Embodying the ideal carer: the Austrian discourse on migrant carers

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Abstract
Demographic developments have caused challenges to national arrangements for elderly care. In Austria one answer has been the employment of migrant carers in the home of people with care needs. The literature on migrant carers has largely discussed economic considerations and specific national welfare state arrangements which underlie the employment of carers. This article focuses on the relation between the moral construction of migrant carers in the family-oriented welfare system of Austria and the ideological understanding of "ideal" care in society. Using Critical Discourse Analysis the discourse is analysed in newspapers and through focus groups. Migrant carers are constructed as fictive kin, representing an approximation of the idealised family carer. Furthermore, investigating the way people think and talk about migrant carers enables a better understanding of what an idealised notion of care entails and how it represents the ideological construction of the welfare state. It will be argued that the migrant carer is constructed in the public discourse as a replacement for a nostalgically imagined ideal care relationship.

Keywords: care, migration, discourse, fictive kin, Austria.

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Introduction
The organisation of care for the elderly at the beginning of the 21st century in most European countries can be characterised by a discourse on the problems and difficulties related to ageing societies in combination with a decline of traditional family structures. This combination, caused by demographic developments, a social restructuring and rearrangement of family units and a redefinition of family attitudes and values, results in heavy pressures on both families and national welfare state regimes. One answer to adapt to these new struggles in the realm of care has been the employment of migrant workers in informal care settings. However, in particular the latter causes substantial ideological, moral and ethical challenges.

In Austria, care for elderly people, still largely seen as a family issue, is challenged by demographic developments related to an ageing society and changing family structures with underlying adaptations in the norms and values people associate with family. In August 2006, the fact that many Austrian families employ migrants to care for their relatives became an issue of public concern. Since then, live-in arrangements with migrant carers have been a widely discussed topic in the political realm, as well as in newspapers and other public media. The newspaper discourses use “ageing” as a concept that society undoubtedly faces and which requires new ideas and initiatives. Migrant carers are then constructed as the ideal actors in a situation of complex care arrangements. The employment of strangers in personal, intimate settings, however, creates a paradoxical situation and raises many moral, cultural and social considerations. Whereas issues of economics and legal and practical matters do play an important role, the construction of care as an issue of love, relationships and close family bonds has fostered the emergence of other factors underlying the discussion on the employment of migrants. In this article I will explore the discourses that negotiate and underlie the current trends to employ migrant carers within family settings and I will focus in particular on the ethical, moral and social difficulties and problems arising due to informal care’s cultural and traditional construction. My main aim is to explore to what extent care provided by migrants is constructed as a new form of informal care. Does the employment of migrant carers in Austria challenge the moral framework of care based on family bonds?
Analysing the construction of migrant care within the moral and political context of care arrangements I will identify to what extent ideas about and opinions on migrant care for the elderly are changing in society. I will investigate how the employment is justified, morally and ideologically (see also Weicht forthcoming). I will then point out that the employment of migrants enables a continuation of the traditional care and welfare model, financially and economically, but also morally and culturally. The situation of migrants caring for elderly people comes close to the discursive notion of nostalgia about what is perceived as “ideal” care. The aim here is to identify to what extent the discourse on migrant carers reproduces constructions of care in general. What does this discourse show about the meaning of care in Austria?

I will start this article by reviewing several aspects of the literature on the employment of migrant carers which has been developed over the last decade. I will show that the literature covers large parts of the specific discourses in Austria, but that aspects of morality and the link between migrant care and the ideal of care in general are still under-researched. After some methodological remarks, I will discuss the Austrian discourse in detail giving evidence for the construction of care performed by migrants. I will thus look at the moral construction of care and analyse whether or not migrant carers are seen similarly to the ideal of a family carer. Does this relation mean that carers are constructed as fictive kin? And finally, if the discourse on migrant carers refers to an imagined ideal of care, how can this nostalgia of care be described? Does the employment of migrant carers lead to a “defamilisation” of the Austrian welfare state? In that sense I will argue that migrants in Austria enable a prolongation of nostalgia and the creation of the notion of idealised care arrangements.

Migrants as Link between Formal and Informal Care

The discussion on care being increasingly related to two striking dimensions of the modern world, namely demographic development and transnational migration (see van der Geest et al. 2004; von Kondratowitz 2005) raises the fundamental question of who can and wants to provide intimate care to elderly people. The employment of migrants in the context of care has received substantial attention in the academic world. Particularly the
question of domestic workers has become a distinct field of research in several disciplines. Beside others, Anderson’s book Doing the dirty work (2000) has drawn huge attention to the employment of migrants in domestic settings, in particular in Europe (Anderson 1997, 1999, 2000; Cox 1999; Lutz 1997, 2008), the US (Hondagneu-Sotelo 2007; Mattingly 1999; Parreñas 2000, 2001), Canada (Arat-Koc 1997; Bakan & Stasiulis 1997; Henshall Momsen 1999), Australia (Baxter et al. 2009; Bittman et al. 1999; Hugo 2009) and some Asian countries (Chang & Ling 2000; Cheng 1996; Lan 2003; Yeoh et al. 1999). These accounts cover the phenomenon of domestic workers and its underlying economic and social power relations. Many of the issues discussed in the context of domestic workers are equally important in the particular field of care workers. Bakan and Stasiulis (1997), for example, point out that paid domestic labour is often not seen as real labour and the people who do it are not regarded as real workers, due to the characteristics of the private home as the workplace. They furthermore argue that family ideology plays an important role and domestic workers are often included into family settings which, however, ignores the “objective economic, political, legal, and social conditions, and the class-based relations between employers and foreign domestics, that exist on a global scale” (Bakan & Stasiulis 1997: 11).

