Editors’ introduction.

Ageing as a Migrant: Vulnerabilities, Agency and Policy Implications

RUXANDRA OANA CIOBANU
Center for the Interdisciplinary Study of Gerontology and Vulnerability, University of Geneva, Swiss National Centre of Competences in Research LIVES, Switzerland

TINEKE FOKKEMA
Netherlands Interdisciplinary Demographic Institute (NIDI-KNAW), University of Groningen and Erasmus University Rotterdam, the Netherlands

MIHAELA NEDELCU
Institute of Sociology, University of Neuchâtel, Switzerland
Abstract
This paper starts with a short review of the growing literature on the topic of older migrants, particularly in relation to this population’s diversity, social vulnerability, loneliness, (transnational) care, and support networks. It then introduces the collection of papers of this special issue by proposing an approach to studying older migrants as social actors who develop strategies to surpass vulnerabilities. Older migrants mobilise their resources while taking into account structural opportunities and restrictions from the meso and macro levels. Hence their strategies are placed at the intersection between family obligations and resources, social networks, and migration and care regimes. Such an interdisciplinary and multi-level model acknowledges the heterogeneity of older migrants. The paper concludes with a discussion of the research results that have implications for policies targeting the growing population of older migrants.

Key words: Older migrants, Social vulnerability, Loneliness, (Transnational) Care, Support networks, Coping strategies, Agency
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Older migrants: A growing population and topic of research
There is increased awareness that migrants are becoming a substantial part of Europe’s and North America’s older population. In 2004, introducing one of the first special issues dedicated to this group, Warnes and colleagues pointed to the great likelihood that ‘the number of older migrants in Europe (and other developed world regions) will grow substantially during the coming half-century’ (Warnes et al. 2004, 308). Eurostat data supports this assertion (Table 1). The 2010–2015 period saw significant growth in the numbers of foreign-born residents aged 55 and older throughout Europe. Among the selected countries, Finland, Luxembourg and Portugal exhibit an increase in the older migrant population exceeding 50 per cent, and Denmark, Greece, Italy, Malta, Norway and Spain exceed 25 per cent. Likewise, large numbers and a steady increase can be observed among the foreign-born in the age group 45–54, i.e. the ‘future older migrants’. While these migrants can still be mobile and return to the home country or depart to another country, previous studies (Baykara-Krumme 2013; de Haas and Fokkema 2010; Hunter 2011) show that only a minority returns to the home country, and most migrants age in place. Moreover, in addition to the general trend of demographic ageing, it is highly likely that the increase in the general migrant population (including the present large flow of refugees from Afghanistan, Iraq, Pakistan and Syria), the reduction of travel costs (enhancing mobility), and the precarisation of the situation of certain older workers (which would engender new emigration) will significantly contribute to enlarge the size of the older migrant group in Europe.

< Table 1 about here >

Perhaps partly because of its impending demographic importance, ‘older migrants’ has recently become a more popular subject of research. Particularly in the last decade, apart from individual papers, a remarkable number of social science books (e.g. Baldassar, Baldock, and Wilding 2007; Horn and Schwepppe 2016; Karl and Torres 2016; Lawrence and Torres 2016; Walsh and Näre 2016) and special issues (e.g. Ciobanu and Hunter 2017; Torres and Lawrence 2012; Warnes and Williams 2006; Zubair and Norris 2015) have taken over this research topic. The subject of older migrants, however, is bound to raise the attention of scholars with different backgrounds as it is placed at the intersection of migration studies and
gerontology, but also nursing (van Holten and Soom Ammann 2016), mobilities (Botterill 2016; Buffel 2015; Ziegler and Schwanen 2011) and social policies (Blakemore 1999; Torres and Lawrence 2012). Although it is a topic that needs to cut across disciplines, it remains rather marginal in all fields.

The focus on two distinct groups of older migrants has long dominated the European literature. The first group to catch scholarly attention were post-war guest workers and their spouses (Castles 1986). These migrants came to Western Europe in early adulthood, where they aged in place. Broadly speaking, while migration studies tend to examine their transnational identity and behaviour, including the likelihood of returning and travelling back and forth (Baykara-Krumme 2013; Bolzman, Fibbi, and Vial 2006; Bolzman, Kaeser, and Christe 2016; de Coulon and Wolff 2010; de Haas and Fokkema 2010), studies of other disciplines are more concerned with the stressors migrants encounter in the host society (Beirens and Fontaine 2010; Fokkema and Naderi 2013; Victor, Burholt, and Martin 2012). The second group, although rarely introduced as older migrants, are international retirement migrants, those in or close to retirement who move permanently or on a seasonal basis from Northern to Southern Europe in search of better climate and quality of life. Parallel to the research on North American and Canadian ‘snowbirds’ who spend winters in the US sunbelt (Martin et al. 1992), the initial studies focused mainly on geographical distribution patterns, motivations and characteristics, and lifestyles and experiences of international retirement migrants (King, Warnes, and Williams 1998, 2000). Lately, increasing attention has been directed to the social impact of this amenity-led mobility in older age by looking at the degree of social relations in the local community and their transnational social embeddedness (Benson and O’Reilly 2009; Gustafson 2008).

