

RUNNING HEAD: Aging in the context of immigration and care labour

**Aging in the context of immigration and care labour:
The experiences of older Filipinos in Canada**

A thesis submitted to McGill University in partial fulfillment of the requirements of a Ph.D. in
Social Work

Ilyan Ferrer
School of Social Work
McGill University, Montreal

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Abstract

This doctoral dissertation examines how the intersections of immigration, labour, and care impact the late life experiences of older Filipinos in Canada. A critical ethnography was adopted to understand the interplay of lived experiences, identities, and policies (specifically related to retirement, aging, and immigration). Extended observations and in-depth semi-structured interviews with 18 older people, 6 adult children, and 13 community stakeholders identified the structural barriers that impinged on everyday experiences of aging within the Filipino Canadian diaspora living in Montreal. Several themes emerged including (1) the disjuncture between discourses on immigration and migration and the ways in which older racialized newcomers are welcomed into Canadian society, (2) the intersections between immigration and retirement policies and their impact on older Filipina women engaged in domestic work, and (3) the ways in which Filipino older adults provide and receive care in intergenerational and transnational settings in response to the paucity and scarcity of formal resources. The findings of this study offer new knowledge about the impact of immigration and labour policies on the lived experiences of aging and care practices among older members of racialized and immigrant communities in the Global North generally, and within Filipino communities in Canada specifically. This study concludes by proposing key recommendations related to social work policy, practice, and research in the field of aging and immigration.

Keywords: aging, Filipino Canadian diaspora, intersectional life course, intersectionality, care, labour, immigration and migration

Résumé

Cette dissertation doctorale examine de quelles manières les intersections entre l'immigration, le travail et les soins ont un impact sur la vie tardive des Philippin.e.s âgé.e.s au Canada. Une ethnographie critique fût adoptée pour comprendre la réciprocité des expériences vécues, des identités et des politiques (spécifiquement liées à la retraite, au vieillissement et à l'immigration). Des nombreuses observations et des entrevues approfondies semi-structurées avec 18 personnes âgées, 6 enfants adultes et 13 intervenant.e.s communautaires ont identifié les barrières structurelles qui empiètent sur les expériences quotidiennes de vieillissement au sein de la diaspora Philippin-Canadienne vivant à Montréal. Plusieurs thématiques ont émergé incluant (1) la rupture entre les discours sur l'immigration, la migration, ainsi que les manières dont les personnes racisées âgées sont accueillies dans la société canadienne, (2) les intersections entre l'immigration et les politiques de retraite et leurs impacts sur les femmes Philippines âgées œuvrant dans le travail domestique, et (3) les façons dont les Philippin.e.s adultes plus âgé.e.s fournissent et reçoivent des soins dans des contextes intergénérationnels et transnationaux en réponse à la pénurie et à la rareté de ressources formelles. Les résultats de cette étude offrent un nouveau savoir sur les impacts de l'immigration et des politiques de travail sur les expériences vécues du vieillissement et des pratiques de soins parmi les membres les plus âgé.e.s des communautés immigrantes racisées du Nord global en général, ainsi qu'à l'intérieur des communautés Philippines au Canada spécifiquement. Cette étude se conclut en proposant des recommandations clefs liées aux politiques, pratiques et recherches en travail social dans le domaine du vieillissement et de l'immigration.

Mots Clefs : vieillissement, diaspora Philippin-Canadienne, parcours de vie intersectionnel, travail, immigration et migration

Preface

This dissertation is a manuscript-based thesis. Four chapters (3, 6, 7, 8) have been published in peer-reviewed journals. Chapters 1, 2, 4, 5, and 9 are traditional dissertation chapters that I wrote to complete the requirements of the dissertation. Chapter 3, which provides the theoretical paradigm of this dissertation was co-authored with Amanda Grenier, Shari Brotman, and Sharon Koehn. I was primary author for this manuscript, and responsible for analyzing, writing and editing the draft and eventual publication. My co-authors contributed their suggestions and edits on the manuscript's content and structure. Chapter 3 was published in 2017 in the *Journal of Aging Studies* (Ferrer, Grenier, Brotman & Koehn, 2017).

The findings for this dissertation study have been developed for publications in three peer reviewed journals. Chapters 6 and 7 are sole-authored publications in the *International Journal of Migration, Health and Social Care* (Ferrer, 2015), and the *Canadian Journal on Aging* (Ferrer, 2017) respectively. The final findings chapter, (Chapter 8), was a co-authored manuscript in which I was first author with Shari Brotman and Amanda Grenier acting as co-authors. I was responsible for analyzing, writing and editing the full manuscript. My co-authors contributed their suggestions and edits to content and structure. This manuscript was published in the *Journal of Gerontological Social Work* in 2017 (Ferrer, Brotman & Grenier, 2017). All the elements of the thesis are considered original scholarship and make distinct contributions to social gerontological and social work scholarship.

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Dedication

To future generations of the Filipino community in Canada, this dissertation is dedicated to you.
Remember our history before it is forgotten.

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PROLOGUE

My father was born in a small town in the central Philippines where he was one of the youngest in a family of seven. My first understanding of the complex and extensive Filipino care network came from the stories of his upbringing. My father was raised by aunts who had never married or reared children of their own. My paternal grandparents allowed my father to live with his aunts over their fears of illnesses that had claimed the lives of their previous children. Whenever I asked about my *Lola* (Filipino translation: grandmother) and *Lolo* (Filipino translation: grandfather), my father spoke about how my grandparents were revered by the townspeople. Despite growing up in a small town, *Dad* benefitted from privileges that came with *Lola* and *Lolo*'s social and financial capital. For instance, *Lola* and *Lolo* were able to pay for my father's tuition. He also received spending money from his aunts, which enabled him to pursue his studies without needing to take on part-time work. In the 1970s, *Dad* graduated with a newly minted university diploma and quickly made the transition to the big city, where he expected to become a contributing member of Filipino society. He quickly discovered, however, that opportunities (and ostensibly life) in the urban streets of Manila were more "hustle and bustle" than he had anticipated. The gentle and trusting nature of the small town stood in stark contrast to the "dog-eat-dog" mentality of the big city, which did not offer financial security or fixed salaries. The growing and exacerbating divide between the rural and urban classes had already taken form by the time *Dad* started to think of leaving the Philippines.

My mother's story is less known to me because *Mom* doesn't disclose her past as readily as my father. I was, however, able to piece together recollections of her childhood whenever she shared stories. As one of the eldest children in a family of 11, *Mom* grew up in a setting where the *Ate* and *Kuya* (Filipino translation: eldest daughter and eldest son respectively) were expected to care for the younger siblings. My mother, along with my *Titos* (Filipino translation: uncles) and *Titas* (Filipino translation: aunts) grew up in an area of Manila that was designated for the city's police force. My maternal grandfather (who I call *Grandpa*) was an urban police officer and was suspected of fathering other children with other women. As a result, he was sometimes absent from *Mom*'s family for extended periods of time. My maternal grandmother, who I call *Grandma*, was a full-time mom and caregiver. Despite being part of the lower middle

class¹, *Grandma* stressed the importance of a good education to all of her children. *Grandma* would instill the importance of school to her children, which motivated *Mom* to complete her nursing degree. Whenever I asked my mother how she was able to attend university despite living in poverty, she would say that her father would always provide the necessary tuition. While *Grandma* instilled the value of education, it was *Grandpa* who was responsible for making it happen.

My parents met in university, and eventually got married. For as long as I can remember, *Mom* and *Dad* never discussed their courtship in detail. I know that after getting married, they wanted to establish a life in Manila to support *Mom*'s family. I suspect that part of their story was truncated by the dire economic situation in the Philippines, and their decision to leave for unknown opportunities abroad. Whenever I asked my parents why they left, they would simply reply, "there was no future in the Philippines". Like the many first-generation Filipinos that I have spoken to for this dissertation, *Mom* and *Dad*'s rationale for leaving the Philippines was based on economic opportunity. Good jobs in the Philippines were sparse, and often dependent on social capital afforded to a select few. This made the appeal of moving abroad that much more justified despite the inevitable erasure and/or hybridization of our native culture. *Dad* often recounts how he was so desperate to leave the Philippines that he applied everywhere that offered an application: the United States, Australia, Canada, the United Arab Emirates, and even Papua New Guinea were some of the places he submitted an application. After a series of rejections, the only promising lead was from the Canadian embassy, which offered an interview with an immigration officer. Knowing that Vancouver and Toronto were popular destinations, *Lola* and *Lolo* instructed my father to name Montreal as his preferred destination city because it was lesser known than the other urban metropolises. *Mom* and *Dad* were ecstatic when they received an official acceptance in 1973 with a letter that began with: "*Mr. Ferrer, We are proud to announce that your application to Canada was accepted...*"

In 1974 my father left for Canada with nothing but 500 CAD in his pocket. My mother waited in the Philippines for one year, continuing to live with, and take care of, her younger

¹ Compared to Global North standards this would constitute the urban poor.

siblings. Although my *Lola* and *Lolo* lamented the loss of one of their children, they valorized North American and Western European societies for the generous welfare systems and labour market opportunities they believed were available. Yet despite the fortune and privilege of being able to immigrate, both my parents were ill-prepared for the loneliness and isolation they felt once my father left the Philippines. *Dad* once disclosed how he succumbed to tears over missing his family and homeland. In his first full year in Canada, my father worked in manufacturing factories after quickly discovering that the job market did not recognize his educational or work credentials. Hope flickered into disappointment, and ultimately became acceptance as the only available jobs were within the industrial sector.

Despite the difficulties of adjusting to life in Canada, my father stayed true to his word and sponsored my mother in 1975 under the Family Reunification Program². In their first few years together, my parents lived in various basement apartments where *Dad* first worked as a custodian until he found work as an entry-level contractor. My mother found herself in factory level work, where day-by-day, she saved her meager earnings to send back to the Philippines. My brother and I were born in the 1980s. It was shortly after their reunification that *Dad* applied to sponsor several of *Mom*'s family members. In a moment of honesty *Mom* revealed to her siblings that Canada was ostensibly a land of *milk and honey*; a hard place to live in but one that offered one of the few opportunities to leave behind the life of urban poverty. Once the celebratory joys of reunification were made, the logistical challenges of being a family with school-aged *Titos* and *Titas* were immediately felt. Groceries that were meant to be rationed over the course of a month were consumed in a matter of days. Moreover, my *Titas* and *Titos* endured the same adjustment and educational difficulties that many Filipino youth experience today³. It quickly became apparent that having the entire family under one roof was not sustainable. Over the years, my *Titas* and *Titos* would move out of the household to pursue their studies, work part-

² This process only took one year. According to Pratt and PWC-BC (2012) the average separation time under the Family Reunification Program can be 7 to 8 years.

³ Existing research has shown how reunified Filipino youth encounter barriers in education, traumas of separation and reunification with estranged family members, and barriers to integrating in the adopted society (Pratt & PWC-BC, 2012).

time jobs, and start families of their own. My family's process of assimilation into Canadian society had just begun.

Reflecting back on my parents' experiences of immigration and care, their story represents the well-known narrative of the "model minority" (Chou & Feagin, 2008), which is a dominant, if not typical, assessment of how immigrant families in the Global North are expected to pay their dues in the secondary labour market before eventually transitioning into the welcoming arms of the middle class. As my parents would say, "it is simply a matter of hard work, luck of circumstance, and prayer". My parents would often tell me that we didn't really live in poverty. I do understand their reasoning. Their definition of poverty is defined by standards in the Philippines where luxuries and privileges were and continue to be scarce. In the Philippines, nominal uses of the term poverty were meant to characterize families who had limited means or resources. Such nuances reflect the economic vulnerability in the Philippines where distinctions between those 'who have some' and those 'who have nothing' serve as both a status symbol among the Filipino elite, and a way to distance oneself from the masses of people who live in poverty (Tuason, 2010).

Those moving across geographical spaces are perceived as part of a privileged class in the Philippines: able-bodied, educated and willing to engage in transnational mobility. Though Filipino immigrants would serve as the host society's working class/working poor, their ability to cross transnational borders and provide transnational provisions and remittances are a significant source of the Philippines' gross-national product (Rodriguez, 2010). Their stories of struggle and survival are often told and retold with bravado and pride; a representation of overcoming the insurmountable odds they have encountered. However, I can't help but wonder whether those stories are still being told by newly arrived immigrants today, especially considering the ways in which policies have created lengthier wait times for family sponsorship. There are also additional barriers in receiving citizenship and climbing the socio-economic ladder.

I bring up my parents' stories as a way to contextualize my own understanding of what it means to be a second-generation immigrant, or more specifically, a second-generation immigrant settler. I have become aware that as a second-generation Filipino-Canadian, I have and will

continue to find myself to be in a constant state of *being in between* or occupying liminal space⁴. This state reflects my feelings of confusion, ambiguity and frustration when discussing the identities and culture to which I belong. Born in Canada, I have and continue to engage with rituals and institutions of the dominant Canadian culture – a culture that is characterized by a common-sense value system of liberalism, equality and multiculturalism (Fleras, 2009; Li, 2003; Simmons, 2010). Although I passively allowed this worldview to shape my understandings of how families are structured, my everyday realities of care were atypical of middle class Canadian cultural norms and values. My family transitioned into the middle class, and maintained ties to the Filipino culture which has, and continues to emphasize the cohesiveness of the family unit. From an early age *Mom* and *Dad* told us that family members are, and will always be, the most important people in my life. Wherever one member of the family went, everyone else followed. Whenever something was bought, it was shared with everyone. More importantly, *Lola*, *Lolo*, and *Grandma*, all played a caregiving role in my early childhood⁵.

Lola and *Lolo* lived their entire lives in the Philippines despite having most of their children take part in the mass exodus of young professionals during the Ferdinand Marcos dictatorship⁶. As such, *Lola* and *Lolo* would visit their children and grandchildren, and would often spend extended time with my family. I recall a specific exchange when I was five years old. *Lolo* accompanied me to the neighborhood bus-stop, where there was a daily morning congregation of parents and children waiting for the school bus. Though children and parents often interacted, *Lolo* would stand by himself, carefully monitoring my activities. Noticing that I was the only child accompanied by an older adult, I asked *Lolo* why my parents were unavailable to participate in this morning ritual. In a soft tone, *Lolo* explained that both my parents were working, and that in the Philippines, grandparents would take on greater responsibilities within

⁴ I use the term liminal following Grenier (2012) and Bhabha's (1994) articulation which defines this fluid state as being in-between.

⁵ *Grandpa* died before I was born, so my relationship with him is based on stories that have been retold by people who knew him.

⁶ Ferdinand Marcos was a Filipino dictator from 1965 to 1986 (Guerrero, 1980; Fuentecilla, 2013). His dictatorship, and migration policies (such as the Labour Export Program in 1974) saw the exporting of young men (and later young women) because of unemployment and a stagnant economy. Marcos established a system to regulate and encourage labour flows (Rodriguez, 2010).

families – often living in the same household in order to assume stewardship of their young grandchildren. Our interaction became a meaningful bridge into my Filipino heritage. *Lolo* would recount stories of how he, as the older son (*kuya*) in his family, would walk miles to chaperone his younger siblings to school – a role that I was expected to embrace as *kuya* of my family. Lessons on family tradition and responsibility became a form of preservation of Filipino cultural mores and customs. Once my grandparents left to return to the Philippines, I did not notice that the lessons taught by *Lolo* began to slowly disappear from my memory.

I offer my personal stories as an entry point to my doctoral dissertation, which examines the intersection of immigration, caring labour, and aging within the Filipino community. Stories of my family's immigration, care, and consequent aging are reflected in the issues that will be explored in the dissertation, and have served as an important personal and political motivation for me.

CHAPTER 1: INTRODUCTION

Scholars within the field of social gerontology in Global North societies are beginning to question whether existing approaches to the study of aging adequately reflect the realities of diverse and multicultural communities (Biggs & Daatland, 2004; Durst & MacLean, 2010; Torres, 2015). This is a particular concern with respect to ethnocultural minority and immigrant older adults who are likely to experience various forms of marginalization, cumulative and structural disadvantage and oppression across the life course (Brotman, 2003; Dannefer, 2012; Torres, 2006a; 2006b). Yet, despite the increased attention to care practices among ethnocultural minority communities in the gerontological literature (Baldassar, 2007; Baldassar, Baldock & Wilding, 2007; Boontarika & Kusakabe, 2013; Chappell & Funk, 2011; Dilworth-Anderson, Williams, & Gibson, 2002), research on care practices has not fully represented the experiences and realities of racialized immigrant groups. Dominant assumptions about caregiving within ethnocultural minority communities by policy makers and practitioners have led to misunderstandings about care arrangements, and the reasons behind how older adults come to care for themselves and their loved ones (Brotman, 2003; Brotman, 2002; Durst, 2010). Research has yet to account for the complex relationships between generations where ethnocultural minority older adults, for example, assume caregiver status for their young grandchildren, and are provided financial and social support from their adult children (Feinian, Guangya, & Mair, 2011). Further research is needed to explore the intersections between intergenerational dynamics, economic instability, and culture as ethnocultural minority older immigrants contest and negotiate their roles as care providers and receivers within the family unit.

The Filipino community in Canada is one example of a community that warrants specific consideration with respect to the experience of aging and care. The Filipino community in Canada has faced and continues to face particular forms of exclusion based upon gender, race, class and citizenship. As a community, they have had unique experiences of both permanent and temporary migration, recently growing into the fourth largest immigrant group in Canada (Government of Canada, 2015a). Moreover, Filipinos have begun to develop sustained community infrastructure, with growing capacity related to the organization of both service delivery and advocacy across several major cities. Despite a large proportion of youth within the

population, the Filipino community has seen a steep increase in the proportion of its aging members. Finally, Filipino older adults have been subject to particular forms of social and economic exclusion over the life course which has significantly shaped access to employment and state entitlements, family and community configurations and relations, and experiences of aging.

1.1 Context and significance of study

The recent increase in the number of older immigrants⁷ within the general Canadian population has generated interest among researchers, policy makers and practitioners in the field of social gerontology. Older immigrants include individuals who have recently arrived in the past five years, those who arrived over five years ago, and those who have aged in place after spending most of their adult lives in their adopted society. According to the most recent Canadian Census (Statistics Canada, 2016a) 7,540,825 immigrants lived in Canada in 2016, representing 21.9% of the general Canadian population. The proportion of immigrants 65 years of age or older, at 22.3% of the total immigrant population (1,684,885 persons) is higher than the proportion of older people within the general Canadian population (15.9%). As a whole, older Canadians have recently surpassed the number of children aged 14 years of age and younger, a reality considered to be of great significance for policy makers and service providers (Statistics Canada, 2016b).

The majority of immigrants 65 years of age and older have aged in Canada, with 69.3% having arrived prior to 1981 (Statistics Canada, 2016c). According to the latest census, only 3.3% of older immigrants arrived since 2011. Together, the available demographic data on immigration and aging in Canada paints a portrait of an increasingly diverse population and one in which the proportion of older community members is on the rise (Statistics Canada, 2016c).

⁷ Identity markers for immigrants vary from one source to another. In reporting statistical information on the Filipino community, I draw from several reports. These include the Canadian Census (Statistics Canada, 2016a), which refers to immigrants as those foreign born, and the National Household Survey (Statistics Canada, 2011) which focuses on citizenship, and legal citizen status of a person. I also utilize definitions stated within immigration literature and scholarship.

1.2 Emergence of the Filipino community and diaspora in Canada

One of the most rapidly emerging immigrant groups in Canada is the Filipino⁸ community. Filipinos represent Canada's fourth largest ethnocultural group and reflect a stratified diaspora that arrived in Canada under different types of immigration programs (Kelly, 2014; Tungohan, Banerjee, Chu, Cleto, de Leon, Garcia, Kelly & Sorio, 2015). Scholarship on immigration in Canada has highlighted how 20th century immigration programs were, and continue to be, divided along Economic Class, Family Sponsorship, Refugees, and Temporary Foreign Labour programs (Knowles, 2007; Li, 2003). To date entry points for immigration applications into Canada include (a) the Start-up visa, (b) Family sponsorship, (c) Caregivers, (d) Express Entry, (e) Immigrant Investors, (f) Provincial Nominees, (g) Refugees, (h) Quebec selected skilled workers, and (i) Self-employed applicants (Government of Canada, 2017a). The Filipino-Canadian diaspora began to take shape following the Second World War, during Canada's rapid industrialization and accelerated nation-building project (Alcuitas, Alcuitas, Diocson & Ordinario, 1997). According to Alcuitas et al. (1997), the history of Filipinos crossing Canadian borders began in the 1960s, when professionals immigrated to Canada from the United States after the expiration of their work permits. Pratt & the Philippine Women Center of B.C. (2012) have argued that the combination of economic and social instability in the Philippines created by centuries of colonialism, and the emergence of the Canadian nation-building project were the necessary conditions for the mass exodus of Filipinos from the Philippines. Canada became an attractive location (along with other Global North societies) because of immigration policies, which ostensibly eliminated discriminatory language and provisions in 1962 (Li, 2003; Razack, 1998; 2002; Thobani, 2007; Walker, 2008).

Existing academic and community-based scholarship suggest that more recently the composition of the Filipino-diaspora in Canada has been specially centered around the (a) Family Sponsorship program, which allowed family members already living in Canada to sponsor family members (particularly beginning in the 1980s), (b) Economic and Independent

⁸ Following the Statistics Canada (2007) definition, I use the categorical term "Filipino" to refer to Canadians of Filipino origin.

classes, which allowed skilled immigrants to enter as permanent residents (1960-present), and (c) domestic work policies such as the Foreign Domestic Movement (1982-1992), the Live-in Caregiver Program (1992-2014), and the current Caregiver Program (2014-present), which facilitated applicants to work as caregivers before applying for permanent residency status (Coloma & Pino, 2016; Kelly, 2014; Pratt & PWC-BC, 2012; Tungohan et al., 2015). In 2014, more than 40,000 Filipinos became permanent residents of Canada, making the Philippines the top source of immigration to Canada in recent years (Government of Canada, 2015a).

According to the most recent Census (Statistics Canada, 2016c), 897,130 Filipinos live in Canada, representing 2.3% of the total Canadian population. Filipinos, who tend to reside in large cities, represent one of the three largest visible minority groups in major metropolitan areas such as Vancouver, Calgary, Edmonton, and Winnipeg (Statistics Canada, 2007a; 2016c). Statistics Canada (2016c) also noted that the Filipino-Canadian community is a generally young community; one where 34.9% are under the age of 25 (compared to 30% of the general population). However, the number of Filipinos over the age of 65 in Canada has risen rapidly, doubling from 18,285 in 2001 to 38,274 in 2010 (Pino & Coloma, 2016). In 2016, there were 59,085 Filipinos 65 years of age and older, representing 9.5% of the Filipino-Canadian population. This number is expected to grow, especially considering the 74,635 Filipinos who were reported to be between the ages of 55 and 64 years old, and thus transitioning into retirement and later life (Statistics Canada, 2016c). Today, 22.7% (or 133,720) of the Filipino population of Canada is over the age of fifty-five (Statistics Canada, 2016c).

1.3 Contextualizing the Filipino-Canadian community in Montreal

In the 2016 Canadian Census 37,910 Filipinos were reported to reside in the province of Quebec. Quebec ranks as the fifth largest Filipino population in Canada, following Ontario, Alberta, British Columbia, and Manitoba (Statistics Canada, 2016c) (see Table 1). The majority of Filipinos in Quebec live in the greater Montreal area (GMA). In total, 35,685 Filipinos reside in the greater Montreal area, representing 94% of the Filipino community in Quebec (Statistics Canada, 2016c). The majority of Filipinos in the GMA live in the subdivision known as the Ville de Montreal, which includes the Côte-des-Neiges-Notre-Dame-de-Grâce (CDN-NDG) borough.

The Filipino community within the GMA is supported by several organizations and networks (Largo, 2007). According to the Filipino Association of Montreal and Suburbs (the largest Filipino social and cultural organization in Montreal), Filipinos draw from locally supported restaurants and businesses, newspapers, as well as support networks and advocacy organizations (Vasquez & Ferrer, 2009).

Table 1: Top five largest Filipino communities in Canada

Province	Provincial Population	Largest city	Municipal Population	Municipal Rank
1. Ontario	337,760	Toronto	282,385	1
2. Alberta	174,130	Calgary	25,000	4
3. British Columbia	158,215	Vancouver	94,000	2
4. Manitoba	83,530	Winnipeg	56,400	3
5. Quebec	37,910	Montreal	25,000	5

The 2016 census data on the Filipino-Canadian community reveals a growing gender gap between women and men both nationally and provincially. On a national scale, Statistics Canada (2016c) noted that Filipino women in Canada (468,025 Filipino women) slightly outnumbered Filipino men (369,105) at 56% of the population. In Montreal, the gender gap was wider with women representing 59% of the total population (21,060 Filipino women versus 14,620 men) (Statistics Canada, 2016c). Tungohan et al. (2015) and Kelly (2014) have attributed the growth of the number of Filipino women to domestic care policies in Canada, which have historically facilitated entry to racialized women from the Global South in exchange for caring labour⁹. These recent trends confirm that the Filipino community in Canada generally, and in Montreal specifically, are shaped by the gendered nature of immigration and labour programs.

⁹ The precursor to the current Caregiver Program began in 1955 with the West Indian Domestic Scheme (WIDS), the Non-immigrant Employment Authorization Program (NIEAP) in 1973, the Foreign Domestic Movement (FDM) in 1981, and the Live-in-Caregiver Program in 1992.

1.4 Research question

To date, scholarship on Filipinos in Canada has predominately focused on patterns of labour migration, and the highly gendered caring labour contributions of Filipino women in the context of a globalized economy (Lusis, 2005). Recently, scholars have called attention to Filipino women who have come under the Live-in Caregiver Program, and the precarious and potentially abusive nature of their workplaces (Kelly, Park, de Leon, & Priest, 2011; Pratt, 2004; Tungohan et al., 2015). The existing literature has also focused on issues of de-skilling, onerous and long work hours, and the difficulties of transitioning away from the secondary labour market (Atanackovic & Bourgeault, 2014).

In addition to research on the workplace, existing scholarship on the Filipino-Canadian diaspora has also examined the detrimental impact of domestic work policy on the family unit, where delayed processing times in applying for, and receiving, permanent residency have meant prolonged separation between mothers and their families in the Philippines (Barber, 2008; Pratt, 2004; Parreñas, 2005a; Parreñas, 2005b; Pratt & Philippine Women Centre of B.C., 2012). Taking into account the extended wait times in applying for family sponsorship, domestic workers face separation from their families for an average of seven to eight years (Pratt & PWC, 2012).

Though existing scholarship has contributed to our understandings of transnational labour and the ways in which domestic work is highly mobile, transient, and de-skilling work, we know very little of how domestic workers age in Canada. More generally, few studies have addressed aging within the broader Filipino-Canadian community in Canada. Present gaps in the literature include (a) the aging experiences of older Filipinos (b) the impact of immigration and labour histories throughout the life course, and (c) the ways in which older Filipinos provide, receive, and negotiate care with their families in Canada and the Philippines. In response to these gaps, my dissertation addresses **how aging, immigration, and caring labour intersect to impact the everyday experiences of older Filipino adults living in Canada through an intersectional life course perspective**. Engaging in this research offers a way to account for the complexities of aging that older Filipinos face in Canada, acknowledge the challenges and barriers encountered in later life and more fully interrogate the disjunctures between lived experiences of aging and

the state and institutional policies and practices that shape this experience. This dissertation also opens the possibility of exploring the agency, resilience, and resistance that older Filipinos and their families experience throughout their life course. More importantly, this research contributes to the existing scholarship on a rapidly growing segment of the Filipino-Canadian community. I use a critical ethnography to examine the lived experiences and oral histories of older Filipinos, their families, and community networks in order to understand how their lives are shaped by their experiences of immigration, complex caring relationships, and labour histories. I juxtapose these experiences with past and current immigration and labour policies that have served to regulate and structure experiences of aging. I also situate my own reflections through *Sikolohiyang Pilipino* (English translation: Filipino psychology), a decolonial and Filipino-specific ethnography approach to connect and relate my understandings of Filipino culture with my data analysis.

1.5 Multiple Pathways and the Intersectional Life Course Perspective

In their book ‘Ageing and Diversity’, Daatland and Biggs (2004) argued for the importance of examining diversity in later life through ‘multiple pathways’. The concept of ‘multiple pathways’ implies the integration of three important concepts for the field of gerontology. First, it prioritizes consideration of diversity along categories of social identity and location (such as gender, ethnicity, race, class, ability and citizenship). Second, it suggests that specificity is important in order to acknowledge the many journeys/stories of aging. Finally, the notion of ‘multiple pathways’ encourages a historicized understanding of aging as a social process that accounts for trajectories and experiences along the life course which may shape old age, both individually and collectively. Paying attention to multiple pathways would allow for a deeper consideration of the impact of life course factors such as cumulative inequalities on aging, as well as open up possibilities to explore previously unrecognized life events, such as those related to intersections of immigration, labour and care. Examining later life through ‘multiple pathways’ would ultimately allow researchers and social work practitioners to challenge established and dominant discourses in aging, highlight cultural specificity, and

explore what have been previously considered peripheral pathways of aging (Biggs & Daatland, 2004).

This thesis suggests that an intersectional life course perspective can provide a key roadmap for understanding ‘multiple pathways’ of care, linking lived experience to macro structures and policy that shape everyday life as people age. The intersectionality perspective focuses on the importance of examining the multiple and interlocking systems of domination that shape and structure people’s lives (Collins, 2000) through the interplay between categories of difference (such as age, ‘race’, class, sexual orientation) with wider systems of domination. The life course perspective, on the other hand, offers an ontological and holistic view of life, and has generally been used to understand how transitions and trajectories impact one’s life (Elder, 1974; 1994; Grenier, 2012). Both frameworks offer a theoretical perspective that enable the researcher to take account of, and connect, individual lived experiences across the life course with the structural forces that shape everyday life.

Using an intersectional life course perspective would enable a more nuanced and rich examination of aging within the Filipino community in Canada, linking lived experiences to state and institutional policies and practices that shape these experiences, including most notably within health and social care, labour, retirement and immigration sectors. An intersectional life course perspective can be used to engage explicitly with macro level analysis as a frame for making sense of individual experience, connecting the impact of state and institutional policies with the everyday ‘choices’ of older adults, their families and communities. This includes a focus on how ‘individual choice’ is shaped and constrained by social, political and economic forces beyond the sight or control of older people themselves. Furthermore, an intersectional and life course perspective makes space for exploring both resilience (strength in coping with exclusion and oppression) and resistance (pushing back against forces of exclusion and oppression). As such, examining ‘multiple pathways’ of aging through an intersectional life course perspective opens up possibilities to link state and institutional policies and practices with the unique and varied lived experiences of older adults who face historical and current marginalization and oppression.

1.6 Overview of dissertation

The purpose of this study is to examine the intersections of immigration, caring labour, and aging within the Filipino community in Canada. This dissertation is a manuscript-based thesis, which consists of a collection of four peer-reviewed journal articles in which I was the sole or primary author. Permission to include these articles in the thesis has been received by the journal publisher. My submitted papers conform to McGill University's guidelines on manuscript-based theses by adopting a "cohesive, unitary character making them a report of a single program of research" (McGill University, 2008). As such, the thesis connects published journal articles (Chapters 3, 6, 7, and 8) with original chapters (Chapters 1, 2, 4, 5, and 9).

Chapter 1 provides background to the dissertation, and explores the significance of the study, including the rationale for using the Filipino community as a community of interest in exploring issues of aging. I also provide the research goals and research questions of my study. **Chapter 2** provides a scoping review of two distinct bodies of literatures: (a) literature on aging among ethnocultural minority communities in the Global North and (b) Filipino-specific literature on aging. In reviewing both of these bodies of literature, this chapter contributes to the development of a more comprehensive understanding of the current state of knowledge about the context and realities of aging within the Filipino community. The literature review on aging among ethnocultural minority communities in the Global North addresses the themes on (a) indicators of cognitive, physical, and mental health, (b) formal and informal caregiving, provision, (c) access to services, and (d) transnationalism and shifting family dynamics. The Filipino specific literature on aging highlights (a) the physical and mental health outcomes of older Filipinos, and (b) the complexities and cultural values of the Filipino family unit.

The theoretical framework of my dissertation is outlined in **Chapter 3**. This manuscript was a co-written publication in the Journal of Aging Studies. The manuscript proposes an intersectional life course perspective that examines how structural and micro events throughout the life course intersect together to impact later life experiences. Taking Glen Elder's life course perspective, and intersectionality, the new framework offers a way to account for events over the life course, with the structural systems of domination that impinge in later life. **Chapter 4**

describes my methodology and research design. In particular, I outline and describe critical ethnography as my methodological approach, including a discussion of its epistemological and ontological roots. Chapter 4 describes my research design and outline how I (a) adapted my critical ethnographic approach by integrating life course/narrative interviewing techniques and (b) integrated positionality and reflectivity as a way to interrogate the intersections between aging, immigration, care, and labour. My personal experiences as a second-generation Filipino-Canadian (see prologue) have shaped how I problematized and approached issues of aging in the Filipino diaspora in this project. This personal experience also motivated my involvement as a community organizer working with an advocacy group for Filipino domestic workers and youth. As such, I adapted my approach to take account of my Filipino-specific reflexivity when thinking about the experiences of aging among older Filipinos in Montreal. In adopting a critical ethnography, I incorporate participant stories, observations, and positionality/reflections as a way to interrogate the intersections of aging, immigration, care and labour. This chapter also presents my data collection and analysis strategies, and the limitations of my study.

In order to introduce my findings chapters, I provide a bridge in **Chapter 5** to contextualize these articles to the rest of the dissertation. **Chapter 6** examines the disjunctures between the ways in which Canadian immigration temporary migrant programs targeted to older people are framed within policy documents and public discourses. I also explore the ways in which older adults experience these programs, and how adult children engage in intergenerational care exchanges upon reunification with older family members. The data focuses on a case study, consisting of an intergenerational family (adult children and older parents). The chapter juxtaposes lived experiences of care and aging with policy documents on the Parent and Grandparent Supervisa provided by Immigration and Refugee Canada. The findings of this paper first demonstrate how policies such as the Parent and Grandparent Supervisa and Parent and Grandparent Program are ostensibly made to alleviate the significant backlog of family reunification applications, but in reality, streamline and categorize older adults from the Global South as visitors who are given minimal state entitlements. Second, the Supervisa reinforces forms of structured dependency by placing the responsibility and burden of care onto sponsors who must provide financial, social, and health care to their older parents.

Finally, official statements on the Supervisa ignore the complex intergenerational exchanges that take place to ensure the survival of the family unit. This paper highlights the everyday challenges of sponsoring a parent under the Parent and Grandparent Supervisa. These issues are particularly important for policy makers and practitioners to assess and understand how such policies transform dynamics of care for families from the Global South. The unbalanced power dynamics raises questions on how to best support overburdened adult children, and vulnerable older parents who have little to no access to state resources.

Chapter 7 explores the intersections between immigration policy, aging, and caring labour as they relate to domestic workers. Although domestic work scholarship in Canada has focused primarily on the immigration and migration and labour experiences of domestic workers under the Foreign Domestic Movement and the Live-in-Caregiver Program, research is scarce on how these workers retire and consequently age in Canadian society. This article focuses on the aging experiences of retired Filipina domestic workers who, upon entering retirement, find themselves working in the secondary and/or underground economy while providing and receiving care from spouses, grandchildren, and local/transnational family members. Data is drawn from six qualitative, in-depth interviews with older Filipina domestic workers who discussed experiences of immigration, caring labour, retirement, and aging. Findings underscore (a) the poverty that older Filipina domestic workers encounter as they approach retirement; (b) the necessity but insufficiency of the state's retirement provisions; (c) the need to find work in the unreported labour market; and (d) how caring labour is provided intergenerationally as a survival strategy.

Chapter 8 argues for a broadening of the concept of reciprocity to take account of the diversity of care that is experienced in immigrant communities. This chapter conceptualizes care beyond the immediate family and renders visible the simultaneous location of older people as care recipients *and* providers, and accounts for care arrangements inclusive of generations, borders, community, and time. Findings in this chapter identify the social policies, services, and structural barriers that impinged on everyday lives, and highlight the unique configurations of care among the Filipino community whereby older people engage in care exchanges as active participants across intergenerational, transnational and fictive kin networks. Drawing on data

from 18 older people, 6 adult children, and 13 community stakeholders, the findings highlight the unique configurations of care among the Filipino community whereby older people engage in care exchanges as active participants across intergenerational, transnational, and fictive kin networks. The results of this publication emphasize the need for social workers to recognize and include caring exchanges between intergenerational families, transnational families, and fictive kin, in assessment and intervention plans.

My discussion and conclusion in **Chapter 9** contextualizes my findings chapters within the broader social gerontological and Filipino immigration and migration, and highlights my study's contributions to social work theory and practice. In particular, I address the contributions of an intersectional life course to theory building, and the ways in which social workers can use the findings of this dissertation to enhance practice by bridging between personal stories and wider macro level structures that shape and structure their lives.

1.7 Terms of reference

Throughout the dissertation, I engage with various concepts to address my research questions. These concepts are drawn from various disciplines such as social gerontology, ethnic studies, immigration, caregiving and labour studies. To guide the reader, I have provided a definition of these concepts below:

1.7.1 Definitions on care

Caring labour

Existing research in Canada has documented how women engage in household and care work, both of which are situated under the spectrum of reproductive work. In this case, the definition of caring labour includes work performed within the domestic or private sphere, and tasks needed to sustain a household (e.g. cleaning, cooking, child care and child rearing) (Neysmith, Reitsma-Street, Collins & Porter, 2012).

Care practices

Care practices are defined as work performed within the domestic or private sphere, and include tasks needed to sustain a household (e.g. cleaning, cooking, child care and child rearing) (Neysmith et al., 2012).

1.7.2 Definitions on race and ethnicity

Ethnicity

This term represents a category of people who identify with each other based on similarities such as common ancestry, language, social, cultural or national experiences (Essed & Goldberg, 2002; Omi & Winant, 2008).

Visible minority

According to Statistics Canada (2011), visible minority refers to those who belong to a visible minority group as defined by the *Employment Equity Act*. The *Employment Equity Act (1995)* defines members of visible minorities as “persons, other than Aboriginal peoples, who are non-Caucasian in race or non-white in colour.” The visible minority population consists mainly of the following groups: South Asian, Chinese, Black, Filipino, Latin American, Arab, Southeast Asian, West Asian, Korean and Japanese (Statistics Canada, 2011).

Global North and Global South

Although the North-South divide is colloquially understood as a demarcation of geographic locations, immigration scholars have argued that distinctions between the Global North and Global South are centered on the global axis of social, political and economic inequality between and within so-called ‘developed’ and ‘developing’ worlds (Castles, 2003; Del Casino, 2009; Reuveny & Thompson, 2008). These inequalities are produced and reproduced by social, political, and economic processes that motivate members of the Global South to immigrate and migrate to Global North societies either voluntarily and forcibly (Castles, 2003). I refer to racialized immigrants from the Global South to highlight the experiences of older immigrants who have come from historically

colonized nation-states, and who are actively engaging in ‘economies of kinship’ where reasons for immigration and migration are motivated by family care reception and provision (Baldassar, 2007).

Racialization

The term racialization refers to the broad social processes such as colonialism and cultural privileging that ascribe social meaning to the term ‘race’. This definition acknowledges how the meanings and effects of race shift across time and space; constructing racial difference, categorization, and exclusion that results in the oppression and marginalization of racialized people (Henry & Tator, 2009).

1.7.3 Definitions on older people

Seniors/older adult/older people

Throughout the dissertation, I align with existing social gerontological literature by using the term ‘older adults’ or ‘older people’ to refer to individuals aged 65 and over. It is important to note that the Government of Canada uses the term ‘seniors’ to identify persons aged 65 and older (Statistics Canada, 2007b). As such, I use the term seniors when referring to Canadian policies and programs identified by the Canadian government but use older adults/older when generally speaking about people over the age of 65.

Ethnocultural minority seniors (EMS) and ethnocultural minority older adults (EMOAs)

EMS and EMOAs are official terms used by the Government of Canada and the National Advisory Council on Aging (2005) to identify (1) older adults whose ethnicity, religion, race or culture are different from mainstream Canadians (including those born in and outside of Canada), (2) immigrants who have aged in Canada, and (3) seniors who immigrated to Canada late in life.

1.7.4 Definitions on immigration and immigrants

Immigrant

The term ‘immigrant’ has different connotations within policy and academic arenas. As such it is important to note the ways in which the Government of Canada defines its immigrant and migrant members, and how these definitions align or divert from the existing scholarship on immigration. For instance, Statistics Canada (2011) makes distinctions between immigrants, non-immigrants, and non-permanent residents based on residency status. At an administrative level the Government of Canada uses the term ‘immigrant’ to refer to a person who is, or has been, a landed immigrant/permanent resident. An immigrant is a person who has been granted the right to live in Canada permanently by immigration authorities. The Government of Canada also uses the term ‘non-immigrant’ to refer to a person who is Canadian citizen by birth. Finally, ‘non-permanent resident’ refers to a migrant, or a person from another country who has a work or study permit, or a person who is a refugee claimant.

Within the academic literature, the term ‘immigrant’ or ‘immigration’ is a social construction that can include different typologies related to permanence and non-permanence, gendered and raced migration flows, as well as forced and unforced border crossings (Li, 2003). Scholarship on immigration and migration, for instance has begun to deconstruct the nuances and different spaces that immigrants can occupy beyond the parameters defined by national governments (Treas, 2008; Warnes, Friedrich, Kellhaer & Torres, 2004). For example, some scholarship has begun to examine the implications of transnationalism, and the different relationships and dynamics that exist, and are formed between and within different diasporic communities (Biggs & Daatland, 2004; Torres, 2015). These nuanced transnational relationships among and between immigrants are accounted for within the academic literature but are not considered within the Canadian definition on immigrants.

In this dissertation, I use the term ‘immigrant’ in two ways. First, I use ‘immigrant’ in line with the policy designation provided by the Government of Canada wherein an immigrant is defined as a person with landed immigrant/permanent resident. When referring to Filipino immigrants, I am taking account of those who have received citizenship or permanent residency status. Second, I switch to the term ‘im/migrant’ in order to call specific attention to the social construction of immigration as a category of migration which is not fixed and static but rather, is nuanced, fluid and shifting. Moreover, ‘im/migrant’ and ‘im/migration’ takes into account the experiences, complexities and nuances of moving from one country to another.

Recent immigrant

Recent immigrant refers to a person who has obtained their landed immigrant or permanent resident status in the five years prior to a given census (Statistics Canada, 2016a). In the 2016 Census, the period is from January 1, 2011 to May 10, 2016.

Racialized immigrant

Throughout the dissertation, I use the term “racialized immigrant” to call attention to those who come particularly from the Global South. I acknowledge that while some scholars have preferred the use of ethnocultural minority older adults (Koehn, 2009), or ethnic older adults (Torres, 2012), I prefer the term racialized because of its socio-political significance.

