

THE GREEN CARD SCHEME:
AN ETHNOGRAPHY OF 'THE STATE' AND ITS 'POOR CITIZENS'
IN ADIYAMAN

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Thesis Abstract

Çağrı Yoltar, “The Green Card Scheme: An ethnography of ‘the State’ and its ‘poor citizens’ in Adıyaman”

This thesis is mainly about the everyday workings of the “Green Card Scheme” - a social assistance mechanism providing free health care services to “poor” citizens - in Adıyaman. Through a scrutiny of the everyday interactions around the Green Card, this thesis intends to explore the question of how the relationships between “the state” and citizens are produced, and how the categories of “state” and citizenship are substantiated at the everyday level in Adıyaman, by means of various discourses and practices and in the process of citizens’ interactions with the local bureaucracy and institutions in charge of implementing the Green Card Scheme.

The main argument of this thesis is that both the ways in which the Green Card scheme is regulated by state officials, and the ways in which the recipients deal with the scheme in Adıyaman, occur in a context where hopes for overall development and recognition by modernization are increasingly giving way to a sense of marginality in the form of ‘disownment’ and loss and a desire to be re-owned and recognized by “the state”. As such, this thesis can also be read as an exploration of the material and discursive formations of marginality and a marginal locality (Adıyaman) in Turkey.

Tez Özeti

Çağrı Yoltar, “Yeşil Kart: Adıyaman’da ‘Devlet’ ve ‘Yoksul Vatandaşlar’ Üzerine

Etnografik Bir Çalışma

Bu tez temel olarak, ‘yoksul’ vatandaşların sağlık hizmetlerinden bedelsiz olarak yararlanmaları amacıyla oluşturulmuş bir sosyal yardım mekanizması olan Yeşil Kart Sistemi’nin Adıyaman’daki gündelik işleyiş biçimlerini ele almaktadır. Çalışmada, Yeşil Kart Sistemi etrafında gerçekleşen gündelik etkileşimlerin eleştirel bir analizi üzerinden, Adıyaman’da ‘devlet’ ve yurttaşlar arasındaki ilişkilerin, çeşitli söylemler, pratikler ve yurttaşların Yeşil Kart Sistemi’nin işleyişinden sorumlu yerel bürokrasi ve kurumlarla etkileşimleri sürecinde nasıl kurulduğu, ve ‘devlet’ ve ‘yurttaş’ kategorilerine gündelik hayat düzeyinde nasıl anlamlar yüklendiği sorularını ele almayı amaçlanmaktadır.

Bu tezin temel argümanı şudur ki, gerek Yeşil Kart Sistemi’nin devlet görevlileri eliyle yönetilme biçimleri, gerekse Yeşil Kart’tan yararlananların Sistem’le ilişkiye geçme biçimleri, Adıyaman’da kalkınma ve modernleşmeyle sağlanacak bir tanınmaya dair ümitlerin, giderek artan ölçüde, ‘sahipsizlik’ ve kayıp kavramları üzerinden ifade edilen bir dışarıda bırakılmışlık hissine ve buna mukabil ortaya çıkan bir devlet tarafından ‘sahip çıkılma’ ve tanınma arzusuna dönüştüğü bir bağlamda tecelli etmektedir. Bu anlamda, çalışma bu ‘dışarıda bırakılma’ hissiyatının materyal ve söylemsel tezahürleriyle, ‘marjda kalmış’ bir lokalite olarak Adıyaman üzerine bir inceleme olarak da okunabilir.

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CHAPTER ONE

INTRODUCTION

This thesis is mainly about the everyday practices organized around the “Green Card Scheme” - a social assistance mechanism providing free health care services to “poor” citizens - in Adiyaman. Through a scrutiny of these everyday interactions, I intend to explore the question of how the relationships between “the state” and citizens are produced, and how the categories of “state” and citizenship are substantiated at the everyday level in Adiyaman, by means of various discourses and practices, and in the process of citizens’ interactions with the local bureaucracy and institutions in charge of implementing the Green Card Scheme.

This study was very much inspired by state ethnography literature¹, which approaches the state not as a “distinct, fixed and unitary entity” (Sharma and Gupta, 2006, p.8) consisting of a set of rationalities and institutions, but rather as a “phenomenological reality (which) is produced through discourses and practices of power, produced in local encounters at the everyday level” (Aretxaga, 2003, p.398), recognizable through its multiple effects (Trouillot, 2001). Such an understanding of “the state” impels us to reconsider the workings of power through seemingly mundane practices such as collection of taxes, or provision of health care. It also enables us “to examine the dispersed institutional and social networks through, which rule is coordinated and consolidated, and the roles that non-state institutions, communities and individuals play in mundane processes of governance” (Gupta and Sharma, 2006, p.9).

¹ See Aretxaga (2003), Das and Poole (2004), Gupta (1995), Gupta and Ferguson (2002), Hansen and Stepputat (2001), Krohn-Hansen and Nustad (2005), Nuijten (2003), Sharma and Gupta (2006), Trouillot (2001),

In other words, these everyday practices, encounters and struggles have a lot to do with determining what the state means to its people, how it is substantiated in their daily lives, where its boundaries are drawn, and how it constructs people as citizens and subjects through shaping their everyday experiences (ibid., Shore and Wright, 1997). Das and Poole (2004), in their influential volume *Anthropology in the Margins of the State*, underline the importance of studying “the state” at its “margins” in order to “distance ourselves from the entrenched image of “the state” as a rationalized administrative form of political organization” (p.3), and to analyze the dispersed regulatory, and disciplinary forms, which constitute what we call “the state”.

Das and Poole (2004) conceptualize “margins of the state” as sites “where nature can be imagined as wild and uncontrolled (p.8) and where “state law and order continually have to be reestablished” (Asad, 2004, p.279). They accordingly argue that one way to understand the “margins of the state” is to analyze the specific technologies of power that states deploy in order to manage or regulate the ‘marginal’ populations or individuals, who are marked as improper or suspect. Yet another possibility in approaching the margins of the state, for Das and Poole (2004), is by exploring people’s interactions with “the state” and state documents. They argue that the modern state is constructed through its writing practices, and it is through these writing practices that “the state” consolidates control over subjects, populations, territories and lives. However, Das and Poole (2004) critically draw attention to the illegible character of these practices, documents and words of “the state” in the sense that they may be illegible both to the people who are subjected to these practices, and to the very state officials who are tasked to carry them out. Das and Poole (2004) claim that it is through this illegibility that “the state” is experienced on the one hand, and is undone on the

other. I find this particular approach towards analyzing “the state”, and its margins, very useful and applicable to my study on the workings of the Green Card Scheme in Adiyaman.

Health care, along with other social policies like education, is a site where people frequently come into contact with “the state” in their everyday lives, in the process of which their understanding of “the state” and citizenship is constructed. In Turkey, the existing public health insurance system has a quite fragmented and hierarchical structure of a corporatist character (Buğra and Keyder 2005), based on the employment status of the beneficiaries. There are separate public insurance schemes for the private sector employees (SSK), for the self employed (*Bağ-Kur*), and for retired government employees and their dependants (*Emekli Sandığı* – ES). The common ground of these separate mechanisms is that they provide health and pension benefits only to citizens who are formally employed. But then there are significant differences among these funds in terms of substance and quality of services they provide. What it is imperative to consider however is the fact that, as of 2003, only 48% of the workforce was covered by one of these social insurance schemes. The remaining 52% were not formally registered, and hence were not covered with public insurance (CSGB, 2004). This is to say that the public insurance schemes in Turkey are far from providing health care benefits to the majority of Turkey’s population.

Since the 1980s there have been various attempts by governments to come up with solutions to the problems of Turkey’s health care system, low coverage and poor service quality. In this context, the Green Card Scheme was introduced in 1992 as a social assistance mechanism for “poor” citizens, who fall outside the health care coverage provided under the existing public insurance schemes. It must be said that the

emergence of the Green Card Scheme had a lot to do with significant transformations witnessed since 1980s in governments' approaches to poverty. Although poverty has always been a major concern in the Republic of Turkey since its establishment, the ways in which poverty is regulated and talked about have changed significantly with the introduction of liberal economic policies in the 1980s (Üstündağ, 2005). Turkey's welfare regime, which was established in 1950, had a corporatist structure like its counterparts in southeastern Europe. Formal employment constituted the main basis to receiving welfare benefits, pensions and health care (Buğra and Keyder, 2003). Since the main premise of the welfare system in Turkey, between 1950 and 1980, was to sustain a fully employed society, creation of jobs became the main issue in poverty alleviation. Although, Social Services was providing welfare to certain vulnerable groups such as orphaned children, disabled and elderly, there was no explicitly government policy directly aiming at providing social assistance to the poor as such. However, the 1980s witnessed a significant change in the governments' approach to poverty. After the introduction of liberal economic policies in the 1980s, the state started to leave the sphere of economics and turned away from its self-assumed mission of creation of jobs by starting to privatize State Owned Enterprises (*Kamu İktisadi Teşebbüsleri – KİT*). Moreover, by the late 1980s, it became evident to policy makers that the conditions leading to poverty were no longer transitory, and extended family and social support mechanisms were no longer able to provide support to the poor. This analysis led to a re-definition of the role of the state in dealing with "the poor". Accordingly, in the following years various government-led policies and mechanisms directed towards providing social assistance to the poor have been introduced. Among these measures, of crucial importance was the foundation of the Social Solidarity Fund in 1986, the main

aim of which was to “help citizens in a state of poverty and destitution”, and the establishment of the Green Card Scheme in 1992 with the aim of providing free health care services to the poor. These two institutions signify a “transformation in the discursive formulation of poverty by replacing the term ‘alleviating poverty’ with the expression ‘helping the citizens in the state of poverty’” (Üstündağ, 2005, p.205).

The Green Card was an important promise of the True Path Party (*Doğru Yol Partisi - DYP*) in its election campaign in 1991. At that time, newspapers were full of stories of poor people who were unable to pay for their health expenses and were ‘held hostage’ by hospital administrations. DYP spokespersons made public references to these stories and promised to “open the gates of all hospitals to the poor”. DYP got a plurality of votes in the 1991 elections and formed a coalition government with the Social Democratic Populist Party (Sosyal Demokrat Halkçı Part – SHP). The DYP-SHP coalition government introduced the Green Card scheme in 1992 as a social assistance mechanism for poor citizens, who were excluded from the health care coverage provided under the existing social security mechanisms. To understand the peculiarity of the Green Card scheme, one would have to establish a contrast to earlier legislation on the treatment of healthcare beneficiaries with insufficient financial means. Throughout the Republican period, the typical approach adopted in dealing with patients with insufficient financial means was to rely on *ad hoc* interventions such as occasional notices sent by the Ministry of Health to the hospitals for the free treatment of patients who declare their poverty, without setting any clear poverty criteria. Therefore the Green Card scheme implies a rupture with earlier legislation, as it introduced criteria to define poverty and guaranteed certain services that would be provided for the poor. As such it

started to function as the fourth security scheme (along with ES, SSK and *Bağ-Kur*) (Günel, 2007).

This rupture gains more importance if one considers the workings of the health care system as a terrain on which “the state” gets to be imagined and encountered by the population, whereby ‘people’ are constructed as citizens’ through these everyday encounters. Following this line of thought, it is possible to argue that the Green Card Scheme appeared as an important technology meant to govern and regulate the populations at the “margins of the state” in Turkey - populations who were not covered by any of the existing public insurance schemes due to the uncertainties in their states of employment. By means of the Green Card, these citizens were to be included into the health care system as “poor” citizens in need of “state’s compassion”. A key feature of this arrangement however was the fact that the Green Card Scheme was centered on extremely complicated bureaucratic procedures and significant limitations in services benefit it provides, especially in comparison to the other schemes like ES, SSK and *Bağ-Kur*. As such these hurdles and limitations make it exceedingly difficult for these citizens under material deprivation to access the promised health care services. This should be understood as a clear indication of where these “poor” citizens stand in the citizenship hierarchy created by the public health care system in Turkey.

Beneficiaries of *Emekli Sandığı*, SSK, *Bağ-Kur*, Green Card schemes and those who are not covered by any of the existing schemes, are faced with different levels of accessibility and quality of service whenever they approach healthcare providers. If one would have to qualify this differential treatment, the social sectors which receive the most preferential treatment from the Turkish state seem to be primarily state officials, who are rewarded with life long social security under *Emekli Sandığı*. They are followed

by private sector employees and blue-collar workers who are covered by the SSK scheme. Merchants, artisans and self-employed – the *Bağ-Kur* beneficiaries, can be characterized as ‘step-children’ who are not favorites of the state to the extent the ‘real children’ are. Their income is uncertain and the services they are able to access under *Bağ-Kur* vary accordingly. Those who are not subscribed to any of the social security mechanisms feature as “suspect citizens”. The state does not quite know who they are and how to deal with them. Finally the Green Card beneficiaries seem to be the ones who managed to move beyond this “suspect” status and benefit from the “compassion” of the state by establishing themselves as “poor subjects” in terms required by the providers of this compassion (Üstündağ and Yoltar, 2007).

Today, around 9 million people² in Turkey get access to health care services under the Green Card Scheme. In order to benefit from the scheme however, they are required to prove their need, that is, their state of ‘poverty’ as defined by the laws and the local governing practices of the Green Card bureaucracy. They are required to interact with ‘the State’, make demands, and have their poverty certified according to a bureaucratic procedure that essentially requires them to imagine and construct themselves within the categories of poverty defined and enforced by those who are empowered to grant them the Green Card or to reject it. Therefore, the Green Card eligibility and usage processes involve multiple interactions between ‘the State’ – in the form of the bureaucracy, politicians, discourses and practices – and the ‘citizens’.

However, due to the complexities involved in the process of verification of poverty, obtainment of a Green Card, and throughout its usage, the Green Card appears

² As of November 20, 2007, the exact number of Green Card holders in Turkey is 8.837.506 (Green Card Information System - <http://sbu.saglik.gov.tr/yesil/>)

as a terrain full of uncertainties. Although there exists a general framework drawn by the related law and decrees, the eligibility and usage criteria set out by this general framework are such that they leave ample room for the discretion of the local authorities. Furthermore, the application of these criteria, rules and procedures is not as easy as it is formulated in the law and decrees. This process entails lots of difficulties both for the local level officials and for the applicants/beneficiaries, due to the ambiguities and illegibilities of the Green Card criteria and rules. A case in point for example is the difficulties encountered in collecting information regarding the income of an applicant, who works informally, hence whose income is not registered in official records. As a result on the one hand, local officials try to come up with various ways to make these rules legible to themselves, in dealing with these difficulties. On the other hand, the uncertainties that are for the most part brought about by the illegibility of the rules, not only shape people's encounters with, hence experiences regarding "the state", but these ambiguities also enable them to interfere with the usual workings of "the state" by means of various tactics.

With these considerations in mind, I will try to approach the Green Card Scheme as a site "at the margins of the state" on which people under material deprivation encounter with "the state", in the process of which abstractions like "the state" and "citizenship" are substantiated at the everyday level. Such an approach, I would hope, will enable me to understand the complex and discordant power processes over which the state and its attendant inequalities are produced.

The Field in Adıyaman

The context of my field research was Adıyaman, which is a small city in South Eastern Anatolia. I had a total of three visits to Adıyaman in the period between December 2004 and April 2007, each one lasting about ten days. I should note that the occasion for my first visit to the city in December 2004 was a research project of Boğaziçi University Social Policy Forum (SPF) on the health care system of Turkey. It was this first visit to Adıyaman, which I did with Nazan Üstündağ, that helped me shape my thesis project, and formulate my research questions on the construction of the relationship between the Turkish “state” and its citizens, and the production of subjectivities through everyday practices organized around the Green Card Scheme. What intrigued me during this first visit to Adıyaman was an overwhelming ‘sense of marginality’. The main point of reference for this ‘sense of marginality’ was “the state”.

During this first visit of mine to the city, Nazan Üstündağ and I were conducting interviews with state officials in the health care sector, with the beneficiaries of various public funds (ES, SSK, *Bağ-Kur*) and the Green Card Scheme, and with people who were not covered by any of the insurance schemes. Although the primary focus of our interviews was the problems of the health care system and people’s expectations from it, our conversations often boiled down to a discussion of the ‘failures’ of Adıyaman as a "provincial, deprived and underdeveloped city": economic problems caused by the limitations brought to tobacco production; the ineffectiveness of the South-eastern Anatolia Project (Güneydoğu Anadolu Projesi – GAP, which was meant to bring economic development to the region) in ameliorating the economic conditions of the city. While speaking of such ‘failures’ of the city, our respondents

were frequently pointing out the impact of state policies. During these conversations we got the sense that “the state” was being perceived as an overarching entity, the ‘actions’ and ‘moves’ of which were considered to be the main determinants behind Adiyaman’s miseries and suggested remedies there to. It was this central role attributed to “the state” in what was perceived and experienced as the marginal status of Adiyaman, which led me to think about the various ways in which “the state” is imagined and gains a significant presence as a unified, overarching, powerful entity capable of changing its people’s destiny.

In a related sense, the second observation I had about Adiyaman was about the way the state seemed to have incorporated local, indigenous channels and networks of relating between people, be it the family networks or the social circles of state officials, and how this made Adiyaman a city ‘dense-with-state’. During my visits to the city, I conducted interviews with Green Card beneficiaries/ applicants as well as with the state officials in the health care sector. In anticipation of my second visit to the city in June 2006, I had obtained a letter from the Sociology Department informing about the research I was planning to conduct in Adiyaman. My thinking was that - based on my other field experiences and the experiences made by friends - such an "official letter" from the university would be helpful when approaching state officials for interviews. However I was surprised to find that in Adiyaman I was not even once asked to produce an “official letter” from my university, or permission from the local governor or from any upper-level bureaucrats. One factor underlying this apparent ‘easiness’ of the state officials in talking to me certainly seemed to be an understanding on their part that the Green Card and health care are ‘safe’ issues to talk about. But to me, the other and probably the more decisive factor behind this unusual attitude had to do with the ways in

which I had got in touch with these officials. Even before the first visit Nazan Üstündağ and I made to the city, we already had contacts through SPF, with some of the social workers based in Adıyaman, Hasan Bey, Abdullah Bey and Mehmet Bey. During this first visit, we developed a certain personal intimacy with these social workers, and with their facilitation we have met other officials as well. When I went back to Adıyaman for my second visit, this time on my own, the first thing I did was to go to their office and request their help to arrange interviews for me with their colleagues at the Green Card office. Abdullah Bey and Mehmet Bey were extremely helpful not only as far as arranging these interviews with other fellow state officials, but they also found for me a very comfortable room to stay at the *Sağlık Müdürlüğü Misafirhanesi*, where ‘normally’ only health care personnel are allowed to stay, by using their contacts at the Health-care Administration (*Sağlık Müdürlüğü*).

This network of relationships Abdullah Bey and Mehmet Bey got into flow for me were indicative of a very characteristic phenomenon that defined the workings of the state machinery in Adıyaman. The networks constituted over personal, familial or other local non-state linkages are very much interlocked with the workings of the state machinery. This complicity is something I found very interesting about Adıyaman. This is to say that I did not confine myself to the substance of my interviews when figuring out the object of my ethnographic study. I had an equal interest and attention in the ways in which I was allowed to get my access to certain institutions and people, and the ways in which people spoke to me and interacted with me. Therefore, I believe these considerations have contributed to my analyses on how “the state” comes to be imagined and in which ways people are constructed as citizens throughout the everyday workings of the Green Card Scheme in Adıyaman.

In my first chapter I elaborate upon the pervasive “sense of disownment” (disownment by the state) in Adıyaman, taking Adıyaman not merely as a background for my analyses on state and citizenship, but as “an agentic player in the game”. The peripherality of Adıyaman is narrated around several themes such as problems brought about by the tobacco law, the unfavorable impact of the Atatürk Dam on the city, and the lack of a highway. One could argue that all these stories of disownment and peripherality are very much related with the transformations that occurred since the 1980s in the role of “the state”: that is a shift from “the state” as a developmentalist agent to “the state” as an agent selectively providing social assistance to certain populations. I argue that this shift very much informs the widespread perception in Adıyaman that the city is “disowned” by the state. In this first chapter I try to explore how the particular locality of Adıyaman is produced by the actual materialization of the state’s policies in the experiences, bodies and souls of Adıyaman’s residents.

My second chapter focuses on the everyday interactions between the Green Card applicants/beneficiaries and the local bureaucrats, with a view towards understanding how the relationship between ‘the state’ and its ‘poor citizens’ is negotiated on the ground in Adıyaman; and how “the state” and citizenship take different meanings in this process of negotiation. The Green Card Scheme basically recognizes certain individuals as “poor” citizens, and provides them with certain health care benefits on grounds of “poverty”. However, this process of recognition is based on selecting the individuals who could make themselves legible to “the state” by proving, through some “official” and “non-official” mechanisms that they are indeed “poor” and “fine” citizens. In this chapter, by emphasizing on the everyday encounters around the Green Card Scheme, I mainly try to find answers to: what kind of relationings with the state this recognition

(provided by the Green Card) entails in Adıyaman; to what extent this recognition meets the demands of Adıyaman's inhabitants from "the state"; and how "the state" and citizenship are substantiated and imagined throughout this process of recognition.