Only very recently have other groups of older migrants been in the research spotlight, such as former political refugees who fled communist regimes in Eastern Europe or totalitarian regimes in Africa and Latin America for Western Europe and North America (Bolzman and Scott 2010); Western European labour migrants who migrated in the 1950s and 1960s to traditional countries of immigration (Australia, Canada, New Zealand and the US) and have aged in place (Wu and Penning 2015); late-in-life labour migrants from Eastern Europe who lost their jobs in their forties or fifties and are faced with the decision to migrate to Western Europe in order to make ends meet (Morokvasic 2004); Western European older adults with health problems who migrate to countries like Poland and Thailand in order to receive high-standard, affordable care (Horn et al. 2016); and the so-called zero generation (Nedelcu 2007, 2009), i.e. parents of migrant children who follow their adult children in
migration or engage in back-and-forth mobility at a relatively old age as a family strategy to exchange both downward and upward intergenerational support (Tiaynen-Quadir 2016).

Various vulnerabilities among older migrants: A multi-layered perspective at the crossroad of macro, meso and micro levels of analysis

The common denominator in previous studies is the focus on older migrants’ vulnerabilities. This comes as no surprise, as migrants experience a discontinuity in their life course, leaving behind the socio-cultural contexts they belonged to and which previously provided a safety net and meaning in life. Moreover, being older and having a migration background cause a double (Dowd and Bengtson 1978) or even triple jeopardy due to age, migration background and additionally disadvantaged situations (Norman 1985). The different types of vulnerability of older migrants are extensively exemplified in narratives (e.g. Bolzmann et al. 2004; Cela and Fokkema 2016; King et al. 2014; Nedelcu 2007) as well as supported by the rather limited yet growing number of quantitative studies that compare older migrants with non-migrant older adults (e.g. de Jong Gierveld, van der Pas, and Keating 2015; Fokkema and Naderi 2013; Wu and Penning 2015).

Different factors – acting at macro, meso and micro levels – shape older migrants’ vulnerabilities and the possibilities to deal with adverse situations. At the macro level, national and international migration regimes, social policies and care regimes, public opinion toward immigrants, as well as economic conditions in the country of origin and at the destination underlie structural conditions favouring or mitigating older migrants’ vulnerabilities. The meso level captures ethnic community and family networks and resources, including shared norms and patterns of solidarity, that older migrants could rely on to face precariousness and respond to care and other needs in older age. The micro level refers more specifically to individual factors, such as the migration experience in itself, socio-economic level, professional activity, health condition, technological literacy and language proficiency of older migrants. As cases in point, the examples of older labour migrants, the zero generation and international retirement migrants illustrate how important it is to articulate these three types of factors and levels of analysis, by evidencing how macro, meso and micro factors interact and increase older migrants’ likelihood of vulnerability, especially in terms of social embeddedness and care.

As a consequence of the need for a labour force following World War II, countries throughout Western Europe established agreements with southern European and Mediterranean countries (e.g. Italy, Spain, Portugal, Turkey and Morocco) to attract guest
workers. These agreements were very strict, limiting migrants’ rights in the labour market as well as the possibility of family reunification (Hunter 2011). Migrants were considered to come to Western Europe for the duration of their contracts and then return to the home country. The reality was different: the majority chose to settle instead of returning home.

Consequently, the arrival of guest workers was followed in the 1970s by the migration of their wives through family reunification. And although many have always cherished the wish to return upon retirement (Bolzman et al. 2006; Hunter 2011), the presence of adult children and grandchildren and more generous welfare benefits in the country of destination prevent them from doing so. As an alternative to return, they regularly travel back and forth (Bolzman et al. 2016; Hunter 2011). The frequency and duration of their sojourns in the home country, however, are bounded by legal constraints (e.g. maximum period to stay abroad without losing residence permit or social security benefits) and, where applicable, the availability of healthcare services in the country of birth (Fokkema, Cela, and Witter 2015). Guest workers and their spouses were, and still are, rather invisible in public social life. As their stay was meant to be temporary, there have been no civic integration programmes, not even language courses. Because of the individual nature of work (cleaning or tailoring jobs) or because migrants worked mainly with others of the same nationality (construction or agriculture), they did not learn the host country’s language ‘on the job’ either, nor felt the need to. Their spouses often did not have a paid job and spent most of their time at home taking care of the family. The negative effects of low language proficiency increase when reaching old age: people need the help of their children/grandchildren to interact with doctors and authorities. In addition to being socially vulnerable, these migrants tend to suffer from adverse economic and health conditions as a consequence of their past low-skilled, heavy or hazardous work. The literature repeatedly shows that compared to their native peers, on average they have lower socio-economic status, frequently dwell in bad housing and deprived neighbourhoods, and have more physical and mental health difficulties (Bolzman et al. 2004; Fokkema and Naderi 2013).

