ERA AGE
European
Research
Area in
Ageing

Report of the Fifth Meeting of the European Forum

26th – 27th November 2007

Organised in partnership with
Caisse Nationale D'Assurance Vieillesse

Held at the Research Ministry, Paris

Contents page

SECTION 1

EXECUTIVE SUMMARY OF FORUM RECOMMENDATIONS

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Below is a summary of the Forum's recommendations.

1.1   The key needs of older migrants

- Acknowledge diverse migrant situations, biographies and backgrounds (consider potential sources of diversity such as class, gender, age upon migration, cultural/value systems, educational and occupational backgrounds, health, economic and legal status for example).

- Develop broader universal access to health and social care services with an emphasis on health promotion, prevention, treatment, rehabilitation and welfare.

- Establish a EU vision on health and migration which can be shared and promoted.

- Develop an integrated health and social care strategy that considers migrants, states, labour markets, employers and family.

- Develop indicators to assess migrant health status.

- Reconsider assumptions made in intergenerational migrant care in the light of changing norms and expectations.

- Develop culturally responsive health and social care which address barriers such as language.

- Involve nongovernmental organisations to develop culturally sensitive and non discriminatory services.

- Promote international cooperation between countries of origin and of destination to prevent the 'brain drain' of health and other professionals.

- Endorse and promote good practice across all sectors in the field of ageing and migration.

1.2   Key priorities for comparative research

- Carry out consistent comparative quantitative data for older migrants in Europe broken down by age, country of origin, gender and return migration.

- Develop comparative analyses of relevant Member State legislation in parallel to practice-orientated epistemological research aimed at designing and implementing focused interventions.

- On the subject of care, carry out comparative research on:
  - the role played by informal care and possible difficulties in accessing 'formal' care services
  - preferences of European countries in regard to carers' country of origin
  - the relationship between institutional and home-based care
  - the role of multigenerational households especially in countries where policy has recently encouraged families to provide care to frail older people
  - the key characteristics of migrant care workers and where are they coming from
  - how older migrants are handling decisions about care compared to native older people
  - the well-being of migrant carers themselves and systematic monitoring of care provision
  - health and elderly care workers' assumptions about older migrants and how these assumptions impact on the quality and user-friendliness of service provision.

- Promote basic research to develop rigorous theoretical concepts and internationally standardised terminology concerning older migrants in different European contexts.

- Develop specific longitudinal studies which integrate current statistical sources such as the EU Survey on Income and Living Conditions (EU-SILC) to understand the needs of new older migrant groups.

- Support qualitative studies providing the perspectives of older migrants on their life experiences.

- Develop a European Platform focusing on how comparative research is managed and shared between countries. ERA-AGE might develop some such European Platform.

- On the subject of 'brain drain' and 'care drain', studies should analyse how we can balance the competing needs of different nation states for migrant care provision.

- Investigate structural discrimination against older migrants and its implication for the role of migrant carers. Such investigation could be undertaken by the suggested European Platform.

- Promote country specific literature reviews on older migrants, their families and intergenerational relationships across Europe.

- Studies should focus on older migrants' expectations and understandings of family and intergenerational relationships and the impact of their perceptions on, for example, family interactions, care, support and expectations in old age.

- Analyse factors motivating migration and the impact of migration (including seasonal migration) on migrants and the families left behind.

- Investigate the impact of social divisions on the process of migration in particular, the role of gender, social and employment status; educational and occupational backgrounds and legal status.

- Increase the understanding of the impact that social divisions may have in the reconciliation of work and care.

- The role of faith and religion in the maintenance and disruption of family ties.

- Analyse the impact of new technology in shaping and maintaining family and intergenerational (especially transnational) relationships.

- Assess the global implications of older migrant workers and their families' remittances in and out of different European countries.

- Evaluate how European countries' migration, migrant and welfare policies affect family and intergenerational relationships.

- Promote research on integration processes and how they may affect family units and dynamics within families.

- Highlight policy-makers and implementers' assumptions about migrants and conditions of migration and the impact of their assumptions in regard to services that are made available to older migrants.

- Develop comparative socio-legal study of the social citizenship status and rights of older migrants in Europe.

- On the subject of welfare:
  - how do the welfare experiences of different types of older migrants vary?
  - how has international migration impacted on older migrants needs?
  - what impact do gender and ethnicity have in mediating the needs of older migrants?

- Improve conceptualisation of BME social and support networks:
  - Who are network members (e.g. substitution)?
  - What are the quality and/or strengths of relationships?
  - How do these networks change over time (e.g. post retirement)?
  - What is the overall importance of social networks and what role do they play in the lives of older migrants?

- Research the needs of older migrants in rural areas, those not engaged with community groups and older illegal immigrants.

- Evaluate the cost benefits of family reunification (parents joining migrant children) and the potential impact for the EU and other sending countries.

- Promote research to understand the role of community groups in facilitating access to mainstream services and filling gaps in mainstream service provision.

- Increase research to understand the provision of services and information by nongovernmental organisations (NGOs) groups.

1.3   Key policy priorities and good practice for meeting the needs of older migrants

- Promote access to adequate material security and appropriate health and social care services as required in old age.

- Identify and remove barriers affecting utilisation of existing care services, delivery of care that meets cultural and language needs. Freedom from discrimination on all levels including racial/ethnic discrimination and discrimination inherent in categorisation of migrants at the level of EU law.

- Develop concrete policies and measures that are especially tailored to older migrant's health and social care needs.

- Develop policies to address the low status of care work.

- Investigate how migrant care worker training might facilitate wider integration into labour markets.

- Strong national regulation should ensure protection of older people and migrant carers themselves.

- Collaborative labour migration policies should ensure that they support the development of all European countries.

- Increase collaboration between researchers, policy makers, practitioners and representatives from older migrant organisations to encourage older migrants (from diverse backgrounds) to inform our research, policies and practice.

- Increased collaboration with non-governmental organisations (NGOs) such as PRIAE Policy Research Institute on Ageing and Ethnicity; Help the Aged and Age Concern England; Local Minority Ethnic Age and cultural organisations across Europe , who campaign on behalf of older people and are focused on achieving policy impact.

- Good practice approaches should be investigated to identify examples of:
  - inclusion of older migrant representatives in the formulation, shaping and evaluation of policies and services
  - provision of clear simple information in different languages about individual rights in using care services
  - avoidance of dependency and reliance on family members only
  - development of measures to improve cultural sensitivity of care
  - implementation of policies on race and age equality as human rights to ensure equal access and prevention of racism and discrimination
  - promoting professional training to increase awareness of cultural, age and race equality on how to care for minority ethnic users

  - public campaigns and initiatives to recognise the positive contribution of older migrants to society and 'successful' migrant biographies to challenge the prevailing 'problematic' image that is often attached to this group

- promoting international exchange of information on best practice models
- Involvement of users at all stages of the research process and policy development.

1.4 Facilitating improved links between research, policy and practice

- Systematically include questions on nationality, ethnic group and knowledge of local language when collecting statistics on use of health and social care services.

- Culturally sensitive care services should regularly involve policy makers, researchers, professionals and older migrants in each of the following phases:

  - <u>promoting contacts</u> via 'key figures' trusted by older migrants such as local ethnic group representatives
  - <u>exchanging information</u> via data collection on barriers preventing older migrants from seeking 'formal' support and providing advice about existing care services
  - <u>improving system sensitivity</u> by monitoring the capacity of current procedures to assess older migrant care needs, verifying the ability of existing services to meet these needs and, if necessary, modifying/integrating existing services
  - <u>monitoring impact</u> of changes over time and implement them if needed.

- Develop a database providing information on policy makers who specialise in ageing and migration.

- Develop a European Platform to promote knowledge transfer.

- Target policy bodies such as the Department for International Development (DFID), UK and the Department for Work and Pensions (DWP), UK and the consortium of NGOs, older people's groups and other stakeholders to disseminate research data as it emerges.

- Use existing vehicles to transmit important messages, e.g. MIPA implementation (UN) or the new Knowledge Transfer Network (EPSRC) in the UK.

- Develop improved national data on the lives of older migrants (e.g. inclusion key variables to identify characteristics and needs of older migrants in national surveys such as country of birth, length of residence) mainstreaming migration research.

- Establish a special interest group of stakeholders across Europe.

- Develop forums and/or other national and local groups and instruments for creating better welfare of older migrants.

- Develop adequate and flexible funding calls to finance linkages between research, policy, practice and countries.

- Raise the profile of ageing and migration within the community of research funders, e.g. Addiction Recovery Foundation (ARF), UK.

- Highlight positive migrant workers' contributions to economies and societies along with challenges associated with migration.

SECTION 2

PROGRAMME

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DAY 1 - MONDAY 26TH NOVEMBER

- Opening Plenary

  - Welcome and introductions from:

    Patrick Hermange, Director of CNAV
    Professor Alan Walker, Director of ERA-AGE
    Michele Kail, Deputy Director CNRS

- Presentations

  Chair: Francois Heran, Director of INED

  - EU migration policy: Challenges and opportunities for the ageing society
    Constantinos Fotakis (European Commission, Brussels)

  - Why should we be concerned with migration?
    Professor Noah Lewin-Epstein (Israel Sociological Studies)

  - Health and social care for older ethnic minorities
    Professor Naina Patel (UCLAN/PRIAE, UK).

- Working session

DAY 2 - TUESDAY 27TH NOVEMBER

- Plenary session, Older migrants: issues of research and policy

  Co Chairs: Professor Dominique Schnapper (Conseil Constitutionnel, France) and
              Dr James Goodwin (Help the Aged, UK)

  - Family and intergenerational relationships
    Professor Claudine Attias-Donfut (CNAV, France).

  - Older migrant communities in Austria
    Professor Christoph Reinprecht (University of Vienna, Austria)

  - User perspectives on Ageing and (return) Migration
    Alvy Derks (Older Women's Network Europe, Netherlands)

- Working groups reconvened to finalise research priorities

- Closing Plenary – Feedback and discussions of research recommendations.

SECTION 3

AIMS OF THE EUROPEAN FORUM MEETING

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INTRODUCTION

The fifth ERA-AGE Forum meeting brought together ERA-AGE partners, associate members and other European ageing research scientists, funders, policy makers and end users from 16 European countries.

AIMS AND OBJECTIVES OF THE MEETING

The aim of the Forum meeting was to promote the exchange of ideas and discussion between researchers, policy makers, funders and end users in order to share knowledge, identify research gaps and make recommendations for future research in ageing and migration.

The objectives were to:

1. Evaluate and understand the needs of older migrants and how migration may affect older people

2. Identify major knowledge gaps and potential for comparative research

3. Highlight examples of good practice in promoting the integration of older migrants

4. Identify various forms of inequality and discrimination and preventative measures

5. Consider how best to ensure evidence-based policy and practices in the field formulate the next phase in the development of a European ageing research programme

The Forum commenced with a welcome from Patrick Hermange (Director of Caisse Nationale D'Assurance Vieillesse (CNAV) and Michele Kail (Deputy Director of Caisse Nationale de Solidarité pour l'Autonomie (CNSA) which were followed by a series of presentations focusing on research and policy making on ageing and migration and health and social care for older migrants.

SECTION 4

SUMMARY OF PRESENTATIONS

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4.1   Welcome & Opening Speech
Patrick Hermange, Director of CNAV

I am very pleased to welcome you all here today for this Forum on Ageing and Migration organised by the ERA-AGE project.

You are no doubt all aware of the importance of ageing in France and the fact that it is at the centre of social debates, especially concerning the conditions of retirement pensions and the balance of the pay-as-you go system.

I appreciate very much that you have all made the effort to come to Paris despite the current social climate.

This afternoon and tomorrow morning, you will be discussing research on the theme of ageing immigrants, evaluating their findings and proposing new lines of research that will enable policy makers to address these issues.

The CNAV is the key provider of pensions in France, and as Director I would like to give you a brief outline of the role of our institution. I will then present some of the key research themes that we are engaged in and which have led us to become partners in ERA-AGE.

1. CNAV is the largest French pension scheme

The pension branch of the general social security manages the basic pensions of salaried workers in commerce, industry and services, who represent around two-thirds of the working population.

The basic scheme is associated with obligatory supplementary schemes : ARRCO for non-executives, AGIRC for executives and IRCANTEC for non-titular state and local government employees.

The pension branch handles data on more than 64.7 million careers. The CNAV is a public institution with two functions:

- It is responsible for the pensions of all employees in the private sector and in addition widow's pensions and funding for schemes that promote independence.

- In the Paris region, the CNAV deals with the day-to-day handling of individual records, that is the working population who contribute and the retirees who receive their pension. In addition, we assess individuals who are in need of help to remain independent in their homes and provide resources where necessary.

- In addition to its main role as pension provider for employees in the private sector, the CNAV also plays a role in research on ageing and the consequences of an ageing population for the pension system.

- The **Direction de la Statistique et de la Prospective** undertakes prospective research on future trends that will affect the pension system. It is involved in research that evaluates the impact of recent reforms to the pension system and career trends. This Department also works jointly in collaborative with other French institutions that work on retirement issues.

- Department of research on ageing (Direction des Recherches sur le Vieillissement), carries out studies in social policy and institutions, social participation and families, life course studies and social identity and develops international collaboration.

The DRV has a multidisciplinary team developing from more than 30 years a sociological, economical and anthropological approach. The researches are generally conducted on large representative samples. Qualitative studies are also undertaken.

The DRV participates in European and international research networks and it is engaged in comparative work. The work of the researchers has been widely published and disseminated. The DRV also has a programme of research in the context of answering calls to research tenders and in partnership with other research organisations in France and abroad. The researchers are also engaged in teaching, in participation on scientific committees and decision making bodies. The DRV organises seminars and other meetings. The research team is in charge of the editorial work of Retraite et Société. It is the only journal devoted to retirement and ageing which is edited by the CNAV and disseminated by La Documentation Française.

The principal aim is to develop scientific knowledge of the social dimension of ageing and to contribute to the development of social policy.