In my third chapter, I attempt to explore how and to what extent the discourses of poverty and compassion mobilized by the Green Card shape the production of the civic subjectivities of the people in material deprivation in Adıyaman. In order to be granted a Green Card, citizens are required to comply with the criteria for poverty established by the relevant legislation and local governing committees. Although the law and the decrees draw the framework according to which the Green Card scheme is implemented, the main measures of application regarding the key question of 'who will be eligible' for a Green Card, are set at the local level, especially by the varying practices and understandings of local Green Card Governing Committees. This means that, behind the legally determined criteria that regulate access to Green Card, there is a second level of 'eligibility test' at work here, the rules of which are ambivalent and are constantly made and remade in the local governing practices of the bureaucracy from one district to another. Therefore, in order to get access to certain benefits, individuals have to comply with the norms imposed on them by the Green Card scheme. But this compliance is not a passive one; it rather appears like a theatrical performance in which the applicants/beneficiaries need to act in certain ways, to be 'hailed' as the poor. However, the workings of the Green Card Scheme are such that they involve lots of uncertainties and flexibilities, which enable other discourses available at the local level to operate within the terrain created by the Scheme. Especially in a locality like Adıyaman, where discourses organized around kinship, the idea of development and progress, and a sense of disownment by the state are very pervasive; being a "poor" citizen is not the only

available subject position to be reiterated for the people who apply for or obtain a Green Card so as to get access to the benefits of the Green Card; and also the language of compassion is not the only available way to construct intimate relations with “the state”. Following this line of thought, in this third chapter, I also explore how these other discourses available in Adiyaman enable people to find other possibilities in dealing with “the state”, and how they enable them to act or talk in ways other than the ones offered by the discursive domain mobilized by the Green Card Scheme.

I argue that a pervasive sense of loss and disownment and a desire and hope to be re-owned by “the state” shape Adiyaman residents’ perceptions and experiences with regard to “the state” and citizenship. Therefore, throughout this thesis, I will keep track of this sense of loss and disownment and the desires and hopes pertaining to “the state” in the city, in order to contextualize my analyses concerning the construction of “the state”, citizenship and civic subjectivities within the mundane workings and encounters around the Green Card Scheme in Adiyaman. In doing this, I will also explore to what extent “the state” and the institution of citizenship – as substantiated within the subjunctive terrain of the Green Card – meet the expectations of people of Adiyaman.

CHAPTER TWO

ADİYAMAN – *SAHİPSİZ ŞEHİR* (DISOWNED CITY)

When I first visited Adıyaman in December 2004, for fieldwork for the Boğaziçi University Social Policy Forum’s project on “the transformation of the health-care system in Turkey”³, something in the interviews drew my attention. Although the main theme of our interviews was the health-care system; during the interviews, several times, the conversations somehow came to the same point: what an underdeveloped, lagging behind city was Adıyaman with its “feudal” social order and introverted, conservative people; and almost all narratives on Adıyaman were marked with the senses of belatedness, injury, loss, and being abandoned and disowned by “the state”. Adıyaman is a “kör kuyu”,⁴ people would say to refer to their hopelessness and disbelief in the possibility of solving the city’s problems.

What is most significant in these narratives for my thesis is the role bestowed to the state and state policies in the described situation of Adıyaman. They always seem to emphasize the influence of state policies; and how whatever “the state” decides to do impacts the city’s perceived fortunes and miseries. For instance, in the late 80s, as a part of the Turkish state’s ambitious “South Eastern Anatolia Development Project - GAP” (which is about constructing a series of very large dams and irrigation underground to contribute to the development of the region), the Atatürk dam – which is the largest dam ever in Turkey - was built in the area between Adıyaman and neighboring Diyarbakır. The problem was that the construction of this dam physically affected Adıyaman by

³ I was assisting Nazan Üstündağ in this fieldwork.

⁴ I prefer to translate the phrase “kör kuyu” as a blind spot.

flooding one district and 85 villages, and the inter-city road between Adıyaman and Diyarbakır. A sense of marginality is felt, when people start to talk about the rich neighboring cities and the irrigation channels constructed by the state on the lands of those neighboring cities, and how the Atatürk dam which was actually built on the richest and best yielding agricultural lands of Adıyaman has not offered anything to the city in return. You also get this sense of *sahipsizlik* (disownment by the state) when you listen to stories like the one about ‘tobacco law’, which people say is the main cause of the pervasive poverty in Adıyaman; or on the experience of having been “cut off” from the rest of the country as none of the main regional intercity roads pass through the city, etc. In fact, it is this sense of *sahipsizlik* and the role bestowed to the state in the deprivation of the city that underlined my choice of Adıyaman as the field of my thesis, and during my following visits to the city, I tried to pay special attention to such narratives.

Before elaborating upon these narratives, I believe it is crucial to explain why these narratives on the *sahipsizlik* (disownment of Adıyaman by the state) are so focal for this thesis. As I have pointed out in my introductory chapter, this thesis is mainly about how the relationships between state and citizens are produced, and how the categories of state and citizenship are constructed through various discourses and practices and through interactions with local bureaucracies and institutions. Needless to say, none of these discourses, practices and interactions takes place in a vacuum; they are all embedded in the everyday of the specific locality of Adıyaman. Therefore, the purpose of this chapter on Adıyaman is not just to provide a background for the study of everyday encounters, and interactions around the Green Card Scheme, to analyze the construction of state-citizen relationships. Rather, this thesis takes the locality of

Adiyaman as “an agentic player in the game” (Gieryn, 2000, p.466), which envelopes and shapes these everyday interactions and encounters through the ways this locality is produced, experienced, and attributed meanings. In other words, I need to study the specific locality of Adiyaman in which the everyday is embedded, and several imaginaries of state and citizenship are constructed to emplace my inferences on state and citizenship drawn from the mundane workings of the Green Card scheme in Adiyaman.

At this point, there appears the following crucial question: how should I study locality? Following Appadurai (1996), Üstündağ (2005) argues that an analysis of the techniques that produce a certain locality and actors using these techniques is focal to a study of locality. She concludes from her analysis on Esenyurt that state is an important actor in the production of locality in various ways: Firstly, by constituting some places as marginal, it establishes a particular relation between the space and modernity, and this creates particular areas of intervention into the place. Secondly, state and state like actors *inscribe the locality in the bodies of those living there through violence and governance* (ibid, p.71).

In the light of these thoughts, in this chapter I will keep the track of different stories of being a resident citizen of Adiyaman; local accounts of the experience of living in Adiyaman through which Adiyaman is constituted as a *sahipsiz* (disowned) locality. I find these accounts of *sahipsizlik* important in studying the particular locality of Adiyaman; since I believe these stories and the particular themes, tropes in these stories provide clues as to the significant actors and the techniques used by these actors in the production of Adiyaman’s locality. While examining these stories, I will pay special attention to what these local understandings and narratives imply in terms of the

relations between state, policies and locality. Without understanding these, I believe, any analysis of the construction of the state, state-citizen relations and civic subjectivities at the everyday level through the workings of the Green Card scheme in Adıyaman would be inadequate.

Adıyaman – an “underdeveloped” city in the South-east

Adıyaman is a small city located in the South-East Anatolia region of Turkey. It is located between Malatya (on the north), Maraş (on the west), Gaziantep (on the south-west), Urfa (on the south-east) and Diyarbakır (on the east). Adıyaman became a province⁵ in 1954, after it (as a district) voted for the governing party of the time – the Democratic Party (*Demokrat Parti-DP*) – while Malatya – the province which Adıyaman had been a district of then – voted for the Republican People’s Party (*Cumhuriyet Halk Partisi – CHP*). As provinces are the major administrative units, being a province brings about a considerable increase in the resources allocated, compared to the districts. Although Adıyaman is mentioned as having developed rapidly after becoming a province, according to the state statistics it is still considered as one of the underdeveloped provinces of Turkey. According to the year 2003 development index of the State Planning Organization (*Devlet Planlama Teşkilatı – DPT*), Adıyaman is the 63rd among 81 provinces of Turkey; and the year 2000 statistics of DPT shows that the per capita GDP of Adıyaman is 780 million TL, which is around 40% of the average in Turkey (<http://www.dpt.gov.tr/bgyu/ipg/guneydogu/adiyamanPER.pdf>).

⁵ Turkey is divided into provinces, an administrative system barrowed from France. There are 81 provinces (*il*) in Turkey. Each province is then subdivided into smaller administrative units called *ilçe* (district).

Indeed the development discourse is the predominant paradigm employed by the Turkish state, and other actors such as NGOs, to approach the South-Eastern Anatolia region where Adiyaman is located. Several projects are conducted by NGOs and government institutions such as State Planning Organization to tackle the “underdevelopment problem” of the region. Moreover, there is a particular history of this underdevelopment discourse, which captures and situates the region and its perceived ills. It is a history which dates back to early 1950s and is very much linked to the way in which the Turkish establishment chose to deal with the so-called ‘Kurdish question’.

The South-East Anatolia where Adiyaman is located, is predominantly inhabited by a Kurdish population, and this region (along with the East Anatolia) has been a place where the establishment of the nation-state with its claims to centralization and modernization has faced the harshest resistance in the form of (Kurdish) uprisings, and ... these uprisings have been one of the (perhaps the most significant) parameters underlying the governments’ policies concerning the region (Özok, 2004). However, it should be noted that as the Turkish State denied the physical existence of the Kurds until the mid 1980s, these uprisings had never been associated with an ethno-political Kurdish question in the Turkish state discourse. Rather, throughout the Republican era, they have been identified with political reaction (demand for the Sultanate and Caliphate); banditry and tribal resistance (demand for pre-moderns social forms: tribes and bandits); and regional backwardness, of which connotations (‘past’ in opposition to the ‘present’; ‘tradition’ in opposition to the ‘modern’; ‘the political and economic resistance of the periphery’ in opposition to ‘national integration’) are considered as the major threats to the modernizing and civilizing missions of the Turkish state (Yeğen, 1999).

Since its foundation, the Turkish state was troubled by the lack of integration of the Kurdish regions into the center, which is mainly due to the relative autonomy bestowed on Kurds in the Ottoman political order. In order to sustain territorial and national integration on the one hand, the Turkish state engaged in military and political consolidation especially in the 1920s and 1930s, in the form of quashing rebellions, introducing new settlement policies to “adjust” the demographic composition of the country. On the other hand, starting with 1950s, the Kurdish question has started to be explained as a product of the underdevelopment of the regions inhabited by Kurds in the Turkish state discourse; and it was in this context that Turkish state has begun to engage in economic consolidation, and the Kurdish question has been increasingly associated with regional backwardness problem (Yeğen, 1999). The first traces of this “backward regions” discourse could be found in the five-year development plans of the 1960s, government programs of the 1960s and 1970s, and in the programs of the political parties, which underline the importance of “development of the east” for territorial and national integration, and propose to take “special measures” to solve this regional backwardness problem (Özok, 2004).

In fact, Turkish governments’ efforts directed to the “development of the east” have gained speed during 1990s in accordance with the political conjuncture of the time. The armed conflict between the Turkish armed forces and the PKK (Kurdistan Workers’ Party; Partiya Karkeran Kurdistan), which started in August 15, 1984, was at its peak during the 1990s. In the early years of the conflict, Turkish government policies aimed at repressing the uprising of Kurds only by military measures. However, starting with the 1990s, as the conflict deepened despite the harsh military measures, there emerged a new agenda for the governors in terms of dealing with the conflict. It was the idea that

military means were not sufficient, that is to say, the struggle with “terrorism” required improvements in the living-standards of the population living in the region that informed the agenda. Thus, “development” gained a novel meaning as it was started to be perceived as another realm of struggle with the conflict situation, and the issue of development of the east was thought of in relation to its importance in terms of preventing people living in the region from participating in “terrorist” activities. It is in this context that, “integrated regional development” and “social dimension” components have been introduced into The South-Eastern Anatolia project (*Güneydoğu Anadolu Projesi, GAP*), which was initially established as an infrastructure project to build dams, irrigation canals and hydroelectricity stations in the Tigris-Euphrates river basin in the 1970s; and measures to reduce regional disparities projects such as “Regions of Priority in Development (*Kalkınmada Öncelikli Yöreler*)” have gained importance (Özok, 2004).

To sum up, starting from 1950s Eastern and South-Eastern regions of Anatolia have been marked as underdeveloped; and since the 1990s developmentalist efforts of the Turkish governments towards the region have gained a speed in line with the government policies directed towards the “prevention of terror”. Being a part of this region, Adıyaman has also been a target of these development policies in various ways, and this particular developmentalist discourse in Turkey informs the ways in which Adıyaman’s temporality and spatiality are constructed. One way to follow the traces of this particular developmentalist discourse of the Turkish state is to look into the local accounts of the experience of living in Adıyaman, in which the city is constructed as a *sahipsiz şehir*, a space of deprivation.

As I mentioned earlier in the introductory chapter of this thesis, during my first visit to Adıyaman, the only people I know in the city were the state officials such as

social workers, and I needed their help to establish contacts, especially with the other state officials working in the Green Card office. Therefore, I had the opportunity to have long conversations with these state officials about Adiyaman, and their experiences of living in this city. Local officials' accounts on Adiyaman are important for me, because although they have a prestigious status among dwellers, and they are relatively better off in terms of their economic conditions – they have regular incomes; they drive relatively luxurious cars like the Volkswagen Bora; they live in luxurious apartments in the building complexes with playgrounds and parking lots; they shop at supermarkets like Migros, etc- most of the local officials I interviewed, narrate their experiences on living in the city around the themes of absence, misery, getting trapped and marginality. For these local officials, who were usually born and raised in Adiyaman, but have been to the big cities during their university years, those cities symbolize the wealth and the “modern” life; which they themselves are denied because of the peripherality, poverty and backwardness of Adiyaman. It is this experience of “backwardness” and being “not-yet-modern” that lies at the heart of officials' senses of their own marginality and disownment (they feel that they are also disowned “by the state” as they think the city is not owned by “the state” through various policies, which would contribute to the development of the city). This experience is constituted by keeping the imaginary picture of the modern West and its opposition to the East in mind, and the position of Adiyaman in the line of progression is determined with reference to the homogeneous, empty time of modernity (Thomas, 2002).

As Chatterjee (2004) and Chakrabarty (2000) put it with reference to Walter Benjamin (in Arendt, 1969), homogenous, empty time is the time of capital or modernity, and by linearly connecting the past, present and future, it creates the

possibility of imaginings such as nationhood, progress and the transition to modernity/ capitalist mode of production, etc. To state it in Benjamin's own words "The concept of the historical progress of mankind cannot be sundered from the concept of its progression through a homogeneous, empty time" (Benjamin in Arendt, 1969, p.260). This time of modernity is homogeneous because its existence is independent of any particular event, and it is empty because like a black hole it absorbs any number of events put inside it. All events and places - regardless of what their indigenous societies/communities think of them - are translated into the coordinates of this homogeneous, empty time, and their degrees of progression in the pre-determined destiny are measured with reference to its only target/ subject, the hyper real Europe/ West. In such a conceptualization, local histories/temporalities can only be approached in a bipolar setting such as despotic/ constitutional, feudal / modern - capitalist, hence the transition narratives are based on ideas of development, modernization, etc., and they are always articulated around the themes of incompleteness, absences, lack – "the 'failure' of a history to keep an appointment with its destiny (Chakrabarty, 2000, p.31).

The conceptualization of homogeneous empty time constitutes the core of developmentalist narratives. Developmentalism constructs third world nations or regions "as suspended in an elementary stage in the history of becoming modern", and "the promise of development was to bring the benighted subjects of the third world into the epochal history of the modern nation" (Saldana-Portillo 1997). And in such a conceptualization, only by entering the historical time of modernity can people become actors, and achieve a certain form of recognition and representation, and the nation-state can be considered as one of the vehicles through which peoples in the postcolonial

contexts enter the homogeneous empty time of modernity, hence achieve a sort of recognition (Üstündağ, 2005; p.75).

In my interviews, local officials' accounts on Adıyaman were overflowed with the themes of peripherality, loss and incompleteness. Taking for granted that Adıyaman is an underdeveloped province, they told stories on why the city could not get modernized, and how it could be possible to catch up. These peripherality stories of the local officials were almost always told in comparison to the big cities in the Western regions of Turkey, or in comparison to relatively wealthy neighboring cities of Adıyaman like Antep and Malatya. In such accounts, these Western or wealthy neighboring cities – by contrast to Adıyaman - were represented as having paved roads, running airports, regular public transport, five-star hotels, “proper” universities, theaters, movie halls, technologically equipped hospitals, well-established industrial centers, etc; and officials underlined the importance of these facilities for a city to get developed. For instance, almost all the officials I talked with, underlined the importance of tourism (as the Mount Nemrut is located within the borders of Adıyaman), and the importance of a five-star hotel, and a properly running airport for the “development” of the city. They also mentioned that Adıyaman can not use the opportunities offered by Nemrut, and they told me that they were about to lose Nemrut to Malatya (*Nemrutu Malatya'ya kaptırmak*) as Adıyaman has no one in “the state” to defend its interests⁶.

⁶ This story is very interesting. Although Mount Nemrut is officially considered within the borders of Adıyaman, in 1999 with a new legislation Nemrut was shown as located within the borders of Malatya. However, Adıyaman dwellers reacted to this new legislation, and by sending a petition against this new legislation to the state council (*Danıştay*), they got this new legislation annulled. However, the debate on Nemrut did not cease. As people I talked with in Adıyaman told me, a paved road was built from Malatya to Nemrut in 2006, and it became easier to reach Nemrut from Malatya than from Adıyaman by this road. This time some dwellers of Adıyaman sent a petition to the Ministry of Forestry arguing that this road might ruin the natural and cultural environment around Nemrut, and they prevented the passage to Nemrut from this road. As they claim if this road was not closed, no one would pass from Adıyaman to go to

Moreover, local officials concerns for development of the city shape their approach to local people of Adıyaman. For these officials, the local people's inability to break the links with their "feudal" past, is another factor impeding the modernization efforts in Adıyaman. To them, the "ignorant" people of Adıyaman are still closely tied to their *aşirets* and *töres*; they live in extended families; they do not care about family planning and have more children than they can look after; the men sit in the *kahvehanes* all day playing some card games and gossip, etc. For these local officials, the absence of facilities and the particular culture of Adıyaman's people are considered as a symbol of Adıyaman's lack of opportunities for individuals economic and cultural growth, as well as its lack of becoming appropriately national, hence not belonging to the "contemporary"⁷ of modernity.

While these local officials were complaining about the underdevelopment and backwardness of Adıyaman, they, at the same time, displayed their discomfort with the misrepresentation of Adıyaman as a "city of terror". For them, as Adıyaman is located in the South-East, people in the west consider the city as a dangerous place where terrorist activities reign. However, according to these local officials, Adıyaman has never been involved in any act against the state as it is committed to the state ("*devletine bağlı bir şehir*"). Many local officials described Adıyaman as a "bridge between the East and the

Nemrut. This concern is in line with the complaints of Adıyaman's dwellers about Adıyaman "being a blind spot", on which I will elaborate in the following sections of this chapter.

⁷ The word contemporary usually refers to the temporality of the Western modernity at a particular point in the calendar. Therefore, any reference to contemporary is problematic in the sense that the current temporality of a particular culture takes a hegemonic character, and claims universality. When this claim for the universal contemporary is deployed by the idea of progress, it becomes the only possible and the most converging way to the future and the heterogeneous temporalities of different cultures/people seem irrelevant and outmoded. The implicit claim of such a "universal" contemporary is that whatever meaning and/or direction are assigned to other temporalities, they will soon be overwhelmed by the future that universal contemporary divines (Chakrabarty, 2000, p.87). Therefore, such a view of "universal" contemporary of homogeneous, empty time of capital/modernity condemns the heterogeneous temporality of the local to be an instance of obsolescence, a ruin.

West”, and they mentioned that Adıyaman turned its face towards the West and turned its back on the other side of the Euphrates – where Diyarbakır is located, and is generally considered as the stronghold of the Kurdish movement. But one recurring complaint that appeared in my interviews is why – in spite of the city’s commitment to look West-ward – the Turkish state does not attend to Adıyaman sufficiently and thus why the city is unable to develop sufficiently. In other words, the question that is voiced is why the obedient and deserving citizens of Adıyaman do not seem to get anything in return for their commitment to the state.

In other words, it is possible to argue that accounts of local officials I interviewed with, are very much informed by the particular developmentalist discourse in Turkey, which is employed to situate the predominantly Kurdish populated Eastern and South-Eastern regions in terms of their insufficiency of economic means, lack of several facilities, and the nonconformity between the local cultures and the “modern” ways of living. Considering the mutual affinity and historical linkages, I pointed out above, between the predominant developmentalist discourse and the ‘prevention of terror’ discourse, it is no surprise that the state bureaucrats I spoke to, seem to speak of a discrepancy between Adıyaman’s choice to ‘stay away from terrorism’ and the city’s continued underdevelopment. This shows how much the dominant formula of dealing with the Eastern and Southeastern provinces is internalized and embodied by these state officials, the formula of surpassing the region’s Kurdishness by means of development.

Similarly, it is very significant that all these accounts of Adıyaman as a *sahipsiz*, peripheral locality are told in terms of terrorism vs. development, because for these state officials who internalized the developmentalist discourse, the only way to be integrated into what they perceive as the ‘national historical time’ and thus to attain possibilities of

recognition and representation is through attaining development of the city. In a situation where such a direct link is made between “prevention of terror’ and prospects of development, it is possible to argue that all these utterances of “Adiyaman being committed to the State”, “Adiyaman staying away from terrorism” are informed by a desire to be “owned” and recognized by “the state”, since acquiring such a recognition is considered as a decisive step in achieving a sort of representation, hence entering into the homogenous empty time of modernity.

Miseries of Adiyaman

Besides the local officials’ accounts on the backwardness of Adiyaman, in many accounts which construct the city as a *sahipsiz şehir*, explain this disownment in relation to the impact of several state policies, such as the tobacco law; the GAP and the establishment of the Atatürk dam; the lack of a highway connecting the city to the other regions of Turkey, etc. The ones who raise such complaints are predominantly the unemployed, peasants and people working informally, that is the people of Adiyaman, who either lost the state’s attention due to various policy changes, or have never been recognized by “the state” through involvement in certain benefit providing mechanisms like public social security schemes. What is interesting in these accounts is the emphasis on the state’s neglect, on the city’s perceived miseries.

