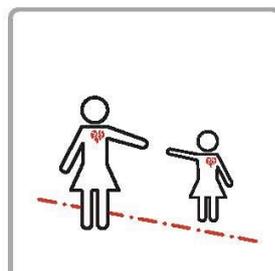
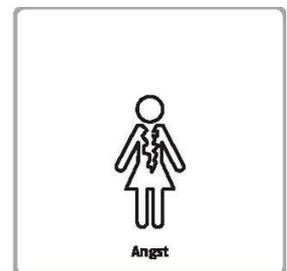
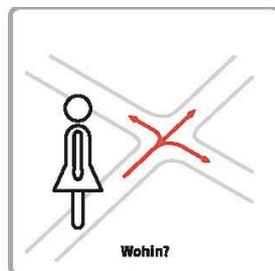


Feministisches Geo-RundMail

Informationen rund um feministische Geographie

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Quelle: http://www.migrantas.org/web_migrantas_deutsch.html

Themenheft:
Migration

Liebe Leser_innen,

mit etwas Verspätung liegt diese Ausgabe der Feministischen Geo-RundMail zum Thema Migration vor. Migration ist ein Kernthema von Feministischer Forschung und auch von Geographischer Forschung. Weltweit sind heute mehr Leute transnational unterwegs als in den letzten Jahrzehnten. Momentan wird viel über spezifische Migrationsbewegungen gesprochen: Wir sprechen über Flucht. Wir sprechen über ‚brain drain‘. Wir sprechen über temporäre, nachfrageorientierte und unabhängige Arbeitsmigration. Wir sprechen über Bewegungen innerhalb der Europäischen Union. Wir sprechen über Menschenhandel. Wir sprechen über undokumentierte Migrant*innen. Wir sprechen über globale Wanderung aus dem sogenannten globalen Süden in den globalen Norden. Entweder formell oder informell, entweder legal oder illegal. Migration ist eine Normalität in unserer Zeit.

Gender ist dabei ein zentrales Thema – in Bezug auf alle Formen, Gründe und Auswirkungen der Migration. Gender beeinflusst die Gründe für die Migration, wer auswandert und wer bleibt, die sozialen Netzwerke, die Migrant*innen benutzen, um auszuwandern, Integrationserfahrungen und Arbeitsmöglichkeiten im Einwanderungsland und die Beziehungen mit dem Herkunftsland. Das heißt: Geschlecht gestaltet jede Ebene von Migrationserfahrungen und ihre Machtdynamiken. Dieses Thema erzeugt gerade deswegen neue Fragen, neue Handlungsmöglichkeiten und neue Bedürfnisse im Hinblick auf ihre geschlechtsspezifischen Aspekte.

Mit diesem Heft (und auch in dem CFP) habe ich keine spezifischen Schwerpunkte gesetzt oder Fragen gestellt, weil ich Erweiterungen, neue Themen und Stichwörter und frische Perspektiven mit diesem Thema entdecken wollte. Ob die (geschlechtsspezifische) Migrationsforschung neue Perspektiven gefunden hat oder ob sie neue Definitionen entwickelt hat oder wo die Erweiterungsmöglichkeiten liegen. Ich wollte diese Antworten durch die Beiträge erfahren und verstehen. Dieses Themenheft hat den Fokus auf aktuelle Forschungen oder Bewegungen mit unterschiedlichen Fragestellungen und Perspektiven über (geschlechtsspezifische) Migration auf die oben genannten Fragen

anzusprechen oder um einen inter- und transdisziplinären Austausch möglich zu machen und weiter zu diskutieren.

Christian Berndt, Huey Shy Chau, Katharina Pelzelmayer und Karin Schwiter erklären in ihrem Beitrag wie *care agencies* eine große Rolle als Vermittler mit der grenzübergreifenden Mobilisation der Arbeitsmigration spielt und wie die transnationale Mobilisation der Sorgearbeiterinnen* erfolgt. Heidi Kaspar zeigt in ihrem Beitrag eine andere Perspektive auf Sorgearbeitsmobilität in der Welt: wie alte Leute aus dem Norden in den Süden gehen, um günstige Pflege zu erhalten und wie dadurch gängige globale Sorge/Care-Ketten umgekehrt geworden sind. Alexandru Firu, Richard Bůžek und Olena Mankivska legen den Fokus auf „care-drain“ und ihre Auswirkungen auf zurückgelassene (alte) Leute in Rumänien, die folglich eine soziale Marginalisierung erleben. Hans Peter Hahn und Friedemann Neumann berichten über Ihr Projekt „Mobile Welten“ und die Rolle der materiellen Kultur und ihrer Interaktion im transkulturellen Kontext mit alltäglichen Praktiken und Begegnungen. Weiter stellt Friedemann Neumann vor wie alltägliche Dinge sehr wichtig im post-migrantischen Kontext sind und gibt ein Beispiel, dass eine *Kitchenette* wie ein Emanzipationsraum für sie, aber eine Konflikts-Sphäre in Bezug auf ihre Beziehungen mit ihrer Familie geworden ist. Elif Cigdem Artan erklärt wie eine Migrantinnenselbstorganisation (Bundesverband der Migrantinnen in Deutschland) ihre partizipatorische Ausstellung durchgeführt hat, um ihre Erfahrungen und das alltägliche Leben im post-migrantischen Kontext zu visualisieren. Abschließend zeigt Carsten Blecher wie Fußball in der Gesellschaft sowohl als Instrument für Integration wirken kann als auch Ausgrenzung schaffen kann.

