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# Potential of elderly persons – from homeland to home abroad<sup>1</sup>

## Streszczenie

Potencjał seniora – od domu rodzinnego do domu na emigracji

Celem opracowania jest ukazanie potencjału seniorów w prowadzeniu gospodarstw domowych swoich dzieci i w opiece nad wnukami, a także roli ludzi starych w powiązaniu z procesami migracji ich dzieci. Jest to analogiczna rola w opiece, którą realizują na rzecz wnuków w kraju albo za granicą, w zależności od tego, kto jest uczestnikiem emigracji. Jednak w sytuacji ograniczenia sprawności, sami stają się odbiorcami opieki, najczęściej w kraju pochodzenia. Czy uzyskują wystarczającą opiekę?

## Słowa kluczowe:

ludzie starzy, potencjał seniorów, opieka, migracje

## Abstract

The purpose of this study is to demonstrate the potential of elderly persons in managing their children's households and in taking care of their grandchildren, as well as the roles of elderly people in connection with the migration processes of their children. Their role is analogous to the one which they assume when taking care of their grandchildren either at home or abroad, depending on who the emigrant is. Yet, in the case of reduced mobility, they become the recipients of such care themselves; most often in their country of origin. Do they receive sufficient care?

## Key words:

elderly people, potential of elderly persons, care, migration

## 1. Introduction

For many reasons, elderly people were not connected to any significant social problems. First of all, this was due to their constituting a relatively small group within the population as a whole. The average life expectancy was low, mainly due to high infant and youth mortality, but also due to general quality of life which, along with low levels of hygiene and underdeveloped medical services, were not conducive to a long lifespan. This does not mean that there were no elderly people, however, it was rather the exception to the rule. Such people were considered to have rich life experience and

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their authority was respected. Both their close relatives and other members of society took their advice seriously. However, their primary place in life was their family home, as their families made most use of their life experience. With time, they took over the roles of other family members, while their families maintained them as there were no pension systems. Additionally, the relation between elderly people and the rest of the population took the form of neighbours' presence on the one hand (e.g. past acquaintances and unconventional treatment methods) and control in cases where they were looked after by their family on the other. In many cases such control was a special stimulus, but also a form of support in caring for the elderly person in question. As recently as a few decades ago when the percentage of population in post-productive age (60/65 years) was low but rising, the issues of elderly people in Central and Eastern Europe, including Poland, were ignored. Legislative and organisational solutions for this group were insufficient. For this reason, some problems arose. More and more frequently, the previous traditional participation of the whole family in carrying for the elderly person, as well as the participation of the local community, started disappearing. The system of informal and formal care that was carried out by the family and guaranteed by the state administration and local authorities got weaker and weaker. The consequences of this situation was demonstrated in the expert analysis of the Polish Gerontological Association in the 1990s. It said that "in many environments, particularly rural ones, the situation of disabled elderly people is dramatic. They die in solitude and negligence, because of insufficient financial resources, personal abilities and social aid" (Halicka, Pędich, Szatur-Jaworska, 1996). Elżbieta Trafiałek made similar observations a few years later: "The living conditions of elderly people in Poland, their fitness level, access to health care services, recreation, culture, education and other facilities did not satisfy their needs – for years they were worse off than for their peers from Western European countries and North America. Intercultural comparisons justify the thesis about the deprivation of their needs" (Trafiałek 2003). At the same time, the stereotype of elderly people as poor and in need of care was being strengthened (Kołodziej 2006, Miszczak 2006).

In the present analysis I do not undermine the conclusions drawn by these authors. However, I would like to reveal the well-preserved potential of elderly people and the areas in which they are used for the benefit of the family.

## **2. Trends and prognoses**

The dynamics of ageing have gained momentum recently. This is particularly evident in many European countries where the population of elderly people rose from 46 million in 1950 to 112 million in 2000, i.e. from 8% to 12%. The estimations anticipate further increase. In such countries as Italy, Greece and Sweden the percentage of elderly

people in 2000 were as high as 18.2%, 17.3% and 17.2% respectively (Agencja... 2010). Given this situation, the problems of population ageing exceed individual, family and local solutions – they require systemic solutions and bear evidence to the existence of a global care deficit (Isaksen, Devi, Hochschild, 2008).