Another important field of research focuses on the employment of migrant workers in the formal health care and elderly care sector, as care assistants or nurses. In particular in the UK several studies show the enormous importance of migrant workers for the national care sector (Cangiano et al. 2009; McGregor 2007; see also Doyle & Timonen 2009 for a study in Ireland; for a cross-national comparison see Lyon & Glucksmann 2008; von Kondratowitz 2005; for a source country perspective see Lorenzo et al. 2007). The idea that care is more and more provided by migrant workers also extends to the informal sector. Rationales for employing migrants in domestic settings on a superficial level also deal with issues of unwillingness of domestic carers. They are, however, also strongly touching on issues of morality and sentiments. The literature focusing particularly on migrant carers in people’s households is more restricted and is mainly focused on specific national welfare state contexts. Using a broad categorisation I will group research available on migrant carers into two perspectives. Firstly, I will discuss accounts adapting economic, political and social policy viewpoints. This set of literature is important in demonstrating the global
power relations in combination with national welfare and migration systems. Secondly, I will present some literature focusing on moral, cultural and ideological questions of the employment of migrants in domestic care settings.

**Economic, Political and Social Policy Perspectives**

Care work performed by migrants in both formal and informal contexts is often underlined by national welfare state arrangements. In that sense migration regimes and care arrangements are often intertwined (see for example Lutz 2008; Williams & Gavanas 2008). Specific welfare state policies have furthermore fostered the employment of migrants in the care sector (Escriva & Skinner 2008; Gerling 2003; Hillmann 2005; Lutz 2008; Scrinzi 2008; Williams & Gavanas 2008). Ungerson (2004), for example, presents a comparison of the emergence of commodified care work in various European labour markets and links these to the particularities of national “cash for care” schemes which can promote the existence of migrant care work in people’s homes. Hugo (2009) presents some data on the Australian programme of circular migration with which care labour market shortages should be met. Simonazzi (2009) on the other hand focuses on the national employment and migration models which shape the features of the respective care labour markets. A particular economic and social distinction of care arrangements in a country in relation to the specific welfare state conceptualisations have also been of explicit interest in economic, sociological and social policy literature (Daly & Lewis 2000; Lewis 1992; Pfau-Effinger 2005; Pfau-Effinger & Geissler 2005; Sainsbury 1994).

An important tool to understand the global implications of the employment of migrant care workers has been developed through the global care chain concept (Lutz 2008; Yeates 2004) which allows an understanding of the relationship between globalisation, migration and care. The focus here is on the consequences of care demands in some parts of the world met through the employment of migrant care workers which produces care shortages in other parts of the world. Care thus needs to be seen as a pivotal issue in migration (Ackers 2004; see also structure of this special issue). Escriva and Skinner (2008), for example, discuss the concept of care chains in Spain showing the various aspects of global and national
care migration. Much of the literature presented above also strongly focuses on the problematic consequences of the employment of migrant carers which are often due to power differences (e.g. Anderson 2000), such as racism and prejudices (Doyle & Timonen 2009), problems of illegality (Coyle, 2007; Lutz 2004), problematic dependency relations between the care worker and the cared for elderly person and related lack of freedom (Degiuli 2007) and the significance of language abilities (Brush & Vasupuram 2006).

Finally, some literature focuses on the reasons why particularly migrants are employed in the care sector, both formally and informally. Dyer et al. (2008), for example, argue that the combination of emotional labour and body work which is poorly paid and has low status can be seen as both reason and consequence of the recruitment of migrant workers. Lutz (2008) discusses the gender implications of elderly care, in the context of migration and globalisation (see also Sassen 2003; Zimmerman et al. 2006). Fine and Mitchell (2007) in the Australian context link low pay and low status to the fact that migrant carers are employed and argue that inevitably class, gender and ethnic power relations are interlinked and that in particular poor women from vulnerable ethnic minorities are employed in the care industries. These accounts raise important questions of cultural and social challenges. This focus, however, is more strongly adopted by another perspective within the realm of literature on migrant carers.

**Social, Cultural and Moral Perspectives**

Another set of literature focuses more on cultural circumstances and underlying moral connotations of the employment of migrants in care work, specifically in private households. Several accounts focus on the everyday experiences of migrant carers in domestic settings and its challenges for the moral, social and cultural meanings of care for elderly people in society (Flaquer & Escobedo 2009; Hillmann 2005; Lutz 2002, 2004; Zimmerman et al. 2006). Anderson (2000), for example, demonstrates that migrant workers are not necessarily paid to deliver specific tasks; rather their personhood and time is bought. I will explore this idea below in the discussion of migrant carers in Austria. Da Roit (2007) writes about the interrelation between intergenerational relationships and the employment
of migrants in people’s homes. Degiuli (2007) also discussing the situation in Italy presents interview data on migrant workers’ experiences. Generally it can be noted that the literature on migrant domestic carers is particularly extensive in relation to the Mediterranean countries and the respective welfare states (Bettio et al. 2006; Glucksmann & Lyon 2006; van der Geest et al. 2004), or Asian societies (Huh 2008; Mehta & Thang 2008). Comparative perspectives on migration and care in general can also be found in Glucksmann and Lyon (2006) and van der Geest et al. (2004). The specifics of the phenomenon of migration that can be found in the Austrian context are more precisely described by the terms rotational (Bettio et al. 2006) or pendulum migration (Glucksmann & Lyon 2006).

