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Care through digital connections

Enacting elder care through everyday information and communication technologies (ICTs) in Indian transnational families

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EPILOGUE

I started my fieldwork in 2014, having had read much anthropology and a bit of STS literature. After my first couple of months in India, I was compelled to look for ways to answer the “So what?” question: Why was calling through ICTs in transnational families important to understand, and what would doing so contribute to scholarly inquiry and to society? This question emerged and re-emerged during my conversations with fellow anthropologists when I shared my fascination over how family members in my study called each other, only to have them respond: “So people pick up the phone and call each other. What is so fascinating about that?” I have found STS care studies helpful in finding the vocabulary and analytical tools to articulate a reply, as it is formulated in this thesis, for now. By virtue of deepening the anthropological analyses of transnational family care through ICTs, as well as considering the ‘location’ of ethnographic fieldwork through the material semiotic approach, this thesis is an example of a ‘generative interface’ between anthropology and STS (de la Cadena et al. 2015). Through connecting the practices, topics, and analytical tools of these two disciplines and linking my findings to policy, I have engaged in transdisciplinary ‘bridgework’ (Rodríguez-Muñiz 2016). Most importantly, I hope I have managed to bring to light how something as mundane as picking up a mobile phone to call one’s parents is actually an astonishing, complex practice of care. It is such because it matters so deeply to people who do it. Just consider, for a moment, the last time you called your mother or your father, or perhaps your children, to ask them how they were doing and how their day was. After having read this thesis, I hope you will agree with me about just how fascinating that is: that you called, that they answered.

SUMMARY

What becomes of family care when it is practiced at a distance, with the help of everyday information and communication technologies (ICTs) such as mobile phones and webcams? In this thesis, I explore how care is practiced at a distance when adult children who are professional nurses migrate abroad for work while their parents remain in India. The research for this thesis included eight months of ethnographic research in India and Oman, as well as interviews and participant observation via ICTs with people who migrated from India to countries other than Oman. In my analysis, I draw on material semiotics, an approach from science and technology studies (STS) that allows me to investigate care in terms of practices that include not only people but also technologies. This enables me to investigate care at a distance and how everyday technologies are involved in shaping such care.

After an overview of the thesis and the research process (chapter 1), I critically discuss in chapter 2 the view of migration as an act of elder abandonment and argue that in Kerala, particularly among Syrian Christians, migration is rather a practice of elder care. Becoming a nurse who will migrate abroad for work is not an individual decision, but one in which the whole family is invested. Parents encourage their children, especially daughters, to study nursing and English in order to migrate abroad, preferably to an English-speaking country or else to one of the Gulf countries. I show that due to poor employment opportunities in Kerala, adult children with a lower-class background can only become effective carers after migrating abroad, which allows them to send remittances for their parents' living and health expenses. Money, in the form of investment in education and remittances, thus shapes care at a distance.

Moreover, family members practice care across national borders by involving landline phones, mobile phones, and webcams. With these devices, parents in India and their children abroad form what I call "transnational care collectives." Within these collectives, care practices that demand physical proximity are replaced by the practice of calling. In each transnational care collective, people tinker with each other and ICTs to establish a distinctive dynamic that determines which family members are involved, which ICTs they use, and who calls whom, when, and how often. Just like finding out each family member's taste in order to express care by preparing their favorite food, so it is important to learn each other's preferences for calling.

If calling is a care practice, what is necessary for this care to be considered 'good'? In chapter 3, I show that in the transnational care collectives I studied,

'good care' is related to the frequency of calling. These families commonly talked about good care in terms of daily calling. They established the 'right' frequency of calling through tinkering, and their agreement reflected the quality of the relationship between the children and their parents as it was established before migration. The better the relationship, the more frequent the calling. Discovering the most suitable frequency of calling may involve some tension, as people need to manage this new pattern of communication, supported by ICTs.

Daily calling changes the aim of communication from exchanging particular information to sharing everyday life with each other at a distance. By comparing frequent calling over the phone and the webcam, I show that people practice such 'being together' in different ways through different devices. On the phone, people talk about mundane details of their everyday life, such as what they did that day, how the animals and the plants around their home are doing, and the news of their neighborhood and church. While silence on the phone is filled in with such details, the webcam allows for silence, enabling the people to 'spend time together' without necessarily talking or even looking at each other constantly. In this way, family care at a distance, both the form and the content, is shaped by ICTs.

