

An HCI Health Justice Lens for Platform Work in Türkiye

The Case of Migrant Health Workers

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ABSTRACT

This paper zooms in on the platform work with an intersectional health justice focus of HCI. While Türkiye has established exemplary centralised digital health technologies for the patient centered services, a growing set of informal domestic caregiving services remain unrecognised in this digital world. A particularly precarious and largely invisibilized group of work labor, migrant domestic and careworkers in Türkiye is an example. Operating outside formal healthcare structures, migrant domestic and care workers navigate an ecosystem where their labor remains unrecognized yet essential. This paper is a first attempt to examine how informal domestic and care services from migrants intersect with digital health infrastructures and platform economies. The existing healthcare technologies overlook these workers and their reliance on the platform work labor in the healthcare, reinforcing their invisibility and limiting their access to resources. Expanding human-computer interaction (HCI) research on health justice, integrating participatory and co-creative methods, applying an intersectional feminist lens to understand their landscape could all help designing more inclusive equitable platform work environments.

CCS CONCEPTS

- Social and professional topics → User characteristics, race and ethnicity; Computing technology policy; Government technology policy, Medical information policy
- Human-centered computing → HCI theory, concepts and models.

KEYWORDS

Platformwork, intersectional feminism, social justice, health technologies, Türkiye

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Imagining Health Justice in HCI

In HCI, a social justice approach means attending to the ways that individuals experience oppression, including how benefits, burdens, obligations, power, opportunity, and privilege have been (in)equitably distributed within society [9]. According to a systematic literature review, engaging with a social justice agenda in HCI, rooted from the participatory and value driven practices, has been popular than ever in the last ten years with over a hundred and twenty publications between 2009 and 2022 [6].

The social justice perspective in the healthcare technologies and interactions should not be an exception. Chordia et. al.'s [6]. corpus of 124 papers on social justice in HCI included papers about health, -more than eight percentage of all papers- including diverse perspectives such as: health worker perceptions of technology, home health aid technologies, mental health and self-care, AI and global health, tech mediated mental health support [6].

Justice oriented technology interventions for assistance and care are also good candidates for health justice research. While there are only a few explicitly making this call, for example previous work on decolonizing collaborative care [11] touched upon cultural differences, and the inequities they could create via the design of digital interventions for collaborative care without the nuanced understanding. Sun et. al. [14] 's work, that includes a survey study with 191 care workers in both digital and conventional elderly care facilities, showed the limitations of data-drivenness, for instance how the digitalization reduced care workers to servant to the data, erasing their agency and knowledge. A persistent focus on how specific healthcare services both benefit and harm diverse communities can unveil overlooked issues that mainstream technological developments often fail to address.

In this work, I suggest the importance of understanding the Understanding migrant domestic and careworkers in Türkiye, a mostly invisible group of labor, co-creating and developing tools and services have the potential to reveal intersectional burdens, power relations, and show us ways to build healthcare services that would equally benefit diverse communities, independent of citizenship, education, or gender. Understanding migrant domestic and careworkers in Türkiye would include researching on the ways they build networks, and how they use platform work alongside the existing governmental systems. In broad, such studies can inform

us on the emerging needs of our healthcare systems towards the goal of becoming more justice-oriented and inclusive technologies.

2. Imagining Platform Work for Migrant Health Workers

Platform work, broadly defined as labor mediated through digital platforms that algorithmically manage, distribute, and evaluate tasks [13], offers a critical subject for CSCW and HCI, due to its close relationship with the socio-technical infrastructures and worker experiences. In healthcare, platformization is reshaping labor conditions, offering both flexibility and precarity. Ken Loach's film *Sorry We Missed You* (2019) depicts the life in such conditions, illustrating how platformized care labor often intensifies worker exploitation, shifting risks onto carer individuals, yet maintaining the illusion of autonomy. While existing platform work systems risk deepening inequalities—turning care into an on-demand service at the expense of workers' well-being—, it is possible to imagine alternatives. For instance, taking platform work with a perspective such as Ostrom's vision of commons-based governance [2] may offer an alternative perspective. If platform infrastructures were reimagined as cooperative digital commons, healthcare platforms could foster solidarity, worker-led governance, and mutual aid, ensuring that care work remains dignified, sustainable, and driven by shared community values rather than corporate profit motives.

The case of migrant domestic and care workers in Türkiye -and other localities- can be a strong case for future health justice research. Only with the help of CSCW and PD work, such a case can be understood better. To build a health justice lens, and integrating informal care networks, especially the most undervalued work of the migrant communities would supply us with solid justice oriented tools and opportunities for such cases.

3. The Case of Türkiye

Accurate and up-to-date statistics on the number of migrant domestic and care workers in Türkiye are limited due to the informal nature of much domestic and care work. However, the following statistics can help us to make a picture. The Ministry of Labor and Social Security declared the number of work permits granted to foreigners in 2023 as 239,835. The domestic personnel with 17,151 people are the second largest group (after accommodation workers), and the steady growth in this group is visible (e.g. in 2022 this category has 15146 people.)[15]. Moreover, the detailed breakdown of nationality, and gender from the statistics on migration and work permits in 2023 shows that the number of women from certain countries is significantly higher than that of men (n1:men; n2:women) among the work permits for the following countries Kyrgyzstan (2919; 5268), Indonesia (1104; 4503), Ukraine (540; 2828), Georgia (337; 2719), the Philippines (153; 2030), and Moldova (187; 918). This data aligns with qualitative studies on migrant care and domestic workers from these countries[16].