Several perspectives also focus on the everyday experiences of transnational care giving (Brijnath 2009). Roseneil and Budgeon’s (2004) more general discussion of intimacy outside the traditional realm and the focus on non-normative intimacies is very helpful in investigating the situation of migrant carers living with elderly people. Since care needs to be seen “as a hybrid of love and instrumentality” (Ungerson 2000: 627) this tension is of particular interest for those analysing the processes happening in domestic family settings. Bonifacio (2008), for example, discusses the representation of Filipino women in Canada who are live in carers as the “new heroes” and Akalin (2007) analyses the Turkish situation in which women turn from foreign employees to fictitious family members to what is regarded the “the ideal housewife”. Similarly, Barker (2002) and Karner (1998) discuss the phenomenon in which carers are “adopted” by the family and are becoming “fictive kin”. The situation of migrant carers in Austrian households has not yet received much academic attention. Haidinger (2008) and Kreimer (2006), however, give some context of the particularities of the Austrian long-term care system and its policy responses to demographic developments. Both also include some analysis of the employment of migrant carers. Jandl et al. (2007), Da Roit et al. (2007) and Österle and Hammer (2006) give some information on the specifics of the Austrian cash for care scheme and its relation to the employment of migrant carers. Österle and Hammer (2006) also present a comparison with other European cash for care schemes. Beside this focus on the policy context there is a lack of literature on the link between the Austrian moral and cultural conception of long-term care for elderly people and the situation of migrant carers. In this article I will thus explore
the specifics of the Austrian system which, however, allows insights in the importance of a focus on the moral basis of care arrangements in other countries.

Methodological Remarks

The concept of discourse I use in this paper is defined as the way people construct and make sense of their everyday lives and experiences. Discourse is "undertaken by social actors in a specific setting determined by social rules, norms and conventions" (Wodak 2008: 5). For this investigation I utilise Critical Discourse Analysis (CDA) to analyse the discourse in its particular historical, cultural, political and material context (Reisigl & Wodak 2001; Wodak 2001a, 2001b; for the linguistic categories being used see also Chouliaraki & Fairclough 1999; Meyer 2001; van Dijk 2001). First, I use a sample of Austrian newspapers in order to identify "what is both acceptable and socially thinkable" (Aldridge 1994: 35) and what could be called the dominant discourses in society reflecting the social mainstream (Mautner 2008). Newspapers can be seen as a representation and reflection of dominant discourses, using narratives, ideas and ideologies that can be expressed publicly and which are hence thought to be shared widely. CDA understands discourse as a social practice and acknowledges that individuals are affected by the very discourse in two ways: as those designing it and as those being shaped by it (Weiss & Wodak 2003: 13) or, in Mautner’s (2008: 32) words, discourses are "socially constituted but also constitutive".

The study is based on a sample of five Austrian newspapers (Kronen Zeitung, Österreich, Kurier, Die Presse, Der Standard) which have been analysed over a period of one year (August 2006–August 2007). The choice of the sample is based on Reisigl and Wodak’s (2001) study (for a discussion of various differentiations of newspapers see Bednarek 2006: 219 et sqq.; for a CDA perspective on the analysis of newspapers see Richardson 2007). The choice of newspapers reflects the attempt of generating an exemplifying but nevertheless representative sample. Different newspapers reflect different ideologies and try to build up some shared identity with their readership. Different newspapers, for example, follow different ideas of what and how human beings are (e.g.
selfish, rational, caring) and how a decent society is composed. It could be said that the relationship between readers and their newspapers is based on the provision of ontological security (see Richardson 2007) by “creating a system of shared values” (Reah 2002: 40). The sample inevitably entails the most popular (i.e. best selling) newspaper (Kronen Zeitung). It furthermore reflects a combination of “tabloids” and “broadsheets” as well as a reflection of the political spectrum from what are considered to be working class and rather sensationalist papers (Kronen Zeitung, Österreich), a middle range paper (Kurier) to quality newspapers, ranging from conservative to liberal papers (Die Presse, Der Standard). The sample of papers reflects the Austrian market of national daily newspapers.

The analysis of newspapers was carried out in several steps. In a pilot study, covering the period of July–August 2006, I familiarised myself with the field and I constructed preliminary categories for the analysis. The second step was a preliminary text search carried out over the Internet. This enabled an identification of a vast range of articles on care in various newspapers. I ordered these articles and extracted reoccurring themes, narratives, terms and concepts. The third step was a search and analysis of “typical texts” in their various original contexts. I could draw on my pre-selection in order to identify important, common and relevant materials in the way they originally appeared in the newspapers. For this endeavour I used the newspaper archive of the Austrian National Library in Vienna. The texts studied in detail were then always related back to the whole sample of articles referring to care.

Similarly to Richardson (2007; see also van Leeuwen 1996 and Mautner 2008) I use Wodak’s process of analysis starting with the micro-textual level (and here I explicitly refer to the use, the choice and the meaning of certain words and the construction of sentences). As Richardson (2007) points out, when writing articles, journalists choose one word, one category and one term over another one and give in this way a certain meaning to it. This is followed by a mid-level analysis (which includes, for example, a discussion of modalities, i.e. the speakers’ attitudes, judgements and evaluations, an analysis of other presuppositions prevalent in the text itself). The last step builds an evaluation of the narratives and plots

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1Sources: Österreichische Auflagenkontrolle (2008).
being used to tell a story, to report news or to construct a commentary. Also, doing justice to a context-aware evaluation, it must not be forgotten in the analysis of texts to think about the aspects that are absent. Aldridge (1994: 3) rightly asks: “what does not make the news?” Strikingly significant differences between the newspapers in their writing on the theme of migrant carers could not be identified. Even populist, rather right-wing papers wrote about (at this point in time illegally employed) migrant carers in a positive way. This suggests recognition and acknowledge\ndgement of the fact that Austria needs these workers; it also points, however, to a criticism of political processes through which these workers had to work undocumented and illegally.

