Families, Communities and the State:
Assumed and invisible roles in older Turkish migrants’ care needs

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Background

- Turks, Alevi/Kurds and Turkish Cypriots living in the UK are sometimes coined as ‘invisible minorities’
  - Not always visible social markers
- As many other BME groups in the UK, they are growing older with associated care needs
- Kinship and community ties, both social and economic, are central
The Research

- Collaborative work between the Social Care Workforce Research Unit, KCL and Dokuz Eylül University, Izmir

- Interviews and focus group discussions with:
  - Older Turkish migrants
    - 66 participants (34 women, 32 men; mean age of 72.3 years; 13 Turkish, 24 Cypriot and 29 Alevi or Kurds)
  - Turkish care workers and Turkish community care coordinators
    - 32 participants

- Fieldwork from October 2011 to February 2012
Presentation Focus

- Perception of ageing and long term care
  - Immigration histories
  - Socially constructed old age

- Ageing place and individual biographies
  - Adjustments and nostalgia
  - Choice and empowerment (or lack of it)

- Roles of families, communities and the state in the ageing process
  - Enclosed communities and ethnic economies
  - Older and younger migrants relationship structure (expectations and realities)
“My husband had a business in İstanbul. But he went bankrupt and we were stuck in a difficult situation. I had heard from my friend that the tailors earn good money in London. But I was illiterate; I had never gone to primary school, however, I learnt it by myself. Moreover I do not know English. My friend suggested to come here and to work here. And I took my little daughter and came to London (in the 60s). Next day I began to work in a garment workshop. I did not have to speak English because everyone here spoke Turkish, I did not need to learn English. My friend had arranged a room for us. I worked hard and in tough conditions but without any formalities and I work largely as piecework.” [Translated]

(Turkish, 72 old woman)
Labour Participation

- Important element in shaping immigration histories and trajectories
- Level of skills and years of informal labour participation in enclosed, ethnic economies
- Years of relative and absolute exclusion from wider society
- End of labour participation, or onset of care needs, signaled a new era of unknowns and sudden need to know the ‘language’ and ‘system’
Families and Kinship: Assumed Responsibilities

- Expectations of the family system
  - Inline with other research on collectivistic societies

- Inter-changeable care responsibilities from and for older people

- Assumed but not necessarily met

They [the Government] think that our elderly people stay with us, but this is not always possible, we use some social care services at home such as home help, meals on wheels, from Council or Government. (Turkish Care Co-ordinator)
Invisible and Recognised

Care needs

• Large gaps between actual health needs and perceived care needs
  • May lead to crisis situations and intensive care needs

• Importance of culturally sensitive services and perceptions of limited choices

• Some were dismissal of available ‘formal’ or outside the family circle activities and services

‘I feel more comfortable, safe and secure with Turkish people in general including care workers’

(73 years old, female, Alevi)
Barriers and social exclusions in old age

- Language barriers
- Perceptions of self and others
- Belonging and contradictions between self and place identities
- Community structure with some patriarchic social practice
  - double jeopardy for older women

‘Men go the Turkish Cafe or Turkish Community Centre but we [women] are not included in any Centre’

(62, female, Cypriot)
Importance of kinship and family

- Most care is provided within the family
  - Role exchange, child and elder care
- Those with off-spring grown in the UK are more aware of services and activates
- Social and psychological support
- Importance of maintaining own identity at old age
- However, cannot be always there
Conclusion

• Family is an important block in care provision - BUT this is not always available

• Language barriers and cumulative social isolation during younger age crucially impact perceptions, access and satisfaction of care

• The need to work with the younger and older Turkish communities to bridge care gaps

• Considerable cost implications with value for early intervention and preventative measures
Thanks for listening
Any questions?