Ich danke herzlich allen Autor*innen für ihre Beiträge und wünsche viel Spaß beim Lesen!

Duygu Bräuer (geb. Aloglu), Berlin

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Themenschwerpunkt Migration

Beiträge zum Themenschwerpunkt

Christian Berndt, Huey Shy Chau, Katharina Pelzelmayer and Karin Schwiter, Zürich

Exploring care agencies as key drivers of the circular migration of live-in care workers

Our 4-year project '*care markets: the role of care agencies in the commodification of elderly care*', funded by the Swiss National Science Foundation, gave us the opportunity to explore the circular migration of live-in care workers to German-speaking Switzerland. In the following sections, we first give a brief overview of the project and then summarise the findings of the two PhD dissertations of Katharina Pelzelmayer and Huey Shy Chau which originated from the project.

The 'care markets' project

Every day, women move in and out of Switzerland in order to provide care for the elderly. Enabled by the bilateral agreement of the Free Movement of Persons with the European Union, which came into full effect in 2011, these women provide care of the elderly in all-inclusive, around-the-clock packages: so-called 24-hour care. They are recruited by private sector agencies which market care services that promise the presence of a care-worker in their private homes at all hours of the day. The care-workers, mainly women from Poland, Slovakia and Hungary, generally work for two to twelve weeks at a time, a period during which they stay as so-called live-ins at the household they work in. After a two to twelve-week deployment, they usually return to their families while another care worker looks after the elderly person. Thus, many workers spend considerable time going back and forth, regularly crossing state borders. The literature has conceptualised their pendular movements as a form of temporary, circular migration or circular mobility.

In our project '*care markets*' we investigate the rise of 24-hour care in German-speaking Switzerland with particular focus on the private care agencies who define this emerging field of circular mobility for work and thus have become key drivers of the marketisation of care. We examine the role of agencies as intermediaries in a cross-border labour market and explore the ways in which care agencies hire workers in some countries and sell packaged care services to the elderly and their families in another. Placing the analytical focus on the strategies and practices of 24-hour care agencies, we seek to understand the consequences of this re-configuration of elder care in Switzerland and compare it to the more established live-in care markets of Germany, Austria, Canada and the UK. In terms of emerging patterns of mobility, we examine how Swiss care agencies have acted as facilitators of work-related cross-border mobility. Methodologically, we work with document and discourse analyses, and conducted interviews with agencies and a number of stakeholders in the 24-hour care market.

Our results indicate that care agencies play a key role in not only shaping the private care market, but importantly also the highly mobile live-in care-givers' working conditions and the definition of care as a marketable good. In the specific context of the Swiss migration and labour regime, they not only serve as organisers of cross-border home care but, crucially, also as enablers and gatekeepers in the care labour market.

Katharina Pelzelmayer

Discussions of 24-hour care: implications for mobile women's conditions of work

In my PhD thesis, I explore questions of work and power in 24-hour care. Labour rights activists, care workers, regulators, journalists and academics have identified 24-hour as a to date an unresolved and poorly regulated labour market based on a highly mobile and temporary labour force. As 24-

hour care is legally speaking employment at the private household, the Swiss federal labour law does not protect this line of work. Only more fundamental and general laws like the “law of obligations” offer possibilities of legal and social protection to 24-hour care workers. The ensuing precariousness concerning working conditions is of particular salience, since the majority of 24-hour care workers move in regular intervals to and fro Switzerland for the sole purpose of providing live-in care. In the following paragraphs I discuss the ways in which this precariousness for mobile workers plays out and is inscribed through *discussions* of 24-hour care.