At the same time, it should be emphasised that the problems primarily concern rich countries, mainly in Eastern Europe. Canada and the United States are affected much less. On the one hand, the problems are the results of population aging in rich countries. On the other hand, in poor countries, with much higher birth rates and fertility, the estimated life expectancy of people born in 2000 is 40 years or less (Zbonikowski 2001), whereas in Poland the expected life expectancy of people born in 2004 is 70.7 years for men and 79.2 years for women (Rocznik Statystyczny 2005). The detailed analyses that also lead to the conclusion that in Poland “living until old age is becoming more common, since 40% of men in their 60s and 60% of their female peers live until the age of 80” (Szukalski 2006). On the other hand, the problems arise from the fact that certain changes are taking place within families (Kawczyńska-Butrym 2008). Their care-giving potential is decreasing. Families are growing smaller and busier and are occupied with their own activities (such as work and studying). What is more, families are more mobile: they are on the run, looking for knowledge (internal and external educational migrations) and work (local and international labour migrations).

Similarly in Poland, even though the processes were not so abrupt, the percentage of elderly people in the population is growing. In 2007 the number of people over 65 was 5.13 million, which constituted 13.5% of the total population in Poland. It is estimated that in 2035 elderly people will make up 23.5% of the population (8.36 million).

The reasons for this situation are not only a decrease in natural growth and the number of children in families, and an increase in life expectancy, but also the migration of the young generation, which factor needs to be strongly emphasised. As was anticipated a few years ago by Elżbieta Trafiałek, “the baby bust and mass outflow of the young population to European labour markets will radically change their [elderly people’s] professional and social status” (Trafiałek 2006). Migrations, both internal and external, are characterised by high dynamics, and thus the changes that are triggered are also of large social impact and significantly influence individuals and families. As statistical data shows, elderly people of post-productive age also participate in migration processes. It is interesting why and when this happens. It is also important to know what their roles are in the migration processes. Is there any relationship between their place of residence and their role in the family: do their roles change with relation to people who are not involved in migration themselves or through their children, and if so, how? On the one hand there is the question of whether elderly people’s solitude and care deficit are influenced by their children’s migration. Consequently, is it necessary to support elderly people and migrating families that are involved in giving care to those people? What’s more, it is necessary to pay attention

to the social capital of elderly people who, whether they are involved in migration or not, contribute to the well-being of their families, local communities and society (Philips 2001). Both issues concern areas of research on migration involving elderly people and their roles, which are not yet sufficiently recognised.

### **3. Elderly people – their roles after retirement**

Let us first look at elderly people's activities after retirement. People of post-productive age can be divided into a few categories, depending on their tasks and roles after retirement. One should remember that this division is to a large extent related to whether the elderly people in question have families, children and grand-children and whether they live near or far away from their families; the latter possibility preventing direct involvement in their families' activities. Division into the respective categories depends on permanent relations and involvement with the family, lack of relations and engagement in the family's daily duties, or incidental participation in the family's life. The latter may include those who live on their own. However, this is not the only criterion of division because there might be many more indirect variables that influence categorisation. The situation may also be changeable and dynamic due to relatives' decisions, current life situation and changes in place of residence.

Among the people who are not engaged in family life there is a group of elderly people who feel useless, dispensable and marginalised. They can be called passive or withdrawn from active life. Some of them think they have finished their professional careers and have earned their pension. They think that they can rest and nobody will make them work for other people, because they have already worked enough and now they have every right not to be active. They limit their social contact and activities, they neglect their physical activity and limit their intellectual activity to watching television programmes. There is also another category of pensioners, namely active people who use their time to pursue their plans, hobbies and passions. Many of them consider this time as "re-gained", when they can take care of their intellectual and spiritual development, social contact, physical activities and health. They search for means to complete their plans. This is why local societies undertake certain activities which are aimed at generating various opportunities to activate people who are withdrawn from professional life. So-called Universities of the Third Age, local senior citizens' clubs, parish groups and even day-time welfare houses are the most important institutions that activate elderly people in their interests, needs, well-being and fitness (Miszczak 2010).

There is also another group that many authors pay attention to. The group is made up of pensioners who actively participate in their families' lives, first and foremost, in helping look after households and/or looking after grandchildren. Even though women traditionally looked after children, grandchildren and households, in the last few decades

both functions, particularly care of grandchildren, are more and more frequently taken over by men. Through engagement in professional work, improving qualifications and promotions, people of productive age experience problems in fulfilling many of the basic functions of the family. Even though they can deal perfectly with their material/money-making function, they may experience difficulties in caring for and raising children, as well as other household tasks. This is why they are willing to use their elderly parents' direct support in daily chores. One of the most important duties which are performed by elderly people is looking after the youngest members of families, namely their grandchildren. Grandparents' involvement in looking after and raising grandchildren (Kukołowicz 2001) as observed in families, is termed "parentelisation" of the elderly generation. This means that grandparents frequently take over parents' roles in the upbringing and daily care of grandchildren.

