



## 5. SOCIAL EMBEDDEDNESS AND CARE AMONG TURKISH LABOR MIGRANTS IN VIENNA

### The Role of Migrant Associations

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#### Introduction: Care and Social Embeddedness

Stepping off a busy multilane street into the Turkish cultural association—located on the outskirts of Vienna in a traditional commercial district—feels like escaping a hostile industrial environment, heavy with traffic, into a hospitable and intimate place. Upon entering, I see elderly men sitting around tables in small groups, talking to each other. On the walls pictures in cheap-looking golden frames show Turkish landscapes. At the back of the room, on one of the walls there is a picture of the Austrian president, next to a picture of the Turkish president. While taking in this welcoming and complex setting, I am invited to join six elderly women who are preparing *Gözleme* (a traditional Turkish pastry dish) for today's celebration in a small back room. The women sit on the carpet, chatting; one of them cuts the dough into small pieces, two others have a big round board and a wooden stick to roll out the dough, and the rest fill the dough. This collective, seemingly easy, gendered work is done while chatting and exchanging news and gossip. It is an exceptionally hot summer day and the heat is almost unbearable in this small room. The women lift their headscarves from time to time to get some air. It is a nice, intimate atmosphere in the room and, when I join them, a conversation quickly gets off the ground.

—Field notes, 15 June 2013

THIS ETHNOGRAPHIC VIGNETTE REFLECTS SOME of my first impressions when entering one of the several Turkish voluntary associations in Vienna. When I sat together with the women in the back room where they prepared food, I learned that they not only met each other at the association but they also met on a weekly basis in one of their homes, mostly for Qur'an reading. Their husbands came to the associations even more frequently,

some on a daily basis, to chat and play cards together. When I asked the women preparing *Gözleme* who they consult if they need advice or help, two of them answered without hesitation: “We ask each other for advice when something comes up” (Hülya). “When something happens, all of us are there to help!” (Ayse).

For many other aging labor migrants I talked to, just as for Hülya and Ayse, one of the cultural, political, or religious voluntary associations held a central position in their lives. Although very different in nature, these associations were important places to socialize and to experience social embeddedness outside of the family and with others who had a similar migration history and a shared stage of life (in the sense of a particular “life situation”). Importantly, these people also shared a transnational outlook on aging. In this chapter, I illustrate and discuss how migrant associations become “places of caring.” I also show how novel, transnational understandings of aging and care are negotiated among older migrants in Vienna.

## Care and Social Embeddedness in the Context of Migration

Care is a difficult concept to grasp; it entails various aspects and involves multiple actors. In the current social science literature, care is most often discussed as a relational concept (see Korinek, Entwisle, and Jampaklay 2005). In the existing literature on care, different foci can be distinguished corresponding to the interest in different care “providers.” These include state-organized and institutionalized care, often linked to citizenship debates, and family-based care, frequently related to kinship debates. In this literature, there is a rather strict and problematic dichotomy between the public (formal) and the private (informal) domains of care. Some scholars, however, have challenged this dichotomy and have highlighted the enduring bias that care provided by family members is based on “good” emotions, while care by professional care workers is based on “fake” emotions or is completely lacking in feeling (Thelen 2015a).

In the literature on migrants’ care relationships (as in the anthropological literature more generally), care has long been discussed primarily within the context of kin relationships, with the family often identified as the prime care provider. At the same time, the state has been criticized for failing to fulfill its care responsibilities toward migrants (Buch 2015; England and Dyck 2016; Walsh and Näre 2016). In the discussion of the failure of the state to care for its migrant population and the focus on care relations within migrant families as compensating for the lack of state care, the role communities play when it comes to care remains widely

unexplored. In addition, even though there has been an increasing interest in questions of aging and migration, there are still only a few studies on this topic concerning Austria (see Reinprecht 2006). Migrant associations, which prove to be vital in the lives of aging labor migrants and which are central in the discussion of this chapter, are another under-researched subject in migration studies, particularly in Europe (Caglar 2006). Migrants who have reached retirement age and whose children have moved out from their parental home are key actors in community building around these associations, and they are the main focus of this chapter.

