Social Inclusion
2026 • Volume 14 • Article 12191
https://doi.org/10.17645/si.12191

cogitatio

ARTICLE

Open Access Journal

Bounded Transport, Mobility Justice, and Claims for Recognition Among Live-in Care Workers

Petra Ezzeddine

Department of Social and Cultural Anthropology, Faculty of Humanities, Charles University, Czech Republic

Correspondence: Petra Ezzeddine (petra.ezzeddine@fhs.cuni.cz)

Submitted: 13 February 2026 **Accepted:** 15 July 2026 **Published:** 3 September 2026

Issue: This article is part of the issue "Transnational Organization of Labour, Mobility, and Senior Care in Central and Eastern Europe" edited by Ewa Palenga-Möllenbeck (Goethe University Frankfurt), Dora Gabriel (ELTE Centre for Social Sciences / ELTE Centre for Economic and Regional Studies), Olena Fedyuk (CEU Democracy Institute), and Kristine Krause (University of Amsterdam), fully open access at https://doi.org/10.17645/si.i533

Abstract

European long-term care systems increasingly depend on regularly commuting live-in care workers from Central and Eastern Europe, yet the mobility infrastructures sustaining this labour remain largely overlooked. This article examines bounded transport, an emic term used by Slovak live-in care workers, brokerage agencies, and transport providers to describe agency-organised door-to-door transport between workers' homes and care recipients in Austria. It argues that bounded transport constitutes a critical yet invisible infrastructure of transnational care, organising labour mobility while redistributing temporal, financial, and bodily risks. Drawing on policy analysis, online ethnography, advocacy materials, and semi-structured interviews, the article demonstrates how repeated fatal transport accidents transformed an ordinary feature of cross-border care into a site of social contestation and collective action. By conceptualising mobility as an integral component of care rather than its external condition, the article contributes to debates on long-term care governance and mobility justice by showing how live-in care workers transform experiences of invisibility and vulnerability into claims for recognition and solidarity in the governance of European care regimes.

Keywords

Austria; collective action; European Union; live-in care; mobility justice; recognition; Slovakia; transport

1. Introduction

We open with a quote by Júlia, representative of a live-in care workers' organisation in Austria:

> It is terrible, but this invisible work only becomes visible in society when some tragic transport accident happens. Yet every two weeks, thousands of women travel under quite unsafe conditions.

Senior care systems in the European Union, closely linked to the normative ideal of ageing in place and the provision of care within older people's home environments, have become increasingly dependent on cross-border care arrangements sustained by regularly commuting live-in care workers from Central and Eastern Europe to Western Europe (Katona & Melegh, 2020). These arrangements have become a central component of contemporary European care regimes, enabling older people to remain in their homes while relying on mobile care workers who circulate between sending and receiving countries.

According to Ezzeddine and Uhde (2025), such arrangements operate through specific "borderscapes of care": dynamic, socially and politically produced configurations that shape mobility, labour relations, and everyday practices of care. Within these borderscapes, care emerges as a paradoxical commodity, essential for sustaining life and social reproduction—yet socially devalued and precariously organised, with structural inequalities continuously produced across the European Union (pp. 401–402).

A growing body of research has documented the conditions of transnational care work, addressing receiving and sending contexts, as well as the consequences of migration for families and communities (for example, Aulenbacher et al., 2024; Bahna & Sekulová, 2019; Katona & Melegh, 2020). However, considerably less attention has been paid to the material and organisational infrastructures through which live-in care workers themselves are transported across EU borders within rotational care regimes.

Transport is not merely a logistical matter; it constitutes a critical infrastructure through which participation in transnational care labour markets is organised, governed, and differentiated (Sheller, 2018). Despite its centrality to the functioning of cross-border care, transport has remained largely absent from debates on long-term care governance, labour mobility, and social inclusion. This absence reflects not only a regulatory gap but also a form of institutional exclusion: workers who sustain European care systems remain largely absent from the governance frameworks that organise their mobility, working conditions, and everyday security.

Throughout this article, I use the term "bounded transport," a vernacular expression employed by Slovak live-in care workers in Austria, brokerage agencies, and transport providers to describe agency-organised door-to-door transport between workers' homes and the private households where they provide care. Rather than introducing a new analytical concept, I take this emic category seriously and examine what it reveals about the organisation of transnational live-in care. As used by actors themselves, bounded transport (*viazaná doprava* in Slovak) refers not simply to physical movement but to mobility arrangements embedded within employment relations through agency coordination, rotational schedules, reimbursement practices, and organisational dependency.

Although formally presented as a voluntary service, bounded transport frequently becomes a practical condition of employment, shaping workers' autonomy over how, when, and under what conditions they

travel. The apparent individual responsibility for mobility therefore conceals a broader infrastructure through which agencies, transport providers, and care markets coordinate the circulation of labour.

This article argues that bounded transport constitutes a critical yet largely invisible infrastructure of cross-border care migration in the European Union. Although indispensable to the functioning of rotational live-in care, it remains fragmented across labour law, transport regulation, and care policy, with no governance framework recognising mobility as an integral component of live-in care work. As a consequence, responsibility for organising and managing transport risks is largely shifted onto workers themselves. At the same time, the infrastructure underpinning Europe's ageing-in-place model remains weakly regulated and politically overlooked.

The article further argues that bounded transport reveals a paradox of contemporary European care regimes. Migrant care workers are economically included as essential providers of care, yet remain institutionally excluded from many of the regulatory and political processes through which their work and mobility are organised (Ezzeddine & Matiaško, 2026). By examining transport infrastructures, the article therefore moves beyond questions of movement alone and asks how inclusion and exclusion are produced through the everyday organisation of care mobility.

Drawing on policy analysis, online ethnography, semi-structured interviews, and advocacy materials, the article demonstrates how repeated transport accidents transformed what had long been treated as an ordinary feature of cross-border commuting into an object of social contestation. Fatal accidents exposed the hidden labour of mobility, the fragmented governance of cross-border care, and the unequal distribution of responsibility embedded in agency-organised transport. At the same time, they catalysed multiple forms of collective action, including policy advocacy, transnational organising, digital practices of remembrance and solidarity, and everyday collective efforts by live-in care workers themselves to make journeys safer.

