

Transnational care and persistent inequalities: a comparative study of 'stayers'

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Collaborative research



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Outline

- Ageing, migration and development
- To what extent are inequalities reproduced through the migration process?
- Evidence from Bolivian case study
- Conclusion

Ageing, migration and development

1. Migration and development

- Social consequences of migration
- Most policy and research interest has been on children
- Literature on the ‘left behind’ has left behind the older generation (Toyota et al. 2007)
- Migration has negative consequences for older people left behind (Shetty 2012; Vullnetari and King 2008)

2. Ageing and migration

- Retirement migration (Ackers and Dwyer 2002; King, Warnes and Williams 2000)
- Ageing in place (Buffel, Phillipson and Scharf 2013; Hunter 2011; Karl and Torres 2016)
- Role of transnational workers in elderly care (Boccagni 2017; King et al 2017; Näre 2013)

3. Transnational care (Baldassar et al. 2007)

- Physical proximity is not essential for care
- It is possible to care across transnational fields
- Difference in what constitutes care and how this is carried out

Q1: What form does transnational care take in developing countries?

4. Older people in lower-income countries

- Generally more vulnerable than those in higher-income countries
- Most older people in low income countries continue to be economically active in later life (Farah et al./ HelpAge Intl 2012; Barrientos et al. 2003)
- They are not just ‘receivers’ of care
- Many also have caring responsibilities, especially in contexts of high out-migration (Bastia 2009)

5. Older people who are 'left behind' are not a homogeneous group of people

- Age (Vullnetari and King 2008)
- Social position (Kreager 2006; Kreager and Schroder-Butterfill 2007)
- Residence (urban/ peri-urban/ rural)
- Migration streams

Q2: Are social inequalities in the Global South challenged or reproduced through migration?

Intersectionality

- Challenges essentialising notions of identity
- Analyses how different forms of disadvantage intersect ... “interlocking systems of oppression” (Hill Collins 1990)
- Forms of oppression are interconnected and interdependent
- One form of oppression is NOT privileged over another
- Explaining inequality through a single framework of oppression becomes impossible (Valentine 2007)

Migration and ageing in Bolivia

- Bolivian migration
 - Historically regional, to Argentina, Chile, and Brazil
 - US also an important destination
 - Post 2001: Spain, Italy
- 6.8% population lives abroad (IOM 2011)
- 11% of the households have somebody living abroad (Census 2012)
- Life expectancy 67 years (70 for women and 65 for men)
- Cash transfers for over 60s (Renta Dignidad)

Methodology

- In-depth interviews
- Men and women 60 years and over
- Urban, peri-urban and rural areas
 - 22 in Cochabamba carried out 2013
 - 20 in Tarija 2014
 - 21 interviews in Santa Cruz 2015-16
 - 20 interviews in La Paz 2019
 - 18 interviews in Oruro 2019/2020



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Rural areas: increased vulnerability

- Migration is a livelihood strategy
 - Land fragmentation (Cochabamba and Tarija)
 - Access to water (Tarija)
 - Sometimes migration is seen as the only option (Tarija)
- Elderly left-behind continue to work to support themselves
 - In rural areas, emigration of younger people makes land cultivation difficult
 - Increased insecurity for the left-behind
- Health services minimal (Tarija, Santa Cruz)

“I never wanted him to go, I was demoralised, my eldest son, I wanted him to be a doctor, we would have had money as well, but it didn’t happen (Cbba man **rural** 72 years old).

“For me as a mother it’s good, because I had always wanted my daughter to migrate, to get her specialism so that she realises her potential as a professional. That’s why I am satisfied, because my daughter has accomplished her mission to do her specialism” (Cbba woman **urban** 63 years old).

Urban areas: consolidating privilege coupled with cases of vulnerability

- Increased financial security in urban areas
 - Investments looked after by the migrants' parents
 - Migration facilitating further education and professional jobs
 - Access to visas for travel and private health care

BUT

- Also some cases of extreme vulnerability
 - Breaking down of social networks because of rural-urban migration and/or death of main carer
 - Financially rich households (remittances) but not able to convert this into wellbeing (poor health, vulnerable children)

Peri-urban areas

- Migration for 'low-skilled' work (care, garment work, construction) but relatively high levels of education and able to convert remittances into greater financial security
- A sense of community still exists – social networks viable

Transnational care: Becoming mothers again

“I feel better, I built the houses for my children, I am well and built the houses, I bought plots for my children. What I want is that they be better because on my own I wouldn't have been able [to do all this]. My daughter then after building her house, she left me my grandchildren and she left [...] I feel better now because she left me with my grandchildren” (Cbba woman peri-urban 60 years old).

- Age of interviewee
- Age of grandchildren

Role of adult children in family

“So I let them make their decisions and if they want to travel, well, let them travel, and if they want to come back, they will do it and if they want to live with me, they can do so and if not, that’s fine as well, in their full freedom”
(Cbba man **urban** 67 years old).

Conclusion: policy

- Urgent need to improve health in general and geriatric care in particular
- Support older people's economic activities, including in rural areas
- Regional and local governments are already setting up homes for older citizens, including day centres
- Continue supporting campaigns to increase awareness of the rights and needs of older citizens

Conclusion: Rethinking transnational care

- Transnational care is possible (Baldassar et al. 2007)
- However, it is not available to everyone.
- Continuum of transnational care, affected by:
 - migration policies
 - migration destinations
 - state policies towards the elderly
 - cultural norms around elderly care