CHAPTER 2: LITERATURE REVIEW

Despite the emergence of the Filipino community in Canada and elsewhere across diasporas in the Global North, there is a paucity of research about the aging experiences of its older members within the ethnogerontological and Filipino-specific literature. Using a scoping review methodology, this chapter seeks to address this gap through the examination of two distinct sets of literature: (a) literature on aging among ethnocultural minority communities in the Global North and (b) Filipino-specific literature on aging. In reviewing both of these bodies of literature, this chapter contributes to the development of a more comprehensive understanding of the current state of knowledge about the context and realities of aging within the Filipino community. A scoping review is a systematic overview that searches, selects, and synthesizes existing knowledge (Colquhoun et al., 2014). According to Colquhoun et al. (2014), a scoping review maps the key concepts underpinning a research question and examines broader topics by applying different study designs. A key distinction between a scoping reviewing and a systematic review is that the latter adopts a narrower research question and offers evaluations, synthesis, and recommendations about the literature (Dijkers, 2015). My intention of this literature review was to map the existing literature about ethnocultural minority aging and to identify themes that reveal the state of knowledge on aging within immigrant communities broadly and within the Filipino-Canadian diaspora specifically. In my first scoping review, I examined the state of knowledge in the wider ethnogerontology literature on ethnocultural minority aging. I then conducted a second scoping review of the literature on Filipino aging. In each scoping review, I identified key studies, themes, and trends, and I highlighted gaps that served as the basis of inquiry for my dissertation.

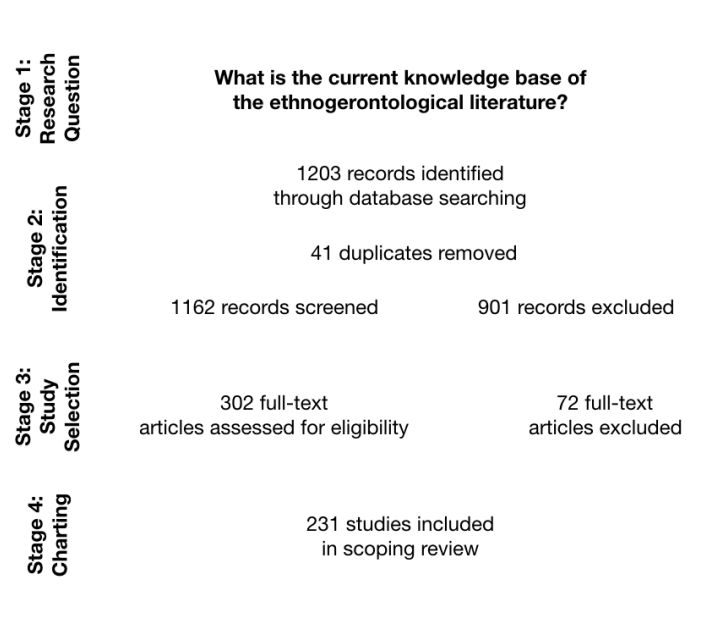
2.1 SCOPING REVIEW #1: Literature on aging among ethnocultural minority communities in the Global North

My first scoping review assessed the literature on ethnocultural minority and immigrant communities in the Global North. Originally introduced in Jacqueline Jackson's (1985) pioneering work titled *Minorities and Ageing*, the term *ethnogerontology* refers to a sub-discipline of social gerontology focused on the "causes, processes and consequences of race,

national origin, and culture on individual and population aging in the three broad areas of biological, psychological, and social aging” (p. 266). Some examples of ethnogerontological research have included studies on ‘race’, culture, citizenship, and language (Raghuram, Bornat & Henry, 2011; Torres-Gil & Moga, 2008; Treas & Carreon, 2010; Wray, 2003), as well as studies on the historical effects of inequality and marginalization in later life (Baldassar, 2007; Crewe, 2005; Dwyer & Papdimitriou, 2006; Grewal, Nazroo, Bajekal, Blane & Lewis, 2004; Lewin & Stier, 2003).

I devised a step-by-step process for reviewing the academic literature in the health and social sciences. In particular, I drew from Arksey and O’Malley’s (2005) guidelines for reporting scoping reviews. Arksey and O’Malley (2005) called for a four-stage process that ensures transparent and complete reporting, as well as for an iterative process to identify the essential studies to be included in such a review. This four-stage framework consists of (a) identifying a research question, (b) identifying and screening relevant studies, (c) identifying and selecting eligible sources, and, finally, (d) charting the data (Arksey & O’Malley, 2005). Figure 1 provides a flow diagram of my literature search.

Figure 1 Flow diagram of social gerontological literature (scoping review #1)



2.1.1 Stage 1: Identifying the research question

Arksey and O'Malley (2005) argued that identifying a research question is an important starting point for a scoping review. My research question—“**What is the current knowledge base of the ethnogerontological literature?**”—was developed to be general enough to generate a search result that covered the breadth of literature but specific enough to provide an assessment of how aging is experienced among ethnocultural minority older adults in Global North societies.

2.1.2 Stage 2: Identifying relevant studies

After developing my research question, I moved on to identifying relevant studies. Focusing on articles published between 2002 and 2016 enabled a review of the most recent literature on ethnogerontology. I first conducted the literature review in 2011 and selected a start date of 2002 to capture studies within the previous decade. I updated this literature review in 2016 to account for more recent studies conducted between 2011 and 2016. I identified relevant sources by inputting *ag(e)ing*, *older adults*, and *elder* as key words, in combination with *diversity*, *multicultural*, *(im)immigration*, *race*, and *ethnicity* into relevant databases. The following sequence represented my search query: (Ageing OR aging OR older adults OR elder) AND (race OR ethnicity) AND (multicultural* OR diversity) AND (immigration OR migration). The following databases were used for my inquiry: Social Work Abstracts (OVID), Social Services Abstracts (ProQuest), SocINDEX with full text (EBSCO), International Bibliography of Social Sciences (Proquest), PsycINFO (OVID), and Abstracts in Social Gerontology (EBSCO). These databases were available through McGill University's library catalogue.

My initial key word search generated hundreds of sources from each database. The Social Services Abstracts (EBSCO) and International Bibliography of Social Sciences (Proquest), in particular, generated 10,453 sources. To further refine my search, I prioritized peer-reviewed journal articles that included full text PDFs and adopted a narrower search query, which included “gerontology AND race AND immigran*” as key words. This search modification generated 370 results from the Services Abstracts (EBSCO) and International Bibliography of Social Sciences (Proquest) databases and provided more focused literature on aging, immigration, and

ethnocultural minority communities. In total, 1,203 records were identified through this database search.

2.1.3 Stage 3: Study selection

Following my search, I screened and selected key studies for my scoping review. To determine eligible sources, I searched through databases and identified relevant studies by reading key words in their titles and abstracts. Forty-one duplicate articles were removed, and an additional 901 were excluded because they did not focus on aging. Following this screening process, I developed the inclusion criteria of sources that specifically examined older ethnocultural minority immigrants in Global North diasporas. I excluded literature that (a) was not written in English and (b) did not focus on ethnocultural minority older immigrants in the Global North. A comprehensive table that identifies the year of publication, title, and journal of each article is provided in Appendix I. With these search criteria applied, my search query yielded 231 studies from Global North societies (e.g., the United States, Canada, Australia, and countries in Asia and Europe) focusing on a diversity of topics such as caregiving, housing, health/home care and mental health, immigration, and various aging policies.

2.1.4 Stage 4: Charting the data

The next stage of this research involved “charting” information by synthesizing, interpreting, and sorting the data and material according to their key issues and themes (Arksey & O’Malley, 2005). My charting process involved recording the authors, year of publication, location of study, study population, aims of the study, methodology, and key results. After charting these data, I reviewed and grouped the studies according to their themes. The resulting scoping review data included studies that examined the experiences of health, mental illness, and immigration among racialized immigrant communities, whether they have recently arrived or have spent the majority of their lives in the adopted society.

The existing literature inconsistently distinguishes “immigrants” from “newcomers”. An immigrant is typically defined as someone who moved permanently from their country of origin to become a citizen of the host society (Knowles, 2007; Li, 2003). On the other hand, a

newcomer is commonly understood as an immigrant or refugee who has been in Canada for fewer than 5 years. Newcomers typically have access to settlement services such as language classes. Acknowledging differences between the two groups is important because while immigrants are generally understood as having permanently moved from their country of origin to a host society, newcomers (who might also be immigrants) have lived in Canada for a shorter period of time. For the purposes of this literature review, I have stayed consistent with most existing scholarship by grouping immigrants and newcomers together while making this distinction in my findings chapters where appropriate. As indicated in Chapter 1, I have also used the term “im/migrant” to highlight the joint experiences and realities that immigrants and migrants face in processes of racialization, labour, and transnational mobility. I also make intentional distinctions between immigrant and migrants throughout the dissertation where appropriate.

2.2 Scoping review #1 results

The studies in this first scoping review were organized into substantive themes that centered on various aspects of health and mental health outcomes, caregiving, and transmigration. These themes have been grouped as follows: (a) indicators of cognitive, physical and mental health including the onset of illness and mental health issues (73 sources), (b) informal caregiving (31 sources), (c) access and provision of formal services (12 sources), and (d) shifting family dynamics in the context of transnationalism and cultural renegotiations (17 sources).

2.2.1 Theme 1: Indicators of cognitive, physical, and mental health

A major focus within ethnogerontological research undertaken within the past decade was on the exploration of the cognitive, physical, and mental health of older adults from ethnocultural minority immigrant communities. I identified 73 sources that examined various physical, cognitive, and mental health outcomes. These studies tended to be large-scale and to use multiple variables and large sample sizes in order to focus on differences and similarities across ethnocultural minority immigrant communities (Afable-munsuz, Gregorich, Markides &

Perez-stable, 2013; Angel, Jimenez & Angel, 2007; Burr, Mutchler & Gerst, 2010; Cho, Park, Bernstein, Roh & Jeon, 2015; Coutasse, Bae, Arvidson, Singh & Trevino, 2009; Eijogu et al., 2011; Jackson et al., 2004; Jang, Park Kang & Chiriboga, 2014; Kim & Lee, 2005; Lai, Tsang, Chappel, Lai & Chau, 2007; Lai, 2009; Miyawki, 2015; Powers, 2016; Valencia, Oropesa-Gonzales & Hogue, 2014). The attention placed on various health indicators and outcomes reflects a dominant paradigm in North American research, which tends to identify predictive factors that generate health and social outcomes (perhaps as a reflection of the need for policy relevance, which requires the identification of trends) and to utilize comparative longitudinal and quantitative methods to compare ethnocultural minority groups within the dominant host society (Kobayashi, Prus & Lin, 2008; Landy, Mintzer, Silva & Schulman, 2011; Min & Barrio, 2009; Solé-Auró & Crimmins, 2008). Among the topics that have been examined are rates of disability (Dallo Booza & Nguyen, 2015; Dunlop, Song, Manheim, Daviglus & Chang, 2007; Jones, 2012; Markides & Rote, 2014; Solé-Auró & Crimmins, 2008; Sorkin & Ngo-Metzger, 2014), mental health (Algeria et al., 2008; Black, White & Hannum, 2007; Cabo & Manly, 2009; Casado & Leung, 2001; Fiori Antonuuci & Akiyama, 2008a; Fiori, Consedine & Magai, 2008b; Hung, Kempen & De Vries, 2010; Iliffe & Manthorpe, 2004; Kim, Chiriboga & Jang, 2009; Lai, 2009; Lawrence et al., 2006; Murkadam & Cooper, 2011; Nguyen & Lee, 2012; Siegler, Brummett, Williams, Haney & Dilworth-Anderson, 2010), and quality of life (Algeria et al., 2008; Coustasse et al., 2009; Hung et al., 2010; Lai, 2011; Lai & Surood, 2008; Lum and Vandera, 2010; Milne & Chryssanthopoulou, 2005; Mui, Kang, Kang, & Domanski, 2007; Shibusawa & Mui, 2002).

There was also a tendency to group older people according to specific ethnocultural groups. The existing research emphasized health outcomes amongst older people belonging to Black (Black et al., 2007; Carr, 2011; Kim & Miech, 2009; Lawrence et al., 2006; Milne & Chryssanthopoulou, 2005; Olshansky et al., 2012; Siegler et al., 2010), Latino and Hispanic (Algeria et al., 2008; Barrio et al., 2008; Carr, 2011; Crimmins, Kim, Alley, Karlamangla & Seeman, 2008; Hilton, Gonzalez, Saleh, Maitoza & Anngela-Cole, 2012; Hinton, Haan, Geller, Mungas, 2003; Valencia et al., 2014; Weitzman, Chang & Reynoso, 2004), and Asian communities (Casado & Leung, 2001; Cho et al., 2015; Chow, 2010; Du & Xu, 2016; Lai, 2016;

Lai & Surood, 2008; Mui & Lee, 2014; Markides & Rote, 2014; Shibusawa & Mui, 2002) in various Global North societies.

A major focus within this theme was the identification of protective factors. The studies that focused on indicators of cognitive and physical health sought to explain differences between groups and the protective factors that may account for these differences. In a well-cited study on the prevalence of mental illness among immigrants and non-immigrants in the United States, Algeria et al. (2008) compared estimates of lifetime psychiatric disorders among older immigrant Latino participants between U.S.-born Latino and non-Latino Whites. They found that immigrants benefitted from what they called a “protective effect” from their country of origin, whereby specific components of various cultures were considered to protect against psychopathology (Algeria et al., 2008). Crimmins et al. (2007) similarly assessed risk factors using data from the National Health and Nutrition Examination Survey to account for the “Hispanic paradox,” a concept used to explain the better health outcomes of older Hispanic immigrants compared to their U.S.-born counterparts (Crimmins et al., 2007). Similar studies (Dunlop et al., 2007; Landy et al., 2011; Lariscy, Hummer & Hayward, 2015; Salinas, Su & Snih, 2013) have examined aspects of the Hispanic Paradox by assessing the health outcomes, health status profiles, disability, and risk of accidents among older Hispanics in the United States. A focus on concepts like the Hispanic Paradox in the literature served to emphasize differences in health between older Latino newcomers who have recently arrived and those who have acculturated to and lived in the host society for an extended period. These studies sought to understand the differences between groups and parallel challenges of older immigrants within Global North communities.

Related to but distinct from the Hispanic paradox was the “healthy immigrant effect.” The healthy immigrant effect is a concept in research that has explored why initial differences in health between immigrant groups and those born in the adopted society disappear after a period of time (Choi, 2014; Kobayashi et al., 2008; Vang, Sigouin, Flenon, & Gagnon, 2017). Literature on the healthy immigrant effect has suggested that upon entry into the adopted society, immigrants tend to be younger, better educated, and healthier because of structural arrangements wherein healthier applicants are permitted to cross the border of the host society (Vang et al.,

2017). This health advantage, however, would disappear over time as immigrants age in the host country. Moreover, the health advantages of immigrants who have lived in the host society for more than 20 years eventually disappear, resulting in rates of morbidity that are close to those of individuals born into the adopted society (Kennedy, Kidd, McDonald & Biddle, 2015; McDonald & Kennedy, 2004; Newbold, 2005). While the healthy immigrant effect has been documented among immigrants in Canada (Kobayashi et al., 2008) and the United States (Choi, 2012; Gubernskaya, Bean & Hook, 2013), it has not been applied consistently, and less is known about its impact on older immigrants (Vang et al., 2017). Conducting a systematic review of the literature, Vang et al. (2017) noted that the healthy immigrant effect does not necessarily apply to all immigrants and that it varies across the individual's life course. These authors found that immigrants over the age of 65 tend to have worse self-reported health and more disability limitations than their Canadian-born counterparts upon arrival. The authors argued that much of the so-called health advantage of recently arrived cohorts is dependent upon sociodemographic characteristics like level of acculturation, rates of poverty, participation in the labour market, the extent of family involvement, and length of time living in Canada (Vang et al., 2017).

Another sub-theme in the health literature was how ethnocultural minority older people and their communities understood, perceived, and developed coping strategies for facing mental health illnesses. Black et al. (2007), for instance, examined how African-Americans perceived their mental health in later life. They found that older women developed a language for depression that was neither clinical nor biomedical (Black et al., 2007). Rather, participants perceived depression as an illness arising from the adverse personal and social circumstances that accrue in old age (Black et al., 2007). Other studies have examined attitudes towards aging (Casado & Leung, 2001; Cho et al., 2015; Diwan, Jonnalagadda, Balaswamy, 2004; Jang, Chiriboga, Herrera, Martinez & Schonfeld, 2011; Lai, 2009), the prevalence of mental illness in various immigrant communities (Algreia et al., 2008; Cabo & Manly, 2009; Fiori, 2008a; Fiori, Consedine, & Magai, 2009; Jackson et al., 2004; Jang et al., 2014; Miyawaki, 2015), and the ways in which older people in a family seek support for mental health issues (Barrio et al., 2008; Guruge, Thomson & Seifi, 2015; Lai & Surood, 2013; Schensul et al., 2006; Solway, Estes, Goldberg & Berry, 2010).

2.2.2 Theme 2: Informal caregiving

The second theme within the ethnogerontological literature centered on the challenges of informal and formal caregiving in racialized and immigrant communities. In my literature review, I identified 88 articles focused on caregiving exchanges between family members, cultural perspectives on caregiving, and care that extended beyond the nuclear family. One strand of the literature focused on the role and influence of collectivist culture on informal caregiving. In this context, studies explored how the notion of filial piety in Chinese and Korean communities was used to organize systems of care in Global North diasporas (Amin & Ingman, 2014; Chappell & Funk, 2011, 2012; De Valk & Schans, 2008; Koehn, 2011; Lai, 2010; Lai & Chau, 2007a; Lai & Chau, 2007b; Ramos, 2004). Filial piety was defined as the expression of responsibility, respect, sacrifice, and family harmony (Lai, 2010). While the concept of filial piety has been a major influence on the ways in which some families are expected to provide care for older parents, these studies emphasized the processes of acculturation and realities of living in the adopted society that have drastically shifted immigrants' perspectives on caregiving (Funk, Chappell & Liu, 2013; Lai, 2010). Recent research, for instance, has highlighted situations of reciprocity where members of ethnocultural minority communities assume caregiver responsibilities for their young grandchildren while being provided financial and social support from their adult children (Lavoie, Guberman & Brotman, 2010; Neysmith et al., 2012; Sun, 2014). These dynamics were considered to create situations of filial obligation and precarious experiences for older adults who feel compelled to engage in these responsibilities because they did not have other financial recourse (Sun, 2014). As such, inter-generational dynamics, economic stability, and culture were important factors to understand how older adults (re)negotiated their roles as care providers in Global North diaspora family units (Katz, 2009).

Another important theme throughout the ethnocultural minority aging literature was the impact of caregiving on informal caregivers. Informal caregivers were categorized as "unpaid caregivers" who provide crucial support and care (Young, 2011). In this body of research, scholars identified the negotiated roles and relationships that existed between older parents and their adult children (Cravey & Mitra, 2011; Dilworth-Anderson et al., 2002; Kosloski, Schaefer, Allwardt, Montgomery & Kramer, 2002; Peek, Stimpson, Townsend & Markides, 2006). A

number of studies have focused on the health outcomes—such as the physical and mental health of partners (particularly wives) and adult children (particularly adult daughters)—when caring for older family members (Brown, Herrera & Angel, 2013; Chow, 2010; Gordon, Pruchno, Wilson-Genderson, Murphy & Rose, 2012; Philipps, Siu, Yeh & Cheng, 2008). These studies highlighted the dominance of familial care to older adults but have also focused on the challenges of balancing informal caregiving with formal sources of care. For instance, Dilworth-Anderson et al. (2002) noted how caregiving tasks were often considered a shared responsibility between informal and formal caregiving sources. In their study, formal social support was considered beneficial when caregiving exchanges became a challenge (Dilworth-Anderson et al., 2002). In another example, Wong, Yoo and Stewart's (2006) study on the caregiving experiences of older Chinese people and Koreans living in the United States outlined how families were often unprepared to meet the needs of their aging parents for reasons that vary from financial barriers to a lack of time for caregiving responsibilities. Wong et al. (2006) argued that shifts and changes in care could be attributed to the process of "biculturalism," a process whereby families adopted cultural values of the host society which were in conflict with perspectives in their countries of origin. The process of biculturalism, the authors argued, require researchers to consider and acknowledge the types of structural shifts in social policies that alter the perceptions, expectations, and dynamics of care between older parents and their adult children (Wong et al., 2006). These types of contributions to the literature acknowledged care practices and arrangements that included informal and formal caregiving and the different negotiations that took place in response to need.

The existing ethnogerontological literature on caregiving has also explored the unique caregiving relationships that are different from the normative nuclear family unit (Dilworth-Anderson et al., 2002; Graham, Ivey, & Neuhauser, 2009; Min & Chryssanthpoulou, 2005). In this context, studies have identified how some ethnocultural minority communities have used other forms of informal care that extended beyond the traditional family unit (Koehn, Spencer & Hwang, 2010). Dilworth-Anderson et al. (2002), for instance, noted how African-American and Hispanic caregivers engaged with both informal and formal support networks to assist in caregiving responsibilities for elders with dementia. In this research, the authors found that care

provided by extended family members and friends were supplemented by “contractual care” and “collegial care” provided by hired workers (Dilworth-Anderson et al., 2002). These different types of formal and informal care highlighted the complexities and shifts in caregiving among racialized older adults, wherein friend, neighbours, immediate families, and other relatives are recognized, increasingly, as caregivers.

2.2.3 Theme 3: Access and provision of formal services

Another key theme uncovered in the scoping review related to how older people perceived and accessed health and social services (Dunlop et al., 2007; Graham et al., 2009; Haralambous et al., 2014; Iliffe & Manthorpe, 2004; Johnson, Kuchibhalta, & Tulskey, 2008; Koehn, 2009; Kosloski et al., 2002; Lai & Chau, 2007a; Lai & Chau, 2007b; Liu, 2003; Mukadam, Cooper & Livingston, 2011; Nguyen, 2010; Nguyen & Lee, 2012; Scharlach, Giunta, Chow & Lehning, 2008; Scharach & Sanchez, 2011; Trask, Hepp, Settles & Shabo, 2009). In my search, I identified 18 articles that specifically addressed access to services issues. Generally, research on service provision has considered the adequacy or ability of programs to meet individual needs, as well as whether programs were equitable in addressing the needs of racialized older adults (Brotman, 2003; Gelfand, 2003; Guruge et al., 2015; Lai & Surood, 2010; Prus, Tfaily & Lin, 2010; Solway et al., 2010). According to Dunlop et al. (2007) differences along ethnic/racial, gender, and class lines significantly impacted the ways in which older adults perceive and, consequently, access social and health services. Young (2011) noted that experiences of poverty posed significant barriers for older women who were widowed and unattached, and impacted the ways in which they accessed services. Likewise, Durst and McLean (2010) found that immigrant older adults involved family members and extended community networks in their approaches and interactions with health care and social services (Chow, 2010; Horton & Dickinson, 2011; Wu & Penning, 2015). Literature on issues of access has also examined how older immigrants relied on the labour of adult children and grandchildren in cases where language barriers prevented older people from receiving formal care from service providers (Kimura & Browne, 2009; Treas, 2008).

The existing scholarship on caregiving has also identified notable barriers in program delivery, which have been partly attributed to stereotypes and/or misunderstandings about existing services that, ultimately, deter ethnocultural minority older adults from seeking health and social services (Brotman, 2002; Ejiogu et al., 2011; Koehn, 2009; Lai & Chau, 2007a; Lai & Chau, 2007b; Mathews et al., 2009; Mukadam et al., 2011; Sorkin & Ngo-Metzger, 2014). The literature reviewed in this sub-theme focused on strategies that enhanced cultural compatibility between users and health delivery systems (Garrouette, Sarkisian, Goldberg, Buchwald & Beals, 2008; Higginbottom, 2006; Lai & Chau, 2007a; Lai & Chau, 2007b). These studies identified provision, eligibility, and access to state services as a dynamic and contingent process that was constantly being redefined through interactions between individuals and professionals (Brotman, 2002). For older ethnocultural minority older people and communities, discrepancies between service expectations and actual service provision created vulnerabilities as they navigated the health and social care systems. The realities of inaccessibility, therefore, resulted in a misalignment between needs and health and social services. This was particularly the case when older ethnocultural minority older adults attempted to access health and social services. Brotman (2003) for example, suggested that barriers related to language and communication represented inherent and systemic forms of racism in service provision and delivery. She argued that the overarching focus on language and communication, which are general markers of cultural competency, overshadowed important considerations of structural barriers, such as discrimination between care provider and receiver, which impacted access to services. These differences represent wider disjunctions between systems of care, language, practice, and access to services.

The literature on access to services has also engaged with the “cultural competence” model in social work and allied health and social care professions. In the cultural competence model, culture is understood to play a significant role in how service provision, and the organization providing the service, are perceived by older people (Becerra & Iglehart, 2007; Brotman, 2003; Iliffe & Manthorpe, 2004; Trask et al., 2009). Cultural competence was defined as the process by which “individuals and systems responded respectfully and effectively to people of all cultures, languages, classes, races, ethnic backgrounds, religions and other diversity

factors in manner that recognizes, affirms and values the worth of individuals, families and communities and protects and preserves the dignity of each” (National Association of Social Workers, 2001, p. 11).

Although the cultural competence model has served to inform and guide professional conceptualizations of service, as well as understandings about culturally diverse older people, critics of the model have highlighted its tendency to overemphasize individual traits while neglecting the structural factors that shaped service delivery (Brotman, 2003; Lai & Chau, 2007a; Lai & Chau, 2007b). Researchers have suggested that additional considerations should include paying attention to structural barriers like racial biases that may impede the access of older people to care (Brotman, 2003; Guruge et al., 2015).

2.2.4 Theme 4: Shifting family dynamics in the context of transnationalism and cultural renegotiations¹⁰

The fourth theme explored in the ethnogerontological literature involved discussions of the “aging-immigration nexus.” This area of research contested dominant understandings of immigration by identifying the conditions of racialized older migrants (Baldassar, 2007; de Haas & Fokkema, 2010; Grewal et al., 2004; Lewin & Stier, 2003; Lynch, 2008; Raghuram et al., 2011; Shemirani & O’Connor, 2006; Vullnetari & King, 2008; Warnes & Williams, 2006). I identified 52 sources that examined the impact of immigration on ethnocultural minority older people, families, and communities (Angel, 2003; Becker, 2002; Becker, 2003; Burr, Gerst, Kwan & Mutchler, 2008; Johnson, Voss, Hammer, Fuguitt & McNiven, 2005; Lee, Chaudhuri & Yoo, 2015). Where some research has underscored how policies on immigration and migration differ according to each nation-state’s divergent histories (Warnes, 2002), other literature (such as the European literature) has focused on the migration trajectories of its older immigrants, and in

¹⁰ It is important to acknowledge ethnogerontological literature that focuses on older labor migrants returning to the homeland following retirement. As a group, migrant retiree and return labor migrants face a unique set of circumstances with regard to their compromised eligibility for state-funded, subsidized, and/or managed care services (Warnes, 2004). Migrant retiree and return labour migrants might also experience a lack of knowledge about the society in which they are choosing to retire (Warnes, 2004). While these groups of older adults will generate their own sets of research, this dissertation focuses on the experiences of a specific community within Canadian society: older Filipinos who have entered Canada through economic, labour, and reunification programs.

particular, how political and legal structures affect the aging process and quality of life (Brockmann, 2002; de Haas & Fokkema, 2010; Dwyer & Papadimitriou, 2006; Grewal et al, 2004; Higginbottom, 2006). These studies also tend to offer a more critical assessment of how aging experiences are shaped and structured by social policies (Milne & Chryssanthpoulou, 2005; Mukadam et al., 2011; Raghuram et al., 2011; Torres, 2006a; Torres, 2006b; Torres, 2013; Wray, 2003). For instance, while welfare in the European Union was contingent upon interrelated factors including citizenship and residency, researchers have argued that migration history, sociological status, past engagements and relationships in the paid labour market, and social location within a particular member state also factor into how older people receive different types of welfare services (Dwyer & Papadimitriou, 2006; Warnes et al., 2004). In Canada, Koehn et al. (2010) examined how older adults experienced various forms of marginalization due to their immigration and migration status. Their findings highlighted how past and current immigration policies restricted newcomer older adults from receiving their full entitlements, thus heightening their experiences of structural dependency (Koehn et al., 2010).

Ultimately, the literature on aging and immigration demonstrated how perceptions of “citizenship” were highly stratified around the ideals of the “citizen as paid worker” and, thus, the paid worker as “legitimate member of the state” (Dwyer & Papadimitriou, 2006). This literature highlighted how new realities within the diaspora shaped cultural constructions of family relations, roles, and obligations. Additionally, it demonstrated how the rupture caused by immigration pathways was rectified through the reestablishment of a tight-knit social group within the diaspora. Keeping ties to the community was considered not only to reinforce an individual’s sense of self and ethnic identity, but to provide a “visible means of reassurance that the culture one has been separated from continues and is embodied in the self” (Becker, 2002, p. 92). Dynamics such as these are examples of how interference at the state level served to diminish rather than enhance the social security rights of older international immigrants and migrants (Dwyer & Papadimitriou, 2006; Koehn et al., 2010; Treas, 2008).

2.3 SCOPING REVIEW #2: The aging experiences of older Filipino/a immigrants

In the following section, I outline the process used for my second scoping review on Filipino aging. Consistent with the process used for the first scoping review, I used social work databases and key terms to focus my search (see Figure 2 for a flow diagram of the process). A comprehensive table that identifies the sources for this scoping review, the year and title of each article's publication are provided in Appendix I.

Figure 2 Flow diagram of Filipino-specific literature (scoping review #2)



2.3.1 Stage 1: Identifying the research question

Despite the growth of Filipino communities across a number of Canadian cities, few studies have examined the realities and processes of aging amongst older Filipino/a's. My second scoping review, therefore, examined the existing Filipino-specific literature on aging. The research question that guided the second scoping review was, "*What is the current knowledge base of Filipino-specific literature on aging in the Philippines and diaspora?*"

2.3.2 Stage 2: Identifying relevant studies

My search strategy purposefully identified Filipino-specific sources on caregiving, health, and social service use between 1993 and 2013¹¹. The scoping review for this component included a search of key words from peer-reviewed journals in the following five databases: Social Work Abstracts (OVID), Social Services Abstracts (ProQuest), Soc Index (EBSCOhost), and Abstracts in Social Gerontology. My search of titles and abstracts employed the key words *Filipino/a* and *aging*. I identified 101 relevant sources. Due to the smaller number of sources generated through this process, I chose to include additional records from reference lists and book chapters identified through snowballing methods. Arksey and O'Malley (2005) argued that these strategies ensure the inclusion of materials that are missed in more traditional searches. This additional strategy yielded 23 sources that were not previously identified.

2.3.3 Stage 3: Study selection

Similar to my first scoping review, I assessed material that included full text PDFs and excluded studies that did not focus specifically on Filipinos in Global North societies or that did not specifically examine experiences of aging. Eleven duplicate records were removed from consideration. My rationale for focusing on studies set in Global North societies was that I was primarily interested in aging within Filipino diasporas. Although I excluded the Global South literature, I did include literature from the Philippines to contextualize the expectations and experiences of aging among older Filipinos. In total, 90 sources were screened. Thirty-one references were excluded because they did not meet the criteria of being focused on Filipino aging.

2.3.4 Stage 4: Charting the data

The search process identified 57 relevant articles on issues ranging from the health outcomes of Filipino people to caring relationships between Filipino families. A significant

¹¹ Unlike the first scoping review on the expansive ethnogerontological literature, the Filipino-specific literature was sparse. As such, I expanded my search to include literature published within the past 20 years, and did not engage in a second search to update the literature.

number of these studies were conducted in the Philippines or in the United States.¹² In the following sections, I explore two themes from the literature on Filipinos: (a) the physical and mental health outcomes of older Filipinos and (b) the complexities and cultural values of the Filipino family unit.

2.4 Scooping review #2 results

2.4.1 Theme 1: The physical and mental health outcomes of older Filipinos

The first theme which emerged from this scoping review focused on physical and mental health outcomes of older Filipinos. As with my first scoping review, the majority of these works were large-scale quantitative studies that addressed mental and/or physical health outcomes. In total, 17 studies focused on various health outcomes of older Filipino men and women. The studies, primarily geographically concentrated in the Philippines and the United States, revealed how older Filipinos experienced health vulnerabilities such as depression, chronic diseases, low physical activity, and disabilities (Becker, 2003; Browne, Braun & Arnsberger, 2006; de Guzman, Lacao & Larracas, 2015; Chua & de Guzman, 2014; Li et al., 2015; Williams & Domingo, 1993). It is important to note that of the 17 studies conducted in the Philippines, 11 were led or included one scholar, Dr. Alan de Guzman from the University of Santo Thomas. Dr. de Guzman conducted large-scale studies that adopted mixed methods and quantitative analysis and focused on issues related to aging, long-term care, and spirituality. His studies examined health issues including mobility (de Guzman et al., 2015), psychological distress (de Guzman et al., 2015; Chua & de Guzman, 2014), the use of art and recreation therapy in the treatment of depression in institutionalized care settings (de Guzman et al., 2011), the emotions and feelings of older Filipinos (de Guzman et al., 2007), the impact of aging on older Filipinos, their transition to long-term care facilities (de Guzman et al., 2009; de Guzman et al., 2009b; de Guzman et al., 2009c), and their perspectives on end of life (de Guzman et al., 2009a; de Guzman et al., 2009b; Guzman et al., 2009c; de Guzman et al., 2012). A notable focus of de

¹² Sixteen of the 57 studies examined experiences of aging in the Philippines

Guzman's work was on the process of acclimatizing to long-term care facilities. While the availability and access to state and formal services was a relatively new phenomenon in the Philippines, de Guzman et al. (2012) found that older Filipino men and women engaged in what they called a "conversion" and "immersion" phase, through which they gradually acclimatized to their new home care environments (de Guzman et al., 2012). Together, this subset of the literature explored the growing reality of older adults placed into formal care settings where they encountered experiences such as abandonment (de Guzman et al., 2012), depression (Chua & de Guzman, 2014), as well as tensions between their spirituality, health, and desire to live with families (de Guzman et al., 2009a; de Guzman et al., 2009b; de Guzman et al., 2009c).

My scoping review also identified a focus on the mental health outcomes of older Filipinos, particularly in the United States. Using large-scale datasets, Chang and Moon (2016) identified higher levels of psychological distress among Filipino older adults when compared to older Chinese, Vietnamese, and other groups in the United States. They also noted how limited social resources and barriers to immigration and acculturation contributed to lowered mental health outcomes for older Filipinos (Chang & Moon, 2016). A subsection of this literature also focused on how perceptions about mental health illnesses impacted access to state services. Braun and Browne (1998), for example, examined how the values and practices of Asians and Pacific Islanders affected their perceptions of disease, and their use of public services. Their focus groups highlighted how older Filipino-American participants recognized symptoms of depression, and were receptive to American health care services. Yet, older Filipino-Americans expressed a preference for care provided by children and families (Braun & Browne, 1998).

Elsewhere, Cichello et al. (2005) investigated the role of cultural factors including language, customs, religion, and values as indicators of health service use among older Filipinos in Australia. Their findings suggested that cultural barriers were a significant factor in lack of or limited access to health care services, and among mental health outcomes among older Filipinos (Cichello et al., 2005). Similarly, Scharlach et al. (2006) conducted focus groups with caregivers from eight racialized ethnocultural specific groups (African American, Chinese, Filipinos, Hispanics, Koreans, Native Americans, Russians and Vietnamese) and noted three crosscutting constructs—familialism, group identity, and attitudinal and structural barriers—as predictors of

service use. Older Filipinos, for instance, were found to rely on families for assistance, but they also expressed a need for financial aid from state and federal service providers (Scharlach et al., 2006). These findings can be contextualized with other studies that have examined the extent to which older Filipinos encounter systemic barriers in their access to services, economic insecurity, and their subsequent responses to these challenges (Kwok and Tanap, 2015).

2.4.2 Theme 2: Complexities and cultural values of the Filipino family unit

A second theme of the Filipino-specific literature centered on the complexities and cultural values of the Filipino family unit. Most of this research examined caregiving dynamics within nuclear and intergenerational families (Ayalon, Kaniel & Rosenberg, 2008; Becker et al., 2003; Browne & Braun, 2008; Cichello et al., 2005; Kimura & Browne, 2009; Scharlach et al., 2006; Trask, 2013; Williams & Domingo, 1993). According to Kimura and Browne (2009), Filipino cultural values and perceptions of the family shaped the experiences and expectations of care just as strongly as the economic constraints that mediated caring relationships. Authors in this theme point out how, unlike most Global North societies which have defined social security systems for older citizens, the Philippines has historically (and currently) relied on the intergenerational nuclear and extended family unit to provide economic, social, and physical support to older members of society (de Guzman et al., 2009a; de Guzman et al., 2009b; Williams & Domingo, 1993). The nuclear and extended family represented the basic units of social organization in the Philippines, wherein kinsfolk grant authority and respect to elder members of the household and, by extension, to the province or village (Carringer, 1977). Pratt & PWC-BC (2010) have also noted how the Filipino family was organized along gendered lines, which were forcibly instilled by colonial influences¹³. However, researchers have noted that more egalitarian pre-colonial influences still exist within the family, where women are considered to hold significant roles in decision-making and family finances (Agbayani-Siewert

¹³ According to Aguja (2013), pre-colonial Philippine societies were composed of family-based dwellings in villages (Filipino translation: *barangays*) where there was equality between the sexes. Scholarship on pre-colonial Philippines has also documented the importance and nuances of equality, union, and mutuality (Aguja, 2013). Aguja (2013) also noted how women previously took on highly esteemed roles such as *babaylans* (English translation: priestesses) prior to colonial contact.

& Jones, 1997). As such, members of the family household were expected to contribute to the family (whether through financial or caring labour) in order to promote the values of cooperation and sacrifice and to create a sense of responsibility for elder members among younger generations (Browne et al., 2006; Kimura & Browne, 2009).

Existing research has also explored how the Filipino value system is predicated on the idea that strong bonds exist between those who give and those who receive care (David, 2013; Pe-pua & Protacio-Marcelino, 2000). One source highlighted that Filipino families in diasporas around the world were a major source of emotional, moral, and economic support to older adults (Katoka-Yahiro, Ceria & Yoder, 2004). The cultural value of *utang na loob* (Filipino translation: reciprocal obligation or gratitude) was used to refer to a sense of reciprocity whereby recipients of care were considered indebted for the different forms of care they have received (Pe-pua & Protacio-Marcelino, 2000). According to Pe-pua & Protacio-Marcelino (2000) the notion of *hiya* (sense of propriety) was uniquely tied to one's *amor propio* (self-esteem) and strongly reinforced the obligation of care. Another trait highlighted in the literature is that of *pakikisama* (harmony with others), whereby the value of care whereby the collective was prioritized at the expense of the self. According to Kataoko-Yahiro et al. (2004), 'Filipinos strongly identified with their nuclear and extended family, with family needs and welfare coming before those of the individual' (p. 110). Together, values of gratitude, indebtedness, responsibility, reciprocity, satisfaction, and paying back were identified as contributing to the sense of deference and respect given to older members of the Filipino community. For this reason, studies have noted that caring for grandchildren was perceived as a positive and natural role expectation that brings family together and that adult children are expected to care for their aging parents as a form of reciprocity for the childcare they received (Kimura & Browne, 2009).

In addition to the research on Filipino value systems and family structures, studies have examined the extent to which kin networks are recreated and reshaped by processes of immigration and acculturation. This line of research is predominantly conducted in the United States, where studies have examined the needs and priorities of Filipino-American families (Becker et al., 2003; Becker, 2003; Becker, Beyene & Canalita, 2000; Braun & Browne, 1998; Browne & Braun, 2008; Chow et al., 2000). In this theme, the value system of the Filipino

family was found to extend to various diasporas in the United States, where respect and honour were central to care provision within families. Jones (1995) for example, noted that the care of older Filipina Americans in the United States was demarcated by caring traditions in the Philippines, where “paying respect,” “caring for,” and “providing for” older parents were identified as important values (Jones, 1995; Kataoka-Yahiro et al., 2004). Studies have also identified the importance of the *extended kin network* (Agbayani-Siewert & Revilla, 1995; Kimura & Browne, 2009), which encompassed the nuclear family, the extended family on both paternal sides, and the *compadrazgo* (godparent) system (Kimura & Browne, 2009). These sources of care were considered particularly important in the American diaspora, where the extended family looked after its older members. However, Jones (1995) also found that sources of stress caused by caregiving demands created conflict between traditional cultural expectations and what caregivers can provide. Similarly, Kataoka-Yahiro et al. (2004) identified challenges that Filipino American grandparents faced as they played a central role in caring for their grandchildren. In many cases, this caring labour was provided to grandchildren at the expense of their own health (Kataoka-Yahiro et al., 2004).

2.5 Identifying gaps in the existing ethnogerontological and Filipino-specific literature

The two scoping reviews undertaken within this literature review shed light on the context and realities of aging in the Filipino community, with an emphasis on diaspora communities living in Global North societies. Bringing together two distinct sets of literature including (a) literature on aging among ethnocultural minority communities in the Global North and (b) Filipino-specific literature on aging, these scoping reviews provided a more comprehensive picture of the current knowledge base on aging within ethnocultural minority communities generally, and amongst Filipino older people, their families and communities specifically. Despite the emergence of literature on the Filipino community in the Philippines and across the diaspora, however, there were still relatively few studies that addressed the aging experiences of older Filipino/a people. As a result of these scoping reviews, I was able to identify key studies, themes, and trends, and highlight gaps that served as the basis of inquiry for my dissertation.

My scoping reviews highlighted several challenges and gaps in the existing literature. In concluding this chapter, I highlight three key areas for consideration. First, my scoping reviews identified a **general propensity to focus on individualized aging**. The existing scholarly work tended to focus on either physical and/or mental health outcomes, or barriers to access to health and social services among ethnocultural minority older people. In particular, researchers have overemphasized individual causes of illness and disability or access barriers, to the exclusion or minimization of sociopolitical causes. The emphasis in many of the health and access studies suggested a reliance on the presentation of trends and experiences based upon individual aging processes, which has impacted the study of aging within ethnocultural minority communities. While this focus on individual aging offers important clues about health, immigration, and caregiving outcomes, the questions of inter-generational dynamics, economic stability, and culture affect older adults as they negotiate their roles in the family and community remains unexplored. Highlighting aging experiences that move beyond health however, could provide the basis to contest dominant notions of healthy aging and showcase the complexities and nuances of the aging process from an immigrant perspective.

Second, my scoping reviews found that the current literature also **emphasized health-related and caregiving outcomes**. While discussions of caregiving in relation to health-related outcomes continues to represent a dominant analytical direction in the gerontological and ethnogerontological literature, several scholars have highlighted how this research neglects within-group differences and diversity, as well as the interplay between social locations including gender, culture, and aging (Koehn, Neysmith, Kobayashi & Khamisa, 2013; Wray, 2003). These tensions and complexities warrant further attention, particularly from the perspectives of multiple members of the family. For instance, additional research could examine the widely-assumed roles of transnational older adults and immigrants who are likely to adopt the dual roles of care recipient and care provider in their lifetimes (Espiritu, 2003; Goodman & Silverstein, 2002). Preliminary research has shown that situations such as these, where older adults assume caregiver status for their young grandchildren and are provided financial and social support from their adult children, created both close family connections and precarious

aging experiences for immigrant seniors (Heikkinen, 2011; Hilcoat-Natlletamby, 2010; Katz, 2009; Kobayashi & Funk, 2010; Lowenstein & Daatland, 2006; Sudha, 2014).