This article asks three interrelated questions. First, how does bounded transport function as a critical infrastructure of transnational live-in care, and how do labour law, transport regulation, and care policy shape (or fail to govern) these mobility arrangements? Second, how do repeated transport accidents make visible the structural inequalities, regulatory fragmentation, and unequal distribution of responsibility embedded in cross-border care mobility? Third, how do live-in care workers transform bounded transport into a site of collective action through formal advocacy and everyday collective practices, and what do these forms of mobilisation reveal about the possibilities for recognition, participation, and social inclusion within European care regimes?

2. Theoretical Background: Bounded Transport as a Site of Social Contestation and Recognition

This article conceptualises bounded transport as the agency-organised, door-to-door mobility that connects live-in care workers' homes and workplaces, and structures the temporal and spatial organisation of rotational care. Far from being a neutral logistical service, bounded transport shapes access to employment, redistributes temporal, financial, and bodily risks, and conditions workers' everyday experiences of mobility. Transport therefore constitutes a critical infrastructure of transnational social reproduction.

While infrastructure studies have demonstrated how material systems and socio-technical assemblages organise everyday life (Buier, 2023; Larkin, 2013), this article shifts attention from infrastructure as a technical arrangement towards the social relations, inequalities, and political struggles that emerge through and around it (Xiang & Lindquist, 2014). Bounded transport is therefore approached not simply as a means of movement but as a social and political arrangement through which care labour is made possible.

Drawing on Polanyi's (1944/2001) concept of the double movement, bounded transport is understood as a site of social contestation generated by the expansion of market logics into care and mobility (see also Aulenbacher & Leiblfinger, 2019). As market-based forms of organising cross-border care increasingly commodify not only care labour but also the infrastructures through which labour circulates, new forms of vulnerability emerge. These processes simultaneously generate countermovements seeking to protect the social conditions of care.

Following Abraham and Aulenbacher (2019, p. 250), such responses can be understood as "progressive and emancipatory democratic countermovements" that challenge the marketisation of care through political advocacy, legal interventions, collective organising, and public claims-making. Rather than opposing mobility itself, these struggles contest the unequal distribution of risks and responsibilities embedded in the organisation of transnational care.

These struggles can also be understood as claims for recognition. Tronto's (1993, 2013) democratic ethics of care argues that democratic care depends on recognising care as a public responsibility and ensuring that those who provide and receive care are included in decisions about how it is organised and governed. From this perspective, care is not merely a private or interpersonal practice but a matter of democratic participation, responsibility, and public accountability (Matiaško, 2026).

Moreover, Hatton (2017) conceptualises invisible work (as care work is) as labour that is systematically devalued because the fact that work is being performed is obscured. Particularly relevant here is the sociospatial mechanism through which labour becomes invisible when it occurs outside spaces culturally recognised as workplaces, thereby diminishing its visibility and social value. This perspective is especially pertinent to live-in care work, which takes place primarily in private households rather than in institutionally recognised workplaces such as hospitals or residential care facilities. As a result, significant dimensions of live-in care labour remain difficult to recognise, regulate, and value as work.

The article further draws on Sheller's (2018) concept of mobility justice to situate these struggles within broader inequalities in the governance of movement. Mobility is not equally distributed but organised through unequal access to infrastructures, resources, and political power. Extending this perspective, bounded transport is understood as simultaneously a condition of employment, a source of labour precarity, and an arena of political mobilisation. Transport is therefore approached not simply as movement between home and work but as a socially produced space where labour relations, care infrastructures, and struggles for justice intersect.

Verlinghieri and Schwanen (2020) further develop mobility justice through a feminist ethics of care, arguing that mobility injustices cannot be understood solely in terms of unequal access or mobility capacity. Instead, they emphasise the social, embodied, and gendered conditions through which mobilities are produced and experienced, calling for approaches to mobility justice that recognise situated knowledge,

diverse experiences, and the participation of affected groups in defining what constitutes just mobility. Their perspective shifts attention from abstract principles of equal movement towards caring forms of justice grounded in recognition, responsibility, and responsiveness to the needs and voices of those whose mobilities are shaped by unequal conditions.

Drawing on cases from Latin and North America, Castañeda et al. (2024) argue that mobility is not only a condition of social reproduction but can also become a terrain of feminist resistance and collective action. Their analysis demonstrates how feminist movements engage with questions of mobility, care, and inequality by challenging the conditions under which movement is enabled, restricted, and valued. This perspective is particularly relevant for transnational live-in care, where unequal infrastructures and social relations shape migrant workers' everyday experiences of mobility, yet can also become a basis for collective claims, solidarity, and demands for recognition.

The Covid-19 pandemic further revealed that both mobility and immobility are fundamental to the organisation of care. Rather than merely disrupting travel, pandemic restrictions exposed how the governance of (im)mobility shapes care provision, labour relations, and workers' wellbeing. Studies have demonstrated that changes in institutional expectations, resource constraints, and public health measures have reconfigured care workers' mobility while intensifying the interdependence between paid and unpaid care responsibilities (Ravensbergen et al., 2024). At the same time, Aulenbacher et al. demonstrated that border closures and travel restrictions produced enforced immobility, profoundly disrupting transnational live-in care arrangements and exposing their dependence on the continuous cross-border circulation of live-in migrant care workers (Aulenbacher et al., 2020).

3. Methodology

3.1. Data Collection

The analysis draws on four complementary sources of qualitative data. First, it analyses European Union, Austrian, and Slovak legislation, policy documents, and official communications concerning labour mobility, live-in care, transport, and occupational safety. These documents were examined to understand the meso level—to identify how transport is regulated, which institutions assume responsibility, and where potential regulatory gaps emerge.

Second, the study draws on online ethnography conducted within three main Slovak social media platforms used by live-in care workers and their organizations, with approximately 20,000 users. These online communities constitute important spaces where caregivers exchange practical information regarding transport, employment opportunities, working conditions, agency practices, and everyday experiences of cross-border mobility. Beyond their practical function, these platforms also serve as spaces of mutual support, collective knowledge production, and political discussion, allowing observation of how mobility-related problems become publicly articulated and collectively interpreted.

These digital spaces are particularly significant because they provide forms of recognition and collective voice for workers whose experiences remain marginalised within formal institutional settings. Through discussions of accidents, transport providers, working conditions, and everyday risks, caregivers transform

individual experiences of vulnerability into shared understandings of the structural conditions shaping transnational care.