The DRV has three main research areas: intergenerational relations, dependency and fragile older people, ethnic minorities approaching retirement.

These fields are orientated around themes
- social groups and families. This research examines demographic and social changes that have redefined gender roles and intergenerational relations. Intergenerational solidarity is redefined as it interacts with social policy.

- life course, and social identity. This research is linked to intergenerational relations by focusing on how they impact on the end of working life. Different patterns of retirement among ethnic minority groups form the focus of this research.

- institutions and social policy. This research examines how social policy is formed according to the life trajectories and the passage to retirement. Social change forms the context for this theme.

2. The role of the CNAV in ERA-AGE

Thirty years ago, when the CNAV first became involved in research on ageing, there was little work on social issues and research at this time was dominated by the medical and biological fields. Today, this phenomenon is multi-dimensional and becoming ever more important. Although several university research teams are involved in social research on ageing, there are few real specialists in the field. The CNAV is one of the few French institutions that can justly claim to have an important place in this field, both through its own research and the links that it has with other institutions and research teams. This is why we feel it is important for us to be associated with ERA-AGE and we hope very much that this collaboration will continue in the future.

3. Ageing and migration

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.

It is therefore important to further our understanding of this population, their aspirations and needs, and their retirement decisions. This needs to be done:

- First, in the knowledge that many immigrants have complex or incomplete working careers, to ensure that their pensions are paid under the best conditions.
- Second, to adapt our social policy and services to meet the needs of a vulnerable population.

This is why the CNAV undertook in 2005 an important research programme on the ageing of the immigrant population. This research examined the migration histories and current situation of a large number of immigrants between the age of 45 and 70 from many different countries, and Claudine Attias-Donfut will present the results of this survey tomorrow.

I hope that this brief outline of the role of the CNAV in ageing research will help to enrich your discussion over the next two days, and that you will be able to put forward positive suggestions that will enable us to better address the phenomenon not only of ageing populations but the integration of people who, born elsewhere, wish to set down roots in their adopted country. Similarly, those who wish to return to their country of origin in retirement, should be enabled to bring with them their professional experience as well as their pension rights which in turn will benefit their country.

4.2   Overview of CNRS
Michele Kail, Deputy Director, CNRS

The Centre National de la Recherche Scientifique (National Centre for Scientific Research) is a government-funded research organisation, under the administrative authority of France's Ministry of Research with the following missions:

- To evaluate and carry out research capable of advancing knowledge and bringing social, cultural, and economic benefits for society
- To contribute to the application and promotion of research results
- To develop scientific information
- To support research training
- To participate in the analysis of the national and international scientific climate and its potential for evolution in order to develop a national policy

As the largest fundamental research organization in Europe, CNRS carries out research in all fields of knowledge, through its six research departments:

- Mathematics, Physics, Earth Sciences and Astronomy (MPPU)
- Chemistry
- Life Sciences
- Humanities and Social Sciences
- Environmental Sciences and Sustainable Development (EDD)
- Information and Engineering Sciences and Technologies (ST2I)

and two national institutes:

- The National Institute of Nuclear and Particle Physics (IN2P3)
- The National Institute of Earth Sciences and Astronomy(INSU)

CNRS encourages collaboration between specialists from different disciplines in particular with universities, thus opening up new fields of enquiry to meet social and economic needs. Interdisciplinary research is undertaken in the following domains:

- Life and its social implications
- Information, communication and knowledge
- Environment, energy and sustainable development
- Nanosciences, nanotechnologies, materials
- Astroparticles: from particles to the Universe
- CNRS's annual budget represents a quarter of French public spending on civilian research.

Research on ageing requires a multi-disciplinary approach that takes into account the changing characteristics of individuals and populations and the demographic, social, economic, psychological and philosophical consequences for contemporary society. Ageing research is dominated by the biological sciences as well as clinical research, pathologies, pharmaceutical advances, and epidemiology.

Ageing research must include the capacity of new technologies to improve the environment of older people, especially in the areas of communication and transport.

The ageing of the population already has important economic and social consequences as well as implications for public health. These aspects require a specific approach that takes into account these different dimensions.

However, although ageing has become a specific component of research, and has been the subject of an ANR research programme, approaches are often fragmented and do not respond to the many challenges concerning basic knowledge and the links between different disciplines. This is also the case as far as social science research on ageing is concerned

For this reason, the CNRS has decided to launch an interdisciplinary research programme in 2008 on the theme of 'Longevity and Ageing', which will cover several domains ranging from the biological sciences to the social sciences and the role of new technology.

A major challenge of this research is to further an understanding of the molecular, cellular and physiological mechanisms that underpin longevity and to develop preventative treatments and therapies to control dysfunctions. The aim of this research is to improve organic defence systems and consequently the well-being of older persons.

A second challenge is the cerebral and cognitive changes associated with ageing and neuro-degenerative diseases. These conditions already pose important questions for society.

To remedy the problems associated with ageing, a third challenge concerns the use of new technologies and their recent developments in order to combat social isolation, risks and handicaps.

The fourth challenge is further an understanding of basic knowledge concerning priority themes ranging from the social status of older persons to economic and social policies. In bringing together all the elements of these themes, it will be possible to comprehensively examine the major challenges related to ageing and longevity, and to better understand the causes of illnesses and disabilities associated with ageing. Applying new medical advances and technologies, understanding different types of behaviours relating to the life course and generations, and evaluating the economic outcomes and social policies will be a key part of this research programme.

All branches of the social sciences as well as sciences associated with technology, engineering and information are targeted for this research programme.

4.3 EU migration policy: Challenges and opportunities for the ageing society
Constantinos Fotakis, DG Employment. Social Affairs and Equal Opportunities
European Commission

Key Facts

Migration increasingly becomes a common challenge for the EU

- During the past 20 years, Europe experienced very important annual increases of inward migration.

- Over the last 5 years, EU net migrant inflows reached an annual level of 2 million.

- Already since the 1990s, positive net migration became the largest component of population change in most Member States.

Increased immigration flows due to strong "push" and "pull" economic and demographic drivers

Global ageing pattern:% of 60+ in total population

2006
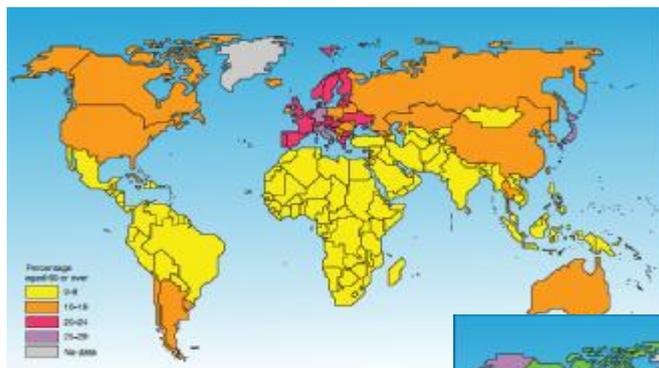
2050
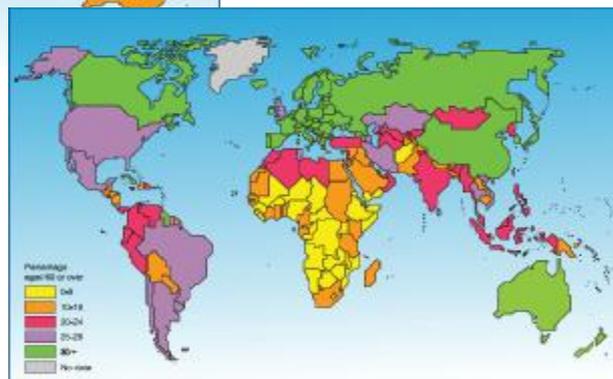
Source: UN World population prospects 2004

Increased immigration flows due to strong "push" and "pull" economic and demographic drivers

The challenge of the growing labour needs

- Shortages/bottlenecks in highly qualified labour force appear in a growing number of sectors/regions;

- Growing needs in domestic and care services.

  - The 80+ age group- an important consumer of daily care services - represents the fastest growing age group. It doubled in size in the period 1970-2000 and it will double again before 2030;

  - The feminisation of the labour force and changes in the family structure and lifestyle have significantly increased the demand for housekeeping services.

Employment perspectives in the EU and the link between the Lisbon Strategy and the EU migration policy

EU-27:The demographic constraint for future employment growth

70% of working age population (Lisbon Employment Objective) period 2005-2050

Working age pop. in ,000
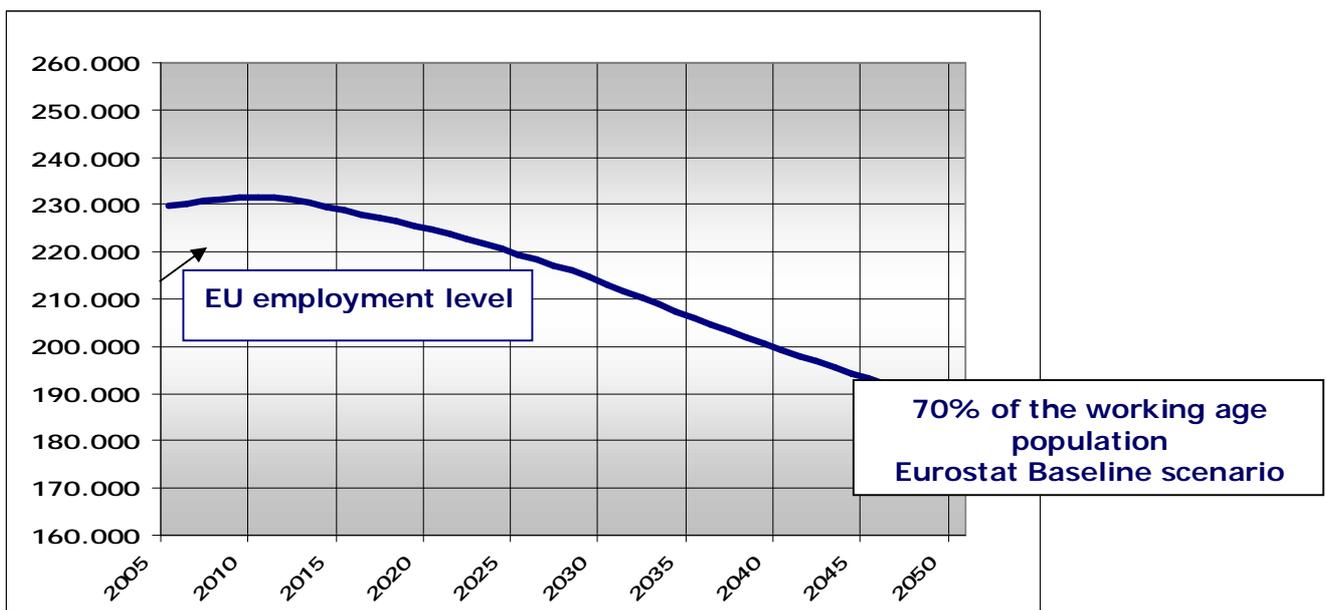
Employment perspectives in the EU and the link between the Lisbon Strategy and the EU migration policy

EU-27: Migration scenarios and demographic constraints for future employment growth
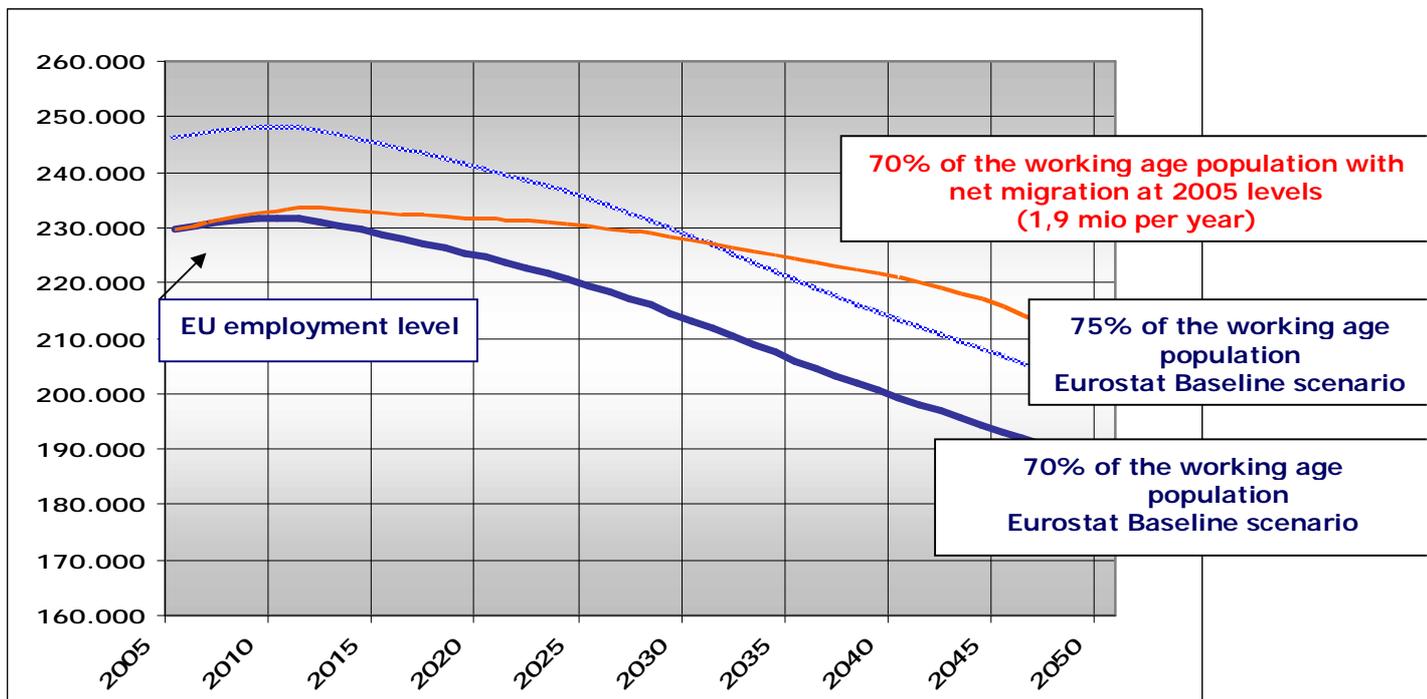
Increased immigration flows due to strong "push" and "pull" economic and demographic drivers

The challenge of shrinking labour force after 2010

- Over the next decade once the Lisbon objective of employment rate at 70% is attained, Europe could hardly sustain its level of employment.