Finally, my scoping reviews highlighted the paucity of research from a **critical perspective on aging, racialization, and ethnicity**. Few examples of critical perspectives on aging exist in the current ethnogerontological literature, and in particular, the Filipino community. One of the reasons for this omission, Wray (2003) suggested, is that existing gerontological frameworks are predicated on westernized and middle-class values that valorize successful and healthy aging, and as such, neglect the more structural and interpersonal relationships that inform the choices of older people. In the caregiving literature, for instance, more research is needed to consider the experiences, dynamics, and relationships that run contrary to traditional, normative, and dominant forms of caregiving in Western societies (or the Global North). Several authors stand out for their work incorporating post-colonial, critical race and/or intersectionality theoretical perspectives on aging (see Brotman, 2003; Koehn et al., 2013; Grenier, 2012; Torres, 2015; Williams et al., 2016). Together, these scholars have challenged the dominance of the focus on personal (i.e. linguistic, culturalist and familialism) causes of social problems in the broader field of ethnogerontology. Research adopting theoretical frameworks such as post-colonialism, critical race or intersectionality thus hold potential to account for historical events and structural barriers, and the impact on individuals and communities (Crenshaw, 1993; Koehn et al., 2013; Matsuoka, Guruge, Koehn, Beaulieu & Ploeg, 2012; Preston et al., 2012; Schensul et al., 2006; Shemirani & O'Connor, 2006; Torres, 2015). In the context of aging within the Filipino diaspora, a critical perspective can be used to nuance the broader ethnogerontological literature and offer viewpoints to contextualize existing research on the social determinants of health and/or community experiences of care.

2.6 Establishing my research agenda: Unravelling the intersections of aging, immigration, care, and labour

While the ethnogerontological literature has started to explore the realities of older people from racialized and immigrant communities, it has yet to account for how wider structural barriers and social relations shape experiences in unique and nuanced ways (de Haas &

Fokkema, 2010; Torres, 2012; Treas, 2008; Treas & Carreon, 2010; Warnes & Williams, 2006). For instance, the differences and shared experiences between ethnocultural minority older adults and immigrants in Global North societies have yet to be explored in detail. The literature also raises the need for an important consideration of the how policies are implicated in shaping everyday experiences of aging. Researchers have suggested that in addition to social, economic, and political factors, a major issue stems from solution-based approaches that privilege models of success and continuity in order to situate the concepts of “race” and ethnicity (Biggs & Daatland, 2004; Torres, 2006a). Although recent research has introduced and situated transnationalism within the aging process (Baldassar 2007; Crewe, 2005; Treas, 2008), the existing literature has not yet acknowledged how the joint experiences of aging, immigration, care, and labour shape later life. That is, it has yet to consider **the extent to which immigration, labour, and care relationships shape experiences of aging**. My study will examine the interplay between immigration, labour, and care throughout the life course and into later life. As such, it will address the existing gap in knowledge and offer a contribution to the existing bodies of research in ethnogerontological and Filipino-specific literature on aging. In order to fully examine the intersections between aging, immigration, care, and labour, I begin with a theoretical consideration of how intersectionality affects the life course of aging immigrant individuals. In Chapter 3, I discuss my theoretical framework, which introduces the intersectional life course perspective. The chapter was a co-authored piece (with Amanda Grenier, Shari Brotman, and Sharon Koehn) published in 2017 in the *Journal of Aging Studies*.

CHAPTER 3: THEORETICAL FRAMEWORK

The following chapter has been published as follows:

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Understanding the experiences of racialized older people through an intersectional life course perspective

Abstract

This article proposes the development of an intersectional life course perspective that is capable of exploring the links between structural inequalities and the lived experience of aging among racialized older people. Merging key concepts from intersectionality and life course perspectives, the authors suggest an analytic approach to better account for the connections between individual narratives and systems of domination that impinge upon the everyday lives of racialized older people. Our proposed intersectional life course perspective includes four dimensions: 1) identifying key events and their timing, 2) examining locally and globally linked lives, 3) exploring categories of difference and how they shape identities, 4) and assessing how processes of differentiation, and systems of domination shape the lives, agency and resistance among older people. Although applicable to various forms of marginalization, we examine the interplay of racialization, immigration, labour and care in later life to highlight relationships between systems, events, trajectories, and linked lives. The illustrative case example used in this paper emerged from a larger critical ethnographic study of aging in the Filipino community in Montreal, Canada. We suggest that an intersectional life course perspective has the potential to facilitate a deeper understanding of the nexus of structural, personal and relational processes that are experienced by diverse groups of older people across the life course and into late life.

Key words

Intersectionality; im/migration; ethno gerontology; critical gerontology, racialization

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3.1 Introduction

While the impacts of im/migration on older adults have been addressed to some extent in existing social gerontological literature (Anthias, 2008, 2013; Baldassar, 2007; de Haas & Fokkema, 2010; Dwyer & Papadimitriou, 2006; Koehn, 2009; Lai & Chau, 2007a; Treas, 2008), relatively few conceptual or theoretical frameworks have explored how identity categories such as ‘race’¹⁴ and racialization¹⁵ can intersect with life events across the life course. Often housed in the sub-discipline of ‘ethnogerontology’, works on racialized communities have focused on the biological, psychological, and social implications of aging (Jackson, 1985), and the causes, processes, and consequences of ethnicity, national origin, and culture on individual and population aging (Torres, 2015). The impacts of ‘race’ and racialization are beginning to be addressed in studies that focus on aging in relation to transnationalism and im/migration (Baldassar, 2007; Crewe, 2005; Torres, 2012; Treas, 2008). Yet, while these efforts have made significant inroads to understanding the realities of racialized older people from immigrant communities, few frameworks explicitly bridge the personal stories of aging with the wider structural barriers and the unique realities and histories that have shaped racialized communities and older people’s lives. Moreover, few studies that use a life course perspective have considered interlocking forms of oppression. This represents a missed opportunity for a more integrated analysis of the interplay between identity categories, individual chronological life events and the impact of institutions, policies, and broader histories and systems that come to shape identities over a lifetime. What continues to be missing in this scholarship is how systems of oppression such as colonialism, patriarchy and capitalism are interlinked and shape key events over the life course, and jointly constitute later life experiences (Hulko, 2009a).

Researchers have suggested that the problem of understanding the impacts of ‘race’ and ethnicity is connected to a number of assumptions in the field of gerontology and the study of aging more generally (Phillipson, 2015; Torres, 2015). For instance, understandings of ‘race’,

¹⁴ ‘Race’ is an identity category that partly forms the basis of one’s social location (others being gender, ethnicity, social class, age, ability and faith. (Hulko, 2009a)

¹⁵ Racialization refers to broad social processes (including colonialism and cultural privileging) in ascribing social meaning to the term ‘race’. This definition acknowledges how the meanings and effects of ‘race’ shift across time and space; and constructs racial difference, categorization, and exclusion between groups (Henry & Tator, 2009)

ethnicity, and age are dominated by solution-based approaches that privilege models of success and continuity (Daatland & Biggs, 2004; Torres, 2012). Marshall (1999) suggests that the models and frameworks used to explain aging are often culturally specific, and based on experiences and/or outcomes of communities that are assumed to be stable and homogenous. However, despite the call for increased recognition and responsiveness to the diverse pathways of aging, scholars have argued that additional theoretical work is needed to integrate the structural forces that impinge on the individual with personal trajectories of aging (Anthias, 2008; Koehn, et al., 2013; Settersten, 2009; Torres, 2015).

In response to the call for more comprehensive frameworks, a handful of authors have focused on intersectional and interlocking approaches to the study of aging (Dressel, Minkler & Yen, 1997; Hopkins & Pain, 2007; Hulko, 2016; Krekula, 2007), with a small body of literature connecting issues of aging to historically marginalized groups such as racialized older people (Anthias, 2008; Calasanti, 1996; Hulko, 2009a; Koehn et al., 2013; Torres, 2015). As Koehn et al. (2013) noted, there is significant potential in understanding that “people experience the effects of a country's social inequities as simultaneous interactions between multiple dimensions of social identity (e.g. gender, age, sexual orientation, visible minority and im/migration status) that are contextualized within broader systems of power, domination and oppression” (p. 10). While Dressel, Minkler, and Yen (1997) provided earlier guidance in using interlocking oppressions/intersections to account for structural forces that shape experiences of aging, other scholars have begun to explore its relational, temporal, and spatial dimensions (Hopkins & Pain, 2011; Hulko, 2009a; Krekula, 2007). Using the concept of age relations, Calasanti (1996) examined structural inequalities in retirement policies and their impact on older women in the United States. Her findings elucidate how labour market inequalities, characterized by lower participation in employment and reduced social security benefits earlier in the life course, come together to impact life course privileges such as lifetime earnings and access to pensions. This type of analysis acknowledges what Estes (1999) describes as a structural view of aging which presupposes that the “status, resources, and health of, and even the trajectory of the aging process itself, are conditioned by one’s location in the social structure and the relations generated by the economic mode of production and the gendered division of labour” (p. 19). For instance, Hulko’s

(2009b) work with older people experiencing dementia, highlights how experiences of marginalization and privilege shape older people's views on life with dementia. By focusing on subjectivity and voice, Hulko's work (2009a; 2009b; 2016) demonstrates how social processes such as racialization and gendering vary temporally and spatially, while systems of oppression are historically and culturally situated (Hulko, 2009a; 2016).

In the context of immigration, Anthias (2008; 2009; 2013) problematized notions of belonging and identity by noting the absence of frameworks that address unequal power relations and structures of differentiation. She introduced the concept of 'translocational positionality', a concept informed by intersectionality, as way to focus on positionality, and the "crisscrossing of different social locations, but also ... to the shifting locales of people's lives in terms of movements and flows" (Anthias, 2008, p. 17). While concepts such as 'translocational positionality' have relevance, a step-wise guide is needed to extend intersectional analysis to account for the interplay between individual stories, social relations, and structural forces.

This paper makes the case for an *intersectional life course perspective* that equips researchers and decision-makers with the means to better understand the relationships between the structural and institutional forces that shape everyday life narratives of older people at marginal and racialized social locations. We propose an innovative theoretical lens—the *intersectional life course perspective*—to enable a more nuanced and comprehensive examination of the diversity and heterogeneity of the late life experiences of racialized older adults. To do so, we discuss how key concepts from intersectionality theory (as originally conceptualized by Collins, 2000 and Crenshaw, 1987) can be linked with elements from the life course perspective (proposed by Elder, 1974). Not intended as a final static model, we propose this new perspective as a means to begin the conversation about how theory may better incorporate intersecting and interlocking oppressions into understandings of the late life among marginalized communities. We do so by first introducing key concepts of the life course perspective, and intersectionality. We then explore our proposal of an *intersectional life course perspective* that takes into account elements of both the life course and intersectionality. Finally, we put this framework into action through the case example of Rizza, a retired domestic worker who immigrated to Canada. Rizza's case offers a unique opportunity to tease apart identity categories (such as gender, 'race',

ethnicity, and age), and key concepts over the life course (such as im/migration, labour, and retirement)—specifically exploring how roles, identities, and expectations shift as older racialized immigrants navigate systems of domination throughout their lives. Here, intersections of ‘race’, gender, im/migration, and labour reveal how later life experiences are uniquely attached to various Canadian policies which have historically marginalized, and continue to marginalize, racialized immigrant older adults in Canada.

3.2 The life course perspective

The life course approach is considered a leading theoretical and methodological perspective in social gerontology. Offering an ontological and holistic view of life, this approach has generally been used to understand how transitions and trajectories impact one’s life (see Clausen, 1986; Grenier, 2012; Hareven, 1994; Hutchison, 2015). Where differences occur on theoretical and geographical lines (Dannefer & Settersten, 2010)¹⁶, the best known iteration of the life course in North America, is that proposed by Glen Elder (1974; 1994), which outlines how the life course can be understood through structured pathways (i.e. social institutions and organizations), and individual trajectories (i.e. roles, statuses, development) that shift over time to impact individual identities and behaviours. Elder’s (1974; 1994) life course perspective is based on four major concepts. First, *human lives and historical times*, whereby lives are seen as intertwined and defined by significant events that produce long-lasting effects. Second, the *timing of lives*, indicates how events occurring at specific points during a timeframe could have different consequences for different people. The third key concept, *linked lives*, denotes the interrelatedness and interdependence of human relationships across the lifespan. Finally, the life course takes into account the key concept of *human agency* and the ways in which people make

¹⁶ See Marshall (1999) and Grenier (2012) for review of the life course and transitions. The distinction between ‘personalological’ and ‘institutional’ that is made by Settersten and Dannefer is particularly helpful in understanding the differences between the life course perspective as articulated in North America and Europe. While we acknowledge the European perspectives on the life course that are more attuned to the interplay of structures and social institutions, and use this in other work, we situate this paper in the North American scholarship that is more closely connected to intersectional perspectives and empirical research with racialized and immigrant communities.

choices, adopt strategies, and articulate experiences of resilience when encountering structural constraints (also see Settersten, 2003; Dannefer & Settersten, 2010; Hutchinson, 2015).

The life course perspective has been widely used in social gerontology, and in particular with regards to ‘race’ and ethnicity in the United States. Studies examining health disparities along racial/ethnic lines are the most representative type of life course research, with predictive models being used to situate class, ‘race’, ethnicity, and gender (Brown, Richardson, Hargrove, & Thomas, 2016; Kim & Miech, 2009; Warner & Brown, 2011). For instance, Glymour and Manly (2008) focused on the life course patterns of cognitive aging among older African-Americans, and the impact of geographic segregation, migration patterns, socioeconomic position, educational and occupational opportunities, and encounters of discrimination. Similarly, Warner and Brown (2011) examined disability trajectories, and noted racial and gendered health disparities between Black, Hispanic, and white communities in the United States. Especially noteworthy is how the majority of works tend to emphasize individual trajectories and key life events such as health outcomes in later life. As such, existing scholarship has not yet thoroughly theorized the links between multiple identities and interlocking oppressions in the everyday experiences of structural inequality (Dannefer & Settersten, 2010).

3.3 Intersectionality

Intersectionality is a perspective that enhances the capacity to understand the structural roots of experiences of marginalization. Originating from critical race and critical race feminist theory, intersectionality focuses on the importance of examining the multiple and interlocking systems of domination that shape and structure people’s lives (Collins, 2000) through the interplay between categories of difference (such as age, ‘race’, class, sexual orientation), with wider systems of domination (Brotman, Ferrer, Sussman, Ryan, & Richard, 2015). Initially borne out of a statement written in 1977 by the Combahee River Collective, a Black feminist lesbian organization, the concept of intersectionality critiqued the pervasive marginalization of Black women from the white feminist and anti-racist movements of the time. Critical race feminists drew attention to the intersections of ‘race’ and gender as mutually constitutive processes of differentiation; outlining how these processes had oftentimes been unaccounted

for, reified, and/or overly simplified within feminist and anti-racist scholarship (Crenshaw, 1987; Dhamoon, 2011). Central to this literature is the understanding that processes of differentiation reveal how social categories come to be organized, through systems of domination, which are the historically constituted structures of racism, colonialism, patriarchy, and capitalism, in order to function. Thus intersectionality scholars have stated that each process of differentiation and system of domination is interlocked; implying that systems of oppression and domination could not exist or function without gender and racial hierarchies, class exploitation, sexism, heterosexism, and so forth (Collins, 2000). Intersectional analyses allow for an understanding of how processes of differentiation organize subjects in various ways; how subjects are able to resist these modes of differentiation; and how systems of domination reflect and rely on these processes.

Intersectionality is considered a lens from which to examine the unique configurations and interplay between experiences that may include poverty, participation in the labour market, caregiving, education, im/migration status, and how they are situated within larger systems of oppression. Key concepts used across studies include that of identity, categories of difference, processes of differentiation and systems of domination/interlocking oppression. In her work on intersectionality, Hulko (2009a; 2009b; 2016) operationalizes and centers voice, subjectivity, and privilege. As such, the connections between subjective (micro) experiences with social structures (macro) serve to contrast the privileged center and the marginalized oppressed (Hulko, 2016). It is important to acknowledge that while intersectionality has strong theoretical foundations and is increasingly being utilized within the social sciences, researchers for the most part, have been slow to integrate the framework. Hankivsky (2007) suggested that the current challenge in applying an intersectional framework is translating the “conceptual approaches to intersectionality to inform the practical requirement of lifespan frameworks” (p. 1). Further, scant attention has been placed on age, thereby highlighting the need for a methodological guide on how to apply an intersectional analysis to aging, and in particular, aging of marginalized or disadvantaged groups. In response to this challenge, we argue that in conceptualizing a framework, our engagement provides a starting point to bridge understandings of the interactions of multiple

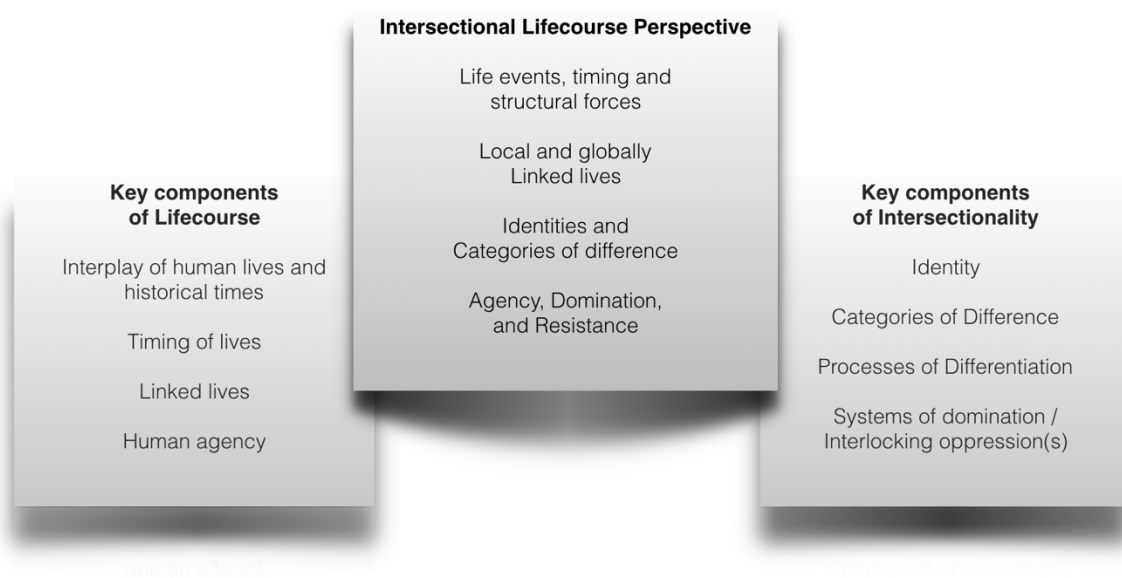
identities and structural oppression, through the unique and varied experiences of diversity in aging throughout the life course.

3.4 A new frame: The intersectionality life course perspective

We draw on key aspects from the life course perspective and intersectionality as a basis for our proposed *intersectional life course perspective*. Our argument is that while each is powerful in their own right, a combined perspective that blends the insights of the life course with that of intersectionality can offer a powerful new lens from which to analyze the experiences of aging among older adults from racialized groups. This *intersectional life course perspective* proposes four elements that are drawn from key concepts of the life course and intersectionality. Our analytical process began by assessing the ethnographic data collected by the lead author. Juxtapositions between participant stories, and the discourse within immigration and retirement policies highlighted the paucity of ethnoagerontological frameworks that could account for, and bridge multiple life course events to larger macro structures and systems of oppression that shape people's lives. We then considered the combination of the life course perspective and intersectionality as a way to address this gap, and proceeded to find points of commonality and linkage between the two. Once concepts from both perspectives were matched with each other, a process of re-ordering was done so they could more easily be understood as relational and complementary. Our intent is not to imply that the framework can be systematically applied across all subjects, but is offered in the spirit of providing guidance to researchers and decision-makers who wish to employ the perspective in their work.

In this article, we present our analysis as a stepwise procedure, where concepts from each perspective can be made complementary to each other. Figure 3 lists the key components, followed by a description of each as a series of steps. Careful attention must still be placed upon the development of a nuanced approach that is sensitive to the fluid and specific realities inherent to each subject. As such, we recommend our model as a guiding frame that should be adapted to reflect different contexts and experiences. Step one focuses on life events and structural forces, step two on local and globally linked lives, step three on identities and categories and processes of difference, and step four on agency, domination and resistance.

Figure 3 Main components of the life course perspective and intersectionality



3.4.1 Step 1: Identifying life events, timing and structural forces.

In step one, we suggest a consideration of key life course events, the timing of these events, and the structural forces that have contributed to these moments. This could include key transitions that correspond with life course stages as well as transitions such as migration that, although often not considered in typical segmented life courses, can significantly shape experience (see Grenier, 2012; Koehn et al., 2010). As such, migration becomes a means to more carefully consider the role of im/migration policies, as well as the impacts of relocation including, for example, exposure to discrimination. The incorporation of timing and structure thus provides the space to set age norms within a social structure (see Settersten, 2003), and for an analysis of historical and contemporary logics, systems of domination, and processes of differentiation. As such, step one extends the life course perspective beyond the individual level to a consideration of interlocked lives between individuals, and also with structures and institutions such as im/migration policy, retirement schemes and so forth.

3.4.2 Step 2: Local globally linked lives.

In step two, we suggest that the idea of linked lives be expanded from individuals and families, to families across generations and national/international borders (Hopkins and Pain, 2007). Individual trajectories are seldom experienced in isolation, and implicate multiple family members, multiple generations, intergenerational relationships, and transnational contexts. Thus, our *intersectional life course perspective* takes into account how people organize their lives, judge ‘progress’ or ‘success’, and formulate their identities based on relationships that occur with family, ancestors, between generations and across transnational contexts. Conceptualizing linked lives in this manner allows for a consideration of how multiple intersecting trajectories of im/migration, care, and labour influence social relationships and aging. It also provides a frame to consider experience within contemporary lives that include globalization, im/migration and transnational migration.

3.4.3 Step 3: Identities and categories/processes of difference.

In step three, we suggest accounting for identities and the categories/processes of difference/differentiation as defined through structural and institutional relations that shape experiences and identities. This includes identities for the purposes of claims-making (i.e., services for particular target groups such as services within/for/by marginalized communities), as well as perceived identities that are fluid and shift between contexts, and in relationships with structures, systems, families and society. This category thus extends the life course beyond historical events, timing and relationships, to be more inclusive of the structural and institutional relations that shape lived experiences and identities. Here, we draw on categories of difference and processes of differentiation— notions taken from intersectionality—to more adequately inform the proposed *intersectional life course*. By considering categories of difference and the consequent processes of differentiation, we expand our understandings to the social processes that work to limit access among marginalized and racialized groups in Canadian society, which force these groups to rely on mechanisms such as families and extended kin networks. The key concepts of *dynamic identities* of older people, the *categories of difference* (e.g., ‘race’ and

gender), the *processes of differentiation* (e.g. racialization, gendering, etc.), and *systems of domination* (e.g., racism, colonialism, sexism, and patriarchy) (as cited in Dhamoon, 2011) thus demonstrate the influence of intersectionality on the life course in this dimension.

3.4.4 Step 4: Domination, agency, and resistance.

In Step 4, the analysis turns to contextualize experience and the results of steps one to three within wider systems of domination, and to recognize and include agency and resistance. In our view, conditions such as agency and resistance that are integral to the life course are both structured and interpretive. As such they are constructed and experienced in relation to difference, but also in response to wider systems of domination. Thus, although systems of domination shape and structure experience, they can at the same time, be overturned by strategies that respond to the structural forces, which perpetuate oppression and marginalization. These notions correspond to the critique that the life course stage of agency is in some way ‘empty’ by drawing on acts and strategies of resistance as means of recognizing agency within structures (Dannefer & Settersten, 2010; Settersten, 1999; Settersten & Gannon, 2005).

3.5 The application of an intersectional life course

In this section, we present the case study of Rizza as a means to witness how the *intersectional life course perspective* may be employed to better understand the experiences of racialized immigrant older people. The case study outlined below was part of a larger critical ethnographic project conducted by the lead author¹⁷. Critical ethnography is a form of ethnography that examines the larger political, social, and economic relations that impact the lives of people (Madison, 2012). The purpose of the study was to elucidate the intersections of im/migration, caring labour, and aging within the Filipino community in Canada. In-depth qualitative interviews were conducted with 18 older adults, 6 adult children, and 13 community

¹⁷ The findings of the larger ethnographic study centered on (1) the disjuncture between immigration discourse and the ways in which older racialized newcomers are welcomed into Canadian society; (2) the intersections between immigration and retirement policies and their impact on older Filipina women engaging in domestic work; and (3) the ways in which Filipino older adults provide and receive care in intergenerational and transnational settings in response to the lack of resources made available to them.

stakeholders living in Montreal, Quebec. Older participants and adult children were recruited through local newspapers that were written for the Filipino diaspora. Community stakeholders were recruited through purposeful sampling, where the lead author approached respondents from existing social service, immigration and aging networks. Interviews with older people and adult children lasted 60 to 90 minutes each, and focused on eliciting descriptions of earlier life course experiences and trajectories related to life in the Philippines, im/migration, labour, family, and aging. Interviews with community stakeholders focused on their experiences working with older Filipinos, and their understandings of key issues related to aging. Data analysis was informed by key concepts of the life course (i.e., identifying life events and trajectories) and intersectionality. Themes were created according to the types of structures and institutions that older people encountered, as well as their various im/migration, aging, and caring labour trajectories. The research was conducted in accordance with the Tri-Council Policy Statement for Ethical Conduct for Research Involving Humans, and approved by the Research Ethics Board Office at McGill University (ref #198-1112).

The case of Rizza was selected based on the depth of her account, and the trajectories she described throughout her life. These trajectories were then cross-referenced and analyzed according to the proposed *intersectional life course perspective*, in relation to structures of im/migration, aging, and caring labour. In applying this analytic perspective, it is important to state that our conceptualization offers a starting point for what we hope will be an ongoing iterative discussion amongst gerontology scholars. In the sections that follow, we illustrate how one might conceptualize key events, trajectories, timing and linked lives between actors of different generations and across transnational contexts, and how these, in turn, are related to the systems of domination and processes of differentiation that operate, intersect, and influence lived experiences and identities.

Rizza is a 73-year-old woman who was born into a small family of five in the Philippines. She describes her life as “working, working, working”. Her work trajectory began at the age of 13 (1953), when she attended to her family’s general store. Rizza married at the age of 20, and had 3 children by the age of 27. When the store closed down in the 1960s, Rizza followed her older brother’s advice to join him in Europe, where he

was working as a concierge for a large hotel chain. Rizza's brother had arranged for her to take on a caregiver job with a family he knew. Though married, and having 3 children at the time, Rizza left the Philippines in 1974 (age 34) to work as a live-in domestic worker in Europe. As the primary breadwinner for her family, Rizza regularly sent half her wages to her family in the Philippines.

In 1977, Rizza once again followed her brother, this time to Canada, where he introduced her to a new family employer seeking a domestic worker. At the age of 37, Rizza moved to Canada under the Foreign Domestic Movement¹⁸, a labour policy that allowed domestic workers, and receive permanent residency following one year of service (Rizza received her permanent residency at the age of 38). Rizza described leaving her family as one of the most difficult decisions she has ever had to make, but rationalized that the temporary separation would allow her husband and children to eventually join her in Canada. Rizza would later transition into the secondary labour market where she worked for a factory for a few years before returning to domestic work. Following several years of separation, Rizza applied for her family (husband and 3 children) under the Family Sponsorship program. After almost ten years of separation, Rizza described the experience of reunification as difficult because her children were adolescents by the time they reunified. She also discussed the difficulties in bonding with her children given their unfamiliarity with Canadian society, and her obligation to work in order to support the family. However, Rizza strongly believed that her sacrifices were understood and appreciated by her children despite her prolonged absence.

Rizza's narrative and life course also includes a strong dedication to caring for her family. In 1980, she cared for her parents in Canada (who were sponsored by her brother under the Family Sponsorship Program). Her caregiving narrative was highlighted in

¹⁸ The Foreign Domestic Movement (1981) was a precursor domestic worker program to the previous Live-in-Caregiver Program (1992), and current Caregiver Program (2014)

1998 when her father became. At the same time, she also cared for her mother, who had dementia and was housed in a nursing home, until she died in 2006. Now in her 70s, Rizza is retired and receives the Old Age Security with a Guaranteed Income Supplement for her low income. Rizza officially retired in 2005, but reports that the amount she receives is not to meet her everyday needs, which include daily necessities such as food and shelter. Most importantly, Rizza uses much of her pension to provide financial assistance to her local intergenerational family, as well as her extended family in the Philippines. To supplement her income, she works ‘under the table’ as an unreported cook and caretaker for two families (from past domestic work networks). She also lives with her daughter (also a domestic worker), and watches her grandchildren whenever asked. While Rizza expresses an interest in returning to her homeland to see family members who she has been supporting (via remittances), she notes that she wants to ensure that her family’s needs in Canada are accounted for first.

3.6 Situating Rizza’s experience in the intersectional life course

3.6.1 Step 1: Life events, timing and structural forces: The importance of im/migration.

Beginning with an analysis of timing and key events throughout the life course, we see that Rizza’s migrations were key events. These migrations allowed her to escape pervasive poverty in the Philippines through the form of domestic work contracts in Europe, and eventually, Canada. The labour attached to her migration also significantly shaped her caregiving and labour trajectories. Without these opportunities, Rizza would have remained in the Philippines where she may have had to struggle to find employment because of the closing of her family shop. Rizza describes her immigration as follows: “the reason I went abroad, number one, is for my children”. The timing of Rizza’s key events came at a particular juncture in her family’s life, but was also shaped by international policy structures. At the time, the Philippines and Canada were aligning their migration and domestic work channels so that Filipino domestic workers could cross borders with as few barriers as possible. In 1974, the Philippine government

introduced the Labor Export Program, a structural adjustment program that began the alignment of its migration and labour programs to promote the commodification of its labor force (Rodriguez, 2010). The Foreign Domestic Movement introduced by the Canadian government in 1981 was a specific domestic work program that allowed women to migrate and receive permanent residency following one year of live-in domestic work. Yet for Rizza, the underlying motivation to enter the migration-care circuit was to provide financial security for her family and children. Her account thus outlines how she viewed the sacrifices of family separation, and hardships of serving as an overseas domestic worker as justified because it meant securing a better future for her family.

3.6.2 Step 2: Local and globally linked lives: Intergenerational and transnational lives.

Individual trajectories are seldom experienced in isolation, and implicate multiple family members, multiple generations, and take place across transnational spaces. Rizza's trajectories of migration were facilitated by her brother who was already working overseas. Once overseas, Rizza justified the lengthy separation from her spouse and children as an opportunity find work, and provide a better future for her family. Her im/migration narrative was thus tied to her gendered labour contributions, which were related to her identity as a caregiver (mother and daughter). Rizza described herself as a "good daughter", and a "good mother" despite not being present for her family members for an extended period of time. Instead, these identities were justified and tied to her ability to provide support through financial remittances to her extended and transnational family in the Philippines, and the potential of a better future for her immediate family. Rizza's drive to become the primary income earner, and to sponsor her family's emigration from the Philippines represents a unique reality for Filipina women, who predominantly leave the Philippines to seek permanent residency in wealthier nations such as Canada. Rizza's ability to sponsor her nuclear family had significant implications for her children, and later her grandchildren. Rizza's children reunited with her in the 1990s as adolescents, under conditions which are no longer available under the current Canadian immigration scheme. Her immigration to Canada happened at a time when domestic workers

were streamlined to come to Canada with less rigid admissions criteria and a greater possibility of family reunification, although in her case the latter was delayed. Her experience demonstrates how her life, linked with her brother, older parents, spouse, and adult children, transcended borders in the Philippines, Europe and Canada.

3.6.3 Step 3: Identities and difference: Devaluation and continuity of racialized and gendered care.

In considering Rizza's story, we witness how categories of difference and the process of differentiation have been imposed along racial and gendered lines through her caring labour, and her identity as a mother, daughter, and provider. These linkages represent a common experience for thousands of Filipino women who partook, and continue to partake, as domestic workers, in the outward migration from the Philippines to Global North and Global South societies. Categories and processes of difference and differentiation underscore how racialized and gendered labour shaped the types of work Rizza performs professionally and privately, and thus, her everyday experiences. In her home, Rizza provides around the clock care to her aging parents, husband, adult children and grandchildren. This invisible but prevalent reality, commonly provided by women, was most pronounced throughout Rizza's 50s and 60s, when she simultaneously cared for three different family members while continuing her employment as a domestic worker. Rizza describes this intergenerational care as the most challenging part of her life because it meant engaging in caregiving for three different people while continuing to work in the secondary labour market because she was the sole breadwinner. This extended and continuous caregiving also permeates her later life. Though Rizza's identity as a caregiver was deeply embedded in her sense of self, the impact of intergenerational and multiple care situations had a negative impact on her body and well-being.

Categories of difference can also be seen in relation to labour, and care at the age of retirement. Rizza is 70-years old and receives Old Age Security, as well as the Guaranteed Income Supplement – a means tested program meant to reduce poverty in later life. However, her economic standing (i.e., poverty) and obligation to provide financial support to her family means that Rizza is unable to meet her basic needs with her current income. Rizza thus continues

to provide domestic labour in the underground economy. Rizza's engagement in the peripheral labour market belies the interplay between pension, labour, and aging. Her situation highlights how older racialized women in Canada are highly invisible and most severely impacted by life-long participation in the secondary labour market, and specifically in providing care labour (Young, 2012). As Rizza transitions into retirement, her children are now beginning to consider her needs. While they abhor her continued engagement in the secondary labour market, Rizza resists suggestions to stop working, since her participation in the underground economy allows her to support her local and transnational families.

3.6.4 Step 4: Agency, domination and resistance: Im/migration as racialized caring schemes.

Rizza's life events, trajectories, and experiences are structured by wider systems of domination that are embedded both separately and at the nexus of im/migration, labour, and care. Unlike other European and non-European immigrant groups, Filipino immigration into Canada is a recent phenomenon that has occurred within the last fifty years, largely due to labour and family reunification policies (Tungohan et al., 2015). The lived experiences of the Filipino diaspora are thus uniquely tied to the im/migration schemes and programs that have allowed them to cross Canadian borders, the types of labour (i.e., primarily domestic labour) in which they have engaged, and the systemic barriers they have encountered throughout the life course. Yet, Rizza's account demonstrates a tension between agency, domination and resilience. Her account is not one of imposition by a family and state system, but one that is woven through a commitment to care and her family. She has a strong identity around work and care, and takes pride in providing support to her intergenerational and transnational families. This work also allows her to maintain her identity as matriarch to her family, and serves to contest the prevailing societal assumptions of decline in later life. At the same time, it is difficult to surmise whether Rizza would continue this line of work if given the choice, since her transnational and intergenerational family require her financial contributions. However, recognition of these types of strategies and acts of resistance offer us a glimpse into how older people respond to pervasive systemic barriers in their later lives.

3.7 Discussion/Conclusion

3.7.1 Older women at the crossroads of ‘race’, gender, im/migration, caring labour, and age.

Our objective in this paper was to propose the *intersectional life course perspective* as a framework that builds on the strengths of the life course and intersectionality, and could thus better understand the lives and experiences of people who are situated at multiple margins, such as racialized immigrant older people. Some scholarship has incorporated intersectionality as a way to address the gaps in relating personal stories with that of wider structural relations. Anthias (2008; 2009; 2013) has provided an example of how intersectionality can be applied by considering the concept of translocational positionality, which takes into account challenges of identity and belonging, and the multiple positionalities that older people find themselves located in. Similarly, Hopkins and Pain (2007) introduce notions of relational geographies of age, and intergenerationality as possible directions when applying intersectionality into gerontological research. Our contribution centers on the application of intersectionality through the life course as a way to address the challenges of understanding individual aging within the wider social structures that frame and shape context and experience. An *intersectional life course perspective* presents an important analytical lens to focus on the heterogeneous experiences of aging, to offer a richer consideration of the complex biographies of communities, to consider a broader and more detailed analysis of the dynamics of power, and to account for the fluid nature of identity that is embedded within particular times, contexts and spaces/places.

The analysis and findings presented in this paper showcase how the proposed *intersectional life course perspective* can be used to explore how structural forces that occur over an extended period of time intersect with individual life trajectories. As such, this perspective holds the potential to situate personal stories within wider social processes in order to consider how categories of difference, processes of differentiation, and systems of domination are implicated within the individual life course. This is achieved by examining the interconnections between life events, transitions, and systems of domination that occur over the life course and

into late life. On their own, intersectionality and life course perspectives offer unique contributions. However, linking these perspectives through an *intersectional life course perspective* offers new possibilities to locate the individual within shifting social structures across time. Furthermore, merging concepts of the life course and intersectionality can inform our understanding of how gender, labour and migration are inextricably linked, and have important implications for aging. As such, this perspective opens possibilities to understand how life course experiences are structured by experiences of racialization, patriarchy, and commodified labour but are also contested, resisted, and utilized by older people. In other words, an intersectional life course can link consideration of key events, trajectories, and interconnections that occur throughout the life course, with understandings of how these experiences are transposed and shaped by wider historical, structural and social systems.

Our case illustration of Rizza clearly highlights the intersections between aging, im/migration, caring labour, and gender. It is consistent with the broader scope of feminist work, which has elucidated highly gendered inequalities within caring labour in general. Rizza's story demonstrates how state systems of domination that take place through im/migration schemes such as the 'Live-in caregiver program/Caregiver program' frame immigrants as commodities in early periods of the life course through im/migration, but also have implications that extend into later life. Existing scholarship has shown that women overwhelmingly take on the primary (and sometimes sole) role in all arenas pertaining to care (see Luxton and Bezanson, 2006, Neysmith, et al., 2012 and Young, 2011). This balancing of care meant Rizza adopted what has often been referred to as "double duty care" characterized by work that is formal and informal, recognized and unrecognized, valued and undervalued at the same time (Ward-Griffin, St-Amant, & Brown, 2011). More broadly, the findings of this study allow us to consider and deconstruct commonly held assumptions about the generosity and abundance of the im/migration, labour, and care regime in Canada. Considering the interplay and intersections of im/migration, labour and care allows us to see how an *intersectional life course perspective* can expose various systems of domination that rest on sexist, racist, and classist assumptions whereby racialized women from the Global South generally, and Filipino women specifically, are expected to provide certain types of caring labour in the secondary labour market. The assumptions about migration, labour

and care obfuscate the impacts of such trajectories, particularly later in life when older people may continue to engage in the secondary labour market in order to meet basic needs, or where they are likely to assume the role of caregivers to their grandchildren. Our proposed approach provides us with the opportunity to understand these complexities. For example, retired and older domestic workers commonly find themselves ‘too young to retire’ but ‘too old to work’. That is, while they feel that they still have contributions to make, and that their labour contributions are needed, they are both unable to retire because they need to work for financial reasons, and may experience labour as difficult because their bodies have reduced capacities. Such contradictory realities are particularly salient and nuanced for people such as Rizza, and reinforce the importance of problematizing the Canadian imagined community, and how racialized and gendered assumptions operate within practices and policies.

Privilege, agency, and resistance are crucial components of the *intersectional life course* perspective. Rizza’s narrative demonstrates how her life course was historically shaped by structures which have served to oppress racialized women of the Global South, who leave the Philippines in search of more secure futures for themselves and their families. Here, Rizza is one example in a broad historical gendered trajectory of im/migration for Filipino women¹⁹. Unlike other countries, earlier Canadian domestic work policies offered permanent residency following a period of live-in service, thus making it an attractive destination for female applicants from the Philippines. The Philippines, for its part, facilitated this burgeoning exportation, expansion, and intensification of commodified labour by re-structuring its migration policies to meet the demands of this caring labour (Rodriguez, 2010)²⁰. Understandings of how the Philippines has

¹⁹ The first major wave of Filipinos in Canada was in the 1970s/80s under ‘multicultural’ policies that encouraged and facilitated the arrival of economic class immigrants and later, family reunification (Tungohan et al., 2015). The more recent influx of domestic workers took place in the 1990s/2000s in the context of tighter im/migration policies that streamlined the arrival of domestic workers through the Foreign Domestic Movement (FDM) and its successor policy, the Live-in-Caregiver Program (LCP).

²⁰ The dynamics between global capital and labour commodification is aptly demonstrated in the Philippines, where nearly 10% of the population is situated temporarily or permanently abroad through temporary, low-skilled labour (Rodriguez, 2010) or caring labour (Parreñas, 2000). As of 2016, the economy of the Philippines has catapulted to the 36th largest in the world (International Monetary Fund, 2016). It is heavily reliant on the exported human labor commodities, which provide remittances representing 10% of the nation-state’s gross domestic product (Rodriguez, 2010). These arrangements have streamlined specific forms of labour, particularly caring labour and other forms of

positioned itself to be the predominant supplier of commodified labour is rooted in its complex colonial history, where imperial policies of what Rodriguez (2010) called “benevolent assimilation” have been instilled structurally and socially to the point where migrant workers are now valorized and celebrated as modern-day heroes. In this context, Rizza feels both privileged and oppressed. Rizza, discussed how she felt privileged to have gone through her im/migration and labour history when thinking of her experience in comparison to more recent migrants in the Filipino community in the Philippines and in Canada. Yet, Rizza also feels that her story has been difficult and that she would not have chosen to experience poverty in late life. As such, her account demonstrates the tensions and problems inherent in im/migration policies, and the ways in which labour, care and migration intersect to impact late life.

We have found an *intersectional life course perspective* to be a poignant way of understanding the experiences of racialized immigrant older people. However, as the framework we have proposed is intended as a starting point, we recognize that it has shortcomings. First, the elements that we have used to discuss the steps are conceptual. Although we have developed this framework and tested its relevance by means of application to a case, it has not been tested across a large study and with many participants. In response, we would argue that an integrated *intersectional life course perspective* prioritizes the stories and experiences of diversity in aging communities, experiences which tend to be at best compartmentalized, and at worst, de-contextualized and de-historicized. This allows us to then highlight the intersections of structural oppression that impinge on the experiences of the everyday, as well as over the life course. A second limitation is the difficulty of applying this perspective across cases in narratives where the specificities of an intersectional identity framework might limit the capacity to work across difference. The challenge in this case, is to avoid reifying identity and experience when assessing the impact of structural forces. Additional research needs to be conducted to elevate this perspective so that it may address the interplay of wider structural forces and everyday realities in ways that represent the historical and contemporary context of marginalized communities

secondary labour, which have simultaneously garnered significant financial remittances while extricating the state from developing a welfare structure that would reduce reliance on outward migration (Rodriguez, 2010).

(including but not limited to racialized immigrants). This work, we argue is best achieved through a combination of the life course and intersectionality. As we move forward in developing this work, we anticipate numerous opportunities to unravel the nuances that exist at the intersections of structures, policies/practices and experiences. Rizza's case clearly demonstrates the possibilities of considering the interplay between life events/timing; local and globally linked lives; identities and categories of difference; and agency, domination and resilience. It also importantly suggests how life course trajectories such as those experienced through im/migration have implications that extend well past the individual into families, communities, and across national and transnational boundaries.

CHAPTER 4: METHODOLOGY

This chapter provides an overview of my research methodology and design. It is divided into two parts. In Part 1, I outline and describe critical ethnography as a methodological approach, including a discussion of its epistemological and ontological roots. In Part 2, I describe my research design and outline how I (a) adapted my critical ethnographic approach by integrating life course/narrative interviewing techniques and (b) integrated positionality and reflectivity as a way to interrogate the intersections between aging, immigration, care, and labour. My personal experiences as a second-generation Filipino-Canadian (see Prologue) have shaped how I problematized and approached issues of aging in the Filipino diaspora in this project. This personal experience also motivated my involvement as a community organizer working with an advocacy group for Filipino domestic workers and youth. As such, my research approach was, and continues to be, shaped by my own reflexive position, as well as the experiences of my participants.