Third, the article analyses petitions, open letters, public statements, institutional correspondence, advocacy materials, and campaign documents produced by organisations representing Slovak live-in care workers, particularly the Initiative for Justice in Personal Care in Austria (*Initiative für Gerechtigkeit in der Personenbetreuung in Österreich*—IG24), the Slovak Chamber of Care Workers (*Slovenská komora opatrovateliek*), and the civic initiative "I'm Going Home for Good" (*Idem natrvalo domov* in Slovak). These materials were analysed using qualitative content analysis (Krippendorff, 2018) to reconstruct advocacy claims, identify recurring themes, and examine institutional responses to workers' demands concerning transport safety, labour rights, and mobility governance.

Finally, the analysis is informed by 12 semi-structured interviews conducted with Slovak live-in care workers and representatives of organisations engaged in labour advocacy. These interviews provide insight into everyday experiences of agency-organised transport, perceptions of occupational risk, and workers' interpretations of collective mobilisation. The interviews also reveal how live-in care workers themselves negotiate the contradictions between dependence on mobility infrastructures and efforts to create safer and more autonomous forms of movement.

3.2. Ethical Considerations and Positionality

The author's engagement with the field developed through long-term research on transnational live-in care and sustained interaction with actors involved in the organisation and advocacy of live-in care workers' rights. Through this engagement, contact was established with IG24 and other actors within the Slovak live-in care workers' community, providing insight into how transport risks, accidents, and mobility conditions were experienced, interpreted, and collectively contested by workers themselves.

This proximity to the field required continuous reflexive attention to the researcher's positionality (Sultana, 2007), the relationships through which knowledge was produced, and the ethical responsibilities involved in representing experiences of vulnerability and collective mobilisation. Rather than approaching workers only as subjects exposed to risk, the research recognises them as knowledge producers whose everyday experiences provide critical insight into the organisation and governance of transnational care.

The online ethnographic component of the research draws on approaches to digital ethnography that understand online spaces as embedded within wider social worlds rather than as separate spheres of interaction (Pink et al., 2016). From this perspective, social media platforms used by Slovak live-in care workers are understood as meaningful social spaces where experiences, relationships, and collective interpretations of mobility, work, and vulnerability are produced. The analysis also follows approaches to netnography that recognise online communities as sites of cultural meaning-making and collective practice (Kozinets, 2010).

Although the analysed social media platforms function as important communication spaces for Slovak live-in care workers, they also constitute semi-private environments where participants frequently discuss sensitive issues related to employment, mobility, legal status, and working conditions. User identities are therefore

protected, identifying information has been removed, and quotations have been selected carefully to prevent traceability and minimise potential harm (Franzke et al., 2020). All interviewed participants are anonymised, and pseudonyms are used throughout the article.

Public statements, petitions, and institutional correspondence produced by advocacy organisations such as IG24 and the Slovak Chamber of Care Workers are analysed as public organisational documents and are therefore cited without anonymisation. Where non-public correspondence was used, permission to analyse it was obtained from the respective organisations.

4. Bounded Transport Between Labour Law and Transport Regulation

Although the European Union increasingly recognises long-term care as a major social policy challenge, the mobility infrastructures that sustain cross-border care labour remain largely invisible. The European Care Strategy (European Commission, 2022), for example, promotes accessible and high-quality long-term care but does not explicitly acknowledge the growing dependence of Western European care systems on regularly commuting live-in care workers from Central and Eastern Europe. As a result, the Strategy overlooks the labour mobility arrangements that enable these care systems to function and fails to address the inequalities they generate.

This policy silence extends beyond migration itself to the organisation of mobility. Cross-border movement is generally understood through the principle of free movement guaranteed by Article 45 of the Treaty on the Functioning of the European Union. In contrast, the practical infrastructures enabling that movement remain largely outside policy attention. Regularly organised shuttle vans, coordinated transport networks, and agency-managed travel constitute indispensable elements of the live-in care system. Yet they are rarely recognised as part of employment relations or labour governance.

The absence of mobility infrastructures from European care policy reflects a broader tendency to conceptualise care as occurring within private households while overlooking the infrastructures that make such care possible. Consequently, transport remains framed as a technical or logistical matter rather than as a constitutive component of cross-border labour relations.

Agency-organised bounded transport therefore falls into a regulatory grey zone situated between labour law, transport regulation, and care policy.

European labour law primarily regulates employment relationships, whereas transport legislation focuses on road safety and commercial passenger transport. Neither policy field adequately addresses situations in which mobility itself becomes an integral part of work organisation. Directive 2003/88/EC on working time illustrates this ambiguity. While it regulates maximum working hours and rest periods, it provides no clear guidance regarding whether lengthy journeys undertaken as part of rotational cross-border care should be considered working time. Consequently, questions concerning remuneration, employer responsibility, occupational health protection, accident liability, and insurance remain insufficiently resolved.

Similarly, European road safety initiatives-including the Road Safety Policy Framework and the Vision Zero strategy-primarily address traffic safety rather than the working conditions of highly mobile workers. Fatigue,

prolonged journeys, irregular schedules, and dependence on agency services therefore remain largely absent from occupational safety debates despite posing significant risks to live-in care workers.

This fragmentation produces a particular form of institutional exclusion. Workers are recognised within separate categories as self-employed entrepreneurs, passengers, or service providers-but not as live-in care workers whose mobility constitutes an essential condition of their labour. Because no institutional framework captures this combined position, responsibility for transport safety and working conditions is continuously transferred between different authorities.

These governance gaps continue at the national level. In Slovakia, labour legislation regulates employment relationships but contains almost no provisions addressing the organisation of transport for citizens working abroad. Responsibility for transport safety, labour inspection, road regulation, and contractual arrangements is divided among several institutions, none of which explicitly considers agency-organised transport part of cross-border employment.

Austria, the research case presented in this article, presents a different yet equally fragmented picture. While the country has developed an extensive regulatory framework for 24-hour care, quality assurance mechanisms primarily focus on care recipients and brokerage agencies rather than on the mobility conditions of caregivers themselves. Existing quality standards regulate agency services but do not systematically examine how agencies organise transport or how mobility arrangements affect occupational safety and workers' autonomy.