- In the absence of employment growth, economic growth would only rely in productivity growth while our competitors at global level (USA, China and other emerging economies) will continue to show a more favourable outlook in terms of labour supply.

- Tackling this challenge would require more investment in qualification and skills but also a more effective policy in relation to labour migration.

- Migration alone could not fully offset the inertia of the demographic ageing. However, if well managed it could significantly slow down the implications of ageing in the labour market.

Issues

Today the situation in terms of migration in Europe is far from satisfactory

- Europe attracts less high skilled immigrants and more low skilled immigrants compared to USA, Australia and Canada;

- Illegal migration remains high;

- Almost in all Member-States the integration of immigrants represents an important issue;

- The employment rates of immigrants and their descendents remain low in many Member States;

Employment perspectives in the EU and the link between the Lisbon Strategy and the EU migration policy

Need to achieve better integration and to address the political concerns raised by immigration

EU25: Employment rates of EU nationals and non-EU nationals, 2005

	BE	CZ	DK	DE	EE	EL	ES	FR	IE	CY	LV	LT	LU	HU	MT	NL	AT	PL	PT	SI	SK	FI	SE	UK		EU-25
EU-25 nationals	61.7	64.7	76.2	66.6	65.6	59.7	62.5	63.5	67.4	68.0	63.0	62.6	63.9	56.7	53.4	74.1	68.4	52.2	67.5	66.1	57.4	69.4	73.5	72.0		64.9
Non-EU-25 nationals	35.2	71.2	51.1	47.9	61.8	70.5	70.5	44.5	56.9	76.7	64.3	72.8	56.0	66.2	62.9	41.2	57.5	44.4	72.7	53.2	68.3	45.2	44.9	57.9		55.3
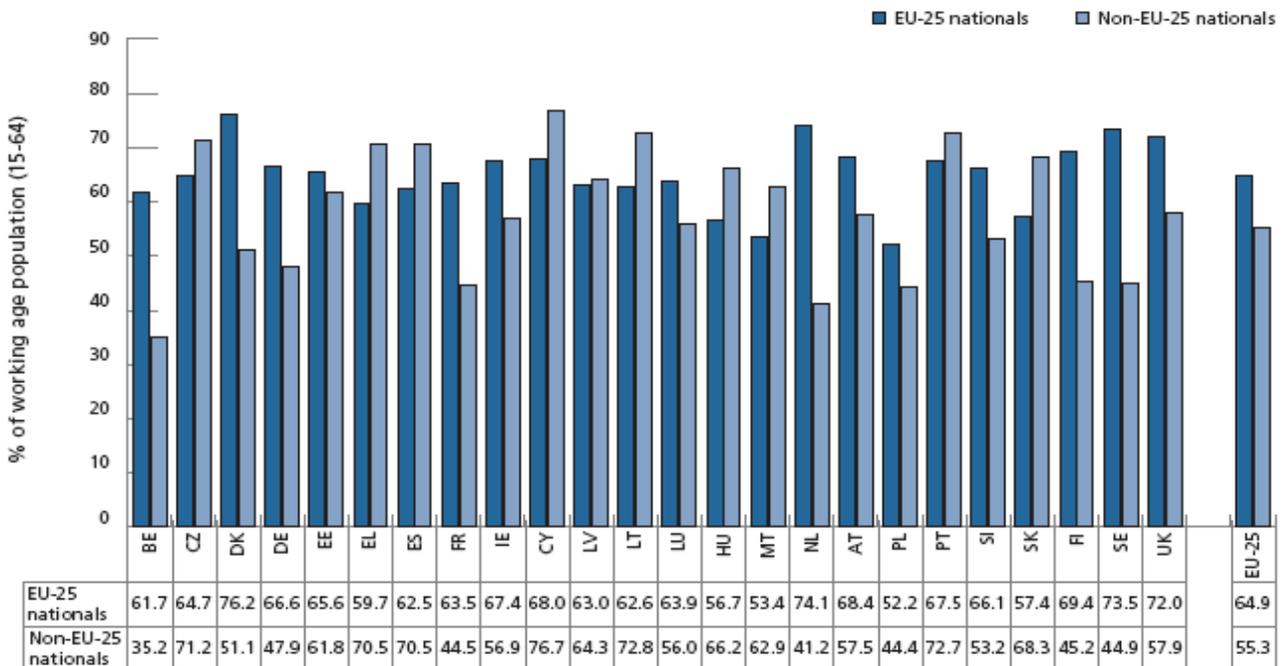
Source: Eurostat, LFS spring results. Note: *No data for IT.

Key facts calling for a European approach to migration policy (1)

During the last 15 years, the barriers to free movement within the EU were radically reduced.

- the Single Market,
- the Schengen agreements,
- the introduction of euro,
- the two recent enlargements but also
- globalisation

This growing openness of the national frontiers resulted, among others, to increased interdependence between the MS in relation to the management of immigration flows.

Key facts calling for a European approach to migration policy (2)

In the absence of a credible European strategic initiative on legal economic migration, the strong push and pull factors of migration will continue to beat existing national rules and legislation.

It will also be extremely difficult for individual Member-States to negotiate and establish partnerships with the countries of origin

Defining an effective policy approach on migration

Better managing migration flows become a strategic policy objective for the Member-States and the European Union as a whole.

A particular focus on 4 areas:

- opening of legal channels to economic migration and

- a more effective integration of the immigrants in the host societies

- fighting against illegal migration

- developing partnerships with the countries of origin/transition on migration issues

Towards a Comprehensive policy approach

The Comprehensive EU migration policy, as defined by the European Council in December 2006, builds on :

- the conclusions of the Tampere European Council in 1999

- and more recently on

- the Hague Programme of 2004 and

- the Global Approach to Migration adopted by the European Councils in 2005 and 2006.

Legal Migration

Recent Commission initiatives towards opening paths to Economic Migration

- The Hague Programme (adopted by the European Council 11/2004) invited the Commission to present a Policy Plan on Legal Migration

  The Commission Green paper on an EU approach to managing economic migration (1/2005)

  Public Consultation
  - Ø Need for a more focus approach on specific categories of immigrants

- Policy Plan on Legal Migration (12/2005)
  - Ø Including actions and legislative initiatives that the Commission intends to take, so as to pursue the consistent development of the EU legal migration policy.

Legal Migration

The legislative provisions of the Policy Plan on Economic Migration

- Proposal for a General framework directive on single permit and the rights of immigrants (10/2007)

- Proposal for a directive on the conditions of entry and residence of highly qualified workers (10/2007)

- Proposal for a directive on the conditions of entry and residence of seasonal workers (2008)

- Proposal for a directive on the conditions of entry and residence of remunerated trainees (2008)

- Proposal for a directive on the procedures regulating the entry into, the temporary stay and residence of Intra-Corporate Transferees (ICT) (2009)

Legal Migration:

Directive on Single permit/Rights (1)

This proposal represents a horizontal instrument granting rights to every third-country worker legally residing in a Member State, irrespective of the basis on which he/she has been admitted to the territory of a Member State and has been given access to the labour market of that Member State.

In addition, building on the provisions EC Regulation (EC) No 1030/2002 on the uniform format of a residence permit, it obliges Member States to also indicate on the uniform format the permission to work.

Legal Migration:

Directive on Single permit/Rights (2)

(1)The draft directive follows an equal treatment approach by specifying the policy areas where equal treatment with own nationals should be granted. The objective of this approach is:

- to lower the existing rights gap and

- to reduce unfair competition emanating from this rights gap;

(2) The introduction of a single permit, to be obtained through a single application procedure will significantly simplify the administrative requirements for third-country workers and their employers. The Member States will have to provide for a "one-stop-shop" system, and to comply with certain safeguards and standards when handling a single application. As regard to the format, the single permit will take the harmonised format of the existing EU residence permit for third-country nationals, established by Regulation 1030/2002.

Legal Migration

Directive on highly qualified (1)

The overall objective of the Directive proposal on the highly qualified is to create a level playing field and to render Europe significantly more attractive for highly-skilled workers from third-countries for whom there is growing demand in the EU and, at the same time, increasing global competition.

Legal Migration: Directive on highly qualified (2)

The key elements of the draft directive can be summarised as follows:

(1) It aims at harmonising the admission criteria for highly qualified third-country nationals by requiring a binding job offer/contract as well as, for regulated professions, the necessary formal qualifications. It also sets a minimum salary threshold.

(2) It introduces an "EU Blue Card", to be granted to all admitted highly qualified migrants, entitling them to a set of rights and to an enhanced form of intra-EU mobility.

(3) It lays down sufficiently favourable residence conditions, especially for the family members of the highly-skilled migrant.

(4) The aim of this common instrument will also be to reduce the bureaucratic burden imposed on highly qualified third-country workers and on the EU enterprises needing to hire them. It will also provide for easier intra-EU mobility for this category of immigrant workers, which would constitute one of the elements of attractiveness of the scheme.

Legal Migration: Directive on highly qualified

The directive on highly qualified immigrants and the issue of brain drain

The Directive proposal aims to fulfil its objectives while paying due attention to the risk of "brain drain" and the ability of developing countries to develop.

The directive proposal envisages the possibility of circularity between the host and origin countries while it foresees the possibility of restrictions in sectors where the developing countries already face shortages of human resources.

Directive on sanctions against employers of illegally staying third-country nationals (COM(2007) 249)

On the basis of this Commission proposal:

- employers are requested to undertake certain checks before recruiting a third-country national and notify a competent national authority.

- Employers who cannot show that they have complied with those obligations will be liable to fines or other administrative measures.

- Member States would provide for control mechanisms

- Criminal penalties foreseen in cases of repeated infringements, particularly exploitative working conditions and human trafficking.

In conclusion

" in a Europe with no internal borders, the changing demands of an ageing society and a labour market in constant evolution have challenged established assumptions about migration from outside the EU. A new global approach is needed so that migration strikes the right balance between the risk of labour market shortages, economic impacts, negative social consequences, integration policies and external policy objectives" .

* Commission Communication "The European Interest: Succeeding in the age of globalisation", (COM(2007) 581 final.

4.4   Why should we be concerned about migration?
Noah Lewin-Epstein, Tel-Aviv University

Background and Context

- Migration as a global phenomenon

- Post-War Pull Factors
    - short supply of labour
    - ageing of the population
    - wish for rapid Economic Growth

 - Push Factors
    - "north south" economic disparities
    - colonial heritage
    - family unification
    - political instability

Cross-roads of Migration and Ageing

Three major components

 - migration of the aged

 - ageing of (labour) migrants

 - migration for the aged

Migration of the Aged

Various processes involving diverse populations

- return migration of guest labour

- migration of seasonal affluent retirees

- expatriates

- duress (or forced) migration - asylum seekers and others escaping harsh conditions

Ageing of (labour) Immigrants

 - immigration is (typically) by the young

- in immigrant societies assimilation is expected by old age

- in Europe guest worker policies encouraged temporary residence and replacement

- the ageing of immigrants caught host societies largely by surprise.

Does the ageing of immigrants pose concerns over and above those for the general ageing of the population?

The answer in general is YES

 - language and other cultural barriers

 - family compatriot networks are isolated

 - limited financial resources

- precarious citizenship status and differential access to the welfare system (EU vs. non-EU).

Social quality as a paradigm for the study of ageing immigrants

Social Quality -The extent to which persons are able to participate in social, cultural and economic life to enhance their well-being. (Beck, van der Maesen, Thomese and walker, 2001).

Factors to focus on:
- social empowerment
- social cohesion
- socio-economic security
- social inclusion

Social Empowerment

The ability of older immigrants to act within the social system

Barriers
- language and cultural barriers

- weak support networks

- precarious legal status

CASP Scores - Differences from Veteran Jewish Population (SHARE Israel, 2005)

FSU immigrants

CASP – control, autonomy, self-realization, pleasure

☐ Arabs
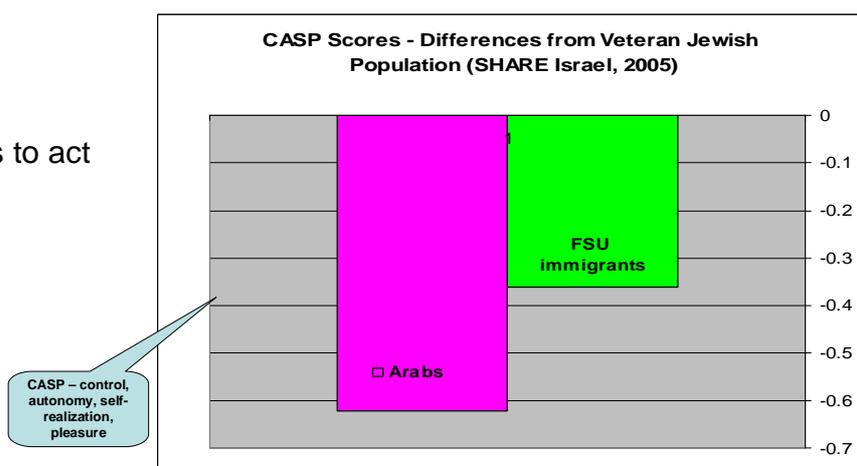
Social cohesion

Immigration tests the social cohesion of receiving societies as it increases the heterogeneity of the population
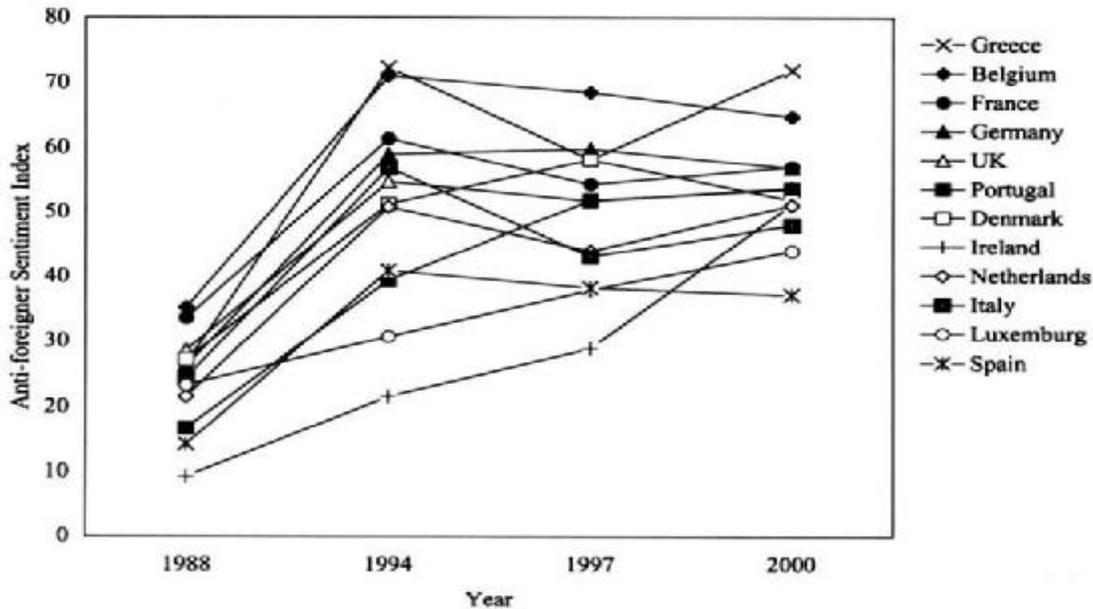
Figure 1. Mean Values of Anti-foreigner Sentiment Index for Twelve European Countries at Four Time Points: 1988, 1994, 1997, and 2000

Bridging between ethnically-based immigrant networks and the broader community to counter centrifugal forces.