Care is understood here in a broad sense, with a particular focus on its relational and discursive (negotiable) dimensions (see Brown 2002; Korinek et al. 2005). Experiences of social embeddedness are understood as a fundamental element of a sense of being cared about. Regarding the distinction by Grant and colleagues (2004) between “caring for” (referring to concrete labor/services provided) and “caring about” (referring to relational and emotional aspects of care), this chapter primarily focuses on the latter. Social embeddedness nurtures feelings of belonging and security in the sense that one feels “cared about.” I understand social embeddedness in a relational sense: that is, social relations that foster a sense of “rootedness” and belonging, not in a geographically binding way, but more in the form of social ties (see Brown 2002; Korinek et al. 2005). Such an understanding of social embeddedness takes account of transnational ties and does not restrict a sense of embeddedness to a geographically defined place (for example, Austria versus Turkey). Social ties important for my interlocutors’ sense of social embeddedness, however, were closely linked to their everyday lives and daily routines, which included regular visits to one of the voluntary migrant associations. These associations will be the focus of this chapter when investigating the multiple but specific experiences of aging and relations of care among older labor migrants in Vienna. That said, the other two care “providers”—the state and the family—are not omitted from the discussion; rather, the three are assumed to be interrelated and are discussed in relation to one another.

## Research Contextualization

Aging migrants are a very diverse group, as this edited volume clearly shows. It is particularly important to take into account the specific migrant trajectories—including the stage of life when people migrate and the individual reasons behind the decision to migrate—as well as the specific legal and structural constraints aging migrants face. In what follows, I briefly carve out and contextualize the specific histories of Austria’s *Gastarbeiter*

(guest workers) and the specific challenges they have faced historically and continue to face today.

The first guest worker contracts between Austria and Turkey were signed in 1964. The majority of Turkish labor migrants were young men who worked under precarious conditions as unskilled workers, mainly in the construction industry but also in other industries, including textile and paper factories, as well as in tourism-related business (see Fassmann and Lichtenberger 1987). While some women entered alone as guest workers (see Lorber 2017), the majority either moved with their husbands to Austria or followed somewhat later (with their children, or sometimes children followed at an even later stage). Regardless of the fact that guest worker contracts did not foresee labor migrants remaining in Austria for more than a limited period of time, a significant number settled down and stayed.

When the idea of recruiting guest workers was first put forward in the early 1960s, no plans for integration measures, such as language courses, were included. The establishment of migrant associations, however, was supported by the authorities in the belief that these associations would be temporary and help guest workers to socialize among themselves in their new environment. However, these associations are still active throughout Vienna, and in 2004 there were 728 migrant associations registered in the city (Sohler 2007: 379), 109 of which were organized by the Turkish migrants (see figures 5.1 and 5.2).

Regardless of this specific history of Austria's migrant associations, it would be incorrect to characterize them as ethnically defined. In fact, political and religious affiliations were most influential when choosing a particular association, although the Turkish language dominated and thus was more or less a prerequisite for becoming part of the community (only in mosques, which non-Turkish visitors sometimes attended, did language play a somewhat lesser role). Rather than ethnicity, different associations reflect the diversity among the older Turkish labor migrants, suggesting that we take seriously "migrant's agency beyond ethnic subjects" (Caglar 2013: 407).

Between 2013 and 2016, I visited twelve Turkish cultural, political, and religious voluntary associations (including small mosques). The associations I visited differed greatly from one another. However, a common factor was that they were places with a strong sense of community and plenty of room for socializing. Among them were Turkish cultural centers, often also used as mosques, an Islamic-Alevi association,<sup>1</sup> and a Turkish democratic labor association. The last two were particularly politically active among the centers I visited (for example, they were used for discussion rounds and organizing demonstrations). In these voluntary associations, members



**FIGURE 5.1** Cloakroom at one of the Turkish migrant associations in Vienna decorated with pictures of its members in the years after their arrival in Austria. Photo by Ogül Büber.



**FIGURE 5.2** Lounge at one of the Turkish migrant associations in Vienna. Photo by Ogül Büber.

who were fifty years and older took on a central role in community building. During weekdays, the great majority of visitors were pensioners (particularly male pensioners), but on weekends and for religious festivities, the associations hosted people of all ages and entire families. I participated in activities at the associations and conducted semistructured narrative interviews there. In addition, I visited people in their homes, where I also conducted interviews. Between 2013 and 2016, I conducted twenty-five semistructured narrative interviews with twenty-five men and women who themselves (or their spouses) entered Austria as “guest workers.” In these interviews, which lasted between forty-five minutes and two hours, I asked questions that invited my interlocutors to examine their present lives by connecting them to past experiences and future aspirations. The interviews thus give insight into past decisions and present life strategies and concerns, as well as into hopes and fears regarding the future. Additionally, I conducted about thirty informal interviews, and with my key informants I conducted a second interview round.