4.1 Research Question

As outlined in the literature review, a significant proportion of the scholarship on aging among racialized older immigrants has focused on formal and informal caregiving in the context of health and social care services (see Chapter 2). However, the everyday experiences of aging among older Filipinos in Canada have yet to be explored. Present gaps in the literature include (a) focus on care that overlooks the (un)recognized contributions of older Filipinos to the intergenerational family, (b) the lack of attention to the impact of immigration throughout the life course, and (c) the ways in which immigration and labour are implicated in the aging process. In response to these gaps, my dissertation addresses **how aging, immigration, and caring labour intersect to impact the everyday experiences of older Filipino adults living in Canada**. I do this by engaging with the lived experiences and oral histories of older Filipinos, their families, and their community networks in order to understand how their lives are shaped by their experiences of immigration, complex caring relationships, and labour histories. I juxtapose these experiences with past and current immigration and labour policies and programs that have served to regulate and structure my participants' lives.

4.1.1 Part 1: Critical ethnography as a vehicle for critical epistemology

This section introduces critical ethnography as a qualitative research design and highlights how it differs from conventional ethnographic approaches. Critical ethnography emerged from the Chicago School of Sociology during the 1960s, when ethnographers turned to critical theory and cultural critiques as a means to assess modern society and its institutions (Carkspecken, 1996; Cook, 2005). At this time, critical ethnography was used to contest the dominance of positivist thinking in the social sciences. Key writings by Thomas (1993) outlined the theoretical underpinnings of this approach by demonstrating how the relationships between concept/object and signifier/signified are never stable and are often mediated by the social relations of capitalist production and consumption. According to Madison (2012), critical ethnography begins with a commitment to addressing “unfairness or injustice within a particular lived domain” (p. 5).

Distinctions between critical ethnography and more conventional ethnographies are based on different understandings of material and sociopolitical conditions (Madison, 2012). Where conventional ethnographies are rooted in the meanings, cultural descriptions, and informants points of view, critical ethnography seeks a more critical assessment of larger political, social, and economic oppression,²¹ including conflict, struggle, power, and praxis (Schwandt, 1997; Springwood & King, 2001). More specifically, critical ethnographers begin by situating the participant or community’s point of view within a socio-historic context. The researcher then identifies the structural factors that influence everyday lives. A critical ethnography aims to highlight systems of power and control and to change culture (rather than only interpreting it) by analyzing hidden agendas and assumptions (Baumbusch, 2011).

With this broad starting point in mind, the critical ethnographic researcher seeks to disrupt the status quo by unsettling neutrality and taken-for-granted assumptions in order to highlight the underlying and obscure operations of power and control (Madison, 2012). Perhaps

²¹ Economic oppression takes on several forms, including forced labour and employment and economic discrimination (Cudd, 2006).

most importantly, critical ethnographers engage in research as a means of resistance to the “ethnographic present,” which refers to a tendency among researchers to perceive and interpret experiences as static and timeless. In highlighting the problem of this fixed position, Davies (2008) wrote:

“the ethnographer moves on [but] temporally, spatially and developmentally; the people he or she studied are presented as if suspended in an unchanging and virtually timeless state, as if the ethnographer's description provides all that it is important, or possible, to know about their past and future” (p. 193).

I argue that this tendency to present informants in a state of permanence is often evident where writing about the “Other” is concerned. More specifically, being positioned at the margins of society, the “Other” is, oftentimes, assigned static and enduring characteristics (Razack, 1998; Thobani, 2007). Part of the appeal of a critical ethnography is that it aligns with the theoretical foundations of intersectionality, which acknowledges that certain groups in society are privileged over others, and that oppression comes in many forms (see Chapter 3 for an overview of intersectionality).

For my dissertation, I adopted Kincheloe and McLaren’s (1994) concept of “criticalism,” where the critical ethnography project engages with social and cultural criticism. This approach is based on the assumption that knowledge is “mediated by power relations which are socially and historically constituted” (Kincheloe & McLaren, 1994, p. 453), and that facts can never be removed and/or isolated from value or ideological inscription. In adopting this view, I use critical ethnography to examine a social phenomenon (i.e., experiences of aging in the context of immigration, labour, and care) and to seek a historical and critical understanding of how it is socially structured. Madison (2012) noted that the broader method of critical ethnography relies heavily on direct observation (participant observation), open-ended interviewing, and textual analysis. The duty of a critical ethnographer, then, is not only to reveal existing structures of oppression but, also, to understand and critique the ways that knowledge is embedded in social practices that are interwoven with power (Mahoney, 2007). This allows the researcher to pay attention to the unheard experiences of communities that experience forms of marginalization (Cook, 2005).

4.1.1.1 Approaches to critical ethnography

Critical ethnography includes three fundamental approaches (Carspecken, 1996; Thomas, 1993). The first, based on guidelines from Carspecken (1996), situates the meanings of any experience in a wider social context. For example, research might examine relationships between a group and the wider social milieu within which the group is situated. While informative, this type of critical approach focuses less on the wider social structures and dynamics of power and domination (Carspecken, 1996). A second approach considers how structural and power relations mediate and are embedded in the everyday lives of individuals or groups. This type of analysis unravels the social and ruling relations that shape people's everyday lives and engages with a more descriptive level of analysis. Carspecken (1996), for example, noted how this iteration of critical ethnography provides nuances that were not considered in the first technique but does not address how structural issues relate to human agency in general. The third approach identifies and, subsequently, deconstructs the social structures and dynamics that regulate people's lives. In this method, engagement begins with understanding how group norms and practices are shaped and, ultimately, constrained by social factors. Weis and Fine (2012) argued that engaging in what they termed "critical bifocality" allows the researcher to identify interrelated notions of human agency in the context of everyday experiences with social structures embedded in socio-historical events.

This dissertation adopts the third critical ethnographic approach, drawing from its potential in order to explore social phenomena through the informant's viewpoint in a way that emphasizes local knowledge and encourages the researcher's reflexive introspection (Madison, 2012; Weis & Fine, 2012). These experiences are presented in tandem with past and current social programs and policies (such as retirement and immigration programs) in order to identify and assess the historical events, social structures, and cultural dynamics that regulate the lives of older Filipinos in Canada. In line with the parameters for critical ethnography, my study design employed an iterative data collection strategy that included reflexivity notes, qualitative interviews, participant observations, and textual analysis. Together, these methods were

employed to understand the intersections between aging, immigration, and caring labour among older Filipino adults.

4.1.1.2 Reflexivity in critical ethnography, and the application of Sikolohiyang Pilipino

One key epistemological and ontological component of critical ethnography is the notion of reflexivity, wherein researchers are expected to situate themselves in the research site, community, and/or context examined. Taking reflexivity into account within the research process makes the investigator's positionality and research design accessible, transparent, and subject to critique (Foley, 2002). An emphasis on autobiographical voice encourages the reflexive portrayal of the author whose identity is socially constructed and multiply situated (Foley, 2002). Madison (2012), to this end, has provided useful questions to encourage emic (i.e., who am I?) and etic (i.e., who else has written about my topic?) reflections throughout the design and process of research. These guidelines emphasize what Foley and Valenzuela (2005) called "introspection, memory work, autobiography, and even dreams as important ways of knowing" (p. 218). By situating the autobiographical voice, researchers are in a position to explore the "self-other" interaction that marks fieldwork and that mediates the production of ethnographic narratives (Foley & Valenzuela, 2005).

The insider/outsider debate is a central component of reflexivity in ethnography. However, grappling with the tensions between being an insider and outsider in relation to my research proved difficult because there were few appropriate and available guidelines that took into account the historical, structural, and psychological dimensions of Filipino culture and value systems. I, thus, turned to a Filipino-specific theoretical and methodological approach known as *Sikolohiyang Pilipino* (English translation: Filipino psychology) to guide my work. *Sikolohiyang Pilipino* centers on and promotes ways of knowing (i.e., psychology, experience, ideas, and cultural orientations) from a Filipino perspective (David, 2013; Pe-Pua & Protacio-Marcelino, 2000). According to Pe-Pua and Protacio-Marcelino (2000), the *Sikolohiyang Pilipino* approach was developed in response to largely Westernized and colonialized ways of knowing.

Sikolohiyang Pilipino calls for attention to an "indigenization from within" that assesses the historical and socio-cultural realities, local languages, and explanations of the Filipino subject. Five guiding principles of *Sikolohiyang Pilipino*, as outlined by Pe-Pua and Protacio-

Marcelino (2000), are relevant to my work. First, the quality and depth of interactions between a researcher and participants are largely determined by *Ibang-Tao* (English translation: Outsider) and *Hindi-Ibang-Tao* (English translation: One of Us) status dynamics. This first level mirrors that of traditional insider-outsider debates, wherein researchers reflect on their positionality in relation to their participants but emphasize the development of mutual trust, understanding, and rapport (Filipino translation: *pakikipagpalagayang-loob*) that continues even after the conclusion of the study. A second guiding principle of *Sikolohiyang Pilipino* challenges the nature of traditional interview: participants ask personal questions of the researcher. Known as *pagtatanong-tanong* (English translation: asking questions), this restructured power dynamic is meant to elevate the participant to co-researcher. Third, the *Sikolohiyang Pilipino* approach emphasizes that the welfare of research participants should take precedence over the data obtained (Pe-Pua & Protacio-Marcelino, 2000). As such, the goal of research is to promote the wellbeing of participants and their communities, thereby promoting empowerment and social change. A fourth guiding principle is adapting *pakikiramdam* (English translation: sensitivity) to the participant's situation. For instance, if a family member interjects in the middle of an interview, it is imperative that the researcher respect and honour the input and integrate that viewpoint into the participant's overall story. The notion of *pakikiramdam* also pays attention to "non-verbal ways of expressing thoughts, attitudes, feelings and emotions" (Pe-Pua & Protacio-Marcelino, 2000, p. 60). Finally, the language of the people should be used at all times to allow the storyteller/participant to speak in their primary language. In cases where this is not possible, local researchers and interpreters should assist in the interview process.²²

Guided by the combined principles of critical ethnography and *Sikolohiyang Pilipino*, I developed the following set of reflective questions for my data collection and analysis, which were adapted from Madison's (2012) reflective questions for ethnographic research. Together, these questions allowed me to remain close to my study's objective, to take intermittent breaks

²² As a second generation Filipino-Canadian, I have an intermediate level of understanding and a beginner level of speaking *Tagalog* (one the most commonly-used Filipino languages). Given these limitations, I hired a *Tagalog* interpreter and translator for interviews where participants expressed a preference to speak in their primary language.

throughout the research journey in order to think about the data, and to consider how questions and findings were matched to the wider intersectionalities that I hoped to uncover. The questions are as follows:

- How do I reflect upon and evaluate my purpose, intentions, and frames of analysis?
- How do I predict consequences or evaluate the potential of the research to do harm?
- How will my work make the greatest contribution to equity, freedom, and justice?
- What am I going to do with the research, and who will ultimately benefit?
- What difference does it make when the ethnographer personally comes from a history of colonialization and disenfranchisement?

Engaging in these questions allowed me to situate myself within the Filipino community and to grapple with my location as *Ibang-Tao* (Outsider) and/or *Hindi-Ibang-Tao* (Insider). For instance, though my own social location and my engagement in community practice allowed me to situate myself as *Hindi-Ibang-Tao*, I also began to think about how language and being born in Canada positioned me as *Ibang-Tao*. These tensions highlighted my need to consider how experiences of commonality and difference among Filipinos are systematically structured.

4.1.2 Part 2: Critical ethnography as a research design

In the following section, I outline the phases of my critical ethnography project, which included interviews, participant observations, reflections, and textual analysis. I used multiple strategies for data collection, and drew from multiple sources of data in order to gain a comprehensive understanding of aging in the context of immigration, caring and labour. I sought the perspectives of different actors (such as older adults, their families and communities), and across different sites (such as home and community) to relate these positionalities and perspectives to social policies and programs that directly impact older Filipino immigrants. To ground the different phases of my research process in the voices of older people themselves, I began my inquiry with qualitative interviews. In describing my research design, I begin with a brief description of narrative inquiry and how it has been used in the field of gerontology generally before outlining how it was used in my study.

4.1.2.1 Applying narrative to critical ethnography

In order to combine the principles of critical ethnography and *Sikolohiyang Pilipino*, I drew on a narrative interviewing strategy that allowed me to identify the key stories and life events of participants, and to bridge my reflections with my understandings of immigration, care and labour. Narrative inquiry is a qualitative approach that explores lived experiences through accounts and stories articulated by the informant. It is a methodology that has been applied across academic domains. According to Elliot (2005), narrative methodology (a) is based on people's lived experiences, (b) empowers people by looking at salient themes, (c) focuses on process and change over time, and (d) identifies representations of self. Key to narrative inquiry is an understanding that people construct and reconstruct their sense of self through stories (Bruner, 2004). Narrative inquiry offers a way of knowing by connecting how stories are told and retold and how they represent a way of living.

Narrative studies are grounded in phenomenology and/or everyday experience (Smith & Watson, 2001). In the health field, for example, they have been used to study illness (see Charmaz, 1999; Kelly & Dickinson, 1997; Williams, 1996), impairment, and suffering (Frank, 1995). In a ground-breaking study by Frank (1995), narrative techniques were used to examine his experiences as a cancer survivor and to deconstruct the notion of illness through his personal narrative. Within the field of gerontology, narrative approaches have encouraged exploration of the links between policy and lived experiences of frailty (Grenier, 2007), connections between stories and social work practice (de Vries, 2015; Riessman, 1994; Riessman & Mattingly, 2005), and considerations of time and aging (Grenier, 2012; Kenyon & Randall, 2004). As a methodological approach, a narrative inquiry situates the respondent and their stories as active participants in the research process (Bornat, 2000).

Attention to temporality is an important component of narrative inquiry. Narratives are often situated within a three-dimensional space, with experiences occurring over time, place, and social interactions (Clandinin & Connelly, 2000). Stories of the past inform how stories are told in the present, and how they shape our understandings of future experiences (Clandinin & Connelly, 2000). In this context, how people develop and tell their stories depends on the place

and conditions under which they are relating them. By engaging with a narrative approach that focused on oral histories and life stories, I took into account how participants experienced events through recounting socio-historical moments. In my work, I followed basic tenets that focused on how respondents made sense of events and actions unfolding in their lives (Clandinin, 2007; Clandinin, 2013; Elliot, 2005; Kenyon, Clark, & De Vries, 2001; Kenyon, Bohlmeijer, & Randall, 2011; McAdams, Josselson, & Lieblich, 2001; Riessman, 1994). This approach allowed me to consider participant's stories as forms of situated knowledge and to understand how larger structural forces shape and regulate their experiences. I incorporated narrative inquiry's concept of three-dimensional space as a way to understand intersections of identity and experience. The use of narrative throughout my dissertation provided me with a heuristic tool to help match disjunctures in people's experiences and identify the ways in which immigration, labour, and aging policies and programs are lived in the everyday.

Throughout my data collection process, I sought out narratives from three groups of informants: (a) older Filipino men and women, (b) Filipino adult children and grandchildren who provided and/or received care from older Filipinos, and, finally, (c) community stakeholders who participated in the daily lives of older Filipino men and women by providing services or support within the local community.

4.1.2.2 Use of textual analysis

Following my interviews, I adopted a textual analysis to account for the different social policies that shape and structure the lived experiences of my participants. Textual analysis is an important tool for ethnographers who seek to understand how individuals and communities make sense of who they are and how they fit into the world in which they live (McKee, 2003). The interpretation of text, rather than the analysis of structure or discourse, can be used to analyze historical documents and narratives (McKee, 2003). Moreover, textual analysis offers a bridge between personal and observational accounts of aging, immigration, and care labour and what is articulated within a particular policy. Although not included in Carspecken's (1996) approach to critical ethnography, a textual analysis emphasizes relationships between "discourse and power, the discursive construction of social subjects and knowledge, and the functioning of discourse in

social change” (Fairclough, 1992, p. 38). Other contributions, particularly by institutional ethnographers such as Smith (2006) and DeVault and McCoy (2006), have identified texts as a form of knowledge and discursive practice that are central to the social organization and ruling relations of contemporary society. This type of analysis harkens to work by Grenier (2012), Moulaert and Biggs (2013), and Hendricks (2004), who examined how dominant discourses in existing aging and retirement policies serve to shape, structure, and legitimize particular ways of growing older.

4.1.3 Sources of data and data collection

Carspecken (1996) introduced a five-stage roadmap for data collection and analysis that I adopted for my dissertation. The first stage is a primary record of data collected from the researcher’s point of view (Carspecken, 1996; Cook, 2005). This usually consists of observational data and field notes that detail behaviors, activities, and dialogue between actors. The second stage of data collection is what Carspecken (1996) characterized as the “preliminary reconstructive analysis” stage, where the researcher examines the primary record to determine “patterns, meanings, power relations, roles, interactive sequences, evidence of embodied meaning, intersubjective structures, and other items” (p. 42). Reconstructive analysis helps the researcher to engage in dialogical data generation, such as interviews and discourse analysis of text (Carspecken, 1996). The third stage encompasses fieldwork, where the researcher engages in participant observations, interviews, and reflection. In stage four, system relations are defined and described. In this stage researchers are expected to examine the relationship between the primary social site (for instance, the home) and other specific sites that have some relation to the primary site (for instance, the workplace and public settings). Carspecken (1996) noted that the final and fifth stage involves using system relations to explain findings. At this stage, the researcher utilizes key theoretical concepts as a way to link and integrate emerging analyses to larger systems and structures. According to Carspecken (1996), a critical ethnographer can then suggest reasons for the experiences and cultural forms as they relate to class, race, gender, and the political structures of society. It is at this final stage, primarily an analytic one, that the potential contribution of the research to social change is highlighted (Carspecken, 1996).

Although set out in five distinct stages, the experience of conducting a critical ethnography is not linear but fluid, with procedures and processes shifting in relation to emerging concepts and ideas across each stage.

Drawing from Carspecken's roadmap, I conducted four stages of data collection²³: (a) my own reflections from the field and on gaps identified in the scholarly literature, (b) participant observations, (c) interviews with key informants (older people, adult children and grandchildren, and community stakeholders), and finally, (d) textual analysis of relevant programs and policies. My critical ethnographic study drew from four sources of data. These data sources include (a) reflections and journal entries collected as a community organizer and research assistant, (b) ten observations (where I was a participant and non-participant) in public spaces such as coffee shops, local malls, churches, and community events throughout 2012-2013, (c) thirty-seven interviews (18 older adults, 6 adult children, and 13 community stakeholders) conducted between 2013 and 2014, and (d) seven retirement and immigration policies and programs, and media texts (see Appendix G).

4.2 Ethical procedures

My research complied with regulations set forth by McGill University's Research Ethics Board (REB). I received a REB II Certificate of Ethical Acceptability of Research Involving Humans from 2012 to 2016. REB II reviewed and approved my applications in accordance with the requirements laid out by the McGill University Policy on the Ethical Conduct of Research Involving Human Participants and the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans. Part of my ethical treatment of the data included storing audio recordings in encrypted files on a hard-drive, which was only available to my supervisors and to myself for two years following their recording. Paper documents (interview transcripts, field notes, participant observations, signed consent forms, and demographic data) were stored in a

²³ I acknowledge that Carspecken's roadmap calls on a five-stage process. However, the fifth and final stage of Carspecken's roadmap connects the previous four stages, which are primarily related to forms of data collection, to the broader work of structural and systemic analysis. For my dissertation, I made the decision to clearly separate and distinguish my stages of data collection from the data analysis process. As such, I made the decision to incorporate Carspecken's fifth stage into my data analysis (see page 119).

locked file cabinet in a research office (See Appendix B, C, D, and E). Interview transcripts were stripped of any identifying information, and only committee members had access to my anonymized data.

4.3 Research Design

4.3.1 Phase 1: Personal reflections

I began phase 1 of my data collection by reflecting on my community practice and experiences as a second-generation Filipino. Engaging in this process of self-reflection allowed me to identify two turning points in my research journey. The first was during my time as a research coordinator for an Employment and Social Development Canada (ESDC) New Horizons research project headed by Dr. Amanda Grenier and the Council for Black Aging Montreal (CBAC). The project called for a life history approach to preserving the stories of Montreal's older Black community. It was during this time that older Black women and men shared intimate details of their families, struggles, joys, and accomplishments. What particularly moved me was the ways in which members of Montreal's Black communities would frame their encounters with racism and discrimination as life lessons for me, a young person of color. I connected with their stories of engaging in domestic work, applying for and being denied admission into predominately white institutions, and being subject to overt and covert forms of discrimination and racism that I saw being reproduced in my own community. As they recalled and articulated their stories of struggles and triumphs, I detected urgency in their voices to pass on these stories to the incoming generation; stories that needed to be retold but that were not necessarily finding the ears that they were intended for. This was the first time I began to think about my relationship with participants from an insider/outsider perspective.

The second turning point was in 2008, when I participated in a community-oriented research project for the National Alliance for Philippine Women in Canada (NAPWC). The project served as a broad inquiry into the demographic makeup of the older Filipino population in Montreal (Vasquez & Ferrer, 2009). As an active member of the Filipino community in Montreal, and as someone who has been engaged in community organizing and activism, I was

constantly reminded of how my social location was intertwined with the participants' stories and analysis. Upon further reflection, I realized that this was the first time I had grappled with the *Ibang-Tao* (English translation: Outsider) and *Hindi-Ibang-Tao* (English Translation: One of us) tension, and I questioned the extent to which my social location aligned with my older participants. For instance, my status as a second-generation Filipino with limited capacity to speak Tagalog required repeated retellings and explanations of dynamics that existed in the Philippines. Over the course of the community research project, some participants felt compelled to explain and re-explain stories and relationships that existed in the Philippines as a way to highlight their experiences in Canada and as a way to try to help me understand who they were.

The turning points articulated above highlight the fluidity of my insider and outsider status. The blurred boundaries between emic and etic status raises questions of what Noblit, Flores and Murillo (2004) called the “narrated [as] narrator,” where intersections between the identities of the researcher and participants are intertwined. Throughout my research, I was mindful of how participants spoke to me as a second-generation Filipino and of how their stories spoke to the (in)visible realities of aging that were so prominent in their everyday lives. As a researcher seeking stories from participants, I was aware of the privilege and power that I yielded in this interview exchange. Madison (2012) noted that critical ethnography is a “negotiation and dialogue toward substantial and viable meanings” meant to center the experiences of the “Other” (Madison, p. 36). Questions about how I would present their stories while acknowledging my own social location, objectives, and interpretations constantly arose throughout the dissertation. For instance, I often asked myself, “To what extent am I part of this community?” and “To what extent do my experiences as a second-generational Filipino intertwine with my informants?” Reflecting on these questions allowed me to clarify my use of the notion of “Other(s)” throughout the study. In this case, I use the “Other” as a means to align experiences of my participants with larger systemic processes of racialization, classism, and feminization. These complexities have been discussed in my literature review and theoretical manuscript chapter (see Chapters 2 and Chapter 3, respectively).

From a methodological perspective, my status as a second-generation Filipino offered me a means to connect with my informants specifically and my community more broadly. For

instance, I drew from my experiences as a member and organizer in the Filipino community as a starting point for thinking about the types of caring labour provided to older Filipinos. The following journal entry, dated in the Fall of 2010, shows an example of how I began to think about the ways in which older Filipino adults find and provide care through community sites and networking:

(Fall 2010) It's a little past 6PM, and I'm currently near the window at the Tim Horton's on [Cote des Neiges]. To my right is a group of Filipino men (there are six of them) who have ordered coffee and are playing on several boards of chess. Though a few are staring intently at the chess pieces, most are engaging in conversations. I can only decipher some of what they're saying given my intermediary, if not basic, understanding of the language (topics which include the upcoming Manny Pacquiao fight, events taking place within the community, and updates on families and/or friends). It's difficult for me to tell how old these men are. Based on physical markers such as wrinkling faces and grey/white hair, I would guess that they're anywhere from their late 50s to 70s. I'm a bit puzzled as to why these men choose to play chess here. [...]. Why would these men want to play in a crowded and noisy coffee shop?

It soon dawns on me that maybe this isn't about chess, but about relationships. Every so often, the group's game/conversation is interrupted by men and women who stop to say hello. A few times, people would simply say "*Oh, kamusta na?*" (English translation: Hi, how are you?), or share a nod and leave. But for the most part, visitors would come by, and have extended conversations with the group. [...] Here, there is a sense that everyone knows of each other in the same that regulars know each other at a pub or at a diner. In all my visits to this Tim Horton's, it is always filled, and it is always a place where Filipinos seem to congregate. Just last week I ran into my uncle, who to my surprise, disclosed the number of times he visits this place ... four times a week! I was taken aback by this because he lives all the way in the East-end, and yet drives to this location (amidst traffic) to share coffee with friends. Clearly this space is meaningful [...] This Tim Horton's is conveniently located near the heart of the Filipino diaspora surrounded by apartment buildings, and grocery stops. I would guess that some are returning from work; heading home; running a few errands and picking up a cup of coffee.

If Filipinos choose to be here, I wonder what this says about the community and the spaces that are made available for them. This is clearly more than just a coffee place – it's an opportunity for people to congregate and to keep tabs on each other. Just a few minutes ago, an older man visited the group, and was warmly welcomed with "*Anong nangyari sayo?*" (English translation: What happened to you?). People know each other here, and it may be a stretch to suggest, but this represents a form of care. The routine of coming and socializing in this coffee shop means that everyone is accountable to each other. Seeing this reminds me of Filipino gatherings that my family used to attend. In those settings, everyone knew what you were up to – even strangers. Every so often a few group members would glance over curiously to see what I'm doing. As we make eye contact we give each other a nod; a few smile. Sitting here reminds me that I'm part of this community. Sitting here reminds me of home.

Writing the entry above allowed me to consider the ways in which Filipinos use local spaces and rely on families in ways that were notably absent from discussions within the

literature. My insider status as a second-generation Filipino who worked as a community organizer also allowed me to think holistically about the dynamics of aging, care, and immigration. In particular, my experiences gave me insight into the voices of community stakeholders and family members who are implicated in the intersecting dynamics and relationships that take place between aging, care, and immigration but who are seldom heard.

4.3.2 Phase 2: Participant and non-participant observations

The second phase of my data collection centered on participant and non-participant observations. I conducted a total of 10 participant and non-participant observations between 2012 and 2013 in public spaces and at events that were frequented by members of the Filipino community. I spent approximately thirty hours in the field, where I undertook field observations. For the first type of observation, which employed non-participant observation, I spent approximately twenty hours at public spaces such as churches, public malls, and local community organizations and spaces. I then spent another ten hours as a participant observer with participants who agreed to be shadowed as they carried on with their daily routines. This included attending local functions and going grocery shopping. Table 2 provides an overview of the types of participant observations conducted:

Table 2 Participant observations

Type of observation	Date of Participation	Place	Type of observation
Non-participant	December 11, 2012	Local mall	Older people congregating in mall cafeteria
Non-participant	December 13, 2012	Local mall	Older people congregating in mall cafeteria
Non-participant	December 16, 2012	Church	Older people attending church
Non-participant	December 30, 2012	Community space	Older people attending socio-cultural event
Non-participant	February 2013	Community space	Older people attending socio-cultural event

Participant	March 13, 2013	Participant home	Family get-together
Participant	March 27, 2013	Participant home	Church prayer group
Participant	March 31, 2013	Participant home	Weekly mass
Participant	April 4, 2013	Local mall	Accompaniment of adult during grocery store shopping
Non-participant	July 2013	Community space	Socio-cultural event

As with any form of data, my observations (both participant and non-participant) and field notes represent a subjective account of the people, sites, and interactions in the field (Goodall, 2000). They also served as an entry point for developing mutual trust, understanding, and rapport (or *pakikipagpalagayang-loob*) so that I could later ask questions of my older participants, adult children, and other community stakeholders. For instance, my participant observations offered a glimpse into where and how older Filipinos lived in Montreal and how care relationships were enacted between family members as well as within communities and institutions. Including these participant and non-participant observations allowed me to take account of the everyday experiences of aging in the Filipino community and helped me to develop the *pakikiramdam* (sensitivity) needed to ask meaningful questions in my interviews. Before going out into the field, I created a list of questions that would help to prepare and guide me throughout my observations:

- How do older Filipino adults use public spaces?
- How is care provided in public spaces?
- How do older Filipino adults provide and receive care in public spaces?
- How do families and community members interact with older Filipino adults?
- How do older Filipino adults interact with their families?
- How do Filipino families provide and receive care in public spaces?

4.3.2.1 Non-participant observations

The first type of observation (non-participant) for this study took place in public settings where older Filipino men and women congregated. My non-participant observations included

one mass celebration at a local Catholic church, three cultural events catering to the Filipino community in Montreal, and two observations at public spaces such as coffee shops, public parks, shopping malls, and grocery stores. In each setting, I spent one to three hours noting the types of people who were present and the different interactions that were taking place. I took on-site field notes on my mobile phone and later expanded these into a field journal once I had access to a computer. I did not document any personal conversations or information that would identify the people who occupied these spaces. The observations set the stage for my interviews with older people, adult children and grandchildren, and community stakeholders.

4.3.2.2 Participant observations

I conducted the second type of observations—participant observations—with selected participants who consented to and invited me to observe their daily routines. This process, known as shadowing, allows the observer to actively follow a participant for an extended period of time (McDonald, 2005). The shadowing that would take place was detailed in my consent process and documents approved by McGill University’s REB. Engaging in this exchange, or *pagtatanung-tanong* (asking questions), allowed me to adjust interview the questions in my interview guide as it was developed. These types of interactions allowed me to gain a deeper appreciation of the stories shared during the interview phase and to observe the types of interactions that participants had with their close and extended family members and community networks. More importantly, this data collection strategy allowed me to detect subtle forms of care enacted between family members.

Unlike non-participant observations, these active participant observations took place after my interviews with older participants and adult children. Following the interviews, I asked participants if they would be interested in allowing me to follow them during their daily routines. Participants who verbally consented to this were called at a later date to arrange the details of the participant observation, including a time, place, and event. Two participants (Nenita and Nora) agreed to this arrangement. Nenita invited me to three separate events, which included a weekly prayer group, a family get-together, and a weekly mass at her local church. One adult child, Nora, allowed me to shadow her during an afternoon grocery run. Consistent with shadowing, I

asked Nenita and Nora to provide commentaries about the activities that they undertook throughout the observations. Though I did not audio record these conversations, I took extensive field-notes of the activities observed, what participants spoke about, and the other people who took part in the observation. Like my first set of non-participant observations, active shadowing offered me an opportunity to gain first-hand accounts of activities to clarify stories and to highlight relationships in action.

4.3.3 Phase 3: In-depth and semi-structured interviews

4.3.3.1 Recruitment and sample

Phase 3 of my data collection process involved 18 open-ended and in-depth narrative interviews with Filipino men and women over the age of 60, 6 adult children, and 13 community stakeholders. Recruitment began with advertisements posted in two local newspapers in Montreal, Quebec (see Appendix A and B) and, later, was continued by means of a purposeful snowball sampling whereby members of various community and social organizations were asked to recommend participants for the study to ensure a diverse sample pool. The interviews ranged from 90 to 120 minutes long, were recorded with a digital audio recorder, and were subsequently transcribed. The majority of interviews (14 out of 18) were conducted in English given the ability of most participants to communicate in English and Tagalog. For four interviews, when participants expressed a preference for communicating in Tagalog, an interpreter translated the interview questions. In cases where participants were unable to read English, an interpreter orally translated the consent document and provided translation during the interviews. Since both Tagalog and English exchanges were audio-recorded, the interpreter was also hired to transcribe the interview materials in both languages. Overall, 18 older Filipino men and women were interviewed over the course of two years (2013–2014). All of the older participants were provided a \$25 honorarium in acknowledgement of their contributions to this study. Table 3 provides the demographic profile of participants in more detail.

Table 3 Participant profile of older Filipinos interviewed

	Gender	Age	Civil Status	Immigration	Type of Work	Household	Pension
Arnel	M	67	Single	Family Reunification (1970s)	Media	Lives with sister and nephews	OAS + GIS
Anthony	M	65	Married	Family Reunification (1980s)	Factory Worker	Lives with spouse and adult children	OAS + GIS
Charito	F	66	Widowed	Foreign Domestic Movement (1980s)	Domestic Worker	Lives with adult children & grandchildren	OAS + GIS
Devina	F	75	Single	Economic Class (1960s)	Doctor	Lives with daughter	RRSP Worker Pension
Flor	F	81	Widowed	Family Reunification (1990s)	n/a	Lives alone	OAS + GIS
Gabriela	F	62	Divorced	Family Reunification (1970s)	Nurse	Lives with adult children and grandchildren (owned home)	N/A
Jinky	F	67	Married	Economic Class (1970s)	Nurse	Lives with spouse (adult children live in close proximity)	Worker Pension + CPP
Jose	M	71	Married	Family Reunification (1990s)	Factory Worker	Lives with spouse	OAS + GIS
Juan	M	76	Divorced	Family Reunification (1990s)	Factory Worker	Lives with adult children and grandchildren (owned home)	OAS + GIS
Laarni	F	63	Single	Foreign Domestic Movement (1980s)	Domestic Worker	Lives with roommate	EI
Makario	M	73	Separated	Family Reunification (1970s)	Custodian Work	Lives alone	OAS + GIS
Maryvic	F	70	Widowed	Foreign Domestic Movement (1980s)	Domestic Worker	Lives with adult children and grandchildren	OAS + GIS
Nenita	F	66	Married	Foreign Domestic Movement (1980s)	Domestic Worker	Lives with spouse and adult children	OAS + GIS
Pearl	F	64	Married	Foreign Domestic Movement (1980s)	Domestic Worker	Lives with spouse	Workers compensation
Precilla	F	86	Widowed	Family Sponsorship (1980s)	Domestic Worker	Lives alone	OAS + GIS

Rizza	F	73	Widowed	Foreign Domestic Movement (1980s)	Domestic Worker	Lives with adult children and grandchildren	OAS + GIS
Rommel	M	67	Married	Family Reunification (1980s)	Factory Worker	Lives with spouse (adult children and grandchildren are nearby)	OAS + GIS
Vicki	F	68	Married	Family Reunification (1990s)	Factory Worker	Lives with spouse	OAS + GIS

To ensure consent, participants were given verbal information about the project's intentions and purpose, provided example questions, and informed of the risks and benefits of participation. Following an explanation of the study's purpose and procedures, participants signed a consent form that provided them with the contact information of the researcher along with the contact details of my research supervisors. The document was read and written in English²⁴ with increasing font sizes so that participants could clearly read the parameters outlined in the consent form. Confidentiality protocols were followed in cases where an interpreter was present; these included the interpreter signing an oath of confidentiality attesting to their responsibility to maintain the anonymity of participants. Adult children and community stakeholders were also provided full disclosure on the project's intentions, purpose, and types of questions asked before the interview. To ensure privacy and confidentiality, all participants were assigned pseudonyms. Moreover, no identifying information was recorded on any written documents (with the exception of the informed consent, where participants were asked to provide a signature to indicate their agreement to participate in this study, which was subsequently stored under lock and key). Once consent was established, the interviews began and were digitally recorded using a SONY PCM recorder.

Participants were given options on where the interviews would be conducted. For the most part, interviews took place in participant homes. Two participants preferred to meet in a

²⁴ Participants were told that, as a principal investigator, I had a beginner's proficiency in spoken *Tagalog* and a basic understanding in listening. The interpreter was an acquaintance from a Filipino-Canadian community organization that I had volunteered for. She was present for four interviews and provided interpretations of the interviews and translations of documents.

neutral public setting (e.g., a coffee shop). In these situations, we sat face to face and at isolated booths to ensure that our conversations were kept as private as possible. Throughout the interviews, participants were reminded that their participation was voluntary and that they would be free to withdraw at any point during the interview process or the project. Digital files from the interviews were stored on an external hard drive that was stored in a locked file cabinet to which only I had access. All audio-recorded interviews were then transcribed using ExpressScribe, a digital program that allows transcription with the aid of a foot pedal. These transcripts were input into Microsoft Word documents, which were then encrypted with a password. All digital data were stored on an encrypted hard drive under lock and key in my research office.

Each of the 18 older adults (aged 62 to 86) who participated in this study were born in the Philippines and immigrated at different points in time between the 1960s and the 1990s. I interviewed participants who had come under different immigration policies (10 immigrated under the Family Class, 6 immigrated through the Foreign Domestic Movement, and 2 came under the Independent Economic Class). The majority of my participants lived either at or below the poverty line (i.e., 13 out of 18). This was particularly the case for those who had been sponsored by family members and for those who had immigrated under the Foreign Domestic Movement. Participants for the study lived in all parts of the city of Montreal, including its surrounding suburbs on the South Shore and the West Island. The majority of participants ($n=12$) resided in the borough of Côte-des-Neiges-Notre-Dame-de-Grâce (CDN-NDG), which is regarded as the second most multiethnic sector of Montreal (Ville de Montreal, 2014) and has the highest concentration of Filipinos in the city.

4.3.3.2 Narrative interviews with older people.

Regarded as the cornerstone of ethnographic fieldwork, interviewing presents the informant as a subject with “agency, history, and his or her own idiosyncratic command of a story” (Madison, 2012, p. 84). In this work, I engaged with interviews by drawing from narrative methods and focused specifically on life histories of immigration, labour, care, and aging. While critical ethnography offers an approach that accounts for personal observation, multiple positionalities, a variety of experiences, and wider social relations and structures, I chose to

supplement critical ethnography with narrative interviews because I wanted to integrate these relationships through situated histories and stories from across the life course. I also wanted to understand how structures and policies were understood and lived by people in their own voices. The addition of narrative to my critical ethnography enhanced my inquiry into the intersections between life course events.

During the interviews, older adult participants were asked to describe their experiences of aging, about any challenges that they encountered as they approached or transitioned into their late lives, and questions on immigration and caring labour (see Appendix F). Participants were also asked to talk about their retirement provisions (i.e., what benefits they received), entitlements (i.e., what they were eligible or entitled to receive as Canadian citizens or permanent residents), and the extent to which these were sufficient to meet their day-to-day needs. The interview questions were intended to elucidate how older Filipino men and women experienced and evaluated their aging process. I also utilized notes from my participant observations to enhance my interview questions with adult children and community stakeholders. In these instances, I asked about family composition and relations and the ways in which older adults used local community organizations and services. The following is a list of questions that I posed to participants during the interview phase:

- I'm interested in how older Filipinos first come to Canada, the work they do, and how these experiences might affect aging. What can you tell me about this?
- Let's talk about how you came into Canada. How long have you been here? Do you remember how you came and the type of work of you did?
- How did immigration affect family relationships or caring relationships?
- What kind of help do you give to your family? What kind of help do they give you?
- Can you speak about your experiences of growing older in Canada?

To provide an overview of the participants and their lives, I developed participant portraits of each interviewee. These portraits provide a summary of each individual and how they understand themselves in relation to their family, community, and/or society as they age in Canada. Once the themes that emerged from the stories reached saturation level, I considered my

interviews with older people to be completed. I then transitioned to my interviews with adult children and grandchildren. The following section highlights participant portraits of the 18 older Filipinos interviewed for the study. Differences in portrait details are partly due to interview length and the extent to which participants provided elaborate details about their life stories.

OLDER ADULT PORTRAIT 1: Arnel

Arnel is a 67-year-old who immigrated to Canada in 1969 under the Family Reunification Class. Sponsored by his sister, Arnel arrived with his mother and immediately took care of her while working for different media companies. Arnel took on this caregiving role until his mother's death. Most of Arnel's narrative centered on "family cohesiveness." Himself single, Arnel maintained close ties to his sister and his nephews, with whom he currently lives, and discussed the difficulties and tensions of living in an intergenerational household. In particular, Arnel spoke about his frustration towards his nephews and the lack of acknowledgement and recognition for the support he provides. As an active member of the Montreal Filipino diaspora, Arnel had much to say about tensions within families. He acknowledged that immigration programs such as the Live-in-Caregiver Program were problematic for families because of the lengthy period of separation they required before reunification. Arnel also spoke about how such disruptions impact older Filipinos in Montreal. In particular, he recounted how adult children working long hours impacted the wellbeing of older Filipino parents. He also noted that while pensions are not enough for older Filipinos, the majority still stay in Canada so that they can receive their pensions and support their immediate and transnational families. Arnel's mother, for instance, remained in Canada at the request of her children because they did not want her to give up her Old Age Security benefits.

OLDER ADULT PORTRAIT 2: Charito

Charito is a 66-year-old widowed Filipina living with her son, daughter-in-law, and two grandchildren in Montreal. Charito immigrated in 1991 under the Foreign Domestic Scheme and later petitioned her son and daughter to join her (in 1993). Charito centered her narrative on her extensive social support network. While in the Philippines, Charito was part of a group of 10 neighbors who provided care for each other and exchanged information about employment opportunities. For instance, when she was in Europe, Charito looked for other work opportunities so that the people in her network could join her. She began our interview with a description of her current work and caregiving responsibilities for her grandchildren. She described being forced into retirement because, as she was told by her employer, she was "slowing down." Though Charito disputes these claims, she obliged the family's request. In 2010, at the age of 63, Charito had to claim employment insurance until she was eligible to receive her Old Age Security. Now, in her later life, she cares for her grandchildren. Among her concerns are the

rising costs of living expenses such as medicine (not covered by Medicare),²⁵ bus passes, and support for her home in the Philippines. As someone recently retired, Charito spoke about doubting that her pension would be enough to make ends meet.

OLDER ADULT PORTRAIT 3: Devina

Devina is a 75-year-old Filipina who currently lives with her daughter in an owned home in the suburbs of Montreal. Devina came to the Canada after finishing her work visa in the United States. Canada, at the time, was recruiting medical health professionals, and Devina found herself in the Maritimes, where she worked until her retirement. Devina did not divulge many stories about her life course, but she disclosed that she gave birth to her daughter in her late 30s. She later made the decision to move in with her daughter for financial reasons. Devina described this arrangement as mutually beneficial because her daughter is able to drive her to various medical appointments. Her daughter also benefits from Devina's financial contribution. Now in her retirement, Devina discussed the need for older Filipinos to seek medical and health care professionals who can address the growing health ailments within the community. She identified heart disease and diabetes as the most pressing community health issues. When asked to reflect on her own health, Devina disclosed that she is not worried because she draws from her own networks after working many years in the healthcare field.

OLDER ADULT PORTRAIT 4: Flor

Flor is an 81-year-old Filipina widowed grandmother living on her own in a two-bedroom apartment in Montreal. Although Flor strongly believes in family ties and bonds, she finds herself living alone. She expresses feeling lonely, isolated, and depressed because she is unable to be with her immediate family in Canada or her extended family in the Philippines. Although she was sponsored by daughter under the Canadian Family Reunification Program, her daughter fell ill and was unable to care for Flor, who has lived alone for almost ten years. Her isolation is due, in large part, to her role as care provider to her family in the Philippines. Flor receives the basic Old Age Security and the Guaranteed Income Supplement,²⁶ which she meticulously saves in order to send financial remittances to the Philippines. Her extended family in the Philippines relies on her contributions so that family members can attend school and meet basic necessities. Despite living in poverty, Flor mentioned that the needs of her family in the Philippines were more important than her own because she has access to a pension and to Canadian/Quebec public services. Flor acknowledges that she would be completely isolated if it were not for her social support network, which consists of other older Filipina women. Together, they have established a regular "check-in" system, meeting regularly to attend social events,

²⁵ Medicare is a term that refers to Canada's publicly-funded health care system. This system ensures that Canadian residents have universal access to medically necessary hospital and physician services (Government of Canada, 2016a).