The categories and narratives identified in the newspapers were then used in six focus group discussions. I also used materials analysed from national newspapers in the focus groups, such as pictures or statements which I asked the participants to reflect on. Focus groups are, as Bloor et al. (2001) put it, the ideal method to identify group norms and understandings. Similarly, May (2001: 125) emphasises the possibility of focus groups “to explore group norms and dynamics” and states that focus groups are the best way to get as close as possible to normal conversation manners. From a CDA perspective Wodak (2008) also emphasises the strength of focus groups in creating a “semi-public” genre (see also Krzyzanowski 2008). I want to use the characteristic of focus groups “to study the ways in which individuals collectively make sense of a phenomenon and construct meanings around it” (Bryman 2004: 348; italics added) in a way that best resembles everyday interaction. Krzyzanowski (2008) sees the views expressed in focus groups at the borderline between public, collectively held views and views of selected small-scale groups and individuals. He therefore argues that focus groups are the ideal realm to analyse how “the public sphere influences (…) individuals’ views on politics and society and how, conversely, the ideas crucial to the “social” (individual) level penetrate (…) into politics, into the media and into other constituents of the public sphere” (Krzyzanowski 2008: 169). I used both pre-existing groups (groups which were constituted in another context and in which people therefore knew each other) and groups of strangers and the participants were recruited through local organisations, clubs, church groups, political parties and informal networks. The focus groups
consisted of three to six participants and lasted between 1 ½ h and more than 2 h. These so called “minigroups” (Bryman 2004) could offer the characteristics of group discussion but also allowed more personal accounts and stories. The focus group discussions took place in various public and private venues in Austria. In the recruitment phase I tried to make sure to have a widespread representation of participants in the focus groups. Both women and men participated, though in general there were more women present (there was one group organised with women only). Participants reflected various age groups and their relatedness to care (whether they themselves have experience with caring) varied significantly.

The main aim of the discourse analysis was to identify how people talk about care. Which narratives do they use? Who are the subjects in the stories? Which stories are being told? I was mainly interested in the construction of categories, such as carer, migrant, elderly, dependent, independent and how these categories are being used in the discursive processes. How people discuss care, which stories they tell and how they use and construct categories, describe what Williams (2004: 17) called the creation of “the proper thing to do”. The discursive accounts below are representative for the discourses in question. As can be expected people usually refer to their own experiences when talking about care. The categories and narratives they use, however, represent broader societal features. People draw on some moral consensus (Honneth 1995) which can be seen as a dominant form of moral understanding in society. Similarly I could not identify significant differences between men and women or between different age groups in the ways care is constructed. That does not mean that every individual thinks the same about care. It rather means that on a societal level a certain attitude and routine is constructed through which everyone makes sense of ageing and care.

At the time of the beginning of the newspaper analysis, the theme of migrants caring in Austrian households became a much discussed issue in the public realm. In August 2006 the topic of a “Pflegenotstand” [care emergency] became a significant issue in the pre-election debate. The fact that many Austrian households “illegally” employed migrant carers challenged the government’s position that there are no difficulties with the provision of care in the country. From summer 2006 onwards migrant carers were a topic of discussion in every newspaper and featured in every
contribution on care. This was also partly reflected in the focus groups organised in May and June 2008. Several participants have employed migrants as carers for a family member or knew people who had done so. All participants were familiar with the discourses on migrant carers in the media.

The Discourse on Migrant Carers – Reproduction of a Moral Consensus

The Austrian Situation

As Doyle and Timonen (2009) note, for migrant care workers both their region of origin and the situation in the country they are working in play an important role for their life circumstances. I will therefore first present some information on the Austrian system of care, followed by the specifics of the discourse. The Austrian arrangement for the provision of care for elderly people is largely based on informal settings, usually within the care receiver’s family (Österle & Hammer 2004). This also reflects the more general construction of the Austrian welfare state and its foundation on family ideals. The literature on welfare state regimes and in particular care regimes provides a useful approximation for the analysis (Abrahamson 1999; Arts & Gelissen 2002; Lewis 1992; Orloff 1993; Sainsbury 1994; Scruggs & Allan 2006; Simonazzi 2009). Austria is usually described as a corporatist-conservative welfare system with a strong emphasis on the role of care provision by the family (Badelt & Österle 2001; Hammer & Österle 2003; Strell & Duncan 2001). Social rights in Austria are usually closely connected to either individual employment or family relationships (see Hammer & Österle 2003). Strell and Duncan (2001) in their research also focus on the strong role of Austria’s family policy, both socially and ideologically. They describe the Austrian welfare model as a male breadwinner model (Strell & Duncan 2001) which is built on the ideals of what a “proper family” means (Strell & Duncan 2001: 153). For much of the Austrian social welfare system, and that counts specifically for the care context, an ideal of family is needed and reproduced (Strell & Duncan 2001). This is particularly important in the context of long-term care arrangements. About 80% of people with care needs in Austria are cared
for at home by close relatives, of whom 80% are women (Österle & Hammer 2004: 36). Interestingly, men caring for relatives are usually retired whereas the majority of women caring are under 55 years old. Only between 4% and 5% of people aged 65 or older live in institutional settings (retirement homes and nursing homes) and 5% of those 65 and older receive some form of formal home help (Österle & Hammer 2004).

In Austria long-term care is formally organised by the payment of “Pflegegeld”, a financial benefit based on the hours of care that are necessary (see Badelt & Österle 2001). The intention and goal of the “Pflegegeld” can be found in §1 of the relevant law, the Austrian Pflegegeld-Gesetz where it says:

The purpose of the “Pflegegeld” is to compensate for care-related additional expenditures in order to assure the necessary care and support for care-dependent people as far as possible and to improve the possibility to lead a self determined, needs-oriented life. (BPGG:§ 1, own translation)