Collaterally to recent labour migration flows of young adults encouraged by Western countries’ migration regimes and poor economic conditions and prospects in the home country, there emerged a rather unexpected mobility of grandparents, the so-called zero generation (Nedelcu 2007, 2009). These elderly populations enter the migration scene as an active provider of childcare within transnational families, often as an alternative solution to overcome limitations related to care and gender regimes in the host countries. Nevertheless, the zero generation is not addressed as a migratory actor by domestic policies at all.
Moreover, while cultural and family norms of solidarity and reciprocity act as driving forces for recurrent back-and-forth mobilities of ‘transnational flying grannies’ (Plaza 2000), the length, type and frequency of their sojourns are drastically limited by the migratory status of their children, country of origin – and the respective rights to family reunification and visas – and migrant families’ socio-economic conditions and resources, as has been argued by Nedelcu (2007, 2009) for Romanian migrants in Canada. One could add the set of family norms and obligations within transnational extended family networks, as many of these mobile grandparents split their time and availability as care providers for multiple dispersed family members (children or dependent adults) (Plaza 2000). Under these conditions the vulnerabilities of transnational grandparents increase with age and time, as their own health status and care needs change thorough the life course and their possibilities to access medical care in host countries are rather scarce. Family reunification, if they have the right and means to enjoy it, is then the targeted outcome in order to access good health services and be cared for by their migrant children (King et al. 2014; Nedelcu 2009). Although the often long-lasting presence of elderly grandparents in host countries enables genuine ethnic dynamics projecting migrants’ parents as community entrepreneurs (Nedelcu 2007, 2009), the zero generation does remain highly dependent on their offspring in the host society in terms of finances, housing, social life and prospects to return, loss of social contact with those left behind and pinning for the homeland (King et al. 2014; Nedelcu 2009). This situation generates feelings of loneliness and social exclusion in the host country and tends to increase social vulnerability.

Migration regimes that erase borders, associated with a democratisation of travelling, had an initial impact on the emergence of a flow of international retirement migration from Northern Europe to Southern Europe (Benson and O’Reilly 2009; Gustafson 2008; King et al. 1998, 2000), and nowadays increasingly beyond Europe (Balkir and Böcker 2015; Botterill 2016). These are people who migrate around the time of retirement to live in places with better climate and other environmental amenities (King et al. 2000). They have long been considered as being among the most privileged and well-off, and their late-life migration was associated with a lifestyle choice (King et al. 1998, 2000). Accordingly, international retirement migration has not been associated with vulnerability, but rather with possibilities of improving one’s quality of life (Benson and O’Reilly 2009). However, as a result of the democratisation of tourism and the increasing affordability of long-distance transportation this group has grown and diversified. Recent scholarship shows that some are exposed to vulnerable situations (Botterill 2016) because their migration is not only determined by the
wish to live in countries with better weather, but also by the inability to make ends meet in their home country. Hence migrants opt for countries where their pensions have a higher purchasing power. More recent studies demonstrate that migrating at an advanced life stage is associated with little if any integration at the destination (Legio-Quigley and McKee 2012). Most international retirement migrants do not learn the host country’s language, have a limited homogeneous social network, and are dependent on the migration industry for managing their everyday life. In the case of elderly British in Spain, Hall and Hardill (2016) argue that accessing care in the host country is challenged by several factors, including the lack of family hands-on care resources, limited availability of state-funded care, and financial, language and cultural barriers. Consequently, many turn to the British community (friends, neighbours and voluntary organisations) or are forced to return to the UK when additional support or care is needed.

The SI contribution to the study of older migrants: Paths to overcome social and care vulnerabilities within structural and life-course diversity

The above cases represent a wide range of vulnerabilities faced by many older migrants. There is however a risk of exemplifying their vulnerability in qualitative research and of demonstrating their above-average likelihood of being vulnerable in quantitative research, resulting in the problematisation of this population. Simultaneously, this also contributes to drawing a homogenising picture portrayed in much of the research, which ends up minimising variations in precariousness among older migrants. Rather than consider migrants as a monolithic group because of age and the experience of migration, one should look at older migrants as an analytical category that embraces high heterogeneity according to various factors influencing processes of ageing and migration. Warnes and colleagues (2004) were pioneers when considering a wider array of older migrants placed on a continuum that goes from the most prosperous and active to the highly disadvantaged. This portrayal, however, largely revolved around the comparison of differences in vulnerability between distinct groups of older migrants – with international retirement migrants ranked as the least vulnerable group and post-war guest workers and their spouses on the other end of the spectrum – which masks variations in vulnerability within each group.

This special issue aims at exploring this variability beyond the focus on vulnerability. More precisely, drawing on rich empirical studies throughout Europe and North America, it underlines the fact that older migrants possess resources they can mobilise to surpass vulnerabilities. While we do not deny situations of vulnerability among older migrants, the
goal is to go further and document how these migrants manifest agency and develop strategies to prevent, cope with, and overcome real and potential vulnerabilities. In the previous section we showed how factors placed at the macro, meso and micro level influence one’s vulnerability. Simultaneously, the strategies to overcome vulnerabilities are also structured at the intersection between these three dimensions.