Tobacco Law

For years, tobacco production has been the major source of Adiyaman's economy⁸.

Adiyaman raises approximately 8% of the total tobacco produced in Turkey, and around 240.000 of the inhabitants of Adiyaman work in this sector (Akar, 2005). However, the government policies which have been implemented since the-mid 1990s have had very adverse effects on tobacco production in the city. Before examining these adverse effects, I would like to give a brief summary of the developments in the tobacco industry in Turkey.

Tobacco production has a 400 years old history in Anatolia. Today, Turkey is the 6th biggest tobacco producing country in the world. 3% of the world's total tobacco production and 40% of the total oriental tobacco (the main type of tobacco produced in Turkey) production of the world is produced in Turkey (İslamoğlu, 2002). Moreover, tobacco is an important product for the foreign trade of Turkey as it has a share of 15%-25% of total agricultural exports (Tütün-Sen, 2006). After the foundation of the Turkish Republic in 1923, governments of the time have taken several steps to regulate tobacco industry, and with laws dated 1926 and 1930, a state monopoly over tobacco production and trade, which lasted over decades, was constituted. As the tobacco demand increased over the years in line with the increase in consumption, the government decided to subsidize tobacco production in 1940. Initially subsidizing had been conducted by a state-led institution called "*Yerli Ürünler Türk A.Ş.*". This duty was then transferred to

⁸ Agriculture constitutes the major economic activity in the city, and 73,64% of the total labor force of Adiyaman is employed in agriculture. Although Adiyaman is one of the provinces in which state provides financial initiatives to industrial investments, and it is a province where 60% of the total petroleum in Turkey is obtained; the industrial sector has not been very effective in the city. Only 4,8% of the total labor force is employed in the industrial sector, and around 80% of these (approximately 4% of the total labor force) works in textile industry. In Adiyaman, trade and finance sectors are also not very active, and they provide employment around %5 of the total labor force. (See www.adiyaman.gov.tr, <http://www.dpt.gov.tr/bgyu/ipg/guneydogu/adiyamanPER.pdf> - December 4, 2006)

another state-led institution called TEKEL, and TEKEL was the main agency administering these subsidies until it was privatized in 2001. Since the beginning of government subsidization, and especially after 1960, both tobacco production and the number of tobacco producers continued to increase. However, after the abolition of the ban on foreign tobacco importation, and the abolition of the state monopoly over tobacco production in the mid 1980s, American tobacco blended cigarettes have begun to be imported and produced in Turkey, and this led to a decrease in oriental tobacco demand. This decrease in demand brought about an increase in TEKEL's tobacco reserves, as TEKEL had been purchasing almost all oriental tobacco produced in Turkey. Subsequent governments during the 1990s decided to take action toward bringing some limitations to tobacco production, as limitless subsidizing of tobacco was considered as a wasteful use of public resources (*kamu kaynaklarının israfi*). As a result, starting in 1994 the amount of tobacco that would be purchased by TEKEL was limited with a quota system, which allowed TEKEL to purchase only a certain amount of tobacco from each certified producer, and compensate the tobacco producing land owners for their uncultivated fields. However, this quota system could not achieve its desired consequences as TEKEL kept up purchasing excessive amounts of tobacco, while it continued to pay compensation for uncultivated fields. Therefore, in 2002 another law, regulating tobacco production and the tobacco market was published, and with this so-called "tobacco law", government subsidies provided to tobacco producers were abolished, and new limitations to the tobacco production was introduced (DPT, 2004)⁹.

⁹ For a broader analysis of the impacts of this new law on tobacco producers, please see Tütün-Sen (2006); İslamoğlu (2002); Aysu (2003).

During my fieldwork in Adıyaman, almost everyone I spoke indicated that new laws in the tobacco sector were the main determinant of the miseries experienced in the city. According to the dwellers of Adıyaman, although Adıyaman was once a self-sufficient city, after these limitations to the tobacco production and trade, it became impoverished and people could not sustain themselves due to the lack of other economic activities. My informants told me how these new legislations in the tobacco sector had devastating impacts on the city. First of all, families, which were producing oriental tobacco, experienced a tremendous income loss. Land owners, who used to generate their income predominantly by producing tobacco, shifted to wheat and leguminous seeds production, which appeared as the only possible solution as the limited irrigation facilities and know-how did not allow them for more yielding alternatives such as vegetables and fruits. However, this shift did not solve their economic problems, as the prices of these products are very low, and the income generated from the sale of these products is around 1/10 of the income they used to earn from tobacco production¹⁰.

The only thing Adıyaman had was tobacco. Not only it (the government) destroyed it, but also it has not provided any alternatives. Now the only alternative is to yield wheat; but it does not bring any profit. I have not planted my fields for two years. I support my family through the income I earn from this field. I take my family to a doctor through the income I earn from this field. They all waned. (A man from Karapınar Neighborhood)¹¹

¹⁰ For instance, while people used to be able produce 2 tons of tobacco on 2 hectares land before the 1994 limitations on production, and gain around 8.000 YTL/year with current prices; after the limitations the one who have tobacco production license are allowed to produce only 200 kg. of tobacco, and earn around 800 YTL/year. If they produce wheat instead of tobacco on the same amount of land (2 hectares), the yield they will take is 4 tons, which will earn them 900YTL/year.

¹¹ Adıyaman'ın bir tütünü vardı. Onu kaldırdığı gibi bir alternatif de sunmadı. Şimdi arazide bir buğday ekiliyor onun da getirisi yok. Ben iki senedir arazi ekmiyorum. Ekip ne yapacam. Bu araziyle ben ailemi geçindiriyorum, hasta doktora götürüyodum, hepsi bitti.

The one thing that supports Adıyaman is tobacco. They brought limitations to tobacco. One person can produce 200 kg., he can not produce one kg more. What could this man do with 200 kg? Let's say the price per kg is 5 million, what does it make? 1 billion. What could one do with 1 billion? He cannot buy shoes for his children. (İmamağa Neighborhood, *mukhtar*)¹².

This tremendous income loss also had very adverse effects in terms of the social security status of those peasants. According to the law numbered 2926, which was published in 1983, all people who earn their livelihood directly from their own agricultural activity, are obliged to be insured under the *Bağ-Kur* scheme by paying premiums¹³. As many peasants who were producing tobacco in Adıyaman, were selling their products to TEKEL – which was a state-led institution - during the 1980s and early 1990s, they were automatically included into the *Bağ-Kur* insurance scheme, hence they were obliged to pay premiums. Paying these *Bağ-Kur* premiums has always become an issue in Turkey not only for tobacco producers, but also for the other self- employed like artisans, due to the very high premium rates and irregularities in the incomes of the self-employed¹⁴. The income loss, which tobacco producers experienced due to the limitations, worsened the situation and it became much more difficult for those peasants to pay their *Bağ-Kur* premiums regularly. As a result, their debts to *Bağ-Kur* have accumulated in time, and today it seems almost impossible for many of those peasants to pay their debts to *Bağ-Kur*. As the *Bağ-Kur* members who do not make their

¹² Zaten adıyamanı ayakta tutan tütündür. Tütüne de kota sistemi getirildi. Bir kişi 200 kilo ekiyor. Onun üstünde 1 kilo ekilemiyor. Bu adam 200 kilo ile ne yapsın? Malın kilosu 5 milyon olsa, ki değildir. O da ne eder, 1 milyar. 1 milyarla ne yapabilir ki? Çoluk çocuğun ayakkabı parası değil.

¹³ Resmi Gazete, No 18297. 20.10.1983. “Tarımda Kendi Adına ve Hesabına Çalışanlar Sosyal Sigortalar Kanunu”. Law No. 2926

¹⁴ According to the statistics I obtained from Bağ-Kur, 64% of Bağ-Kur beneficiaries are indebted to Bağ-Kur as of 2005.

contributions regularly, cannot get access to the health services or pension benefits provided by *Bağ-Kur*, until they pay all their debts to the institution; most of those tobacco producers who are indebted to *Bağ-Kur* are in fact falling outside the social security net. Recently, there have been some government efforts to solve this problem, such as introducing a new installment plan for the debts; and allowing the *Bağ-Kur* members to drop out of the system without paying their debts, and to become eligible for a Green card. However, none of these efforts have been very effective, as the new installment plan for the *Bağ-Kur* debts is beneficial only for those, who reach a certain age to be granted the right to pension benefits¹⁵; and the officials in the Green Card office in Adıyaman deliberately try to prevent people to from obtaining the information that they can be eligible to get a Green Card by dropping out of the *Bağ-Kur* scheme without paying their debts to *Bağ-Kur*.

Secondly, as I was told by my informants, landless agricultural workers, who were working predominantly in tobacco production before the introduction of limitations, are faced with a serious level of unemployment. As they could not find any other jobs in Adıyaman, they started to go to other cities/ places like Malatya, Urfa, Adana, Karadeniz, Ege to work as seasonal workers in cotton, apricot, hazelnut, fruit, vegetable etc. production. The conditions under which these people work are very unfavorable. First of all, although most of these seasonal workers have to rely on the money they earn from these seasonal jobs -which usually last around 4 months- to make a living in a whole year, it is almost impossible to attain this goal with the very low level

¹⁵ The new installment plan for *Bağ-Kur* debts works as follows: People are provided long-term credits from the Ziraat Bank to pay their debts to *Bağ-Kur*. As soon as their *Bağ-Kur* debts are payed, *Bağ-Kur* beneficiaries who reach a certain age are entitled to a pension. Therefore, for these people it becomes possible to pay the installments of the loan they took up from Ziraat Bank, as they are granted to obtain a regular salary from *Bağ-Kur*.

of per diem fees¹⁶. Moreover, seasonal workers have to give a certain amount of their fees to the middlemen (*aracılar*), who help them find jobs; and make the necessary arrangements for the transportation, and shelter, which is usually a tent without any running water and sanitation facilities. Secondly, these people are faced with serious discrimination at the places they go to for seasonal work (especially in the regions outside the Kurdish inhabited areas, such as Karadeniz and Ege). Just because they are from the “South-East”, these people are considered as potential “terrorists” both by the officials and the local people of the places they work. Busses or trucks carrying seasonal workers from the South-East are stopped – after a very 20 to 30-hour long journey - at the checkpoints put along the borders of the cities in Karadeniz or Ege just for these “suspicious” people, and if they are lucky they can pass through after their IDs and records are checked. But sometimes they are sent back to their homes without mentioning any valid reason. Furthermore, such “security measures” are not over even for the lucky ones who could get access to their workplaces. The employers usually keep their IDs, and do not let them go out of the workplace or the refugee camp-like places where they stay; and sometimes these places are “guarded” by the police (Türker, 14.08.2007).

II: Now Adıyaman is emptied. They (dwellers of Adıyaman) go to Malatya to work in apricot production, they work for 10 million (a day). If Adıyaman was like as it was in 5-10 years ago, Malatya would come here to work. That is, it (Adıyaman) did not have any insufficiencies. But now, with the start of the summer holiday of schools... today, look at the West, there, students think where they will spend their holiday. Our students go to pick apricots, to hoe during their holidays.

¹⁶ According to the official statistics of TÜİK (State Statistics Institute), as of 2005, average per diem salary of a male seasonal worker is 18.06 YTL, average per diem salary of a female seasonal worker is 13,62 YTL (TUIK, 2005).

I2: Next week, go wherever you like, you cannot find anyone. Go to the neighbourhoods. All are empty. What else can you do without any income? Cotton, lentil, apricot...

I3: Malatya is better as our own people live.

I1: They go to İzmir, to the Blacksea region to pick hazelnuts. There, they do not let you in, as if you are a potential suspect. You are not allowed to enter Giresun, because the gendarmery, the police say “you are Kurds, you cannot enter this region”.

I2: These people are watched all the time. When a family goes to a *mukhtar* to find two-three families for seasonal work, isn't it possible...

I1: They all ask for IDs in the places you take them (the seasonal workers) to work. You cannot get in without an ID. Until the job is finished... it is usually like this. Throughout the journey, I was already watched. They do not let them go anywhere else. If these people ask for jobs, give them jobs to work. They say “do not join the guerilla”. Ok, they don't join. But they should ameliorate the conditions for them not to join the guerilla. Consider your own son, your own brother. .. If these people are not fed up with this... who could... till night falls? I ask you, is it reasonable or not? (Karapınar Neighborhood, *mukhtar* and some merchants)¹⁷

Finally, my informants told me that this decrease in income of the tobacco producers had an unfavorable impact on the economy of the whole city, which is mostly geared to agriculture. Since the major economic activity in the city has been tobacco production for decades, tobacco producers have been the main customers of the local

¹⁷ I1. Şu anda adıyaman boşalmış ya da boşalmak üzere. İşte malatyaya gider kayısıya, 10 milyona çalışır. Adıyaman eğer 5-10 sene önceki gibi olsaydı bugün malatya gelirdi buraya çalışmaya. Yani, hiçbir ihtiyacı yoktu yani. Ama şimdi okulların tatil olmasıyla... bugün batıya baktığın zaman öğrenciler yaz tatilini nerede geçireceğiyle ilgili. Bizim öğrencilerimizse kayısı toplamayla, çapa yapmayla geçiriyor tatillerini.

I2. Bir hafta sonra burada nere gitsen adam bulamazsın. Mahallelere git hep boş. Gelir olmazsa ne yapacaksın. Pamuk, mercimek, kayısı...

I3. Malatya yine kendi insanımız olduğu için daha iyidir.

I1. izmire gidiyorlar, karadenize gidiyorlar fındık toplamaya. Fındırk toplamada potansiyel suçluymuşsun gibi seni ile sokmuyorlar. Giresuna giremiyorsun, jandarma polis diyor ki siz kürtsünüz bu bölgeye giremezsiniz diyorlar.

I2. bu insanlar müthiş gözetim altında. Bir aile kalkıp muhtardan üç beş aile alıp çalıştırmaya kalkıyorsa bile, olmaz mı ki işte...

I1. Götürdüğün işlerde hep kimlik istiyorlar. Kimliksiz giremezsin. İşi bitene kadar... genelde böyle yani. Yoldan geliyorum, zaten denetim altında geldim. Valla orada bi tarafa bırakmıyorlar. Bu insanlar çalışmak istiyorsa iş verin çalışsınlar. E dağa çıkmayın. Tamam kabul çıkmasınlar. Koşulları iyileştir çıkmasınlar. Kendi evladını, kardeşini düşün... Bu insanlar demek bıkmasa, usanmasa kim akşama kadar..., sorarım size yapılır mı yapılmaz!

artisans in the city center. Therefore, coupled with the lack of other income generating industries in the city, the decline in the purchasing power of tobacco producers has resulted in deterioration in the businesses of these local artisans and small entrepreneurs. The artisans and small entrepreneurs in Adıyaman are caught up in an economy of endless borrowing. On the one hand their businesses do not seem to do well at all, on the other hand they keep their businesses going by means of money they borrow from each other, and this vicious cycle goes on and on. The bakers for example provide goods to the grocery shops on credit (*veresiye*), and they get their flour on credit as well. Whenever the grocery stores are able to pay back some of what they owe, the bakers in turn close some of their debts to the flour providers. But this web of mutual debts never seems to cancel out completely. These people are constantly in trouble making their ends meet, which in turn makes it exceedingly difficult for them to pay their dues to the *Bağ-Kur* scheme. This results on the one hand in ending up deprived from healthcare and pension benefits, and on the other hand indebted to the state and being confronted with legal problems.

M: I am a merchant. I have been doing this job for 20 years. I opened my shop in '89. Then, I could not keep the pace with orders, even though I had employed 4-5 people. Now, there is not even one person in a month who gives an order for a suit. There is no work, no order. People only come to change collars. I will change the collar but I will not be able to take any money for the work, this is the way things work. (İmamağa Neighborhood, muhktar)¹⁸

II: I sell bread and people owe me 10 billion TL and I owe 20 billion TL to the flour merchant. We only have the hope for EU accession and

¹⁸ M. Ben esnafım. 20 yıldır bu işi yapıyorum. 89da açtım. Ben iş yetiştiremiyordum, 4-5 kişi çalışmasına rağmen. Şu anda da ayda bir elbise diktiren yok. İş yok. İşte yaka değiştirme falan geliyor. Değişicem ona da para almıycam, anca öyle.

the patience that God gives to us. It is especially true for merchants in Adıyaman.

I2: Here you borrow from your close friends, make money from somewhere and pay a part of your debt. Our conditions are very hard; but we manage to live anyway. We try to raise 5-6 children with 300 million TL for a month, I swear. (Baker and wholesale dealer).¹⁹

These limitations brought to tobacco production can be considered as a consequence of transition from a national developmentalist regime to a neo-liberal one, which entails that “the state” should leave the sphere of economics. Therefore, it is possible to conclude from these accounts that tobacco and the new legislations brought to the tobacco sector appear as a key trope figuring the sense of *sahipsizlik* in Adıyaman, and the way this sense of disownment of the city by the state is narrated in the accounts has a lot to do with the feeling of “loss” of recognition by “the state”, which was once present (through the state’s developmentalist policies), and which signifies the incompetence and peripherality of Adıyaman.

Indeed the state is involved in these affairs as well. It is a game that the state plays. For example, Antep has its own pistachio, Malatya has apricot, Mersin... Amasya has apple... and what has Adıyaman? Adıyaman once had tobacco, and if it still has it today, the city would be far beyond the other ones. (A peasant from a village of Adıyaman).²⁰

¹⁹ I1: Ekmek satıyorum 10 milyar TL alacağım var, 20 milyar TL de borcum var uncuya. AB’ye girmek ümidimiz, bir de Allah’ın verdiği sabır var. Bilhassa Adıyaman esnafı böyle.

I2: Burada eşten dosttan alıyosun, başka yerden para kazanıyosun borcunun bir kısmını kapatıyosun. Halimiz çok perişan ama yaşıyoruz. Ayda 300 milyona 5-6 çocuk geçindiriyoruz valla.

²⁰ Ya bunda devletin de parmağı vardır. Devletin bir oyunu bu. Mesela antepin fıstığı var. Malatyanın kayısı. Mersin amasyanın elması... e adıyamanın? Adıyamanın bir tütününü vardı, o tütün olsaydı bugün adıyaman bütün illerden daha öndeydi

GAP - the Atatürk Dam and the Road

Another line of the story in which Adıyaman is constituted as a *sahipsiz şehir* is on Atatürk dam and the GAP. Being one of the provinces of the GAP area, Adıyaman has been subject to several infrastructural projects of GAP. The most significant of these is the Atatürk Dam, the centerpiece of 22 dams of GAP, with a total area of 817 km², which was built on the Euphrates River, between Adıyaman and Diyarbakır. The dam flooded 86 settling areas, one of which being a district (Samsat), and 61% of cultivated lands within the borders of Adıyaman. Accordingly, people living in these areas migrated mostly to the city center, hence the population of the city center increased around 30% in 1990s. People of Adıyaman have been expecting Atatürk dam and GAP to have a very favorable impact on the city, as GAP is the most ambitious agricultural and regional development project in Turkey, and its centerpiece, Atatürk dam is located predominantly within the borders of Adıyaman. However, people with whom I interviewed in Adıyaman think that the GAP and the Atatürk dam had a very adverse effect on the city, leave aside contributing to city's development. During my interviews whenever the Atatürk dam was raised as an issue, complaints about the adverse effects of the dam on the city followed, and people started to talk about how Adıyaman could not benefit from the dam in several aspects.

As I mentioned above, the dam flooded lots of settled areas within Adıyaman. People whose villages were flooded by the dam, migrated to central Adıyaman, and this brought about a significant increase in the population of the city center. As a result of this migration wave, many neighborhoods of Adıyaman have turned into "migrants neighborhoods" (*göç mahallesi*), where unemployment and poverty reigned. When I mentioned my informants that I wished to visit one of these neighborhoods, they told me

to go to İmamağa Mahallesi, which, as they mention, is one of the poorest neighborhoods of Adıyaman.

İmamağa Mahallesi is located on the side of the road going to Samsat district, the flooded areas. Around 90% of the neighborhood population has come from the flooded villages of Samsat, and most of these migrants are the landless, poor people of those flooded areas. These landless people who migrated to the neighborhood live in very unfavorable conditions. As they cannot find any jobs in Adıyaman they have to go to other places for seasonal work, and as most of them are not covered by any social security scheme, around 95% of the neighborhood population has a Green Card. Although, there are some land owners living in this neighborhood, who were given significant compensations by the state, several of my informants mentioned that most of the people who got these compensations wasted this opportunity, as they did not know how to make profit from this money. According to my informants, although it was possible to create new job opportunities with these compensations; due to the “ignorance” of the people, this money didn’t bring any good to Adıyaman.