One explicit goal of the implementation of this law was to financially secure and support the possibility of care within the family (see Badelt et al. 1997: 2) and to therefore strengthen the (personally felt) responsibility to care. This conception of care based on a “strong ideology of family responsibility” (Hammer & Österle 2003: 47) obviously requires many people who are willing to perform care services in an informal context. When Österle and Hammer (2004: 69) summarise the various factors which are relevant for the design of informal care, traditions, role-descriptions and emotional bonds play a crucial role. The fact that care is still largely seen as a family issue, which is also reflected in public and political discourses, is challenged by demographic developments related to an ageing society and changing family structures (Österle & Hammer 2004). Care work, and in particular the organisation of round-the-clock care, place a large burden on family members, emotionally, financially and physically. Changes in and requirements of the labour market, family expectations and attitudes and the ageing societies require new answers. But have these developments led to a reconsideration of family responsibilities? Is a process of “defamilisation” (McLaughlin & Glendinning 1994) which describes the freedom not to care (Hammer & Österle 2003) imaginable?
In Austria the answer for many families has been the employment of migrant carers working and living in the house of the person cared for. In Austria there are approximately 40,000 people employed as carers in private settings (Jandl et al. 2007). The large majority of these people are women from Eastern European neighbour countries (in particular Slovakia). The live-in arrangements are usually organised by specialised agencies and the carers work on a fortnightly cycle (Gendera in press). This example of rotational (Bettio et al. 2006) or pendulum migration (Glucksmann & Lyon 2006) is a situation which inevitably raises several difficulties for the construction of care as emotional labour based on proximity, love and intimacy. The traditional dependence on the nuclear family and other informal bonds correlates with a construction of care work being based on emotional attributes such as closeness, love and intimacy. These values and virtues can be found in both public and private discourse and can thus be summarised as a moral consensus in society. Central features of the meaning of care are reciprocal relationships, love, affection and intimacy (Lynch 2007; van der Geest et al. 2004). In relation to migrant carers in Austria these relationships are emphasised and reciprocity is not only mentioned in relation to financial exchange but by highlighting the particular relationships.

“Care is Something Different Than Minding” (Die Presse, 30/08/07)

To understand the specific discourse on care in Austria it is useful to highlight the different words in German being used. Whereas Betreuung rather refers to care as support (mainly emotional minding, assistance and physical and emotional presence) Pflege more specifically means care as labour. Not only do these differences bear different legal implications, they also emphasise the split between professional care workers and informal carers. Several authors argue that migrant carers’ work is mainly to be described as minding (Bettio et al. 2006; Glucksmann & Lyon 2006) which can indeed be identified in the discursive context of Austria. This can be exemplified by narratives and images such as the “Helping hands from middle and Eastern Europe” (several newspaper articles) or references to “40,000 illegal foreign supporters” (Der Standard, 09/02/07). Lynch (2007), distinguishing between three forms of care labour, states that love labour, which describes the most intimate form of care, is not commodifiable as it
is “emotionally agaped work” with the principle goal of the well-being of the other.\(^2\) Thus, it can be argued that in Austria migrants are employed to perform love labour, i.e. intimate, afective minding in people’s own environments. However, how is loving, intimate care being understood? What are the parameters according to which people construct “informal” caring? One very striking component is the provision of care in people’s own homes.

**Home**

Much care-related literature focuses on the meaning of home for individuals in general and ageing or ill people in particular (Andrews & Phillips 2005; Conradson 2003; Kontos 1998; Milligan 2003; Parks 2002; Phillips 2007). Here I only want to emphasise the importance of a notion of home in the context of the discursive construction of care being performed by migrant workers. Bettio et al. (2006) observe a widespread aversion against institutionalisation in Italy and link this to the motivations to employ migrant carers (see also Degiuli 2007). Similarly the analysis of the Austrian discourse suggests that the home is constructed as the sphere in which informal care based on affection and love can be practiced, even when performed by non-family carers. The public discourse shows that care in institutional settings (i.e. care homes) is constructed as dependent living, based on the good will of the employed staff. This is insofar important as the idea and notion of “informal care” is intrinsically associated with the own home in which independence, autonomy and a self-determined life can be lived. An ideological link between the home and the family is constructed as exemplified in the following newspaper extract:

One who cares for his relatives at home shows heart with that (…) And everyone who wants to care within the family should receive help. (*Kurier*, 22/11/06)

The broad public discussion on 24-h care focused exclusively on care “at home”. The following extract is a reader’s comment that appeared in an

\(^2\)Beside “love labour” the other forms of care Lynch (2007) describes in her work are “general care labour” and “solidarity work”.
Austrian newspaper in response to the political discussion on the then illegal status of employing migrant carers in people’s own homes. It describes the possibility of people staying at home and being cared for in their own houses as a situation that is honourable and which should be supported. Politicians and the political process are criticised for interfering with what is happening in the own home. This raises an argument about the interference of politics and bureaucracy into the physical realm that represents family care:

We have really reached a point in the state of Austria! Now, apparently, you get already penalised if you don’t push your helpless, old parents off into a care home, but let them be cared for by foreign care workers in their own familiar home! (Kronen Zeitung, 19/08/06)

For family members’ performance of intimate, affectionate care the most important feature is the provision of care in people’s homes and the analysis suggests that family members can fulfil their moral duty resulting from their familial connection to the person in need, at least partly by arranging their relatives to be cared for in their own house. Mehta and Thang (2008) focusing on the situation in Singapore argue that there society approves of people’s filial responsibility as long as care at home is ensured. In the context of responsibility in the Austrian discourses it is not clearly defined what the role of family members should be. There rather can be found an idealisation of family “minding”. In other words, the family is seen as being responsible for “being there for someone”. Reflecting the Austrian discourse, Der Standard (07/02/07) writes that it is clearly stated that the goal is “to enable care and minding at home”. Thus, migrant carers who live with the cared-for ensure the execution of informal care, also in replacement of family members. People whose moral duty might be thought to be actively involved in intimate care for the elderly can be engaged by ensuring that their loved-ones are “saved from” or “prevented from” other-dependent care in institutions. As the main emphasis lies on the presumption that everyone’s wish is to be cared for at home (e.g. Der Standard, 12/02/07) the very home becomes the focus of the realm of intimate, loving and affectionate care. And in this context migrant carers take the role of domestic, informal carers and are therefore able to provide the services that are usually restricted to family members.
When the *Kronen Zeitung* (08/07/07) therefore writes about “families, who sacrificially care for their relatives at home with Eastern European help” the inclusion of migrants into the home seems to correlate with an inclusion into the family. Migrant carers living *with* the cared for person, are constructed as ideal actors who ensure informal home care:

Thank god they exist, the good women from the new EU-East (…), four truthfully nice supporters from Poland (…) lived one after the other with her and cared for her. *(Kurier, 16/08/06)*

Living with the cared-for person is an important part of the creation of the ideal care relationship. Additionally, the accounts presented above sketch an image and a language usually associated with close family members. It could be argued, therefore, that migrant carers are discursively included into the family in question.