All the papers in this special issue study the role and place of older migrants as actors, based on empirical studies that question these different levels and their intersection. In other words, they took the posture of not looking at older migrants as recipients of care inevitably dependent on the family, as often portrayed by the literature (Bolzman et al. 2004; de Valk and Schans 2008; King et al. 2014). On the contrary, they acknowledge this population as possessing a series of individual assets, usually anchored in social networks, which translate into both family obligations and resources. This approach recognises migrants’ capacity to be aware of structural opportunities and restrictions, and develop strategies to surpass vulnerabilities. Such a model can constitute a paradigm for the study of older migrants that would allow researchers to transcend stereotyping and homogenising this category. In addition, the special issue zooms more particularly on two age-related types of vulnerabilities: in the social and care domains. In the social domain, the papers in the special issue discuss strategies allowing older migrants to be socially embedded, deal with loneliness feelings and avoid social exclusion. In the care domain, the papers tackle strategies to access care and the ways in which older migrants expect or actually try to cope with care needs in local and transnational contexts.

**Overcoming vulnerability and loneliness through social embeddedness**

Migration usually results in losing or weakening ties, and deprives migrants – at least temporarily – from their current social safety net. Migrants’ initially socially vulnerable position in host countries does not always disappear in time due to accumulated disadvantages of, among others, low socio-economic status and poorer health conditions. It may even increase with age and result in strong feelings of loneliness and nostalgia for the homeland. This is supported by findings of quantitative studies showing that older migrants are, on average, lonelier than their native peers (Fokkema and Naderi 2013; Victor et al. 2012). However, as stressed above, more attention has to be paid to diversity among individuals. A significant number of older migrants is actually successful in reducing or preventing loneliness. This implies that, besides risk factors, there are also counterbalancing protective factors, like being socially embedded in one’s ‘own’ ethnic community and/or being
integrated and feeling part of mainstream society (Berry 1997), getting support from the family, and staying connected with the home environment through the use of ICT (Baldassar et al. 2016).

The papers in the first part of this special issue give insights into older migrants’ degree and variety of social embeddedness, the role of their social and support network, and their actual or suggested coping strategies to avoid or escape loneliness. Social exclusion and loneliness of older migrants is shown to vary greatly, depending not only on individual characteristics (e.g. age, health, educational level, labour market participation, religiosity and length of stay in the country of destination) but also on environmental circumstances (e.g. ethnic composition of the neighbourhood and availability of social meeting places). Several papers also underline the importance of ethnic networks, including kin and non-kin, as a safety net for older migrants. Being part of the ethnic community allows them to meet and socialise with persons of the same nationality and thus overcome marginalisation.

*Empowerment through care: Care for and by older migrants*

Access to care is a crucial dimension of well-being, particularly for older persons. Care is provided by different agents in a variety of settings: by the state or the market, in institutions as well as at home, or informally by regular/irregular migrants and relatives. The literature has generally shown how older migrants encounter difficulties when accessing formal services (Bolzman et al. 2004; Denktas et al. 2009; Hansen 2014) or hesitate to use them. This is due to several reasons. Although institutions perceive older migrants as different (Torres 2006), care policies and formal arrangements do not address the particular needs of this population. In addition, older migrants experience a lack of knowledge about public care accessibilities and availabilities, language barriers, different expectations and norms regarding types of help and treatment, and also adherence to strong family obligations. This fits with findings showing that migrants underuse public care (Bolzman et al. 2004; Hansen 2014). Therefore, it appears that when in need of care, older migrants often prefer support from their children (de Valk and Schans 2008; Hansen 2014) to formal support. Nevertheless, although most children feel responsible and are motivated to care for their parents or in-laws (Dykstra and Fokkema 2012), there is uncertainty about their ability and willingness to assume full responsibility for such care. These doubts are hardly discussed within the family and most often older migrants do not want to be a burden to their adult children either (Bolzman et al. 2004). These situations can lead to care-related vulnerabilities among older migrants, but also generate alternative care arrangements and strategies.
Noteworthy is the fact that migrants’ care networks are not limited to the destination country; care can be accessed in multiple locations and caregiving does not require geographical proximity (Baldassar 2007). An important body of literature in the field of transnational studies focuses on the circulation of care in transnational contexts, more specifically on the role of intergenerational solidarities and care norms within transnational families. Baldassar et al. (2007) argued that these families have the capacity to exchange the same forms of care and support that Finch (1989) identified for non-dispersed families, i.e. emotional/moral, financial, practical, personal support, and accommodation provisions. Transnational family members devote important affective work to perpetuate family relationships and provide care remotely, based on intergenerational solidarities and emotional factors (Baldassar 2008). Various transnational caregiving arrangements result at the intersection of institutional contexts and family configurations, norms and obligations, in conjunction with gender, class and ethnicity factors (Baldassar et al. 2007; Kilkey and Merla 2014). In these arrangements, old age plays a significant role and the elderly are often ‘active members in (transnational) networks that mobilise kin and community resources’ (Baldassar 2007, 278). In this sense, care is a bidirectional process that includes caring both for and by older persons.