Socio-economic security

Although the life chances of most immigrants would be worse in their country of origin, they are generally disadvantaged relative to the majority population in the host country.

The Nativity Wealth Gap - Immigrants generally accumulate less

- inferior modes of incorporation into the labour market.

- age at migration

- obligations to those who remained in home country

Immigrant groups differ with respect to economic success

Wealth of Immigrants and Natives

	Natives			Immigrants			Native / immigrant ratio
	Mean	**Std. Dev.**	**N**	**Mean**	**Std. Dev.**	**N**	
All	223349.55	8427.31	2392	101382.27	13998.67	270	2.2
55-64	267542.46	19473.813	548	128424.120	45302.43	47	2.1
65-75	256273.21	24876.566	392	100040.386	29976.37	28	2.6

Net Worth of Natives and Immigrants in Germany, Socio Economic Panel Study, in PPP $ amounts (Bauer, Cobb-Clark, Hildebrand, Sinning 2007)

Immigrants (50+) Housing Conditions
SHARE Israel, 2005
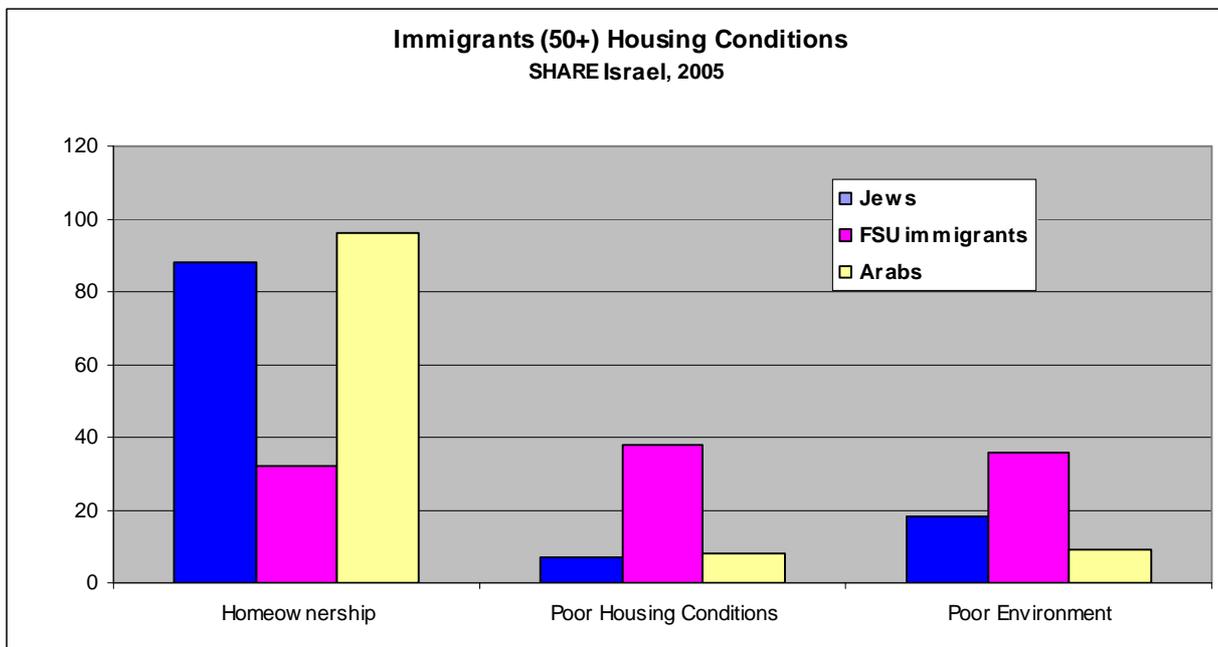
These disparities are found in a society that embraced the immigrants and views them as a returning Diaspora.

Social inclusion

The participation of old age immigrants in multiple spheres of public life.

As guest workers immigrants participated in the most central arena of social action, but were generally absent from other spheres and even more so in older age.

Specifically with respect to welfare benefits, Dwyer et al. 2006. reviewed efforts to unify practices for inclusion (at least for some categories of immigrants). They noted the large variation in immigrants' access to benefits.

Migration for the aged

Migration of caregivers in general and for the ageing population in particular is growing

The factors involved:

- ageing of the population in industrialized societies

 - weakening of the family (decline of multi-generational residence, smaller nuclear family, rising divorce rates)

- growing labour force participation of women

- restructuring of care (from institutions to the home)

- the low cost of immigrant labour

Sources of help and support for those 75+

Legend: serivce help, mixed help, family help, no help
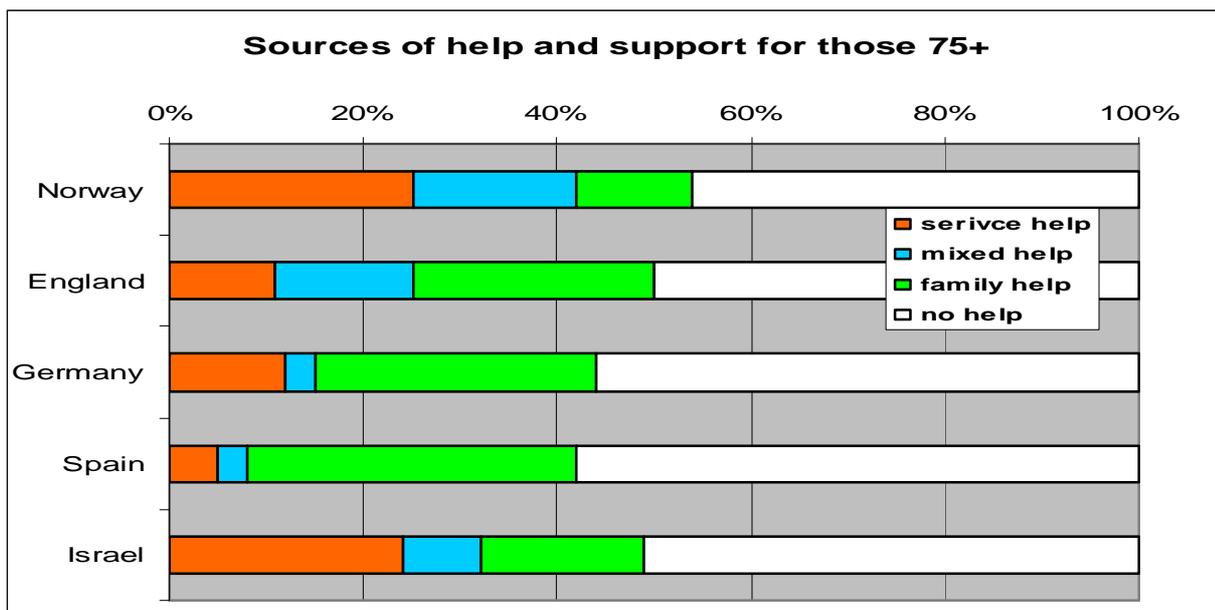
Data from: Lowenstein and Ogg 2003

Immigrants labour replacing both institutional and multi-generational solutions

In Israel

10% of ~ 300,000 person aged 75+are provided 24 hour care in their home supplied almost exclusively by migrant care givers.

In Italy

Sharp decline between 1983-1998 in the proportion of families with old age persons who received help from non-resident family members. Study in Rome showed over half of care in the home for elderly who were not self-sufficient was provided by immigrants.(Reported in Zannata 2004).

Implications of growing immigration for the aged

Macro Level

 - changing profile of immigrant origin

 - care givers are almost exclusively women giving up care for children in home country
  for elderly care in host country

 - as in other areas, low pay immigrant labour undermines local (semi-skilled) care
  occupations

Implications of growing immigration for the aged

Micro relations

 - interaction of two marginalised groups
 - cultural / language issues within the home (Jewish dietary rules in Israel)
 - development of close affective relations
 - the "employer" is dependent; the "employed" may exercise power
 - possible effects on inter-generational relations

Concluding notes

Two recent collections by Warnes and colleagues in 2004 and 2006 placed the issue of older migrants in Europe on the research and policy agenda and noted the diversity of older migrant populations.

This brief presentation aimed to draw the contours of such a project. It also underscored the necessity to study not only the ageing Immigrants, but the growing phenomenon of immigration driven by the ageing of the local as well as the immigrant population

4.5 Health and Social Care for Minority Ethnic Elders Research Investment to Practice Care, Challenges and Progress
Professor Naina Patel, PRIAE and UCLAN

Meeting the Challenge: from Investment in Research to Viable Practices

The Context

'In age, 'race' is blind
In 'race', age is blind'

- An area relatively undeveloped in policy, research when PRIAE began in 1998
Addressing both 'race' and 'age' as areas of multiple identities; discrimination

- This necessitates individual effort and commitment to build and develop the area – often coming from minority ethnic academics and researchers, engaged with minority ethnic communities as those present in the ERA AGE event here – with sometimes support from majority ethnic colleagues (and often established individuals like Prof Walker and others)

- Now that the area of ageing and ethnicity is better established due to these very efforts – it cannot be regarded as 'opportunistic' without research being translated into practice; or valuing research that is already available in the area not being effectively used; nor those who began the struggle to develop the area (individuals and minority ethnic organisations), simply dropped under the label of 'mainstreaming'!!

Research & Developments - the Paradox

"The World of Dementia is Colour-Blind; Minority Organisations are Dementia Blind;
Minority Organisations are Dementia Blind"

(in 1998 when PRIAE established):

| Research Projects < 5 | | Publications < 5 |

Variable Levels of Activity and interest in Projects and Organisations -
From 'No' interest and investment to 'Some' interest and developments

Overall MEC Research Methodology

- <u>Triangulation</u> - multiple sources of info:
    - Users (Elders), Mainstream Care Providers, minority Care Providers across <u>EUROPE</u>
    - Contextual information, demographic data, literature
- Questionnaire-based <u>Interviews</u> to ensure high quality responses
- Coherent set of detailed <u>Questionnaires</u> – 1 for each of the three groups (questions mirrored across three groups)
- Stress on delivery of Services to meet <u>Needs</u>
- Assessment of expected service and perceived service delivery (→ Expectations – Perception <u>Gap</u>)
- Explanation for Gap

Implementation of the MEC Project

- Multidisciplinary
- Some focus on Quality Management Methods
- Qualitative & quantitative methodology
- Trans-national: 10 European countries in study
- Cross-cultural: 25 ethnic groups
- Large sample size:
    - 3277 minority ethnic elders
    - 901 health and social care professionals
    - 312 voluntary organisations
- First major EU/CEE research in this area
- Designed and led by PRIAE: First research award to a Minority Ethnic Institution and an NGO by the EC DG Research

Highest Expectations

Elders	Mainstream	Voluntary
• Privacy to be respected • Feel safe and comfortable • Dignity to be respected • Treat me with respect • Professionals behave with integrity	• Client's dignity respected • Treat clients with respect • Clients should be able to trust staff • Staff should behave with integrity	• Privacy should be respected • Treated equally re access to care • Treat clients with respect • Dignity should be respected

Biggest Gaps

Elders	Mainstream	Voluntary
• Waiting lists and delays • Information provision in own language • Necessary staff for good services for elders • Easy communication • Simple and understandable information • Information about rights	• Alternative care methods • Information provision in own language • Staff understand client's cultural values • Easy to follow procedures and processes	• Waiting lists and delays • Alternative care methods • Interpreter available • Information about rights • Understand cultural values

Mainstream Perspective

- Over 80% (UK); 54% (NL, Hungary) agree specific needs
- Measures to encourage take up of services variable
- All expect increase in BME users
- Services need to adapt to become more accessible
- Collaboration with minority elders/ organisations variable
- Over half said BME users do not reflect share of population

Mainstream Perspective – How to Encourage Take-up of Services
The top 4 reasons for unmet needs were:

- Language problems
- Lack of information
- Lack of understanding of the complex service structure
- Cultural differences

Objective reasons that don't involve professionals themselves - attitude to specific needs, faith etc

Voluntary Sector Perspective

- All minority ethnic organisations provided services
- Ethnic elders' needs partly or poorly met or not met at all
- High level of collaboration with users
- Over 80% wish to expand to new and existing services but lack resources

Recommendations from the MEC Research -- I

- Include BME elders in the formulation
- and shaping of policies
- Involve BME voluntary organisations in
- evaluation, planning and design
- Provide clear information about rights
- Adopt a patient-centred approach
- and abandon stereotypes
- Plan measures for better access

Recommendations from the MEC Research -- II

- Simplify the process for the user
- Provide information on services in
- appropriate languages using various media
- Interpreters available, information
- in different languages
- Take action to reduce high incidence of
- diseases in certain groups
- Policy on race and age equality

Recommendations from the MEC Research -- III

- Recognise changing family structures and demographic trends
- Professional training and CPD must include culture, age and race equality
- Work in partnership with Minority Ethnic voluntary organisations and recognise the importance of their role

The Perpetual Dilemma:
Should we have Separate Care for Each Ethnic Group, no matter how small or with different comparative needs?