My findings are based on an analysis of how agencies, researchers and the media discussed 24-hour care in German-speaking Switzerland between September 2013 and 2015. Around forty agency websites served as primary data. Agency websites have been the pivot of the emerging market in 24-hour care, since they are the platforms on which all parties involved in 24-hour care meet – where they gather information and where live-in care arrangements are ultimately initiated. Analytically, they are of significance since they are the spaces where the novel employment and service of 24-hour care has been most directly described during the market’s emergence and the period of enquiry. For example, my analysis shows how on care agency websites, 24-hour care is articulated in terms of a certain kind of “heart-felt warmth” (*Herzlichkeit* in German) that is attributed to women from particular places and countries. Furthermore, the thesis drew on discursive contributions by the media, public bodies, scholarship, individual care workers and live-in care workers’ associations. Theoretically, it works with feminist engagements with work and care, gender and bodies.

The thesis consists of five research papers and one framework paper (see list of publications below). Respectively, the papers analyse discussions of workers’ “difference” and the mechanisms by which their poor remuneration is justified and by which they become embodied “live-in caregiver” subjects. They discuss workers’ political and social participation, as well as the power and limitations of discursive construction in the media. In the papers, I pay particular

attention to central discursive narratives, in particular various discussions of care workers’ so-called heart-felt warmth, their designation as “female care migrants” (*Care-Migrantinnen*), and analyses of Othering processes of mobile care workers described as “ethnicisation” in the literature.

The five research papers illustrate the *power* of these central narratives. In particular, they suggest that the specific ways in which 24-hour care has been discussed underlie the inequalities in the field and serve to sustain problematic working conditions for circularly mobile care workers. The discussion of 24-hour care-givers in terms of “female care migrants” illustrates the power of these narratives. As I argue in my article *Places of Difference*, the particular use of “female care migrant”, or *Care-Migrantin* in German, in the discourse designates live-in care-workers as first and foremost circular migrants and dis-locates them from their work place, Switzerland (see also a discussion of this paper in *Feministisches Geo-Rundmail* No. 69).

By critically investigating central narratives, the thesis illustrates the fundamental significance of discursive narratives for how we understand the mobile bodies who perform individual live-in care to the Swiss elderly. In showing how the discursive dis-location of care workers from Switzerland underlies mobile workers’ poor pay and justifies problematic working conditions, the thesis points to the political consequences of discursive power – to devalue mobile women’s work. In drawing attention to the significance of words in the perpetuation of inequalities, the thesis makes a feminist contribution to interdisciplinary scholarship on emerging fields of care and patterns of mobility.

Huey Shy Chau

Brokering Labour Migration: The role of home care agencies in migrant care workers’ journeys to Switzerland.

In my dissertation, I trace the routes migrant women take into live-in care work in Switzerland and examine the care agencies’ recruitment and placement practices. Taking care agencies as a vantage point I ask how care workers’ transnational movement is enabled, which is key to grasp the configurations that control their mobility and migration. The analysis is based on participatory observation, qualitative

interviews and informal conversations with care agents, recruiters, care workers, a unionist, a government official, and other relevant individuals involved in the mediation of care workers. I present the results of my thesis in form of a mobile ethnography. The monograph gives insight into stories and moments that I consider relevant for the mobility of migrant care workers and the constitution of labour migration for live-in care work. It shows how care agencies, in collaboration with recruitment and transportation partners, hone in on the organisation of migrant care workers' journeys from their own homes to households where they work. Moreover, it discusses the live-in care workers' movement in relation to the interplay between cost-reducing and profit-maximising business practices of care agencies on the one hand and government regulations and practices on the other.

My findings indicate that care workers undertake a specific journey that is shaped by home care agencies as intermediaries and by the development of specific migration infrastructures for that journey. By offering all-inclusive home care, the agencies introduce new patterns of work-time organisation in the form of short-term and 'in-time' deployments and in the form of customisation and individualisation of deployment contracts. These require workers to be flexible and replaceable and they contribute to the isolation of the workers at their workplaces. Furthermore, my dissertation shows how care agencies build pools of flexible and disposable care workers through spatially selective recruitment from Eastern Europe and hence, contribute to the production of a gendered migration channel into live-in care work. By selecting migrant care workers along lines of gender, origin, age and socio-economic background they not only essentialise migrant carers, but also discriminate would-be care workers from other places. In sum, I argue that whereas attempts to control labour migration largely took place at territorial boundaries before the agreement on the free movement of persons, they have now shifted to less visible borders within and around labour markets, such as the home care market, and have partly been delegated from state authority to recruitment agencies and care-recipients that select and employ care workers.

Project publications

Berndt Christian (2017). Labor market segmentation. In: Richardson D., Castree N., Goodchild M., Kobayashi A., Liu W. and Marston R. (eds): *The International Encyclopedia of Geography: People, the Earth, Environment, and Technology*. Wiley, London (online).

Berndt Christian, Chau Huey Shy, Pelzelmayer Katharina and Schwiter Karin (2017). *Care Markets: The role of care agencies in the commodification of elderly care*. Final report to the Swiss National Science Foundation.