The second part of the special issue is dedicated to this topic. All papers stress that the need for care, the difficulty in accessing it and the change in the way it is conceived in different generations can put older migrants at risk of becoming vulnerable. By comparing older migrants with natives they also show that migrants do have access to information about care services, and shed light on similarities and differences in care use. Next, the papers highlight more specifically how older migrants act to meet care needs. Older grandparents not only receive but also provide care, sometimes as an active group engaged in intergenerational transfers across borders.

Theoretical and empirical contributions to the study of older migrants’ agency
The papers take an interdisciplinary look at the concepts underlying this special issue: vulnerability, agency and coping strategies. Based on empirical accounts, they contribute to theory development discussing migrants’ social embeddedness and support network as protective factors against loneliness, their strategies to access care in the host society and the possibilities of transnational care. With two exceptions, all papers were presented at the Annual IMISCOE Conference in August 2013 at Malmö University in three thematic sessions on the topic of ‘Older Migrants’, coordinated by the guest editors.
Russell King and colleagues discuss the ageing-migration nexus by examining particular situations where the conjunction of age and migration generates vulnerability as well as strategies to cope with. They start by differentiating several facets of older age and their conceptualisation in the literature: the Cartesian division, contrasting stereotyped representations of ageing as a declining life period with models of growing old healthy and independently; the individualistic, self-reliant model characterising the countries of Northern Europe, where family is not the main pillar for older-age populations; the end-game model, which questions the heuristic value of the old-age-related conceptual framework and argues for a relativist terminology, while warning of the risk to elude and deny old age as a rightful category. Next, the authors propose approaching the issue of older migrants by distinguishing six types, characterised by different levels of mobilities/immobilities and agency within migration processes: older people left behind by migration; follow-the-children older migrants; international retirement migrants; older (new) economic migrants; older labour migrants who return to their country of origin; and ageing-in-place migrants. Based on past and ongoing studies by the authors, four biographical case studies illustrate some of the challenges that these older migrants have to deal with, and relate how they ‘used migration to achieve a greater sense of physical and psycho-social well-being, including an enhanced sense of self-worth’. In conclusion, this paper draws attention to the deficiencies of policies oriented towards the elderly for coping with the complexity of older migrants’ needs and situations. It also points to the need to recognise older migrants as actors capable of mobilising cultural, individual and family resources across borders, rather than passive beneficiaries of private or state assistance.

The paper by Ruxandra Oana Ciobanu and Tineke Fokkema draws on 27 in-depth interviews conducted in the Swiss cantons of Geneva and Vaud and across the border in France, with Romanians aged over 57, bringing together several categories of older migrants: former political refugees, the ‘zero generation’ and late-in-life labour migrants. The authors explore these groups’ loneliness and put in evidence the important role religion plays in protecting them. They identify three mechanisms through which religion cushions older Romanians from loneliness: faith, feelings of belonging to a congregation, and the social dimension of the church, including the reciprocal character of giving and receiving support. It appears that these mechanisms function equally for those who arrived over 30 years ago as refugees and aged in place, as for more recent arrivals. Still, while religion is important in the context of migration and loneliness, not all older Romanians in Switzerland are religious. The alternative coping strategy with loneliness appears to be an active (social) life. While being
surrounded by family would be expected to protect one from loneliness, this is not entirely supported by the findings. Zero-generation migrants are busy with their grandchildren and household chores, which leaves them little time to build a social network or do any activities for themselves. Hence counterintuitively, this group appears to exhibit higher levels of vulnerability.

While the other papers in this special issue focus on older migrants in Europe, Anke Patzelt’s research subjects are German older adults who migrated to Canada for better employment opportunities in the 1950s and 1960s. Two methods of qualitative data gathering were employed: participant observation and 35 in-depth interviews with older German migrants who are actively involved in the German-speaking community of Ottawa. Compared to their peers who came to Europe in the same period, their integration into the host society went well. In general, they adopted a Canadian lifestyle and do not face structural socio-economic disadvantages or health disparities. On an emotional level, however, there seems to be no difference in vulnerability between the two groups: German older adults miss their homeland too. These feelings of homesickness are not strongly linked to the present situation in Germany per se, but are rather directed towards missing family and friends left behind and the ‘good old times’ of childhood. Moreover, homesickness did not fade with time. On the contrary, it increases after retirement, even more so when a spouse passes away or when English proficiency decreases in the first stages of dementia. Travelling back and forth on a regular basis tends to be an effective strategy for mitigating feelings of homesickness. This coping option does not apply to those with health problems or limited financial resources though. The study clearly demonstrates the effectiveness of an alternative strategy, namely being part of a German organisation or club. A number of well-established organisations and clubs exist in Ottawa, that program regular social activities for their senior members with a strong focus on German traditions. These get-togethers also enable the sharing of childhood experiences and memories and talking about the ‘good old days’.