²⁶ The Old Age Security Program is the universal retirement entitlement available to Canadian citizens and permanent residents. The Guaranteed Income Supplement is a means-tested provision for older adults to reduce their experience of poverty in later life.

church services, and other social activities (such as Zumba exercises). This allows Flor to break her isolation and to engage in largely Filipino activities. Her friends have become her *de facto* family. When asked whether she wanted support from her local *Centre integre de sante et de services sociaux*,²⁷ Flor expressed interest, but she was skeptical that service representatives would understand the daily challenges that she faced.

OLDER ADULT PORTRAIT 5: Gabriela

Gabriela is a 62-year-old woman who immigrated to Canada in 1976 and is the third eldest in a family of 11. Gabriela received her university degree in the Philippines, where she specialized in the medical health field. She left for Canada after being sponsored by her sister and received her permanent residency upon her arrival. Gabriela returned to the Philippines, where she married her husband, and moved to Canada together. Their marriage, however, did not last. At the age of 38, Gabriela filed for divorce and, consequently, raised her three children on her own. This life event marked a transition for Gabriela, as she moved away from her traditional her Filipino upbringing. Gabriela did mention that her divorce was an empowering experience that allowed her to raise her children “right.” Throughout her story, she identified her work, financial stability, and family as important factors in her life. Now in her early 60s, when Gabriela reflected on her aging experiences, she identified being fearful of living alone and combatting dominant perceptions of aging as her main concerns. Gabriela also disclosed being active with Filipino-specific social organizations and discussed attending parties and participating in functions hosted by social organizations that cater to the Filipino diaspora in Montreal.

OLDER ADULT PORTRAIT 6: Jinky

Jinky is a retired 67-year-old Filipina. She described herself as a late bloomer who married at the age of 47. She currently lives with her husband in an owned home in the heart of the Filipino diaspora in Montreal. Jinky’s upbringing can be described as family focused. She went to university to become a nurse, and she would later leave the Philippines to support her family. Jinky migrated to the United States after receiving a Green Card and, after 1970, moved to Canada, where she provided financial remittances to her family in the Philippines. Though providing financial security was important to Jinky, she disclosed work experiences in both the United States and Canada that can be characterized as racist, sexist, discriminatory, and harassing. In both countries, Jinky had to ward off racist patients and sexist advances from her co-workers. Jinky discussed how these experiences allowed her to assert herself and became an important life lesson for when she was later diagnosed with a serious illness that continued until she retired. Now in her later years, Jinky described herself as leading a comfortable life and expressed a desire to travel more.

²⁷ These integrated health and social services centers are institutions that ensure accessibility, continuity, and quality of services for people in their territory (Gouvernement du Quebec, 2017a)

OLDER ADULT PORTRAIT 7: Juan

Juan is a 76-year-old Filipino grandfather living with his son and his family in the suburbs of Montreal. Juan is the patriarch of a large family, as he and ex-wife raised nine children. Juan's story of immigration started in 1987, when his wife, who was living in Canada at the time, sponsored him. He described himself as having difficulties adjusting to the culture upon his arrival. In particular, finding work and adjusting to the lifestyle of North American was particularly hard for Juan. Having lived in Montreal for more than 20 years, Juan left for the suburbs, where he claims he is still capable of driving and enjoys an active life. Juan retired several years ago and is currently living with his adult children in a multi-generational household. Reflecting on his late life, Juan expressed a desire to return to the Philippines (and engage in return migration) but was discouraged from doing so by his adult children because they feared that he would lose his pension. In his later life, Juan is looking after his grandchildren and taking on childcare duties so that his adult children can work.

OLDER ADULT PORTRAIT 8: Laarni

Laarni, a 63-year-old single woman born in the Philippines, immigrated to Canada at the age of 34 after working for many years as a migrant domestic worker. Laarni spoke at length about using and volunteering in non-profit/advocacy organizations. As such, she is adept with identifying and using local food banks, second hand thrift stores, and informal support networks that she draws from in times of need. Laarni is anxiously waiting to turn 65 so that she can receive an OAS/GIS entitlement, which would allow what she called "financial flexibility." Laarni works, formally, as a factory worker as well as informally "under the table." She attributed her situation to several factors. Among them were her inability to speak French, a lack of job opportunities that pay adequately, and her lack of a recognized education. At the time of our interview, Laarni had been fired from her job and was receiving employment insurance. Put simply, Laarni lives under conditions of financial precariousness and scarcity. While she faces many barriers, however, she demonstrates tremendous resiliency and agency by actively seeking services. Laarni put herself on the waiting list for *habitations a loyer modique* (HLM)²⁸ housing and continually visits local CSSS workshops and social workers to find appropriate services. Although Laarni is familiar with existing social services, to the point of being followed by multiple social workers, she was critical of these existing services because of their inefficiencies and resulting inability to address her pressing needs. Laarni expressed a belief that health and social care providers are not treating her case as a priority because of her scarce resources. She contends that while the community support is helpful, it is not enough.

OLDER ADULT PORTRAIT 9: Makario

Makario is a 73-year-old Filipino man who immigrated to Canada in 1970. Makario grew up in a very strict household in a small town in the Philippines. Throughout this time, he was

²⁸ In Quebec, the HLM is a low-cost housing benefit for individuals and families living below the poverty line (Gouvernement du Quebec, 2017b).

leading a rambunctious life, associating with hometown *barrcadas* (English translation: gangs). In the 1970s, his sister, who had immigrated to Canada, offered to sponsor him. Although he felt that he was leading a good life, he could not pass up the opportunity for financial stability. Upon his arrival to Canada, however, Makario could not find a job that related to his field. He, therefore, took a job at a local hospital working as an orderly. This prompted him to question whether immigrating to Canada was the right choice. However, he concluded that such a move was made for his survival. Makario relied on his sister's support network to socialize and build his life in Canada. Every week, they would attend parties to dance and socialize. It is through this method that he met his wife, who was also a hospital worker. Together, they raised a child, which he considered a significant turning point that made him a "changed man." Makario described the reversal of roles within the family, where his wife was the primary breadwinner while he had to adopt the role of the "traditional maternal figure". Relishing the role of father, Makario experienced another turning point during his retirement. At the age of 58, he decided to retire (with an incentive offered by the Quebec government to retire early). With his children moved out and Makario a retired man, these dynamics might have contributed to his eventual separation from his wife at the age of 67. Now at age 73, Makario is active within the Filipino community. Reflecting on his activities as a senior, he expressed a desire to return to the Philippines on an annual basis.

OLDER ADULT PORTRAIT 10: Maryvic

Maryvic is a 70-year-old Filipina grandmother and a first-generation immigrant from the Philippines who immigrated through the Foreign Domestic Movement. Maryvic has three children and is the widow to a husband who she sponsored under the Family Reunification class. Maryvic's narrative was that of a dedicated mother who endured tremendous sacrifice to ensure that her children would be allowed to come to Canada. Before her immigration, Maryvic had a stable job in the Philippines. Like so many who experienced the Ferdinand Marcos era, however, she began to think about travelling abroad due to political unrest. She first worked as a domestic worker in Europe through a visitor's visa until her sister encouraged her to apply to Canada, where there were more opportunities to receive permanent employment. Maryvic came under the Foreign Domestic Movement and was employed as a domestic worker. She would later petition for her children to come to Canada, and they were reunified with her family at the ages of eleven to eighteen. Life in Canada was initially difficult, and her relationship with her husband was strained. Following her husband's sudden death, Maryvic moved in with her granddaughter and grandchild, where she provides financial and instrumental support. Her interview underscored the paucity of state resources to which she has access and how she continues to engage in under-the-table-work to survive.

OLDER ADULT PORTRAITS 11 and 12: Nenita and Anthony

Nenita is a 65-year-old woman who is currently living with her husband, Anthony (65-year-old man), and 30-year-old son in Montreal. Nenita and Anthony have one daughter, two sons (each with different partners), and five grandchildren. Despite receiving Old Age Security and the Guaranteed Income Supplement, Nenita is still working under the table for an 88-year-

old woman with a disability. Nenita described herself as a spiritual person who now divides her time between work, her family, and her church network. She also continues to work two part-time domestic jobs. This unreported work is taking a physical toll now that she is getting older, yet Nenita treats her clients like family, and there are some financial rewards associated with staying with older clients. One of her older former employers gave a significant inheritance to her upon his death (money and a car). Nenita is also working because she wants to pay off her debts. Her story shows how she is unable to retire fully because of the needs of her adult children and her family in the Philippines, who require her support.

Anthony is fully retired but takes on caregiving responsibilities for their youngest granddaughter. He did not disclose many life stories, but he emphasized the types of caring labour that he provided to his youngest grandchildren. He was actively watching over his granddaughter and would stop our interview to ensure that she was preoccupied with different activities. Anthony disclosed that while Nenita was working, he took on most of the household chores, such as cooking and cleaning. He expressed a desire to return to the Philippines so that he could support his extended family, but also satisfaction in knowing that his immediate family was in close proximity.

OLDER ADULT PORTRAIT 13: Pearl

Pearl is a 64-year-old Filipina grandmother and a first-generation immigrant. She grew up in a tightknit family, where her parents kept the family close together. Pearl has a similar arrangement with her sisters. As the oldest in her family, she stopped her education after receiving her high school diploma in order to work so that she could finance her sibling's college education. Pearl eventually found work as an administrative assistant, and she met her husband at a neighboring factory. She married at the age of 30 and had her only son at the age of 32. She soon left the Philippines for the Middle East to help her younger sister, who was overseas working as a domestic worker. In the Middle East, Pearl worked without a permit and lived under threat of deportation. Her life was particularly difficult and, after five years, Pearl followed her sister to Canada. In Canada, Pearl's sister found her a job and her new employer subsequently sponsored her. After initially working as a domestic worker, Pearl found employment as a factory worker at a manufacturing company. Pearl was finally able to sponsor her husband and son to come to Canada in 1997. Though the adjustment was initially difficult for everyone, she described the hardships the family experienced as a necessary sacrifice in order to secure a better future. During our interview, Pearl recounted having recently experienced a severe accident that significantly impacted her cognitive and physical mobility. During her hospitalization, Pearl's husband was busy caring for his grandchildren and was unable to pay for the multiple bills (rent, electrical, etc.). Upon being discharged, Pearl found herself in a financially precarious position.

OLDER ADULT PORTRAIT 14: Precilla

Precilla is an 85-year-old widow living in Montreal who immigrated to Canada under the Family Reunification program with her five children. She discussed having a difficult childhood

after losing most of her family members during World War II. Despite growing up in poverty, Precilla spoke about the importance of education. This was a character trait that she instilled onto her five children. Though she was reluctant to leave the Philippines, she decided to join her daughter in Canada in the 1980s so that she could build a future for her family and grandchildren. She worked various occupations and was, most notably, a domestic worker in the 1980s. Precilla spoke about being proud of her children and grandchildren. Her adult children frequently visit her, and they provide instrumental and financial support. Precilla stressed the importance of her church network in her later life. She discussed going to church on a daily basis and the types of friendships that she formed with other older attendees. Precilla, who attributed much of her success to a higher power, was pursuing a degree in Religious Studies at her local university.

OLDER ADULT PORTRAIT 15: Rizza

Rizza is a 73-year-old woman who was born into a small family of five in the Philippines. She describes her life as “working, working, working”. Her work trajectory began at the age of 13 (1953), when she attended to her family’s general store. Rizza married at the age of 20 and had 3 children by the age of 27. When the store closed down in the 1960s, Rizza followed her older brother’s advice to join him in Europe, where he was working as a concierge for a large hotel chain. Rizza’s brother had arranged for her to take on a caregiver job with a family he knew. Though married, and having 3 children at the time, Rizza left the Philippines in 1974 (age 34) to work as a live-in domestic worker in Europe. As the primary breadwinner for her family, Rizza regularly sent half her wages to her family in the Philippines.

In 1977, Rizza once again followed her brother, this time to Canada, where he introduced her to a new family employer seeking a domestic worker. At the age of 37, Rizza moved to Canada under the Foreign Domestic Movement²⁹, a labour policy that allowed domestic workers, and receive permanent residency following one year of service (Rizza received her permanent residency at the age of 38). Rizza described leaving her family as one of the most difficult decisions she has ever had to make, but rationalized that the temporary separation would allow her husband and children to eventually join her in Canada. Rizza would later transition into the secondary labour market where she worked for a factory for a few years before returning to domestic work. Following several years of separation, Rizza applied for her family (husband and 3 children) under the Family Sponsorship program. After almost ten years of separation, Rizza described the experience of reunification as difficult because her children were adolescents by the time they reunified. She also discussed the difficulties in bonding with her children given their unfamiliarity with Canadian society, and her obligation to work in order to support the family. However, Rizza strongly believed that her sacrifices were understood and appreciated by her children despite her prolonged absence.

²⁹ The Foreign Domestic Movement (1981) was a precursor domestic worker program to the previous Live-in-Caregiver Program (1992), and current Caregiver Program (2014)

Rizza's narrative and life course also includes a strong dedication to caring for her family. In 1980, she cared for her parents in Canada (who were sponsored by her brother under the Family Sponsorship Program). Her caregiving narrative was highlighted in 1998 when her father became. At the same time, she also cared for her mother, who had dementia and was housed in a nursing home, until she died in 2006. Now in her 70s, Rizza is retired and receives the Old Age Security with a Guaranteed Income Supplement for her low income. Rizza officially retired in 2005, but reports that the amount she receives is not to meet her everyday needs, which include daily necessities such as food and shelter. Most importantly, Rizza uses much of her pension to provide financial assistance to her local intergenerational family, as well as her extended family in the Philippines. To supplement her income, she works 'under the table' as an unreported cook and caretaker for two families (from past domestic work networks). She also lives with her daughter (also a domestic worker), and watches her grandchildren whenever asked. While Rizza expresses an interest in returning to her homeland to see family members who she has been supporting (via remittances), she notes that she wants to ensure that her family's needs in Canada are accounted for first.

OLDER ADULT PORTRAIT 16: Rommel

Rommel is a 67-year-old Filipino who attended college in the Philippines and obtained a degree as an electrician. He married his wife at the age of 28 and, together, they would raise four children. In 1985, Rommel traveled to the Middle East to work as an administrative assistant on a working visa. He took on this role for three years while his wife took care of children in the Philippines. He would soon return home to take care of his children when his wife found work as a domestic worker in Canada (under the Foreign Domestic Worker Movement). When his wife took a job as a domestic helper in Canada, Rommel resigned from his job and cared for his children until she petitioned them in 1993 under the Family Reunification Class. His life story showcases how childcare can become a sole-parenthood task because of migration and labour opportunities abroad. Upon his arrival to Canada, Rommel was in his forties, and he would find jobs in the factory field, where he worked at various companies under different occupations. He retired at the age of 66, after being fired (following a workplace incident). Rommel attributed this to age discrimination. He decided that he no longer wanted to work (to the surprise of his wife), and he decided to take on his pension. Rommel spoke about how his pension entitlements are not enough, so that his children soon mobilized to work and support their parents. Now in his late sixties, Rommel disclosed enjoying his retirement but not being prepared for the incoming age difficulties that one is likely to encounter. In particular, he expressed counting on the support of his children to lead him through.

OLDER ADULT PORTRAIT 17 and 18: Juan and Vicki

Analyn (Adult Child/Grandchild Portrait 1) (*see page 102*)

Edwin (Adult Child/Grandchild Portrait 2) (*see page 102*)

Vicki (Older Adult Portrait 17)

Jose (Older Adult Portrait 18)

Edwin and Analyn are a heterosexual couple in their thirties who have three children under the age of five. Edwin and his parents, Vicki (in her late sixties) and Jose (in his early 70s) received their citizenship shortly after arriving through the Family Sponsorship program. Analyn, on the other hand, first came through the Live-in-Caregiver Program, through which she was employed as a domestic worker before marrying Edwin. Analyn and Edwin live in an apartment complex in Montreal, where they work as building custodians. In addition to providing care to their children, they provide care for their three parents. Edwin's older mother, Vicki, is a retired cook who continues to work under the table despite receiving Old Age Security and the Guaranteed Income Supplement. Edwin's father, Jose, also receives these pension entitlements despite working under the table as a factory worker. At the early stages of their marriage, Analyn and Edwin lived with Vicki and Jose, where they were provided intergenerational instrumental, financial, and social care for their grandchildren. However, after the birth of their third child, Analyn and Edwin moved out to care for their expanding family. They also decided to sponsor Analyn's mother (Julita) through the Parent and Grandparent Supervisa, and she was granted a length of stay for five years. Analyn disclosed having a close relationship to her mother, and a desire to care for her. Despite moving away from his parents, Edwin continues to provide instrumental care to them by driving them to various medical appointments and social engagements. The experiences of Analyn and Edwin provide important clues to how the migration of older adults encompasses complex relationships within and between the sending and receiving society, and the local intergenerational and transnational family.

4.3.3.3 Interviews with Filipino adult children, and grandchildren

In total, I interviewed six adult children and grandchildren in this phase of data collection (Table 4 provides a demographic overview of the study's participants). One was a grandchild (Michelle), while the remaining five were adult children who were providing care for their parents in some capacity. Nora and Emma, for instance, provided in-depth care for older parents who had mental health and physical disabilities, while Analyn and Edwin provided instrumental support to their biological parents and in-laws. Given my own experiences and observations of the importance of relationships between older Filipinos and their intergenerational family members, it was crucial for my study to include the perspectives of adult children and grandchildren. These triangulated data were important to understand how intersections between aging, immigration, labour, and care impact family members who are implicated in the stories of older adults. The stories and experiences of adult children and grandchildren provide an intergenerational perspective on the intersections of immigration, aging and care. The adult

children and grandchildren who were interviewed for this study were provided with a \$25 honorarium for their contributions.

Table 4 Demographic profile of adult children and grandchildren

	Age	Family Position	Caring For	Caring Relationship	Coordination with	Household Composition
Analyn	37	Daughter	Mother (Supervisa) ; Mother-in-law; Father-in-law; Children	Provides instrumental and financial support to parents-in-law and mother (Supervisa), and children	Local: With siblings	Lives with mother (SV) and children
Edwin	32	Son	Mother; Father; Mother-in-law (Supervisa) ; Children	Provides instrumental and financial support to mother (Super visa), in-laws, and children	Local: With siblings	Lives with mother-in-law (SV) and children
Emma	40s	Daughter	Mother; Children	Provides main financial support for family members; Instrumental support for family members Receives instrumental support from daughter	Local: Daughter Abroad: Siblings in the U.S. and Philippines	Intergenerational (with daughter and mother)
Michelle	19	Grand daughter	n/a	Receives instrumental support from grandfather	n/a	Lives with parents and grandfather
Nora	40s	Daughter	Mother; Father; Mother-in-law; Father-in-law; Aunt; Uncle; Children; Nephews and Nieces	Provides mainly instrumental support from family relationship	Local: With siblings Abroad: With siblings while parents are abroad	Lives with children

Sarah	30s	Daughter	Mother	Provides instrumental support for mother Receives instrumental and financial support from mother	n/a	Lives with mother
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Similar to the recruitment of older participants, the recruitment of adult children and grandchildren took place through advertisements in local Filipino newspapers. Adult children and grandchildren were given the choice of interview location. Four participants chose to be interviewed in their homes, while one opted to be interviewed at my research office. Semi-structured interviews with adult children and grandchildren focused on (a) caring arrangements between older parents and other family members, (b) their knowledge of immigration and retirement policies, and (c) their engagement with formal and informal services. My interview questions with adult children and grandchildren focused on stories and trajectories of immigration, caring labour, and aging. The questions prioritized included the following:

- I've been speaking to older Filipino adults about their experiences of immigration and care and how these might affect their experiences of aging.
- What roles do your parent(s)/grandparent(s) have in your life?
- What role do you play in your parent/grandparent's life?
- Can you describe some of the difficulties that your parents/grandparents have encountered with regard to aging, immigration, and care?
- If you sponsored your parent/grandparent, what are the reasons you decided to bring your parent(s)/grandparent(s) to Canada?

I considered my interviews with adult children and grandchildren to have reached the point of saturation once I began to hear similar themes. The following section provides a brief portrait of the families, adult children, and grandchildren interviewed for this study. Due to differences in interview length, some of the adult children's portraits were more detailed than others.

FAMILY PORTRAIT:

Analyn (Adult Child/Grandchild Portrait 1)

Edwin (Adult Child/Grandchild Portrait 2)

Vicki (Older Adult Portrait 17) (*see page 99*)

Jose (Older Adult Portrait 18) (*see page 99*)

Edwin and Analyn are a heterosexual couple in their thirties who have three children under the age of five. Edwin and his parents, Vicki (in her late sixties) and Jose (in his early 70s) received their citizenship shortly after arriving through the Family Sponsorship program. Analyn, on the other hand, first came through the Live-in-Caregiver Program, through which she was employed as a domestic worker before marrying Edwin. Analyn and Edwin live in an apartment complex in Montreal, where they work as building custodians. In addition to providing care to their children, they provide care for their three parents. Edwin's older mother, Vicki, is a retired cook who continues to work under the table despite receiving Old Age Security and the Guaranteed Income Supplement. Edwin's father, Jose, also receives these pension entitlements despite working under the table as a factory worker. At the early stages of their marriage, Analyn and Edwin lived with Vicki and Jose, where they were provided intergenerational instrumental, financial, and social care for their grandchildren. However, after the birth of their third child, Analyn and Edwin moved out to care for their expanding family. They also decided to sponsor Analyn's mother (Julita) through the Parent and Grandparent Supervisa, and she was granted a length of stay for five years. Analyn disclosed having a close relationship to her mother, and a desire to care for her. Despite moving away from his parents, Edwin continues to provide instrumental care to them by driving them to various medical appointments and social engagements. The experiences of Analyn and Edwin provide important clues to how the migration of older adults encompasses complex relationships within and between the sending and receiving society, and the local intergenerational and transnational family.

ADULT CHILD/GRANDCHILD PORTRAIT 3: Emma

Emma is a Filipina woman in her 40s, a mother to an adolescent daughter, and a caregiver to a Filipina mother whom Emma sponsored through the Family Reunification Program. Emma's interview focused on the experiences of caregiving for her mother, who has early- to mid-onset dementia. Emma spoke at length about the complexities of care as well as the history of bringing her mother to Canada. One of the salient points of the interview focused on the transnational arrangements that take place whenever her mother returns to the Philippines for six months during the year. Emma has lived in Canada since her early twenties. She coordinated with her sister to apply for reunification on behalf of her mother, who has lived in Canada for the last fifteen years. Emma's mother has been receiving a pension following a ten-year dependency period. Emma talked extensively about the difficulties and strategies of caring for a parent with dementia. Her relationship with her daughter has strengthened since they are all living in the same place. Emma talks about how she and her adult child are coordinating their

schedule so that their mother is always cared for. In addition to being in the home, Emma's mother is also taken to the local mall, a common gathering place for older Filipinos. In caring for her mother (and her decreasing capacities), Emma adheres to the Filipino tradition, which functions on family hierarchy. For instance, though Emma's mother receives a pension, she does not ask for money (paying, instead, out of pocket). Emma suggests that it would be disrespectful for her to dictate how her mother spends her money. Her mother, who engages in return migration, is in Canada particularly for the pension. However, Emma stated how she constantly communicates over email with her mother in the Philippines.

ADULT CHILD/GRANDCHILD PORTRAIT 4: Michelle

Michelle is the youngest daughter in a family of four. She and older sister provide peripheral caregiving to her grandfather, who lives in the same home. Michelle's interview focused on how her grandfather used to provide care by driving her to school while her parent worked. Among her childhood memories are those of her grandfather who used to babysit her and her sister. Now that she is an adult herself, Michelle discussed feeling responsible for contributing to her grandfather's care. Though her grandfather is relatively healthy, she is concerned over grandfather's health. As part of a multi-generational household, Michelle discussed feeling obliged to accompany her grandfather when he goes to the hospital.

ADULT CHILD/GRANDCHILD PORTRAIT 5: Nora

Nora is a recently divorced mother to three boys. In her forties, she is also the eldest of three siblings who all have their own children. Nora is responsible for her father (who is in his late sixties), her mother (who is in her early sixties), her aunt (who recently experienced an accident that impacted her ability to physically move), and her father-in-law (who has several health issues). Nora also has part-time work in the fast-food industry, but is increasingly finding it difficult to go to work because of her recent divorce. Nora described the ways in which her older family members continually relied on her for support. She also expressed difficulties dealing with the divorce while taking on a primary caregiver role to her three children, older parents, and extended families. Nora's parents, for instance, rely on her to coordinate their appointments and to explain any interactions they have with Service Canada. Nora, functionally, is the "go between" for family members, providing care to every member of the family. Her interview focused on the difficult role that she has been placed in, caregiving for her parents and children while adjusting to her new reality as a single mother.

ADULT CHILD/GRANDCHILD PORTRAIT 6: Sarah

Sarah is a Filipina-Canadian in her thirties. She lives in the same building unit as her mother (who is in her seventies) and provides financial and instrumental care. As an adult daughter, Sarah described her caregiving exchanges as a "give and take." Both she and her mother are unattached and provide instrumental support for each other. Sarah drives her mother to appointments, while her mother contributes financially to paying the mortgage and other necessities. Sarah described her situation as a perfect balance, but she wonders to what extent her mother will have the same capacities as she does today. She expressed worry that her mother was

growing older and over the level of care required to ensure her quality of life. Sarah also disclosed the continued negotiation that she has with her mother about care. She is aware of the expectations within the Filipino community about care being provided by adult children, yet, as a single woman, Sarah considered what care would look like given that it is just she and her mother. When asked what was needed to support older Filipinos in Canada, Sarah suggested workshops and educational programs for adult children that acknowledge the tensions between parents and adult children.

4.3.3.4 Interviews with key community stakeholders

Following the 6 interviews with adult children and grandchildren, I then sought the perspectives of 13 institutional actors and community stakeholders. This stage was meant to support the analysis by supplementing and offering insights from community stakeholders, including members of community organizations, church officials, and local politicians. Community stakeholders provide direct and indirect forms of care to older Filipinos and their families. Table 5 show a brief demographic profile of the community stakeholders who were interviewed for this study.

Table 5 Profile of community stakeholders

Participant pseudonym	Age	Position
Aileen	40s	Immigration Consultant
Annie	50s	Community Organizer
Christina	30s	Immigration lawyer
Fred	40s	Priest
Gary	50s	Immigration lawyer
Harley	30s	Community Organizer
Jessa Mae	60s	Community Organizer
Johnathan	60s	Municipal Politician
Joseph	60s	Accountant / Community Organizer
Maude	30s	Social Worker
Ramon	70s	Community Organizer
Simon	40s	Federal Politician
Stephanie	20s	Immigration lawyer

My intention in undertaking community stakeholder interviews was to understand how Filipino older adults found and used community resources. I sought the perspectives of two types of community stakeholders: those working within community organizations that provide Filipino specific socio-cultural services and/or those doing advocacy work for the broader Filipino community. These informants highlighted how experiences of aging are shaped within the community from a uniquely Filipino perspective, and they provided insight into the ways that older Filipinos participate in exchanges (both reception and provision) of care labour. This group included activists and social/cultural voices important for providing a first-hand account of how care labour is enacted, for exposing alternative viewpoints that may not be regularly identified in discussions of care, and for identifying potential gaps in care provision. The main question that guided my interviews with activists and social cultural informants was the following:

- I'm interested in the experiences of older Filipinos. Can you describe your experiences (personal and organizational) in relation to aging immigrants?

The second group of community stakeholders included service providers and local politicians who, while familiar with and often present in the same spaces as Filipino older adults, provided non-Filipino services and could offer a glimpse into policies in action, particularly their functions in regulating and providing services. This group included immigration lawyers, non-profit community organizers, and politicians with experience working in federal, provincial, and local municipal and community politics. Participants from this informant pool highlighted disjunctures and tensions between the everyday experiences of aging, care labour, and immigration programs. These community stakeholders were asked the same question as the activist and social cultural informants:

- I'm interested in the experiences of older Filipinos. Can you describe your experiences (personal and organizational) in relation to aging immigrants?

After completing interviews with community stakeholders, I focused attention on various social policies and programs (particularly immigration, migration, and retirement) that shaped and structured the lived experiences of my older participants.

4.3.4 Phase 4: Textual analysis

The final step in my data collection strategy was a textual analysis of five key policies and programs related to immigration and retirement (see Appendixes F and G). Lockyer (2008) defined textual analysis as a method of data analysis that closely examines the content and/or meaning of texts, structure, and discourse. In my work, I paid particular attention to how policies and programs may shape and structure interactions and relationships between older adults, families, and the community through an examination of policy guidelines, regulations, forms and other documents/website information available for public consumption. I also drew from my observations and interviews to help understand how aging, immigration, and care policies are experienced by older people and their families. Guiding my analysis were the following key questions, adapted from Grenier's (2012) work on transitions:

- What is the overarching language used within this document?
- What is the dominant discourse reflected in each policy?
- To what extent does this policy affect racialized older adults? To what extent does this policy address the needs of racialized older adults?
- What conditions are put into place that regulate (or pose as barriers to) older adults?
- Who benefits from this policy? Whose needs are addressed? Who is left out?

My analysis focused on policies and programs that participants spoke about over the course of the interviews. These included policies and programs related to immigration (a) the Family Sponsorship Program (Government of Canada, 2017b), (b) Parent and Grandparent Supervisa (Government of Canada, 2016c), (c) the Live-in-Caregiver Program (CIC, 2014), and those related to retirement (d) Old Age Security (Government of Canada, 2016d), (e) Canadian Pension Plan/Quebec Pension Plan (Government of Canada, 2016e), (f) Guaranteed Income Supplement (Government of Canada, 2015b). Table 6 provides a list of the policies I examined for the textual analysis component of this study.

The impact of immigration and retirement policies and programs were foremost in the minds of my participants as they explained their realities of care and the challenges they

encountered (for instance, challenges accessing health and social services and engaging with the local community). Key sources of the empirical data for my textual analysis were the Citizenship and Immigration Canada (CIC) and Service Canada (SC) websites and PDF files available for download on CIC and SC webpages. These texts included press releases on the introduction and formal implementation of the Parent and Grandparent Supervisa, discussions on increasing the age of eligibility for OAS/GIS entitlements, and official state documents and policies on immigration and retirement. My textual analysis focused on the gaps between participant experiences and how eligibility requirements and other program regulations affected people's daily experiences, including those related to labour force activity, retirement, care and family/community relations. I also focused upon how policies and programs were presented in the public domain. Table 6 outlines the policies examined.

Table 6 Policies and texts used for textual analysis

Policy and program Name	Types of sources	Analysis
Live-in-Caregiver Program (Citizenship and Immigration Canada)	CIC website.	Focus on past and present eligibility criteria and the shifts in its programming.
Parent and Grandparent Supervisa (Citizenship and Immigration Canada)	CIC website. Press releases from 2012-2015 on the Supervisa.	Focus on past and present eligibility criteria and the ways in which government services (immigration and labour) discussed the program and its relevance.
Family sponsorship for older adults (Citizenship and Immigration Canada)	CIC website. Press releases from 2012-2015 as they pertain to Supervisa and sponsorship	Focus on the eligibility criteria.
Phases of new Parent and Grandparent Supervisa (Citizenship and Immigration Canada)	CIC website. Press releases from 2012-2015 as they relate the integration of the Supervisa.	Focus on how government services (immigration and labour) discussed the program and its relevance.
Old Age Security (Service Canada)	Service Canada website.	Focus on the eligibility criteria and how government services (immigration and labour)

	Press releases from 2012-2015 on the expected increase of OAS eligibility from age 65 to 67	discussed the program and its relevance.
Canadian Pension Plan/Quebec Pension Plan (Service Canada)	Service Canada website.	Focus on eligibility criteria and how government services (immigration and labour) the program and its relevance.
Guaranteed Income Supplement	Service Canada website. Press releases from 2012-2015 on the expected increase of OAS/GIS eligibility from age 65 to 67.	Focus on the eligibility criteria, and how government services (immigration and labour) discussed the program and its relevance.

4.4 Data analysis

Given my study's four phases of data collection (reflexivity notes, participant observations, interviews, and textual analysis) and diverse data sources (perspectives from older adults, adult children, grandchildren, and community stakeholders), I amassed a large amount of raw data. In this dissertation, qualitative data analysis was treated as an ongoing iterative process that occurred throughout and beyond the process of data collection. I used interpretive strategies to analyze my data that included writing my initial thoughts and reflections directly on the documents (i.e., interview transcripts, policy documents) and using qualitative software to store, code, and retrieve these texts. Initially, I coded the data using Dedoose software, but, after finding this program limited, I later transferred the files to NVIVO given the ease of the latter's interface in distinguishing between codes/nodes and branch nodes. Acknowledging that the analysis was a dialectical and iterative process, I engaged in what Creswell (2013) termed the "data analysis spiral"—after each research phase, I read, classified, and memoed the data before moving onto the next phase. For instance, after conducting a participant observation, I would take extensive field notes and critically reflect on the data before moving to the next observation. I also used this technique with the interviews, wherein I wrote field notes after each interview before arranging my next interview. The iterative analytical process I used is consistent with qualitative research approaches, which examine the breadth and depth of emergent concepts and/or themes (Creswell, 2013; Dezin & Lincoln, 2011).

4.4.1 Coding of interviews

I began my data analysis by drafting a participant portrait for each of the interview participants (i.e., eighteen older adults, six adult children and grandchildren). These portraits were created based on my initial readings of the transcripts and post-interview notes. This first step provided a general sense of the participant's stories as well as a point of reference from which themes based upon narrative strategies (such as highlighting key events) began to emerge. Once these portraits were completed, I began to code the interviews. My research questions served as a guide for my initial coding using Dedoose and NVIVO. I began breaking down the data through a process of open coding that engages with raw interview transcripts line by line and helps to develop themes. For example, the concepts of aging, intergenerational care, transnational care, immigration, and identities became codes. Interview transcripts were read a second time to develop substantive sub-codes, such as retirement, physical aging, and expectations of aging. Following this process, I gathered codes to determine the emerging themes. The themes that emerged from this process centered on three key issues: the challenges of retirement, the caring labour provided by intergenerational, local, and transnational members of the family, and interconnections between labour history and immigration. More specifically, this inductive analytical process highlighted how pensions, family caring labour, and participation in the under-the-table labour market influenced the day-to-day needs and experiences of older adults.

4.4.2 Coding of field notes and participant observations

Similar to the process described for the interview data, in this phase I collected journal entries, field notes, interviews, and policy documents and inputted them into Dedoose/NVIVO. I started this process with my field notes and reflections. Through the process of open coding, I coded my journal entries, which included descriptions, thoughts, and full accounts of events (including when, who, and how), which provided context for my analysis (detailed field notes are included in the Appendix H). Clifford (1990) argued that field notes could be used in conjunction with explicit theorizing to construct a valid and internally consistent text. Moreover,

they allow for rigorous data collection and greater validity. Following my analysis, and description of themes, I returned to my journal entries to determine whether my analytic ideas were in line with my initial observations and reflections. This data reflection and check-in gave additional validity to my findings.

The following is an excerpt from one of my journal entries (my remaining entries can be found in Appendix H). I have included this particular entry to demonstrate my ongoing engagement and reflexivity with the data and how it shaped and shifted my analysis.

(Summer 2015) I write this journal entry after hearing an update about Jessica (*name changed to protect confidentiality*). Jessica is a domestic worker that I had the privilege of meeting a few years ago, and who represents the struggle of domestic worker programs in Canada. Jessica also demonstrates the type of agency and resistance that I have come to respect. When I first met Jessica, she was completing her hours as a live-in caregiver, but was fired by her employer for being pregnant (after a trip to the Philippines). Jessica disclosed the hardships of being separated from her family and watching her young son grow up before her eyes in front of a Skype screen. She spoke lovingly about what she and her family would do in Canada once they were reunited in Canada.

Jessica had a quiet dignity and joy about her. Her smile radiated whenever she spoke about her past and her family. However, this smile slowly disappeared over time the longer she waited to reunify with her family. The next time I would see her, Jessica gave birth to her beautiful son Kieran (*name changed*), who was three at the time. Jessica had still not been reunified with her husband and oldest son. However, she would secure a new employer and finished the terms of her contract. Now awaiting her permanent residency status (which she has applied for), Jessica was unable to place Kieran into public daycare because she herself did not have permanent residency status. Thus, while working as a domestic worker for a different employer, Jessica was essentially placing most of her salary in a private daycare. Jessica was perplexed that her son, a Canadian by birthright, was unable to access Canadian services.

A year would go by when I heard that Jessica received her permanent residency and could reunify with her oldest son and husband. I smiled to myself knowing that Jessica's hardships were somewhat alleviated by the eventual reunification of her family. At the time of writing this entry, I learned a few days ago that Jessica's husband died, just as they were getting reacquainted as a family. After everything she went through, I can't help but think about how Jessica will age in Canadian society. What will happen to her children? While the newly instituted Caregiver Program has been introduced to ward off criticism of its abuses, it has also curtailed one of the opportunities through which Filipinos can come permanently into Canada. What happens now to my people who have been, and continue to be, valorized and commodified for our labour?

After coding my field notes, I proceeded to analyze my observations, both participant observer and non-participant observer events. I paid particular attention to significant events that elicited questions and descriptions of what is going on, why an event seems important, and what issues it raises. The decision to categorize observations into codes and then themes comes from

Bakeman's (2000) assessment that behavioural observation is systematic. Detailed field notes documenting the location, the types of people engaged in the activity, and, most importantly, the type of activity were recorded throughout my data collection phase. While these data were not as in-depth or comprehensive as my other sets, they were useful in pushing forward my analysis and understanding of people's experiences. I coded my notes according to the types of activities observed (e.g., shopping, care, socialization, space), which became helpful later. For example, observations about family interactions at the local mall that were written early in my research process facilitated my emergent coding for intergenerational and community care. I then used the interviews to test and check my interpretations by asking the interview question, "How do you care for your older parent?" My main intention with this data set was to use it as an audit trail and to triangulate my analysis. My notes also helped me to refine my interview questions and provided me with opportunities for prolonged engagement and trust building with the community.

4.4.3 Coding of policy documents

A key feature of my analysis its engagement with ideas and frameworks expressed in policies through textual analysis. Following the work of Smith (2002) and DeVault and McCoy (2006), I considered texts a form of knowledge and discursive practice central to the social organization and ruling relations of contemporary society. After coding my interviews, reflections, and observations, I reviewed the documents to trace which policies were most directly implicated in the stories of my informants. Older adults, adult children, and community stakeholders generally discussed immigration and retirement policies as relevant to their experiences of aging in Canada. For this reason, I conducted a literature search on immigration and retirement policies and programs, related recent press releases, and media coverage connected to the policies they mentioned (e.g., the Family Sponsorship Program, the Parent and Grandparent Supervisa, the Old Age Security Program, and the Guaranteed Income Supplement).

According to Smith (2006), texts represent the ruling relations through which institutions function. Though I did not adopt an institutional ethnography approach, I found DeVault and McCoy's (2006) principles of examining text-mediated processes helpful for the textual

component of my work. DeVault and McCoy (2006) argued that an analysis of policy must interrogate the ways in which people interact and engage with texts that are implicitly and explicitly implicated in their everyday lives. The ways in which policies and programs were discussed by policy makers, practitioners, and even older people themselves, thus, allowed me to consider the ideas, or what Smith (2006) called the “ideological codes,” that are often used and reproduced when discussing aging, immigration, care, and labour. This form of analysis also helped me to deconstruct and contextualize programs such as the Parent and Grandparent Supervisa, whereby older adults from the Global South are denied entry to Canada on a permanent basis and are explicitly valorized for their fixed visits. For example, codes such as “responsibility” and “scarcity” were developed in response to the perception that older adults are a significant burden to social welfare programs in Canada.

4.4.4 From coding to manuscript

After developing these codes and themes, I went through another process of categorizing the data in order to develop clear priorities for the development of journal manuscripts. After examining the lived experiences of older Filipinos and their connections to social policies, three distinct themes emerged for my manuscripts. These included (a) the retirement experiences of domestic workers under the Foreign Domestic Movement, (b) the new realities of care that exist between older Filipinos, their adult children, fictive kin networks, and transnational families, and (c) how particular immigration programs such as the Parent and Grandparent Supervisa and the Parent and Grandparent Program reinforce ideas that racialized immigrants are a burden to the state.

4.5 Evaluation of findings: Member checking, authenticity and validity

The following section details how I ensured that my findings were as accurate as possible. I also describe my process for ensuring authenticity and validity. Thomas (1993) suggested five methods for ensuring the accuracy of ethnographic studies:

1. careful recording and analysis of data,
2. triangulation of data collection,

3. review of data and/or drafts by colleagues or participants,
4. replication of the study, and
5. researcher reflection.

In line with Thomas' approach, I engaged in 1, 2, 3, and 5. My careful recording of codes and themes, as detailed in the previous section, and my writing up of the papers represent #1. I engaged with #2 by coding and analyzing different forms of data (field notes, participant observations, interviews) with different informants and textual analysis of policy. I engaged with #3 by inviting a select number of participants to discuss my findings and by having discussions with my supervisors about the content of my findings and overall dissertation. The older adults, adult children, and community stakeholders who participated in my member checking also provided feedback on the content and implications of my findings. Finally, #5 (reflection) was carried out through my field notes. Supported by a rigorous audit trail that included field notes and journal reflections, I questioned how my analysis and manuscript publications might inform immigration and labour policies and their implications for social work practice and research. My intent was to consider the usefulness of these publications and how they might serve as a potential resource for activism in line with the social change principles of critical ethnography.

While there are many forms of validity that have been accepted by qualitative researchers, I paid particular attention to what Lather (1986) termed "catalytic validity," which refers to the experiences and findings of a study transitioning to new, more productive positions. In the spirit of this approach, I returned to five of the participants I had interviewed to ensure the authenticity and validity of the data and to determine whether my analysis was reflective of how older adults understood their experiences of aging. I approached Nenita, Pearl, Nora, Rizza, and Makario to discuss some of my preliminary findings, inviting them to provide feedback on my themes and analysis. These participants were selected based on the depth of their narratives on the intersections of aging, immigration, and caring labour, and on their requests to hear about the progress of the study. Two instances of catalytic validity arose during the research process. The first was with Pearl, who disclosed that she did not know about pension programs and her entitlements as a Canadian citizen. Upon hearing about the challenges that older domestic

workers faced upon retirement, Pearl revealed that she became assertive about asking questions from service providers. Her engagement throughout this research process also generated additional questions about Old Age Security and the Guaranteed Income Supplement, and it encouraged her to have more open discussions with her husband about post-retirement plans. Another instance of catalytic validity was related to the issue of transnational care. In discussing the Parent and Grandparent Supervisa, Nenita disclosed having family members who were interested in bringing older relatives through the program. Following our debriefing and discussion, she shared that she was having second thoughts about the Supervisa and would have more meaningful conversations with her family members. While Nenita acknowledged the importance of having family support in Canada, she expressed shock regarding the temporariness of the program and the financial burdens that would be levied on the adult children and grandchildren.