M: There are lots of people coming from the villages of Samsat. There are plenty of people from Samsat. However, 90% of these agha villages are empty now. All those who have no land did migrate to the city. When a person migrates outside, where will s/he go? All are poor. If s/he has a house, that is all. S/he goes for apricot from there, goes outside. If you go to the neighborhood right now, you would find no one around. There is no one, all has gone outside. Some has gone to hoes, some to chickpea, some to apricot. And some will go to hazelnut after apricot. Otherwise it is not possible to live, all these people are coming from the poor segment... There are not any rich people around the neighborhood. There were those who got compensations from the state for the damage done by dam, but they did not know how to use the money and spent it unwisely. Those who use it wisely brought

themselves forth and those who use it unwisely are in a condition worse than ours (Imamağa Neighborhood, *Mukhtar*).²¹

Despite the fact that there have been several other dam projects to irrigate the lands of Adıyaman, my interviewees complained that most of these projects have not been realized yet, and the one (Çamgazi Dam) which was put into operation, is far from meeting the needs of Adıyaman. These complaints regarding the failure of the GAP to provide irrigation facilities to the city were almost always narrated in comparison to the other cities in the GAP region, such as Urfa. My informants perceive this relatively poor status of Adıyaman in the region as an indicator of the state's neglect towards the city, and this appears as a factor intensifying their sense of peripherality. Indeed they recall with resentment a statement said to be made by Turgut Ozal in the 1980s, Prime Minister at the time, during a visit to Adıyaman. I was told that Turgut Özal, when speaking of the changes to come with the GAP project, has said that “people of Adıyaman will now travel to Urfa and Harran to pick cotton, instead of Çukurova”. What Özal foresaw in his statement still echoes in Adıyaman today, as a crystallization of the city's perceived neglect and peripherality.

The second problem, narrated by my informants, regarding the Atatürk dam is that construction of this dam physically, and effectively cut Adıyaman's communications with Diyarbakır by flooding the inter-city road between those two cities.

²¹ M: Samsat'ın köylerinden gelen çok. Samsat'tan geleceği kadar geldi. Ama genelde bu ağa köylerinin %90ı boşaltılmış durumda. Arazi sahibi olmayan insan hep şehre göç etti. Dışarı göç ettiğinde bu insan nereye gidecek, hep fakir insanlar? Zaten birikmiş bir evi varsa vardır. Oradan hep kayısıya gider, dışarı gider. Mahalleye git şimdi adam bulamazsın. Kimse yok ki hep dışarıda. Kimisi çapaya gitmiş gelmemiş, kimi nohutta, kimi kaysıda. Kayıysıdan kimi fındığa gidecek. Yoksa mümkün değil yaşamak, hep fakir kesim... Bu mahallede zengin hiç yok. Barajdan para alanlar vardı ama paranın kıymetini bilen pek olmadı. Paranın kıymetini bilen kendini yukarı taşıdı ama bilmeyenler malesef bizden daha kötü durumdalar.

M: This road is a very busy one. Earlier it was the road to Samsat.

Ç: Did the road have any significance then?

M: Very much. In any way it was a road of a district. Besides district, this road did belong to 50-60 villages. Now the road is detached from all these villages and even from the district. You cannot find 20 villages around the road because there is none. This place has turned into a blind spot, to tell the truth. Over 80 villages were flooded. Indeed GAP had damaged Adıyaman so much. Urfa is the one that benefits and Adıyaman is the sufferer. (İmamağa Neighborhood, *mukhtar*)²²

During my interviews in Adıyaman, the lack of road appeared as a key trope signifying Adıyaman's marginality. Many people I interviewed in Adıyaman claimed that one of the main reasons of the peripherality of Adıyaman was its being a "blind spot". According to them as none of the highways that connect the region to the other "developed" parts of the country and to the world passes through Adıyaman, trade and tourism could not get developed in the city and Adıyaman got stuck into itself and remained at the peripheral and underdeveloped. This is not to say that there is no road connecting Adıyaman to other cities. In fact, there exist roads between Adıyaman and its neighboring cities, Gaziantep, Urfa and Malatya. However, what people I interviewed consider as a problem is that non of these roads are connected to the main highways which transpass several cities. That is to say, you do not pass through Adıyaman, unless you have a reason to be in Adıyaman, and this lack of a highway is experienced as having been "cut off" from the rest of the country.

²² M: bu cadde çok işlek bir cadde. Daha önce samsat yoluydu

Ç. Yolun çok önemi var mıydı?

M. çok. Şimdi ne de olsa bir ilçenin yoludur ne de olsa. İlçenin dışında en az 50-60 köyün yolu. Şimdi bütün bu köylerden koparılmış, ilçe de gitmiş. Ama şimdi bu yol üzerinde bulunan 20 köy bulamazsın, yok çünkü. Burası bir kör cephe olmuş açıkçası. 80'in üzerine köy sular altında kaldı. İşin açıkçası GAP'ın Adıyamana bayağ bir zararı olmuş. Faydalanan Urfa cezasını çeken Adıyaman

Therefore, in such a context, the flooding of the road connecting Adıyaman to Diyarbakır by the Atatürk dam is considered as another misery induced by GAP. Although, there have been a project to build a bridge on the Atatürk dam, connecting Adıyaman to Diyarbakır, this project has not materialized yet. Almost everyone I talked to was sure that the bridge on the dam would never be built, and in the accounts of my informants, this planned-but-never-materialized bridge – similar to the accounts on the devastating impacts of the tobacco law; lack of irrigation facilities provided to the city by the Atatürk dam; lack of a highway – appears as one of the key symbols indicating the state's neglect towards the city.

To sum up, the perceptions that inform these accounts of being peripheral and excluded either refer to the failures of the state to keep promises made to the city (GAP, Atatürk dam), or they refer to ways in which policy decisions made in Ankara (as in the case of tobacco farming and construction of dams) fail to take into consideration the specific circumstances of Adıyaman and the impacts they will have on the city. The frequently voiced expression of “Adıyaman not having anyone to own it” (*Adıyaman'ın sahibi yok*) precisely refers to this perceived lack of a voice to defend the city's causes in the central government and the absence of mechanisms that will provide recognition and representation for the city. These accounts essentially speak of a sense of powerlessness, a sense of peripherality described in terms of being unable to reach up to the centre, being unable to be heard or seen by the centre, and being disowned by the state.

Conclusion

As I mentioned in the beginning, in this chapter I attempted to analyze the all-present sense of marginality I encountered in Adiyaman, by keeping track of the accounts of being a resident of Adiyaman and the experience of living in the city, in which Adiyaman was constituted as a marginal locality.

When I first visited Adiyaman, the city left an impression on me, an overwhelming sense of marginality communicated to me by things around me and by the inhabitants of Adiyaman. This impression became crucial in my choice of Adiyaman as my field of research. What I saw in Adiyaman in my first encounter with the city during my first visit was a city “dense with the state”. Indeed what I came to see in my following experiences with the city and its residents only served to qualify and consolidate this first impression of mine, a city constituted as a *margin* where the *centre* point of reference is unmistakably the state.

Taussig (1992) argues that “the fantasies of the marginated concerning the secret of the centre are what is most politically important to the State idea” (p.132). Following this line of thought, it is possible to claim that the accounts in which the marginality of Adiyaman are narrated over state’s neglect toward the city, not having access to and influence over the workings of the central government, also call for a specific fantasy of a vertically structured, all-encompassing, powerful, central state, and as Nuijten (2004) puts is “(it is) these fantasies (...) concerning the powerful centre that lead to state fetishism and the cultural constitution of the modern state” (p.223). Similarly, the imagining of an overarching and all-encompassing state power is made possible through

the demands for the state to intervene, and to make a presence in Adıyaman in the accounts of Adıyaman as an underdeveloped, deprived, marginal locality.

The peripherality of Adıyaman is narrated around several themes such as problems brought about by the tobacco law, the unfavorable impact of the Atatürk dam on the city, and the lack of a highway. All these stories of marginality and peripherality constitute local people's imaginaries of the Turkish state. In turn, this widespread perception that the city is neglected (or rather 'disowned', since it was once owned through its links to tobacco industry) by the state, and the actual materialization of the state's policies in the experiences, bodies and souls of Adıyaman's residents, produce the locality of Adıyaman. In the following chapters, over the course of my discussion on the workings of the Green Card Scheme with an emphasis on the construction of "the state", citizenship and civic subjectivities at the everyday level in Adıyaman, I will also explore to what extent "the state" and citizenship as substantiated within the terrain of the Scheme, speak to the complaints of Adıyaman's people about the city's 'disownment' and meets their desires for "the state" to make a presence in the city.

CHAPTER THREE

EVERYDAY ENCOUNTERS WITH “THE STATE” AROUND THE GREEN CARD

Health-care policies as one of the main components of the social policy agenda do not only aim at providing certain living standards and establishing equal opportunities for all by compensating for the various inequalities created by the market economy. Social policies generally, and healthcare policies specifically, also provide terrains in which concepts like citizenship, state, rights, justice and community are invested with everyday meanings, substantiated through everyday practices and experiences (Üstündağ and Yoltar, 2007). Following this line of thought, in this chapter I will attempt to approach the Green Card scheme as a site on which ‘citizens with low income’ come into contact with ‘the state’ in Adiyaman. What I will attempt to explore is mainly how the relationships between state and citizens are produced, and how the phenomena of ‘state’ and “citizenship” are substantiated at the everyday level around the workings of the Green Card Scheme in Adiyaman. Specifically, I will try to look on the one hand at the everyday interactions in the Green Card office, health centers, hospitals and other institutions related to the Green Card procedure, like the local police and gendarmerie; and on the other hand, the public discourses organized around Green Card in Adiyaman.

In what follows, I will first provide some background on where the Green Card scheme stands within the general health care financing system in Turkey. Secondly, I will emphasize on the everyday workings of the Green Card scheme in order to understand how the state-citizen relationships are constructed and how “the state” and “citizenship” take different meanings.

The Health Care System in Turkey and the Green Card Scheme

The existing public health insurance system in Turkey has a quite fragmented and hierarchical structure. On the provision side, health care services are provided by a number of public, quasi-public, private and philanthropic agencies but the relations between them are not well organized. The biggest health care service providers in Turkey are the Ministry of Health (MoH) and the university hospitals, respectively²³. In addition, the Ministry of Defense has its own health care infrastructure, some philanthropic institutions such as the Red Crescent have their own health care centers, and the number of private hospitals, polyclinics, and laboratories has increased especially in the urban areas since 1980s onward.

The financing of health care in Turkey is similarly complicated by a number of agencies involved in the system and the complexity of transactions between them. There are three main sources of health care financing in Turkey:

- The general government budget funded by taxes (28%): This is the source of funding mainly for the health services provided to active civil servants and their dependants, and the Green Card holders.
- Social security premiums (35%): These provide funding to the health services of employees paying premiums to SSK, retired employees under the auspices of SSK and their dependants; self-employed people and retirees under the auspices of *Bağ-*

²³ SSK (the insurance scheme for private sector employees and blue-collar workers working in the public sector) used to be one of the biggest health care providers in Turkey. However, by a legislation published in 2004 hospitals and other health care service facilities of SSK and other public institutions were transferred to the Ministry of Health.

*Kur*²⁴ and their dependants and retired civil servants under the auspices of ES²⁵, their dependants as well as the dependants of active civil servants.

- Out-of-pocket payments (28%): These constitute the payments in the form of direct payments to private doctors and institutions.

The remaining 9% constitutes the shares of private insurance and corporations (the figures are based on a National Health Accounts study of OECD in 2000 in Kartal, Özbay, Erişti, 2004)²⁶.

In other words, the health care financing system in Turkey is mainly based on the employment status of the beneficiaries, and there are separate public funds run for the private sector employees (SSK), for the self-employed (*Bağ-Kur*), and for the retired government employees and their dependants (*Emekli Sandığı*). Each of these public funds provides health care insurance by collecting premiums from their beneficiaries. As such, this is an employment-based health insurance net, where coverage is conditioned to the regular payment of premiums. Those beneficiaries who fail to pay their premiums on a regular basis can easily fall outside of this safety net. That is to say, involvement within this employment-based health insurance net is far from being a guaranteed access to adequate health care. But the most significant limitation of this system is that none of these schemes cover those people who work outside the formal sector. According to the Ministry of Labor and Social Security statistics, as of 2004 more than 50% of the workforce in Turkey is not covered with any of the formal, employment-based public insurance schemes (CSGB 2004).

²⁴ The Social Insurance Agency of Merchants, Artisans and the Self-employed

²⁵ The Government Employees' Retirement Fund

²⁶ The most recent national health accounts study was conducted in 2004.

Indeed, the problems of health care sector (in terms of coverage, access, quality) have been on the agenda of various governments, especially since 1960s. Starting in 1950s, “the state”, which previously did not assume the responsibility of curative services adopted the role of main provider, financier and administrator of health care. With the establishment of the 1961 Constitution, this role of “the state” was explicitly pronounced as “The state is entrusted with the duty of ensuring that all citizens have the opportunity to lead a physically and mentally healthy life and enjoy access to medical attention when necessary.”²⁷ (article 49), and the establishment of the 1961 Socialization Law (no. 224) which is still in force today, can be considered an attempt to abolish all kinds of discriminations and provide health service on an equal basis. However, such goals of the Socialization Law could not be achieved due to various reasons, the most important being the inegalitarian corporatist structuring of the welfare regime²⁸. By 1980 the problems of health care (financial constraints, lack of a primary care network, lack of integration and coordination, lack of health services in rural areas, unjust distribution of doctors, the private practice of state-employed doctors), which were identified in 1950s and were tried to be solved by the socialization of health services, were still persisting (Günel, 2007). Moreover, the transition from national developmentalism to neo-liberal capitalism witnessed since 1980s, also had some implications in terms of state’s role in

²⁷ “Devlet, herkesin beden ve ruh sağlığı içinde yaşayabilmesini ve tıbbî bakım görmesini sağlamakla ödevlidir” (<http://www.anayasa.gen.tr/1961ay.htm> - November 1, 2007)

²⁸ According to Esping-Andersen (1999) in the corporatist system all individual risks are pooled by status membership whereas universalist systems all individual risks are pooled under one umbrella. In this sense, Turkish welfare system can be defined as inegalitarian corporatist. The label ‘inegalitarian corporatist’ is intended to draw attention to both the corporatist element (with claims depending upon the membership of occupationally-defined corporate groups, as in the European conservative or corporatist welfare regimes) and the fundamentally inegalitarian character marked by the exclusion of quite a large portion of the population, those in the informal and agricultural sector (Buğra and Keyder 2006).

the health care sector, and this affected the ways “the state” deal with the health care system’s problems.

With the establishment of a new Constitution in 1982, ‘the state’s role in health care sector was re-defined as “providing the citizens with a healthy and balanced environment, and coordinating and controlling the related institutions in order for every citizen to sustain a healthy life”. Furthermore, establishment of a General Health Insurance (GHI) scheme was also mentioned as a prospect in this new Constitution. However, as seen in the Article 56 of the 1982 constitution below, this new role assigned to “the state” pertaining to the health care of its citizens is defined in a very ambiguous way. This ambiguity becomes much more obvious if the 1982 constitution is compared to the 1961 constitution, where the role of “the state” in the health sector is defined clearly as “the responsibility of the state towards its citizens”, where as in the 1982 Constitution the Turkish State refrains from making any direct promises as to its duty for ensuring its citizens a healthy life. Although there is mention of the right of every citizen to live in a healthy environment, the only duty explicitly attributed to the state in ensuring such environment is to regulate, coordinate and plan the human and material resources.

Article 56. Everyone has the right to live in a healthy, balanced environment.

(...)

To ensure that everyone leads their lives in conditions of physical and mental health and to secure cooperation in terms of human and material resources through the economy and increased productivity, the state shall regulate central planning and functioning of the health services.

The state shall fulfill this task by utilizing and supervising the health and social assistance institutions, in both the public and private sectors.

In order to establish widespread health services general health insurance may be introduced by law ²⁹.

Accordingly, various new reform proposals have been prepared by various governments to deal with the problems of the health care system since the middle of the 1980s. These new reform projects were in line with World Bank (WB) proposals based on the restructuring of social security systems, the separation of provision and finance, the promotion of the inclusion of non-public institutions and actors, the increasing use of market mechanisms, and decentralization. The World Bank promoted decentralization and privatization strategies and emphasized the need to improve equity and efficiency through guaranteeing universal access to a basic package of services. In early 1990s, DYP-SHP coalition government designed a national health program which covered decentralization in health services, the autonomization of public hospitals, and the transition to GHI. The abolition of regional inequalities and the establishment of the Green Card Scheme for the poor were the other two major targets (Günel, 2007). Among these attempts, which were interrupted mostly by political factors, only the Green Card project has developed into some kind of an actuality. The Green Card Scheme in this context, was introduced in 1992³⁰ for those ‘poor citizens’ who fall outside the health care coverage provided under public insurance mechanisms. At the time of its

²⁹ Madde 56 – herkes sağlıklı ve dengeli bir çevrede yaşama hakkına sahiptir.(...) devlet, herkesin hayatını, beden ve ruh sağlığı içinde sürdürmesini sağlamak; insan ve madde gücünde tasarruf ve verimi artırarak, işbirliğini gerçekleştirmek amacıyla sağlık kuruluşlarını tek elden planlayıp hizmet vermesini düzenler. Devlet, bu görevini kamu ve özel kesimdeki sağlık ve sosyal kurumlarından yararlanarak, onları denetleyerek yerine getirir. Sağlık hizmetlerinin yaygın bir şekilde yerine getirilmesi için kanunla genel sağlık sigortası kurulabilir (<http://www.anayasa.gov.tr>).

³⁰ The Law numbered 3186, which was published in the Official Gazette on July 3, 1992, legislates the Green Card Scheme and sets out its purpose, coverage, and criteria of eligibility. This law was followed by an August 13, 1992 decree that established the procedures regarding the scheme’s applications. Over the course of time, various amendments have been made both in the law and in relation with the decree.

establishment, the Green Card scheme was considered an initial step on the way to the GHI, and it is explicitly stated in the first article of the so-called Green Card law that this law would be in force until the establishment of a GHI scheme³¹.

As I stated in the introductory chapter of this thesis, establishment of the Green Card Scheme has a lot to do with the transition from a national developmentalist regime to a neo-liberal one by 1980s; which also entailed a change in the discursive formations of poverty in Turkey, and a re-definition of the role of “the state” in dealing with “the poor”. The Green Card implies a significant break with the earlier policies, which aimed at providing citizens with health care services on the basis of their employment statuses, and it produced a new category of “citizens in need” by introducing criteria to define poverty and providing certain services for “the poor”. In this sense, the way Süleyman Demirel, who was the prime minister of the government introducing the Green Card Scheme, explains the basic principles behind the Green Card is worthy of consideration:

The state is necessary for the citizen. The state is not a firm. The state has some social obligations. The state is a social institution. The state is

³¹ Indeed in recent years, the current AKP government introduced a comprehensive proposal that aims to reform the health care system in Turkey. Preparations under this reform agenda are already at work. One of the main pillars of the proposed reform is the establishment of a premium-based General Health Insurance (GHI) scheme, to replace the current fragmentary structure of separate public insurance schemes. The Law regulating this new General Health Insurance Scheme was passed by the parliament in 2006, and it was to be put into practice by 2007, if the Constitutional Court had not repelled the law. According to the GHI law, all citizens in Turkey will contribute to the scheme according to their financial capacities, and they will use services to the extent of their needs.. According to the General Health Insurance law all citizens in Turkey will contribute to the scheme according to their financial capacities, and they will use services to the extent of their needs. In accordance with this general principle, those citizens who would be ‘unable to contribute’ - because of their lack of means - will continue to be covered by the Green Card scheme, until another new legislation titled “Law on Social Security Provision without Premium Payments” (*Primsiz Ödemeler Yasası*) will be passed by the parliament. So to sum up, if the current reform proposals are implemented as planned, the existing three separate public health insurance schemes will be united under one “General Health Insurance” scheme and the Green Card scheme will be replaced by the “Without Premium Payments Law” framework in the following years. I will not get into details of the new law to replace the Green Card scheme, but it is important to note that the envisioned workings of the new “Without Premium Payments” scheme reveals a continuity in the way the Turkish state deals with the provision of health care services to its ‘poor citizens’.

a necessity when the citizen is in need, and nobody gives a hand. Besides, the definition of republic is “the caretaker of those who have no one to take care of them”. That is where the origin of the Green Card lies. We thought and said: "Let's find a solution." This was the basis for our declaration and election slogans, it was one of the most important problems. So we said that the state would look after those without any money, and this will be done with the funds of the state. How will we know who has money and who has not? We will give each one a card verifying that he/she is in need; and this is the Green Card. It started out from this point, before the 1991 elections.” (Atalay, 2002, p.63)³²

The words of Demirel on the one hand entail references to the “social state” and citizenship rights, while talking about the responsibilities (*vecibe*) of the state to its citizens; but on the other hand, he also speaks of the “*muhtaç*” (the deprived in need) and “giving a hand to the deprived”, i.e. employ a charity/compassion discourse. The best manifestation of this hybridity is the “*muhtaç vatandaş*” (citizen in need) phrase, which merges together two representations of the Turkish state. The “citizen” part brings into mind a “modern” bureaucratic body that maintains formal relations with its citizens, whereas the “in need” qualification suddenly renders this modern body a charitable, caring, paternal entity, which establishes “intimate” relations with “its people”. By combining the distant, formal ways of modern state practice, with the compassion rhetoric of a paternal state (*baba devlet*) ideology, these hybrid discursive forms allow for an intimacy that helps establish the state’s authority and legitimacy and open space for the operation of governmental technologies like the Green Card, and they also help

³² “Devlet vatandaşa her yerde lazımdır. Devlet bir şirket değildir. Devletin sosyal vecibeleri vardır. Devlet sosyal bir kurumdur. Devlet vatandaşın muhtaç bulunduğu, hiç kimse tarafından el uzatılmadığı zamanda lazımdır. Zaten cumhuriyetin tarifi de kimsesizlerin kimsesidir. Yeşil Kart’ın kökünde yatan budur. O zaman şöyle şeyler düşündük, dedik ki: Buna bir çare bulalım. Bizim seçim beyannamemizin ve seçim sloganımızın şeyidir, köküdür. En önemli meselelerden biridir. Yani biz dedik ki arkadaş parası olmayana devlet bakacaktır. Devlet bir takım fonlar ayıracak, bu fonlardan. Kim, nerden bilelim parası olmayanı. İşte bu adama, bu zat tedaviye muhtaçtır diye kart verilecek, bu da Yeşil Kart. Burdan çıktı ve 91 seçimleri öncesinde çıktı.”

legitimize the hierarchies among the modes of citizenship created by the health care system in Turkey (among beneficiaries of *Emekli Sandığı*, SSK, *Bağ-Kur*, and the Green Card).