Our statistical knowledge about the migrant domestic and careworkers is restricted to the given numbers, and their integration

to the existing healthcare services, and governmental technologies remain underresearched. The digitization of healthcare services in Türkiye has enabled efficient data management, patient monitoring, and appointment scheduling. While these advancements have enhanced patient accessibility, they do not address the growing demand for caregiving services in general, and the participation of migrant domestic and careworkers into such systems remain totally informal, and mostly invisible. Especially, there is no documentation, monitoring or a systemic archive on how the home-based hourly, daily or long term care take place. Informal networks of migrant and domestic and careworkers have emerged, as systems organized through community networks, and digital platforms.

Cuban's[12] work highlights how migrant women entering the global care industry for aging and care often undergo a process of labor devaluation, where legal structures, institutional policies, and social expectations intersectionally contribute to their marginalization. Similar to these patterns observed in the UK, migrant domestic and careworkers in Türkiye experience deskilling, where their qualifications as nurses or healthcare professionals in their home countries do not translate into equivalent employment opportunities[2]. Moreover, as Cuban emphasizes, migrant women frequently find themselves confined to the so-called "5C" jobs—cleaning, caring, cashiering, clerical work, and catering—due to restrictive labor markets and gendered labor expectations[12]. In the case of Türkiye, the lack of legal recognition for informal care workers further exacerbates their precarious conditions, forcing them into employment niches characterized by low status and limited rights [10].

Moreover, Önder in her article "Migrant Women Domestic Workers in Istanbul: Researching Emotions as Micro-political Practices"(original in Turkish)[4], shows how the background, education and economic capitals of the workers affect their emotional labor and attachment to the people they work with. Çeltikçi looks into the Filipina migrant workers life in Türkiye, and her master's thesis suggest Filipinas face intersectional discrimination as women, foreigners, and unqualified professionals in domestic labor, often navigating systemic inequalities. Despite these challenges, they form informal networks of solidarity, collaborating as platform workers and caregivers, where they create supportive spaces to resist, negotiate, and build mutual aid within the constraints of a globally gendered division of labor[10].

The restricted number of qualitative studies indicate to the importance of understanding migrant domestic and careworkers as full persons in order to create equitable healthcare technologies and other services for them. Beyond offline community networks, digital platforms and social media would also play a crucial role in the visibility and internal organization of lives of migrant domestic and care workers in Türkiye.

4. Potential for Critical Computing and Health Justice Agendas in HCI

Using social media to understand caregiving related burden has been a classical way of understanding such dynamics in HCI and CSCW. Previous work in HCI used social media analysis e.g. for understanding people living with health conditions and their caregivers [7], or for gaining insights to support adult children caring for parents who are aging in place[8]. In Türkiye, websites such as [1] serve as public-facing marketplaces where caregivers promote their skills, list their preferred working locations, and disclose personal details such as names, photographs, and pay expectations. By analyzing such platforms, researchers can gain insights into patterns of employment, wage disparities, and the distribution of care work across regions, shedding light on the intersectional dimensions of health justice.

Additionally, Instagram and Facebook accounts like [5][3] managed by Turkish-speaking advisors, provide a space for caregivers to share struggles, visa issues, and expectations of employment along with their introductory videos. These digital spaces immediately highlight the structural inequalities these workers face, revealing the tensions between formal labor markets and informal care labor economies, especially the platformwork organised through multiple stakeholders. Studying these online networks provides valuable insights into how technology mediates precarious labor, support systems, and advocacy efforts within migrant caregiving communities.

Such examples show how informal care work intersects with digital platforms in Türkiye, and have a great potential for further analysis drawing from an intersectional framework to analyze the gendered, racialized, and class-based dimensions of this labor. By acknowledging the role of migrant domestic and careworkers, I aim to identify new directions for HCI research that better integrate justice-oriented perspectives to the future informal care networks. Ultimately, a possible study should seek to bridge the gap between formal healthcare systems and the realities of caregiving labor, advocating for more inclusive digital health infrastructures. These workers remain unrecognized within the official healthcare system, yet they fulfill a vital societal need. Their invisibility raises important questions at the intersection of technological inclusion, labor rights, and the future of caregiving within platform economies.

Looking forward, I would speculate future research could adopt a range of participatory and co-design methodologies in a more reflexive and intersectional manner [17][18] to deepen our understanding of the lived experiences of migrant domestic and care workers. Approaches such as living labs and feminist participatory research could be rethought for the migrant domestic and care workers, offering spaces where they can co-create narratives and solutions that address their everyday struggles and transitions within the caregiving ecosystem. Such methods could also explore how play and speculative design interventions might

serve as mechanisms for imagining more just and inclusive futures in platform-mediated care work.

Furthermore, the theoretical concepts from social justice in HCI (e.g. intersectional feminism)[6] could be expanded to Health HCI upon by examining how overlapping systems of oppression — such as gender, race, migration status, and labor informality — uniquely impact migrant domestic and care workers. Drawing upon feminist HCI and CSCW frameworks, research could investigate how specific technologies might better address these intersecting inequities. For instance, how might platforms be redesigned to empower caregivers through shared knowledge, peer support, or advocacy tools that challenge exploitation and precarious conditions? By situating the research within broader discourses of feminist commons and platform cooperativism, such efforts could contribute to building systems that prioritize care, justice, and collective empowerment.

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