Chau Huey Shy (draft). *Brokering Labour Migration: The role of home care agencies in migrant care workers' journeys to Switzerland*. PhD Dissertation monograph to be submitted to the University of Zurich in September 2017.

Chau Huey Shy, Pelzelmayer Katharina, Schwiter Karin (2017). Short-term circular migration and gendered negotiation of the right to the city: The case of migrant live-in care workers in Basel, Switzerland. In: *Cities. The International Journal of Urban Policy and Planning*. Online first.

Pelzelmayer Katharina (2017). *Bodies that work, discourses that care: powerful narratives of elder care on the move*. PhD Dissertation at the University of Zurich, Faculty of Science.

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Pelzelmayer, Katharina (2016). Places of difference: narratives of heart-felt warmth, ethnicisation, and female care-migrants in Swiss live-in care. In: *Gender, Place & Culture*. Vol. 23 (12), pp. 1701-1712.

Pelzelmayer Katharina (In press). Caring, working, moving bodies: subjectivation and bodies in Swiss 24-hour care. In: Aceti, M. Tissot L. & Jaccoud C. (eds.) *Corps suisse(s), corps en Suisse*.

Schwiter Karin, Berndt Christian, Schilling Linda (2014). Ein sorgender Markt. Wie transnationale Vermittlungsagenturen für Seniorenbetreuung (Im)Mobilität, Ethnizität und Geschlecht in Wert setzen. In: *Geographische Zeitschrift*. 102(4), 212-231.

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Schwiter Karin, Strauss Kendra, England Kim (in review). At home with the boss. Migrant live-in caregivers, social reproduction and constrained agency in the UK, Canada, Austria and Switzerland. Submitted to *Transactions of the Institute of British Geographers*.

Schwiter Karin, Berndt Christian, Truong Jasmine (2015). Neoliberal austerity and the marketization of elderly care. In: *Social and Cultural Geography*. published online first.

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Heidi Kaspar, Zürich

The circulation of love and transfers of care in transnational medical travel

This text is the introduction of a manuscript that will be submitted to University of Toronto Press as part of an edited volume edited by Margaret Walton-Roberts: 'Global Migration, Gender and Professional Credentials: Transnational Value Transfers and Losses'. The paper had been presented at an international workshop of the same title in May 2017 at the Balsillie School of International Affairs in Waterloo, Ontario.

Since the Global Care Chains approach has come to life, it has been producing narratives about how the South is subsidizing the North with man- and mostly women-power in the caring industries such as childcare, housekeeping and nursing. The migration of (more or less) formally trained and experienced people from countries of the South to take care of people in the North constitutes a key engine and manifestation of this transaction. As it transfers labor resources from disprivileged to privileged places, the migration of care workers from the South to the North has been named as a 'perverse subsidy' (Macintosh et al. 2006).

However, other types of care mobilities are emerging that bear the potential to yield similar kinds of 'perverse

subsidies'. First, elderly people in the North/West with long-term intensive or extensive care needs move to (or are moved to) regions where good care is cheaper, or available in the first place (Horn et al. 2016). Second, patients in the search for cure, alleviation from suffering, prolonged life, increased beauty or wellness travel to places distant from their place of residence to receive treatment (Bell et al. 2015; Bochaton 2015; Holliday et al. 2015; Kangas 2002; Kaspar & Reddy 2017; Ormond 2013; Roberts & Scheper-Hughes 2011; Schurr 2016; Song 2010; Thompson 2011; Whittaker & Speier 2010; Whittaker et al. 2017). Unlike with movement of elderly people, the sojourn abroad is temporary, closely linked to their treatment. However, the duration of stay is often unclear; it often extends over weeks, months or even years (Pian 2015). This type of care mobility is commonly called medical tourism or medical travel or as I consider it more appropriately therapeutic itineraries. The current literature suggests that it is mainly patients from the Global North traveling to 'medical tourism destinations' in the Global South, such as Thailand, Malaysia or India.

Against the backdrop of long-term migration of care workers, the migration and traveling of patients constitutes an inversed mobility. The mobile agent is swapped: It is those who seek care who become mobile and those who give care who remain moored. The direction of mobility is reversed, flowing from the North to the South. The transfer of care, though, is the same as for 'classical' care mobilities: people from the South provide care to people from the North.

This paper follows Raghuram's (2012) call to challenge and enrich the concept of global care chains through the inclusion of a more variegated sample of empirical cases. I suggest that transnational medical travel offers valuable insights that enrich the debate on global transfers of care. On the one side, transnational medical travel has been celebrated as boosting low- and middle-income countries' national economies and modernize their ailing healthcare systems (Edmonds 2011). On the other side, medical travel has been criticized as the continuation of imperialist, i.e. neo-colonial practices (Buzinde & Yarnal 2012). More recently, though, research reveals a more nuanced picture of the