

NEWS

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A better future for ageing

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Ageing



Project Progress

The ERA-AGE project continues to make substantial progress and the European Commission has extended it for a further year. The most significant achievement during the current phase of the project relates to the Future Leaders of Ageing Research (FLARE) joint funding call. Launched in February 2007, FLARE aimed to provide up to sixteen 3 year post-doctoral fellowships for recently qualified scientists in the field of ageing. We are pleased to announce that FLARE applications were reviewed in September and results will be published on the ERA-AGE website in November 2007 and in a forthcoming newsletter.

The focus of the current newsletter relates to the approaching ERA-AGE Forum on the major issue of 'Ageing and Migration in Europe' which will be held on 26-27th November 2007 in Paris. The content raises some very important and interesting questions some of which will be addressed during the Forum meeting. A subsequent ERA-AGE Ageing and Migration in Europe report will detail findings which will be made available to interested colleagues via our website early next year.

Ageing and Migration

Claudine Attias-Donfut, Caisse National d'Assurance Vieillesse



As Europe heads into the 21st Century, two major and unavoidable developments are increasing in importance and intensity across the Continent: the ageing of populations and international migration. Demographic ageing will intensify after 2010 as a result of several trends, not only the second demographic transition, marked by a fertility rate lower than the generation replacement rate, but also the ageing of the baby boom generation and the continuous increase in longevity. In all of the European countries, whether looked at in the short or long term, immigration will be the unique factor in demographic growth (without newcomers, all of the European populations would decrease). The majority of immigrants will originate from Asian and African countries. The reproduction of European populations will be ensured through this continuous intermixture of nationalities, notably through mixed marriages. This is a fact and Europe must cope with these realities through appropriate policies, not only concerning immigration flux, but also, and above all, the means of integration. It is recognised that successful integration of immigrants cannot be taken for granted. We are

aware of the problems related to unemployment, poverty, and the difficult urban neighbourhoods that exist which have resulted from failed policies. How to improve the integration of immigrants is becoming a growing concern across the European Union.

Each of these two issues, ageing and migration, taken separately have been largely studied and debated, but they are rarely looked at through their deep interconnections. These interconnections raise several important questions which should be put on European research agenda.

IS IMMIGRATION A SOLUTION TO THE PROBLEMS RAISED BY THE AGEING OF POPULATIONS IN THE FUNCTIONING OF LABOUR MARKETS AND WELFARE STATES?

As it has been clearly demonstrated, immigration cannot reverse the process of the ageing of populations, but it can slow it down (UNPD, 2000). Decline in fertility and economic growth in Europe, two features which are rarely associated, result in a rising demand for labour migration. Despite the development of female participation in the workplace and the

possible raising of the retirement age, the main way of meeting Europe's future needs for low-medium and high-skilled labour will remain in recruiting an increasing number of third-country nationals. (Münz & Straubhaar, 2006).

Concerning the Welfare State, two different statements are made: on the one hand, migrants are viewed as sources of social expenses because of their high fertility rate and their greater demand for social welfare. It is now evident that economic migration cannot be separated from family migration, which implies welfare measures for migrant families.

On the other hand, it is also recognised that the supply of foreign labour is necessary in order to maintain the level of welfare in a society. Therefore, immigrants may take the role of *producers of welfare*, if an adapted coordinated policy is implemented at an European level (Brochmann & Dölvik, 2006).

DOES THE ELDERCARE MIGRANT SECTOR BRING VIABLE AND LASTING SOLUTIONS TO THE INCREASE IN THE NEEDS OF THE OLDEST OLD IN EUROPE?