My process for receiving feedback involved asking the selected participants to provide comments on my manuscripts. I spoke to the five participants about my focus on the Parent and Grandparent Supervisa, the experiences of aging domestic workers in Canada, and the unique caring dynamics within the Filipino-Canadian diaspora, where care is provided and received intergenerationally, transnationally, and across fictive kin networks. Each participant confirmed that the findings seemed to reflect what they knew or had seen, and they stressed the importance of highlighting how their retirement provisions were not enough to sustain their everyday activities. To validate this feedback, each of my findings chapters explicitly mentions or problematizes the inadequacy of the Old Age Security and Guaranteed Income Supplement. When asked to provide feedback on the Parent and Grandparent Supervisa, none of these five participants could speak with any confidence about my findings because of their unfamiliarity with the program, or due to recent changes that have been made to immigrant family sponsorship in Canada. I, thus, turned to community organizations and academics to provide guidance and feedback on my findings and the disjunctures that I had identified between policy and lived experiences. Experts in the field, community organizers in particular, confirmed my analysis about the general discourse on public policies and immigration programs and the realities that older immigrants and newcomers face. Their feedback confirmed the breadth and depth of the

analysis and suggested that my findings aligned with existing campaigns that they had worked on centering on immigrant rights.

4.6 Limitations

This study contributes to a growing body of research about how the lives of older Filipinos in Canada are structured and experienced at the intersections of aging, immigration, labour, and care. There are however, a few limitations. First, this study could have included more participants who arrived under the Economic (rather than the Family Reunification) class. While my sample included participants who immigrated under the Economic class in the late 1960s and early 1970s, I was unable to engage, with any depth or detail, in a discussion with participants about the impact of earlier immigration on later life. For example, older Filipinos who arrived in Canada at a younger age, and at a time when their educational and professional accreditations were accepted, had access to different privileges and social capital than those who arrived later in their life course (see Coloma & Pino, 2016; Tungohan et al., 2015). A more critical assessment would also acknowledge how neoliberal entrenchment and outcomes, like the non-validation of credentials, was more passively applied earlier in the mid-twentieth century than it is today.

Another limitation related to the lack of an in-depth accounting of participants' place of birth in data collection and analysis. The Philippines is composed of thousands of islands with several distinct languages and regional customs. While a small number of participants alluded to these differences during the interviews, I did not have the opportunity to probe, or invite participants to elaborate on, these stories. Diversity also exists across the Canadian diaspora, with regional variations in customs, and in available government and community programs and services. For example, there are language, regional and cultural differences between the Filipino diaspora in Montreal, Quebec, and those living in other provinces in Canada. Different provinces are also subject to differences in settlement, language, and retirement programs. In Quebec, access issues are further problematized due to the fact that services are predominantly available in French, while the majority of Filipino community members speak English as a second language. This is particularly the case for older Filipinos. This reality may have shaped participants' experiences of access and engagement with services in ways that are not easily

transferable to older people's experiences in other provinces. Similarly, older Filipinos who live in predominately rural settings will likely have different experiences of aging and access to services which are not accounted for in the current study.

Finally, the application of snowball sampling methods in my research meant that participants were comprised only of those who self-identified through connection to at least one of my recruitment sources. My recruitment strategies included solicitation through public forums (bulletin boards, advertisements in local newspapers, and snowball sampling) that were accessible to a broader audience. However, my study did not outreach specifically to those with no access to community networks, such as those living in long-term care facilities and those who are more physically and/or socially isolated. Future research should consider recruitment strategies that go beyond already existing community networks to enhance the possibility of reaching less visible and/or more vulnerable older members of the Filipino-Canadian community who are more socially isolated (including those living in long-term-care or other institutions).

CHAPTER 5: BRIDGING CHAPTER

This chapter provides a bridge between the earlier chapters of the dissertation, and the findings presented in the latter half of the thesis. As is consistent with the format and expectations of a manuscript-based thesis, the findings chapters do not reflect an exhaustive accounting of the complete data set, but instead focus on key themes that emerged from my analysis of the data. Generally speaking, the findings offer an examination of the lived experiences of immigration, care and labour among older Filipinos living in Canada through an intersectional life course perspective (as explained in Chapter 3). As a critical ethnographic project my work exposes how policies and programs shape experiences of aging. Moreover, my dissertation examines how processes of aging, immigration, and caring are lived and understood by older people themselves, their families, and communities. Each findings chapter consists of a published article. Chapters 6 and 7 are sole-authored publications in the *International Journal of Migration, Health and Social Care* (Ferrer, 2015), and the *Canadian Journal on Aging* (Ferrer, 2017). Chapter 8, the final findings chapter, is a co-authored manuscript published in the *Journal of Gerontological Social Work* (Ferrer, Brotman, Grenier, 2017).

My first findings chapter (Chapter 6) focuses on the ways in which Canadian im/migration programs shape family reunification and care exchanges between older people and their families. Using the case example of the Parent and Grandparent Supervisa³⁰, I explore the disjunctures between policy discourses/processes and the lived experiences of a Filipino family. In this chapter, I employ the language of a “case study” methodology because I focused on a specific case, namely a family unit and their decision to sponsor an older family member, to frame my analysis. The use of a case study allowed me to engage in a critical analysis of the intersections between aging, immigration and care through the Parent and Grandparent Supervisa, and is consistent with the critical ethnographic approach used in the broader dissertation project.

Chapter 7 centers the aging experiences of retired and retiring Filipino domestic workers. Taking an intersectional life course perspective, I examine the intersections of immigration and

³⁰ The Parent and Grandparent Supervisa is a migration program first introduced in 2013 by the federal government.

labour through programs such as the Foreign Domestic Movement and Live-in-Caregiver Program³¹. This chapter calls attention to the impact of immigration and labour policies on the aging experiences of Filipina women who were engaged in formal care through domestic work. I trace the ways in which older women are multiply marginalized as a result of their lifetime participation in caring labour within the secondary labour market³². In particular I address concerns regarding the retirement capacity of Filipino women who immigrate to Canada under domestic work programs; highlighting the ways in which immigration program restrictions and regulations, and labour inequality across the life course shape immigrant women's experiences of poverty in later life.

Finally, Chapter 8 takes into account the perspectives of older Filipinos, their adult children, and community stakeholders in order to illustrate the concept of reciprocity as a lived experience. To date, the notion of reciprocity represents a dynamic and complex exchange that is not well accounted for in mainstream health and social care services. Chapter 8 presents reciprocity as a complex exchange within families and communities that extends across generations, borders, and time. In particular, the chapter renders visible the unique configurations of care among older Filipinos who actively engage in caring exchanges across intergenerational, transnational, and fictive kin networks. These experiences reflect a deep commitment to family and community, and simultaneously challenge dominant discourses within mainstream policies and programs that tend to define older immigrants as dependent and passive recipients of care.

Taken together, the manuscripts shed light on the aging experiences of an emerging community within Canadian society. Each findings chapter provides a glimpse into the ways in which experiences of immigration, care, and labour across the life course shape lived experiences of older Filipinos, their families and communities. Through the use of an intersectionality lens, the publications also underscore how key governmental and institutional

³¹ Both past (Foreign Domestic Movement and Live-in-Caregiver Program) and current (Caregiver Program) domestic work programs have a high representation of Filipino women.

³² The secondary labour market is defined as high-turnover and low paying jobs within the service sector (Galabuzi, 2006).

policies and programs operate as mechanisms of exclusion and marginalization of older racialized immigrants generally, and older Filipinos specifically.

CHAPTER 6: FINDINGS 1

The following chapter has been published as follows:

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Examining the disjunctures between policy and care in Canada's Parent and Grandparent Supervisa

Structured Abstract

Purpose

This paper examined disjunctures between the ways in which Canada's Parent and Grandparent Supervisa is framed within policy documents and press releases, and how it is actually experienced by older adults and their adult children from the Global South who engage in intergenerational care exchanges once they reunify.

Design/methodology/approach

A case study involving qualitative interviews with a married couple (adult children), and official texts from Citizenship and Immigration Canada were analysed, and subsequently categorized according to themes

Findings

The findings of this paper first demonstrate how policies such as the Parent and Grandparent Supervisa are ostensibly made to alleviate the significant backlog of family reunification applications, but in reality streamline and categorize older adults from the Global South as visitors who are given minimal state entitlements. Second, the Supervisa reinforces forms of structured dependency by placing the responsibility and burden of care onto sponsors who must provide financial, social, and health care to their older parents. Finally, official statements on the Supervisa ignore the complex intergenerational exchanges that take place to ensure the survival of the family unit.

Research limitations/implications

Given its case study design, the generalizability of the findings are limited and may not be representative of the experiences of all adult children who sponsor parents under the Parent and Grandparent Supervisa. However, given the recency of the program, the issues highlighted provide a much-needed starting point in examining the Supervisa's impact on families from the

Global South. Moreover, future studies could critically assess how the highly gendered nature of care is experienced under Canada's temporary reunification programs.

Practical implications

The study highlights the everyday challenges of sponsoring a parent under the Parent and Grandparent Supervisa. These issues are particularly important for policy makers and practitioners to assess and understand how such policies transform dynamics of care for families from the Global South. The unbalanced power dynamics raises questions on how to best support overburdened adult children, and vulnerable older parents who have no access to state resources.

Originality/value

The findings of this paper further our understanding of how families from the Global South provide and receive care under the Parent and Grandparent Supervisa. These experiences, however, are neglected within official state policies which frame older newcomers as visitors who are managed, and denied entitlements to state resources. Revealing disjunctures between policy and lived experiences can assist service providers, professionals and policy makers to recognize how programs like the Supervisa overburden the family unit, and exacerbate conditions of poverty and marginalization.

Key words

Older im/migrants from the Global South, Parent and Grandparent Supervisa, intergenerational and transnational care.

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The Government of Canada is fully committed to helping families reunite. We recognize what parents and grandparents want most is to be able to spend time with their families (Citizenship and Immigration Canada, 2011)

6.1 Introduction and literature review

In 2011 the number of people over the age of 65 in Canada reached close to 5 million, representing 14.8% of its entire population (Canadian Institute of Health Research, 2013). The increasing number of older cohorts in Canada mirrors that of other Global North societies where lower fertility rates, increased life expectancy, and an aging baby boomer population reflect a rapidly greying demographic. While the focus in Canadian research and policy has prioritized the aging, longevity, and healthier outcomes of older adults as they occur over the life course, research on older im/migrants from the Global South remains largely underdeveloped (Durst & MacLean, 2010). This paucity of research is most striking when considering the increasing diversity of the Canadian population, and the recent shifts in im/migration policies that have imposed stricter eligibility requirements for permanent reunification, and created a specific visa class for its older applicants. These policies not only set the conditions for entry into Canadian borders, but also shape relationships between older adults and adult children who engage in intergenerational and increasingly transnational caregiving exchanges.

While im/migration is not a new phenomenon, the recent globalization and growth of cross-border capital flows, production systems, and international trade have attributed to the unprecedented growth, volume and significance of global migration (Castles & Miller, 2003; Yeates, 1999). These recent developments have set the stage for the acceleration, differentiation, feminization, and politicization of migration (Castles & Miller, 2009). These shifts have significant implications for migration flows from Global South to Global North societies. Although the North-South divide is colloquially understood as a demarcation of geographic locations, im/migration scholars have argued that distinctions between the Global North and Global South are centered on the global axis of social, political and economic inequality between and within so-called 'developed' and 'developing' worlds (Castles, 2003; Del Casino, 2009; Reuveny & Thompson, 2008). Though research in Canada's older im/migrant population from the Global South remains underdeveloped, recent gerontological studies on the broader

experiences of older im/migrants have started to explore the considerable heterogeneity and diversity that they represent. Torres (2012) noted how the complexities that older im/migrants encounter are invoked by different legal and socio-economic statuses, motivations for leaving the homeland, and at various stages of the life course. While migration scholars have focused on the economic reasons for leaving the homeland (Massey, Arango, Hugo, Kouaouci, Pellegrino & Taylor, 1993; Torres, 2013), considerations of how older adults engage in ‘economies of kinship’ where reasons for migration are motivated by family care reception and provision, are emerging within transnational caregiving research (Baldassar, 2007). Despite being separated by national borders, families continue to engage in complex and mutual caregiving exchanges, and are actively complicit in the structural shifts in family dynamics and social networks (Phillipson & Ahmed, 2004). Using the experiences of older migrants in the United States as a case example, Treas (2008) also found that older adults maintain strong emotional attachments to their personal connections and customs of the homeland despite im/migration policies which categorize older migrants as temporary visitors, permanent residents, or naturalized citizens. These attachments and loyalties are not only formed within the family, but also through the cultural diaspora in what Treas (2008) described as, “the often contradictory positions that transnational immigrants attempt to reconcile in the service of a self that is inextricably linked to the lives of others” (p. 469). Once reunited with their families, Treas (2008) found that older im/migrants engage in ‘domestic economizing’, an arrangement where older family members assume caregiving roles within the intergenerational family to allow their adult children to participate in the labour market, and to ensure the preservation and transmission of culture to their grandchildren. These new realities shape cultural constructions of family relations, roles and obligations, which counter the dominant assumptions of late life immigration based on economic motivations.

While the existence of transnational families is not a new phenomenon, changes to the im/migration regime within sending and receiving countries have created what Bernhard, Landolt & Goldring (2009) have called the “proliferation of spatially ruptured family arrangements” (p. 4). The emergence and growth of global families is due in large part to the complexities of the new political economy which emphasizes the free flow of global capital through processes of transnationalism, and the retrenchment of state provisions (Phillipson &

Ahmed, 2004). Scholars have identified transnationalism as a process of movement that is anchored by two or more nation-states (Faist 2000 as cited in Torres, 2013), but bound to processes of globalization and the free flow of global capital; thus transcending nation-state borders. The connections between the two create complicated and complex understandings of how older im/migrants cross national borders to be with their families, and maintain relationships across borders. While existing literature has delved into the intersections between capitalism, im/migration and neoliberalism (see Barber & Lem, 2012; Phillipson & Ahmed, 2004), scholarship in Canada has been slow to consider how such austerity-driven measures impact lived experiences of older im/migrants from the Global South, and family members who are often responsible for their parents' entrance into Global North societies.

6.1.1 Older im/migrants in Canada

Within the Canadian context, older im/migrants from the Global South are largely comprised of two groups (Durst, 2010; Koehn et al., 2010). The first group is characterized by older adults who have aged-in-place after arriving as part of the influx of newcomers under the Economic Class program during the mid-20th century. It was during this time that Canada's nation-building project liberalized its immigration program by eliminating explicitly discriminatory admissions criteria, and facilitated channels for reunification among family members (Durst, 2010; Koehn et al., 2010). While immigrants during this time period are said to have had longer opportunities for adaptation and integration, as well as access to state institutions and programs (Durst & McLean 2010), structural barriers and forms of exclusion (e.g. relegation to the secondary/peripheral labour market, poverty) have meant that some immigrants experienced social and economic inequities that extend into later life (Galabuzi 2006; Li, 2003).

A second group of older immigrants in Canada is comprised of newcomers who arrived under the Family Sponsorship category prior to its changes in 2014. An important provision of this program was the 'Ten-year Dependency Period' clause whereby sponsored older immigrants were reliant on their sponsors for basic social and economic needs such as food, clothing, shelter, dental and eye care for a period of ten years. Stipulations of the Family Sponsorship category

denied full access to health care services, and basic income security programs (pensions) such as the Old Age Security (OAS) and the Guaranteed Income Supplement (GIS), the latter of which provides monetary supplements to retired recipients who have a low income, and are currently living in Canada. Existing research has highlighted that 25-40% of immigrant seniors under family sponsorship report no source of income (Koehn et al., 2010). For older immigrants from the Global South the imposition of a dependency clause, which restricted access to basic pension schemes for the first ten years, created structured dependencies on adult children who bore the economic brunt of these access inequities. Recently the Canadian state revamped its im/migration programs (in particular, the Family Sponsorship program) with the aim of instilling efficiency and accessibility into what was widely construed to be an albatross of a program; characterized by a long-standing reputation of being open to international applicants but also having unwieldy and extensive wait times. This has propelled the Canadian state to reconsider and ultimately overhaul how its im/migration programs allow newcomers to enter and integrate within its borders. For older adults in particular, the changes to Canadian im/migration brought the ‘Parent and Grandparent Supervisa’ – a streamlined visa program which allows older parents to temporarily reunify with their families in Canada.

6.1.2 Introduction of the Parent and Grandparent Supervisa

In the autumn of 2011, Canada’s then Minister of Citizenship, Immigration and Multiculturalism, Jason Kenney, announced the creation of the Parent and Grandparent Supervisa, a “10 year multiple-entry visa which allows applicants to visit loved ones in Canada for up to 24 months at a time without the need for renewal of their status” (Citizenship and Immigration Canada, 2011). According to press releases by Citizenship and Immigration Canada, the program’s intent was to eliminate the sizeable backlog of applications to the Family Sponsorship class of immigration, which in previous years had taken a period of up to eight years to process (Citizenship and Immigration Canada, 2011). This was done through a two-phased action plan, which first placed a moratorium on older adults accepted through the Family Sponsorship category so that the existing applications could be assessed and processed. The moratorium also provided time for policy makers to revamp the eligibility requirements for

family reunification when it would reopen to older adults in 2014. The second phase of the action plan redirected older adults seeking entry into Canada to the newly created Parent and Grandparent Supervisa Program. A year after its inception, Citizenship and Immigration Canada released a statement lauding the “great success” of the program change, with more than 3,500 Parent and Grandparent Supervisa applicants being accepted and granted a visitor’s visa; representing an 87% approval rate, and a 20% reduction of queued applications within the Family Sponsorship program (Citizenship and Immigration Canada, 2012). Minister Kenney highlighted the efficiency and effectiveness of the changes in the following Citizenship and Immigration Canada press release statement:

Our government is committed to family reunification. I’m happy to see that the program is growing and that more and more eligible parents and grandparents are getting the opportunity to spend longer periods of time with their loved ones in Canada (Citizenship and Immigration Canada, 2012)

In January 2014, the Canadian government program formally reopened the Family Sponsorship program to older applicants but introduced more stringent qualifying criteria to assuage concerns about the social and financial costs of allowing incoming older adults to reunify with their families whether it be on a permanent or interim basis. In a statement highlighting changes to the Family Sponsorship program, Citizenship and Immigration Canada (2013a) declared that “sponsors [must] have the financial means to support parents and grandparents, while reducing the net costs to Canadian taxpayers by leading to less reliance on health care and social programs”. New qualifying criteria included an increase in the minimum necessary income (MNI) needed to support older adults, as well as an extension of the dependency period where sponsors are required to pay for health and social services for 20 years instead of the previous requirement of 10 years. According to Citizenship and Immigration Canada, the rationale for a MNI increase was to “ensure sponsors can adequately provide for their sponsored parents and grandparents”, while the newly imposed 20-year dependency period would insure that “sponsors, not taxpayers, remain responsible for any welfare or supplementary health care costs” (Citizenship and Immigration Canada, 2013b). Perhaps most notable was the

maximum number of completed applications that Citizenship and Immigration Canada assesses on an annual basis (i.e. the program pauses the number of applications it receives as soon as it receives its quota set at 5000). Table 7 provides an overview of the recent changes to the eligibility requirements for the Family Sponsorship program and the Parent and Grandparent Supervisa.

Table 7 Comparison between the Family Sponsorship program (pre and post January 2014) and the Parent and Grandparent Supervisa

	Family Sponsorship for older adults (Pre-2014)	<i>Phase 1:</i> Parent and Grandparent Supervisa	<i>Phase 2:</i> Revamped Family Sponsorship for older adults (Post-2014)
<i>Minimum Necessary Income</i>	Sponsor must meet Minimum Necessary Income (MNI) to support family, and incoming parent and grandparent. MNI set at above the low-income cut-off (LICO) threshold	Sponsor must meet MNI based on low-income cut-off	Increased MNI by 30% from previous Family Sponsorship criteria
<i>Commitment of sponsor (financial, social, etc.)</i>	10-year Dependency period: Signed sponsorship agreement where sponsor commits to providing basic needs of sponsored person(s) such as food, clothing and shelter for 10 years	Statement from child or grandchild that s/he will provide financial support	Extension of dependency period to 20-year Dependency Period
<i>Medical insurance</i>	Agreement to reimburse government for every benefit provided as social assistance to the parent or grandparent	Have valid Canadian medical insurance coverage for at least one year	Agreement to reimburse government for every benefit provided as social assistance to the parent or grandparent Proof of income from Canada Revenue Agency over a 3-year period

<i>Potential for permanent residency</i>	Potential eligibility for permanent residency, and access to state pensions following 10-year Dependency Period	No possibility for permanent residency, and thus no access to state pensions	Potential to apply for permanent residency and access to pensions following 20-year Dependency Period
<i>Maximum number of completed applications assessed (per year)</i>	n/a	n/a	5000

In light of this policy shift, the current study examines the how the Parent and Grandparent Supervisa was formed, and how it continues to be framed as a necessary policy shift needed to meet the new realities of Canada's aging demographic. This rhetoric and discourse will then be juxtaposed with the experiences of older adults and their family members who are responsible for coordinating applications, and subsequent care once their parents enter Canadian borders. This paper demonstrates how the Parent and Grandparent Supervisa is ostensibly meant to alleviate the backlog of family sponsorship applications by providing an efficient and streamlined method for family reunification, but in reality requires considerable effort from adult children who must coordinate applications transnationally. These costs include fees for applications, passports, medical insurance, and other travel related costs. Once older adults are granted a Parent and Grandparent Supervisa and are reunified with their families in Canada, adult children assume full financial and social responsibilities of their parents – receiving little by way of state support. These types of structural changes calls into question the survival of the intergenerational family unit, the perpetuation of the cycle of poverty, and the imbalanced power dynamics given the structured dependency of older parents on their adult children. The disjuncture between policy discourse and lived experiences also underscores the unrecognized, and uncompensated caring labour that Supervisa families engage in while in Canada.

6.2 Methodology

6.2.1 Data sources and collection process

This paper adopted a case study approach to examine the implications of the Parent and Grandparent Supervisa on the experiences of a Filipino family in Canada whose intergenerational composition included married adult children, grandparents, and grandchildren who live in Canada. Given the recent changes to the Family Sponsorship program and the introduction of the Parent and Grandparent Supervisa, a case study was used to interrogate the experiences, issues, and concerns of family members who apply through these programs. As a research design, a case study provides “an empirical inquiry that investigates a contemporary phenomenon within its real life context, especially when the boundaries between phenomenon and context are not clearly evident” (Yin, 1994, p. 13). Participants in this study were part of a larger qualitative study on the aging experiences of Filipinos in Montreal, Quebec. Participant recruitment took place through posted advertisements in local newspapers, and through a process of snowball sampling. The participants for this case study were chosen for their extensive descriptions and reflections of applying through the Parent and Grandparent Supervisa.

The design for this study triangulated multiple sources of data to highlight the disjunctures that exist between state policies and the everyday experiences of families who are bound by these regulations. In particular, two data sources were analyzed for this paper; the first was textual data from Citizenship and Immigration Canada policy documents and statements about the reformed Family Sponsorship Program, and the Parent and Grandparent Supervisa. These textual sources offered an important understanding of the ways in which policies regulate and mediate responsibilities and care exchanges between family members. These press statements were then juxtaposed with in-depth interviews with Analyn and Edwin (pseudonyms to ensure participant anonymity) a heterosexual Filipino couple who recently sponsored their mother through Canada’s Parent and Grandparent Supervisa. Open-ended questions were utilized to elicit rich narrative accounts and recall of experiences related to sponsoring their parent through the Supervisa program. During the 2.5-hour interview, the adult children were also asked about the ways in which they provided and received intergenerational care, as well as their knowledge of existing aging and im/migration policies. Among the questions asked were: What are your experiences in caring for and receiving care from your parent(s)? Why did you decide to

sponsor your parent(s) through the Parent and Grandparent Supervisa? What were some of your expectations of having your parent(s) live with you? Interviews with Analyn and Edwin were conducted in English, digitally recorded and then transcribed verbatim by the author. The research was conducted in accordance with standards set forth by the Tri-Council Policy Statement for Ethical Conduct for Research Involving Humans, and approved by the Research Ethics Board Office at McGill University.

6.2.2 Data analysis

Analysis of textual and interview data began with a process of open coding, where the researcher read, coded, and categorized transcripts and policy documents along meaningful concepts and themes. These themes were meant to describe the experiences of families under the Parent and Grandparent Supervisa, and ultimately provide an account of how these experiences match policy rhetoric and discourse. To ensure that breadth and depth of the analysis process, all data sources (transcripts, documents, and codes) were read a second time in an iterative process consistent with the explanation-building process of a case study (Yin, 2014). Themes from both interview transcripts and policy documents were then compared to identify key disjunctures between what is presented in policy discourse, and the experiences of a family who had successfully applied on behalf of an older parent under the newly formed Parent and Grandparent Supervisa. To ensure the validity and authenticity of the research findings, im/migration scholars and practitioners were solicited to check the trustworthiness of the data and research findings.

6.3 Findings

6.3.1 Establishing a narrative of efficiency and responsibility: Limiting Family Sponsorship and streamlining the Parent and Grandparent Supervisa

As Citizenship and Immigration Canada formally transitioned the Parent and Grandparent Supervisa into a permanent program, and lifted the moratorium on the Family Sponsorship program for older applicants, the rhetoric surrounding the program's reforms has (and continues to be) centered on instilling efficiency and increased accessibility into one of Canada's well-

known immigration channels. Statements by Citizenship and Immigration Canada (2011; 2012) depicted the Family Sponsorship Program as an unwieldy program with an unmanageable number of applications that take a significant amount of time and resources to process:

If we do not take real action now, the large and growing backlog in the parents and grandparents program will lead to completely unmanageable wait times. Through this balanced series of measures, we will be able to dramatically reduce the backlog and wait times, while the new Parent and Grandparent Supervisa will allow more family members to pay extended visits to their loved ones (Citizenship and Immigration Canada, 2011)

For the Parent and Grandparent Supervisa program to be sustainable, it must be redesigned to avoid future backlogs. The redesigned program must also be sensitive to fiscal constraints, bearing in mind Canada's generous public health-care system and other social benefits (Citizenship and Immigration Canada, 2012).

Though the rhetoric surrounding the Supervisa focuses on reducing queued wait times within Canadian im/migration programs, its implications are felt in other ways. First, the introduction of a temporal component means that applicants are, by default, considered a "genuine visitor to Canada who will leave by choice at the end of the visit" (Citizenship and Immigration Canada, 2012). The notion of a *genuine visitor* is coded with assumptions that members of this category are excluded from the imagined Canadian community and are therefore rationalized to be ineligible for state provided services and entitlements. By implementing more restrictive eligibility criteria for family sponsorship and subsequent permanent residency, older adults and their sponsors have to no choice but to apply to the streamlined Parent and Grandparent Supervisa, which imposes a length of stay limitation, and reinforces relationships of structured dependency between older adults and their adult children where the former are reliant on the latter for economic support, health and social care (see Table 7). These transformations have effectively shifted conceptualizations of citizenship and family, in turn, structuring how im/migrants are received and managed; creating a tiered immigration program for older adults and their adult children who are expected to meet means tested criteria based on financial capacities.

Though these types of policies harken to the explicitly exclusionary policies of past Canadian immigration regimes, they are more reflective of the rationale underplaying the current context of transnational migration which valorizes the flow of global capital, and the sustained binary of a productive and unproductive labour force, for which older adults from the Global South are generally situated in the latter category. In describing the second phase of the Parent and Grandparent Supervisa, former minister Kenney presented the juxtaposition and contradiction between the perceived generousities of the Canadian state with the growing concern for austerity:

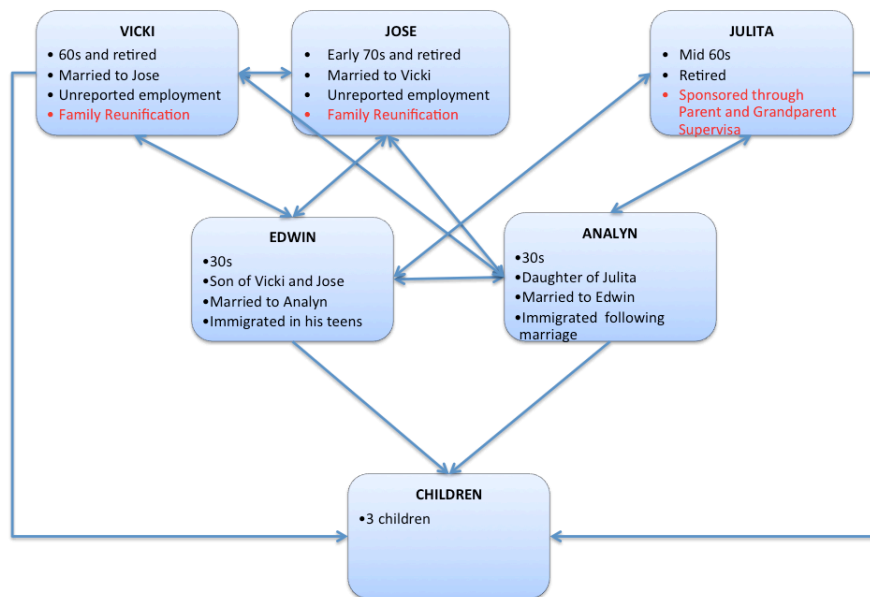
We choose to have such a program in a way that corresponds to our fiscal limit as a country, to the limits in our healthcare system, which is why we do not admit an unlimited number of senior citizens. If we're not going to have that program, then our next choice is: do we want to manage it properly or not? ... We could take some responsible decisions to have a fast program that's properly managed, so that sponsored parents and grandparents can be admitted in a year or two after their application. We choose to be generous, to reflect the practical limits of our generosity, but also to have a program that is efficient and timely so that people who make those applications can expect a decision in a reasonable amount of time (Citizenship and Immigration Canada, 2013c).

The statements above reinforce and maintain the dominant imagery of Canada as a bastion for newcomers, underlining the charitable and welcoming nature of existing im/migration policies. These statements, however, are juxtaposed with the rhetoric and justification of austerity measures which create rigid eligibility criteria in accessing health and social care systems. While these measures might assuage concerns of depleting resources within an aging society, they render invisible the actual experiences of aging and caring relationships between family members. The disjunctures between how the Parent and Grandparent Supervisa is framed publically, and the actual experiences of family sponsors highlight the largely (in)visible coordination efforts and caring labour exchanges that occur between family members.

6.3.2 The case of Analyn and Edwin

Edwin and Analyn are a Filipino heterosexual couple in their 30s, and have three children. Edwin and his parents received their citizenship shortly after being sponsored by another family member under the Family Sponsorship program. Analyn, on the other hand, received permanent residency after her marriage to Edwin. Together Analyn and Edwin live in a rented apartment complex in Montreal, and have jobs in the secondary/peripheral labour market. In addition to providing care to their children, the couple provides intergenerational care for their three parents (see Figure 4). Edwin's older mother (Vicki) and father (Jose) are both retired but continue to engage in unreported employment while receiving their OAS and GIS entitlements. At the early stages of their marriage, both Analyn and Edwin lived with Vicki and Jose; providing intergenerational instrumental, financial and social care. After the birth of their third child, the couple moved to a different apartment in order to care for their expanding family. Despite being in separate households, Edwin continues to provide instrumental care to his parents by driving them to various medical appointments and social engagements. Both he and Analyn also provide financial support to Vicki and Jose on a regular basis.

Figure 4 Dynamics of care within Edwin and Analyn's family



After the introduction of the Parent and Grandparent Supervisa in 2012 the couple decided to sponsor Analyn's mother, Julita, who was living in the Philippines. Not knowing that the Family Sponsorship program was in the process of undergoing significant reform, they submitted a Supervisa application on behalf of Julita and received a 5 years visitor's visa. While Analyn and Edwin confirm the expediency of the Supervisa application process, their experiences also highlight some of the challenges of assuming economic and social responsibilities for their parent's medical and financial needs. However, in spite of the extensive costs, the couple also acknowledged the benefits of having an older parent provide childcare and caring labour for their young children. Analyn and Edwin's interviews revealed, from an analytical standpoint, disjunctures between what is offered in text, and the interactions and exchanges that occur on an everyday basis. These disjunctures reveal how the Parent and Grandparent Supervisa is presented to the wider public as a way to ensure that Canadian resources are not being consumed by older visitors from the Global South, but is, at very same time, producing heavy burdens on adult children within intergenerational families who provide care on a day-to-day basis. We now turn to the disjunctures that exist between policy discourse and the lived experiences of families under the Parent and Grandparent Supervisa.

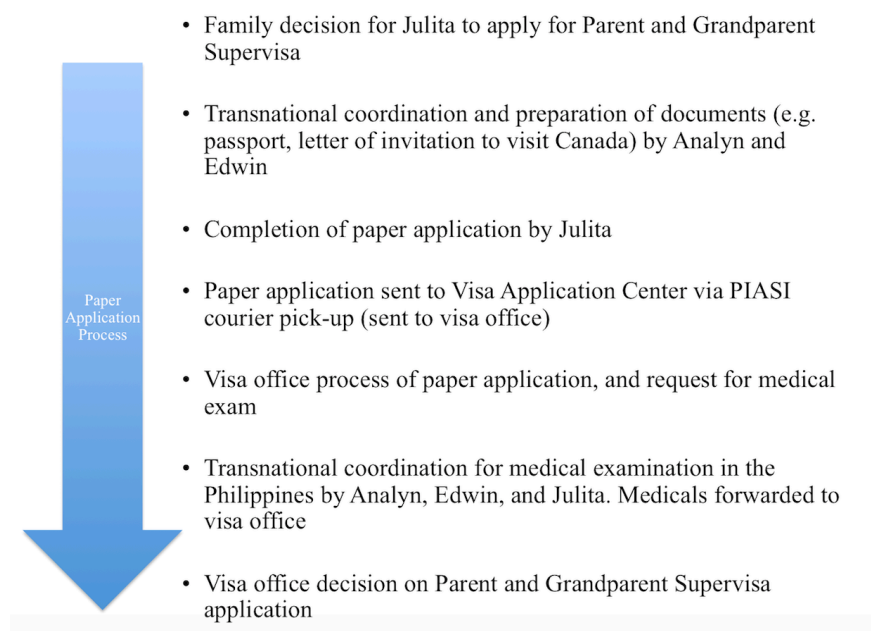
6.3.3 Disjunctures between policy and experiences

6.3.3.1 Disjuncture 1: Challenges and difficulties of applying through the Parent and Grandparent Supervisa

Though Citizenship and Immigration Canada lauds the Supervisa's efficiency and ease of use, the actual process of applying is not as straightforward as claimed, and includes multiple actors who are implicated in the process of application and assessment. Analyn's recounting of her mother's Supervisa application process highlights how adult children must go through extensive lengths to coordinate the application process on behalf of their older parent(s). These efforts were complicated by the bureaucratized relationship between Citizenship and Immigration Canada, the Canadian embassy in the Philippines, third party service providers who facilitate the application process, adult children who coordinate the Supervisa on behalf of their parents, and older adults who prepare to migrate to Canada. Most of Analyn's dealings were not

with Citizenship and Immigration Canada but with the Canadian embassy and its contracted service providers such as the Visa Application Center (VAC) in Manila and the Philippine Interactive Audiotext Services (PIASI) which arranged the collection and courier of the paper application to the visa office. Analyn was asked to describe the steps she took when she applied for the Parent and Grandparent Supervisa on behalf of her mother, who was living in the Philippines at the time of application (see figure 5 for an overview of this process).

Figure 5 Schematic of Parent and Grandparent Supervisa application process



While these services are available online, Analyn and Edwin revealed that they pursued a paper application because their mother did not have access to a computer in the Philippines. As such, Analyn and Edwin engaged in coordination efforts to ensure that Julita was able to apply to one of the Philippines' visa application centers (in Manila and Cebu). Given the considerable distance between herself and her mother, Analyn enlisted the help of a friend living in the Philippines to help complete, and ensure the paper application was properly administered by the VAC in Manila. In the following excerpt, Analyn discusses how she prepared her mother's passport, medical exam, and birth certificate – all requisites for a Parent and Grandparent

Supervisa. These realities highlight how applicants of the Global South are reliant on their local or transnational adult children to help navigate through the bureaucratized migration process.

Analyn: My mother filled out the form. ...You can apply in the computer ...[but] if you apply for the paper you have to call the embassy (VAC), and then they're gonna pick [it] up for you. That's what they [do].

Interviewer: So once your mom filled out the forms ...she called the embassy?

Analyn: Well before we send all the papers to her, we just tell [her]: “get a passport, get everything done”. Birth certificate, marriage certificate. ...And then we send the paper application form and then she fill it out, and then she went to Manila because we were in the province. She went to Manila to the embassy, and they said, "No you cannot come here and give that paper. Just call us, and we're going to pick up the paper in your place".

Interviewer: Then who said that you were accepted for the visa?

Analyn: [Canadian embassy in the] Philippines.

Interviewer: I always thought it was Canada.

Analyn: Nothing to do here. Only the stamp ...I tried to call [Citizenship and Immigration Canada]. I tried to call because my mother is here. [She's] like a tourist. I tried to call before, and I said, “Is it possible to sponsor my mom because she's already here? She [has] a Supervisa, and I want to sponsor her to stay. Can I sponsor her?” They said that sponsorship is abolished for now until 2014. ...I'm really shocked.

In the excerpt above, Analyn also discussed her initial intentions of sponsoring her mother only to realize that the Parent and Grandparent Supervisa did not offer a pathway to permanent residency. Analyn expressed initial shock, and would later question whether it would be financially feasible to have her mother remain in Canada because of the high costs for private insurance. Even with the Family Sponsorship Program reopened to all older adults, Analyn and Edwin would encounter additional financial barriers given the new financial criteria for sponsoring older parents. As a family of five, Analyn and Edwin's combined income would need to match the MNI (minimum necessary income) set at \$63 833 CAD in 2013. This poses a significant barrier which, when combined with CIC's self-imposed cap of 5000 applicants

accepted for evaluation, extinguishes hopes of Julita reuniting with her Canadian family on a permanent basis. The changes to the Family Sponsorship program ultimately demonstrate exclusionary criteria for families of the Global South looking to sponsor their older parents and grandparents by imposing criteria which are difficult, if not impossible, for families in poverty to meet. Instead these families find that their only opportunity to reunite with their older parents is through the Parent and Grandparent Supervisa, a program that offers temporary reunification but places a significant burden on sponsors to provide financial support and caring labour.

6.3.3.2 Disjuncture 2: Experiences of social and health care exclusion

Like past im/migration programs specifically catered to older applicants, the Parent and Grandparent Supervisa reinforces relationships of structured dependency between older adults and their sponsors. The financial regulations are particularly stringent since assessments are based on low income cut off rates. According to Citizenship and Immigration Canada (2011), one of the requirements of a Supervisa is a signed letter by a sponsor attesting to their relationship to the applicant, as well as the ability to provide financial coverage for health care costs. In the latter, sponsors must submit proof that they have purchased Canadian medical insurance covering a minimum of \$100 000 in health care, hospitalization and repatriation costs. In Analyn and Edwin's case, the significant financial responsibility calls into question their ability to support Julita over the long-term; specifically beyond the anticipated two years they thought would be granted. In the following excerpt, Analyn discussed the feasibility of having her mother stay in Canada for 5 years, citing among other costs, the annual and fluctuating fees for private health insurance:

Analyn: Insurance for her, if you don't have that ...you have to buy insurance for her.

Interviewer: Is that expensive to get?

Analyn: Very. One year is \$2000 CAD. ...It's really freaking me out because they gave her [a] 5-year visa. It's too much. It's too much because what we understand is [she's] only [here for] 2 years. And they give her [a] 5-year visa. ...It's really surprising for me, because maybe after 1 year she goes home, and then she's going to come back again. That's what's in our mind. ...They didn't state there that it's 2 years maximum or 2 years

minimum. That's what we thought that it's 2 years maximum; that's it. And she can go home and maybe we can extend her and file another.

Analyn further described how the added financial responsibility had become a significant stressor especially when monitoring her mother's health. Analyn expressed worry whenever Julita required medical attention because while her mother was covered by private insurance, Analyn was responsible to pay for immediate services, which did not offer guarantees of full reimbursement. This type of uncertainty has prompted Analyn and Edwin to reconsider whether they will re-apply for the Parent and Grandparent Supervisa in the future:

Analyn: I wish she could have her permanent residence because it's really hard for her to get sick. And we have the insurance but, she [got] sick already. And then ...we pay for the expenses in the hospital, and then you don't even know because the insurance [says] "Oh, did she have the sickness before in the Philippines?" ...So we said, "No it's the first time that she has this". Thank God everything is approved and they give back the money. ...One time she cannot she cannot lift herself to go out. It hurts here (*Analyn points to her back*), and then we go to the hospital. ...You have to think too that maybe they're not going to reimburse the money. I'm going to think about in another year, [whether] to renew for another 2000. So we might get her here as a permanent resident not spend[ing] how [much]? 5 years for 10 thousand [dollars].

Broadly speaking the implications of the Parent and Grandparent Supervisa can be said to exacerbate experiences where older migrants are structurally dependent on their sponsors for financial and social support (Phillipson and Ahmed, 2004). For older adults, these conditions are made more difficult by restrictions in accessing pension and health care programs, which position older visitors as dependents who must be managed, and restricted in the types of entitlements and services they receive. Such a framework makes it difficult, if not impossible, to integrate into the host society given the heavy dependency on adult children, and the paucity of opportunities to engage in the labour market. The impact is not only felt by older adults under the Supervisa, but also adult children who sponsor their parents and serve as the sole providers of

health insurance, food, shelter, clothing, and transportation. While questions are legitimately raised as to whether sponsors have the capacity to assume complete stewardship of their parent's care, focus must also be placed on the implications of having these forms of structured dependency; where visiting parents are heavily and solely reliant on their adult children for financial support, and health and social care.

6.3.3.3 Disjuncture 3: Acknowledging the care labour exchanges between parents and adult children

Despite the significant financial toll of having a visiting parent under the Parent and Grandparent Supervisa, adult children are also the benefactors of care labour provided by their older parents. Julita's presence meant immediate assistance in household duties and domestic tasks especially in caring for the newborn child. When asked to describe the type of work her mother provided on a daily basis, Analyn was quick to identify household labour and the caregiving her mother provided to the grandchildren:

Analyn: [She's] helping us a lot. Before it was really hard for us to go out because sometimes you want to go out without kids. Now I can just rush here and there in the groceries and everything. I can get my things because she's here. She's really a big help, mostly [taking] care of the baby because my two kids go to school. She does everything! Sometimes you have to tell her, "No! Stop! You have to rest!"

For Analyn and Edwin, Julita's childcare has allowed them more time to participate in the labour market and fulfill caregiving responsibilities to other members of their family (namely Edwin's parents). Visiting older parents in this regard, provide important caregiving contributions within the intergenerational family. In the following excerpt the couple described the crucial role that they played in caring for Edwin's parents, as well as the traditional mores that compel Filipino adult children to look after their aging parents:

Edwin: Filipino parents really expect you take care of them. At first, [my parents] were really emotional even though we were moving next door ... What they were more worried about was transportation. If they get sick, if they had to go to the hospital I would drive

them around. We did groceries and everything. ...Tradition-wise, it's the youngest boy that takes care of the parents.

Analyn: We [are] concerned about their health. It's deteriorating.

Edwin: Yeah, especially with my dad

Analyn: He's taking a lot of medicine already. We just want them not to work anymore ...but they don't like. They said they're going to get bored.

Interviewer: So what kinds of health concerns do they have?