Try the
POMEGRANATE
Model of Care say BME Elders

Multiculturalism can work in Care and Housing Services – it already does in many organisations

PRIAE's Other Projects – A Sample

- Mental Health – **CNEOPSA**: Research, Policy, Film
- SCEES in Scotland – **Multiple and complex needs**: Engagement
- Palliative Care – **PALCOPE**: Stories that matter
- Hospital Care – **Dignity in Care**: Patient Diary
- Care Research and Social Capital - **MEC** (Minority Elderly Care): Europe-wide research
- Physical Activity – **AIM** (Ageing in Minorities):
- Cross-cultural training programme
- Policy Literacy - **ME²PN**
- Income, Pensions and
- Anti-discrimination Legislation – **Elders' Rights**
- Employment – **CEMESME** (Contribution of Ethnic Minority Employees to Small and Medium-sized Enterprises) – Research
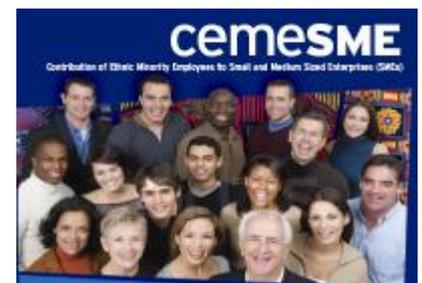
4.6 Intergenerational relationships among immigrants in France
Claudine Attias-Donfut, Director of Research
CNAV, DRV, Paris, France

Some recent empirical data on intergenerational financial transfers

Results from the "PRI"Survey (2003):
Survey on the transition to retirement, generational relationships and family life of immigrants living in France.
Published: Attias-Donfut et al., (2006), L'enracinement, Paris:Armand Colin

Main Objectives

Migration history and the life course : education, work and projects for retirement

Solidarity and financial transfers within Family and social network

Social mobility and integration

Methodology

- Questionnaire face to face lasting 1 h. 30 on average

- CAPI questionnaire

- Size of the sample : 6 211 immigrants living in France aged 45 to 70

- Randomly selected Sample, drawn from population census: any one born outside of France of any foreign origin and living in France in 2003

Specificity of transfer behaviours of migrant families

- Transnational families
- Size of family and solidarity network
- Economic resources (income and wealth)
- Cultural background (norms of solidarity)
- Institutional environment in the two countries (differences in welfare systems)

Transnational families

- 1.6 Million immigrants aged 45-70 living in France, have 4.7 Million children, 11.7 % of them living outside of France

- Among 13% of the families, there is at least one child living outside of France (22% among African families).

Differences in filial norms among immigrants living in France

In your opinion, When an elderly parent has difficulties staying home alone, the children should….(N=6211)
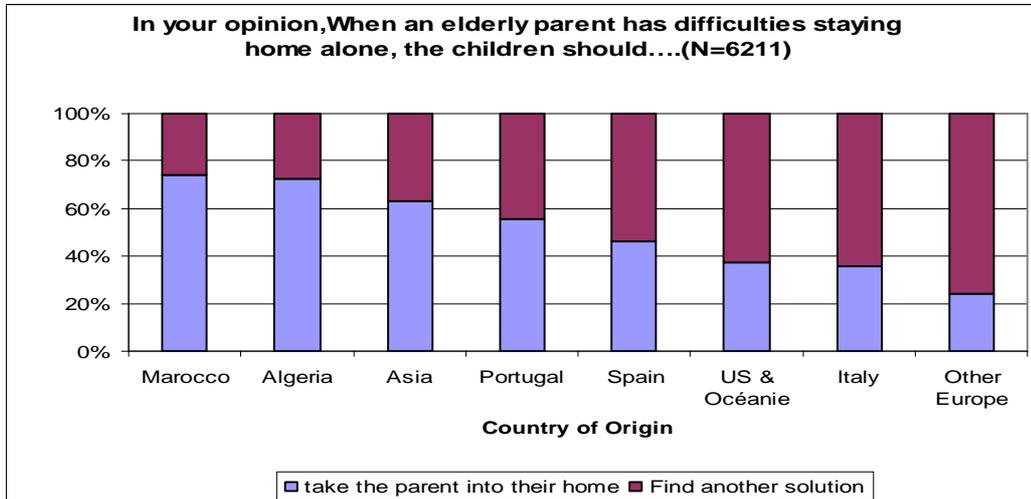
Mobility decisions

- Only 7% of active migrants of all origins express the project to go back to their origin country at the time of retirement:
- about 2% among Algerians
- 10% among Portuguese
- 17% among Sub-Saharan Africans
- between 4 and 6% for other origins.

Financial transfers by immigrants to parents, children and grandchildren, by origin country
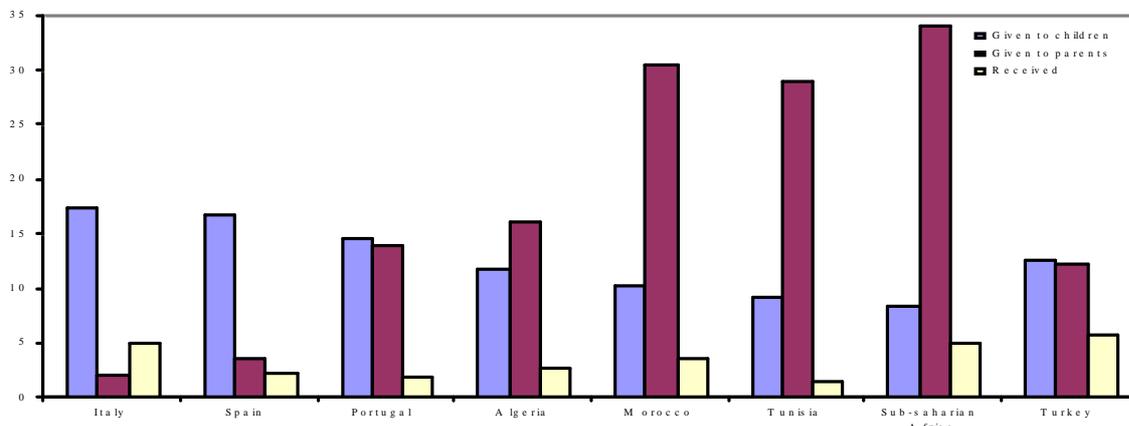
Concluding comments and direction for future analyses

- Consequences of financial transfers ?
- On social, educational and economic attainment of migrants and their children
- Does help to family left behind, either parents or children, decrease the capacity to invest in human capital?
- Increase in the inequality in life chances according to the country and the milieu of origin.

Among other topics to explore

- Generational gaps? (major changes in culture and identity)
- Solidarity, conflicts and ambivalence in intergenerational relations in migrant families
- For migrants parents " …it is a sad satisfaction to watch the young advance, knowing that every step forward is a step away from them (their parents) ". Oscar Handlin (1951), The Uprooted.

4.7   Older Migrant Communities in Austria
Professor Christoph Reinprecht, Department of Sociology, University of Vienna

Plan of Presentation

1. Facts and Figures
2. Issues of research and policy
3. Flashlights on own research

1. Facts and Figures

Elderly migrants in Austria (I)

13% of population 50+ with immigrant history; in total 360.000

50% of elderly migrants are naturalized

- A mirror of migration history
- Czech and German populations from Bohemian countries
- Political migration from state socialist and other totalitarian countries
- Labor migration („guest workers" from Ex-Yugoslavia and Turkey)
- Elite migration (EU, USA, Iran)
- Retirement migration

Elderly migrants in Austria (II)

National and ethnic heterogeneity

- 5 most important sending countries: Serbia, Czech Republic, Germany, Poland, Bosnia-Herzegovina
- in total: 180 countries of origin
- 30% "guest workers" from Ex-Yugoslavia and Turkey

Regional disparities

- Urban and industrial areas: Vienna, urban agglomeration in Rhine valley in Western Austria, industrial sites in Upper Austria and Styria
- Multicultural Vienna: 24% of 50+ have immigrant origins, 50% of elderly migrants are "guest workers"

Ex-"Guest workers" (former Yugoslavia and Turkey)
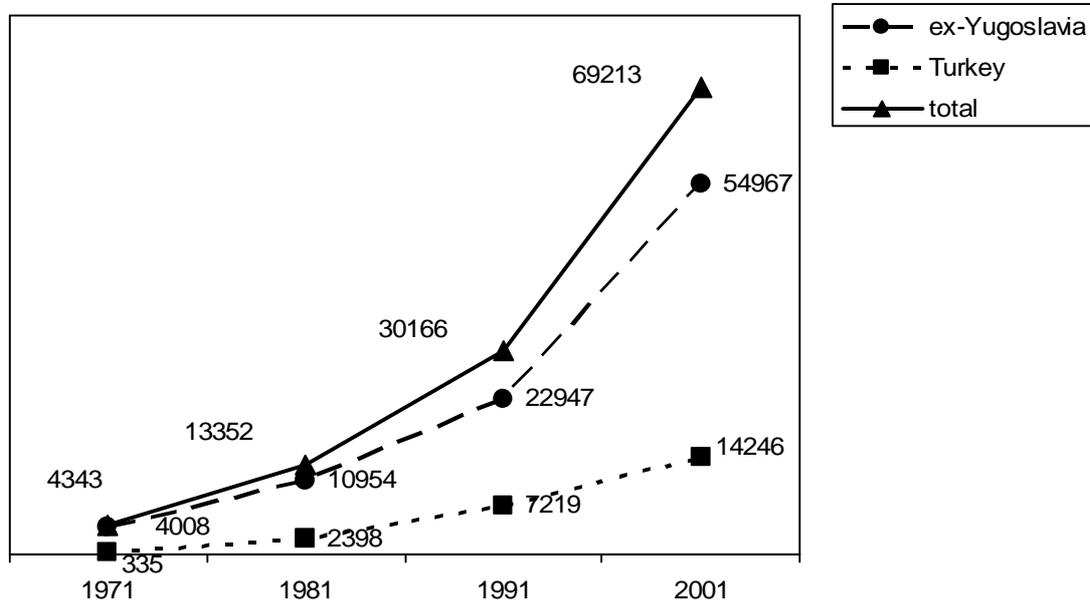
The table concerns only foreign citizens!

Since 1971: x16 number of 50+, x20 number of 60+; x4 all migrant groups

Socio-demographic characteristics and developments

- Elderly migrants are a heterogeneous population with a wide variety of living conditions – but proportion of labour migrants is strongly increasing
- Elderly labour migrants are relatively young – but growing number of very old
- Gender-bias among labour migrants – but feminisation among 60+ and certain groups (Ex-Yugoslavia)
- Many multigenerational households – but increasing singularisation (in particular among Ex-Yugoslavians)
- Low social status is dominating – 2/3 unskilled workers – but differences due to immigration period, national origin and gender

2. Issues of Research and Policy

Research about elderly migrants in Austria

- Elderly migrants not on the research agenda of authorities and research funds
- No specific research interest of social gerontology and migration research

- Empirical research activities since 1998, but most time with limited extension of research
- focus on ex-labour migrants, regional bias; no representative study
- Dominating research hypothesis
  – Double/ triple/ quadruple jeopardy
  – Specific (=cultural) need of Care

Results of research draw a complex picture

Ø Trajectory to retirement is marked by multiple poverty risks and uncertainty, but subjective perceptions often positive
Ø Social networks are of high relevance, but mostly kinship concentrated and socio-spatially segregated
Ø High need for care, but systemic and individual barriers hamper access to health and social services
Ø Homogeneous social position, but heterogeneous living conditions and feelings of identity
Ø Most of old migrants tend to stay in Austria after retirement, but widespread pendulum migration which functions sometimes as a step by step return

Policy toward elderly immigrants

- For a long time not on the political agenda of authorities
- Elderly migrants have become an issue in official national reporting on the elderly (2000), the very old (2007), and the integration of immigrants (2003, 2007)
- Increasing activities on municipal and local levels (particularly in Vienna), with the aim to improve information policy, access to health services, and "culture sensitive care".

⇒ Risk of creating elderly migrants as a "social problem"- category, and of "ethnic groupism"

3. Flashlights on own research

Research details

- 2004-2005, framework of Healthy ageing program (WHO)
- Face-to-face-interviews with 55-80 year old immigrant and autochthonous population in three Viennese neighborhoods
- Standardised and translated questionnaire
- Topics: Economic situation, housing, health, family and social networks, leisure activities, images of ageing, future expectations, immigration history, feelings of belonging…
- Sample: immigrants (Ex-Yugoslavia, Turkey) N=140; autochthonous N=195

Two questions

(a) Precarious trajectories:
    What are elements of success and failure?

(b) Quality of Life despite precarious living conditions?