While this chapter shows how greatly research participants valued the community around these associations, which was central to their sense of social embeddedness, it does not claim that all older Turkish labor migrants and their spouses are socially well-embedded. Two of my interviewees were not able to visit any of the associations on a regular basis because they had to look after a sick or handicapped adult child. Furthermore, the location of this study is of relevance: Vienna, with its historical particularities, including its long history of immigration, marks itself off from other places in Austria in terms of migrant-friendly infrastructure. The same can be said with regard to access to migrant associations, which are more numerous and more easily established in Vienna than in some other places in the country. These territorial discrepancies and different opportunity structures across a national territory need to be considered (Caglar 2013). Due to the many different associations I include in my analysis here, it is not possible to discuss the specific histories, outlooks, and political aspirations of each.<sup>2</sup> It would also go beyond the scope of this chapter to discuss the meaning of voluntary associations for migrants more generally (see Moya 2005). The focus thus remains on the meaning of such associations for older migrants and the migrants’ experiences of social embeddedness and care in these associations and beyond.

## Places of Social Embeddedness and Caring

Entering retirement for many of my interlocutors ended a phase of hard work as unskilled laborers and often coincided with their children moving

out. This stage of life was also unique in the sense that it opened up new possibilities, especially for transnational living arrangements. Retirement was an important time when spouses renegotiated where they wished to live and how they wanted to divide their time between Turkey and Austria (Palmberger 2016; Palmberger forthcoming). Despite gender differences, most couples in the end opted for one extended stay in Turkey, from one to three months (preferably during/including summertime) and spending the rest of the year with their children (and grandchildren) in Vienna. These individual preferences regarding mobility were central to their understandings of a satisfactory old age but were also significantly restricted by existing mobility regimes (Glick Schiller and Salazar 2013). Especially when their retirement benefits were below the guaranteed minimum, they risked losing compensation payments if they spent more than two months a year outside Austria.

The everyday lives of my research participants consisted of daily routines, which often included a visit to one of the cultural, political, or religious associations, as well as more exceptional but periodic activities, such as religious holidays celebrated with family and repeated commutes between Austria and Turkey. Everyday life may be characterized as “what happens every day, the routine, repetitive taken-for-granted experiences, beliefs and practices; the mundane ordinary world, untouched by great events and the extraordinary” (Featherstone 1992: 160–161). Everyday life is practiced, rather than reflected upon, and this becomes most apparent when asking people about it. Crucial for understanding my interlocutors’ everyday lives was the fact that they did not divide their activities into daily routines and leisure time. When asked about what they did for recreation, they referred back to their daily routines, which they sincerely hoped to keep up for as long as they were able. While daily routines differed between men and women, for many of both groups these routines included visits to one of the Turkish associations or meeting other members of one of the associations.

Besides visiting family members, an integral part of everyday life for most of the older generation I talked to were the visits to a cultural, religious, or political association in which they actively participated. The associations, which they visited on a regular basis, took center stage in their lives and provided an important place for them to socialize and to experience social embeddedness outside of the family. The atmosphere in these associations was rather informal, and people knew each other well. There they socialized, but also shared information and helped each other out with advice. Some described the association as their second home. The associations greatly differed in nature, particularly with regard to their religious and political orientation, and thus people purposely chose one over the other.

Most of the associations and mosques I visited during my fieldwork were rather invisible from the outside, often being located in basements. When they also hosted a mosque, there was a big area reserved for praying that was decorated with carpets and pictures. The remaining space was set aside for socializing and meetings and for different activities (e.g., music classes); furnished with tables and chairs, it most often included a small bar where tea/soft drinks and snacks could be consumed.

This was also the case in the Turkish Islamic cultural association, located in a traditional working-class district that Hasan, age sixty-four, visits on a daily basis. This association has become a second home to him, and he spends most of his day there. Hasan comes to the center every day to socialize and to join shared prayers. When asked to describe a typical day, Hasan answered, “When I wake up in the morning I pray and then go to bed again, for two more hours. Afterwards I come here. I stay here until the evening prayer, and then I go home.”