Analyn: They have complicated [issues]. They have high cholesterol, high blood pressure, and diabetes. (*Analyn laughs*) Sometimes I'm so mean to them. ...I'm telling them, "Are you not tired of going to the hospital?" They keep going to the hospital. It's really tiring for them and they need, especially when they're sick, more [care].

The excerpt above highlights the multiple and interfamilial responsibilities that Analyn and Edwin assume for their family unit. Although Vicki and Jose receive OAS and GIS, they maintained their jobs in the underground economy to supplement their late life pensions. Perhaps most revealing was their continued need for instrumental support from their adult children, which included accompaniment to health care appointments, grocery shopping, and transportation from one location to another. This type of care even extends to day-to-day management of health, where Analyn and Edwin remind Jose of his diabetes, and high cholesterol and blood pressure. Analyn and Edwin were also apprehensive over their parent's participation in the secondary/peripheral labour market given these health concerns. These types of interactions highlight the realities of care within Analyn and Edwin's family, which are characterized by dynamic care reciprocation and exchanges. These realities of provision and reception, however, are notably absent within the rhetoric and discourse of the Family Sponsorship and Supervisa programs.

6.4 Discussion

This paper examined disjunctures between the ways in which the revamped Family Sponsorship Program, and the Parent and Grandparent Supervisa are framed within policy

documents and press releases, and how they are actually experienced by older adults and their family members. The findings first demonstrate how policies such as the Parent and Grandparent Supervisa are ostensibly made to alleviate the significant backlog of family reunification applications by creating temporary and seemingly more efficient programs for older applicants to apply to and quickly be accepted under. Such policy developments are in line with global restructuring efforts characterized by austerity driven measures which reduce (or in some cases deny completely) entitlements for newcomers. Welfare in the European Union, for instance, is highly contingent on interrelated factors such as migration history, sociological status, past relationship with the paid labour market, and ‘location’ within a particular member state (Dwyer & Papadimitriou, 2006; Warnes, 2002; Warnes, Friedrich, Kellaher & Torres, 2004). Here, notions of citizenship are highly stratified and built around an ideal of the citizen as a paid worker, or a paid worker who is a national of an EU member state. Dwyer and Papadimitriou (2006) note how policy at the state level serves to diminish rather than enhance the social security rights of certain older international migrants. In this regard, highlighting the connections between transnationalism and structural challenges that reflect the everyday experiences of older im/migrants from the Global South and their sponsors provides a potential framework for understanding the inequalities between nation states and the crisis it generates in supporting older people (Phillipson & Ahmed 2004). While older applicants are still able to apply for family sponsorship in Canada, recent amendments to the Family Sponsorship program make it all but impossible for all older adults to meet the increasingly rigorous financial criteria. As such, the Parent and Grandparent Supervisa becomes the only way in which older adults can enter Canada to reunify with their families.

By reducing the number of opportunities for older im/migrants to permanently immigrate to Canada, these policies placate anxieties and concerns of an aging population, and in particular, the issue of an influx of older adults coming from the Global South. Whether purposeful or not, such measures explicitly categorize older adults as ‘*visitors*’ who must be surveilled, and made ineligible for state benefits because of common perceptions that they consume valuable and scarce resources. Analyn and Edwin’s experiences of the Parent and Grandparent Supervisa highlight the need for policy makers to pay specific attention to the disjunctures between policy

rhetoric, and the actual experiences that are produced as a direct result of these austerity driven programs. Though the Parent and Grandparent Supervisa emphasizes the desire and need for older adults to join their families in Canada, the policy places a drastic strain on the family unit once reunification occurs. By placing the burden of care onto sponsors, the Supervisa completely ignores the considerable coordination and responsibilities that are placed on adult children. Moreover, the financial requirements and criteria places additional burden on sponsors and families like Edwin and Analyn who are already caring for young children and other family members (e.g. multiple older parents). For Global South families who are largely participating in the secondary/peripheral labour market, this perpetuates the cycle of poverty given the added financial burdens of supporting their parents when they require medical attention and other health/social services.

In Canada, the influence of neoliberal governmentality (and austerity governance) has effectively altered im/migration and labour policies to streamline more transient and low cost labour from the Global South to be placed immediately in the secondary and peripheral labour market (Rice & Prince, 2013). While programs such as the Temporary Foreign Worker Program and the Live-in-Caregiver Program (domestic work program) were created to facilitate the flow of transient and cheap labour into Canadian borders, opportunities for immigration and permanent residency are dwindling as eligibility criteria are becoming more strict and rigid. Well-known immigration policies such as the Family Reunification program, and the Economic Class advertise for a specific type of applicant; one who is young and productive. These assumptions however, fail to consider the significant caring labour contributions that older adults from the Global South provide to the family unit. For instance, upon reunification, older adults provide babysitting to their grandchildren which then liberates their adult children to participate in the labour market. As Analyn and Edwin's case allude to, the intergenerational relationship between family members liberates the couple to participate in the labour market, and/or extend their capacity to care for other members of their family unit. It is, generally speaking, an arrangement that allows the family to survive. Such examples reflect scholarly work which demonstrate how older im/migrants from the Global South participate in the redistribution of

care resources which include emotion, time, and cultural knowledge that cross generational and border lines (Zhou, 2013).

The recent changes to the Family Sponsorship program, and introduction of the Parent and Grandparent Supervisa pose important questions on how intergenerational norms are actively being transformed. By forcing older adults to reunify with their families in block increments, the Parent and Grandparent Supervisa first reinforces the dominance of the traditional nuclear family as the primary (and oftentimes sole) source of care, and secondly inherently exposes older parents to potentially vulnerable situations because they are structurally reliant on their sponsors and adult children for financial, social, and health care (as well as systematically denied state rights and entitlement). The imbalanced power dynamics are certainly neglected in policy discourse, and must be monitored to ensure the rights and welfare of Supervisa parents are respected. It is here where health care and social service providers could intervene and provide resources, which would help alleviate the uneven power dynamics between adult children and older parents. At the very least, additional research could be done to examine how older adults experience and perceive these forms of structural dependency.

6.5 Conclusion

As this paper has shown, the combination of the reformed Family Reunification Program and the Parent and Grandparent Supervisa reconstitutes family reunification as temporary (on the need for older adults from the Global South to temporarily reunify with their families) – assuring the public that they will not drain scarce resources during their stay. Such discourse at best, ignores the caring labour exchanges that allow adult children to participate in the labour force, and ensures that the family is cared for (with little expense to the state). At worst, this type of policy disrupts family dynamics by placing considerable burden on sponsors to care for their parent's financial, social, and physical well-being. The unbalanced power dynamics also pushes older parents into potentially vulnerable positions where they are structurally dependent on their adult children for financial and social support. These invisible realities warrant further attention from policy makers, practitioners, and scholars especially in terms of how these types of policies impede caring relationships both locally and transnationally. Given the recency of the program

changes, the experiences and issues highlighted by the case study provide a much needed starting point in examining the impact of the Parent and Grandparent Supervisa on Global South families in Canada and transnationally. Such findings could serve as an impetus for future research to consider the highly gendered nature of care especially among the Filipino caregivers (Parreñas, 2005), and the extent to which women apply for, and subsequently care for children and grandchildren under the Parent and Grandparent Supervisa.

CHAPTER 7: FINDINGS 2

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Aging Filipino Domestic Workers and the (In)Adequacy of Retirement Provisions in Canada

Abstract

Although domestic work scholarship in Canada has focused primarily on the immigration/migration and labour experiences of domestic workers under the Foreign Domestic Movement and the Live-in-Caregiver Program, research is scarce on how these workers retire and consequently age in Canadian society. This article focuses on the aging experiences of retired Filipino domestic workers who, upon entering retirement, find themselves working in the secondary and/or underground economy while providing and receiving care from spouses, grandchildren, and local/transnational family members. Data were drawn from six qualitative, in-depth interviews with older Filipina domestic workers who discussed experiences of immigration, caring labour, retirement, and aging. Findings underscore (1) the poverty that older Filipino domestic workers encounter as they approach retirement; (2) the necessity but insufficiency of the state's retirement provisions; (3) the need to find work in the unreported labour market; and (4) how caring labour is provided intergenerationally as a survival strategy.

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7.1 Introduction

Existing gerontological literature has demonstrated that older immigrant women are more likely to live in poverty than their Canadian-born counterparts (Chui, 2011; Marier & Skinner, 2008). This reality is partly attributed to the ways in which the Canadian pension system requires its constituents to actively participate in the labour market throughout their lifetime in order to benefit from its contributory programs. These types of restrictions disproportionately affect older immigrants because they are prevented from accessing maximum entitlements (Marier & Skinner, 2008). Although research on the poverty of older women provides important clues in understanding the structural barriers they face as they transition into their late lives, there is limited research on how domestic workers from the Global South³³, who have received their permanent resident status/Canadian citizenship, retire and age in Canada. Although female immigrant workers in the secondary labour market and low-paid contract workers face similar circumstances of precarity, the experiences of retired domestic workers can be considered unique given the labour they are expected to provide within the household. These tasks include but are not limited to the intimate forms of caregiving, cleaning work, cooking, and other types of duties that can extend past the household (Alcuitas, Alcuitas-Imperial, Diocson, & Ordinario, 1997; Pratt, 2004).

This article derives from a study that examined the experiences of aging among Filipino domestic workers living in Montreal. Here, I focus on how older domestic workers in Canada are unable to retire in the traditional sense, instead finding themselves in positions where they continue to provide labour in the informal economy and in the private sphere to ensure that their needs are met in their later lives.

³³ Although the North-South divide is colloquially understood as a demarcation of geographic locations, immigration/migration scholars have argued that distinctions between the Global North and Global South are centred on the global axis of social, political, and economic inequality between and within so-called “developed” and “developing” worlds (Castles, 2003; Del Casino, 2009; Reuveny & Thompson, 2008).

7.1.1 Situating older immigrant women within Canada's pension schemes

Divided along three pillars, Canada's pension structure offers basic entitlements through government transfers and contributory schemes meant to ensure and maintain a standard of living for older Canadians (Financial Consumer Agency of Canada, 2015). At its base are basic entitlements such as the Old Age Security (OAS), which represents a universal government transfer program whose purpose is to reduce poverty in later life. In instances where older adults require additional support, the Guaranteed Income Supplement (GIS) serves as a means-tested supplement to the OAS (Service Canada, 2014). The second pillar is represented by state contributory schemes such as the Canadian Pension Plan/Quebec Pension Plan (CPP/QPP), which all Canadian workers formally contribute to throughout their labour history in Canada. Finally, the third pillar comprises private pension schemes such as the Registered Pension Plan (RPP) and the Registered Retirement Savings Plan (RRSP). These provisions come in the form of employer and/or individual contributions. It is important to note that the three retirement pillars reflect the gendered and stratified labour market in Canada (Young, 2011). According to Marier & Skinner (2008) older women disproportionately access the GIS, a maximum benefit of approximately \$14,000 CAD. With 7.6 per cent of older women living below the low income cutoff line (LICO)³⁴, it is important to note that even maximum entitlements to the GIS (\$14,000 CAD) would still situate older women well below the LICO in urban (\$22,229 CAD) and rural (\$15,302.27 CAD) areas (Young, 2011). Approximately 80 per cent of older women who are unattached (i.e. never been married, are widowed, or are divorced) are living in poverty in Canada (Chui, 2011; Young, 2011). These realities exist in large part because of the ways in which Canadian retirement policies are structured to benefit full-time and continuous work (Kodar, 2012; Young, 2011).

The intersections between retirement and immigration have particular implications for older immigrant women, as their later lives are characterized by low incomes and reduced access

³⁴ The LICO is commonly understood as the demarcated "poverty line" (Westhues, 2006).

to income security programs (Marier & Skinner, 2008; Young, 2011). The persistence of low incomes is closely tied to the eligibility rules governing Canada's OAS and GIS programs, which are particularly restrictive to newcomers, and have a disproportionate impact for immigrant women who cannot access and benefit from pension programs in the same way as their Canadian-born counterparts. Marier & Skinner (2008) noted that immigrants tend to receive fewer public and private social benefits for three key reasons. The first relates to the time of arrival and the ability to contribute to the contributory pension program. Since many immigrants arrive halfway through their life course, they are subject to reduced capacity to contribute, placing them at an economic disadvantage when they reach their later lives (Ginn, 2003).

A second reason for their reduced capacity to contribute is the residency tests and restrictions on benefits allowed for family members (Sainsbury, 2006). Access to full OAS entitlements, for instance, requires the applicant to live in Canada for at least 40 years (and at least 10 years after the age of 18). This criterion is very difficult for immigrants to meet, especially for those coming through reunification categories, where older newcomers face specific clauses rendering them financially and socially dependent on their sponsors for 10 years (now 20 years) (Koehn et al., 2010). The current 20-year Dependency clause, which replaced the former 10-year Dependency clause, prevents incoming older immigrants from accessing state entitlements until after they have fulfilled this residency and dependency requirement. Finally, labour market and acculturation barriers have significant implications for immigrant women, who are most likely to encounter interrupted careers, and low wages within the secondary labour market (Galabuzi, 2006; Li, 2003). Given these structural barriers and restrictions to full entitlements, Marier & Skinner (2008) revealed that immigrants arriving after 1970 collected only 51 percent of the OAS compared to their Canadian counterparts, meaning the bulk of their income was derived from the GIS.

7.1.2 Considering the caring labour or domestic workers in Canada

Although retirement policies have particular implications for older immigrants, a specific population that warrants further consideration is older immigrant women engaging in domestic

work in Canada. The term domestic work covers a range of tasks and services that vary from country to country. According to the International Labour Organization's Domestic Workers Convention of 2011, distinctive characteristics of domestic work are that the work performed is located within a household, and services are provided to third-party employers (International Labour Organization, 2011). Citizenship and Immigration Canada (CIC) offers a broader definition of live-in caregivers (domestic workers), focusing on the populations who receive services. Domestic workers in Canada are considered caregivers "who are qualified to provide care for children, elderly persons or persons with disabilities in private homes without supervision" (Citizenship and Immigration Canada, 2014a). Existing research in Canada has documented how domestic workers engage in household work (cleaning, cooking) and caring labour (child care and child rearing), both of which are situated under the spectrum of reproductive work³⁵ (Neysmith, Reitsma-Street, Collins, & Porter, 2012).

Within the past few decades, women of the Global South (particularly from the Philippines) have crossed Canadian borders to assume care work that is commonly characterized as low-waged, as well as low-skilled and highly gendered (Barber, 2008; Kelly et al., 2011; Pratt & PWC B.C., 2012). Canada, like many Global North societies, relies on transnational and feminized labour to provide care within its domestic and private spheres. According to a report by Kelly et al. (2011), more than 52,493 permanent residency applicants were received under the Live-in-Caregiver Program (LCP) since 1992³⁶ (Kelly et al., 2011). Although the annual number of domestic workers has increased since the introduction of the LCP, existing research has focused almost exclusively on caregivers during their younger years, leaving us with limited knowledge on how domestic workers age and retire in Canada.

³⁵ Reproductive labour is understood as the labour needed to sustain the labour force (Neysmith et al., 2012).

³⁶ Canada's domestic work policy shifted again in 2014 with the introduction of the Caregiver Program, which eliminated the mandatory live-in requirement.

7.1.3 A Brief History of Domestic Work in Canada

The precursor to the Foreign Domestic Movement and Live-in Caregiver Program, and turn towards immigrant women from the Global South began in 1955 with the West Indian Domestic Scheme (WIDS). WIDS was a financial arrangement between Canada and the United Kingdom, which granted conditional landed immigrant status to single women aged 18 to 40 from the British West Indies in exchange for one year of live-in domestic service (Foner, 2009). Although the WIDS allowed women of the Global South to enter as domestic caregivers, its eligibility requirements were the start of explicitly exclusionary practices against women of color (Bakan & Stasiulis, 1997; Cohen, 1994; Foner, 2009). For instance, domestic workers from the British West Indies were not offered financial loans or paid passage that had previously been given to past European domestic workers (Bakan & Stasiulis, 1997). Expanded purviews given to the state meant that domestic workers who were deemed unsuitable and ineligible could be expelled at any given moment. Finally, the imposition of a yearlong live-in requirement allowed employers to have significant control over their employees' salaries, hours, and working conditions.

The West Indian Domestic Scheme was transformed into the Non-immigrant Employment Authorization Program (NIEAP) in 1973. Unlike its predecessors, the NIEAP revoked the right to permanent residency, and granted domestic workers a temporary work visa in its place. Mounting reports of abuse raised the level of awareness of the working conditions under the NIEAP, prompting increased calls for safer labour standards (Cohen, 1994). In response, the Canadian government introduced the Foreign Domestic Movement (FDM) in 1981, and reinstated the pathway to permanent residency but extended the required length of live-in service by two years. The FDM policy also saw a shift in applicants, as women from the Philippines became the primary source of domestic caregivers (Alcuitas et al., 1997). Further changes were made in 1992 with the introduction of the LCP, which ostensibly sought to reform the FDM but placed further eligibility restrictions such as the requirement of a grade 12-equivalency education, and knowledge of an official charter language (Bakan & Stasiulis, 1997). The LCP also expanded the scope of what would be considered care work to include eldercare,

and care for clients with disabilities (Bourgeault, Parpia, & Atanackovic, 2010; Chowdhury & Gutman, 2012).

In 2014, the Canadian government once again made changes to the domestic worker program by introducing the Caregiver Program (CP), the replacement program to the LCP. This iteration of domestic work policy saw the elimination of the required live-in component, as well as formal streamlined categories for childcare and care for people with high medical needs (CIC, 2014b). Although policy makers have lauded the changes for ostensibly alleviating risks of employer abuse, many of the challenges of past programs still remain, particularly in regards to long processing periods and the lack of access to immediate permanent residency (Tungohan et al., 2015).

7.1.4 Problematic Nature of the Domestic Work Policy in Canada

Although the annual number of live-in caregivers has increased since the introduction of the LCP, both past and more recent domestic work policies in Canada have been criticized for producing labour conditions akin to modern-day slavery; highlighting in particular, the precarious and potentially abusive nature of the workplace. For instance, employers are given considerable discretion over salaries, hours worked, and workplace conditions (Pratt, 2004; Tungohan et al., 2015). Domestic workers abide by prevailing wage standards that ensure minimum salaries, but they are seldom compensated for extended and overtime work hours, which drastically lower their actual hourly compensation (Choudry, Hanley, Jordan, Shragge, & Stiegman, 2009). Moreover, researchers have identified the de-skilling of a very educated and professional workforce as a major issue. Here, researchers noted that incoming domestic workers from the LCP were required to meet a high educational criterion but prevented from undertaking vocational studies during the length of their contract (Atanackovic & Bourgeault, 2014; Kelly et al., 2011). These types of barriers have been especially restrictive considering that employers have failed to recognize domestic work as legitimate “Canadian experience” (Atanackovic & Bourgeault, 2014). These types of barriers, in addition to the onerous and long work hours, prevent domestic workers from upgrading their skills in order to transition away from the secondary labour market (Atanackovic & Bourgeault, 2014).

In addition to research on the workplace, existing scholarship has also examined the detrimental impact of domestic work policy on the family unit, where delayed processing times in applying for, and receiving, permanent residency have meant prolonged separation between mothers and their families in the Philippines (Barber, 2008; Pratt, 2004; Parreñas, 2005; Pratt & PWC BC., 2012). Taking into account the extended wait times in applying for family sponsorship, domestic workers face separation from their families for an average of five to 10 years (Pratt & PWC BC., 2012). Though existing scholarship has contributed to our understandings of transnational labour and the ways in which domestic work is highly mobile, transient, and de-skilling work, we know very little of how domestic workers age in Canada. For Filipino domestic workers who have spent earlier parts of their life course crossing borders to provide care for their employers and families, the scarcity of knowledge renders invisible their realities of health, family arrangements, negotiations of care, and financial security in later life. The need to highlight these experiences is especially urgent when we consider that women over the age of 65 are vulnerable and at risk for poverty in the later stages of their life course (Young, 2011). Thus, inquiries into the late-life experiences of older and retired domestic workers come at a particularly important time given the number of immigrant women from the Global South who are both aging and retiring after providing extensive caring and domestic labour to Canadian families.

7.2 Methodology

This study examined the experiences of aging among Filipina domestic workers living in Montreal. Interviews were conducted from January to March 2013 with six Filipina respondents who had immigrated to Canada under the Foreign Domestic Movement program. The analysis was part of a larger ethnographic study, which adopted an intersectionality framework to examine the interplay between immigration, retirement, and aging of older Filipinos in Canada. Intersectionality first emerged from feminist and critical race scholarship that problematized the singular and unidimensional categories that were often used to explain the experiences of African-American women who encountered the American legal system (Crenshaw, 1993). Intersectionality theory states that the existence of categories of oppression (such as race, class,

gender, sexuality, and ability) and experiences of social domination cannot be separated from each other (Crenshaw, 1993; Mullaly, 2010). As such, an intersectionality framework moves the critical analysis beyond dyads of social location to include multiple intersections of race, class, religion, ethnicity, language, and citizenship. Using an intersectionality framework in the context of this study thus revealed how retirement, immigration, and domestic work policies work in tandem in shaping the gendered late-life experiences of older domestic workers from the Philippines.

Consistent with an ethnographic methodology, this study examined the shared patterns of behaviour, beliefs, and languages of an entire cultural group through extended observations and interviews (Creswell, 2013; O'Reilly, 2009). The larger study involved in-depth interviews with more than 30 older adults, adult children, and community stakeholders who spoke about the intersections of aging, caring labour, and immigration/migration in Montreal, Quebec. Recruitment took place through snowball sampling, as well as posted advertisements in two local newspapers in Montreal. Interview questions, participant observations, and policy documents were part of focused inquiries into the aging, immigration, labour, and caring experiences of older adults. This article reports the findings of a subset of domestic workers who participated in the larger study on Filipino aging.

The findings concern six women, all of whom who were born in the Philippines and had engaged in domestic work abroad before immigrating to Canada in the 1980s. Like all domestic caregivers under the FDM and LCP, the study's participants came alone during the obligatory live-in period, and were consequently separated from their families before applying for and receiving their permanent residency (and subsequent Canadian citizenship). Upon receiving their permanent resident status, most domestic workers were reunited with their families through the Family Sponsorship program³⁷. At the time of interview, two participants were under the age of 65 and were preparing for retirement. The remaining four respondents were officially retired and were receiving basic provincial and federal pension entitlements for a number of years. Note that

³⁷ It is important to note that earlier configurations of Family Sponsorship took significantly less time to process and accept (Ives, Sussman, & Denov, 2015).

although all participants came to Canada as domestic workers, some eventually transitioned to other forms of work in the secondary labour market as industrial factory workers or part-time housecleaners. All participants would nonetheless continue to engage in part-time domestic work either formally or informally at one point in their later lives. Participant ages ranged from 63 to 73; three participants were widowed, two were married and continued to live with their spouses, and one remained unattached. Table 8 provides an overview of participants' caring labour, employment, and pension entitlements.

Table 8 Caring labour contributions of participants

Participant	Caring Labour	Informal/Unreported work	Pension
Charito	Instrumental and financial care to children, grandchildren	—	OAS GIS
Laarni	Financial contribution to the Philippines	Domestic worker	Employment Insurance
Maryvic	Financial, instrumental care to children and grandchildren; financial support to the Philippines	Babysitting	OAS GIS
Nenita	Instrumental support to children, grandchildren, husband	Domestic worker	OAS GIS
Pearl	Instrumental care to children and grandchildren, husband; financial support to the Philippines	Domestic work	Employment Insurance
Rizza	Financial, instrumental care to children and Grandchildren	Companion at nursing home	OAS GIS

7.3 Data Analysis

In-depth qualitative interviews, which lasted from 90 to 120 minutes, were audio-recorded and subsequently transcribed. To ensure confidentiality and anonymity, participants were given pseudonyms, and signed informed consent forms to ensure their voluntary participation. During the interview phase, participants were asked to describe their experiences

of aging, and the challenges they encountered as they approached or transitioned into their later lives. They were also asked to talk about their retirement provisions, and the extent to which these entitlements were sufficient in meeting their day-to-day needs. The majority of interviews were conducted in English given the proficiency of most to communicate in English and Tagalog. For two interviews, an interpreter was present to translate interview questions when participants expressed an ease and preference in speaking Tagalog.

Data analysis began with a process of open coding, wherein the researcher read the interview transcripts and made categories of meaningful phrases, events, and concepts. This iterative analytical process is consistent with qualitative and ethnographic research approaches that engage in extensive and exhaustive coding of transcripts for analytical purposes (Creswell, 2013; Denzin & Lincoln, 2011). Interview transcripts were read a second time to develop substantive themes on retirement, caring labour, and aging. The research was conducted in accordance with standards set forth by the Tri-Council Policy Statement for Ethical Conduct for Research Involving Humans, and approved by the Research Ethics Board Office of the author's university. To ensure the validity and authenticity of the research findings, immigration/migration scholars and practitioners were solicited to check the trustworthiness of the data and research findings.

7.4 Findings

The following section reports on the findings of interviews with six retiring and retired Filipina domestic workers in Canada. The findings for this study underscore the difficult terrain that domestic workers must navigate through as they approach retirement aging. Older domestic workers spoke about the interplay of poverty as they transitioned into retirement, the necessity but insufficiency of retirement provisions, the need to find work in the unreported labour market, and the caring labour exchanges that occur within the intergenerational family unit.

7.4.1 Entering New Frontiers with Familiar Challenges: Experiences of Poverty, Insecurity, and Discrimination in Later Life

Consistent with research on immigrant women in later life, all domestic work respondents discussed the difficulties of living in poverty throughout their life course. Their narratives especially highlighted how the cumulative impact of caring labour under domestic work was pronounced as they transitioned into retirement. Although all six respondents came to Canada as domestic workers, some had transitioned to other parts of the secondary labour market (e.g., industrial sector, part-time cleaning work) or in the informal and underground economy³⁸ before entering retirement. Participants referred to the latter as “under the table work”, where they would receive unreported income in exchange for domestic work services such as cleaning, cooking, and caregiving. For reasons that will be discussed later in this article, the informal and underground economy represented an important opportunity to earn additional funds to support themselves and their families.

When asked whether they considered their lives following retirement, all participants expressed their desire to work despite receiving pension entitlements at the age of 65. Retirement, in this regard, was framed as a means to alleviate financial burdens incurred throughout the life course. The transition into later life demonstrated the difficulties and impact of work in the secondary labour market in general, and domestic work in particular. At the age of 63, Laarni provided a glimpse of the anticipation that some participants had towards retirement, and the types of entitlements they would receive. Laarni came to Canada in the 1980s under the FDM and where, after receiving her permanent resident status, she transitioned to manual labour in a garment factory. At the time of her interview, Laarni had been recently laid off and had begun to receive employment insurance (EI). As a single woman in her early 60s, Laarni discussed the hardships of making ends meet, and being forced to work multiple part-time jobs in the underground economy to cover her daily costs of living.

³⁸ The term informal and underground economy is regarded as the production, distribution, and consumption of goods and services that have value but are not recognized or protected by law, or traced by state regulatory agencies (Reimer, 2006).

Laarni: It's becoming hard, the life here. And I'm 63. [At] 65 I'm planning to, if I'm still healthy, move. ... I want to get my pension here first. ... I've been here for a very long time and I think I [will] have a hard time to adjust when I go to the other place [and] if I don't have enough money. ... Especially, I am alone, and I pay the rent. ... I'm scared. I don't have enough job[s]. I am only working three hours. I get ... \$567 CAD in one month and do you think 567 is enough? And then now I'm becoming old. ... How can I live?

Laarni's story is reflective of existing research that showcases the difficulties of living in poverty in late life, especially for women who are single (Young, 2011). At the age of 63, Laarni found herself in financial insecurity, where her wages were not enough to sustain her late-life activities. Not yet eligible to receive basic entitlements, Laarni was reliant on part-time under-the-table work to supplement her employment insurance. Her reality sheds light into the ways in which poverty and work in the secondary labour market have forced her into a precarious situation, whereby she was entering her later life struggling to meet her basic necessities for care, food, and shelter.

Pearl's story provides further nuance in understanding how experiences of poverty earlier in the life course can be problematic later in life, particularly when sudden and unexpected events disrupt already precarious living situations. At the age of 64, Pearl worked full-time in a food-processing factory, and supplemented her salary with part-time domestic work for three different employers. Just weeks before her interview, Pearl experienced a roadside accident that required significant rehabilitation and an extended leave from all her work responsibilities. The event was particularly devastating given the financial obligations that Pearl had to her adult children and grandchildren. Pearl was asked how this injury impacted her short- and long-term plans:

Pearl: Very difficult; especially the pain. I don't want that to happen again (*laughs*). The pain is too much.

Interviewer: Do you feel optimistic that you're going to be back to the way you were before?

Pearl: I will, but not stronger [like] before. ... Before I never think that I'm old, but now I feel like I'm REALLY old. Before, I can do anything. Even the hardest work, I can do. ... I never complained ... The work before in [the factory] I work[ed] with men. And they said I work like a man. My supervisor likes me because I do EVERYTHING. I finish the work on time. Now, I don't know.

Both Laarni and Pearl's realities showcase the precarity and insecurity they encountered as they approached their later lives. Rather than frame retirement as an opportunity to leave the workforce, both expected to continue to work after reaching the age of 65. However, both Laarni and Pearl were met with realities that stressed the cumulative impact of engaging in domestic work for most of their adult life. The inability to engage in upward mobility, and the financial and caregiving support given to their families meant that they expected to continue their work after retirement.

Laarni and Pearl's transition into later life also highlights the ways in which domestic work can be experienced as older women reach retirement age. Pearl described herself as someone who was able to do "anything" or to "work like a man"; expressing pride in her durability and diligence while working in the secondary labour market. The accident, however, forced Pearl to recognize her body's limitations, and consider how this new reality would impact her later life. A legitimate question that has yet to be explored within existing gerontological literature is how domestic workers retire from the workplace. Within the context of caring labour, not only is this work highly gendered, but also assumed to be age-appropriate for younger people. The aging process, which can slow one's physical capacities, raises questions as to how employers perceive and ultimately handle domestic workers who are close to retirement.

Charito's retelling of the circumstances leading to her retirement offered a powerful glimpse into this dynamic. After immigrating to Canada under the FDM, Charito remained with her employer for close to 30 years where she was mostly responsible for childcare. As her employer's children grew older, Charito was given more household responsibilities such as cooking and cleaning. Though the work was physically challenging given the size of the home, Charito was confident that she was performing to her employer's satisfaction. Her employers

ultimately disagreed, and chose to dismiss Charito at the age of 64. The firing was particularly difficult given the emotional bonds developed over the years. This bond was so strong that Charito brokered a deal that would allow her daughter to serve as her replacement after retirement. Charito's decision to leave the workforce, however, was ultimately stripped away when she was unceremoniously fired.

Charito: It was hard for me. ... My employer does not want me to work [for] them because they find out that I'm getting old (*chuckles*). They said that. ... I did not expect that they were gonna (*long pause*) want me to stop working because I did not feel I'm tired ... When they come [back from a vacation], they said, "Charito you have to stop working. You can tell [your daughter] to start now" ... because that is our agreement: If I go, I give my work to my daughter. ... I did not argue about that because if they don't WANT, what can I do? ... They think I need to rest now. (*chuckles*) I don't know what they see. *Sakit ako* (I was hurt) ... *Parang depressed ako* (It was like I was depressed).

Charito's dismissal highlighted how perceptions of domestic work can shift as caregivers age, and how relationships between aging domestic workers and employers become ruptured when the former fails to meet the standards of what and how a domestic worker is expected to perform. In Charito's case, these standards seem to have been predicated on discriminatory assumptions of domestic caregivers being young and durable; traits which may run counter to caregivers who are visibly aging and approaching their retirement. Though she had developed a bond with her employers, to the point of feeling like a member of their family, Charito's dismissal left her scrambling to find financial support. Charito's situation shed light on the problematic nature of caring labour becoming essentially commodified when domestic caregivers are treated and ultimately deemed as expendable bodies in later life. This treatment can occur despite the relationships formed between caregivers and those they care for. As Charito's case illustrates, employers hold significant control over the parameters of their employee's working conditions and compensation even as domestic workers age.

7.4.2 (In)Adequacy of Retirement and Pension Entitlement

The aforementioned cases draw attention to the precarity that many participants faced as they approached retirement. As such, participants unanimously perceived their pensions as an important entitlement that would alleviate the burdens of their financial insecurity. It is important to note, however, that while respondents acknowledged the necessity of receiving their OAS/GIS, they also expressed and experienced ambivalence over the amount they received. Part of the difficulty can be attributed to the time of arrival into Canada because most respondents entered under the FDM during their 30s to 40s and were therefore not eligible to receive maximum entitlements, which requires 40 years of residence in Canada. The implications of being unable to meet the maximum eligibility requirement has been shown to have a profound impact on immigrant women in Canada, who continually live under the poverty line (Marier & Skinner, 2008). Other considerations are the ways in which domestic workers are unable to engage in upward mobility; instead, they experience lateral movements within the secondary labour market. These dynamics intersect and create situations in later life wherein older adults receive partial entitlements.

It is worth stressing that although participants expressed gratitude in receiving their monthly provisions, they were quick to note its inadequacy in sustaining their basic necessities. Maryvic's (age 70) and Rizza's (age 73) assessments of the OAS/GIS illustrated the importance but inadequacy of basic Canadian pensions. Like other participants of this study, both Maryvic and Rizza continued to participate in the underground economy by earning unreported wages as a means to supplement their pensions. Although they acknowledged the importance of receiving their monthly entitlements, they also described how these provisions were allocated to the intergenerational family where they contributed to, as well as relied on, the financial and care support of their adult children:

Maryvic: It is important for me. How will I live without my pension? Oh my God, I would not like to depend on my children to give me some allowance so I will live. I will worry so much. ... Some seniors that I know of [are] really well off ... They can travel back home; they do not depend on their children, and the children do not depend on them. Oh I envy them. ... I know several seniors like me, who have to care of the

grandkids because the children asked them to. And the mom or the seniors are so obligated because that is our tradition; to fulfil the needs of our children.

Rizza: [People] living with the children can save money, but the seniors who's living alone, they can save also but not really much. Like me: I don't have money. It's just enough. I'm just living with my pension. ... But the money is on and off. I don't ask money from the children unless I'm really needy. That's why I'm working. Like yesterday, I worked four hours. I do the cooking, [and] I have 50 bucks. [I receive the] Quebec and federal. ...I have no complaint[s] but still I have to work. I like to work.

Although basic state pensions provide some financial flexibility, they are seldom enough to extricate retired participants from caring labour responsibilities, whether in the informal and underground economy, or from the intergenerational family. Maryvic and Rizza's assessments showed how the inadequacy of existing basic pensions produced two unique realities for the participants of this study. The first is characterized by prolonged engagement with the informal and underground labour market (referred to as "under the table work" by participants). This unique reality underscores the changing nature of domestic work in later life, which for some, meant continuing the same type of caring labour provided earlier in the life course. For others, this new reality meant a modified version of caring labour that shifted according to domestic worker and employer needs and capacities. It is important to stress that these realities exist because of earlier events in the life course, wherein the de-skilling nature of domestic work, time of immigration (which prevent domestic workers from receiving maximum pension entitlements), and living in poverty represent cumulative disadvantages that compel retired domestic workers to pursue work in the underground economy. The decision to continue to work in later life garnered significant risks and rewards for the study participants. The second reality that respondents faced was the reliance on the intergenerational family as a way to receive reciprocal forms of support.

7.4.2.1 Dual Realities of Informal Work and Intergenerational Support

The underground economy offers both risk and rewards to care work. Although both contributory and universal pension programs are offered by the state to “enhance the quality of life of Canadian seniors by providing a modest base upon which to build additional income for retirement” (Employment and Social Development Canada, 2015), the lived experiences of the six respondents highlight how retirement does not necessarily mean the end of work. For participants of this study, opportunities came in the form of untaxed labour in the informal and underground economy. At the age of 66, Nenita continued to care for her aging employer, from whom she garnered fixed but untaxed compensation (\$15 CAD per hour) in exchange for the provision of caring labour. This income allowed Nenita to pay her bills and, more importantly, to continue to provide financial support to her children and grandchildren:

Nenita: I’m getting good pay: \$15 CAD an hour. And besides that, I just want to pay off my bills. ... I cannot retire just like that because I’m paying off my bills and my two sons still depend on me. If it’s me and my husband alone ... [my pension] is more than enough. We’re getting our pension, it’s only \$1,000 CAD each. That’s not really enough with the expenses I have. Too much.

Compared with Charito’s situation, where she was unceremoniously fired for not maintaining a standard of work, Nenita’s example highlighted that older domestic workers could also form bonds with their employers that go beyond the typical caregiver/client relationship (Bourgeault et al., 2010). In these types of situations, caregivers evolved into companions to their older clients (Bourgeault et al., 2010; Chowdhury & Gutman, 2012). For respondents like Nenita, the changing nature of domestic work in later life meant having a similar workload, but with better pay (since the work would be untaxed). This allowed Nenita to continue to support her family, and manage her ongoing expenses, which she characterized as “too much”.

Existing relationships wherein domestic workers become ostensible family members can also facilitate transitions into under-the-table work once they retire. In the following excerpt, Pearl discussed how despite having four part-time jobs ranging from cleaning to companionship work, her employers were jockeying to retain her services when she would formally retire. These

choices would offer Pearl a degree of agency in choosing the types of work and number of hours she provided when she entered the under-the-table labour market.

Pearl: I have a part time cleaning [job]. Just cleaning. And [another] one of my part time jobs is [for] a single guy and I do his laundry and cleaning. ... And the other part time is a family with one daughter. ... I work with them for almost 28 years. They don't want to change me even though I said "I'm already tired, and I will give [a] replacement". They said, "No, no, no! You come to us" (*laughs*) ... If I have a chance, I [would] only have one part-time [with] the old lady who's 80-something. She loves me very much. I go to her house [where I'm] supposed to clean, but [I] just to talk to her. She's paying me. ... She follows me everywhere I go, and we talk. ... They know that I'm retiring. And they said don't go back to work when I retire, and I will just work with the [older lady]. Just the companion. So I will not work hard.

Pearl's assessment reflected how, despite being unable to fully withdraw from the labour force after retirement, she received opportunities for part-time work with seemingly better working conditions (by way of reduced work load, and less physically demanding types of work) and better pay. For Maryvic, the informal and underground labour market offered flexibility in the types of work performed, as well as number of hours exerted. Although Maryvic retired at the age of 67, she expressed a desire to continue to work but under different circumstances from when she first started as a domestic caregiver. In particular, Maryvic was actively looking for work that required minimal physical output:

Maryvic: If there is work that's coming, I will work. Part time and under the table. ... I would only take like baby-sitting. I will not be able to do housekeeping anymore. I detest that already (*laughs*) because I've been doing that all my life. ... If I have enough money I will not want to work anymore now! Like I want to go ... to Italy with my sister. I cannot because I don't ... have the pocket money. Like if I go, and after I come back I have nothing anymore.

This reality reflects the changing nature of domestic work in later life, where some participants were able to leverage pre-existing relationships with employers into modified work schedules and tasks. It is worth noting that as domestic workers age in Canada, they experience lateral movement within the secondary and underground labour market rather than have the opportunity to lead a life of leisure at the end of their life course. Although the risks of injury or the exacerbation of existing health ailments represent significant concerns, participants discussed how their sacrifices would be compensated not only by changed or reduced work schedules, and better pay, but also by potential rewards and inheritances once their employers pass away. The notion of inheritance was raised by five participants (Laarni, Maryvic, Nenita, Pearl, and Rizza), with some providing brief acknowledgement of how extended caregiving roles during retirement might generate additional incomes. Although not all participants disclosed having these expectations met, two participants in particular (Pearl and Nenita) explicitly discussed the payoffs of staying with their aging employers:

Interviewer: Do you plan to work even though you're going to [retire at] 65?

Pearl: Yes, yes. But under the table (*laughs*) so that I have [an] out. The old lady needs me. She loves me. She loves me.

Interviewer: *Meron po ba kayo na inaasahan na mana na matatanggap?* (Are you waiting for an inheritance?)

Pearl: Yes! That's for sure. ... She's very nice. She's always giving me anything.

Nenita: Like this employer that I have before this one. ... I [was supposed to] be a reliever for only 2 weeks but he liked my performance. He kept me ... [and] from my regular job I go there at night, from 5:30 to 8 o'clock, I prepare[d] his meal. During the weekend, I do his laundry and everything. Do you know when he passed away, he gave me \$50,000 CAD and a Mercedes Benz?! ... It depends on how you perform. I treat them like a family. ... I worked for him when he was 80. When he passed away he was 95. What I do, I noticed that [during] his birthdays, nobody calls. No family, no nothing. So I decided to give him a party on his 90th birthday. It was a surprise for him; I called, I organized, I called his nephew, and then all of them came together. ... And then after that, they call[ed] him during his birthdays. Invite him out. So I became close to his

relatives too. ... And treat them like a family member. ... When I work for someone, I give them 100% of my services.

Nenita's relationship with her deceased employer showed the extent to which participants in this study were rewarded if they were perceived and accepted as extended members of the family. This supports existing understandings of how reproductive labour can blur lines between professional and personal boundaries (Parreñas, 2001; Pratt, 2004; Pratt & PWC BC., 2012). These types of dynamics are not surprising given that the need for caring labour is more pronounced for older employers, for whom issues related to physical decline and disability are likely to emerge in later life. Commonly held expectations of reward and remuneration once employers pass away are understood yet seldom discussed among caregivers.

Continued engagement in under-the-table domestic work can also be problematic given how the physical demands of the job can run counter to the aging process. Considering the already vigorous nature of domestic work, it is worth noting the complications and issues that arise when caring for an aging employer when caregivers themselves are encountering degrees of physical decline. In the following excerpt, Nenita spoke about the challenges of working for her current employer, who required more strenuous physical support because of emerging health issues. By actively engaging in arduous domestic work, Nenita was sacrificing her body at the age of 66 to support her adult children and grandchildren who rely on her financial contributions:

Nenita: I work full-time 49 hours a week. ... But after 12 o'clock, my back is already sore. I have to take Tylenol at least. ... Four years I've been working [under the table]. Before it's not that bad because [my employer] was still mobile but everything I do for her now. At my age, I can't believe I can still do it because she's heavy. ... We were in the hospital in March. Two doctors already told us to bring her home, and get a private nurse because she's not going to last. But I thank the Lord she's still alive. I said, "Please extend her life so I will be able to pay my bills".

7.4.3 Continued Sacrifices: Intergenerational and Reciprocal Forms of Care

The decision to participate in the informal and underground economy was closely tied to intergenerational caring exchanges between adult children and grandchildren. Although domestic workers were able to earn wages through their combined pensions and undocumented work, they still relied on the support and care of their intergenerational families and fictive kin networks for daily necessities. Charito, Maryvic, Nenita, Pearl, and Rizza were living with their adult children, or in close proximity so that they could alleviate the costs associated with rent/mortgage, food, medicine, and shelter. This move was also beneficial for adult children who depended on their retired mothers for their financial contributions, or their availability to provide childcare. The latter arrangement extricated adult children from social reproductive duties so that they could pursue work in the secondary labour market. Consider the case of Charito who, after being fired by her employers, immediately took on a babysitter role so that her son and daughter-in-law would no longer pay for public daycare services. Living with her adult children provided Charito with free board and lodging, as well as shared living costs with her adult children (such as heating, food, and transportation). Such arrangements have allowed Charito to focus on paying for her extensive medical bills, and other monthly costs which include contributions to the care of her grandchildren, as well as occasional remittances to the Philippines. In this arrangement, Charito benefited from being a peripheral contributor wherein her main contribution was focused on caregiving.