Precarious trajectories and self-evaluation

	Positive evaluation of own migration project	Negative evaluation of own migration project
stable social position achieved	success (37%)	non-satisfaction (13%)
stable social position not achieved	adaptation (31%)	failure (19%)

Ø Feeling of success and adaptation are dominating despite high deprivation risks and marginalisation in society

Aims of migration: Four dominants

Economic aims	Future related aims	Home country related aims	Autonomy related aims
e.g. improving labor conditions and income	e.g. investment into education for children	e.g. support for family in home country	e.g. independent life

Life balance and realised migration aims

Achieved aims	Economic	Future related	Home country related	Autonomy related
Life balance				
Success	+ Standard of living	+ + Education for children; saving money	+ support for family in home country	+ + independent life
Adaptation			+ investment (propriety) in home country	
Non-Satisfaction		- no money saved	- no support for family in home country	
Failure	- - no Improvement of living standard	- - no investment for children; no money saved	- no propriety in home country	- - no independent life

- Ø Positive life balance goes ahead with a stabilised social position and realised migration aims
- Ø Beside economic aims, achieved future related and autonomy related aims are crucial
- Ø Positive life balance is the most important predictor for the wish to stay in receiving country after retirement, as well as an resource for pendular migration practices

(b) Quality of Life despite precarity ?

(Mean of Scale Values;100=high QOL, 0 =low QOL)
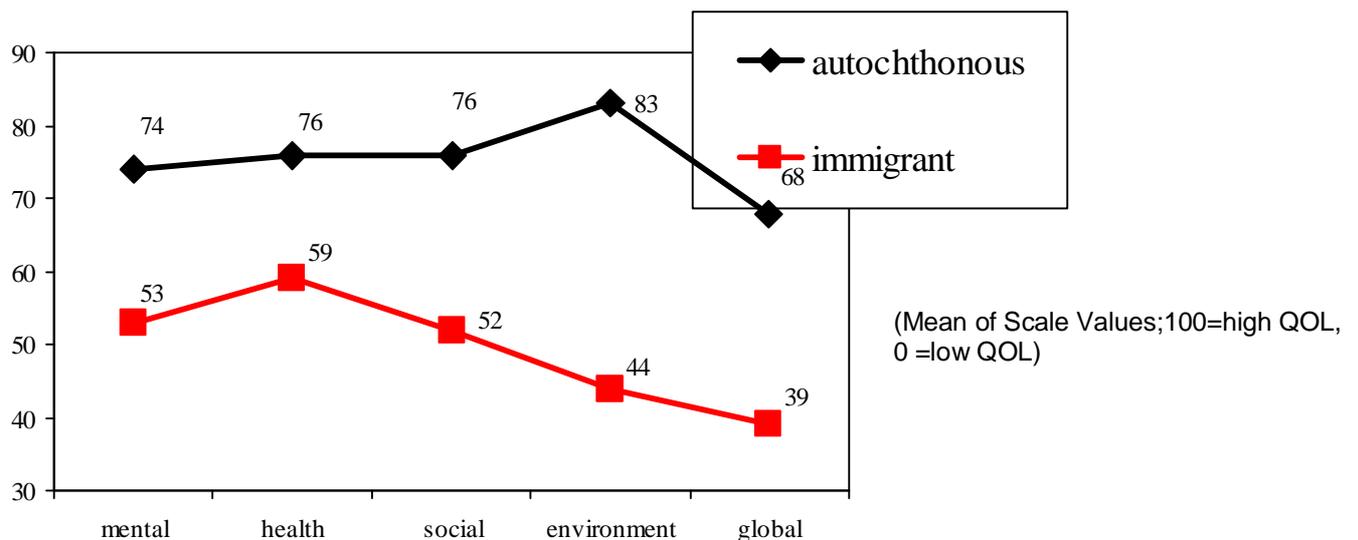
Results are an effect of restrictive living conditions (environmental dimension = enough money for everyday living, good housing, access to information, access to transport, etc.)

Resources of Quality of Life

	global QOL	environmental QOL
Existential resources		
Quality of neighbourhood (positive)		,24
Health (illness)	-,27	
Bounding resources		
Children (number)	,38	
Membership in associations (yes/no)		,26
Activity/ Participation resources		
Activities with peers	,26	,30
Health activities	,32	,28
r2	,38	,42

Results focuses on five relevant research fields:

1. Health is crucial for all sorts of independent living strategies after retirement

2. Access to neighbourhood is a key variable in regard to the often poor housing conditions

3. Social bonds – relevance of
   - intergenerational relations
   - social capital

4. Social embedded and participative activity.

4.8   Ageing and (return) Migration
Alvy Derks-Tai A Pin

The majority of migrants came or were asked to come on the assumption that in the long run they would return to their countries of origin. So there was no wish and no need to promote integration.

But it did not work that way. Now they are facing the prospect of being old in a country in which attitudes towards elders differ from those in their countries of origin and in which the threat of racism is real. Moreover their country of settlement was not prepared to take care of older migrants.

In the Netherlands, after a careful preparation, the Remigration Act came into effect on the 1st of April 2000. The Remigration Act offers those who wish to remigrate to their country of origin and who belong to the target group the facilities with which to realise that wish. The Remigration Act offers two facilities: the basic provision and (with extra facilities) the remigration provision (45+ benefits). The basic provision consists of a once-only allowance for travelling and luggage expenses and the cost of living during the first two months of resettlement.

The remigration provision (45 +-benefits), amongst other things, consists of:

- an annual indexation of the 45+-benefit; this is a monthly benefit that is dependent upon the composition of the family and the standard of living in the country of destination. Changes in the personal circumstances of a remigrant may result in a reduction of the monthly benefit, yet will never result in an increase.
- health insurance and/or a contribution in the costs of a health insurance policy that the remigrant is to take out him/herself.
- the possibility of returning to the Netherlands within one year after
- one's remigration in the event of regret.
- an extended visa for visiting (family in) the Netherlands.

In order to be eligible for this provision, the applicant must:

- be at least 45 years of age on the day of the application.
- have received unemployment benefits, disablement benefits or social security payments or an old age pension (AOW) for the period of at least 6 months.
- had their main residence in the Netherlands for at least 3 solid years.
- be of a nationality other than the Dutch nationality. If the applicant has both the Dutch nationality and the nationality of the country of destination, then he/she must renounce the Dutch nationality before the remigration can take place
- belong to the target group.

Among this target group are Turkish, Moroccan and Surinamese older migrants. I will now limit myself to them. They are a group of 35.000 people, within 10 years it will be 80.000.

First generation migrants will have to deal with and live in two cultures; there will always be feelings of home sickness, nostalgia and the desire to return to their country of origin. Those of them who were labour migrants are not living now in the most adequate way; most of they are housed in disadvantaged districts, have a low income/pension and have health complaints. On the other hand there have been favourable economic, political and social developments in their home countries. It is this combination of practical, financial and emotional reasons which makes the choice of going back definitely so difficult.

If we look at the older migrants who are applying for the remigration provision 45+ benefit, we can draft a profile.

Education

A quarter of the 45+ migrants is illiterate, the largest among the Moroccans. The majority can not or badly express themselves in Dutch. The majority has finished the primary school in their home country but did not enter secondary school. Nearly nobody has got their education in the Netherlands. An exception are the Surinamese people who came to the Netherlands after the independence of Suriname. They have mastered the Dutch language and had (part of) their education in the Netherlands.

Labour experience

The migrants are mostly unskilled labourers. The majority has worked 10 to 20 years in the harbour or industry. On expiry of their labour contract, the migrants are mostly long-termed unemployed. Half of them are longer than five years unemployed.

Integration in Dutch society

The majority have a (very) limited contact with the Dutch native population. They have problems with Dutch authorities like tax department, social security and their companies for pensions and health insurance. A quarter of them are not acquainted with the services and procedures of the Dutch authorities.

Reasons for the wish to return

40% of the older migrants have the wish to return to their home country. The most important reasons are unemployment and homesickness. Also important are: the family, the climate and unspoiled and the improvement of the conditions of life in their country of origin. The unfriendly social climate in the Netherlands nowadays becomes a larger factor for remigration. Also the growing worse of health is a reason to return. They prefer to die in their home country.

Reasons to stay in the Netherlands

They don't want to live far away from their (grand)children. In their country of origin the medical care is less. But the financial situation is crucial. The remigration benefit is to low for living a comfortable life (house rent is high). They also feel that they are attached to the Netherlands despite all. And in the country of origin things has changed compared with the former situation.

Conclusion

Although the fact that the new remigration law has financial grants the number of those returning to their home country is relatively small. The experiences of those who really remigrated is not very positive, due to problems with the social security and problems adapting due to the change of the social context in their home country.

Quite another group is the older Surinamese people who came to the Netherlands for education or for political reasons after the military coup. They had good jobs and a good pension apart from the state pension, in the host society. They don't need the remigration provisions and don't want to loose their Dutch nationality, which they had their whole life. Despite their age they think they can contribute to the rebuilding of their country of origin. They are not satisfied with the social economic circumstances in the Netherlands. And they expect the political climate will change favourably within 10 years in Surinam. They will live there in their owned house or in a sheltered type of dwelling.

As the most important reason for return migration is given: the fear of increase of discrimination, the decrease of respect for other cultures and the quality of life in the Netherlands. Although they are conscious of the changed social context in Surinam while they were living abroad, they expect to find there people and family with whom they can share their history and enjoy a much more relaxed way of living at the end of their life. Without the West European stress they can live healthier.

In Surinam there is a tradition of care instead of organised care. And they believe that in this way the Surinamese proverb saying "you have to return to the earth where your umbilical cord is buried" comes true. That gives satisfaction.

4.9 The European Research Area in Ageing ERA-AGE
Alan Walker, University of Sheffield

§ Introduction to ERA-AGE

§ Purpose of Meeting

www.shef.ac.uk/era-age

Partner Countries

Austria, Finland, France, Germany, Israel, Italy, Luxembourg, Netherlands, Norway, Romania, Sweden, UK (coordinator)

Associate Partner Countries

Latvia, Spain

Objectives

§ To facilitate coordination of existing ageing research programmes
§ To promote interdisciplinary research activities between countries
§ To share good practice in coordination and management of ageing programmes
§ To support the production of European priorities for ageing research programmes
§ To help break down the barriers between ageing research programmes and policy and practice

Key Elements

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                    │   The European Forum      │
                    └──────────────────────────┘
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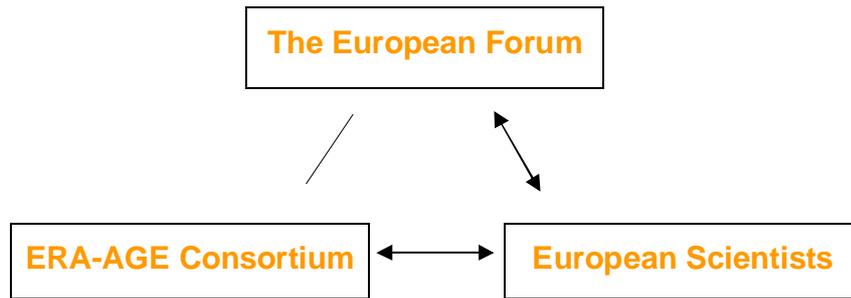
Major achievements

- § A joint post-doctoral fellowship scheme (FLARE)
- § The creation of national agency research forums in 11 countries (based on the UK model)
- § A unique database of European research programmes on ageing
- § A database of European research centres
- § The production of a comprehensive schedule of key research priorities for future ageing research
- § Two good practice guides on research programme management and involving older users in research
- § Establishment of partnerships among ERA-AGE members

European Forum on Ageing and Migration

General aim: To promote the exchange of ideas and knowledge, identify research gaps and good practices and make recommendations for future research.

Specific objectives:
- To assess the needs of older migrants and the impact of migration on older people.
- Identify gaps in knowledge and potential for comparative research.
- Highlight examples of good practice in social inclusion.
- Consider how to promote evidence-based policy and practice in this field.
- Outline the priorities fur further European research.

Format: Plenaries and working groups.

SECTION 5

WORKING GROUP THEMES AND RECOMMENDATIONS

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Participants of the meeting were organised into five working groups. Each group were assigned a Chair and a note taker.

Group 1   Health and Social Care

Chair: Dr Giovanni Lamura, Italian National Research Centre on Ageing (INRCA),
                   Italy
Rapporteur : Dr Claudia Gandin, Instituto Superiore Di Sanita, Italy

Group 2   Migrant Labour in the Eldercare Sectors

Chair: Professors Naina Patel, Policy Research Institute on Ageing & Ethnicity
                   (PRIAE), UK and Noah Lewin-Epstein, Tel Aviv University, Israel,
                    standing in for Professor George Leeson, University of Oxford, UK
*Rapporte*ur: Ian Smith, Policy Research Institute on Ageing & Ethnicity (PRIAE), UK

Group 3   Family and Intergenerational Relationships

Chair: Sandra Torres, NISAL, Linköping University & Mälardalen University, Sweden
*Rapporteu*r: Lorna Warren, University of Sheffield, UK

Group 4   Work, welfare and Retirement

Chair: Peter Dwyer, Nottingham Trent University, UK
Rapporteur: James Goodwin, Help the Aged, UK

Group 5   Community, Social Networks and Participation

Chair: Joe Cooke,   University of Leeds, UK
Rapporteur: Vanessa Burholt, University of Swansea, UK

Working Group Questions

Participants were asked to discuss key generic questions and working group findings were presented to the closing plenary:

1. What has research and policy told us about the key needs of older migrants in this field?

2. What are the key priorities for comparative research on older migrants?

3. What are the key policy priorities for meeting the needs of older migrants and are there examples of good practice that we should be drawing upon?

4. How can we facilitate better links between research, policy and practice in this field?

Working groups comprised research funders, scientists, policy makers and end users from 16 European countries. Discussions were lively and fruitful resulting in the provision of the following valuable findings.

5.1 Research and policy: key needs of older migrants

5.1.1 General

§ The increasing population of European older migrants is diverse and distinct differences exist in respect of their needs.

§ Over generalising the concept 'older migrant' hides diverse migrant situations, biographies and backgrounds. It is therefore important to define and contextualise the concept of older migrants in order to understand their possible needs.

§ Older retired migrants are not always 'healthy and wealthy' – they may experience disadvantage and have needs similar to minority migrants. It is necessary to have equal regard for the needs of all migrant populations.