5. Bounded Transport Between Slovakia and Austria: The Mobility Infrastructure of Live-in Care

5.1. Slovak Live-in Care Workers in Austria: A Transnational Commuting Workforce

According to membership statistics from the Austrian Federal Economic Chamber (Wirtschaftskammer Österreich, 2025), the Austrian self-employed live-in care sector continues to rely heavily on transnational labour mobility. As of 31 December 2024, 11,517 Slovak women were registered as self-employed personal carers (*Personenbetreuerinnen*) in Austria, making Slovak carers the second largest national group after Romanian carers. Although Slovak women have historically constituted one of the key groups sustaining Austria's 24-hour care model, their declining numbers reflect broader transformations in Central and Eastern European care mobility rather than a withdrawal from care work. Instead, many Slovak carers are reconfiguring their mobility trajectories across different care regimes. Some are reaching retirement after two decades of rotational care migration to Austria, while others increasingly provide live-in care within Slovakia, where a growing but largely unregulated market of 24-hour care has emerged. Others redirect their mobility towards countries such as Germany and the Netherlands, where care work is often associated with higher remuneration and more favourable employment conditions.

This live-in care regime depends on the regular cross-border circulation of thousands of workers who travel between Slovakia and Austria in fortnightly rotations. Consequently, transport is not simply a logistical necessity but a constitutive infrastructure of Austrian live-in care. Research by Mairhuber et al. (2024, p. 28), based on a survey of 11,715 live-in care workers (of all nationalities) in Austria, demonstrates that

responsibility for organising this mobility is divided between workers and placement agencies. While most workers arrange transport independently, around 10% rely on agency-organised transport voluntarily, and approximately 23% are required by agencies to use designated transport providers. Although agency-organised transport is generally perceived as safe and convenient, transport costs remain unevenly distributed. Around 11% of workers pay travel expenses entirely themselves, while almost one quarter report that travel allowances fail to cover actual costs.

Earlier research likewise suggests considerable diversity in mobility arrangements. Bahna and Sekulová (2019) estimated that in 2016 approximately 57% of Slovak live-in care workers were employed through placement agencies, while the remainder organised mobility through public transport, private cars or informal transport networks. Access to these alternatives, however, is highly uneven. It depends on workers' place of residence, destination within Austria, access to private vehicles, public transport availability and previous experience with cross-border commuting. Live-in care workers travelling to rural households often face particularly limited transport options.

5.2. Bogus Self-Employment and Bounded Transport

Ninety-two percent of Austria's live-in care workers are self-employed (Amnesty International, 2021). Although they are legally classified as self-employed entrepreneurs, extensive research has shown that this status frequently constitutes bogus self-employment. Rather than operating as genuinely independent service providers, carers remain highly dependent on brokerage agencies that organise recruitment, client allocation, work schedules, fortnightly rotations, and cross-border transport (Aulenbacher et al., 2024; Bauer et al., 2014).

This contradiction between formal autonomy and practical dependence is central to understanding the mobility infrastructure of Austrian live-in care. While self-employment formally implies that workers are free to determine how and when they travel, in practice their mobility is organised through agency-controlled infrastructures that substantially constrain these choices.

Typically, brokerage agencies subcontract transport to small companies operating seven- to nine-seat minibuses under taxi-service licences. Because these vehicles are legally classified as taxi services rather than long-distance passenger transport, they are exempt from several regulatory requirements governing drivers' working hours and mandatory rest periods. As a result, journeys between eastern Slovakia and western Austria frequently last between fifteen and twenty hours and are often undertaken by a single driver. What appears to be a convenient door-to-door service therefore redistributes temporal, physical, and safety risks onto both carers and drivers.

Transport schedules closely follow the fourteen-day rotation system characteristic of Austrian live-in care. Workers frequently leave home during the night or even a day before their shift begins to ensure timely arrival. Although Austrian families typically contribute between EUR 50 and EUR 80 towards travel costs, these reimbursements rarely cover actual expenses, leaving carers to finance the remainder themselves. Furthermore, agencies often cooperate exclusively with particular transport providers, limiting workers' ability to choose alternative forms of travel without potentially affecting future placements. Tight rotation schedules, financial constraints, and limited public transport connections therefore make agency-organised shuttle services the most realistic-and often the only feasible-mobility option for many live-in care workers.

Counselling organisations and live-in care workers themselves consistently identify long journeys, insufficient rest periods, unsafe driving conditions, and dependence on agency-organised transport as major concerns. Some placement agencies have responded by advertising the use of two drivers as a competitive advantage, transforming transport safety into a marketable service rather than recognising it as a basic labour standard. Even informal transport providers operating outside formal agency structures often reproduce similar relations of dependency through regular cross-border routes that remain weakly regulated.

As a result, bounded transport is formally individualised but practically governed through brokerage networks that simultaneously organise recruitment, placement, and transport. As Aulenbacher and Prieler (2024) argue, Austrian regulation has focused primarily on safeguarding the quality of care provision through instruments such as the Austrian Quality Certificate for Brokering Agencies (ÖQZ), while devoting considerably less attention to workers' labour conditions and the mobility infrastructures that sustain transnational care.

6. When a Tragedy Triggers Mobilisation

For many years, the risks associated with agency-organised transport remained an ordinary yet largely invisible dimension of transnational live-in care. Long overnight journeys, exhausted drivers, agency-controlled transport providers and extensive door-to-door routes were widely accepted as part of the infrastructure of rotational care work despite the considerable physical and emotional burden they imposed on live-in care workers and their families. It was only through a series of fatal accidents that bounded transport emerged as an object of public concern and political mobilisation.

This became tragically evident in 2017, when a van crash exposed the hidden human cost of bounded transport, highlighting a labour dimension that is both essential and largely invisible:

> In early October 2017, seven Slovak live-in care workers—Katarína, Ľubica, Lucia, Alena, Jana, Júlia, and Anna—were returning home in an Opel Vivaro minibus after a demanding rotation abroad. What was intended as a rare moment of relief ended abruptly on a first-class road between Nitrica and Nitrianske Sučany, when the minibus driver, for reasons that remain unclear, crossed into the oncoming lane. A speeding truck collided with the vehicle, leaving no opportunity for reaction. The deafening impact and ensuing silence marked a tragedy of enormous proportions. (Boris, 2026)

Beyond its devastating human consequences, the accident exposed the hidden costs of the transnational care economy and made visible a labour dimension that had previously been largely absent from public debate in both Austria and Slovakia.