When we focus on the clearly profiled task of presenting the situation of an elderly person, known in Economics as people of post-productive age, we cannot forget about two coexisting potentials, namely the potential of the elderly person and the potential of the family which is traditionally considered as the main care-giver to an elderly people (Bień 2006; Błędowski, Pędich, Bień, Wojszel, Czekanowski 2006).

One should remember that for obvious physiological reasons, the physical potential of an elderly person deteriorates with age: their bodily systems and functions get worse. However, there are other attributes of the capital they have gathered throughout their lives – life experience, intellect, prudence and distance to daily chores. There is also emotional capital which, in the case of preserving family bonds, is based on love and attachment to children and grandchildren. Moreover, in Poland, many poor families use their elderly family members' accumulated financial capital, such as their pension, which is obtained regardless of the state of their health or their place of residence (which could be with the family, alone, or in a welfare house) (Miszczak 2006). However, the scale of such financial support and the scale of help elderly people provide in looking after their grandchildren by when their children work are not known. Consequently, their influence on the growth of social capital is also unknown, as is the contribution of people of post-productive age to building economic, social and educational capital as well as care-giving, and to the well-being and quality of life of families, and at the same time the general well-being of the society. Some light on the problem of the efficiency of people of post-productive age is cast by an analysis of elderly people's participation in migrations.

#### **4. Elderly people – roles in migration**

Elderly people are not the main participants of the migration process and are consequently often ignored in research on migrations, even though this does not mean that they are not noticed in the process (Castles, Miller 2009). Generally, they are not the ones

to make decisions about migration or define the destinations. However, this does not mean that they do not take part in migration. Their participation may be passive or active, which also determines their role.

**Elderly people play a passive role in migration** when they do not change their place of residence or life and thus cannot be considered migrants. It is their children and/or grandchildren who migrate. Although they remain in place, they participate in different situations which are related to migration and its consequences. It seems that while making decisions about migration, elderly people's children count on their parents' support, such as taking over tasks they will be unable to complete while away.

The actual tasks taken up by elderly people depend on a number of factors. First of all, it depends on who goes to work and who stays at home; on whether the mother leaves while the father stays with the children, or vice versa. In both cases, the senior citizens take up supporting, auxiliary and complementary tasks to the duties of the parents who stay at home. The main responsibility for children and the functioning of the household falls on the parent who stays at home, rather than on the senior citizen who does not participate in migration. However, responsibility for and engagement in everyday tasks are not the same thing, especially when it comes to care of grandchildren. In the case of the migration of mothers, most of the work is done by the grandmothers who stay at home. This is the role which is played by elderly people who participate in migration in such a way.

The situation is totally different when both parents migrate and leave their children with grandparents, or when a child is brought up by a single parent who leaves and does not take his/her parents with him/her. Then, not only the range of chores and duties but also the entire organisation of the household changes and broadens and includes contact with schools and other institutions. More importantly, the entire burden of responsibilities falls on the elderly people in question. In some cases this means that the grandparents cannot cope with the children's problems which may require the decision of a legal care-giver, e.g. in the case of hospital treatment, operations, etc. For this reason, a need arises for formal acceptance of the senior citizen's responsibility for the children in question, in the form of a foster family. Then the elderly person's role, responsibility and participation in direct care for the children left behind by their parents broaden. Even though parents/mothers are in touch with their children via telephone or the internet in what is known as trans-cultural parenthood/maternity (Szczygielska 2013), the responsibility for daily chores as broadly understood fall on the grandparents. In research conducted in Latvia, among other countries, it was concluded that out of over 9.000 children who stayed at home while their parents worked abroad, around 28% of children were looked after by their grandparents (Salaseviciute 2008). This situation shows significant dedication and effort on the part of senior citizens in migration processes, although they do not participate directly. At the same time, this reveals the role of elderly people,

without whom not only decisions about migrations but also the mitigation of the effects parents' migration have on their children's upbringing and care would be more difficult. Although grandparents seem to be unable to deal with all of their grandchildren's problems, it is impossible to undervalue their efforts and dedication to their children.

**Elderly people play an active role in migration** when they actually cross state borders and move (temporarily or permanently) to another country, independently in the framework of the so-called family reunion. As the sparse available research on the topic emphasises, this depends on the category, sex, and marital state of the senior citizens in question (Kałuża 2007, Lassota 2007). Data from 2005 allows one to estimate that 34.858 people from Poland aged 65+ and 19.484 people aged 60–64 left the country for a period longer than 2 months – i.e. in total 54.342, including 33.263 women and 21.082 men (Rocznik Demograficzny 2005).