5.1.2 Health and Social Care

§ Existing findings show that the key health and social care needs of older migrants are often connected to circumstances such as:
- declining health status due to improper use of services/care, harsh working circumstances, excessive consumption of sugary and fatty food, higher risk of hereditary diseases following the increasing practice of marriages within family networks, psychological distress caused by migration
- lower socio-economic status (lower income and educational levels give rise to barriers to access complex and costly treatments and services
- information gap (i.e. non familiarity with procedures and organisation of services providing local health and long term care systems)
- cultural differences (barriers to services that do not fit in with the value system and habits of older migrants' the culture of origin are often encountered for example)
- role of informal care (which many older migrant heavily rely upon, may cause conflict when siblings can't or don't want to provide care any longer).

§ It is important to ensure broader universal access to health with an emphasis on health promotion, prevention, treatment and rehabilitation.

§ The poor health status of immigrants is often due to lack of access to health services. Determinants of access can be defined in terms of legal status (newcomers/legal or illegal), literacy, educational level and language skills all of which can facilitate or hinder access to health services.

- § Research evidence has clearly demonstrated a strong demand for culturally responsive care. Many older migrants particularly confront the significant issue of language barriers.

- § Lack of cultural sensitivity and discriminatory practices can impact on access to health and social care services. It is essential that nongovernmental organisations (NGOs) play an important role in facilitating access (e.g. as informers of older migrants' rights).

- § Service delivery should be undertaken in a culturally sensitive way.

- § An integrated approach that considers migrants, states, labour markets, employers and family is needed.

- Research evidence has demonstrated that there is a growing investment throughout Europe in private health and care services. This development may lead to the inequitable distribution of access to care services by low income groups.

- § The EU vision on health and migration should be developed, shared and promoted.

- § It is important to consider health as a human right and its importance in the context of migration in order to build an overall integrated health strategy.

- § The development of indicators to assess migrant health status is important (especially for older migrants).

- § Comparative analysis of legislation between member states would be useful.

- § Further research on EU demography and epidemiology is required to identify specific health interventions.

- § International cooperation within countries of origin and of destination should be promoted to prevent the 'brain and care drain' of health professionals.

- § European partners should cooperate systematically to advance common programmes to promote good health and coordinated migration practices.

5.1.3   Family and Intergenerational Relationships

- It is problematic to think of older people as equal in terms of social exclusion and deprivation. The ESF Research Network on Older Migrants[1], for example, differentiates between four different types of older migrants: (1) European international labour migrants (EILM);

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[1] Warnes, A.M., Friedrich, K., Kellaher, L. & Torres, S. (2004). The Diversity and Welfare of Older Migrants in Europe. *Ageing and Society* 24(3): 307- 326.

(2) Non-European international labour migrants (NEILM); (3) Family-oriented international retirement migrants (FIRM) and (4) Affluent international retirement migrants (AIRM).

A doctor that chooses to migrate to Southern Europe after retirement has, after all, a different background and most likely different needs than an old farm worker that has come to Europe as a refugee late in life.

- When studying intergenerational relationships in older migrant communities and/or creating policy and services to meet the needs of older migrants and their families it is important to consider the potential sources of diversity (such as class, gender, age upon migration, educational and occupational backgrounds as well as legal status) which have implications for migrants' present situation and future needs.

- Most research conducted in Europe has been relatively ethnic-specific with smaller samples that focus on health care needs for example. While some European researchers, policy makers and practitioners have a theoretical understanding of the diversity of older migrants, few have a clear understanding of what this entails in specific national settings.

- Although there is quite a lot of ethnicity-oriented research, there is, in fact, very little research in this area that is gerontologically-informed. Research on older migrants that focuses on social gerontological concepts and theories should be encouraged for it is only such research that can guarantee that research on these populations is ageing and old-age sensitive.

- Country specific literature reviews are required on older migrants, their families and intergenerational relationships across Europe. Research topics may include, for example, generational solidarity and ambivalence, familial expectations for future care and support, actual patterns of generational interaction, the implications of intergenerational relationships and the reconciliation of work and care for different generations of older migrants. Country specific studies will help to bridge the knowledge gap in regard to the future care social support needs of older people in Europe

- Typical gerontological assumptions regarding ageing in place and continuity in the life course do not necessarily apply to older migrants. Consequently, transnational networks must be taken into account.

- Family situations and reasons for migration should be considered.

5.1.4 Work, Welfare and Retirement

- Older people, including migrants, continue to make valid economic (pay taxes e.g. VAT employment of services) and social contributions (informal care to descendent relatives and partners) in retirement. There are 'winners and losers' in respect of welfare and it is not as straightforward as it first may seem.

- Many older migrants suffer a range of penalties in old age/retirement including financial consequences in comparison to older migrants host populations. Contributory pension schemes, for example, discriminate against many women and minority ethnic communities. Older people who want to return to their country of origin are often held back by lack of access to pensions in both host states and country of origin.

- Assumptions in respect of intergenerational care within migrant population need to be reconsidered in light of changing norms and expectations of some second and third generation members of minority ethnic communities.

The working group defined welfare and work broadly to include access to formal (welfare rights) and informal (e.g. familial, communal and intergenerational support) since they are important when considering the wellbeing of older migrants.

5.1.5 Community, Social Networks and Participation

- Language is a key need but not the only need. For example, most practitioners in the Romanian healthcare sector speak the same language as older migrants. The most important issue in Estonia is how to facilitate building of social networks where cultural and language connections are not necessarily there

- Settlement patterns

- Relocation histories

- Wider determinants of health and well being (e.g. hyper-cyclical patterns of employment, poor housing conditions).

- Unequal access to welfare services and different discriminatory experiences with regard to race and religion.

- Different experiences

Despite the focus on the needs of older migrants, the working group was mindful that migration affects countries in different ways. For example, outward migration is an issue for Romania which can have an impact on families and support networks and create a 'brain drain'.

5.2   Key priorities for comparative research on older migrants

5.2.1 General

- Users should be involved in the development of research and subsequent findings should be presented in a user-friendly format. Research has the power to inform older migrants how other migrants feel about issues, such as how they would like their care to be provided.

Research has an important role to play in giving research participants the confidence to take forward their views to relevant authorities should they choose to do so.

5.2.2   Health and Social Care

Comparative research on older migrants should consider and focus on the following priorities:

- Comparative analyses of relevant Member State legislation in parallel to practice-orientated epistemological research aimed at designing and implementing more focused interventions.

- The role played by informal care and possible difficulties in accessing 'formal' care services.

- The role of multigenerational households especially in countries where policy has recently encouraged families to provide care to frail older people. Will cultural filial norms remain intact, for example, despite current modernisation and individualistic trends?

- Basic research to develop rigorous theoretical concepts and internationally standardised terminology concerning older migrants in different European contexts to capture information on the health status of older migrants and service usage between and within countries via cross-national epidemiological studies.

- Specific longitudinal studies that integrate current statistical sources such as the EU Survey on Income and Living Conditions (EU-SILC) to understand the needs of new older migrant groups.

- Qualitative studies providing the perspectives of older migrants on their life experiences.

5.2.3   Migrant labour in the Eldercare Sectors

- What are the key characteristics of migrant care workers and where are they coming from?

- What preferences do different European countries have in regard to carers' country of origin?

- It is important to map out the relationship between institutional and home based care. In many European countries (e.g. the UK) there is a growing emphasis on maintaining independence and living independently in one's own home for as long as possible. Patterns of migration, increasing diverse older populations in Europe, and the demand for home care by migrant workers who can respond to an older person's cultural and language needs is likely to increase, particularly in countries where there is little or no culturally specific health/care/housing services.

- A European Platform is needed to focus on how comparative research is managed and shared between countries. ERA-AGE should develop this Platform.

- Comparative research is required on how older migrants are handling decisions about their care compared to native older people.

- Investigation of the well-being of migrant carers themselves and systematic monitoring of care provision is needed.

- Regarding 'brain drain', studies are required on how can we balance the competing needs of different nation states for migrant care provision? For example:

    - In the UK, there are more Malawi doctors in Manchester than in Malawi.

    - In Finland, there is the issue if care workers are trained 'too well', they are likely to leave Finland to work in another country. Many Somali migrants who have gained residency in Finland subsequently move to the UK to settle with more established Somali communities. It is therefore difficult to retain skilled migrants.

    - Romanian care workers (particularly nurses) are sought in Italy, Spain and Portugal. Romanian nurses were claimed to be in similar demand to Pilipino nurses. However, many Romanian nurses return to Romania later in life. Consequently, returned migration is an issue.

    - There are many Polish carers in Israel since many older Jewish people spoke Polish.

- Investigate structural discrimination against older migrants and its implication for the role of migrant carers. Some such investigation could be undertaken by a European Platform.

5.2.4   Family and Intergenerational Relationships

- Studies ought to focus on the way in which older migrants understand family and intergenerational relationships and expectations and the impact that these understandings have on, for example, family interactions, care, support and expectations in old age.

- Factors motivating migration and the impact of migration (including seasonal migration) on families left behind and migrant families themselves once they settle in their host countries.

- The impact of social divisions on the process of migration: in particular, the role of gender, social and employment status; educational and occupational backgrounds and legal status.

- The impact that social divisions may have in the reconciliation of work and care should be a priority since this may affect family and intergenerational relationships.

- The role of faith in the maintenance and disruption of family ties.

- The impact of new technology in shaping and maintaining family and intergenerational (especially transnational) relationships.

- The global implications of older migrant workers' and their families' remittances in and out of different European countries especially with regard to the impact that implications have on family and intergenerational relationships both within and beyond Europe.

- The way in which different European countries' migration, migrant and welfare policies affect family and intergenerational relationships.

- Issues regarding intergenerational family relations, living arrangements should be considered while developing conceptual innovations through grounded theory. How do veteran immigrant groups assist new members belonging to the same ethnic background?

- Integration processes and how they may affect the family units and dynamics within families including elder and child care and financial management.

- Policy-makers and implementers' assumptions about migrants and conditions of migration and the impact of their assumptions in regard to services that are offered to older migrants.

- Health and elderly care workers' assumptions about older migrants and how these assumptions impact on the quality and user-friendliness of service provision.

In consideration of the aforementioned topics, the working group stressed that comparative work on older migrants should be carried out in a migration, culture and social position-sensitive manner which may prove to be quite challenging and costly. The working group therefore stressed the following points on how research should be carried out:

- There is a need to be aware of the fact that the term older migrant means different things across Europe (Southern European researchers use, for example, the term to refer to older people that have migrated recently whereas researchers in Northern Europe – and particularly the Nordic countries – used the term to refer to non-natives regardless of whether they are naturalized or not).

- Identified knowledge gaps have particular epistemological and methodological implications. They highlight the important contribution of anthropological studies and the need for methodological approaches that are sensitive enough to cultural variation in meaning making, values, norms and understandings.

- Evidence from research in this area suggests that the application of established gerontological approaches and concepts to cross-national studies of older migrants might not always be suitable. Large surveys may not be the best way to collect data on this group.

- There is a need for a transnational focus whereby projects research the experiences of older migrants and their family and intergenerational relationships within the host country <u>and</u> country of origin.

- Funding organisations need to be aware of the need to adequately fund this type of research. Projects on older migrants often require more financial support due to the need for the collection of data within and beyond host countries, interpreters, translators for the culture and language sensitive adaptation of scales, measurements and interview guides etc.

- A European database on family relations should be compiled from country specific literature.

5.2.5   Work, Welfare and Retirement

- We need good consistent comparative quantitative data for older migrants in Europe broken down by age, country of origin, gender and return migration.

- A comparative socio-legal study of the social citizenship status and rights of older migrants in Europe. There is a need to consider policy and practice at EU level and in individual member states and to combine with research tools to explore the impact of status on the lived experiences of older migrants in Europe (including returnees).

- A comparative study of EU member states in respect of the return migration of older migrants.

- Key research questions include:

  - how do the welfare experiences of different types of older migrants vary?
  - how has international migration impacted on older migrants needs?
  - what impact do gender and ethnicity have in mediating the needs of older migrants?

5.2.6   Community, Social Networks and Participation

- Improved conceptualisation of BME social and support networks since they are inadequately defined at present:

- Who are network members (e.g. substitution)?
- What are the quality and/or strengths of relationships?
- How do these networks change over time (e.g. post retirement)?
- What is the overall importance of social networks and what role do they play in the lives of older migrants?

Research on older people's social and support networks tend to focus on the indigenous population. Consequently network typologies or social resource measures have been developed with native populations which may not be appropriate to adequately capture the nuances of older migrant networks (especially when these consist of extended family networks).

- More focus on the needs of older migrants in rural areas – most research concentrates on urban areas where populations or clusters of ethnic groups are easier to identify. This area will become increasingly important as rural policies focus on recruiting migrants to work in rural areas. The ageing of the current rural-based workforce has implications for gerontological research and future policies for older populations.

- The robustness of previous research findings needs to be tested and the needs of older migrants that do not access community and cultural organisations should be explored. Current research tends to focus on those engaged with community services (e.g. day centres) or community organisations. Consequently, we ought to ensure that research is not only conducted with 'majority' migrant groups.

- Research on the needs of older illegal immigrants is lacking. Societies may develop evidence-based approaches to support people in a way that deters them from resorting to illegal activity in order to achieve a decent quality of life.

- Evaluation of the cost benefits of family reunification (parents joining migrant children) and the potential impact for the EU and other sending countries. Older migrants do not have a right to join adult children in host countries under the EU directive which may result in return migration to countries of origin. This may not be in the interest of host countries that have invested considerable resources in developing 'human capital' through education and training.

- Research to understand the role of community groups in facilitating access to mainstream services and filling the gaps in mainstream service provision.

- Research to understand the provision of services and information by nongovernmental organisations (NGOs) groups. What are the roles and benefits of participation in community organisations for minority ethnic older people? Why is some migrants participation orientated in this direction rather than other forms of social and support networks? What is the relationship between informal support, NGOs' support and formal care provision to older migrants?

5.3 Key policy priorities and good practice for meeting the needs of older migrants

5.3.1 Health and Social Care

- Identification and removal of barriers affecting use of existing care services. There are two common gaps across Europe between what older migrants expect and how services are delivered: the wish to be treated with respect and lack of service information including how to access them.