The accident became a recurring point of reference throughout my interviews. Participants rarely discussed transport without recalling "the accident," suggesting that it has become embedded in the collective memory of Slovak live-in care workers. Rather than remembering only the event itself, interviewees described how it fundamentally changed the way they experienced journeys between Slovakia and Austria. As Milka (Slovak live-in care worker) explained in the interview:

> Some trips take longer than a trip to New York. Loading and unloading passengers is extremely exhausting. And it may not seem like it, but this is also stressful for the family. I remember, after that big accident in 2017, my children, when they were little, were extremely stressed. I would come home early in the morning, and they would be awake; even now, they still keep checking on me on their phones.

Milka's account illustrates that the consequences of bounded transport extend far beyond the journey itself. The risks associated with cross-border mobility reverberate through transnational family life, shaping everyday practices of waiting and monitoring, as well as heightening anxiety. Mobility is thus experienced not only as a logistical necessity but also as an affective dimension of live-in care work whose burdens are shared by workers and their families (Bahna & Sekulová, 2019).

Since 2017, these tragedies have catalysed transnational advocacy, transforming roads themselves into sites of political visibility. Despite precarious employment, fragmented representation, and limited institutional support, Slovak live-in care workers have increasingly drawn upon established political repertoires (Tilly, 2006), including demonstrations, petitions, open letters and public campaigns, to articulate collective claims concerning transport safety, labour rights, and working conditions. Rather than treating repeated accidents as isolated traffic incidents, these initiatives frame them as manifestations of broader structural inequalities embedded in the organisation of transnational live-in care.

One of the first organised responses was the establishment of the civic association Going Home Permanently (*Idem natrvalo domov*), founded by live-in care workers themselves shortly after the 2017 tragedy. In an open letter addressed to then-President Andrej Kiska, the association argued that low wages and deteriorating working conditions in Slovakia compelled women to seek employment abroad while simultaneously exposing them to unsafe transport arrangements. Besides demanding higher wages for caregivers in Slovakia, the association drew attention to contractual clauses requiring workers to use agency-selected transport providers, thereby limiting their autonomy in choosing safer alternatives. It called for stricter regulation of transport agencies, mandatory deployment of a second driver on long-distance routes, systematic monitoring of transport providers, and bilateral dialogue between Austria and caregivers' countries of origin concerning transport regulation within the 24-hour care sector. Following a personal meeting with President Kiska, the association reiterated its demand for a guaranteed minimum monthly salary of EUR 700 for caregivers working in Slovakia. Although the Ministry of Labour, under Minister Ján Richter, rejected this proposal as economically unrealistic, it nevertheless acknowledged the importance of strengthening domestic care infrastructures.

The significance of these demands lay not only in their content but also in how they redefined transport itself. Rather than presenting mobility as a private commuting matter, the association framed transport as an integral component of live-in care work and therefore as a matter of labour rights, occupational safety and state responsibility. By linking transport conditions with migration, wages, and long-term care policy, the association challenged the widespread assumption that the risks of cross-border mobility should be borne by individual workers.

Transnational mobilisation expanded further with the establishment of IG24, founded in Austria in 2021 through cooperation between the Slovak organisation *Iniciatíva24* and the Romanian organisation D.R.E.P.T.

pentru îngrijire. Representing live-in care workers across national boundaries, IG24 combines legal counselling in caregivers' mother tongues with community support, rights-based advocacy, and campaigns challenging exploitative employment arrangements, including bogus self-employment. Through initiatives such as "Our Work, Our Rights!" and Care4Care, the organisation has developed multilingual resources, workshops, and transnational collaborations designed to improve working conditions while making visible the often-hidden realities of Austria's live-in care system.

In recent years, transport safety has become one of IG24's principal areas of advocacy. Following another fatal van accident on 1 September 2022, the organisation held a public demonstration in front of the Austrian Ministry of Social Affairs in Vienna. Rather than framing the accident as an isolated event, protesters explicitly criticised the transformation of transport into a profit-oriented business model in which live-in care workers are contractually tied to agency-selected transport providers and commercial efficiency takes precedence over workers' safety. In doing so, IG24 shifted public attention from individual tragedies towards the structural organisation of bounded transport, arguing that transport risks are inseparable from the broader political economy of transnational care.

Following another fatal accident on 21 December 2023, in which a van carrying six Slovak live-in care workers collided with a truck, killing one caregiver, seriously injuring another, and traumatising the remaining passengers, IG24 intensified its advocacy efforts. Rather than treating the accident as an isolated event, the organisation submitted a formal request to then-President Zuzana Čaputová, calling for an expert assessment of tied transport arrangements and agency interference with caregivers' autonomy in choosing transport providers. In its response, the President's Office acknowledged both the gravity and recurring nature of these tragedies, stating:

> We are deeply saddened by the recent events, which constitute yet another very tragic indication of the critical situation faced by Slovak care workers. Please be assured that this matter will receive attention in the near future.

The subsequent institutional response, however, revealed the fragmented governance of bounded transport. In February 2024, the Ministry of Transport forwarded IG24's request to the Slovak National Labour Inspectorate. While acknowledging the seriousness of repeated transport accidents, the Inspectorate argued that it lacked the authority to assess contractual clauses regulating agency-selected transport and referred the matter to the Ministry of Justice of the Slovak Republic. Responsibility for road safety was simultaneously delegated to the Police, while labour inspections remained confined to illegal employment and drivers' working hours. The Ministry of Transport similarly maintained that it could not intervene in workers' choice of licensed transport providers, redirecting questions concerning working conditions to the Ministry of Labour, Social Affairs, and Family. Rather than producing regulatory change, responsibility circulated between institutions, with no public authority recognising bounded transport as an integral component of transnational care work or assuming responsibility for its regulation. The repeated transfer of competence illustrates how transport remains institutionally disconnected from care governance despite being indispensable to its everyday functioning.