Hasan’s children at the time of the interview studied in Turkey, and his wife had moved to Turkey to support them. Hasan visits them regularly and each time stays for several weeks before returning to Austria. For ten years, Hasan has been receiving an invalidity pension, which at the time we spoke was 760 euros a month.<sup>3</sup> Hasan told me how difficult it is to live on such a small pension. The Turkish Islamic cultural association provides him with a place where he can spend his days, socializing and engaging in the association’s activities regardless of his limited budget. He can even enjoy a warm lunch there for only a small financial contribution. There he meets other men of similar age and with a similar migration history—men who came to Vienna during young adulthood as labor migrants and who have now entered retirement. On warm days, Hasan meets his friends from the Turkish cultural association at different public places in the neighborhood, in a particular park, or on a particular park bench. He said he knows where to find them without agreeing on a date and time to meet in advance.

While Hasan goes to the association first and foremost to socialize, many of my research participants take an active part in the organization of their association, as is the case with Mehmet, who is politically engaged and an active member of an Islamic-Alevi association. The following quotation from an interview I conducted with Mehmet describes how, besides family and household duties, active participation in the community life takes center stage in his everyday life:

Well, before retirement we had time but now I am a pensioner and I do not have time anymore [laughs]. I have built a house with a garden and a garage; I just planted five or six fruit and vegetable plants. I work in the garden and mow the lawn. When I find time during the week I come here to



the association [Islamic-Alevi association]. I have to come here at least twice a week. I help out here as much as I can.

Mehmet is involved in the organization of various cultural and political activities. He also arranges a communal breakfast that takes place once a month. Mehmet described the relationship between the members of the association as very intimate, even family-like: “We come here and talk like friends. All of the people here are like brothers and sisters to me.” The importance, especially after retirement, of the community around a particular association was stressed by many of my interlocutors. Even for those who had been members of an association for a long time, the meaning of the community around it often changed and increased after retirement, as experienced by another of my key interlocutors, Ada.

Ada, a self-declared atheist, described the community around the Turkish democratic labor association where she is an active member as extremely important for her wellbeing and sense of social embeddedness. Ada was forced into invalidity retirement in her mid-forties due to bad health. Before she retired, she worked for different cleaning companies and in the home care service sector. Since her husband died, Ada has experienced great loneliness and financial hardship. The only place where she finds some respite is at the political association of which she is an active member.<sup>4</sup> She told me,

I had to claim an invalidity pension due to my illness. I would have preferred to work longer because when you work you also socialize. Now, the only thing I have is the association; there, at least, I have something to do. Otherwise I would only sit at home alone or visit my sisters. But I also have financial difficulties, great financial difficulties! . . . I have nothing left to hold on to since my husband died. But at least there [in the association] I feel good. When I am at the association, I am relieved and find distractions. There I can forget everything and put everything aside.

Even though Ada is only in her mid-fifties, she has been an active member of her association for decades already. She, so to speak, grew old together with the association and with the other founding members. While the association has always been an important place for Ada, its importance increased drastically after her early retirement and the death of her husband.

## Outlooks on Late-Life Care

Late-life care was not an easy topic for my interlocutors to talk about and was most often not openly discussed within families. This became

especially clear when the children were present. While many were aware of the difficulties of home-based family care and knew that their children were busy with their own lives (jobs and children), this subject was generally avoided. Many of the aging migrants, it has to be added, still perceived themselves as care “providers” since they took on a great share of daily care activities, including not only caring for grandchildren but also looking after adult children with a disability or chronic illness, and it was not unusual for mothers to still cook for their adult children when the latter had busy working lives. Even if this care work was not evenly distributed between men and women, with women clearly playing a greater part in care activities, after retirement men became increasingly involved. This was the case with Erin, a man I met at a Turkish cultural association. Since his retirement, Erin had volunteered to care for two small children. He had two children of his own, twins, who were already grown up, but he had no grandchildren yet. The two small children Erin cared for, and to whom he often referred affectionately as his “two little Austrians,” were the children of his daughter’s Austrian friend who had fallen seriously ill. When Erin’s employer fired him at the age of only fifty, the older of the two children was only about forty days old. For Erin, this was no coincidence, and he told me that “this is a grace but also a test from Allah.” This example nicely shows how care relationships are more manifold and rarely one-directional. For Erin, retirement provided this particular window of opportunity to care for the two children.