**Fictive Kin**

Barker, in her discussion of care for the elderly outside family settings in the USA, emphasises that often in these situations “strangers act like kin” (2002: 159) and she identifies a development of these carers towards “fictive kin”, a process which is based on and allows for emotional proximity and social intimacy. Interviewees in her study refer to themselves therefore as being “just a friend, not a caregiver” (Barker 2002: 160) and define their work, similarly to family members’ labour, as a moral duty. Similarly, Karner (1998) discusses the development in which carers are “adopted” as fictive kin which again suggests that this quality of the relationship might serve as a replacement for higher status and payment. Bettio et al. (2006: 272) summarise this development as a “transition from a “family” to a “migrant in the family” model of care”, emphasising the inclusion of the migrant worker into the family setting.

Similarly, in Austria migrant carers are discursively constructed as belonging to the family under question. If migrants do not only perform certain roles of family members but are also taking over particular family identities, can this creation of the fictive kin be identified? The discourse shows some references to kin-like relationships and bonds (“the two are grown together” *(Kurier, 13/08/06)*) and migrant carers are constructed in
sharp contrast to professional workers as “good friends who help us” (Der Standard, 14/02/07). The care which is provided by migrants is seen as help for the family, rather than as care labour. People care for their parents via migrant domestic workers. So are migrant carers seen as fictive kin? Many of the descriptions of the intimacy performed by migrant carers entail a reference to the broader family setting as a sign of an “adoption” of the migrant worker:

When Mr B. got dementia, Kati and Maria entered his life. Today, the two Slovaks are more for the family than only cheap care-workers. (Der Standard, 14/02/07)

Becoming part of the family and not being seen as workers or employees is an important feature of the Austrian discourse. Two participants of a focus group discussion talk about their experience with employing two Slovakian women to care for an elderly family member, referring to them as angels:

Caroline: Yeah, we also indeed often call our Slovaks, uhm, the Slovakian angels [laughs].

Gita: Yes, now, for three years I have now had the same ones, mother and daughter (…) And she again had also a daughter, there was also a grandchild, and she, with her it was always somehow, because the woman who was not with me at that moment, was then caring for this other child. (…) And mother and daughter have switched places at mine, and this really was one unit indeed.

Betty: they were lovely, yes. They really were (…)

Caroline: Yes, it is, they have actually become part of the family.

In this extract the migrant workers are included in the family in question. Additionally, a concept of a broader, extended family, based on different care arrangements is presented. Of course, it is important to state that the fact that the “members” of this extended family are described as equals is a situation which from an economic and social perspective proves questionable. However, a construction of a new family is happening and knowledge over the other’s family is emphasised. This can also be seen in the following extract:
Caroline: Yeah, with the Slovakian nurses I must say, they really become part of the family, (…) this daughter indeed, who cared at ours, she also brought her daughter with her to ours from time to time, during school holidays or so. (…) They’ve also brought their dog with them once, because they didn’t know where to put it, because the friend was also not there, so

Gita: You also know the problems of these Slovaks

Caroline: You really become intimate.

Gita: and you discuss the problems, your own, with them

Caroline: The Slovaks, then we also, from time to time (…), half an hour, or an hour, (…) we went for a coffee with them and things like that (…) yeah, it is like that, they become part of the family. Absolutely.

The discussion which started with a representation of the carers’ identity as “angels” describes the links that have developed over time and various aspects characteristic for close family bonds (discussing each other’s problems, knowing each other’s friends, going out for a coffee). Additionally, the importance of this familiarity for the wellbeing of the cared for person, is identified. Brigit Anderson in her discussion of migrant domestic workers quotes one woman saying that “the problem is they treat me as family” (Anderson 2000: 123). The recurring discussion of the commitment, the reliability and the “angel-like” devotion to the elderly people demonstrates this ideological relation to a moral consensus based on family responsibilities. I argue therefore with Glucksmann and Lyon (2006: 6.4) that the employment of migrant carers “is done in order to sustain the practice and ideal of family care as delivered through love and personal connection”. As a consequence, however, migrant carers are constructed as quasi-kinlike “with all the ambivalence obligation, exasperation, trouble, joy and pleasure that kin relations entail” (Barker 2002: 166 with reference to Sussman). This is probably best exemplified by the following quote from Kurier (06/09/06) which colourfully highlights the different aspects of the construction of kin-like relationships:

Two qualified Slovakian supporters took the family’s heart by storm. The two women devotionally looked after the 91-year-old mother, who found new courage to face life in her own familiar home.
I have also used this newspaper extract in some of the focus groups and asked the participants about their opinions. The following discussion acknowledges the possibilities of an inclusion of migrant workers into the family and links it to particular attitudes and identities of the care workers:

Walter: That the two qualified Slovaks, of course, if they are doing the work well, that they took the family’s heart by storm, is clear, isn’t it? (…)

Barbara: they have a specific charm, they have, these people

Walter: but as you rightly say, they have a very motherly and womanly quality

Barbara: yes, yes, they have a specific

Walter: (…) not too hard

Barbara: not too hard, they become, yes

Walter: that also counts for the Hungarian women, like, they do, there is also a

Barbara: (…) yes, is also still softer.