In the influential volume *Compassion: The Culture and Politics of an Emotion*, Lauren Berlant (2004) asks a crucial question for analyzing whether an action propelled by compassion could become a cure to structural inequality: “What if it turns out that compassion and coldness are not opposite at all but are two sides of a bargain that the subjects of modernity have struck with structural inequality?”(p.10). Compassion involves empathetic identification with the sufferer as one component, but since one is always aware of his own separateness from the sufferer, such an identification with the sufferer can never be achieved (Woodward 2004). According to Berlant, for the pain of the sufferer (e.g. a slave) cannot be fully understood or assumed by “compassionate persons” (e.g. a white middle-class men), the politics of compassion cannot address the structural reasons of social inequality. Because for Berlant, “the narrative affords the pleasure of consuming the feeling of vicarious suffering – and its putative moral precipitate, the feeling of self-satisfaction that we wish to do the right thing and hence are virtuous. But the experience of being moved by these sentimental scenes of suffering, whose ostensible purpose is to awaken us to redress injustice, works instead to return us to a private world far removed from the public sphere” (Woodward 2004, p.71) Therefore, the result of such emphatic identification with the sufferer is not the impulse to action but rather a *passive* and “cruelly ineffective posture, and since some pain is more compelling than some other pain, [the compassionate person] must make judgments about which cases deserve attention (Berlant 2004, p.10-11).

The shift from a developmentalist discourse whose promise is full employment to a compassionate one that produces a new category of “citizens in need” speaks directly to the complaint voiced by residents of Adıyaman as discussed in Chapter 1. While Adıyaman is abandoned by the state in the sense of an overall project, those citizens who have no one are “selectively” re-owned by policies of poverty as long as they can prove that they are actually “in need”, in line with the words of Süleyman Demirel: “*devlet kimsesizlerin kimsesidir*”. In other words, the governmental technologies employed by the state via intervening in a lawfully invented sphere of poverty are radically different from those that aim at “regional development,” despite the fact that they are presented continuous in terms of a fight against terrorism and deviance. And due to this difference and the selective recognition inherent in the mechanisms like the Green Card Scheme, such mechanisms fall short of meeting the expectations of Adıyaman’s dwellers from “the state”, and to become a cure to their injuries. I will further elaborate upon this point in the following sections of this chapter.

Everyday Interactions around the Green Card in Adıyaman: *Illegibility, Uncertainty, Mutual Suspicion and the “Magical Presence of the State”*

The demise of tobacco production, migration due to the Atatürk dam and lack of investment in infrastructure and industry discussed in the previous chapter, have important consequences for the social security and the health status of the inhabitants of Adıyaman. Based on my interviews it appears that most of the people who work in textiles or other industries and at small shops in the city work informally, thus they are not provided with social security (SSK) by their employers. In the agricultural sector, the

situation is even worse. For the landless agricultural workers, their prospects of being provided SSK social security is completely out of question. As I explained in my first chapter, the landowners who produce, and then sell (or who used to produce and sell) it to TEKEL were registered to the *Bağ-Kur* scheme. However, due to the irregularities of their income, the high rates of *Bağ-Kur* premiums, and especially due to the income loss brought about by the limitations to the tobacco production, these people experience problems in paying their *Bağ-Kur* premiums, hence they are faced with very high amounts of debt to *Bağ-Kur*, and for this reason they can not get access to the free health services provided by the *Bağ-Kur* scheme. Although reliable statistics on the health care coverage in Adıyaman are not available, according to the statistics we gathered from SSK, ES and *Bağ-Kur* office, during my first visit in 2004 to the city with Nazan Üstündağ for a Social Policy Forum project, only around 37% of the city's inhabitants have health care coverage under one of these social security schemes. In other words, around 63% of the city population does not get access to free health care services provided by any of the employment-based social security schemes, and considering the economic conditions Adıyaman, for many it is not possible to pay their health care expenses out of their own pocket. Hence for these people Green Card appears to be the only available mechanism for getting health care services, if they can prove their poverty. The statistics show that the number of Green card holders in Adıyaman was 217.000 as of November 2007, which is about 36% of the city population (600.000). This portion also signifies the importance of the Green Card for the health status of Adıyaman's inhabitants³³.

³³ Green Card Information System (*Yeşil Kart Bilgi Sistemi*) <http://sbu.saglik.gov.tr/yesil/> (November 15, 2007)

As I pointed out in the previous chapter, the locality of Adiyaman is haunted by a sense of *sahipsizlik* intertwined with a sense of loss and a desire to be recognized by “the state”. Indeed, the Green Card Scheme offers a certain degree of recognition to some of Adiyaman’s inhabitants as “poor” citizens. However, both the process of acquiring this recognition (i.e. verification of poverty), and using the services provided by this status of a Green Card beneficiary (i.e. provision of health care services) involve lots of complexities and uncertainties, due to the suspicion and illegibility inherent in the Scheme (illegibility of the applicants/beneficiaries on the part of the state officials, and illegibility of the rules both on the part of the Green Card applicants/holders and for the officials. In such contexts, in the following sections I will focus on the everyday interactions between the Green Card applicants/beneficiaries and the local bureaucrats, with a view towards understanding how the relationship between ‘the state’ and its ‘poor citizens’ is negotiated on the ground in Adiyaman; and how “the state” is substantiated at the local level.

Verification of Poverty

The most obvious problem of the Green Card Scheme is that the process of verifying one’s income is not as easy as it is formulated in the law and decrees regulating the Green Card. According to the legislations, the sources of income to be considered in calculating the monthly income of household are as follows: in-cash payments for services; in-cash agricultural revenues; rent from estates or interests; in-cash transfers or grants from public, private institutions or other people; and in-kind income in any form above. Regarding the income sources mentioned above, the total monthly income of the household – including the spouses, children, parents, as well as the relatives up to third lineage living in the same household – is calculated and divided into the number of

people in the household, and if the monthly income per household member is lower than 1/3 of the net minimum wage, s/he has right upon a Green Card.

However, verification of revenues from all these mentioned sources of income may easily turn out to be a mission impossible for the bureaucrats who are in charge. For instance, it is not very feasible to verify the in-cash payment somebody gets for the services she provides, unless she works in the formal job market. Anyways, if she were in the formal job market, she would have been covered by one of the health insurance schemes and would not have needed a Green Card. Or take for example in-cash transfers from public institutions, which at first sight seem easily verifiable. But since most of these grants for the poor are not provided on a regular basis, and also since several different institutions providing grants only keep track of their own records and do not share these records with each other, it may not be possible even to know whether the Green Card applicant is getting any grant from a public institution or not.

Therefore, in order to identify a person's level of poverty, the only thing the Green Card office could do is to ask the Green Card applicant to document all relevant information that is already recorded by various state institutions and could be officially verified. Accordingly, during the application process, the applicants are expected to declare the following information required by the forms: personal information of the applicant; personal information of the applicant's dependants and the other persons in the household (even in the case that they do not apply for the Green Card); social security status of each person in the household; and income of each person in the household. The forms should be authorized by muhktars of the district (to confirm the residence address and the household information); the population bureau (to confirm the household information); the tax office or *deftedarlık* (to check information related to

taxation, hence income); the land office (to check information related to estate ownership); and the district municipality (to check income information). In addition, the social security statuses of household members are verified through information from SSK, *Bağ-Kur* and ES. In the decree regulating the Green Card scheme, it is mentioned that *in cases of necessity* the police or the gendarmerie can investigate the living conditions of the applicants, and if they find out any unregistered information pertaining to the economic or financial conditions of the applicant, they are to declare it on the form.

But the bureaucrats, who are in charge of conducting the Green Card process in Adiyaman, complain that they can never make sure whether they have obtained all necessary information regarding the income of the Green Card applicant. Partly they distrust the information documented by these fellow state offices, and partly they worry about things not covered by these records, like for example an undocumented property. Moreover, the officials face with direct or indirect pressures to delimit the number of Green Card beneficiaries. As the officials in the department of Health-care in Adiyaman mentioned, sometimes the upper level bureaucrats (like the governor of the province, or MoH officials) can decide that the percentage of Green Card holders in the city's population is too high, and they demand that Green Card officials should terminate certain number of Green Cards. However, the officials at the Green Card office do not have any idea as to what sort of criteria should be implemented in deciding whose Green Card should be terminated. In such situations, officials apply their "own" criteria about who is a "fine" and "deserving" citizen to be granted a Green Card. For instance, during my first visit to Adiyaman in 2004, one of the co-administrators of the Health-care Administration in Adiyaman explained to us why they terminated the Green Cards of

Alevites. He told us that at first Alevites were being granted Green Cards; but then “they started to convert to Christianity”. Apparently when the upper level bureaucracy demanded the Green Card Office in Adıyaman to limit the number of Green Cards in the city, the local Green Card officials chose to terminate the Green Cards of certain Alevite individuals belonging with communities in several villages, which were subject to these rumors of conversion. Of course, according to the Green Card legislations, all citizens – disregarding their religious beliefs or ethnicity – who comply with the poverty criteria can be granted a Green Card. However, in cases like the one above, when the local officials are required by the upper level bureaucracy to terminate a certain number of Green Cards, these local officials were not provided with any new criteria to be used to determine whom to terminate. In such absence of any legible guiding criteria, the local officials made termination decisions simply in accordance with their own understandings of who is a “fine” citizen deserving of a Green Card. What the co-administrator told us to justify the termination of Alevites’ Green Cards, is very instructive in terms of understanding how the rules and demands of “the state” can be very illegible even to its own officials: “We give these people Green Cards. But then when they go and convert to Christianity, it is us who get the trouble. They ask us: why did you give Green Cards to these people?”³⁴

Some other times, the delimitation of Green Cards is actualized in more indirect ways. For instance, in my last visit to Adıyaman in April 2007, the administrator of the Green Card office told me that although they demanded 100.000 Green Card documents (for renewing the existing Green Cards and for new applications), the Ministry sent them

³⁴ Bunlara Yeşil Kart veriyoruz, sonra gidip Hristiyan oluyorlar. Ondan sonra bizim başımız belaya giriyor. Neden bunlara Yeşil Kart verdin diye.

only 20.000 Green Cards. He mentioned that for this reason they could not provide every beneficiary with a Green Card, and since there are no applicable legislations for such situations, they decided to choose among beneficiaries the ones, who “really” and urgently need a Green Card³⁵.

Workings under such circumstances and constrains, the Green Card bureaucrats are very concerned about whether the ones who receive the Green Cards are the ones who actually “deserve” it. In my exchanges with the bureaucrats, there was always this suspicion in relation to the applicants. They always suspect that the undeserved might have somehow managed to obtain a Green Card, and to prevent such fraud and injustice, they take the investigation process very seriously. They conduct very detailed investigations not only about people who apply for a Green Card for the first time, but also about the existing Green Card holders who have to approach them each year for a renewal. So, the decree requires this on-site investigation *in cases of necessity*, but for the Green Card bureaucrats in Adiyaman each application necessitates a police or gendarmerie investigation, since they operate from the assumption that each applicant can potentially be a fraud.

During my interviews, I asked the administrator of the local Green Card office about the nature of these police/ gendarmerie investigations. My informant said he did not know how the police conduct these investigations, but that the main consideration there is whether the applicant has any unregistered income. I did not have the opportunity to talk to the police officers who conduct these inquiries; but I have spoken

³⁵ The change in the number and percentage of the Green Card holders in Adiyaman between June 2006 to November is very significant in verifying the actuality of the claims of the local officials about the Green Card delimitation tendencies of the central government. While the number of Green Card holders was around 300.000 (50% of the city population) in June 2006; as of November 2007 this number is 217.000 (36% of population) (<http://sbu.saglik.gov.tr/yesil/>).

to some Green Card holders who had been subject to such investigation, and they told me that during the investigations the police officers usually just ask the neighbors and the *mukhtar* of the neighborhood about the conditions of the household, whether the family owns a vehicle, or an extra property, or if there are members of the family who have jobs. Sometimes police officers would actually come inside the house and look at the physical conditions of the house, the furniture and electronic devices, etc.

Both the bureaucrats and the Green Card holders I interviewed had some idea about how the police conduct these investigations, where they look and what they look for information about the family. But no one was able to clearly tell me the criteria indicating that someone is ineligible, or the rules under which the police or the Green Card committee evaluates the reliability of the information obtained from these informal sources.

For instance, during my interviews I encountered such cases where the applicant does not own any property according to the official records, but the police reports that some neighbor or the *mukhtar* of the neighborhood claims that the person receives a considerable amount of revenue from the land registered under her father's name, or a family member works at a high-salary job.

Ç: For the Green Card, they say it is because of the police for why it takes so much to get; police officers come, investigate people's houses and situations.

I1: Police comes, they just observe from outside.

Ç: So they do not come and speak with you.

I1: behind...

I2: They ask questions to the neighbors. If a neighbor tells him that the person has something, then you lost your chance.

Ç: Then neighbors do harm as well.

I2: It is mundane jealousy.

I3: My brother had worked at that gas station, remember? He had washed cars. When police officers came, neighbors told them his son works at Turk Petrol. (laughing)

I3: That is the story of how his Green Card is cancelled. For 12 months, he was waiting for it. People said “his son works at Turk Petrol”.

(...)

Ç: Once the Green Card is cancelled, I heard you cannot apply for it within 12 months.

I1: Yes, you cannot apply for a year. If this guy works at Turk Petrol, he should have got a salary from there, he should have gone to work place. Police should investigate that place for whether or not the person goes to the work.

Ç: Did not they investigate?

I1: No, they just ask neighbors.

I3: I swear they just came here, heard and reported.³⁶

Which source of information should be taken into account by the Green Card entitling committee in the case above? Is it the official records indicating that the applicant has no registered income; or the declaration of applicant stating that he earns 130 YTL/month (which is compatible with the Green Card criteria); or the claims of the envious neighbors that the applicant is a high-salaried employee? The truth is that nobody can tell in advance how the decision will be made, it's not predictable.

³⁶ Ç: peki bu yeşil kartta diyorlar, çok uzun sürmesinin sebebi, polis geliyormuş, evine bakıyormuş, durumuna bakıyormuş...

A1: Polis geliyi, polis geliyi. Geriden seyreder gibi, geriden bakıyo.

Ç: Ha gelip sizinle konuşmuyo.

A1: geriden...

A2: komşulara soruyo. Komşular diyor ki bunun şeyi var diyo. Aha iptal oldu gitti.

Ç: komşular da yapıyor yani

A2: Normal çekememezlik durumu.

A3: abim şu petrolde 130 milyona çalışıyordu ya, araba maraba yıkıyordu. Gelmişler. Demişler ki, oğlu Türk Petrolde çalışıyor.

(gülüşmeler)

A3: O şekil iptal oldu gitti. 12 aydır onun için bekliyor. Yani demişler oğlu Türk Petrolde çalışıyor.

(...)

Ç: Bir kez yeşil Kart iptal oldu mu 1 sene başvurulmuyomuş..

A1: he, bi sene başvuramıyosun. Şimdi madem Türk Petrolde çalışıyor bu adam, ordan para alması gerekiyor, iş yerine gitmesi gerekiyor. Oraya gidecek, bu şahıs var mı yok mu diye.

Ç: Yapmıyor mu?

A1: Yapmıyorlar. Konu komşudan duyduğıyla tamam.

A3: Valla gelmiş buraya, duymuş, yazmış.

According to the rules, it is possible for this applicant to be entitled to a Green Card, and it is equally possible that she will be denied the Green Card. That is to say, the Green Card process and the rules around it seem to be ‘illegible’ both for the bureaucrats administering the system as well as the Green Card applicants/ holders.

In other words, in Turkey it is not possible to access all information regarding citizens’ income through the official records. This means that, in terms of their income levels, citizens are not legible enough for the state functionaries. “The state” in return seems to have adopted a two-tiered strategy to deal with this problem. On the one hand, in order to make citizens more legible, they invest in solutions like computerized databases that will supposedly allow every bit of information regarding the income of citizens to be accessible to all related state institutions. But on the other hand, the very illegibility of the rules also functions as a strategy for the state to handle the illegibility of the citizens. For instance, as the task of setting the terms of application for the Green Card scheme rests with the local bureaucracies, they are in a relatively flexible position to introduce new criteria or to change the workings of the procedure: I have found out that the local governing committee of Adıyaman decided that the whole authorization process would be conducted by the Green Card offices themselves in order to prevent tricks like the falsification of documents in the authorization process. Similarly the local governing committees have the authority to determine the terms of *investigation* about the economic and financial conditions of Green Card applicants. The extent, duration and conductors of investigations may differ from one district to another, and from one applicant to another regarding the perceived ‘suspiciousness’ of the applicant. I argue that it is this very illegibility of the rules both for the bureaucrats and the Green Card applicants/ holders, this very blurry line between the legal and illegal, which enables the

state agents to obtain through non-official channels income information about applicants beyond what is available in the state registers, and to process this information under more or less flexible rules.

What legitimizes this ‘flexible’ practice, what makes it look defensible and necessary is of course the organized suspicion against the Green Card applicants/ holders: Are they ‘poor citizens’ indeed, or are they frauds who want to get something they do not “deserve”, and who try to exploit the limited public resources? As Talal Asad (2004) mentions “suspicion occupies the space between the law and its application” and modern states use suspicion to incorporate margins of uncertainty. In that sense, all the rumors and news in the Turkish media about Green Card holders running in Mercedes cars, owning 8-storey apartment blocks, being relatives of politicians, etc. contribute to the production of this ‘organized suspicion’ towards the Green Card holders. And this ‘organized suspicion’ leads the public opinion to demand more control over the system, and it legitimizes the Green Card bureaucrats’ desire to have more control over the question of who will be eligible for a Green Card in order to administer the state’s limited resources in a “just” way. When put in these terms, ‘illegible rules’ become a necessity for dealing with ‘illegible citizens’; and the very logic and everyday workings of the Green Card scheme is underlined by a prevalence of ‘mutual suspicion’.

On the side of the Green Card applicants/ holders, this ‘illegibility’ in the workings and rules of the Green Card scheme, also leads to a sense of uncertainty and feeds an overall suspicion towards the system. This experience of unpredictability and uncertainty brings about doubts about the Green Card’s promises. Until January 2005, medication for outpatient treatments was not covered under the Green Card scheme. I

was told during my interviews that when the system began to cover outpatient medication, medication expenses have increased enormously, beyond the volume of the need assessed. One factor obviously was the fact that for the initial period of January until May 2005, outpatient medication coverage for Green Card holders was 100% free of charge. But another reason behind the seemingly unexplainable volume of outpatient medication requests from Green Card holders was a sense of distrust on the part of the Green Card beneficiaries, a fear that their Green Cards can be cancelled in the near future or this whole free medication benefit can be reversed by the government. These people wanted to 'store' medication for later times of possible need. This is what I mean by 'mutual suspicion'. The state distrusts the citizens, and citizens distrust the state.

This terrain of mutual suspicion, which is mainly brought about by the illegibility and flexibility of the Green Card rules and procedures, has some implications in terms of the ways in which Adiyaman's dwellers complain about the peripherality of the city, and the loss of recognition by "the state". Although "the state" offers a sort of recognition to the people with insufficient means in Adiyaman by granting them a Green Card, hence providing them with certain health care benefits; the illegibility of the rules, and the suspicion inherent in the Green Card Scheme make some of Adiyaman's inhabitants experience this process of recognition as a form of exclusion. Accordingly, on the one hand, this experience of exclusion deepens the feelings of peripherality and being left alone by "the state", which are already pervasive among the dwellers of Adiyaman. And on the other hand, the illegibility, uncertainty and suspicion inherent in the Green Card also helps "the state" appear as a "magical entity" haunting the everyday in Adiyaman.

The Renewal Process

A Green Card is valid through the year following its date of issue. At the end of the year, there is a procedure for the renewal of the Green Card's validity. That is to say, if a person is given a Green Card as of January 1, 2006, it is valid until January 1, 2007.

After that date the Green Card holder cannot access free health care services unless she renews her Green Card. During each renewal process, an investigation procedure quite similar to the one made during the first application is conducted. The problem is that it takes around two months for the renewal procedure to be completed. If a Green Card holder has some serious health problems and needs to go to hospital during this renewal stage, s/he is unable to benefit from any free health care services, as she does not have a valid Green Card. There are three options available in such a case: the Green Card holder either postpones her visit to the hospital until she renews her Green Card; or she pays for the health care expenses out of her own pocket; or she signs a *senet*³⁷ with the hospital authorities, indicating that she will pay the expenses to the hospital at a later time³⁸. Most of the Green Card holders in Adıyaman, who face a serious medical emergency during this renewal stage, choose to follow the last option, as they are told by the hospital authorities that those *senets* they signed will not be put into operation if they manage to obtain a valid Green Card in a three-month period.

The problems faced in public hospitals by patients with insufficient financial capacities have become a subject of public debate in Turkey in the last years. Stories

³⁷ Senet is an official document signed between two parties, indicating that the indebted one would pay her debt in a certain period of time.