Concerns about transport were also articulated by other organisations representing care workers. The Slovak Chamber of Care Workers (*Slovenská komora opatrovateliek*), representing caregivers employed both in

Slovakia and abroad, has repeatedly issued petitions, open letters, and public statements drawing attention to exploitative working conditions across the care sector. In its press release of 25 July 2024, "Yesterday Was Late! We Are Plunging into an Abyss in the Care of Our Own Citizens" (in Slovak: *Včera bolo neskoro! Rútime sa do priepasti v starostlivosti o našich vlastných občanov*), the Chamber explicitly linked the repeated transport tragedies experienced by live-in care workers to the chronic underfunding of long-term care in Slovakia. Rather than treating fatal accidents as unfortunate incidents, the Chamber argued that poor wages, deteriorating working conditions, and the absence of meaningful public investment continue to compel thousands of Slovak caregivers to seek employment abroad. In this way, the tragedies beginning with the 2017 crash became symbols of wider structural deficiencies in Slovak care policy, linking cross-border labour mobility to broader questions of social justice, gender inequality, and the social valuation of care work.

6.1. Digital Acts of Remembrance: Creating Spaces of Belonging and Recognition Among Slovak Live-in Care Workers

Collective responses to bounded transport do not occur solely through formal organisations or institutional advocacy. My research shows that digital platforms used by Slovak live-in care workers have become important spaces for creating belonging and recognition among migrant care workers. Through acts of digital remembrance (Fusco et al., 2024), sharing, and collective reflection, these online communities transform experiences of mobility, risk, and loss into shared narratives about the realities of transnational care work. Social media posts following transport accidents do not merely document individual tragedies; they create spaces where workers connect personal experiences with the broader challenges of living and working across borders. By circulating memories of previous accidents, discussing transport routes, and sharing experiences with different agencies, caregivers collectively build knowledge about the vulnerabilities associated with their mobility.

One Slovak live-in care worker, for example, shared her experience after surviving a serious traffic accident while returning home from Austria:

> I want to share my story. I worked, and I still have, a trade license as a caregiver in Austria. A year ago, I had a serious car accident on my way home from work. It happened near Vienna. I would not wish it on anyone. I suffered a broken cervical spine, a broken jaw, a severe concussion, and unbelievable bruises and pain. I do not remember anything from the accident. I was operated on in Vienna at AKH, and I would like to thank the entire staff, especially Dr XX. Thank God I recovered and was able to return home to my children. (Post on a social media platform for Slovak live-in care workers)

The discussions generated by such testimonies demonstrate how digital spaces function as infrastructures of collective interpretation. Rather than understanding accidents as isolated personal experiences, caregivers place them within shared discussions about long journeys, agency-organised transport, and the everyday uncertainties of cross-border care work. Through these exchanges, workers articulate what Zuzana Uhde conceptualises as *lived critique*: reflections emerging from everyday experiences through which people make sense of the conditions shaping their lives (Uhde, 2019).

Live-in care workers' online discussions also reveal reflections on the personal consequences of transnational mobility. Many question why providing care requires them to spend extended periods away

from their own homes, families, and communities. These reflections express the tensions inherent in their mobility: travelling abroad provides important opportunities and livelihoods, while simultaneously involving separation, exhaustion, and exposure to risks that are often taken for granted.

Digital platforms also provide spaces of collective remembrance. Following the deaths of colleagues, live-in care workers share memorial messages acknowledging those who have disappeared from the transnational care community. One such post following a tragedy in January 2021 stated: "Please pray for all the dear caregivers who left us so unexpectedly." These practices of mourning create forms of recognition for workers whose lives and experiences often remain unnoticed beyond their immediate communities. Remembering deceased colleagues is therefore not only an expression of grief; it is also a way of affirming shared belonging and acknowledging the value of lives connected through transnational care work.

The significance of these digital practices extends beyond national boundaries. Following a fatal accident on the Austrian A2 motorway in April 2025 involving Ukrainian caregivers travelling from Milan to Ukraine, the live-in care workers' organisation IG24 responded:

> Terrible accident on the A2—five caregivers lost their lives! On April 12, 2025, five Ukrainian colleagues lost their lives in a serious traffic accident; two others were severely injured. The driver, a Ukrainian man with 25 years of experience, is believed to have been overtired. The public prosecutor's office has filed charges for negligent homicide. Accidents like this reflect structural inequalities!

Responses to such events demonstrate that bounded transport has become a shared experience that connects migrant care workers across national backgrounds. Slovak, Romanian, Ukrainian, and other caregivers recognise common experiences of mobility, uncertainty, and vulnerability. Digital acts of remembrance, therefore, become practices of "inclusion from below" (Scuzzarello & Moroșanu, 2023): By remembering colleagues, exchanging experiences, and creating spaces of mutual recognition, migrant live-in care workers build communities of belonging that extend beyond national borders.

7. Everyday Practices of Bounded Transport: Making Journeys Safer

While collective mobilisation has transformed bounded transport into a visible political issue, interviews with Slovak live-in care workers suggest that institutional advocacy has done little to alter the everyday realities of cross-border mobility. Rather than replacing workers' own efforts to manage transport risks, collective action coexists with everyday practices through which live-in care workers negotiate the constraints of agency-organised transport. The interviews reveal how workers adapt their mobility decisions and travel routines to navigate the persistent risks associated with rotational cross-border care.

One important strategy concerns the selection of workplaces themselves. Rather than choosing employment solely based on wages or working conditions, interviewees increasingly considered transport accessibility when deciding where to work. As Eva (Slovak live-in care worker) explained:

> I was also stressed out about those journeys, especially after my friend's accident, so now I only go to Vienna. There is a bus from Košice to Vienna. In Vienna, you need good German and experience. They are more selective. And that suits me fine.

For Eva, transport safety became an important factor shaping labour mobility, demonstrating how memories of fatal accidents continue to influence workers' employment decisions long after the events themselves. Choosing destinations with direct transport connections thus becomes a way of reducing exposure to the uncertainties of agency-organised mobility.

Despite such strategies, most interviewees remained dependent on agency-organised door-to-door transport, which they consistently described as physically exhausting and potentially dangerous. Iveta (Slovak live-in care worker) recalled:

> Those journeys, before they pick you up in villages and you finally get home to the East, can easily take 20 hours. The picking up never ends; the driver keeps watching his mobile phone and coordinating things. It is convenient because they pick you up right in front of your house, but on the other hand, it is extremely long and dangerous.

These accounts suggest that bounded transport is experienced as an extension of live-in care work itself rather than merely a means of reaching the workplace. Long journeys, repeated passenger collection, and overnight driving become integral components of rotational care, extending the temporal and physical demands of live-in care work.