Regardless of his “duties” looking after his “little Austrians,” Erin tries to visit the cultural association as much as possible. Similar to the other older migrants introduced above, Erin described the community around the association he regularly visits as essential to his wellbeing. When, however, I asked Erin where and from whom he would seek help if and when he is in need of care, he referred to his family and not to the association. Erin, like most of my other interlocutors, hoped that his children would take care of him and his wife when in need. At the same time, like many of the older generation, he was aware that he could not take his children’s help for granted and knew that “times have changed.” Therefore, many in the end added that they would seek institutional care if they needed to.

Even if there is a strong network and people help each other out, the community is only accessible as long as people are mobile enough to come on a regular basis to one of the associations. Places offering late-life care, such as nursing homes, seemed very inaccessible to aging Turkish migrants. This also became clear when talking to the women I met in the first of the voluntary associations described in this chapter, to whom I talked while they prepared traditional Turkish pastry in the little backroom. Hülya and Ayse started the following conversation when I asked them where they

would seek help and whether they would consider moving to a nursing home at an advanced age:

Hülya: I haven't given it much thought yet, I don't know; only Allah knows. We indeed hope that our children can take care of us. I don't know, I only hope that our children don't sell us out.

Ayse: If our children don't take care of us . . .

Hülya: Then we would go to a nursing home. But if my children don't take care of me I can't force them to. . . . We have not visited a nursing home yet nor has anyone from among our family or friends. Therefore, we don't know anything about them—neither good things nor bad. . . . We would need to know whether we could practice our religion freely there. They are Christians; I am Muslim. I don't know whether they would give me a place to pray there . . . or if they would give me a place to read the Qur'an; nobody knows.

Besides questions of faith (for example, prayer rooms) and halal food, research participants raised language difficulties as an issue when considering a nursing home in Vienna. Skepticism toward Austrian nursing homes was common not only among Muslims but also among those describing themselves as atheists, as was the case with Ada introduced above.

Important to note in Hülya's explanations, however, is the fact that she did not prioritize family care over institutionalized care. Hülya thus did not join the discourse that juxtaposes "true care" (which is attributed qualities of love and intimacy) to "institutionalized care" (see Thelen 2015b). In this discourse, home-based care is depicted as "warm" and done by relatives, and care provided by institutions is seen as "cold" (Hochschild 2003). Hülya, however, made it clear that one can be treated badly by a family member in the same way that one can be treated exceptionally well by a professional nurse:

And I would like to add that one can never foresee how things will go. You can remain in your own home or with your child and you don't know how it will be. The same is the case when you go to a nursing home. The Austrian nurse, who you don't know . . . there are good people and bad people. She can treat you badly or well, you don't know. But there are also really good people, people who even may treat you better than your own child does. We have been to hospitals and know that they can be so different; some really insult you and treat you badly.

Even if Hülya was aware that it is not always possible to predict where one would be treated best, she was still skeptical toward Austria's health institutions and was in favor of opening a Turkish (Muslim) hospital and nursing home. She said that her mosque already had plans to back such

efforts but that there was no state support and it would be hard to fulfill this dream with donations only. Hülya was convinced that the lack of suitable nursing homes is a big problem for Vienna's aging Turkish migrants.

Looking closer at the relation labor migrants have with the state when it comes to questions of institutionalized care, it becomes clear that it is an ambivalent one. Some of my interlocutors did not or could not describe where their negative attitude came from, and they admitted that they had never been to a nursing home and did not know anyone who had visited one and who thus could share their impressions of it. However, most of the people I talked to had been hospitalized and some shared with me their experiences of discrimination there. In an interview I conducted with Alev, a woman in her mid-fifties who followed her husband, a labor migrant, to Vienna almost thirty years ago, she told me how she was discriminated against when she was treated in a health resort and in a hospital:

I had knee surgery, my kneepans are in a very bad condition. . . . My health insurance paid for treatment at a health resort. . . . But, believe it or not, they would not let us [her and other Muslim women] go in the water at that health resort because we were wearing headscarves. . . . Nor was I allowed to use the sauna. They did not let us in with our swimsuits, which completely covered our bodies. . . . I also had bad experiences in the hospital when I could not express myself because of language problems. They performed surgery on my knees four times! And at the last surgery they let an intern treat me. They took a blood sample, four tubes of blood. . . . I was already suffering from anemia. They took my blood and threw it in the rubbish bin. And then the intern came and again took another blood sample from me.