In this quote there are very problematic assumptions about gender and ethnicity. There is also, however a nostalgic element present. It almost seems that because these women are better in practicing family they are welcome to care for elderly people like family members. Intimacy between people is possible because these workers are in their identity constructed as being similar to family members. Many of the descriptions of the intimacy performed by migrant carers entail a reference to the family setting as a sign of an “adoption” of the migrant workers. A relationship is emphasised which relies on physical proximity and social intimacy in which migrant carers are discursively constructed as intimate friends or family members. The following extract also demonstrates the enormous intimacy that can result from the very relationship, and which, eventually, is used in the discourse to describe the relationship between cared-for, migrant carer and the family:

The first impression: There are two that really get along well – even though they see each other 24 hours a day. For two years, since Mrs P.’s stroke, the young nurse Maria
Embodying the ideal carer

cares for the 67-year-old Viennese. (…) Illegal 24 hours care is too expensive (and difficult to get) and she panics to go into a care home: “I have experienced that with my mother. I don’t even want to think about it.” What’s left? Maria. (Die Presse, 14/08/06)

Representing the Ideal of Care

In the discourse migrant carers are included in family settings and constructed as fictive kin. I have already mentioned possible consequences for carers, such as being vulnerable to exploitation. However, this discursive construction also affects the meaning of care in general. In this section I will argue that the discourse on migrant carers is an expression of a longing for the ideal care arrangement. This nostalgia for care for elderly people being based on love, affection and family commitment is reproduced through the inclusion of migrant workers into the realm of families. The following newspaper extract describes what being a migrant carer entails:

Anna does really everything that comes up. (…) But over everything else she faithfully looks after “Granny”. (…) “The two are extremely close. Every three to four months, when Anna goes to see her family in Slovakia, Granny gets ill.” (…) A care home, however, is out of the question for the family. Margit: “Mother always refused to be pushed off.” (Kurier, 14/08/06)

Clearly, being a carer is not reduced to the performance of certain tasks; rather, it refers to a physical and emotional presence of the carer. It could be argued that a carer identity is created which cannot sufficiently be explained with the fulfilment of tasks but which suggests an idea of care that is idealised. I have discussed Strell and Duncan’s (2001) account of the “proper family” which is reproduced through the Austrian care system. The discourses on migrant carers employed within these structures also underline this tendency. In that sense, a continuation of the family care model also in times of changing family structures and social and economic developments can be realised. The discourses enable an integration of the migrant worker into the family and place him/her as a part of the proper family. Bonds and family-like relations are emphasised and linked to the cared-for person’s wellbeing. The institution, on the other hand, is constructed as the opposite of an ideal care arrangement.
The migrant carer thus enables the ideal of care, which is wished and longed for. Also Ida, in a focus group, talks about a promise she has given to her elderly mother, that she would never put her mother into a care home. She therefore employed a Slovakian woman who embodied the ideal care relationship and who satisfied the family’s desire for care. Again, a family relation is emphasised and as a consequence of the practice of care the carer got closer to her mother than Ida herself:

Ida: And my mother also has, (…) when I came to visit her at the end in the hospital (…), she was hardly approachable anymore, (…) and, when the carer came to visit her then in the hospital, her eyes were gleaming. (…) And in her arms she then also died. (…)

Ingrid: This was her attachment figure

Paul: attachment figure, exactly.

Ida: There she was sparkling, because Martina, that was absolutely her favourite. (…) there she was really gleaming, with me she wasn’t gleaming, and with Martina she was gleaming. And in her arms she also died.

The constructed ideal care relationship can therefore be established by living with the cared-for person. Due to the strong link between the own home and real care and the importance of the former for the latter migrant carers are constructed as the only available option for people which still represents the family care ideal. Anything else (especially institutional solutions) would challenge the idea of care itself. As mentioned earlier the construction of migrant workers as representing the nostalgically idealised notion of care is often linked to a description of some carers as particularly qualified and having a caring character. These explanations, however, are also based on an idealisation of the family care model. The migrant carer is constructed as the personification of the longing for what care ideally should be. I want to quote one extract from a discussion in which several problematic aspects appear. However, rather than pointing out the stereotypes, essentialisations and reductions that are undoubtedly present I want to focus on the meaning of discursive narratives for the ideal of care:
Vera: but I can't imagine (…) that there are Austrian women who, apart from the financial side, would care so sacrificially for other people. For strangers in fact.

Walter: 24 hours

Vera: Is this somehow a particular kind, these Eastern women?

Barbara: yes, they are still different (…)

Vera: Yes, indeed.

Barbara: they still have (…) That's it (…), I find, that these women are still more like women. So, they still have a more womanly appearance. (…) Not, not yet like here, into this business world …

It is important to note that the characterisations of migrant carers in this example follow a particular discursive narrative on care. Ideal, natural care is seen as not being provided anymore and as not being possible in the present society, due to economic and social developments and pressures. The employment of migrant carers enables the building up of a relationship which closely resembles the idealised care arrangement and represents what is lost in Austrian society. The argumentation that Eastern European women are still different and that they are still more like women is a result of this nostalgia of an idealised notion of care which is thought of as an issue of the past generations. Davies (1979) situates nostalgia as a yearning for the continuity of identities in a time when people experience subjective discontinuities. The present life conditions are “felt to be, and often reasoned to be as well, more bleak, grim, wretched, ugly, derivational, unfulfilling, frightening and so forth” (Davis 1979: 15). Coontz (1992: 9) argues that the imagined ideal family of the past is “an ahistorical amalgam of structures, values and behaviors that never co-existed in the same time and place”. This resonates as being very important for the construction of migrant carers as well. Ideal care, how it is constructed, is not a historical phenomenon, but a combination of feelings, ideals, wishes and emotions. For Coontz (1992) the existence of nostalgia is also related to a feeling of being unsatisfied with the economic demands and pressures.