³⁸ These options are also available for the patients who do not have Green Cards, and are not covered under any of the social security schemes. In such cases, if the health care personnel at the hospitals thinks that the patient is poor enough to be granted a Green Card, they refer her to the Green Card office after she signs the *senet*, and no payment is expected for the next three months under the assumption that the patient will eventually be issued a Green Card.

abounded in news-media of poor patients turned down or ‘held captive’ by hospitals because they were unable to pay for their health care expenses. As a response to these news articles, Prime Minister Tayyip Erdoğan and the Ministry of Health (MoH) officials have publicly declared that no one will be turned down or held captive by hospital authorities because they don’t have money. However, in actuality public hospitals continued to pressure patients with insufficient means through various other ways such as making them sign *senet*. During my interviews with the authorities of the Adıyaman Public Hospital, they told me that they had to force patients to sign such *senet*, as the financial resources of public hospitals were very limited, and they had to make sure that the expenses of those patients not covered by any insurance scheme or without a valid Green Card would be paid back to the hospital. They told me that while the government says that no one should be ‘held captive’ in hospitals, the same government also demands public hospitals charge for any expenses registered:

The prime minister prohibits keeping patients hostage; on the other hand he sent notices and orders to collect money, but does not call upon legal action. When money cannot be collected, then they ask why the revolving fund has decreased. For the state, there are of course limits for funding. (Co-administrator of the state hospital, Mr. Şükrü)³⁹

However it is not an easy process for the public hospitals to charge for those expenses made for patients who were provided health care services in return for signing a *senet*. According to the accounts of hospital authorities, the legal action to be pursued when a *senet* is not paid is as follows: In cases where the *senets* are not paid within the

³⁹ Hasta rehinini başbakan yasaklıyor; ama bir yandan da genelge gönderiyor senet tahsil et diye; ama icraya da verdirmiyor. Senet tahsil edilemeyince bu sefer diyorlar, neden döner sermaye düştü diyorlar... Devlet para aktar aktar nereye kadar tabi (Devlet Hastanesi Müdür Yardımcısı, Şükrü Bey).

three months time frame, a notification letter is sent to the indebted and she is invited to make the payment. The amount indebted is made subject to a certain interest rate. If the indebted fails to honor the outstanding debt by the end of the year during which the *senet* was issued, the matter is referred to Treasury Department lawyers for legal action in courts.

Although the Ministry of Health demands hospitals to charge those unpaid expenses, at the same time, since the beginning of 2005 it has been withholding the execution of the *senets* (for 2 years as of the date I conducted the interviews). The hospital authorities had no idea how long this withholding would last, or if the MoH would let the hospitals pursue legal action against unpaid *senets*. As a result, in order to charge the unpaid expenses, the hospital authorities mentioned that they were finding some informal ways to collect the amounts owed by the indebted. They told me that since Adiyaman was a small town they personally knew many of the *senet* holders. They contact them personally and ask them to pay their debts. Or they reduce the amounts owed by taking into consideration the person's financial situation and "ability to pay" and in this way hope to collect at least a portion of the expense made. However, the hospital authorities complain that despite all their efforts, they could collect only 30-35% of all the *senets* of the hospital, and there were more than 12.000 unpaid *senets* left just from the year 2005. Therefore, this brings about a decline in the income generated by the hospital (revolving fund), hence a decline in the salaries of the hospital personnel and an impediment for some infrastructural investments.

If we turn back to the situation of Green Card holders, Green Card holders who require healthcare services during the renewal period or persons who fulfill the eligibility criteria for Green Card but have not yet been able to get the requisite

documents, are made to sign *senets* in the hospital in return for the healthcare services they received. Another complication is that in order for these people to have any routine medical examinations in the absence of a medical urgency, they are required to register as a patient ahead of the examination and pay a certain fee for the examination. These fees cannot be reimbursed later even if the person is subsequently issued a Green Card. The above described *senets* route is pursued only in cases of medical urgency or where the patient is referred for inpatient treatment following the first examination. In such cases, *senets* will only be made if the person is assessed not to be able to cover the expenses involved. After a *senet* is signed, the hospital administration initiates a three month waiting period during which the indebted person is expected to get a Green Card or have her Green Card validated. If that happens, the *senet* is declared null and the hospital receives a transaction from the state budget like it is the case for healthcare expenses of all Green Card holders. However if the patient fails to get a Green Card or have her Green Card re-validated within those three months, or if she fails to present this valid Green Card to the hospital within this time frame, the hospital initiates the legal procedures I have described above. Hospital authorities told me that many such indebted *senet* holders neglect to present their newly issued or re-validated Green Cards to the hospital, out of poor education or laziness, and this failure creates problems both for themselves and the hospital.

In other words, even those poor citizens who manage to prove their poverty and obtain a Green Card, are not exempted from being considered ‘suspicious’ citizens by ‘the state’. During each Green Card renewal period, which lasts around two months, their means are tested again and again, their rights to free health care are suspended, hence they also become illegible from the perspective of the public health providers, in

so far as they could not demonstrate a valid Green Card. As a result, in dealing with those ‘illegible’ citizens – those who are not covered by any social security scheme and cannot afford to pay for their health care expenses – public hospitals need to make them ‘legible’. The way they do this is by signing *senets* with them. Trouillot (2001) argues that “state processes and practices are recognizable through their effects” and one of the state effects Trouillot identifies is the ‘legibility effect’, which is “the production of both a language and knowledge for governance and of theoretical and empirical tools that classify and regulate collectivities” (p.126). States make populations legible (to the state itself) through documentary and statistics-gathering practices, which “are all intended to consolidate state control over subjects, populations, territories, and lives” (Das and Poole 2004, p.10). Following this line of thought, it is possible to argue that, health care is not provided to all citizens for free as a basic citizenship right; it is instead provided under the auspices of certain social security schemes. Under such conditions public hospitals are forced to use a device like *senets* to make the citizens on the receiving end of healthcare services somewhat “legible” in order to protect their financial benefits.

As pointed out earlier, since the beginning of 2005 the Ministry of Health has been withholding the execution of the *senets* signed by healthcare beneficiaries who are unable to pay for the healthcare services they received. Although this may seem contradictory in terms of the goal of maintaining the financial benefits of the public hospitals’, the very act of signing these *senets* and their putting into circulation play a crucial role in the way the state sustains a presence in the everyday life of the community. As Das (2004) argues the “state (is) neither a purely rational-bureaucratic organization nor simply a fetish, but (is) a form of regulation that oscillates between rational mode and magical mode of being (...) As a rational entity the state is present in

the structure of rules and regulations embodied in the law as well as in the institutions for its implementation (...) state also acquires a different presence (...) magical in the life of communities through (the) local practices” (p.225, 226). Although the *senets* themselves can be considered as a rational-bureaucratic mechanism, the authorities’ reluctance to pursue legal action to collect the debts made under these *senets* can hardly be explained by rational bureaucratic reasoning. Rather there is a sense to the issuing of these *senets* and their circulation as a repetitive performance of state procedure. Indeed these performative iterative state practices shape peoples’ ideas about the translocal nature of the state and their relationship to “it” (Sharma and Gupta 2006, p.13). That is to say, even if these *senets* are not pursued, the possibility of them being pursued as a potential threat allows for the state to be imagined as an all-encompassing entity. Das and Poole (2004) argue that “sovereignty (...) is experienced in the mode of potentiality – thus creating affects of panic and a sense of danger even if “nothing happens” (p.19). Therefore, through this potentiality inherent in the act of signing these *senets*, “the state” acquires a magical presence in the life of the local community of Adiyaman and reinforces its sovereignty. However, it should be noted that there is always room for other potentialities on the part of the dwellers of Adiyaman. Through various tactics, people can find other ways of to get their work done in the workings of the Green Card Scheme. I will elaborate upon this point in the next chapter.

To sum up, the illegibility of the Green Card rules and the resulting uncertainty in the way the Green Card eligibility is determined, effect not only the state-citizen dealings around the Green Card process itself, but extends beyond that, to serve to enhance state sovereignty over all aspects of life in Adiyaman. In one of my interviews,

I have been told a story about an old man who depends on the Green Card benefits for his treatments.

While my informant chats with this man from his village, he learns that he donated the skin of the lamb he sacrificed to the gendarmerie, who came down to the village to collect the skins at Kurban Bayram. My informant asks the old man why he did not donate the skin to the village mosque - which is the routine thing to do - instead of the gendarmerie. And the old man says “if I gave the skin to the mosque, the gendarmerie would not let me keep my Green Card when the time of renewal comes, and they would tell me to go ask for free health care from the mosque where I gave the skin.” My point is that, it is not important whether the gendarmerie would indeed impede the Green Card process in such a way, if the old man gave the skin to the mosque. That is to say, through the very illegibility of the rules regulating the Green Card, hence through the resulting uncertainty, the state seems to enhance its ‘magical presence’ in the other terrains of the lives of the people. The illegibility of the Green Card rules plays an important role in the way people constitute their relations at the everyday level with the police, the gendarmerie, the *mukhtar*, etc. It is this same illegibility, which leads Green Card applicants to go to the Green Card office every week during the renewal process (which does not take less than 2 months), and to keep asking about the result of their Green Card application and to tell the bureaucrats how much and how urgently they need the Green Card. As such, the Green Card operates as a governmental technology which produces disciplined subjects. The very procedures of applying for a Green Card and going through a renewal, requires Adiyaman’s ‘poor citizens’ to constantly perform and narrate their poverty and how deserving, fine citizens

they are. This is the role expected from them in order to benefit from a citizenship right like health care.

But is this the role dwellers of Adiyaman expect from “the state”? The Green Card Scheme basically recognizes certain individuals as “poor” citizens, and provides them with certain health care benefits on grounds of “poverty”. However, this process of recognition is based on selecting the individuals who could make themselves legible to “the state” by proving, through some “official” and “non-official” mechanisms that they are indeed “poor” and “fine” citizens. Therefore I argue that, by requiring people to make themselves legible to “the state” in terms of a certain poverty criteria, The Green Card Scheme brings a different kind of relationing with “the state” than the ones Adiyaman’s inhabitants used to and want to establish with “the state” – like relationing with the state through selling their tobacco to “the state” or attaining certain benefits offered by “the state” (in the form of infrastructural investments like roads, subsidies to agriculture, job opportunities in state-led factories).

In other words, this new kind of relationing imposed by the Green Card Scheme demands people to make themselves legible to “the state” through certain mechanisms which are illegible to them. In such context, it is a sense of mutual suspicion, which sets the terms of the relationships Green Card constructs between “the state” and the dwellers of Adiyaman. This context of mutual suspicion, on the one hand, makes the state appear as a magical entity haunting the everyday life in Adiyaman; but on the other hand, it deepens Adiyaman’s dwellers’ sense of peripherality and disownment of the city by the state, since the kind of “state” they desire to make a presence in the city is of a developmentalist character, one that would lead them to the “time of modernity”.

Green Card as a Citizenship Experience in Adıyaman

Analyzing the mundane interactions around the Green Card also enables us to recognize differentiations between various forms of citizenship, as well as to understand how “the state” is substantiated at everyday level. As I mentioned earlier, health care is a site where people frequently come into contact with “the state” in their everyday lives, in the process of which their understanding of “the state” and citizenship is constructed. The routes we are required to pursue as citizens to gain access to public goods like healthcare provide us answers to questions like whether the state that governs us is fundamentally corrupt, discriminatory or egalitarian. Similarly, for example, the categories used to define our relationship to healthcare services teach us as to what kind of a citizen we are, where we belong. Do we belong with the poor and indebted? Do we belong with the helpless crowds forever condemned to waiting in queues? Or do we belong with the ‘private hospital’ frequenters? In other words, everyday encounters and experiences with the health care system and interactions with local bureaucracies play a very important role in the constitution of people as citizens. (Üstündağ and Yoltar, 2007)

Health care system in Turkey, as I already underlined, creates lots of hierarchies among modes of citizenship. To appreciate this phenomenon one would have to trace the differences in accessibility and quality of healthcare afforded to beneficiaries of various social security schemes catering for different clientele (state officials and *Emekli Sandığı*; SSK; *Bağ-Kur*; Green Card beneficiaries; and the ones who are not covered by any of these schemes).

In the previous sections of this chapter, I have mentioned the difficulties encountered by the Green Card applicants/ beneficiaries during the verification of

poverty and Green card renewal processes. Neither state officials and ES members, nor SSK and *Bağ-Kur* beneficiaries are troubled by any of these problems. First of all, none of the beneficiaries of these employment-based social security schemes have to deal with any procedure to verify their income. Although, payment of the social security contributions may cause some difficulties especially for the *Bağ-Kur* members, and sometimes for SSK beneficiaries – when their employers impede the payment of their premiums or when they lose their jobs- hence they may not get access to free health care services for this reason; neither state officials, nor ES members experience any problems with the payment of contributions, and with the getting of free health care services.

Moreover, during the Green Card usage process (that is provision of health care services) Green Card beneficiaries also encounter several problems, which are not an issue for the beneficiaries of other schemes. The most apparent problem area regarding the usage of Green card is the limited services package that the Green Card scheme offers to the Green Card owners. During my first visit to Adıyaman in 2004, the major problem raised in the interviews about the Green Card Scheme was the problems related to out-patient medicine⁴⁰. Most of the people mentioned that they would go to the hospitals only in the cases of emergency or for the very serious health problems. In other “less serious” cases, they usually did not prefer to go to the hospitals or other health posts, and if they went, in most cases they could not buy the prescribed medicines, and they usually “waited to get better”. Alternatively, if they had acquaintances having health insurance from SSK, *Bağ-Kur* or ES, they tended to ask those people to get the

⁴⁰ Until 2002 only the expenses of in-patient health services had been covered under the Green Card scheme. Although by the 2002 amendment, the medical examination expenses of out-patient services were included in the coverage of the scheme, the out-patient medicine expenses were not covered under the scheme until January 2005.

required medicine by using their documents. In fact, before the inclusion of out-patient medicine into the coverage of the Green Scheme, it was possible to apply to the Solidarity Fund for a special medicine aid, and some my informants mentioned that they got use of this mechanism. However, the Fund was providing medicine aid mostly to those who have chronic illnesses, and in some cases even the needy ones could not get aid. Moreover, the procedure to get this aid was complex and it could take a very long time. During the interviews in Adiyaman, we met a middle-aged woman who has high-blood pressure and diabetes. Although she had a Green Card, she has not applied to get medicine aid from the Fund because she thought that she could not get the aid owing to its complicated procedure.

I1: I am a diabetic. I have my left side paralyzed, 2-3 years ago. I am taking medication regularly. I have a great problem with medication. There is no one to buy them. It is really a disgrace. They do not provide medication for the Green Card. I have neither SSK nor *Bağ-kur*. I am on medication all the times.

...

N: If you are a diabetic, then you should take your medication regularly. Did you apply to Social Security Fund for that medication?

I1: No, I did not. They say it is futile to apply.

N: Why is it futile? If you go to the committee, it is highly possible that they would accept.

I1: it is not easy to go to the committee. They accept or not... (Green Card beneficiary, woman)⁴¹

⁴¹ K3: ... Ben şeker hastasıyım. Bu sol tarafıma felçlik geçirdim. Bundan 2-3 yıl önce. Sürekli tedavi görüyorum yani ilaç. İlaç sorunum çok benim. Onu da alan yok. Rezillik yani velhasıl. Bu yeşil karta vermiyorlar ilaç. Bi sigorta, Bağkur falan da yok. Sürekli ilaç kullanıyorum yani.

...

N: Peki siz şeker hastasıysanız, sürekli ilaç alacaksınız. O ilaç için sosyal yardımlaşma fonuna başvurduğunuz mu?

K3: Vurmadım da. İşte diyorlar. Vursan da boş diyorlar.

N: Niye boş canım! Heyete girip heyetin sana o ilacı verme ihtimali bayağı bir fazla..

K3: Ama heyete girmek de öyle kolay değil ki! Kazandırıyorlar, kazandırmıyorlar...

Although the inclusion of out-patient medicine into the coverage of the Green Card Scheme in 2005 solved these problems, and the Green Card beneficiaries with whom I interviewed in my later two visits to Adıyaman in June 2006 and April 2007, were usually quite satisfied with this new practice, people who need prostheses keep experiencing similar problems, as the Green Card scheme does not cover prostheses.

Another problem regarding the limited service package offered by the Green Card is about differentiations in access to secondary and tertiary health care providers. According to the Green Card legislations, beneficiaries can obtain free health services only from the public health centers and primary care institutions, and from the public hospitals⁴². In other words, Green Card holders can not directly get health services for free from the university hospitals and private health care providers, while state officials and ES members have direct access to free health care services provided by university hospitals and private hospitals under special agreements; and SSK and *Bağ-Kur* members have to directly go to the university and private hospitals under agreement arrangements. In order for the Green Card beneficiaries to get free health care services from these institutions, they have to be referred by a public secondary health care provider, that is, a public hospital. However, even in cases of necessity – such as lack of required equipment or very serious cases which they are unable to attend - public hospitals are not usually willing to refer their patients with a Green Card to a university or a private hospital. As one of the officials at Adıyaman public hospital told me the

⁴² According to the 1992 decree regulating the Green Card Scheme, in order for the beneficiaries to obtain free health care services, they are supposed to attend the public health centers, public hospitals in their districts and in their provinces, respectively. If they break this chain of referral, except in the cases of emergency, their health expenses would not be covered by the Green Card scheme. However with the amendment published on March 17, 2004, the Green Card holders were granted the right to get services directly from public health centers or MoH hospitals, either with or without referral from a lower level service provider.

reason for this unwillingness is that the health care expenses of the Green Card beneficiary referred to a university or private hospital are charged to the public hospital which refers the patient, so the public hospital has to cover these expenses from its own budget, that its from its revolving fund, and in return it charges these expenses to the Ministry of Health (MoH). However, unlike ES, SSK and *Bağ-Kur*, which regularly pay for the expenses of the patients covered by their schemes to the hospital, MoH does not make its payments regularly and public hospitals have to wait for 6 months for the payments of the expenses covered by the Green Card. Moreover, MoH sometimes refuses to make certain amount of the payments of the Green Card expenses, and in such cases these expenses are debited from the revolving funds of the public hospitals. This causes some problems on the side of the public hospitals, as they use the money in the revolving fund to make some infrastructural investments necessary for the hospital, and in making extra payments to the hospital personnel according to their performances.

However, this reluctance of the public hospitals in referring Green Card holders to university hospitals has very serious consequences for the Green Card beneficiaries in Adiyaman. There are two public hospitals (one of which is a former SSK hospital) and a public hospital for women and children in the central district of Adiyaman. Yet, none of these hospitals have adequate equipment, specialists or units to diagnose or treat serious illnesses such as cancer or to conduct certain type of operations such as angiogram. In our interview with the head doctor of the Adiyaman Public Hospital in 2004, he told us about the insufficiencies of the hospital and said that as the hospital did not have an intensive care unit, they could not conduct operations, hence they had to refer the patients to the tertiary hospitals in the neighboring cities, Antep, Malatya and Maraş even for small operations. Although, during my later visits to the city in 2006 and 2007,

I observed a significant improvement in the conditions of the public hospitals in Adiyaman, they were still experiencing some insufficiencies in terms of health personnel, specialists and equipment, and had to refer patients with certain serious illnesses to the university hospitals in the neighboring cities. Therefore, under such conditions, difficulties the Green Card holders encountered in referral to the university hospitals may cause a threat to their health. During my interviews with Green Card beneficiaries in Adiyaman, I was told some stories of the reluctance of the doctors at public hospitals to refer them to the university hospitals in other cities, and how this reluctance prolonged and sometimes impeded the diagnosis and treatment processes.

K: My mother got sick after her fourth child.

Ç: Did she have an operation?

K: No, just medication. They said she has a cyst, I do not know exactly. I cannot understand her condition either.

Ç: Did you go to any other doctor?

K: We did go to all doctors. We went to Maraş, Antep and Malatya. She had an angio. The doctors here made us wait for a long time. They did not send us anywhere then she had angio in Malatya. She still has swelling.

Ç: What do doctors say?

K: They do not say anything indeed. They do not know what to do either.

Ç: Is it not possible that they send you to Malatya again?

K: At that time, they send us there for an angio, we had the operation there. Doctors said she had a gynecological condition. They sent us to there. Our aunt is there... But she has still swellings on her feet. (Green Card beneficiary, woman from Karapınar Neighborhood)⁴³

⁴³ K: annem 4. doğumundan sonra hastalandı...

Ç: ameliyat falan oldu mu?

K: yok sadece ilaç, tedavi. Kist var diyorlar, pek bilmiyorum yani. Ben de anlamadım gitti.

Ç: birkaç doktora mı gittiniz?

K: çoğuna götürdük. Maraşa kadar götürdük, antepe götürdük, malatyaya götürdük. İki ay önce anjiyö oldu kalbinden. Buradaki doktorlar çok beklettiler, göndermediler. sonra anjiyo oldu Malatya'da. Hala şişmesi var.

Ç: peki doktorlar ne diyorlar?

K: valla bi şey demiyorlar. Onlar da bilmiyor ne yapacaklarını.

Ç: peki malatyaya sevk etseler yine...

K: o zaman anjiyo için sevk ettiler işte. orada olduk geldik. Doktorlar demiş kadın hastalığı var. Buradan oraya sevk ettiler. Teyzemgil orda... Hala şişmesi var ayaklarında ama...

Even though Green Card holders somehow solve these problems about referral, they are also faced with other difficulties such as finding money for the transportation costs to go to the hospitals in the neighboring cities, finding a place to stay if the patient has to stay in that neighboring city for more than a day; or finding money for the expenses charged by the hospitals for the relatives who would stay at the hospital to attend the patient in case of an operation. As the Green Card scheme does not cover any of these expenses (while ES, SSK and *Bağ-Kur* cover the food and accommodation expenses of the patients' attendants), in such cases Green Card holders have to pay these expenses either from their own pocket, or find money from their relatives, or they can apply to the Solidarity Fund and try to prove that they are "in need". However, as I briefly mentioned above, application to the Solidarity Fund is even more complicated and whether the applicant would be granted the money is more dubious than the Green Card application procedure, and it usually lasts too long for the procedure to be completed. Therefore, mostly Green Card holders try the other available ways to find the necessary money – especially in the cases of emergency - and they apply to the Solidarity Fund either as the last resort or after they turn back to Adıyaman.