Based on 25 semi-structured narrative interviews, 11 expert interviews, informal discussions and participant observation, Monika Palmberger studies Turkish guest workers and their spouses who have aged in place in Vienna, Austria. She takes a critical stand on the literature that considers ethnicity as a source of vulnerability, and rather stresses the strong social ties and embeddedness study participants have developed within their ethnic community and in a transnational space. Palmberger acknowledges that the life course has led to disparities between Turkish men and women living in Austria due to differentiated participation in the labour market and a focus on the role played at home and in the family for
women as opposed to work for men. Despite this differentiation, both older men and women are active actors in mosques, cultural centres and political associations, activities that give meaning to their lives. Although the community centres are important social spaces, when it comes to late-life care, family comes to the fore. At the same time as family takes a central place in understandings of good ageing, older Turkish migrants wish for more culture-sensitive institutional care. The author concludes by removing the gaze from migrants’ ethnicity and re-focusing it on their agency.

The paper by Claudio Bolzman and Giacomo Vagni compares older migrants and natives, further distinguishing older naturalised Swiss citizens. The comparison with migrants who have naturalised is novel. The authors compare these groups using a database that includes a representative sample of Swiss nationals and an additional sub-sample of older migrants from Italy, Spain and Portugal. These migrants usually arrived in Switzerland as guest workers and women through family reunification, following their husbands. The findings from Switzerland show that older migrants from Spain and Italy and their native Swiss counterparts use formal social care equally. It appears that the naturalised Swiss use social care services more, and the Portuguese even more than the other categories. These outcomes show that migrants have information about and access to care services. Older migrants appear to be at a disadvantage compared to the native Swiss only in the use of private and semi-private care services, and this is not related to economic status but rather to nationality. The researchers reflect with some reserve on the findings and enquire if behind the lack of difference rests the fact that Swiss natives aged 65 to 79 are still in good health, whereas older migrants of the same age are worse off and in need of care services.

The paper by Ute Karl, Anne Carolina Ramos and Boris Kühn focuses on the agency in old age of international first-generation labour migrants who have aged in place in Luxembourg. They draw on biographical and qualitative network interviews with 17 informants originating from Italy, Portugal and Germany. The paper focuses on migration within Europe, particularly guest workers and their wives from Italy and Portugal, and broadly labour migrants from Germany who have aged in place. Its innovation resides in the authors studying migrants’ agency in reflecting on their future care needs. Drawing on the work of Emirbayer and Mische (1998), agency is defined as social engagement that takes into consideration the former experiences and the present situation in order to develop strategies for the future. This triangulation between past, present and future is essential towards understanding how elderly migrants develop and project their care arrangements. As expected, the factors influencing care arrangements are low educational background and
language skills. The low proficiency in Luxembourgish is among the important factors making older migrants reject care homes, which are generally least preferred for long-term care. Throughout their life migrants keep the home country as reference point and, in the context of deciding on long-term care, have the ‘exit’ option of returning. The literature has shown that elderly migrants reflect on their return at the time of retirement (Bolzman et al. 2006). The findings of this research from Luxembourg show that the moment older migrants are in need of round-the-clock care represents a second time they reflect on returning to the home country.