Interviewees also reflected on collectively shared practices aimed at reducing transport risks. Rather than relying on formal safety measures, they assumed responsibility for supporting drivers during long overnight journeys. As Katarína (Slovak live-in care worker) explained:

> Red Bull, coffee, talking, and fresh air. This helps. We take turns with the driver; one of us always talks to him while the others can rest. Then we stop, although some complain that we need too many breaks, but we have an excuse; we're women of a certain age.

These informal routines illustrate how responsibility for transport safety is effectively redistributed to live-in care workers themselves. In the absence of institutional guarantees, live-in care workers develop individual and shared forms of practical knowledge that help sustain the mobility infrastructures on which transnational care depends. Their everyday strategies do not eliminate the risks of bounded transport but instead reveal how live-in care workers continuously compensate for the structural shortcomings of the cross-border care regime.

8. Conclusion

This article began with a simple empirical observation. Every two to four weeks, thousands of Slovak migrant live-in care workers travel between their homes and Austrian households in agency-organised minibuses. These journeys are usually treated as a practical necessity lying outside the care relationship itself. By following bounded transport, however, this article has shown that mobility is not peripheral to transnational live-in care but constitutive of it.

Viewing transport through the perspective of Slovak live-in care workers in Austria makes visible a dimension of European care regimes that largely escapes existing governance. Although cross-border mobility is indispensable to the reproduction of transnational care, responsibility for its organisation remains

fragmented across labour law, transport regulation, and care policy. As long as mobility is treated as a private commuting matter rather than as an integral component of care work, the risks associated with transport remain individualised.

The article contributes to broader feminist debates on the political economy of care, mobility justice, and social reproduction. Following Abraham and Aulenbacher's (2019) arguments on the tensions generated by the marketisation of care, this article draws attention to the democratic countermovements that emerge when care arrangements organised through market logics produce experiences of insecurity, inequality, and exclusion. The mobilisation of migrant live-in care workers around transport accidents illustrates such a countermovement from below. By challenging unsafe transport conditions, demanding recognition, and making visible the hidden costs of transnational care mobility, live-in care workers do not simply resist particular forms of exploitation but also articulate broader claims about how care and mobility should be organised.

Building on Castañeda et al.'s (2024) argument that mobility is constitutive of social reproduction, this article further demonstrates how bounded transport reveals the unequal conditions that sustain transnational care. The empirical analysis demonstrates that bounded transport is not only an infrastructure through which inequalities are reproduced but also an infrastructure of collective mobilisation and recognition. Fatal accidents transformed what had long been accepted as an ordinary yet largely invisible part of transnational care work into an object of public contestation. Live-in care workers' organisations, grassroots initiatives, and advocacy groups reframed transport from an individual responsibility into a collective issue concerning labour rights, mobility justice, and care governance. Through petitions, public campaigns, media interventions, and demands for safer transport conditions, they challenged the normalisation of dangerous mobility and exposed the fragmented responsibilities surrounding cross-border care arrangements. These forms of mobilisation demonstrate that Slovak live-in care workers are not only affected by mobility regimes but also actively shape debates about their regulation and transformation.

Collective mobilisation also extends beyond formal organisations. Digital platforms used by migrant live-in care workers have become important spaces where experiences of mobility, risk, and loss are collectively interpreted and remembered. Through digital acts of remembrance, lived critique, and everyday exchanges of experience, workers transform individual encounters with vulnerability into shared understandings of the conditions that shape transnational care. They demonstrate how experiences of exclusion can become the basis for collective voice, solidarity, and claims for recognition.

Thinking with bounded transport thus contributes to feminist scholarship by connecting debates on the political economy of care, mobility justice, and social reproduction. Recognising mobility as part of live-in care work is therefore not only essential for improving labour regulation, transport governance, and care policy, but also for developing more socially inclusive approaches that acknowledge migrant live-in care workers—both within and beyond the EU—not merely as a flexible labour force but as workers, carers and political actors whose mobility underpins Europe's ageing societies.

Acknowledgments

This article is dedicated to all the live-in care workers who regularly travel across Europe, literally risking their lives to reach the people for whom they provide care. I am deeply grateful to IG24 for their openness to this

research and for their generous support and assistance throughout the fieldwork. I gratefully acknowledge my colleague, Maroš Matiaško, for his valuable legal consultations and support during the preparation of this manuscript. I also thank the anonymous reviewers for their constructive feedback and the editors for their careful editorial work.

Funding

This article was supported by the Volkswagen Foundation through the Challenges and Potentials for Europe programme (CareOrg project).

Conflict of Interests

The author declares no conflict of interest.

Data Availability

Due to the nature of the research and project ethical approval, data sharing does not apply to this article.

LLMs Disclosure

As a non-native English speaker, the author used ChatGPT-4o and Grammarly for language checking and editorial refinement. The author reviewed and approved all final content, all analytical interpretations, and argumentation.

References

Abraham, M., & Aulenbacher, B. (2019). Contested capitalism: Some reflections on countermovements, social justice and the task for sociology. In K. Dörre, H. Rosa, K. Becker, S. Bose, & B. Seyd (Eds.), *Große Transformation? Zur Zukunft moderner Gesellschaften* (pp. 527–547). Springer.

Amnesty International. (2021, July 15). *Austria: Women migrant care workers demand rights*.

Aulenbacher, B., Ezzeddine, P., Gábriel, D., Leiblfinger, M., Milankovics, K., & Prieler, V. (2020). Facing Covid-19: Live-in care in Central Europe. *Global Dialogue*, *10*(3), 23–24.

Aulenbacher, B., & Leiblfinger, M. (2019). The "fictitious commodity" care and the reciprocity of caring: A Polanyian and neo-institutionalist perspective on the brokering of 24-hour care. In R. Atzmüller, B. Aulenbacher, U. Brand, F. Décieux, K. Fischer, & B. Sauer (Eds.), *Capitalism in transformation: Movements and countermovements in the 21st century* (pp. 245–260). Edward Elgar.

Aulenbacher, B., & Prieler, V. (2024). The 'good agency'? On the interplay of formalization and informality in the contested marketization of live-in care in Austria. In B. Aulenbacher, H. Lutz, E. Palenga-Möllenbeck, & K. Schwiter (Eds.), *Home care for sale: The transnational brokering of senior care in Europe* (pp. 79–94). Sage.