A few situations that cause migration of elderly people can be enumerated:

- when they, due to their own economic difficulties, make decisions to work abroad and go there for labour – this concerns only those who retired early and relatively fit and young pensioners;
- when they join children who temporarily or permanently live abroad in order to help them look after young babies and in their households, in which case their fitness level may be relatively lower than in the case of senior citizens who migrate independently. This reveals a new outlook on the concept of a global network of care, which assumes that when women travel abroad, other women take part in care-giving in the emigrants' families (Carling 2005);
- when they leave because their children want to provide them with care in the destination country and want to be close to their parents because of their present or future health problems;
- when they are a group of migrants who aged while abroad. However, this group constitutes a separate category, as they made decisions about migration in different periods and for different reasons while still young, unlike others who made such decision while already old. Only some of them decide to return to their motherland.

In the first case, the senior citizen's decision regarding labour migration tends to be determined by the financial situation in their children's families. Financial difficulties and expenditures which cannot be covered by the family's income trigger elderly people's decisions to leave for work. This happens when they conclude that gains from their migration outweigh resultant losses and that their own migration is a better solution than their adult children's migrating with children. Interviews that we conducted a few years ago with Polish women who worked in Italy revealed cases of elderly women working as *badante* (women who care for elderly people in their homes), and

the reasons for migration included organising a granddaughter's wedding or financing a grandson's education (Migracje... 2008).

The second migration situation of elderly people mainly concerns but is not restricted to women and is an exact transformation of the previously presented model of helping parents, in the context of children and their family's migration to another country. In this case nothing changes: they care for the children and take care of the household, but they do this abroad. It is only the social situation that changes drastically. They are in strange, unknown social and cultural space and live in an unknown place. They are isolated because of a lack of neighbours and acquaintances, and often because of a lack of language competence. They are deprived of social contact and dependent almost entirely on their family, especially during the initial period of their stay, before they make new acquaintances and get to know the area where they live. In the meantime, their grandchildren grow older and their presence is no longer necessary. There is no research revealing their future situation – whether they return home or stay abroad.

Finally, the third situation occurs when elderly parents are “brought” to a foreign country so that they are not left alone in the country of origin and so that their children can look after them in the destination country. This concerns elderly people who, according to their children, are or will soon be unable to live on their own without care, primarily due to poor physical condition or health. In this case the largest extent of social isolation and dependence on the family is observed. It seems that elderly parents are not frequent “brought” to foreign countries. This is due to the very high costs of medical care in the Western countries which Polish people choose as destinations. Financial reasons mean that many migrants are unable to provide their parents with care in the destination country. Equally often, elderly parents do not agree to leave their country. This is why children who migrated search for solutions in Poland by paying for temporary or permanent nursing care or another care-giving institution for their parents (such as a welfare house or other care facilities). The third situation represents a completely different role of the elderly people in question.

## **5. Conclusion**

In a traditional family roles and obligations were clearly distributed between generations. Currently in many families elderly people also realise their traditional care-giving roles towards the youngest and medium generation. However, in subsequent periods of life, as physiological ageing processes advance, their range of activity decreases. With time their role changes from that of an active care-giver to that of a passive care-receiver. At the same time, the younger generation displays a high migration mobility, which enlarges the generation gap. Who makes decisions regarding family or institutional daily life and care? Is it elderly people themselves, or their families? If so,

what do these decisions concern and what decisions are made when the people in question are away from their children and grandchildren? This raises another set of questions: In what way do families deal with the tasks at hand and do elderly people obtain the help they need, whether they are passive or active participants of their family's migration processes?

## References

Agencja poszukująca opiekunów – imigrantów z krajów trzecich – specjalizująca się w opiece długoterminowej. Rezultaty projektu C.A.S.A., Kutno 2010.

Bień, B. 2006. (ed.), *Family Caregiving for the Elderly in Poland*, Białystok: Trans Humana.

Błędowski, P. Pędich, W. Bień, B., Wojszel, B. and P. Czekanowski. 2006. *Supporting Family Carers of Older People in Europe – The National Background Report for Poland*. Hamburg.

Castles, S. and M.J. Miller. 2009. *The Age of Migration. International Population Movements in the Modern World*. London: Palgrave Macmillan.

Halicka, M., Pędich, W. and B. Szatur-Jaworska. 1996. „Prawa obywatelskie ludzi starych w Polsce a europejska deklaracja praw człowieka. Ekspertyza Polskiego Towarzystwa Gerontologicznego.” *Praca Socjalna* 3: 34–35.