Anika Liversage and Gretty Mirdal focus on two major choices that migrants sooner or later have to make while living abroad: ‘to return or to stay’ and ‘to turn to their children or to public host country provisions when in need for care’. The uniqueness of their study lies in the use of longitudinal interviews, allowing to explore the extent and reason why migrants change their mind in these two choices over the life course. Over a 30-year span (1980–2012), 18 Turkish women in Denmark were interviewed three times. The participants were re-interviewed for the first time 20 years later, and in the last interview round they were between 49 and 76 years old. In spite of a number of similarities (e.g. female, Turkish origin, family migrant), there are some differences between the participants on the research issues. The heterogeneity within the research group is illustrated by the narratives of two women, a ‘young-old’ married woman and an ‘old-old’ widowed woman, thereby representing two different stages in the ageing process. Both women already expressed a wish to go back to Turkey at an early stage in life, but wanted to postpone the return until the children reached adulthood and were ‘settled’ – married with children. In the empty-nest stage, however, they increasingly realised that a permanent return is not feasible as they would miss their children and grandchildren too much. Instead of returning permanently, they visit Turkey regularly. Although ‘travelling back and forth’ seems to be the best trade-off between missing the homeland and missing the family, it is not the most optimal situation and it is difficult to overcome the ‘myth of return’. While the old-old woman stresses the hardships of being tied to two worlds, perpetually missing something, the young-old woman even ‘blames’ their definite stay in Denmark on the adult children’s unwillingness to return together. With regard to the type of care provider, the two women exemplify the preference for each of the two choices. The old-old woman is representative of most of the other participants, opting for co-residence with the youngest son and his wife, which is in line with the norms and common practice in Turkey. Meanwhile, the young-old woman does not want to burden her children and, accordingly, would rather opt for professional care.
In his paper based on the study of the modes of care circulation within Peruvian transnational families, Vincent Horn focuses on the role and place of older family members. By taking the zero generation as a case in point, the author analyses the ways in which cross-border mobility and long-distance communication shape the care practices, strategies and arrangements developed by older Peruvian non-migrants with family members in Spain. First, a theoretical discussion highlights four different patterns of older family members’ involvement in care arrangements within transnational families, resulting in a combination between mobility/immobility of the elderly and their role as care provider or receiver. In addition, building mainly on the work of Baldassar et al. (2007) and Kilkey and Merla (2014) the author discusses the various (individual, familial and institutional) factors influencing care circulation processes within transnational families. Following this theoretical framework, two ideal-type case studies selected to summarise findings from a qualitative study with Peruvian transnational families in Peru and Spain are used to describe how Peruvian non-migrant women with different backgrounds and resources succeed in complying with their roles of mothers and grandmothers in a transnational context. Their ability to be involved in cross-border mobility and provide proximate care is dependent upon social class and available individual and family resources. However, even when this capacity is rather limited by restrictive migration regimes and visa regulations, different kinds of non-physical co-presence based on long-distance communication are developed. Intergenerational care and support can thus be exchanged in ways resulting from ‘a dialectic interplay of meanings of motherhood, capacities, and negotiated family commitment’. Moreover, the ability of these Peruvian non-migrant women to impact their migrant children’s well-being is reinforced by specific symbolic/emotional and pragmatic capabilities while contributing to their own emotional well-being.

Central in the study of Caroline Zickgraf are the strategies of transnational families to maintain intergenerational solidarity across national borders, exploring the case of older adults living in Oujda (North-East of Morocco) who have adult migrant children living in Liège (Belgium) through 40 in-depth interviews and participant observation during 2011–2013. The strength of her study is its multi-sited approach, which allows capturing and bringing together the perspectives of both migrants and non-migrants and to gain better insight into the circulation of care. Special attention is paid to the often-neglected role of the older parents left behind in maintaining and creating family solidarity. By looking at upward support, the results confirm the findings of prior research that adult migrant children do provide support, albeit often in a different manner than offspring who live close to their older
parents. Instead of ‘caring for’ by being the prime caregiver, adult migrant children’s contribution is mainly characterised by ‘caring about’ from a distance, like sending money to cover medical expenses and taking the lead in coordinating and delegating the care their parents need. In some cases, adult migrant children visit their ailing parents in order to provide hands-on care (mainly daughters), or bring their parents to the destination country, either temporarily or permanently, in order to receive medical advice or treatment or old-age care. The main finding, however, is the active role older parents play as care receivers: they usually express their needs and preferences to their adult migrant children, have a say in the decision of how care is provided, and sometimes are even the initiator of transnational care practices. By looking at downward support, a clear gender difference is found. While fathers mainly send money to their adult migrant children and give them moral support at a distance, either during the initial migration process or in times of crisis, mothers often ‘fly in’ to provide emotional and practical support. Overall, given that financial support is a main transnational practice and mobility across national borders is often a requirement for others, the dynamics of care circulation are largely determined by individual resources and the macro-structural context (e.g. migration policies, welfare state regime). The more members of a transnational family are in a privileged position – sufficient financial resources, free time, legal migrant status or citizenship – the more they are able to ‘do family’ and circulate care.

**Towards a conclusion: Implications for social and public policies**

The above overview of the papers stresses the original contribution of the special issue. Focusing also on groups that have received rather little attention in the literature – older labour migrants from Europe to North America, former refugees and the zero generation – this special issue covers a caveat in the existing scholarship. The broad scope of destination and origin countries of older migrants proves to be very informative due to variations in macro and meso factors, and more particularly different migration and integration policies as well as cultural norms. Accordingly, in studying one or more older migrant groups in various countries – for example Italians and Portuguese in Luxembourg and Switzerland, Turks in Austria and Denmark – the special issue allows the reader to grasp a broad insight into the existing variations in social exclusion and care. The papers also build on several disciplinary backgrounds as well as rich empirical data – either qualitative or quantitative – providing an abundant source of original data on older migrants and non-migrants. This is just a first step towards encouraging future development of more intersectionality between migration studies.
and gerontology on the topic of older migrants, as well as more comparative studies between older natives and migrants.

The findings from the various papers in this special issue also reveal some gaps in social and public policy, identifying further developments in this area. For example, gender appears as a discriminatory factor for both the exposure to social vulnerabilities and the capacity to mobilise resources among older migrants. As the presented studies showed, by being more centred on the family and private sphere compared to men, who are more often involved in the public sphere, women are less likely to learn the language of the country of destination. Consequently, widowhood puts them in a more vulnerable situation than men. Migrant and religious associations play a protective role against social vulnerability for older migrants, whether they arrived at the destination country in their youth and aged in place or arrived later in life. It is also proven that the degree to which men and women participate in these associations varies, particularly among certain migrant groups. These findings suggest that social policies should address older migrants’ needs in a differentiated manner and target the most vulnerable groups in specific ways.