The ageing of Europe's populations brings with it new waves of labour migration to meet the demands within the care sector. One of the main particularities of these waves is that they are constituted of young to middle aged women coming mainly from developing (or less developed) countries. This new form of migration of women is growing in many European countries, bringing with it specific changes in demographic structures for both receiving and sending countries. Many of them are illegal, which makes this phenomenon more difficult to know concretely, although it is becoming the topic of a new field within migration studies. Among the points to underline in these studies are: the personal difficulties faced by these workers, i.e. the problems of caring for the family left behind; multiple roles; their family

involvement; the physical and psychological burden in caring for the elderly with such problems as specific illnesses, frailty, dementia, severe dependency, and the physical requirements of working with heavy patients; their relationships with the older people they care for; the importance of language and cultural habits in the field of housekeeping as well as the preparation of food; the availability of alternative care providers or other complementary services.

DO 'LATE MIGRATIONS' RAISE SPECIFIC POLICY PROBLEMS REGARDING THE NEEDS OF ELDERLY MIGRANTS?

Just as there are various types of migration according to their motivations (labour, family, political..), there are different forms of migration depending on the life stage where they occur. Most of them take place during youth: at the earliest stage of life it is migration for studies; then there is labour migration at the stage of entering one's work life or migrating for marriage; during adult life there are different kinds of migrations motivated by new job opportunities and, much later, retirement migration, or for those whose adult children have emigrated, migration to join them. These two latter 'late migrations' have specific significances and consequences.

Retirement migration (see among others King et al., 2000) raises specific issues regarding the acceleration of ageing in some areas (developing social services and health facilities, for example). On the one hand, there are retirees from Northern and Continental Europe who move to Southern Europe to spend their retirement (the so-called snowbird migrants). However, trends are also revealing the return of some of these post-retirement migrants because of ill health and depletion of resources in later life. On the other hand, a minority of migrant workers are going back to their country of origin after retirement: some of them are from Southern Europe, others are from non-European countries.

When late migration is motivated by family reunification, the consequences are different for children and for parents. For the former, having parents with them does facilitate their settlement in the home in several respects (Attias-Donfut et al., 2006), but the parents themselves encounter more problems in participating in the new society, for example in speaking a foreign language, which is especially difficult for mothers, who are often less educated.

WHAT ARE THE CHALLENGES TO OLDER MIGRANT INTEGRATION AND MIGRANT RETIREMENT IN A LIFE COURSE PERSPECTIVE?

Since the main characteristic of the current migration movement is permanent settlement rather than temporary migration, migrants themselves are ageing and retiring within the receiving countries. France represents an interesting example in this respect, since it is the only European country which has experienced continuous flux of immigrants for more than one and a half centuries, ensuring a long infusion of foreign populations. France is the first European country to be confronted, to a large extent, with the management of retirement pensions for migrants, which has demanded specific international coordination and cooperation, as well as information and advice in different languages concerning rights and support in filling in complicated application forms to claim pensions or other social benefits. A recent national survey on migrants aged 45 and over in France (Attias-Donfut et al., 2006) shows that after a stay of long duration migrants become deeply rooted in society: only 7% on average would like to go back to their country of origin after retirement, and no more than 2% among Algerians, one of the largest groups. The survey also reveals that many of the migrants who spend their retirement time in the country of settlement remain nevertheless attached to their country of origin and intensify 'comings and goings' when they retire. This has economic and social consequences in

the field of housing, money, family relations, citizenship and cultural exchanges between countries.

As migrant populations are ageing within European countries, the challenges of reflecting the experiences of older migrants and developing policies able to meet their needs becomes more urgent. Although filial norms remain stronger among non-European groups, actual family help must be complemented by social policy. It is important both to manage broad access to general services, and in some cases, to create targeted services for specific minority ethnic groups and to provide help to voluntary activities, community work, and 'associations' or clubs, which are able to facilitate such integration.

Since family solidarity and relations between generations are major mediators of the well being of the elderly in general, it is clear that older immigrants face numerous challenges to their own sense of well being, whether they migrated earlier or later in their life courses. It is therefore imperative that innovative and forward looking family measures must be put on the agenda of any policy of integration.

