This enables an exploration of how acting in the social arena, from an occupational perspective, is linked to promoting health and well-being.

**Strengths and limitations**

Despite precautions, during the field work, data generation activities were affected by complications related to participants’ difficulties in anticipating and planning their occupations, as well as the resources available (e.g. some had no housing arrangements). These stories are composed of sensitive and complex information that might have been more propitiously elaborated in other conditions (Polkinghorne, 2007): more time, spaces in which they were more comfortable, safer places, etc. Although the findings might differ from experiences lived in other contexts (in Spain or abroad), they allowed a better understanding of the complexities of this precise context, which may inform actions for change (ICPHR, 2013). Another strength of the study is the participants’ commitment to telling their stories. Despite the volatility of these women’s daily lives, there was a strong motivation to share experiences to change their realities. The participatory design and the flexibility of the methodology used (ICPHR, 2013) enabled this commitment to take
form. Consistently, the Metaplan stimulated a participatory dialogue and supported participants to generate diverse and consensual information and strategies for change.

**Conclusion**

Immigrant women’s occupational struggles in daily life during the socioeconomic crisis in Spain expand the conceptualisation of occupational justice by illustrating how global and local social phenomena (i.e. migration), as well as structural elements (class, gender and ethnicity) provide limited occupational opportunities. These occupational opportunities constitute the fabric of daily injustices that are suffered, negotiated and resisted through occupations, namely *occupational struggles*. These occupational struggles simultaneously impact negatively (i.e. physical aches, desperation or exclusion) and positively (i.e. self-efficacy, agency) in participants’ health and well-being. Lastly, these occupational struggles situate participants’ agenda, which shows specific strategies to work towards occupational justice and unravel how political actions, from an occupational perspective, might promote health and well-being.

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