- It is important to develop concrete policies and measures which are tailored to older migrant's health and social care needs.

- Approaches to good practice:

  - inclusion of older migrant representatives in the formulation, shaping and evaluation of policies and services
  - provision of clear simple information in different languages about individual rights in using care services
  - avoidance dependency and reliance on family members only
  - development of specific measures to improve cultural sensitivity of care
  - implementation of policy on race and age equality as human rights to ensure equal access and prevention of racism and discrimination
  - promoting professional training to increase awareness of cultural, age and race equality on how to care for minority ethnic users.

- Public campaigns and initiatives to recognise the positive contribution of older migrants to society and 'successful' migrant biographies to challenge the prevailing 'problematic' image that is often attached to this group.

- Identify and remove existing institutional discrimination against older migrants.

- Promote international exchange of information on best practice models.

5.3.2 Migrant Labour in the Eldercare Sectors

- Policy makers need to understand how people want to be cared for and the role migration can reasonably play in bridging existing gaps

- Delivering care that meets cultural and language needs is a significant issue for policy makers.

- Countries need to develop collaborative labour migration policies to ensure that they support the development of all European countries.

- Allocated resources for appropriate training of migrant care workers is important. Policy makers should explore how migrant care worker training might facilitate wider integration into labour markets.

This requires a forward-thinking approach that recognises current patterns of migration/return and investment in migrant care workers in the long-term. In Finland, for example, there are policies to attract migrants but no plans for their future.

- Tackling the low status of care work is of key importance.

- Strong national regulation is needed to ensure protection of older people and migrant carers themselves. There are many European examples of older people and carers abuse. Migrant care workers policies need to protect older people and carers who may be situated in exploitative and vulnerable positions. In Israel for example, carers have been exploited by families when licences have expired.

5.3.3 Family and Intergenerational Relationships

- Collaborations that exist between researchers, policy makers, practitioners and representatives from older migrant organisations need to be widened to guarantee that the diversity of older migrants are informing our research, policies and practice.

- Collaboration with non-governmental organisations (NGOs) such as Help the Aged and Age Concern England who campaign on behalf of older people and are focused on achieving policy impact should be made aware not only of the diversity of older migrants but also of their needs.

- Researchers need to include the voices of policy makers and practitioners in research if they are to adequately map their perceptions of older migrants, family and intergenerational relationships and the constraints under which they operate.

- Appropriate training and career ladders should be developed for migrant care workers.

5.3.4 Work, Welfare and Retirement

- Involvement of users at all stages of the research process (see Section 5.4.4 below). Policy makers should engage with and meaningfully involve older migrants in the development, delivery and evaluation of services.

- Access to adequate material security and appropriate health and social care services as required in old age.

- Freedom from discrimination at a range of levels including racial/ethnic discrimination and discrimination inherent in categorisation of migrants at the level of EU law.

5.3.5 Community, Social Networks and Participation

- Improved national data on the lives of older migrants (e.g. inclusion key variables to identify characteristics and needs of older migrants in national surveys such as country of birth, length of residence) mainstreaming migration research.

- Broader qualitative case-study research to inform policy.

- Linking local, regional and national with European research.

The working group focused on the need for more knowledge since they suggested there was a lack of robust evidence on older migrants to make strong recommendations for key policy priorities.

5.4 Facilitating improved links between research, policy and practice

5.4.1 Health and Social Care

- Systematically include questions on nationality, ethnic group and knowledge of local language when collecting statistics on use of health and social care services.

- Culturally sensitive care services should regularly involve policy makers, researchers, professionals and older migrants in each of the following phases:
  - promoting contacts via 'key figures' trusted by older migrants such as local ethnic group representatives
  - exchanging information via data collection on barriers preventing older migrants from seeking 'formal' support and providing advice about existing care services
  - improving system sensitivity by monitoring the capacity of current procedures to assess older migrant care needs, verifying the ability of existing services to meet these needs and, if necessary, modifying/integrating existing services
  - monitoring impact of changes over time and implement them if needed

5.4.2 Migrant Labour in the Eldercare Sectors

- A database on policy makers specialising in migration, ageing etc. is needed which researchers, service providers and users can access to better disseminate evidence.

- Knowledge transfer should be a key priority of any initiative. A European Platform should be developed by ERA-AGE to promote knowledge transfer.

- Researchers may play an important role in highlighting the positive contribution migrant workers make to economies and societies, as well as any challenges associated with migration.

5.4.3 Family and Intergenerational relationships

- Adequate and flexible-enough funding calls to finance the linkages between research, policy, practice and countries are needed (not all funders across Europe finance these linkages even though they expect them to occur).

- Organisations that foster these linkages should be created across Europe in order to facilitate collaboration between researchers, policy makers and practitioners and improve our ability to meet older migrants' needs.

- A European Platform is required to promote knowledge transfer and disseminate evidence base data

5.4.4 Work, Welfare and Retirement

- The issue of migration and older people is a neglected one and the profile of this area needs to be raised within the community of research funders, e.g. Addiction Recovery Foundation (ARF), UK.

- Policy bodies such as the Department for International Development (DFID), UK and the Department for Work and Pensions (DWP), UK and a consortium of NGOs, older people's groups and other stakeholders should be targeted specifically with research data as it emerges.

- Use should be made of existing vehicles of the transmission of important messages, e.g. MIPA implementation (UN) or the new Knowledge Transfer Network (EPSRC) in the UK.

- The establishment of a special interest group of stakeholders across Europe including researchers would be extremely valuable.

5.4.5 Community, Social Networks and Participation

- Develop forums and/or other national and local groups and instruments for creating better welfare of older migrants.

- Examples of good practice in facilitating links between research policy and practice include:

  - Swedish Social Platforms (Research & Development, Research into Practice with all stakeholders)

    Social Platforms are partly inspired by the European Technology Platforms, which is considered to be a promising concept. According to ETP the industry initiates and defines the need for new research, which in turn leads to new types of collaborations between industry and universities. This collaboration has also been successful in transforming research into commercial use. It Is argued that a social platform has a lot to learn from that kind of strategy.

Policy makers, politicians, practitioners and clients all have valuable experiences that bring new aspects and perspectives into the field, for example in regard to migration and ageing. A social platform is a tool for shaping the right questions and paving the way for implementing new research.

Regional Social Platforms in Sweden are comprised of municipalities, health care organisations and researchers. They largely involve professionals who aim to develop better practice for users. These structures are used to identify research needs of practitioners, bring research findings into the forum to explore what research means for practice and develop better practice. There are 20 across the regions in Sweden, which all meet together once a year. The effectiveness of the groups depends very much on group dynamics. Regional R & D units provide examples of good practice and they also share valuable knowledge with other regions in Europe.

- Wales strategy for older people: Older People and Ageing Research & Development Network Cymru (OPAN Cymru); Older People's Platform

Although not focused on migrant groups in Wales, the Strategy for Older People has identified key themes which need to be addressed to improve the lives of older people in the Principality. In order to do this they have put into place structures which help to facilitate the links between research, policy and practice. One of these structures is the Older People and Ageing Research & Development Network Cymru (OPAN Cymru). The multi-disciplinary research network links research to practice and policy-making through shared research initiatives, workshops, seminars, conferences and the website. OPAN Cymru facilitates collaborative research and ensures that the findings from research on older people across Wales are disseminated to all interested parties. Although OPAN Cymru is lead by University researchers it is also possible for older people themselves to influence the local research or practice agenda. In each Local Authority there is a co-ordinator for the Strategy for Older People. These co-ordinators have been responsible for setting up Older People's Fora, to whom the LA are directly accountable. These fora comprise of older people living in the area. An example of the aims of one of the forum are to: provide advice on policies in relation to older people; provide a channel of communication from older people to the Council and its partners; act as a focus for debate on matter of concern to older people; make recommendations to and be consulted by the Council and its partners on matter relating to older people. Thus, in Wales, there is a meshing of research, policy and practice, which can also be influenced by older people.

- Multidisciplinary conferences and seminars in Estonia

These dissemination events are used to identify research gaps in migration research/policy. The University is proactive in engaging of a wide range of influential people in these events (e.g. national policy makers and Estonian MEPs).

All of the examples above could be applied to local and regional areas to stimulate the integration of migrant research, policy and practice. However, it is clear that there is a need for a strategic approach to bring together regional initiatives to impact on the national policy and practice level. In addition, there is a need for a strategy to bring national 'best practice' together on the European level. Broad engagement with relevant actors and agencies that have an indirect and direct effect on the lives of older migrants is recommended.

SECTION 6

NEXT STEPS FOR DEVELOPING COLLABORATION AND FUTURE ACTIVITIES

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6.1. Next steps for developing collaboration.

Following the recommendations of the Forum, ERA-AGE and future potential partners should:

- Further explore the concept of a European Platform to help structure ageing (and migration) research in Europe. Forum recommendations should be considered in particular the possibility of:

  - managing and sharing comparative research.

  - promoting good practice to key stakeholders across all sectors.

  - sharing and pooling of resources and linking of administrative and research databases.

  - developing a policy makers database.

  - promoting research priorities.

  - facilitating the development of partnerships between disciplines and between research, policy and practice.

  - further developing a common language and understanding of problems.

  - finding ways to raise awareness and support within Europe for ageing and migration research and identifying/developing further sources of funding.

  - establishing a platform for special interest groups and Forums across Europe.

  - promoting knowledge transfer.

  - promoting and implementing end user involvement.

  - promoting public campaigns and initiatives in the field of ageing research.

6.2. Next meeting of the European Forum

The final pivotal ERA-AGE Forum meeting will take place in Brussels in late 2008. Further details will be provided when appropriate on the ERA-AGE website and in forthcoming newsletters.

SECTION 7

APPENDICES

Appendix A

LIST OF PARTICIPANTS

NAME	ORGANISATION	COUNTRY
Prof Lars Andersson	National Institute for the Study of Ageing and Later Life (NISAL)	Sweden
Dr Claudine Attias-Donfut	Caisse Nationale D'Assurance Viellesse	France
Prof Claudio Bolzman	University of Applied Sciences	Switzerland
Isabel Borges	AGE – The European Older People's Platform	Belgium
Prof Vanessa Burholt	University of Swansea	UK
Prof Sarah Carmel	Ben-Gurion University of the Negev	Israel
Kerstin Carsjo	Swedish Council for Working Life & Social Research	Sweden
Dr Joe Cook	Leeds University	UK
Prof Mihail Coculescu	The Ministry of Health and Family	Romania
Dr Aurelia Curaj	Executive Agency for Higher Education & Research Funding (UEFISCSU)	Romania
Catherine Daurele	Institute National des Etudes Demographiques (INED)	France
Dr Alvy Derks	Older Women's Network – Europe	Netherlands
Prof Peter Dwyer	Nottingham Trent University	UK
Constantinos Fotakis	European Commission	Brussels
Dr Claudia Gandin	Istituto Superiore di Sanita	Italy
Anna Garrett	Age Concern England	UK

Anibal Gonzalez	Ministry of Education	Spain
Dr James Goodwin	Help the Aged	UK
Francois Heran	Institut National des Etudes Demographiques (INED)	France
Patrick Hermange	Caisse National D'Assurance Vieillesse	France
Dr Claudia Hartmann-Hirsch	CEPS/INSTEAD	Luxembourg
Prof Marja Jylha	School of Public Health, University of Tampere	Finland
Michele Kail	Centre National de la Recherche Scientifique (CNRS)	France
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Appendix B

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All these are members of the Steering Committee; there are two additional members:
Jan-Arne Eilertsen and Anne-Sophie Parent

Appendix C

GLOSSARY OF ACRONYMS

AGE	-	European Older Peoples' Platform
AIM	-	Ageing in Minorities
AIRM	-	Affluent International Retirement Migrants
AOW	-	The Dutch National Old Age Pensions Act
ARF	-	Addiction Recovery Foundation
BME	-	Black, Minority & Ethnic
CASP	-	Control, autonomy, self realisation, pleasure.
CNAV	-	Caisse Nationale D'Assurance Vieillesse
CNEOPSA	-	Care Needs of Ethnic Older People Suffering from Alzheimers
CNSA	-	Caisse Nationale de Solidarite pour l'Autonomie
CPD	-	Continuing Professional Development
DFID	-	Department for International Development
DWP	-	Department for Work and Pensions
EC	-	European Commission
EILM	-	European International Labour Migrants
ERA	-	European Research Area
ERA-AGE	-	European Research Area in Ageing
ESPRC	-	Engineering & Physical Sciences Research Council
ESRC	-	Economic and Social Research Council
EU	-	European Union

GLOSSARY OF ACRONYMS – Continued

EU SILC	-	EU Survey on Income & Living Conditions
FIRM	-	Family-oriented International Retirement Migrants
FP6	-	Framework Programme 6
FP7	-	Framework Programme 7
ICT	-	Intra-Corporate Transferees
ISS	-	Istituto Superiore di Sanità
INCRCA	-	Italian National Research Centre on Ageing
INP23	-	National Institute of Nuclear and Particle Physics
INSU	-	National Institute of Earth Sciences and Astronomy
MMPU	-	Mathematics, Physics, Earth Sciences and Astronomy
MEC	-	Minority Elderly Care Research
ME^{2}PN	-	Minority Ethnic Elders Policy Network
MIPA	-	Madrid International Plan of Action on Ageing
MOH	-	Ministry of Health
MS	-	Member States
NCAR	-	National Collaboration on Ageing Research
NEILM	-	Non-European International Labour Migrants
NGO	-	Nongovernmental organisation
OPAN Cymru	-	Old People and Ageing Research & Development Network Cymru
PALCOPE	-	Palliative Care, Older People and Ethnicity
PRIAE	-	Policy Research Institute on Ageing & Ethnicity
SME	-	Small and Medium Sized Enterprises

GLOSSARY OF ACRONYMS – Continued

ST21   -   Information and Engineering Sciences and Technologies

UCLAN   -   University of Central Lancashire

WHO   -   World Health Organisation