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Why should we be concerned about migration?

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Demographic ageing and immigration policy in industrialised societies have been intertwined for the past half century. Indeed, prime movers of immigration policies during the 1950s and 1960s were European population ageing, a short supply of labour and a strong wish for economic growth. More recently there has been a rapidly growing interest in the intersection of migration and ageing.

In order to understand the overlap between migration and ageing it is useful to distinguish three rather different components: (1) the ageing of immigrants; (2) the migration **of** the older people; and (3) migration **for** older people. The first and third components are considered below.

THE AGEING OF IMMIGRANTS

Labour immigrants were traditionally and primarily viewed as guest workers, to be replaced by others after some years. However millions of labour immigrants remained in host countries and, in reaching the age of retirement, their ageing has caught host societies by surprise. Should the life chances of ageing migrants be a source of concern? The weight of research findings leads one to respond

affirmatively. To illustrate this I have used the *social quality framework* (Beck, et. al. 2001). Social quality may be defined as the extent to which persons are able to participate in social, cultural and economic life to enhance their well-being. It is a normative approach that views human dignity, solidarity, social justice, and participatory citizenship as desirable. These outcomes are contingent on opportunities for social empowerment, social cohesion, social-economic security, and social inclusion.

Social empowerment: The concern here relates to the capabilities and the ability of older immigrants to act within the social system. Language difficulties, skills that are less relevant in receiving societies and deficiencies regarding local culture all hinder these capabilities. Under certain circumstances strong networks of compatriots are sources of empowerment and the challenge for research is to identify the variety of means by which older immigrants can be reached and effectively empowered.

Social cohesion: Immigration tests the social cohesion of receiving societies as it increases the heterogeneity of the population. These tendencies are often countered by in-group solidarity among the immigrants (Lowenstein and Katz 2005; Remnick 2003). Bridging is required between these ethnically-based immigrant networks and the broader community in order to counter centrifugal forces.

Socio-economic security: Ample research points to the cumulative disadvantage of elderly immigrants. Although their life chances would often be worse in the country of origin, lower education, age at migration, institutional barriers, and various forms of discrimination leave many immigrants with insufficient economic means to support a socially acceptable standard of living in old age (Hao 2007; Lewin-Epstein et al. 2004).

Social inclusion: Migrant labour participates in one of the most central arenas of social action. They are generally absent, however, from other spheres of the public arena (Warburton and McLaughlin 2007) and the situation is worse in older age, as immigrants are less likely than natives to enjoy the full welfare benefits accrued during their working life (Dwyer and Papadimitriou 2006, Lewin and Stier 2003). Yet, studies have also revealed active participation in the cultural and political spheres, especially where transnational ties are maintained (Remnick 2003).

MIGRATION FOR OLDER PEOPLE

Migration for older people is a rapidly growing phenomenon, yet understudied. The sizeable increase in elderly population in affluent societies, and their growing life span, coupled with a shortage of caregivers is driving this new wave. Personal care in the home is growing and in many cases it is replacing both institutional and multi-generational solutions. In Israel, for example, 10% of the 300,000 persons aged 75+ are provided 24 hour care supplied almost exclusively by migrant care givers. The implications for countries of origin (almost all caregivers are women and many are mothers who leave their children behind) and for host societies (new intergenerational dynamics, low-cost care, and the emergence of new immigrant communities) are not well understood. This entire subject area requires systematic study and a comprehensive public debate concerning its implications.

The forthcoming ERA-AGE Forum on 'Ageing and Migration In Europe' aims to explore these issues in more detail. A subsequent ERA-AGE Forum report will be made available early next year.

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Ageing with care among Europe's minority ethnic elders

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Europe's experience of migration and refugee settlement reflects the historical needs of the economy, a colonial background and wars and conflicts throughout the last century, resulting in a diversity of its population. Thus yesterday's 'migrants' are today's elderly and long established communities like the Roma are only now coming to the attention of the authorities. Three statements summarise the current state of affairs: *'integration, not multiculturalism'*; *'some authorities are responding to minority elders' needs, some are doing a little and others are not doing anything at all'* and on minority ethnic elders, *'we have just never thought about them'* is a view still to be found.