So it can be said that nostalgia for a particular idea of care includes a realisation that this form of care is impossible and unachievable. In other words, the construction of migrant carers as fictive kin enables a
continuation of the normative Austrian care model within times of societal changes. And not only do migrant carers provide the care family members cannot or do not want to deliver anymore; migrant carers also morally and emotionally fulfil a nostalgic desire for a particular ideal of care. That this idealised care is seen as an issue of the past (or of other countries indeed) accommodates the employment of migrants to become the ideal carers. And finally, the provision of care is linked to a broader discussion of social conditions. Self-centredness, economic involvement and family breakdown are linked to an image of the busy, self-absorbed and selfish modern society. There is a strong notion of the idea that “real care” is something from the past or from other cultures and does not fit in with the present societal arrangements, whether this is seen positively or (as most often) negatively.

Conclusion
In this article I have analysed the public discourse on migrant carers in Austria. I have argued that within this discourse migrant carers are constructed as the ideal carers in the sense that their identity is seen as similar to traditional family carers. The process of the discursive construction is based on several narratives, the distinction between professional care work and informal minding, the construction of the home as the realm of intimate care and the incorporation of migrant carers into the family. The analysis has shown that socio-economic pressures and forces are said to require arrangements that partly challenge a society’s moral framework. The discursive arrangements, however, are used to enable a re-configuration of care by constructing intimate care as being bound to the own home and being performed by kin or fictive kin based on minding and supporting rather than care labour. Using the example of the employment of migrant carers in Austrian families I could demonstrate how the discourse on family care is extended to other care options as well. Additionally, it has also been shown that the discourse on migrant carers reproduces the notions of what ideal care is and that it reproduces ideals and images of the notion of family relations. If the discussion is used to understand what care means for people it can be argued that ideal care is characterised by notions of love, intimacy and being there for each other and care within the family is understood as
being based on “affective, quasi-familial and asymmetrical relations” (Bakan & Stasiulis 1997: 10).

But does the process of the employment of migrant carers in Austrian households enable or foster the process of “defamilisation” (McLaughlin & Glendinning 1994) in which families, and in particular women, gain the possibilities not to care? On the one hand it seems that the idealised forms of “family care” can also be carried out by other actors. On the other hand, however, the general construction of the normative model of family care remains untouched and the basic ideal of family based care is not challenged. The “prevailing family ideology of separate spheres, that is, a strict gender division of family work with women being responsible for providing care work on an unpaid basis” (Hammer & Österle 2003: 45) is adapted but in its main characteristics reproduced in the public discourses. In a sense a partly commodified version of care (cf. Ungerson 2003) in which migrant workers are paid to be “family carers”, allows defamilisation for family members without challenging the ideological conception of family care. The employment of migrant carers in Austria needs to be understood as a paradoxical form of paid informal care. On the one hand the care arrangements are based on formal contractual relations; on the other hand, however, the discourse on care paints a different picture. Migrant carers are constructed in explicit opposition to professional care workers and the care they provide is seen in contrast to institutional, professionalised arrangements. The moral construction of care is a main determinant of the construction of the roles, positions and identities of migrant carers. This suggests also a broader, underlying sentiment, described by Zelitzer (2005) about the “two hostile worlds” of intimate relationships and economic transactions. Zelitzer argues that we tend to live with the dogma of these two social aspects being clearly separated and actions that bridge this separation are seen critically and unfavourably. The analysis in this article supports this idea in the sense that one way of the two “hostile worlds” needs to be chosen, either the care relationship is constructed as an intimate relationship, exemplified by the notion of the fictive kin, or it is based on an economic transaction in which the carer is constructed as worker.

I also want to point to the role of the state in these discourses in Austria. I have argued that migrant carers are constructed in contrast to formally employed workers and there is an implicit assumption that long-term care
has to be provided within the family. However, in many accounts people express a request that the financial costs involved are the state’s or the society’s responsibility. On the one hand recognition and (financial) support is sought, on the other hand, the employment of migrants at home is seen as a private, personal issue in which the state should not interfere. This also links to the issue of family responsibilities. Because family responsibilities are not clearly spelled out but remain diffuse and vague as some duty to “be there for someone” the employment of migrant carers is not seen as a challenge or re-constitution to the traditional care model.

The characteristics of the discursive construction of migrant carers resemble traditional gender stereotypes in its focus on closeness, empathy, intimacy and minding. As expected, it is mostly women doing caring work, but their status as women is furthermore constructed with particular connotations. In the sense that nostalgia for “ideal” care is reproduced in the construction of migrant care, the relationship between women and care is reproduced as well. In her discussion of gendered care Ungerson (2000) shows that care is partly based on practices that “bear such a close resemblance to the practices based on the experiences of mothering and hence are construed as “natural” aptitudes of women” (2000: 636). If “ideal” care is imagined as a state of loving, devotional minding, it is important to be conscious of the potential gender reductions in this context. Migrant women in particular are constructed as “the other”, which is representing the ideal of a caring identity. It is also important to hold here that the discursive arrangements have huge effects on migrant carers themselves, leaving them with “differing work and emotional relations, creating hybrids of contract and affect” (Glucksmann & Lyon 2006: 5.5) and putting them therefore in a, at least potentially, exploitative and disadvantaging position and role. The ideological and moral differentiation between formal and informal arrangements and the construction of the own home as the realm of delivery of close intimate care are significant features of what people feel about care. They are also, however, the route of potential exploitation of migrant workers, whose position is morally defined by an imagination of “ideal” care. This analysis, treating care not only as a practice but more as a cultural symbol in society which is based on an important moral framework, can explain the paradoxical situation identified by Glucksmann and Lyon (2006: 6.4), in which
much of the labour of care is performed by a relative stranger in a cultural context which prizes kinship in care. This might help explain the widespread depictions of fictive familial ties and the caring qualities of the migrant women themselves.

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