Access to information on social services and public care is another example. Past studies show that older migrants might lack information and underuse this kind of services (Bolzman et al. 2004; Hansen 2014). Contributions to this special issue show that this is not necessarily the case anymore. However, public policies for old age populations are rarely sensitive to cultural factors and care institutions are not prepared to take into consideration specific needs of particular ethnic groups of older persons. Although practitioners are increasingly aware that they have to adapt to and deal with cultural differences in care institutions (van Holten and Soom Ammann 2016), social policies should address these new challenges by developing appropriate tools in institutions, i.e. train professional carers and develop and valorise ‘soft’ cultural skills.

Another example is related to the role of the zero generation within transnational families. As shown, motivated by the need to receive and provide care, adult migrants develop complex informal care arrangements together with their older parents. These arrangements involve frequent travels between the countries of origin and destination as well as tourist and over-staying visas, which can result in irregular situations that make migrants’ parents particularly vulnerable. This form of mobility, its reasons and consequences escape the attention of public policies. These findings suggest a need for both migration and care regimes to take into consideration the zero generation in the chain of care circulation. This would
imply reconsidering the conditions for family reunification with ascendants and some forms of social security transferable from home to host countries.

A last example refers to the involvement of older migrants. Several papers in the special issue portray older migrants as active: participate in associations and in community events, engaging in hobbies, providing care to grandchildren, and contributing to domestic activities. Active ageing policies that have been dominating the ageing policies lately should take into account the contributions of older migrants, understand the ways their social embeddedness contributes to well-being, and develop specific services informed by their particular needs.

To conclude, this special issue draws attention to the high complexity of older migrants’ processes that develops at the overlap between macro, meso and micro social levels, opening a new avenue to scrutinise it from an interdisciplinary perspective. At the same time, while highlighting the capacity of many particular groups of older migrants to overcome vulnerabilities, it also points to the need for policymakers to focus precise social and care policies to specific target groups.

**Acknowledgements**

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Study of Native Dutch and Immigrant Elderly in the Netherlands.” *International Journal for Equity in Health* 8: 35.


Table 1: Population of foreign-born persons, aged 55 and older and aged 45-54, selected European countries

<table>
<thead>
<tr>
<th>Country</th>
<th>55+</th>
<th>45-54</th>
<th>55+ Increase rate</th>
<th>45-54 Increase rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Austria</td>
<td>330,234</td>
<td>339,748</td>
<td>349,293</td>
<td>358,068</td>
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<tr>
<td>Belgium</td>
<td>389,070</td>
<td>406,651</td>
<td>422,073</td>
<td>434,673</td>
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<tr>
<td>Cyprus</td>
<td>26,279</td>
<td>27,218</td>
<td>28,104</td>
<td>28,697</td>
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<tr>
<td>Denmark</td>
<td>84,515</td>
<td>88,426</td>
<td>92,550</td>
<td>97,199</td>
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<tr>
<td>Finland</td>
<td>27,046</td>
<td>29,412</td>
<td>31,941</td>
<td>34,799</td>
</tr>
<tr>
<td>France</td>
<td>2656,339</td>
<td>2517,580</td>
<td>2781,826</td>
<td>2809,275</td>
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<tr>
<td>Germany</td>
<td>2593,734</td>
<td>2637,631</td>
<td>2761,402</td>
<td>2910,254</td>
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<tr>
<td>Ireland</td>
<td>68,777</td>
<td>71,290</td>
<td>71,742</td>
<td>74,355</td>
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<tr>
<td>Italy</td>
<td>658,745</td>
<td>700,406</td>
<td>741,198</td>
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<td>Liechtenstein</td>
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<td>5,140</td>
<td>5,364</td>
<td>5,621</td>
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<tr>
<td>Luxembourg</td>
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<td>33,301</td>
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<td>Netherlands</td>
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<td>432,503</td>
<td>450,698</td>
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<td>122,029</td>
<td>134,139</td>
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<td>Spain</td>
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<td>771,071</td>
<td>821,459</td>
<td>903,742</td>
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<tr>
<td>Sweden</td>
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<td>376,843</td>
<td>389,433</td>
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<tr>
<td>Switzerland</td>
<td>505,583</td>
<td>527,116</td>
<td>547,808</td>
<td>541,614</td>
</tr>
<tr>
<td>United Kingdom</td>
<td>1368,154</td>
<td>1420,799</td>
<td>1493,835</td>
<td>1529,197</td>
</tr>
</tbody>
</table>

Note: The increase rate is calculated between the first and the last available year (%).

Source: Eurostat table ‘Population on 1 January by five year age group, sex and country of birth’ [migr_pop3ctb]