Moreover, even for the patients whose health care problems can be solved at the public hospitals in Adıyaman, problems do not cease. One of the most frequently raised problems regarding the health care system in Turkey is the private practices (*özel muayenehane*) of specialists. Specialists working at the public hospitals usually have their own private practices, and they usually demand that patients visit their own private practices to keep treating the patients. The fees for these private consultations are usually too high for most of the patients with a Green Card to pay, and perceptibly these fees are not included in the service package provided by the scheme. Other most

frequently mentioned problems are the extra, non-official expenses of the surgical operations. In the cases of surgical operations, albeit illegally, public hospitals usually demand that patients pay for, or sometimes buy, consumables such as gloves, tourniquet or other materials required for the surgery; and surgeons usually ask for a significant amount of money called “knife money” (*bıçak parası*). All of these extra, illegal but regularly charged expenses (private consultation fees, expenses of the surgical consumables and “knife money”) trouble and compel the patients with Green Card to search for ways to get the necessary health care services. Green Card holders I talked to in Adıyaman who faced such demands mentioned that they usually had to pay at least certain amount of these extra expenses, as they believe it would not be possible for them to be treated properly unless they make these payments. However, they usually negotiate with the doctors or health personnel on the price they have to pay, and during these negotiations they usually stress the fact that they are Green Card holders or they do not have difficulties in paying the demanded money.

K: I had three abortions, three children. When it was new, I had abortion. But this last time, the doctor demanded 100 millions. I said I had no 100 million. He replied that otherwise he would not conduct the operation. I said I had only 50 millions. I said we should work to make enough money for the abortion. We gave him 50 million and he said we can pay the other half later. I am telling the truth here, we did not pay it. I said I will not pay it. I did no good by having an abortion. The doctor pushed my body so far, I had a huge pain. I swear. I have been sick since that child. That doctor was not a good one either. Everyone told me he was a good one. I have been very sick since then. I had that abortion, I have been sick since then (Green Card beneficiary, woman from İmamağa Neighborhood)⁴⁴

⁴⁴ K: ... Ben 3 tane aldurdım, 3 tane çocuk. Daha yeni, yeni iken gittim aldurdım. Ama bu son olarak aldırduğumda dedi 100 milyon ver sen dedi doktor. Dedim 100 milyon yoktur. Dedi yoksa bebeği almam. Dedim 50 milyon var. Yevmiye çalış birleştir ki götürelim çocuğu alduralım. 50 milyonu verdik dedi öbürünü de sonra getirin. Sonra da getirmedik yalan yoktur. Dedim götürmem vermem. Sanki iyi bir şey mi yapmışım çocuğu da aldırılmışım. Beni zorladılar, her

All the stories above indicate the existing hierarchies in the health care system among the beneficiaries of the various social security schemes, and where the Green Card holders stand in this hierarchy. Based on these stories, it is possible to argue that among the beneficiaries of various schemes, Green Card holders are the least advantaged. This hierarchization gives clues about the criteria according to which “the state” positions its citizens through its social security and health care policies, and it also shows that during their dealings with the Green Card office or the health care providers, the Green Card holders are treated as “kimsesiz (people who have no-one)” citizens who are “poor” enough to deserve state’s compassion.

Although some citizens who were once totally excluded from the public health insurance mechanisms (people who have no-one as Demirel states) are provided with certain health-care benefits under the Green Card scheme (that is re-owned by “the state” by proving their poverty); they face with lots of difficulties, uncertainties and differentiations during the obtainment and usage processes of Green Card. Therefore, for many people this process of selective inclusion/recognition continues to be experienced as an exclusion. In a locality like Adıyaman where people refer to the disownment of the city by “the state” in speaking of their injuries, this experience of exclusion prevents people from feeling re-owned by “the state”. Hence, on the one hand it leaves them with a continuing desire for a developmentalist state to make a presence in the city; and on the other hand, in their quest for personal solutions, it obliges them to take efforts that disrupt the official workings of the mechanisms like Green Card, by using various

yerim ağrıdı. Valla. Ben ondan beri hastayım, o çocuktan beri... O doktor da hiç iyi değildi. Herkes dedi o iyi ona gittim. Çok yani ondan beri de hastayım. Daha hastayım yani ondan beri. O çocuğu aldırılmışım daha hastayım.

tactics in order to secure benefits from the state on individual basis outside the framework of rights and institutionalized benefits.

CHAPTER FOUR

SUBJECTIVITY IN A SUBJUNCTIVE TERRAIN

As I stated in the previous chapters, Green Card, in a basic sense, is a social assistance mechanism to provide free health care services to the poor. Therefore the prerequisite for citizens to be qualified as Green Card beneficiaries is to comply with the poverty criteria established by the relevant legislation and local governing committees. Although legislations provide a general framework of criteria, essentially the local governing committees are the bodies that decide who are the *deserving* ones – the “real” poor, and who are not. In the course of assessing the deserving ones, local bureaucrats not only take into consideration the routine official paperwork used to ‘document’ poverty. The local bureaucrats’ personal conceptions and imaginations of a proper “deserving poor” also have a crucial role in the evaluation process. Therefore, although the category of the poor is constituted under the Green Card scheme in terms of specific normative criteria, in order for people to be categorized according to that norm, they have to actively participate in the mechanism through *declaration*, *verification*, and a persistent *narration* of their poverty. In this sense, the Green Card is a governmental technology: “the subject has to talk for it to operate” (Dreyfus and Rabinow, 1982). In other words, in order to get access to certain benefits, individuals have to comply with the norms imposed on them by the Green Card scheme. However, this compliance is not a passive one, it rather appears like a theatrical performance in which the applicants/ beneficiaries need to act in certain ways, to be ‘hailed’ as the poor. In this chapter I will be seeking to explore questions like just how this interpellation occurs, to what extent the discourses

employed are in fact internalized, and how individuals “assume” certain subject positions.

In what follows, I will first elaborate upon some theoretical approaches to power, subjectivity and governmentality. Secondly, I will analyze the construction of civic subjectivities by various discourses mobilized by the Green Card Scheme, and then I will explore the other available ways and possibilities of being a subject in the everyday encounters around the Green Card in Adıyaman.

Power, Subjectivity and Governmentality

It is possible to identify two broad approaches to theorizing ‘the subject’ in conceptualizations of subjectivity. The first approach – identified with psychoanalysis and the work of Freud and Lacan – attempts to present a model of the nature of the individual subject, and how it is formed against a normative path of development. According to the second approach to theorizing subjectivity, associated with the Foucault’s body of work, the subject has neither a fixed or knowable content, nor does subjectivity exist outside of the demands power places on individual bodies to perform in certain ways. “Power, in its drive to administer human populations, contrives the subject as an ideal mode of being to which we must conform” (Mansfield, 2000, p.66). It is this second approach which I find helpful in conceptualizing subjectivity in Adıyaman context of civic interactions around the Green Card institution.

For any discussion of subjectivity in modern society using Foucault’s perspectives and analyses, the obvious point of departure is his account of modern power and its peculiar workings. In Foucauldian sense, power is not a thing; “it is

neither given nor exchanged but rather exercised” (Foucault, 1981, p.89). In other words, power per se does not exist, power exists when it is put into action; it is *an action upon an action* (Foucault, 1982, p.220). As Dreyfus and Rabinow (1982) put it, Foucault’s interest was not about “what” and “why” of power; but rather an *analytics of power* (p.185), that is the ‘how’ of power, ‘how it operates’. In his several works, Foucault draws attention to the emergence of a new form of power from the Seventeenth Century onwards that has completely novel procedural techniques and apparatuses centered around mechanisms of surveillance. As opposed to the sovereign power that characterized what was before, this new mode of power does not operate through physical coercion exercised on the legal subjects over whom the ultimate dominion was death, rather it deals with the living beings, and the mastery it would be exercise over them would have to be applied at the level of life itself (Rabinow 1982, p.265). Therefore, in the era of ‘power over life’ or in Foucault’s terminology in bio-power, the body has become a focal point in the political field. On the one hand, bio-power has focused on the species body. The biological processes such as birth, mortality, health, etc. and the related categories such as population have become the object of political attention, and they are supervised through a whole set of interventions and regulatory controls. On the other hand, bio-power centered on *the body as an object to be manipulated*, and it sought to optimize its usefulness, and increase its productivity. (Rabinow 1984, p.261; Dreyfus & Rabinow, 1982, p.134).

In the Foucauldian conception of power, over the course of this process of diffusion of bio-power into the bodies, the population, and society itself, a specific technology had a central role, namely the *confession*. The modern individual was persuaded that through confession s/he would be able to know the truth about

her/himself. Through such a technology, “the individual has become an object of knowledge, both to himself and to others, an object who tells the truth about himself in order to know himself and to be known, an object who learns to effect changes on himself”. In other words, confession as a technology of the self in Foucault’s terms, can actually be considered as a mode of objectification through which human beings turn themselves into subjects. Confession as a technique of subjectification in this sense is quite similar to the technologies of discipline as far as power makes individuals by working on and through their bodies and souls. However, an obvious distinction between these two techniques should be noted. Whereas the disciplinary technologies function on “mute and docile bodies”, the subject has to talk and act for such a technology of the self to operate. (Dreyfus & Rabinow, 1982; p.174-5). In other words, “such subjection is a kind of power that not only unilaterally acts on a given individual as a form of domination, but also activates or forms the subject” (Butler, 1997, p.84).

Such a conception of subjectivity has a lot to do with the Foucauldian concept of governmentality, a field of bio-power where individuals and collectivities are governed by shaping their subjectivities rather than by domination and repression (Gordon, 1991). Following a Foucauldian perspective on power, subject and the concept of government as the “conduct of conduct” (ibid.), Shore and Wright (1997) argue that policies as governmental technologies have a significant impact on the way people construct themselves as subjects, and they define governance as the “complex processes by which policies not only impose conditions, as if from ‘outside’ or ‘above’, but influence people’s indigenous norms of conduct so that they themselves contribute, not necessarily consciously, to a government’s model of social order” (ibid. p.6). Therefore, the effectiveness of policies as governmental technologies relies on a combination of

external subjection and internal subjectification. That is, individuals constitute themselves in terms of the norms through which they are governed, so that although “imposed” on individuals, once internalized, these norms influence them to think, feel and act in certain ways (p.9).

Practices of Subjectification around the Green Card in Adiyaman

As I mentioned in the previous chapter, the processes of obtaining and using a Green Card bear lots of difficulties and bureaucratic complexities for the applicants. Along with the practices brought about by the official procedures, throughout the non-official practices with which they encounter during their everyday dealings with the health care institutions and personnel, Green Card holders are constantly under the demand to narrate and perform poverty. Following Judith Butler, who elaborates the Foucauldian approach to production of the modern subject through what she calls “techniques of the self”, and underlines the importance of performativity in the ways certain individuals occupy certain subject positions, it is possible to argue that everyday encounters around the Green Card Scheme, which are predominantly informed by the discourses of poverty and compassion have a lot to do with the construction of the subjectivities of the Green Card holders. For Butler (1993), performativity, which is crucial for the identification of individuals with the offered subject positions, operates through the ‘reiterative power of discourse to produce the phenomena that it regulates and constrains’ (p.3). In other words, subject comes into being not with a single act of constitution, but through repetition (Lloyd, 1999), and any subject position as a regulated system of performances, is built on the correct repetition of behaviors (Mansfield, 2000). Following this line of

thought, below I will try to analyze how the *reiterative power* of the poverty and compassion discourses, inherent in the mundane workings of the Green Card Scheme leads individuals with the Green Card to talk and act in certain *disciplined* ways. At this point, it should be noted that Butler's theory also leaves room for *deviation* from these *assumed* subject positions offered by the dominant discourses and governmental technologies, as she draws attention to the possibility that individuals, even in some small or trivial ways, sometimes fail or repeat perfectly (Mansfeld, 2000). I will elaborate on how individuals with Green Card deviate from, or fail to perform the subject positions, offered by the poverty and compassion discourses from a different point of view than Butler's in the final section of this chapter.

During my interviews in Adiyaman, one very significant pattern that has drawn my attention was the high level of satisfaction expressed by Green Card beneficiaries⁴⁵. Despite various problems and difficulties the Green Card scheme entails, beneficiaries mentioned their gratitude towards "the state" which provide them with free health care services, with phrases such as '*Allah devletten razı olsun*'. They were generally satisfied as they were granted Green Cards, hence could get health care services for free, and they almost never criticized the Green Card Scheme per se. However, this is not to say that they do not face any problems; or they are not aware of the existing inequalities between services covered by the Green Card and other social security schemes, in terms of quality and access to the health care services; or that they never mention the difficulties they encountered in the hospitals or in the Green Card office. I should admit that, I had difficulties in keeping the conversation going during my interviews with the

⁴⁵ See also Üstündağ and Yoltar (2007) for a comparative analysis of the satisfaction levels of the beneficiaries of different social security schemes.

beneficiaries, who use Green Card only for their minor health problems, as they usually gave very short answers to my questions regarding the process of obtaining and using a Green Card, and I had to ask another question for every bit of information regarding their Green Card experiences. Although the beneficiaries with chronic illnesses or those who had experienced a serious illness, were willing to tell of the difficulties they encountered while getting health care services; they usually told these stories of difficulty as a problem pertaining to the health care system such as inefficiency or insufficiency; or blamed the health care personnel or the officials at the Green Card office for their meanness, unresponsiveness, or lack of compassion.

For instance, during my visit to Adiyaman in April 2007, I went to a small village quite close to the city center, where my friend Celal works as the only teacher at its only primary school, in order to conduct interviews with Green Card beneficiaries in the village. Among families I interviewed, there, I met with a family, whose Green Card beneficiary grandmother had kidney failure, and had to go to Adiyaman Public Hospital at the city center three times a week for dialysis for eight years. Although the expenses of dialysis are covered by her Green Card, the family was experiencing serious transportation problems. In fact, the village is not very far away from the city center - taking around 30 minutes by minibus. However, as it is not located near the main road - the usual route of the minibuses- the villagers have to walk at least for 15 minutes to reach the minibuses which would take them to the city center. This family did not have their own car, and their grandmother was very old and had some difficulties in walking. They told me that it was very difficult to take the grandmother to the hospital by a minibus, so last year, with the help of a lawyer relative of theirs, they made a demand from the hospital for an ambulance to take their grandmother from the village to the

hospital. Luckily, the hospital accepted their demand, and started to send an ambulance to take the old woman (along with some other patients with chronic illnesses living at other close villages) to the hospital. They were grateful both to the hospital authorities and to the Green Card for providing them with such a service. However, the ambulance has not solved their problem completely. The path to the village from the main road is not paved, so especially during the autumn and winter when the weather is usually rainy or snowy, the muddy path makes it very difficult for the vehicles to reach the village. So, as the family told me, during the winter, the ambulance driver refused to drive the ambulance – which, as the *mukhtar* told me, was very old – into this muddy path, and demanded that the family make their grandmother walk to the main road. This has started a dispute between the family and the ambulance driver, which ended up when the family complained about the driver to the hospital administration. They mentioned that after that complaint, the driver had to come to the village; but he started to treat the old lady very badly like driving the ambulance carelessly on the village’s unpaved path, which would make the journey very uncomfortable for her. What makes this story interesting for me is the way the family complains about the services, and the emphasis the family put on the “meanness” of the ambulance driver. The main theme of this story was compassion – they were thankful to the hospital authorities for their compassion or they were complaining about the ambulance driver for his lack of compassion. In other words, as subjects hailed by the discourse of compassion, they were, on the one hand, readily raising their complaints about the “mean” driver. When they complained about the driver to the hospital authorities, it was through this language of compassion that they were able to reach and interact with the upper level bureaucracy of “the state”, and demand “the state” to make an intervention into what is essentially a personal dispute.

But on the other hand, within this language of compassion there is no room for the family to raise their complaints regarding more structural difficulties, like the unpaved village path or the very old ambulance, which had not been made available by the hospital throughout the first seven years of old lady's illness. Hence there is no possibility to call for the state to intervene in this sphere of structural problems. That is to say, while the language of compassion enables certain ways of talking about the problems and making demands from "the state", it also disables certain other ways (usually pertaining to more structural factors underlying the problems) of complaints and demands. I find this point important in understanding how the discourse of compassion that is mobilized by governmental technologies like the Green Card, hinders more structural criticisms in pointing out the Green Card beneficiaries' difficulties.

During my interviews, when I specifically asked the beneficiaries whether they could identify any other problems specific to the Green Card scheme, most of them told me that they were generally satisfied. However, what some of the beneficiaries pointed as the major problem of the Green Card was that sometimes rich people were also granted Green Card with the help of their acquaintances in the bureaucracy and this prevents the "real poor" from getting necessary health care services. Indeed, there are lots of rumors about the Green Card holders who have luxurious cars, buildings or lots of golden bracelets circulating both in the media and in local circles - especially in the local circles of state officials. As Üstündağ (2005) puts it in her chapter on the discourses of poverty in Esenyurt, "'poverty' becomes a status as much as a condition by which people can claim an audience and become recognized, albeit for the commodification of their 'injuries'"(p.230). She adds that identifying corruption as the main source of deprivation of the "real poor" renders the specific histories of the

discontents of modernity invisible and unspeakable; and it also obstructs structural thinking on countering poverty. From this line of thought, one could argue that the granting of the Green Card document to those who can prove their poverty is an act of recognition on the part of 'the state'. To the extent that Green Card beneficiaries embrace the 'poor' citizen subject position offered by the Scheme, and experience the Green Card as a favor from the state to the "real poor", their complaints are contained by the discourses of corruption, compassion and poverty, and they become unable to voice any kind of structural resentment towards the failures of the Green Card scheme. As a result the structural inequalities created by the citizenship hierarchy in the health care system are framed as the natural order of things and hence become invisible and unspeakable.

However, due to the uncertainties entailed in the verification of poverty process, which constitutes the basis of the Green Card scheme, the mood of "mutual suspicion" haunts both the officials in charge of granting the Green Cards and the Green Card applicants. Under such conditions pervaded with suspicion, there appears a terrain of complaints where the ones who fail at the verification of poverty process - hence are not recognized as "poor" citizens - claim that it is unfair although they also live under similar material deprivation like those who are eligible, they do not have access to the free services provided. To elaborate upon this point, I will conclude this section with stories of a woman and a man, who have problems with obtaining a Green Card.

In my first visit to Adıyaman in December 2004, Nazan Üstündağ and I went to the house of a woman, who could not obtain a Green Card as her husband was registered to *Bağ-Kur*, and had a debt to the Scheme. As the woman told us, her husband used to have a small shop, and as it is obligatory for artisans and entrepreneurs to get registered

with *Bağ-Kur*, the man became a member of the scheme, which requires regular payment of premiums. However, the family could never pay the *Bağ-Kur* premiums, and their debt to the Scheme reached to a massive amount, which was impossible for them to pay. Unfortunately, almost all members of the family faced some very serious health problems: the man had a traffic accident, there a tumor appeared in the leg bone of their eldest son, their other son had an accident while playing in the street, and a syringe was poked into his eye. Since they could not pay their *Bağ-Kur* premiums, they did not have access to the free health care services provided by the Scheme, and they had to pay the health care expenses out of their own pocket. Regarding the son who had the eye accident, the family was fortunate to have been saved out of this predicament with the help of an acquaintance from the Association for Disabled, which intervened to provide financial assistance for the family to pay their outstanding premium debts to *Bağ-Kur*. In this way, the son was able to get an operation on his eye. However, the family did not have the means to pay the *Bağ-Kur* premiums regularly, and the *Bağ-Kur* debt started to accumulate once again. Moreover, their health problems did not cease, this time the youngest son had a serious ear infection and the eldest son had to have an operation for the tumor in his leg to be removed. In order to pay for the health care expenses, the family sold their house and their shop. When we were conducting the interview, the woman was living with her eldest and youngest sons. Her husband was unemployed and living in his village with his family. Her eldest son was selling fruits and vegetables on the streets (*seyyar satıcı*), and her other 18-year-old son was in Istanbul working in textiles. She told us that they applied for a Green Card; but since they were indebted to *Bağ-Kur*, they could not obtain a Green Card. Their debt to *Bağ-Kur* was around 10 billion TL, and it was impossible for them to pay this debt. However, without paying

this money they could neither benefit from the health care services provided by *Bağ-Kur*, not obtain a Green Card; and she was telling us how much she needed a Green Card in order to get the necessary treatment for her and her sons' illnesses.