The Minority Elderly Care (MEC)¹ project is the largest initiative to date across Europe in the area of minorities, ageing and health. MEC involved primary quantitative research which generated data on over 3,000 minority ethnic elders covering some 25 ethnic groups; over a thousand health and social care professionals and 312 non-profit voluntary organisations in ten European countries: Bosnia-Herzegovina, Croatia, Finland, France, Germany, Hungary, the Netherlands, Spain, Switzerland and the UK. MEC research² shows that minority ethnic elders experience a range of health conditions, service and professional barriers and remain largely invisible in care policy and practice agendas. Health and social care services are under used due to a range of factors, including lack of knowledge, language difficulties, income, inappropriateness of services (lack of cultural mix), discriminatory

assumptions and complexities of health systems. However when they are accessed and used, minority ethnic elders show clarity in their expectations: services must be quality based and not just culturally appropriate. This is an important finding, since for too long the issue of ageing among minorities has been limited to a focus on cultural and linguistic adjustments (something which authorities are also challenged by and often not meeting in many cases), to the exclusion of other factors.

Health and social care professionals in the ten countries generally accept that minority ethnic elders have different needs and that services should be culturally responsive. They regard minority ethnic elders' knowledge and cultural factors as affecting access to services rather than added issues relating to organisational customs and practices.

Minority and voluntary organisations are increasingly supplying various supporting services such as home care, day care, social support and housing in a few cases. In this sense they are acting as 'primary providers' of specialist care rather than complementing mainstream services. What prevents their growth is finance and infrastructure – and collaboration with the mainstream is often problematic.

Meanwhile policymakers are faced with the dilemma of how to organise and deliver services to this target group. "The rapid ageing of Europe's population has become, said Claude Moraes MEP and Co-Chair of Intergroup on Ageing, 'Europe's number

one issue'. The issues that Policy Research Institute on Ageing and Ethnicity (PRIAE) is raising, about the situation of those who had been recruited into Europe's labour force and given their working lives to its prosperity, has scarcely registered 'on the radar of the EU'. But today, because of PRIAE's efforts, they are 'very much a priority'. 'Joined-up government' in this area is vital for producing a common thread to guide policy and dispel confusion among policy-makers.³ In this respect the ME²PN (Minority Ethnic Elder Policy Network) illustrates the importance of bridging the gap between policymakers and minority ethnic elders. Increasing their capacity, confidence and access to opportunities are essential in producing better engagement with policymakers to affect progress.

Research on ageing and ethnicity is growing and is to be welcomed. But it is insufficient if it does not change the world for the better. After all many minority ethnic elders regard research as the problem: *'we have had too much research, not enough developments'*. PRIAE, individually and with some of its partners, have invested in a range of dissemination products and formats to systematically inform decisionmakers across Europe to help translate research evidence into specific developments. Such efforts indicate the necessity for sheer patience as well as understanding the significant intersection of age, ethnicity and gender dimensions and the combined impact of ageism, sexism and racism when considering ageing and ethnicity - the subject of minority ethnic elders.

1 MEC research was designed and led by PRIAE working with partners. The research was supported under the DG Research 5th Framework Funding Programme under Quality of Life - The Ageing Population and Disabilities, 2001-2004 QLRT – 2000 -00779

2 MEC European Research Briefing can be downloadable at www.priae.org

3 Hazel Waters 15 December 2004 Web link: <http://www.irr.org.uk/2004/december/ha000011.html>

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Forthcoming Events

The final ERA-AGE Forum will take place in 2008. Details of this important event will be made available via forthcoming newsletters and the ERA-AGE website in the near future.



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