Isaksen, L.W. Devi, S.U. and A.R. Hochschild. 2008. “Global care crisis: a problem of capital, care, chain, or commons?” *American Behavior Scientist*, 3: 405–425.

Kałuża, D. 2007. „Migracje zagraniczne osób starszych w Polsce.” In B. Bugajska (ed.) *Życie w starości*, Szczecin: ZAPOL, pp. 287–296.

Kawczyńska-Butrym, Z. 2008. *Wyzwania rodziny – zdrowie, choroba, niepełnosprawność, starość*. Lublin: Makmed.

Kołodziej, W. 2006. „Stereotypy dotyczące starzenia się i ludzi w podeszłym wieku”. In S. Steuden and M. Marczuk (eds) *Starzenie się a satysfakcja z życia*, Lublin: KUL, pp. 91–102.

Kukołowicz, T. 2001. „Wartości wnoszone do rodziny przez dziadków”. In D. Kornas-Biela (ed.) *Rodzina: źródło życia i szkoła miłości*, Lublin 2001, pp. 345–353.

Lassota, L. 2007. „Polski senior na emigracji w Niemczech a jego aspiracje życiowe”. In B. Bugajska (ed.) *Życie w starości*. Szczecin: ZAPOL, pp. 387–394.

*Migracja zarobkowa do Włoch*. 2008. (eds) D. Bryk, B. Rożnowski and M. St. Zięba. Lublin: KUL.

Miszcza, E. 2006. „Stereotypowy obraz człowieka starszego w Polsce”. In J. T. Kowalewski and P. Szukalski (eds), *Starość i starzenie się jako doświadczenie jednostek i zbiorowości ludzkich*. Łódź: Zakład Demografii UŁ, pp. 305–311.

Miszcza, E. 2007. „Problem samotności i osamotnienia wśród ludzi starszych w Polsce.” In B. Bugajska (ed.), *Życie w starości*. Szczecin: ZAPOL, pp. 279–286.

Miszcza, E. 2010. „Aktywność seniorów sposobem przeciwdziałania negatywnym skutkom starzenia się”. In D. Kałuża and P. Szukalski (eds), *Jakość życia seniorów w XXI wieku. Ku aktywności*. Łódź: Wydawnictwo Biblioteka, pp. 24–33.

Philips, I. 2001. (ed.), *Family Care of Older People in Europe*. Amsterdam: IOS Press.

*Rocznik Demograficzny 2005*. Warszawa: Główny Urząd Statystyczny.

*Rocznik Statystyczny 2005*. Warszawa: Główny Urząd Statystyczny.

Salaseviciute, R. 2008. „Analiza stanu ochrony interesu prawnego dzieci, których rodzice opuścili kraj, w zakresie warunków bytowych i oświatowych, referat na konferencję Emigracja zarobkowa wewnątrz UE – wyzwaniem dla działań na rzecz dziecka, rodziny i społeczeństwa”, Warszawa, 26–27.03.2008. quoted in: I. Szczygielska. 2013. *Migracje zarobkowe kobiet i ich wpływ na funkcjonowanie rodzin*, Warszawa: Wydawnictwo Uniwersytetu Warszawskiego.

Szczygielska, I. 2013. *Migracje zarobkowe kobiet i ich wpływ na funkcjonowanie rodzin*, Warszawa: Wydawnictwo Uniwersytetu Warszawskiego.

Szukalski, P. 2006. „Przeżywając trzeci wiek – zmiany prawdopodobieństwa przeżycia między 60 a 80 rokiem życia w powojennej Polsce”. In M. Halicka and J. Halicki (eds), *Zostawić ślad na ziemi*. Białystok: Wydawnictwo Uniwersytetu w Białymstoku, pp. 317–327.

Trafiątek, E. 2003. *Polska starość w dobie przemian*, Katowice: Śląsk.

Trafiątek, E. 2006. „Skutki zmian systemowych w Polsce dla ludzi w starszym wieku.” In M. Halicka and J. Halicki (eds), *Zostawić ślad na ziemi*. Białystok: Wydawnictwo Uniwersytetu w Białymstoku, pp. 328–337.

Zbonikowski, A. 2001. „Word Heath Report 2000 – mierniki oceny sytuacji ochrony zdrowia”. In *Polacy na progu XXI wieku. Witalność, zdrowie, długość życia. Metodologia oceny zachowań i potrzeb zdrowotnych*. Warszawa, pp. 231–235.