Aulenbacher, B., Lutz, H., Palenga-Möllenbeck, E., & Schwiter, K. (Eds.). (2024). *Home care for sale: The transnational brokering of senior care in Europe*. Sage Publications.

Bahna, M., & Sekulová, M. (2019). *Cross-border care: Lessons from Central Europe*. Palgrave Macmillan.

Bauer, G., Haidinger, B., & Österle, A. (2014). Three domains of migrant domestic care work: The interplay of care, employment and migration policies in Austria. In B. Anderson & I. Shutes (Eds.), *Migration and care labour* (pp. 67–86). Palgrave Macmillan.

Boris, Z. (2026, January 31). *Prípad smrti siedmich opatrovateliek*. *Viedencan*. https://viedencan.at/pripad-smrti-siedmich-opatrovateliek

Buier, N. (2023). The anthropology of infrastructure: The boom and the bubble? *Focaal*, *95*, 46–60. https://doi.org/10.3167/fcl.2022.012401

Castañeda, P., Solís, A., & Sheller, M. (2024). Feminism and mobility justice: Examining relations of care and mobilities across scales. In V. Preston, S. McLafferty, M. Maciejewska, & B. Yeoh (Eds.), *Handbook of gender and mobilities* (pp. 58–74). Edward Elgar Publishing.

European Commission. (2022). *European care strategy: For carers and care receivers*. Publications Office of the European Union.

Ezzeddine, P., & Matiaško, M. (2026). Live-in care on trial: The failed promise of solidarity in European care governance. *Economy and Society*, *55*(2), 347–365. https://doi.org/10.1080/03085147.2026.2631338

Ezzeddine, P., & Uhde, Z. (2025). Borderscapes of care in Europe: The case of Czech live-in care workers in Germany. In B. Zucca Micheletto & N. Roman (Eds.), *Women, migration and the exchange of knowledge from the sixteenth to the twenty-first century* (pp. 399–418). Palgrave Macmillan.

Franzke, A. S., Bechmann, A., Zimmer, M., & Ess, C. M. (Eds.). (2020). *Internet research: Ethical guidelines 3.0*. Association of Internet Researchers. https://aoir.org/reports/ethics3.pdf

Fusco, R., Ciliberti, R., Licata, M., & Picozzi, M. (2024). Ritual and mourning in the digital era: Between virtual technology and ethical controversies. *Acta Biomedica*, *95*(3), Article 2024120.

Hatton, E. (2017). Mechanisms of invisibility: Rethinking the concept of invisible work. *Work, Employment and Society*, *31*(2), 336–351.

Katona, N., & Melegh, A. (Eds.). (2020). *Towards a scarcity of care: Tensions and contradictions in transnational elderly care in Central and Eastern Europe*. Friedrich-Ebert-Stiftung.

Kozinets, R. V. (2010). *Netnography: Doing ethnographic research online*. Sage Publications.

Krippendorff, K. (2018). *Content analysis: An introduction to its methodology* (4th ed.). Sage Publications.

Mairhuber, I., Schadauer, A., Neuhauser, J., & Matei, F. (2024). *Das Unsichtbare sichtbar machen: Datenerhebung zu Personenbetreuer_innen in österreichischen Privathaushalten*. FORBA.

Matiaško, M. (2026). The right to care and support: From care theory to human rights law. *Social Inclusion*, *14*, 12056. https://doi.org/10.17645/si.12056

Larkin, B. (2013). The politics and poetics of infrastructure. *Annual Review of Anthropology*, *42*, 327–343. https://doi.org/10.1146/annurev-anthro-092412-155522

Pink, S., Horst, H. A., Postill, J., Hjorth, L., Lewis, T., & Tacchi, J. (2016). *Digital ethnography: Principles and practice*. Sage Publications.

Polanyi, K. (2001). *The great transformation: The political and economic origins of our time*. Beacon Press. (Original work published 1944)

Ravensbergen, L., Mehta, S., Sethi, B., Ward-Griffin, C., & Williams, A. (2024). Double-duty carers' health and wellbeing during COVID-19: Exploring the role of mobility of the care economy in Southern Ontario, Canada. *International Journal of Environmental Research and Public Health*, *21*(6), Article 730.

Scuzzarello, S., & Moroșanu, L. (2023). Integration and intersectionality: Boundaries and belonging "from above" and "from below." Introduction to the special issue. *Ethnic and Racial Studies*, *46*(14), 2991–3013.

Sheller, M. (2018). *Mobility justice: The politics of movement in an age of extremes*. Verso.

Sultana, F. (2007). Reflexivity, positionality and participatory ethics: Negotiating fieldwork dilemmas in international research. *ACME: An International Journal for Critical Geographies*, *6*(3), 374–385.

Tilly, C. (2006). *Regimes and repertoires*. University of Chicago Press.

Tronto, J. C. (1993). *Moral boundaries: A political argument for an ethic of care*. Routledge.

Tronto, J. C. (2013). *Caring democracy: Markets, equality, and justice*. New York University Press.

Uhde, Z. (2019). Claims for global justice: Migration as lived critique of injustice. In J. C. Velasco & M. C. La Barbera (Eds.), *Challenging the borders of justice in the age of migrations* (pp. 183–204). Springer.

Verlinghieri, E., & Schwanen, T. (2020). Transport and mobility justice: Evolving discussions. *Journal of Transport Geography*, *87*, Article 102798. https://doi.org/10.1016/j.jtrangeo.2020.102798

Wirtschaftskammer Österreich. (2025). *Mitgliederstatistik 2024*. https://www.wko.at/oe/statistik/mitgliederstatistik/mitgliederstatistik24.pdf

Xiang, B., & Lindquist, J. (2014). Migration infrastructure. *International Migration Review*, *48*(Suppl. 1), S122–S148.

About the Authors

Petra Ezzeddine is an assistant professor at the Department of Social and Cultural Anthropology, Charles University, Prague. Her research interests include migration, gender studies, and the anthropology of care. Her work particularly focuses on domestic and cross-border care in Central and Eastern Europe, informal and live-in care practices, and the social dynamics of care work. She is also engaged in applied anthropology, exploring how anthropological knowledge can inform social policy, labour regulations, and community-based initiatives.