In chapter 4, I describe how in the patriarchal Syrian Christian families in Kerala, from which the nurses commonly originate, the transnational care collective transforms what it means to be 'a good daughter.' According to the conventional practices of elder care in India, a daughter's main duty towards her parents is to marry as early as possible. With marriage, a woman assumes the responsibilities of care with her parents-in-law. In the transnational care collective, however, daughters' duties are transformed by money as well as ICTs. The nurses' parents 'suffer' a lot through providing financial resources for their children's education as nurses. The idiom of 'suffering' emotionally ties the children to 'repay the suffering' of their parents by migrating abroad, sending remittances to the parents, visiting them yearly, and calling them daily. For nurses, mostly women, these practices contradict their filial obligations, established by the patriarchal kinship system of their Syrian Christian environment. The new duties of daughters further influence the position of men, particularly as nurses' husbands assume the practical care for their parents-in-law.

Written in the form of a blog post, chapter 5 is a story that complements earlier chapters that describe the transnational care collective. The story describes a family of five siblings, scattered around the world, and their mother who is afflicted with severe dementia. At first, I assumed that this family, and particularly a daughter who is a nurse in the United States, cannot form a collective with their mother, since dementia precludes the two of them from talking on the phone.

However, the family nevertheless forms a collective in which the dynamic is shaped by dementia itself. The story further highlights the struggles of practicing care when family relationships are poor pre-migration and aggravated by serious illness of the parent in need of care.

Chapter 6 considers the role of ICTs in the practice of fieldwork itself. I argue that the involvement of ICTs in fieldwork, specifically in terms of conducting interviews and participant observation with study participants via the phone and webcam, changes the meaning of ‘the field site.’ To account for the particular character of fields, which are co-created not only with informants but also with ICTs, I suggest the notion of the ‘field event.’ This term emphasizes the active role of ICTs in shaping what kind of data the ethnographer may gather as well as how they may unsettle local social hierarchies of gender and age within specific field events. For example, through possessing technological skills and knowledge, a young daughter has more influence in co-creating a field event than her aged father. For their part, ICTs are embedded in their local social, political, and infrastructural environment that influences their functioning, for example through limiting their use through national and workplace regulations.

In the conclusion, chapter 7, I connect the threads of the thesis to answer the questions posed in the introduction. I reiterate that children living abroad, their parents in Kerala, and ICTs are involved in doing care at a distance through transnational care collectives, by engaging in the practices of calling, taking care of ICTs, and involving other people in the collective. Additionally, I highlight the role of money in shaping migration and sending remittances as care practices. As they reshape filial obligations in a transnational context, ICTs and money transform the norms of what is ‘good care’ and who are ‘good children,’ particularly ‘good daughters.’ The inclusion of ICTs and money in care has implications for policy making on aging and migration in India. For example, in India, policy makers could encourage the recognition of elderly people as ICT users and work against the stigmatization of migrating nurses as abandoning their elderly parents. Furthermore, taking ICTs seriously as agents has implications for ethnographic methodology. Including ICTs in the practice of fieldwork demands that ethnographers pay close attention to how ICTs shape their field, their relations with their study participants and the data they collect. In its exploration of the role of ICTs in care and fieldwork through material semiotics, this thesis is an example of an interface of anthropology and STS.

SAMENVATTING

Hoe verandert zorg binnen de familie wanneer deze op afstand wordt verleend, met behulp van alledaagse informatie- en communicatietechnologieën (ICT's) zoals mobiele telefoons en webcams? Ik onderzoek hoe intergenerationele zorg op afstand wordt verleend, door volwassen kinderen die naar het buitenland emigreren voor werk als professionele verpleegkundige terwijl hun ouders in India blijven. In dit proefschrift beantwoord ik deze vraag op basis van acht maanden etnografisch onderzoek in India en Oman, aangevuld met interviews en participerende observatie via ICT's met mensen die naar het buitenland zijn verhuisd. In mijn analyse maak ik gebruik van ik materiële semiotiek, een benadering van wetenschaps- en technologiestudies (STS) waarmee ik de zorg kan onderzoeken als verzameling van praktijken waarbij niet alleen mensen, maar ook technologieën betrokken zijn. Dit geeft inzicht in de vraag wat zorgverlening op afstand inhoudt en hoe alledaagse technologieën deze zorg mede vormgeven.

In hoofdstuk 2 wordt de visie op arbeidsmigratie als 'het achterlaten van de oudere' kritisch besproken en betoog ik dat in Kerala, vooral onder Syrische christenen, migratie juist gezien kan worden als een vorm van ouderenzorg. Opleid worden tot verpleegkundige om naar het buitenland te migreren voor werk is geen individuele beslissing, maar een beslissing waarbij het hele gezin betrokken is. Ouders moedigen hun kinderen, met name dochters, aan om verpleegkundige te worden en Engels te studeren om naar het buitenland te verhuizen. Bij voorkeur naar een Engelstalig land of naar een van de Golfstaten. Ik laat zien dat volwassen kinderen met een lagere sociaaleconomische status door de slechte arbeidskansen in Kerala pas 'goede zorg' kunnen verlenen na hun migratie naar het buitenland. Zij zijn na hun migratie in staat om hun ouders geld te sturen om in de kosten van levensonderhoud en gezondheidszorg te voorzien. Geld, bijvoorbeeld ouderlijke investeringen in de opleiding en overmakingen van kinderen naar hun ouders, geeft dus vorm aan zorgverlening op afstand.