Alev sensed discrimination in the way she was treated in the hospital and thought that the intern was allowed to "experiment" on her because she was originally from Turkey. She also felt defenseless since she was not capable of expressing herself in German. Such experiences in hospitals and other health institutions certainly do not counter skepticism toward nursing homes. Moreover, even if some of my interlocutors admitted that they would seek institutional care if they needed to, they had no information about how to secure a place in a nursing home nor did they have a clear idea of how these homes were run.

## Conclusion

In this chapter I drew attention to the importance of voluntary associations in the lives of aging Turkish labor migrants in Vienna. Cultural, political, and religious voluntary migrant associations are not only relatively easy

to access in old age but also provide a social context for the integration of personal histories and transnational life-concepts. The community around such associations was crucial for their wellbeing, as intimate, friendly, family-like places, and as places where they would seek advice and help if needed. The associations' importance increased even further with retirement and at the phase when children moved out of their parental home. Regular visits to one of the associations and meeting other members of the association in private settings were central to my interlocutors' everyday routines. It can be said that the sense of social embeddedness they enjoyed in the associations is based on a shared stage of life (in the sense of a particular "life situation") together with a shared migration history, transnational living arrangements, similar religious, cultural, and/or political ideas, as well as a common mother tongue.

As indicated at the beginning of this chapter, eldercare has most often been discussed either on the state (institutionalized) level or as exchanged within families. The latter often has been said to compensate for the lack of state-sponsored care designed for migrants' needs. In this vein, much has been written on the way care is predominantly accomplished within migrant families. This contributed to a tendency to overestimate family-based care in migrant families, while family-based care relationships among nonmigrant families have been understated (see Baykara-Krumme 2007; Fokkema and Naderi 2013). In this chapter, an additional form of care, found at the community level, has been opened up for discussion and it has been argued that voluntary associations deserve closer attention when researching aging and care in the context of migration.

Following the above-introduced broad understanding of care in which social embeddedness constitutes an important element and fosters a feeling of being cared about, the political, cultural, and religious associations that older Turkish migrants were members of may well be referred to as "places of caring." While I wish to highlight the potential of voluntary associations to become places of caring for aging migrants, I do not wish to hide their limitations either. This concerns first and foremost the fact that the associations constitute places of caring only for those who are (still) mobile enough to visit them and their members on a more or less regular basis and excludes those who are restricted in doing so. My interlocutors were well aware of this fact and never pictured the association as a provider of late-life care but rather referred to their family as the first choice in this matter.

Even if family-based eldercare was the preferred option of the great majority of my interlocutors, the presumption that family-based care was necessarily "warm" care and its counterpart, institutionalized care, "cold" did not remain unquestioned. Regardless of the fact that most of the men and women I spoke to said that they would prefer their children to look

after them when they needed it, they also articulated the wish for institutionalized eldercare that would cater to their particular needs and desires. Besides questions of faith (for example, prayer rooms), my interlocutors raised language difficulties as an issue when considering a nursing home in Vienna. Also halal food was an important topic. There was clearly a wish to spend late life among people with a similar migration background, with shared political ideas and/or faith. By articulating the wish for a Turkish nursing home, the desire for social embeddedness within a community (as experienced in the voluntary associations illustrated above) was voiced. This again supports the argument that social embeddedness is an essential basis for the experience of feeling cared about, which needs to be accounted for in debates on late-life care in the context of migration and transnational life-concepts.

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## Notes

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1. Since 2013, Alevis have been a recognized religious group in Austria.
2. Several scholars have critically assessed the historical and political dimensions of migrant associations. Caglar (2006), for example, analyzes how hometown associations have their specific histories and political locations. Yurdakul (2009) analyzes in detail the varying political engagements of different migrant associations in Germany and stresses that they developed their own political agendas and decisions rather than being passive recipients of state politics.

3. A disproportionately high share of those receiving invalidity pensions in Austria are migrants (Reinprecht 1999).
4. Besides political discussions and political activism (such as demonstrations), the democratic labor association also organizes courses in music and dance and other activities, and Ada sometimes participates in these.

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