My second story is about a man, whose wife with a religious marriage could not obtain a Green Card. In my last visit to the city in June 2007, I was conducting my interviews in one of the "poorest" neighborhoods of Adıyaman called Yavuz Selim Mahallesi, and an acquaintance of mine, who also live in that neighborhood, was helping me, and was taking me to the houses of the Green Card holders he knows. While we were going from one place to another, an old man, who somehow heard that I was asking questions about Green card, stopped us and asked why I was there. As soon as, I told him, I was researching on the Green Card, and talking with the people about how they use it, whether they have any problems, etc. he started to tell his complaints about the Green card. He told me that he had two wives, one with a civil marriage, and the other with a religious marriage. His problem was that although he and his all family (including his other wife, her children and the children from his religious marriage wife) were granted Green Cards, his religious marriage wife could not obtain a Green Card. The reason this woman could not get a Green card was that, according to the Green Card legislations, next of kin who live in the same house are considered as the household and in the verification of the poverty process incomes of every household member are added up and then divided into the number of household members. However, in the case of this woman, even though it was obvious that she lives with her husband, for the Green Card office in Adıyaman, as the man and this woman are not "officially" married, the woman is considered as a member of the household of her own father who is relatively wealthy. The man told me that he tried every possible way to solve the problem: he went to the

Green Card office for several times; the *mukhtar* also attended him to support his case during some of these visits to the Green Card office; they went to a public notary and certified that he and his religious marriage wife had three children; but none of these ways worked out, and the woman could not obtain a Green Card. He told me that his wife gave birth to their third child a few years ago in a public hospital, and as they did not have the means to pay the hospital expenses they had to sign a *senet*. As he mentioned, hospital authorities told him that if she could obtain a Green card in three-month time, the *senet* would be cancelled and they would not have to pay the expenses; but she still could not get a Green Card. He showed me the *senet*, the IDs of his children and the notary document indicating that the children are his and his religious marriage wife; and asked me whether there was any possibility to find a way out of this unjust situation; because it was obvious that the woman was “in need”, and she really deserved a Green Card.

As the stories above suggest, the applicants who live under material deprivation, but are not granted Green Card for several reasons brought about by the uncertainties entailed in the bureaucracy of the Green Card Scheme, may raise their complaints about the Scheme without any hesitation. However, even their criticisms get lost in the narration of the “injustice they suffered” and how really “in need” and “deserving” citizens they are. This shows that although they are not granted Green Card for the time being, the uncertain, illegible and continuously changed workings of the Green Card always entail the possibility of obtaining a Green Card in the next application. This is an indication of the discursive power of the Green Card Scheme as a governmental technology in producing disciplined subjects, as even the ‘excluded’ ones can be hailed by the discourses of poverty and compassion.

Subjunctivity and Alternative Modes of Civic Subjectivity in Adiyaman

So far in this chapter, I tried to find answers to how and to what extent the discourses of poverty and compassion mobilized by the Green Card shape the production of the civic subjectivities of the people in material deprivation. However, it would be misleading to claim that the Green Card as a political technology, albeit it entails very powerful discursive mechanisms, fully determines the subjectivities of these people in a place like Adiyaman. First of all, the ambivalence brought about by the illegibility of rules of the Green Card Scheme, leaves ample room for various tactics, which enable people to perform other roles informed by discourses other than those of poverty and compassion. Secondly, Adiyaman is a locality, where discourses organized around kinship, the idea of development and progress, and a sense of marginality are very pervasive; and the local officials who are also subjected to these discourses can easily intervene in the workings of the Green Card Scheme. Therefore, it is possible to argue that under such conditions of uncertainty and flexibility, for the people who apply for or obtain a Green Card, being a “poor” citizen is not the only available subject position to be reiterated so as to get access to the benefits of the Green Card; and also the language of compassion is not the only available way to construct intimate relations with “the state” in Adiyaman.

Susan Reynolds Whyte (2002), in her discussion of *Uncertainties, Subjection and Subjunctivity: Hoping for Health in Eastern Uganda* in the volume *Postcolonial Subjectivities in Africa* (Werbner, 2002), argues that uncertainty involves a mood of doubt, potentiality, hope and will, and she defines this mode as *subjunctivity*.

Underlining the importance of understanding the forces of subjection from the perspective of those who experience and deal with them, she claims that “where people

are negotiating uncertainty and possibility, subjunctivity is an aspect of subjectivity” (Reynolds Whyte. p.175).

Involving lots of uncertainties, Green Card process can be regarded as a terrain of subjunctivity – that is, a terrain full of doubt, potentiality, hope and will – where people can find certain possibilities to deal with the “the state”, and they act or talk in ways other than the ones offered by the discursive domain mobilized by the Scheme. In other words, there is always room for other potentialities on the part of the dwellers of Adiyaman than the ones offered by the official workings of the Green Card Scheme. Through using various tactics, which are informed by other forms of relations in Adiyaman (such as family or acquaintance networks), people can find other ways to obtain a Green Card or to get access to the necessary treatment from the public health care centers.

Whenever the *chance offerings of the moment* are with them, applicants may be incredibly creative to find shortcuts within the workings of the Green Card to get their work done. As Das and Poole (2004) argues “the state is both experienced and undone through the illegibility of its own practices, documents and words” (p.10), and falsification of documents is regarded as one of such practices. During my interviews in Adiyaman, both local bureaucrats and Green Card applicants/ beneficiaries told me stories on how the Green Card applicants may manage to make their incompatible records at SSK, tax office, and so forth, ‘look compatible’ with a little help from their acquaintances who work in related state offices. I was told that even computer-based recording systems could not prevent the obtaining of fake records through certain tricks. In the computer-based systems of *Bağ-Kur*, SSK, land office or tax office, the officer needs to enter the applicant’s name into the system, and the computer displays all the

necessary information (e.g. the taxed revenue, insurance status, etc) pertaining to that applicant. If the officer (usually an acquaintance of the applicant) wishes to provide a 'clean and proper' record for the applicant, s/he chooses to type the English counterparts of some letters in the name (e.g. typing Cagri instead of Çağrı). Thus, it would seem as if there exists no recorded taxed revenue, land record, SSK record, etc. pertaining to that applicant, thus making him appear eligible according to the Green Card 'poverty criteria'.

Or similarly, getting free health care services from public providers by using other people's Green Cards or ES, SSK or *Bağ-Kur* documents is very common in Adıyaman. In an interview in Yenimahalle Neighborhood in 2004 (before the inclusion of out-patient medicine into the Green Card Scheme), one of the nurses working at the health-post openly stated that they provide anyone who comes to the health-post with free health care services disregarding their social security statuses, and sometimes they also let people use their (health care personnel) own documents to get the necessary treatment.

Nurse: Our doctors give the medication, the promotional medication to the dwellers of the neighborhood.

I1: They are good people; they sometimes give medication to the ones in need. Most of the friends get medication from the doctors. They have not given us yet; but some friends get.

I2: They have not given us yet. Since yesterday... for four days, I had pain in my kidneys. I could not come. If I came, I would say "give me a painkiller". Till Monday... I should go and have an x-ray.

I1: I myself could not even get a painkiller.

N: Why don't they give?

I1: I do not ask for (...) I...

Nurse: The state does not send medicine to the health center. Only the firms selling medicine give some medicine for promotion. Promotional medicine.

I1: It is promotional medicine, it is written on it.

Nurse: If they (the state) gave medicine, if we had our own pharmacy, why would it be like this? Our friends (health personnel in the health center) who have children, use their children's' documents to give medicine to people (İmamağa Neighborhood, nurse and the Green Card beneficiary women)⁴⁶.

Such *tactics* in the form of small “frauds” require the complicity of the health care personnel in the public health care providers or the beneficiaries of Green Card or other social security schemes, but who would be complicit depends on the *chance offerings of the moment* and individuals' personal *technical-know-who*⁴⁷ which necessitates the mobilization of other personal relationings available in Adıyaman.

As the stories above suggest, having a relative or knowing someone who works in a medical facility or in a state institution is a great advantage for people who apply for a Green card or who need to access health care services by using their Green Cards. Of critical importance here are the kinship ties among the inhabitants of Adıyaman and relationships between state officials, who can be considered a community and who are also involved in several local networks of their own. These linkages are very strong in Adıyaman, and they are organized around a strong feeling of mutual responsibility and a sense of obligation to meet the “reasonable” demands of their relatives, colleagues and

⁴⁶ Hemşire: Doktorlarımız gelen ilaçları, eşantyonları işte dağıtıyorlar.

I1: İyiler yani ihtiyacı olan insanlara bazen veriyorlar. Çünkü çoğu arkadaşlar alıyor. Şimdiye kadar bize vermediler ama bazı arkadaşlar alıyorlar.

I2: Şimdiye kadar bize vermemişler. Dünden beri ben, bu dört gündür, akşam daha sancım fazlaydı, böbreklerimden. Gelemedim. Diyecektim bir ağrı kesici verin bari. Pazartesi gününe kadar. Ben gideyim bir filmimi çekeyim.

I1: Ben kendim bir ağrı kesici bile alamadım ben.

N: Niye vermiyorlar?

I1: İsteyemiyorum (...) ben.

Hemşire: Devlet ilaç göndermiyor sağlık ocağına. Ancak ilaç reklamı için gelenler kendileri ilaç bırakıyorlarsa onları veriyor, numune ilaçları.

I1: Numune ilaçları veriyorlar zaten. Üzerinde yazıyor zaten.

Hemşire: İlaç verseler zaten, eczanemiz olsa niye böyle olsun? Bizim çocuklu arkadaşlarımız kendi çocukları üzerine yazdırıp veriyorlar insanlara.

⁴⁷ I borrowed this term from Reynolds-White (2002)

acquaintances. In other words, the local state officials feel responsibility not only towards “the state”, but also towards their affiliates in the context of all those other networks in Adiyaman. When a relative, a colleague or an acquaintance from these networks asks for a “favor” – this usually means a request to interrupt or violate the requirements brought about by ‘the state’, its bureaucracy or usual workings of institutions – they try to meet this demand for the sake of mutual responsibility that these liaisons entail. Therefore, in cases of such small “favors” regarding the workings of the Green Card Scheme, the way people (Green Card applicants or beneficiaries) act and narrate their stories are mostly informed by the discourses organized around this sense of “mutual responsibility”, rather than the discourses of poverty or compassion. For instance, during my visits to the Green Card office in Adiyaman, I observed that Green Card applicants or beneficiaries who have personal relations with officials could confidently pass behind the bench, where officials sit, ask for “favors”, chat and drink teas with the officials, while other applicants or beneficiaries are made to wait on the other side of the bench. Those other forms of relationalities these “privileged” Green Card applicants/holders establish with the state officials may enable them perform other subject positions and form other modes of “intimate” relationships with “the state” than the ones offered by the poverty and compassion discourses inherent in the Green Card Scheme.

However, one should be aware of the limitations of the tactics and possibilities these other relationings enable. At this point, I find de Certeau’s (1984) *spatial* understanding of power relations, and his conceptions of ‘tactic’ and ‘strategy’, very helpful in evaluating the extent of these potentialities. According to de Certeau, a tactic is “a calculus which cannot count on a ‘proper’ (a spatial or institutional localization)

(...), [it is] a maneuver within enemy territory”. As it does not have a place of its own, it cannot accumulate what it wins: a tactic “must constantly manipulate events in order to turn them into ‘opportunities’” (p.xix). In this sense, these cases of informal maneuvering through the Green Card procedures can be considered as *tactics, clever tricks* deployed by the Green Card applicants/ beneficiaries to be able get along within the system. Although these maneuvers can be taken as “traverses’ remain(ing) heterogeneous to the system they infiltrate”, they remain within the boundaries of the *places* created by the Green Card scheme. In contrast to tactics, strategies have their own places, and they are able to produce, tabulate and impose these spaces. As the task of setting the main terms of application for the Green Card scheme rests with the local bureaucracies, they are in a relatively flexible position to deploy various strategies through introducing new criteria or changing the workings of the procedure, as exemplified in the previous chapter.

At first sight, it may be argued that despite the strategies deployed by the state bureaucracies; the *space* of the Green Card system still provides a limited opportunity to the Green Card applicants/ beneficiaries to influence the implementation of this mechanism through employing various tactics during their everyday interactions with the local state institutions. Hence it may be claimed that such a mechanism empowers some of the *marked population*. However, on the other hand, the same ambiguities and spaces which allowed some to employ tactical maneuvers may be disempowering for others. As Chatterjee (2004) puts it “governmental activity takes place within the stratified social structures of class, status and privilege. Benefits that are meant to be available in general are cornered by those who have greater knowledge of and influence over the system” (p.66). In other words, those “other potentialities” are possible only for

those who are culturally equipped for attaining to it, in terms of the knowledge, skills, necessary networks and ‘technical-know-who’ this requires, whereas for the remaining “suspicious” subjects/citizens, it is just an exclusionary mechanism. However, when the possibility to be re-owned by the state via the Green Card ceases another form of subjunctive mood appears in Adıyaman.

During my interviews with Green Card beneficiaries and people who were denied a Green Card due to various reasons (especially due to their debts to *Bağ-Kur*, which they were unable to pay⁴⁸), the conversation, somehow usually came to the same point that is the problems of Adıyaman, which they would identify as underdevelopment, deprivation and the marginal status of the city. I found that people of Adıyaman (especially the men) like to talk about this issue, and they have a lot to say about the whys of these problems and solutions they think of. As I explained in the first chapter the reasons for Adıyaman’s *sahipsizlik* (disownment by the state) were identified as underdevelopment, under-investment, tobacco law, ineffectiveness of the Atatürk dam, and lack of a trans-city highway. One can claim that these problems my respondents indicated to be the major reasons of Adıyaman’s deprivation and marginal status, were mostly brought about by the process of replacement of macro-level national developmentalist policies with neo-liberal ones, which started in the 1980s. For instance, among the reasons pointed out for Adıyaman’s deprivation, the issues pertaining to ‘the state’s underinvestment into the city and the limitations brought to

⁴⁸ Although with a recent legislation passed in 2006, persons who are indebted to *Bağ-Kur*, but do not sustain their enterprises anymore, were granted the right of dropping out of the scheme without paying their debts, so if their income complies with the poverty criteria, they are officially considered eligible for a Green Card. However, in Adıyaman the state officials at the Green Card office mentioned without any hesitation that they did not want people to hear about this new legislation, as they thought there would be a significant increase in the number of new Green Card applications, and it would be impossible for them to deal with these extra “files”.

tobacco production can be understood as consequences of the Turkish state's withdrawal from the economic sphere. As the way a problem is defined also informs the way to its solution, solutions offered by my respondents to most of these problems were informed by developmentalist narratives, which emphasize an expectation for the state to intervene in the economic sphere by establishing factories, creating job opportunities, subsidizing some agricultural products, etc. During my interviews, for instance, several peasants who produce tobacco told me that they would not need Green Card if the limitations on tobacco production were annulled.

In other words, this attachment of the dwellers of Adıyaman to the developmentalist discourse leads them to *hope* for other *potentialities* than the ones offered within the discursive terrain of the neo-liberal regime. This attachment opens room for narrations of *doubt* about the effectiveness of neo-liberal policies such as Green Card and social assistance in dealing with the structural reasons of people's deprivation in Adıyaman; and it also informs the desires of Adıyaman's people who live under material deprivation, such as a frequently expressed longing for a job in a state institution, or a working opportunity in a European country, which would guarantee a monthly income, life long health insurance and pension.

CHAPTER FIVE

CONCLUSION

Gupta (1995) argues that, “For the majority of (...) citizens, the most immediate context for encountering the state is provided by their relationships with government bureaucracies at the local level... Because they give a concrete shape and form to what would otherwise be an abstraction (“the state”), these everyday encounters provide one of the critical components through which the state comes to be constructed” (p.378). In this light, this study was an attempt to consider the Green Card Scheme as one such important social terrain for encounters with the state in the particular locality of Adiyaman. The Green Card Scheme was created by the Turkish state as a mechanism to provide free health care services to “the poor”. I attempted to take stock of the Green Card Scheme as a site on which ‘citizens with low income’ come into contact with ‘the state’ in Turkey. Specifically I tried to find answers for the following questions: How does the Green Card scheme contribute to the construction of the relationship between the Turkish state and its citizens, in the process of which the categories of ‘the state’ and ‘citizenship’ are constructed? And how does it shape the way citizens construct themselves as subjects in Turkey? During my ethnographic research in Adiyaman I tried to look, on the one hand, into the everyday interactions at the Green Card office, health centers, hospitals and other institutions related to the Green Card procedure; On the other hand, I tried to explore the discourses, fantasies, and desires organized around Green Card. I was also interested to get different stories or narratives on being a resident of Adiyaman, local accounts of the experience of living in the city, and I tried to figure

out what these local understandings and narratives imply, in terms of the relation between state, policies and locality.

In my first chapter, I tried to elaborate upon the specific locality of Adıyaman. Through an analysis of the narratives of my informants on the miseries of Adıyaman and their desires for the future of the city, I argue that in these narratives Adıyaman appears as a city ‘disowned’ by the state. This sense of disownment is a pervasive state of mind in Adıyaman, crystallized in the often-used phrase *sahipsiz şehir*. I found that this sense of disownment (*sahipsizlik*) leads the people of Adıyaman to desire for “the state” to make a presence in the city. This notion of disownment (by the state) is informed by a particular developmentalist discourse available in Turkey. This discourse, on the one hand, involves a promise on the part of “the state” to take citizens into the “time of modernity” through various policies that aim at economic development of the city as a whole; On the other hand, it entails a requirement for the residents of the city to be “loyal” to “the state”. In the specific context of Adıyaman – where the majority of inhabitants are ethnic Kurds – this loyalty would be gauged in terms of an expectation for the people in Adıyaman not to engage in the Kurdish resistance movement. Therefore, for the people of Adıyaman, who mostly consider themselves “loyal” to “the state”, the state that is the object of their desire is a developmentalist one, one which would create new jobs, make infrastructural investments, provide subsidies to the agriculture, etc. But in such a context, how fulfilling is a policy like the Green Card in meeting the expectations of Adıyaman residents from “the state”?

The Green Card Scheme is part of an entire repertoire of health care financing mechanisms in Turkey; but unlike the other health care insurance schemes (*Emekli Sandığı*, SSK, *Bağ-Kur*), which provide health care coverage on the basis of the

beneficiaries' states of employment, the Green Card offers health care benefits to those who can prove their "poverty" – as defined normatively in legislation and practically by the local governing mechanisms. In a locality like Adiyaman, where the majority of the population is not covered by any of the employment-based social security schemes, the Green Card Scheme constitutes a very important channel for many people to gain access to health care benefits provided by "the state". In doing that, the Scheme becomes an important site where many people in Adiyaman interact with "the state", learn about "the state" and understand what kind of citizens they are. In the second chapter of this thesis, I attempted to take stock of these state-citizen interactions around the Green Card Scheme.

As I elaborate in my third chapter, these encounters with "the state" have implications on the ways people of Adiyaman assume certain subject positions. On the one hand, the Green Card Scheme impels people with insufficient means into acting and talking as "poor" and "fine" citizens who deserve the state's compassion. But on the other hand, the uncertainties inherent in the workings of the Green Card scheme make it a terrain of subjunctivity – that is, "a terrain full of doubt, potentiality, hope and will"– which enables people to assume subject positions other than the ones offered by the Green Card Scheme. And I argue accordingly that these other subject positions –which are mostly informed by other discourses available in Adiyaman pertaining to "the state" and citizenship – also open up possibilities for Adiyaman residents to disrupt and manipulate the workings of the Green Card. By the same token, these other subject positions also allow them to question and criticize the Green Card in substance and effectiveness.

The main argument of this thesis is that both the ways in which the Green Card scheme is regulated by state officials, and the ways in which the recipients deal with the scheme in Adıyaman, occur in a context where hopes for overall development and recognition by modernization are increasingly giving way to a sense of marginality in the form of ‘disownment’ and loss and a desire to be re-owned and recognized by “the state”. As such, this thesis can also be read as an exploration of the material and discursive formations of marginality and a marginal locality (Adıyaman) in Turkey.

Adıyaman’s constitution as a marginal locality has a lot to do with the effects of the state policies on the everyday lives and experiences of the people in the city. In the minds of Adıyaman residents almost all of the miseries and misfortunes of the city are considered as consequences of the various policy decisions taken by the central government, over which people do not have any direct and effective influence. I have quite tangibly observed that this popular diagnosis leads to a feeling of impotence, marginality, a sense of being trapped in a forgotten, underdeveloped city. The dominant state of mind among the people of Adıyaman (including the officials and in fact, especially them) is a pervasive sense of disownment (*sahipsizlik*) by the state. It appears that this sense of “disownment” gives rise to calls for “the state” to make a presence in Adıyaman, in order for the city to be able to address its miseries and have a chance to “develop” and “modernize”. But this is certainly not to say that “the state” does not already have any presence in Adıyaman. On the contrary, I argue that through the complex, illegible and uncertain procedures of governmental technologies like the Green Card, “the state” appears as a vertical, all-encompassing entity, making a “magical presence” in the everyday life of Adıyaman, and governing it.

However, over the course of the processes of the Green Card, “the state” and citizenship take on different meanings in Adiyaman. The state, which is in one instance desired as a developmentalist agent that will take the city into the historical time of modernity, suddenly becomes an intimate and “magical entity”, ever present and yet forever missed. But precisely since this “magical state” that appears in the workings of the Green Card is not “the state” residents of Adiyaman desire, the people continue to maintain and voice their desires for “the state”, the one they expect to finally make a presence in the city.

Citizenship, on the other hand, is debated in terms of its exclusions both collectively and individually experienced. In the context of the Green Card, citizenship becomes a status assigned by an exercise of “selecting” the poor, in the backdrop of perpetual mutual suspicion. A policy like the Green Card allows for the “disownment” of the city to be diffused in the way the state comes to therewith “own” (or re-own) selected individuals. To the extent that the Green Card, as a governmental technology, provides a certain degree of recognition to some of the residents of Adiyaman, it is very effective in producing disciplined subjects by hailing people as “poor citizens” in need of the state’s compassion. Although the uncertainties inherent in the workings of the Scheme enable recipients to some extent undo these governmental effects of the state (by using various tactics like for example the falsification of documents), and to perform other subject positions than the ones informed by the Green Card; all these tactical maneuvers and different subject positions remain within the *spatial* field created by the Green Card. Under such conditions, a mode of existence in Adiyaman outside the realm of the state, independent from it and with no reference to it, becomes unimaginable. The

“magical” omnipresence of the state remains intact. Adıyaman appears as a city “dense with state”: one that is ever present yet forever missed.

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