Bovendien wordt zorg verleend over de landsgrenzen heen, met behulp van vaste telefoons, mobiele telefoons en webcams. De ouders in India en hun kinderen in het buitenland vormen met deze technologieën wat ik noem 'transnationale zorgcollectieven' (*transnational care collectives*). Zorgpraktijken die om fysieke nabijheid vragen, zoals het bij elkaar verblijven en samen eten, zijn hierin niet meer mogelijk. Binnen transnationale zorgcollectieven wordt bellen via ICT een nieuwe zorgpraktijk. In elk transnationaal zorgcollectief wordt gesleuteld aan (*tinkering*) elkaar en aan ICT's om een passende dynamiek te vinden waarin

familieleden het contact met elkaar kunnen aangaan. Door dit knutselen en zoeken wordt bepaald welke ICT men gebruikt, wie wie belt, wanneer en hoe vaak er wordt gebeld. Net zoals we met zorg aansluiten op de smaak van elk gezinslid bij het bereiden van hun lievelingseten, zo is het net zo belangrijk om aan te sluiten op elkaars voorkeuren bij het bellen.

Als bellen een zorgpraktijk is, wat is dan nodig om deze zorg als ‘goed’ te beschouwen? In hoofdstuk 3 laat ik zien dat in transnationale zorgcollectieven ‘goede zorg’ samenhangt met de frequentie waarmee men belt. Gezinnen in mijn studie gaven ‘dagelijks telefoneren’ vaak als voorbeeld van goede zorg. De kinderen en hun ouders stelden de ‘juiste’ frequentie van telefoneren vast door dit samen uit te proberen. De onderlinge overeenstemming met betrekking tot de belfrequentie weerspiegelde de hechtheid van de relatie tussen de ouders en kinderen zoals die was vóór de migratie: hoe hechter de band, hoe vaker men belt. Uitzoeken wat de ‘juiste’ belfrequentie is kan ook voor enige spanning zorgen, omdat men met nieuwe communicatievormen en -patronen moet leren communiceren.

Het dagelijks bellen is niet bedoeld om informatie uit te wisselen, maar biedt de familieleden de gelegenheid om, op afstand, hun dagelijks leven met elkaar te delen. Door een vergelijking te maken tussen veelvuldig bellen via de telefoon en het communiceren via de webcam laat ik zien dat mensen op verschillende manieren op verschillende apparaten ‘samen zijn.’ Aan de telefoon praat men over alledaagse details van het dagelijks leven, zoals; wat ze hebben gedaan, hoe het gaat met de dieren en de planten rondom hun huis en welke nieuwtjes er is in hun buurt en de kerk rondgaan. Terwijl aan de telefoon stiltes opgevuld worden met dergelijke details, is er via de webcam ruimte voor stilte, waardoor de mensen ‘samen tijd kunnen doorbrengen’ zonder noodzakelijkerwijs te praten of zelfs elkaar constant aan te kijken. Op deze manier wordt zorg op afstand in de familie, zowel in de vorm als de inhoud, gevormd door ICT’s.

In hoofdstuk 4 beschrijf ik hoe, in de patriarchale Syrische christelijke families in Kerala waar de verpleegkundigen oorspronkelijk vandaan komen, het transnationale zorgcollectief mede vormgeeft wat het betekent om ‘een goede dochter’ te zijn. Volgens de conventionele praktijken van ouderenzorg in India, is de belangrijkste plicht van een dochter jegens haar ouders zo snel mogelijk te trouwen. Met het huwelijk krijgt een vrouw de verantwoordelijkheid voor de zorg voor haar schoonouders. In het transnationale zorgcollectief krijgen de taken van dochters echter een nieuwe vorm, zowel door geld als door ICT’s. De ouders van de verpleegkundigen brengen veel offers wanneer zij de opleiding tot verpleegkundige voor hun kinderen financieren. Het spreken over ‘offers brengen’

en het 'lijden' van de ouders kweekt een emotionele verplichting bij de kinderen om het ouderlijk lijden te compenseren door naar het buitenland te emigreren, geld naar hun ouders over te maken, hen jaarlijks te bezoeken en ze dagelijks te bellen. Deze praktijken staan op gespannen voet met de normen en verwachtingen van het patriarchale verwantschapssysteem van de Syrisch-christelijke omgeving waar de kinderen oorspronkelijk vandaan komen. De nieuwe taken en verplichtingen van dochters beïnvloeden ook de positie van mannen, in het bijzonder die van echtgenoten van verpleegsters, die de praktische zorg voor hun schoonouders op zich nemen.

Hoofdstuk 5 beschrijft, in de vorm van een blogpost, een verhaal dat als aanvulling fungeert op eerdere hoofdstukken over het transnationale zorgcollectief. Het verhaal beschrijft een gezin van vijf broers en zussen, verspreid over de wereld, en hun moeder die lijdt aan ernstige dementie. In eerste instantie ging ik ervan uit dat de kinderen in dit gezin, met name een dochter die verpleegster is in de VS, geen zorgcollectief met hun moeder kunnen vormen, omdat dementie het telefoneren bemoeilijkt. Het gezin vormt desalniettemin een collectief, waarin de dynamiek wordt medegevormd door de dementie zelf. Het verhaal laat de worsteling zien van het verlenen van zorg op afstand, wanneer familierelaties al moeilijk waren voor de migratie en nog eens verergerd worden door de ernstige ziekte van de ouder die praktische zorg behoeft.

In hoofdstuk 6 ga ik in op de rol van ICT's bij het doen van etnografisch veldwerk. Ik laat zien dat de gebruik van ICT's in het veldwerk, met name in het afnemen van interviews en het doen van observaties via de telefoon en de webcam, invloed heeft de praktijk van het veldwerk, waarbij met name het idee van de (geografische) afbakening 'het veld' als locatie (*field site*) zijn vanzelfsprekendheid verliest. Om rekenschap af te leggen van de verschillende velden die simultaan tot stand gebracht worden – geco-creëerd met de informanten, maar ook met de gebruikte ICT's – stel ik voor om het begrip '*field event*' te gebruiken. Deze term benadrukt de invloed van ICT's bij het veldwerk, bijvoorbeeld in het mede vormgeven van wat voor soort gegevens de etnograaf kan verzamelen maar ook door de wijze waarop sociale hiërarchieën van geslacht en leeftijd kunnen worden ontworpen. Een jongere dochter kan bijvoorbeeld meer controle of invloed hebben op het veld-event dan haar ouder wordende vader, doordat zij over meer technologische vaardigheden en kennis beschikt. Tegelijkertijd zijn ICT's ingebed in hun lokale sociale, politieke en infrastructurele context die ook hun functioneren beïnvloedt, bijvoorbeeld als hun gebruik beperkt wordt door nationale- en werkplek-reglementen.

In het concluderende hoofdstuk 7 verbind ik de verschillende voorgaande hoofdstukken met elkaar om de vragen gesteld in de inleiding van het proefschrift te beantwoorden. Ik vat samen hoe kinderen in het buitenland, hun ouders in Kerala en ICT's allen betrokken zijn bij het verlenen van zorg op afstand, via transnationale zorgcollectieven, door deel te nemen aan de praktijken van bellen, zorgen voor ICT en het betrekken van andere mensen in het collectief. Daarnaast belicht ik de rol van geld bij het migreren naar het buitenland en de zorgpraktijk van het overmaken van geld naar het land van herkomst. De verplichtingen van kinderen in een transnationale context krijgen een nieuwe vorm door geld en het gebruik van ICT's, en daarmee wijzigen ook de normen van wat 'goede zorg' is en wat het betekent om een 'goed kind' te zijn en met name een 'goede dochter.' De rol van ICT's en geld in de zorg heeft beleidsimplicaties met betrekking tot ouderen en migratie in India. Bijvoorbeeld, in India kunnen beleidsmakers de erkenning van ouderen als ICT-gebruikers aanmoedigen en stigmatisering van migrerende verpleegkundigen tegengaan. Bovendien heeft het nemen van ICT's als agenten implicaties voor de etnografische methodologie. Het opnemen van ICT's in de praktijk van veldwerk vereist dat etnografen veel aandacht besteden aan hoe ICT's hun vakgebied vormen, aan hun relaties met hun studiedeelnemers en aan de gegevens die zij verzamelen. Met dit onderzoek naar de rol van ICT's in de zorg en in veldwerk is dit proefschrift, gebruikmakend van materiële semiotiek, een voorbeeld van een 'interface' tussen antropologie en STS.

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LIST OF THESIS-BASED PUBLICATIONS

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- 2019 **Ahlin, Tanja**, and Kasturi Sen. "Shifting Duties: Enacting 'Good Daughters' Through Elder Care Practices in Transnational Families from Kerala, South India." *Gender, Place and Culture* (online first). doi:10.1080/0966369X.2019.1681368
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