Charito: I feed and bathe [my grandchildren]. We go to the park and the backyard. I bring them in daycare every morning at 9 o'clock. ... My daughter is here. The family of daughter is downstairs, and the family of my son is here together with me. ... I cook (*chuckles*) their food. ... And clean the house. ... It's fun for me. I'm happy to take care. ... What do you want me to tell you? Maybe it's our culture; [we're] bound together. ... [The pensions are] not enough [but] with the help of my kids, I survive. ... I keep my money but I pay the mortgage sometimes, and pay also whatever they tell me.

A particularly important finding is the ways in which caring labour, whether it is provided in the informal and underground economy to employers or to the intergenerational

family, is round the clock. In addition to providing financial assistance to her sons, Nenita spoke about providing instrumental support in the home for her husband, her children, and her grandchildren. Though Nenita's retired husband assumed most of the household chores including babysitting for their young granddaughter during the week, Nenita still found herself cooking and cleaning during the weekend:

Nenita: [I take care of] the entire family! Usually it's for the bills; paying bills of my children. Like [for my son], I pay his credit card, his phone bill ... his car maintenance. ... I don't want really want, but I don't want them to have a bad record. [My husband] does all the work here [at home]. He does the cooking. I just come home and eat. ... The medications – I prepare everything for him. I do everything for him. Everything! ... He seldom goes out to buy for himself. ... During the weekend, he won't work in the kitchen. It's my duty, no matter how I feel. ... We have 5 [grandchildren], and I give them allowance once in a while. Whatever they need, I give them money to buy it.

The excerpt above is emblematic of the lengths that some participants would go through in order to provide care for the intergenerational family, and in particular, grandchildren. By describing her care as an obligation or a “duty”, Nenita saw herself as playing a key role in the survival of the family unit; ensuring that her son's financial debts were paid, and that her husband's medications and household necessities cared for (including household work during the weekends). Maryvic described a similar arrangement where she disclosed a sense of responsibility in guiding the next generation. In the following excerpt, she described her role as primary caregiver to her granddaughter while her daughter worked extended hours as a domestic caregiver. The family, according to Maryvic, is the sole provider and reliable source of mutual support.

Maryvic: We always come together. ... In fact, last Saturday we were all together because my son – his income is not very, very good. So when he got a little money, he said to himself that he will treat us all. ... We try to be together as much as possible. ... I said to all my grandchildren, “when we are together, even at the car; it might be an hour

ride on the car, or even we are all together I do not want you to be looking here (*points to a mobile phone*). ... Because I want to have a conversation with you”. It’s very hard, it’s very hard. ... Whose fault is that? Probably us the parents because we don’t correct them.

Interviewer: So why is it important for you as the *Lola* (grandmother) to ... maintain that closeness?

Maryvic: Because you cannot rely on your friends for your problems. You cannot rely solely on your friends for whatever problems you have. It’s the family that binds together – that can give you that support. ... You may not be in the same opinion, you can argue, but please respect each other. I want you to have that in your relationship.

Participants’ reliance on their intergenerational families highlighted the extent to which earlier life course events, such as cumulative disadvantages, had an impact in later life. The cycles of poverty were particularly noted in how domestic workers, who worked full-time hours, were unable to engage in upward mobility. As such, they relied on configurations that extended past the nuclear family and relied instead on their adult children in exchange for caregiving services.

7.5 Discussion and conclusion

This study brings attention to several important concerns shared among aging domestic workers. Participants spoke about the inadequacy of their pensions resulting in continued and unreported engagement with caregiving and domestic work. Caring labour was also provided to the family unit, where retired domestic workers relied on, as well as contribute to the financial and care exchanges between intergenerational family members.

The concerns and realities raised by participants of this study must be understood within the broader context of immigration/migration, labour history, and aging in Canada. Structural forces that connect immigration policy to labour conditions reveal the gendered and racialized nature of caring and domestic work among immigrant older Filipina women. The discussion that follows examines the intersection of aging and domestic work through the lenses of retirement and intergenerational care.

7.5.1 Unravelling the Intersections between Domestic Work and Retirement

Although immigration and income security programs have different objectives, they have profound impacts on each other. The intersections between these two policies have significant implications for immigrant women generally, and retired domestic workers specifically, given their participation in the secondary labour force, and their reliance on government transfers upon retirement. As such, encounters of poverty are highly prevalent among older immigrant women in Canada (Chui, 2011; Marier & Skinner, 2008; Young, 2011). Here, the cases of Laarni and Pearl demonstrate how living in poverty propelled nearly all domestic workers to frame retirement as an opportunity to continue work rather than stop. I would argue that domestic workers in this study did not *prepare* for retirement in the traditional sense (signified by the end of work); instead, they used the opportunity to leverage their financial situations so that they could continue to work and support their families.

Participants in this study spoke at length about the inadequacy of retirement provisions (OAS and GIS) that led to decisions to delay withdrawing from the labour market in order to make ends meet. This reality created conditions whereby older domestic workers needed to continue to engage in caring labour and domestic work in the informal and underground labour market in order to sustain late-life necessities and activities. Such experiences represent an important finding about the changing nature of domestic work in later life. Yet, domestic workers highlighted their ambivalence regarding their retirement provisions. On the one hand, respondents were grateful for receiving the OAS/GIS for the financial flexibility in choosing the types of work and working conditions to supplement their pension income. However, all participants also derided the (in)adequacy of their pensions because they were not enough to satisfy their basic late-life needs.

Working in the informal and underground economy in later life brings forth important considerations for social gerontological research. The first consideration is how the gendered division of care continues to be pronounced in later life. Although these types of care exchanges have already been documented by existing gerontological and caregiving research (Neysmith et al., 2012; Young, 2011), the continued engagement in caring labour within the informal and

underground labour market has received little attention. Existing research has suggested that in order to address some of these late-life inequalities, measures must be taken to improve existing public pension schemes, such as the OAS and GIS, on which older women are most reliant (Marier & Skinner, 2008; Young, 2011). Better compensation would ultimately alleviate the burdens of care that retired domestic workers experience in late life, and it could offer better choices for those who are obligated to work in the informal and underground economy to ensure their survival. In this context, retired domestic workers in this study continued to sacrifice their bodies in order to address the inadequacy and insufficiency in pension entitlements. These realities present interesting reflections on the relationships between caregiver and employer/care recipients. Unreported domestic work in late life provided both risks and rewards for participants. The mounting challenges of meeting the physical demands of caring work took a significant toll on some participants. Though some domestic workers ultimately gave up the type of domestic work that demanded physical rigour, the majority still discussed companionship or cleaning work that was taxing to the body.

Another important consideration is the changing dynamics between employer and domestic worker as they both approach later life. Based on the interviews conducted for this study, it would seem that older employers value the continuity and ongoing trust within these caring relationships. Participants themselves emphasized the level of trust and confidence that employers had for their workers. From a domestic worker perspective, most respondents discussed the possibility of receiving an inheritance as a significant reward for their continued caring labour and domestic service in later life. Although one would suspect that employers also benefit from these unreported arrangements, which circumvent the payment of provincial or federal taxes, further research is needed to examine the perspectives of care recipients who continue to employ retired domestic workers. These findings, however, provide an important starting point in considering the complexities and nuances of domestic work in later life, shedding light on the evolving relationship between employer and domestic worker as one enters retirement.

7.5.2 Continued Engagements of Domestic Work and Intergenerational Care in Later Life

One interesting finding is the dynamics within the intergenerational family unit, where most respondents took on caregiving roles to their grandchildren in order to extricate their adult children from childcare responsibilities. The constant caring labour provided by participants is emblematic of the gendered nature of caring labour throughout the life course; especially for women from the Global South. Such engagements are notable when considering how the trajectory of caring provision begins early in the life course when domestic workers migrate from the Philippines in order to provide transient domestic care for employers in different parts of the world while sending financial remittances to their families in the homeland (Pratt & PWC BC., 2012). Upon arrival, domestic workers engage in live-in domestic work before receiving their permanent residency while enduring extended periods of separation before they are reunified through sponsorship programs (Pratt & PWC BC., 2012). Once reunified, domestic workers find that their children encounter difficulties in integrating themselves into Canadian educational institutions (Pratt, 2004). The racialization of poverty, commonly understood as the process by which poverty is concentrated and reproduced intergenerationally among racialized groups (Galabuzi, 2006), is key in unravelling how and why retired domestic workers continue to engage in the underground economy to ensure the survival of the intergenerational/transnational family. When we consider how domestic workers also liberate Canadian middle class and affluent families earlier in their life course, it becomes clear that they play an important yet unrecognized role in providing care for families across racial and class lines. Thus, any analysis of why retired domestic workers partake in prolonged physical labour later in life must be examined through an intersectional lens that accounts for race, class, gender, immigration/migration, citizenship, labour histories, and intergenerational care dynamics.

From an intersectional perspective, this study highlights at macro and micro levels the ways in which immigration programs (particularly through domestic work policies) organize lived experiences not only early in the life course, but also most dramatically in later life. Retirement policies are predicated on past participation in the labour market and produces forms of exclusion and marginalization for domestic workers from the Global South who are unable to

receive maximum entitlements. The intersection of immigration and retirement policies serves to organize and structure the later life experiences of respondents who did not necessarily see retirement as the end of work, but as an opportunity to extend and choose their domestic work. Although participants described some agency in the types of work they would take on, most understood that extended work past retirement was necessary to meet their own care needs as well as those of their intergenerational families. Whereas retirement pensions focus on the needs of the retiring or retired individual, this study highlights how these domestic worker participants make decisions about work and retirement based on the needs of the intergenerational family.

The exploration of these realities comes at a crucial time, especially considering emerging debates on raising the age of eligibility for basic Canadian pension schemes. In a 2012 budget speech, then Minister of Finance James Flaherty announced the gradual increase in age eligibility from 65 to 67 starting in the year 2023 (and fully implemented by 2029). Former minister Flaherty described the changes as necessary to accommodate the aging Canadian demographic (Flaherty, 2012). This austerity-driven policy change was justified by fears of an emerging aging demographic wreaking havoc on an under-resourced government transfer scheme. By increasing the age of eligibility, the federal government was then presenting a narrow assessment of retirement and labour in later life, rendering invisible the complexities and nuances that exist for older women who provide care and other labour contributions within and outside the private sphere. Moreover, this type of policy change exacerbates already precarious living and working conditions for retired domestic workers who rely on OAS and GIS to provide much-needed financial and labour flexibility in later life in order to provide for themselves, as well as their intergenerational family. Although the recent Canadian government has discussed restoring the age of retirement eligibility back to 65 (Liberal Party of Canada, 2015), debates centred on the impact of aging on federal/provincial budgets will no doubt result in continued discussions on the capacity of the state to fund pensions in the future. Such dynamics underscore the need for social gerontological research to interrogate the importance of part-time, informal care work that is provided in the underground economy, and the implications of having such labour provided by older immigrant women who are part of this labour force.

7.5.3 Considering the Shifts and Changes of Domestic Work in Later Life

Equally compelling are the ways in which changes to the OAS/GIS place aging domestic workers in a paradoxical binary of being *too old* and *too young*. In the former, aging domestic workers find themselves too old to engage in the types of labour that the secondary and peripheral labour market demands. As Charito's case demonstrated, perceptions of domestic caregiving labour are predominantly perceived to be young and durable. Thus, questions can legitimately be raised as to how aging domestic workers from the Global South are placed at risk for age discrimination, and for subsequent dismissals. At the same time, consideration must be given to older women who are *too young* to retire. Though basic pensions are largely perceived to be inadequate, they nonetheless provide older women with flexibility when choosing the number of hours worked and types of labour performed within the informal and underground economy. Such realities should propel researchers and policy makers to consider the gendered and racialized nature of poverty in later life – in particular, how members of these communities navigate through institutional barriers in order to ensure that their late-life needs are met.

7.6 Limitations and Future Directions

One limitation of this study is its exclusive focus on the experiences of Filipino domestic workers. Although they make up the majority of Live-in Caregiver Program (LCP) workers, other ethnic groups are represented within the domestic work population. Future research could potentially examine the experiences of women who came through past (WIDS, NIEAP) and recent (LCP) iterations of domestic work programs to compare how retired caregivers of different ethnic origins from the Global South experience their late lives. The findings of this study nonetheless provide an important starting point when examining how the intersections between existing retirement and domestic policies structure the lives of domestic workers from the Global South who retire and age in Canada.

Taken together, the findings of this study contribute to existing research on domestic workers in Canada by examining how caring labour is extended in later life through the formal and underground economy as well as through the intergenerational family. Although research has shown how caring labour is highly gendered and racialized, scholarship on how domestic

workers approach and transition into retirement remains sparse. Given the exploratory nature of the study discussed in this article, larger scale research is needed to expand our understanding of how retired domestic workers engage in strategies of survival in their later lives. Potential considerations might include the roles informal community networks have in helping older domestic workers navigate their aging process. For instance, existing research has highlighted the ways in which Filipina health care aides working in nursing homes in Winnipeg rely on social support networks for job opportunities and other forms of support (Novek, 2013). Engaging in this type of research would contribute to our understanding of the interplay and realities of caring labour, immigration/migration, and aging in Canada.

CHAPTER 8: FINDINGS 3

The following chapter has been published as follows:

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The Experiences of Reciprocity among Filipino Older Adults in Canada: Intergenerational, Transnational, and Community Considerations

Abstract

This article illustrates the concept of reciprocity in the context of immigrant families. It recommends that definition of reciprocity account for exchanges beyond the immediate family, and render visible the simultaneous location of older people as care recipients and providers, and care arrangements across generations, borders, community, and time. Adopting a critical ethnographic study on the aging and care experiences of older Filipinos in Canada, this article analyzes data from extended observations and in-depth semi-structured interviews with 18 older people, 6 adult children, and 13 community stakeholders. Findings highlight the unique configurations of care among the Filipino community whereby older people engage in care exchange as active participants across intergenerational, transnational, and fictive kin networks.

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8.1 Introduction

Scholarship on care has begun to consider the identities, realities, and lived experiences of immigrant older adults in later life. For example, the experiences of family care are now being documented, with recent attention to older people as active members of global families, who engage in caring exchanges across borders (Baldassar, 2007). Literature on transnational caregiving suggests that these exchanges occur despite immigration policy restrictions that regulate the length of stay in the adopted society (Ferrer, 2015), and include a demonstration of how older people care from a variety of spaces and across intermittent time periods (Treas, 2008). The increasingly complex dynamics of immigration, which interplay with other life events such as labor force participation and retirement, often propel older immigrants, particularly those that are racialized³⁹, to take on an active role in caring for the family both locally and transnationally (Baldassar, 2007; Treas, 2008).

Research has also begun to draw attention to the pervasive assumption of dependence with regard to caregiving patterns in immigrant communities (Dilworth-Anderson et al., 2002). Studies on reciprocity, for example, have emerged to challenge the notion of the dependent older immigrant who relies almost exclusively on immediate family (mostly adult children) for daily care that arises from ill health and lack of access due to language barriers (Brotman, 2003). Defined as the exchange of tangible and expected support, emotional affection, advice or information between individuals or groups (Antonucci & Jackson, 1989), the concept of reciprocity has been used to outline both the nature and types of benefits that are exchanged between generations. In his work on reciprocity, Nelson (2000) noted, “giving carries with it the obligation to reciprocate, [and] an obligation enforced by kin and community sanctions” (p. 14). The concept of reciprocity has created space to consider older people as receivers and providers of care across the life course, and more recently, to explore the nuances of reciprocal relationships that exist over time and space between older people and their children (Lavoie et

³⁹ Racialization refers to broad social processes (including colonialism and cultural privileging) in ascribing social meaning to the term ‘race’. This definition acknowledges how the meanings and effects of race shift across time and space, constructing racial difference, categorization, and exclusion that result in the oppression and marginalization of racialized people (Henry & Tator, 2009).

al., 2010; Neysmith et al., 2012). For instance, Sun (2014) introduced the concept of “reconfigured reciprocity” to critique the misappropriated and culturalist beliefs regarding “filial piety”⁴⁰ within caregiving dynamics and relationships. These types of cultural assumptions tend to focus on older people as passive recipients of care by adult children who feel obligated to “give back” to their parents as they age (Brotman & Ferrer, 2015; Lavoie et al., 2010; Neysmith et al., 2012). Immigration programs, and the consequent processes of migration, shape and structure the composition of the family unit, and the ensuing availability of family members to provide care. These structural processes must be taken into account when considering forms of care provision. In an attempt to understand the nuances of caring dynamics between older immigrants and their families, Sun (2014) noted that the concept of reconfigured reciprocity provided a means to describe how aging immigrants perceive, give, and ask for support. This notion of reconfigured reciprocity also accounts for the structural and transnational forces that shape and reshape lived experiences. We would argue that reconfigured reciprocity also includes family members and individuals who are commonly perceived as peripheral care receivers and providers. For instance, an emerging subset of literature focused on grandparenting is beginning to recognize older people as integral care providers within intergenerational families, and to highlight the important role that they play in reconfigured caring relationships (Stelle, Fruhauf, Orel, & Landry-Meyer, 2010). Similarly, Fruhauf, Jarrott, and Allen (2006) examined the perspectives of grandchildren who provided care for their aging grandparents. While Fruhauf et al. (2006) identified the filial obligations and rewards that grandchildren experienced, they also articulated the varying stressors and time constraints in caring for a grandparent.

While scholarly work on reciprocity has shifted our understandings to include older people as active family members who provide and receive care, the literature tends to primarily focus on relationships within the immediate family. Much of the work on reciprocity among immigrant communities in North America explores caring relationships at the local level, and excludes considerations of transnational or global realities. One exception is Treas’ (2008) study

⁴⁰ Notions and variations of ‘filial piety’ is defined as the Confucian expression of responsibility, respect, sacrifice and family harmony, are part of assumptions that adult children from immigrant communities are obliged to care for their older parent(s) (Lai, 2010; Yu et al. 2016).

on transnational aging and the caregiving contributions made by immigrant older adults. By examining the contributions of older adults, Treas (2008) noted how older men and women cross borders in the United States to care for their families despite overriding immigration policies that limit their length of stay in the adopted society. Yet, few studies have explored the coordination of care that exists across spaces to include negotiations and exchanges that occur in both the homeland and the adopted society.

We argue that the diversity of care experienced in immigrant families requires a reconsideration of the assumption of family-based care, and an elaboration of the definition of reciprocity. This article illustrates the complexity of reciprocity by recognizing how older people are simultaneously recipients and providers of care, not only in the context of relationships with adult children, but also including care exchanges across multiple generations, borders, communities, and time. The objective of our article is to provide an example of reciprocity that better situates the lived experiences of care among older people from immigrant communities in the discourses on caregiving. By doing so, we aim to provide policy-makers and practitioners with an inclusive model of reciprocity which can better inform service delivery initiatives with immigrant older adults. Gerontological social workers primarily focus on older people within their family and community contexts, and are thus best placed to encourage adapted service delivery models that address the realities of care among immigrant older adults. As such, social workers can make important contributions to efforts intended to redress invisibility and correct access barriers among older immigrants in their daily work.

In this article, we draw on data from an ethnographic study on the aging experiences of older Filipinos in Canada to highlight how care is lived by immigrant older people, their families, kin networks, and communities, across borders. According to the Government of Canada (2015a), over 700,000 Canadian residents can trace their ancestry back to the Philippines. Filipinos have become the second largest immigrant group in Canada in the last five years (Kelly, 2014). The focus of research on the Filipino-Canadian diaspora has been, for the most part, on their patterns of participation in the global economy through their labor migrations (McElhinny, Davidson, Catungal, Tungohan, & Coloma, 2012). Kelly (2014) noted the mix of Family Class, Federal Skilled Worker Program, and Live-in-Caregiver entrants in mostly

Canadian urban cities. He noted, however, that the majority of recent newcomers from the Philippines arrive under domestic worker policies (Kelly, 2014).

Despite the emergence of the Filipino population in Canadian cities, little is known about its aging cohort. Coloma and Pino (2016) noted that the number of older Filipinos in Canada doubled from 18,285 in 2001 to 38,274 in 2010. This number is expected to continue to grow, especially when taking into account the 53,950 Filipinos who are between the ages of 55 and 64 years (Coloma & Pino, 2016). Yet few studies have considered the physical and mental health status of older people, or the caring dynamics that exist within the Filipino community in Canada. In one rare example, Coloma and Pino (2016) examined the economic conditions of elder Filipinos in Toronto, and the economic insecurity they face. They noted that older Filipinos face pervasive poverty due to impacts of immigration, participation in the labor force, and meager retirement provisions. Our discussion of reciprocity is an attempt to address this knowledge gap by examining the reception and provision of care among older Filipinos, with specific attention to intergenerational and transnational family and fictive kin/communal networks. We argue that a definition of reciprocity that incorporates these simultaneous caring exchanges is better able to account for the lived experiences of care among older Filipinos specifically, and newcomer immigrant older adults more broadly.

8.2 Methodology

The findings reported in this article emerged from a critical ethnographic study of the lived experiences of aging and care among members of the Filipino diaspora in Montreal, Canada. A critical ethnography is a qualitative research approach that examines the political, social, and economic parameters that create and reinforce wider social structures and power relationships (Springwood & King, 2001). We adopted a critical ethnography to explore the intersections of aging, caring, immigration, and labor histories of members of the Filipino-Canadian diaspora (Springwood & King, 2001). Extended observations and in-depth semi-structured interviews with 18 older people, 6 adult children, and 13 community stakeholders allowed us to identify the social policies, services, and structural barriers that impinged on everyday lives. The sample of 18 older participants was comprised of 13 women and 5 men, ranging in age from 62 to 85.

Within this sample, 13 participants provided financial support to their transnational families, and engaged in caring exchanges with their intergenerational families. Time of immigration ranged between entering Canada in the early 1970s and late 1990s. The adult children participants included five women and one man, all of whom lived in an intergenerational household (i.e., with older parents and children). Of the 13 community stakeholder participants (aged 30–70), 2 provided advocacy services for the wider Filipino community and 8 offered Filipino-specific social support and services.

Recruitment was conducted using snowball sampling in community organizations and through posted advertisements in local newspapers in Montreal, Quebec⁴¹. The lead author is a member of the Filipino-Canadian community and has engaged in community practice, which facilitated the identification and recruitment of participants. Across the study, participants offered varying perspectives based on the length of time living in Canada, different types of living arrangements, family composition, immigration status, and participation in the labor force. Interviews with older people focused on eliciting stories and trajectories related to life in the Philippines, immigration, labor, family, community relationships, and aging. Interviews with adult children focused on perceptions of care provision and reception, and their knowledge of existing policies and entitlements. Interview data from stakeholders in non-profit, advocacy, and social organizations (many of whom were aging themselves) were then sought to ensure that the voices of service providers were taken into account. Interviews were audio-recorded and transcribed. Digital recordings and transcriptions were encrypted to ensure anonymity and confidentiality. The analysis presented in this article focuses on the accounts of intergenerational, transnational, and fictive kin caring exchanges to highlight the giving and receiving of care among older adults.

Our analysis used an iterative stepwise design, where we worked within and across narratives. We began our analysis with open coding of interview transcripts, which were then categorized along meaningful phrases, events, and concepts. First, we established codes and

⁴¹ The research was conducted in accordance with standards set forth by the Tri-Council Policy Statement for Ethical Conduct for Research Involving Humans, and approved by the McGill University Research Ethics Board (REB #198-1112).

themes based on the accounts of each of the persons interviewed. We then moved across interviews of each type, and developed links between the interviews with older people, children, and community stakeholder participants. Substantive themes on immigration, caring, and aging were then created and developed after interview transcripts were read a second time. Through this inductive process, we explored the concept of “caring reciprocity” as a set of reciprocal arrangements between intergenerational and transnational families, and fictive kin– community relationships. This examination of breadth and depth is consistent with an ethnographic approach that seeks to uncover rich detail about the social, historical, and cultural aspects of an identified community (Denzin & Lincoln, 2011). To ensure the authenticity and trustworthiness of themes, we undertook member checking where selected participants (10 in total) were asked to comment on the relevance of the identified themes in relation to their lived experiences of care.

8.3 Findings

Our findings illustrate how reciprocity operates within Filipino families in Canada, with a particular focus on reciprocal relationships within transnational, intergenerational, and fictive kin networks. We have chosen, through the presentation of participant stories, to place more emphasis on care exchanges in which older adults are revealed as active participants in the provision of care, since these examples are largely absent in the literature. Our definition of reciprocity reveals caring exchanges that cut across generations, borders, communities, and time through three key contexts: the intergenerational, transnational, and fictive/communal. These three contexts reveal how the extended forms of reciprocity that we suggest are lived and experienced in the everyday lives by immigrant older adults.

8.3.1 Caring across generations: Intergenerational care within the local family

Interviews with older people, adult children, and community stakeholders revealed that the immediate family continues to be a primary source of care for older people in the Filipino community. While family values remain strong, several participants noted how immigration has significantly altered the formation and organization of the Filipino family, and in particular, how

poverty has shaped caring relationships. One common strategy among intergenerational and local family members was the pooling of resources, which represents a key component of reciprocity. This was especially the case for participants who found themselves in financially precarious situations, and whose family members were living in close proximity. Participants spoke of how changes in family composition resulted in the overreliance on older people to take care of other family members (most notably, grandchildren) in order to facilitate the adult child's labor force participation. Where some participants discussed these arrangements as reinforcing family unity and reciprocity, others expressed dissatisfaction, claiming that such exchanges were unfair or overly taxing to older adults. Though the family was seen as a primary source of support, participants spoke about the challenges of care exchanges, which created situations whereby older people provided and received care within the intergenerational family, but were cut off from other important social networks. Some participants described the sense of isolation and loneliness that older members of the Filipino community faced from this type of caring arrangement. Ramon (a long-time community organizer), for example, noted that the demand for childcare is heavily placed on older Filipinos. However, in the absence of social support networks, Ramon argued that expectations for childcare are "unfair" to older Filipinos.

But you know, you are treating your parents as a robot. You invited them [through family sponsorship] to come here to babysit your kid, right? That is not fair to them. You cut their way of life. They were there in the Philippines going to *sabbo* (large group of friends); they were enjoying their *kumare compadre* (close friends) there. But then when they come here, where are they? (*Ramon, Filipino community organizer*)

In the following excerpt, Maryvic, a former domestic worker, discussed the trade-off of living with her children and grandchildren. Maryvic outlines how her job as a domestic worker meant that her pension was inadequate to meet her day-to-day needs, and resulted in the need to move in with her divorced daughter and teenage granddaughter. Maryvic described how this arrangement enabled them to help each other financially. However, her main contribution was caring for her grandchild since her daughter, (a domestic worker as well) worked extended hours

throughout the week. Such care exchanges represent a dynamic that was strained, but also considered mutually beneficial:

My daughter got divorced from her husband so I have to be with her so that at least my grandchild will have some company because I know [my daughter] is working in the evening. So it's my own [decision to] move with her. I would like to also have my own [home] if I can afford it, but with my pension, I don't know if I can afford it. ... While if I live with my child, if she can afford it, she will say "mom do not pay anymore the rental. I will do it". Sometimes I have, sometimes no I do not have. Like now, she says she can afford to pay the rental, and I will just pay the [electrical bills] so that's less expenses for me. (*Maryvic, 70-year-old, retired domestic worker*)

Intergenerational exchanges were also considered to strengthen relationships between grandchildren and their grandparents. The following excerpt by Pearl, a former factory worker, describes how she and her husband assumed much of the caring labor duties that would traditionally be held by her adult children, who were also working long hours in the secondary labor market:

[My grandchildren] love me! And I love them very much! ... They are here always. ... They want always to stay here. ... [It's] because we are bringing them out, and we go to the mall and everything, and we go eat. They love that, and I play with them. ... I teach them. I teach my [my granddaughter] how to read. ... My husband [does] everything. [My husband] is seeing them every day because after school he brings them [home] ... And besides, [my husband] wants to do it, because he wants [my son] to sleep because he is working at night, and he comes only in the morning. (*Pearl, 64-year-old, factory worker*)

Maryvic and Pearl's situations highlight both the importance and necessity of caring exchanges between members of the local intergenerational family. In both situations, Maryvic and Pearl provided childcare to their grandchildren, as well as financial contributions to their adult children whenever they could. In exchange, both lived with their adult children in intergenerational households, and were given financial assistance (e.g., having their adult

children pay for rent, and other monthly amenities). Maryvic and Pearl's situations show the complexities of reciprocal arrangements. On the one hand, families demonstrate agency in finding ways to support survival that match their capacities to both give and receive care. However, on the other hand, their lived experiences highlight how their choices are embedded within systemic and structural constraints.

Perspectives of adult children and grandchildren on experiences of reciprocity provide insights into the negotiations and renegotiations that take place within intergenerational households. In the following excerpt, Emma finds herself positioned between caring for her teenaged daughter and aging mother, who has a cognitive impairment. She describes how both she and her daughter negotiate in order to provide 24-hour daily care for her mother:

I have two different generations in my house - actually we're three different generations. I'm in the middle, and I have this new generation (*daughter*) who couldn't understand. ...So, I educated her. I sat her down one day, and I said, "This is the situation: ...the less [your grandmother] is agitated, the better she will be". ... So I'm at work, [my daughter] takes care of her. She makes sure that [my mother] eats because [my mother] doesn't really touch anything on the kitchen anymore... She cannot warm up food so my daughter ...would make her food, or warm it up for her. We have this system now, it's around the clock. I make her breakfast, and I once I go [to work], at lunch she would feed my mom. And for supertime, I'd be there because ...I would finish at 3:30, so 4 I'm there. So that's the process, and it works out. It worked out, actually. (*Emma, daughter, primary caregiver*)

Emma speaks to the caring arrangement that exists within the intergenerational household as a negotiation between herself and her daughter. Together, Emma and her daughter ensure that her mother's needs are met and that her safety is secured. This is an important example of reciprocity with care provided by the younger generation to aging members of the family. We now turn to the caring exchanges that occur past national borders, and with transnational family members.

8.3.2 Caring across borders: The importance of the transnational family

Participants spoke frequently about forms of reciprocity that transcended international borders, and included transnational family members. Financial remittances were perceived as the primary contribution made by older Filipinos to family members living in the Philippines. The combination of scarce financial resources, the facilitation of outward migration, and the availability and organization of the extended family unit in the Philippines, creates a context whereby older people who have immigrated to Canada, increasingly engage in transnational care exchanges. In our study, older people shared stories of travel to and from the Philippines, where they provided and received care from their transnational families. For example, Juan describes his experience of travelling to the Philippines:

If it won't affect my pension, I would rather spend my whole life there! (*laughs*) [I have] lots of relatives and friends. ... I'm sure [my children] will say, 'your pension will not sustain you for sure' because they know I'm not ...a spend thrift. I'm...a generous guy! (*laughs*). (*Juan, 76, sponsored by children*)

By describing himself as a “generous guy”, Juan alluded to the financial support that he provides to his family and friends in the Philippines. Similarly, Emma spoke about her mother's travels back and forth to the Philippines and of the financial support she provides to members of her transnational family. For Emma, having an older parent leave the country for an extended period of time results in new forms of care responsibilities, including coordination of travel arrangements (e.g. book travel, cover costs of insurance and health and social services, etc.), negotiation of care for her mother with transnational family members, and increased financial costs for care. In the following two excerpts, Emma first described how she coordinates care across borders, and then proceeds to discuss the increased financial obligations she encounters when her mother is abroad:

Recently, I spoke with my sister, [and we] have this kind of communication system that [with] every update we email everyone. ..It's more of a report. ...I would give my kind of ... say. "Okay, that's good. Keep up the good work" (*laughs*) [That] kind of thing, or "why is that? Is there an alternative?" or "how about this?", and then they would start to

consider ...whatever I would say. ...I just received an email recently and [my siblings] were confirming that, "oh yeah Emma is right. [Our mother's] like a child now", because for me to explain to them ...they were not understanding...

Actually, my mom... she turns "Filipino" over there. And she provides... as a mother. So her money, all her money, goes to the people. ...It's like Santa Claus. One-day millionaire. (*laughs*) *Bahala na bukas* (English translation: whatever will be, will be tomorrow) ...So when she runs out she calls. ...Actually, to sum it up: I'm probably spending more when she's there than when she's here because ...she would call, "ohhh, can you please send me [more money]" (*Emma, adult child, primary caregiver*)

The excerpt above demonstrates two types of transnational caring exchanges that Emma provides to her mother. The first concerns Emma's coordination of logistics and communications with transnational family members. The second involves the additional financial support and contributions that are made during trips back to the homeland. In this context, extended family members can be seen to support Emma's mother throughout her stay in the Philippines in exchange for the financial remittances she provides on a yearlong basis and throughout her trip. These dynamics showcase the multi-leveled reciprocal caring exchanges that exist intergenerationally, over time, and across transnational contexts.

Amongst our sample, older people spoke about the importance of maintaining financial and emotional ties to their families in the country of origin, even in cases where travel to the Philippines was not possible for financial or health reasons. Many participants described the financial remittances they sent to the Philippines in support of their immediate and extended family members throughout their life course post immigration. Jinky discussed how she has supported her family since she first came to Canada in the 1970s:

When I was only earning 125 [CAD] a week I was sending 100 CAD a month. I'm sending 100 or 150 CAD; when I came home [to the Philippines] it was a surprise; our house is new. My mother saved it. ...Every month I'm sending boxes...everything you know ...I send my mother money to buy gift for refrigerator, and TV, because we don't have TV then (*Jinky, 67, retired professional*).

It is important to note that remittances alter the income of older people aging in Canada. In particular, older people who send remittances may not accumulate individual savings. In addition, with limited pension entitlements, many older participants disclosed difficulties in providing transnational care and support. This was especially the case among older women who lived alone. In one situation, Flor described how financial remittances sent abroad were necessary but challenging. With her transnational family depending on her monthly contributions, Flor found herself living frugally and precariously. The following excerpt speaks to the tensions she experienced in providing transnational remittances:

More of my relatives [and] families are in the Philippines. And if they have problems there, they will call, and then that is the time [I] will have [my] depression. And I'm trying to send them even a little amount. That's my problem: I want to know what is their daily life there, and if they are eating three times a day. (*Flor, 81-year-old, sponsored by children*)

These stories of reciprocity reveal how care takes place over time and across intergenerational and transnational contexts. They demonstrate the ways in which older people and their families situate and respond to scarcity of resources both locally and transnationally to ensure that caring needs are met across generations and borders.

8.3.3 Extended reciprocity: Fictive kin as a form of local community care

Taking place alongside the reconstituted family, participants spoke about how care is extended to include informal—or fictive kin—networks within the Filipino community. Participants discussed how members of the community who were not related would become 'like family', providing support that was otherwise provided by extended family in the home country. We use the term 'fictive kin' to describe these important community relationships. The establishment and reliance on these types of local community networks develop in response to difficulties of accessing health and social care services, and the absence of extended family support in the adopted country. Our older participants shared examples of dissatisfaction with

formal health and social care services that failed to meet their day-to-day needs. As a single woman entering retirement, Laarni was living below the poverty line. In the following excerpt, she discussed how she looked to fictive kin within the community to ensure that her basic needs were being met:

I use the [local health center] here but not much ...because ...I want something that is every day. ...I am a volunteer [at the local food bank since] 1989. ...They have [services]. *Meron* (like) me I have 5 neighbors; I teach them where to get full [boxes]. ...Even now, wherever we have parties or my friends have parties if there is leftovers after we work, I bring home. (*Laarni, 63-year-old, service sector worker*)

Laarni described her own fictive kin network as being composed of older Filipino women who live in close proximity and share the experience of living in poverty. For Laarni, having a fictive kin network comprised of retired Filipina domestic workers provided opportunities for under the table employment and information on where to access basic services such as foodbanks. Local community organizations (such as food banks or Filipino socio-cultural groups) and public spaces (such as mall or coffee shops) were also identified as providing space where older Filipinos and their families regularly meet. Christina, a community stakeholder, acknowledged the importance of these networks in providing spaces for older Filipinos to congregate, exchange information, and create a sense of belonging that is only possible “in the community”:

There is this sense of freedom. And they're going to [the mall], there are other people there too. ...But I think people go to the mall there because there's a feeling of “it's in the community”; it's right there embedded in the community, and there's a sense of openness. (*Christina, lawyer*)

It is important to note that the community spaces where these fictive kin networks congregate are informal, and are oftentimes reliant almost entirely upon the work of volunteers from the community to function. In reality, these networks receive very little financial support through formal channels such as government or foundation funding, and struggle daily within

contexts of resource scarcity. Thus financial concerns regarding the provision of care permeates, not only in the context of family care, but also within fictive kin/community care contexts. This renders reciprocal support environments potentially precarious (Jordan-Marsh & Harden, 2005).

8.4 Discussion

This article examines the lived experiences of reciprocity within the Filipino family and community in Canada. As an illustration of the dynamics of reciprocity, our study both confirms and extends the relevance of reciprocity as a concept which can enrich our understanding of the shape and nature of care lived by Filipino older adults. The findings illuminate both the benefits and challenges of reciprocity, and identify the structural forces which, although often unaccounted for, underlie how care arrangements are negotiated and experienced. Finally, we argue for an articulation of reciprocity that is, at its core, intersectional; composed of a dynamic interplay between intergenerational, transnational, and community relationships across time and borders. Conceptualizing reciprocity as intersectional enables a more nuanced and complete accounting of the realities of care within immigrant communities generally, and among Filipino older adults specifically.

The findings of this study encourage decision-makers and service providers to move beyond notions of caregiving as exclusively delivered by immediate family members (spouse or adult child) and received by older adults. In the case of immigrant older adults, such as those from the Filipino community, caregiving is more likely to develop in the context of reciprocity, whereby older adults and their families/communities give and receive care in multiple forms, and across diverse familial, fictive kin, local, and transnational boundaries. These reciprocal relationships reflect older people's need for support and contribute to continued agency in providing care to families and community.

Our research builds on a small but growing body of work on the local and intergenerational immigrant family as a primary site for reciprocal support— with children, grandchildren, and older adults all giving and receiving care on a daily basis (Baldassar, 2007; Brotman & Ferrer, 2015; Kimura & Browne, 2009; Sun, 2014; Treas, 2008). Co-habitation is a means through which the intergenerational family contends with scarce financial resources, time

restrictions, and the need for physical and social support. Care is also exchanged across borders through financial remittances and visits to the homeland. Older Filipinos are active agents in these reciprocal exchanges, with financial and other support responding to scarcity and adversity across multiple sites (both in their adopted countries and in the homeland) and across multiple generations. Finally, community is the site for many reciprocal relationships that often go unnoticed, particularly with respect to older people as active members of community organizations and informal social groups and among fictive kin. Although traditionally viewed as a resource to offset social isolation among older people, these fictive kin networks are considered more “like family” and often emerge in the context of a lack of accessibility of formal services, a lack of funding for local initiatives and survive only because of the active participation of older adults themselves.

Family (including local, extended, and transnational family networks) and community continue to be central to the lives and identities of immigrant older adults. Despite health and financial concerns, immigrant older adults play a vital role in care exchanges across contexts, boundaries, and sites. This fundamental aspect of care in immigrant communities is currently not well recognized within health and social service systems. Caregiver programs would benefit from moving beyond these static assumptions about who is “the caregiver” and who is “the care receiver”, to consider extensions of reciprocity as a fundamental aspect of care. In this way, strategies and entitlements can shift to both recognize and provide support to immigrant older adults, their families, and communities. For example, caregiver assessments and interventions rarely address intergenerational or fictive kin relationships, and hardly consider the role of older adults in transnational care exchanges. There is a need to expand our definition of who cares to include the intergenerational family, the transnational family, and local fictive kin. By acknowledging the extensions of reciprocity as a central component of care, we can begin to legitimize and support older immigrants as both givers and receivers of care in local and international settings.

The findings of our study have three distinct potential implications for social work practice and research. First, social workers working with older immigrants must recognize, acknowledge, and respond to complex and fluid experiences as care receivers and providers

(Keefe, 2011). This includes multiple roles and relations in caring labor, including contributions to grandchildren, transnational families, and local communities. Second, intervention, eligibility, and entitlements may need to be adapted and refined to align more closely with the needs of older people. Providing information about immigration and retirement eligibility and entitlements would facilitate planning and coordination of care. Similarly, intervention plans should account for the types of geographic mobility that older people are likely to engage in without risk to eligibility or service delivery. Finally, by acknowledging the support of fictive kin within the local community, we can begin to understand and include caring networks that extend beyond the spouse or adult child in our service delivery models. Formal service providers should work in tandem with community services to reach out to older adult immigrants. Networks, for example, should include advocacy and social groups that older people from the Philippines consider relevant to their needs. Concrete examples of service provision include the development of support groups that engage grandchildren and other intergenerational family members and provide funding, transportation, and spaces to support fictive kin networks. As Canadian society ages and becomes increasingly diverse, it is crucial for service providers to understand the caring dynamics of immigrants generally, and Filipino older people specifically. By considering these diverse and extended experiences of reciprocity, we are better positioned to provide services and design programs that would recognize and strengthen existing caring relationships.

CHAPTER 9: DISCUSSION AND CONCLUSION

The findings of my dissertation project contribute to the development of new knowledge about the impact of immigration and labour policies on the lived experiences of aging and care practices among older members of racialized and immigrant communities in the Global North generally, and within Filipino communities in Canada specifically. In this chapter, I highlight several key findings for social gerontology and social work. I also speak to the ways in which an intersectional life course perspective as both theory and research tool serve to (a) better address and integrate complex macro systems with everyday experiences of aging, and (b) deepen an understanding of the interlocking oppressions that exist at the intersections of care, labour, and immigration. The perspective also acknowledges the agency, resilience, and resistance that older people and their families experience throughout their life course.

In the second half of this chapter, I outline research and practice recommendations that emerge from my findings, and explore pathways for policy advocacy. I conclude by discussing implications for social work practice, and suggest specific ways in which service providers might engage in critical and ethical practices across clinical, institutional and community settings in order to improve service delivery to racialized older immigrants, their families and communities (particularly those from the Filipino community).

9.1 Revisiting the history of the Filipino diaspora in Canada through an intersectional life course perspective

An important contribution of the intersectional life course perspective is its capacity for contextualizing individual experience within the broader social and political forces in which these experiences are situated. In the context of the current study, an intersectional life course perspective situates the experiences of older Filipinos within the broader history of Filipino settlement in Canadian society. Filipino-Canadian communities have been shaped by the Philippines' outward migration programs that have effectively commodified its labour force (Rodriguez, 2010). Since 2012 the Philippines has emerged as the 40th largest economy in the world, and has relied on its transnational labour force which has helped sustain the country's gross domestic product (GDP) (Rodriguez, 2010). According to the International Monetary Fund

(2012), approximately 10% of the Philippines' GDP is provided by overseas workers who send financial remittances to the homeland. Worsening social and economic conditions, as well as the bureaucratized streamlining of migration labour policy has facilitated the "brain drain" of workers from the Philippines (Parreñas, 2008). More recently, Rodriguez (2010) traced how global capital has drastically shaped and structured im/migration policy to facilitate the flow of labour commodification. In her ethnographic work in the Philippines, Rodriguez (2010) noted how the Philippine state pacifies migrant fears over the vulnerabilities of working abroad, while also ensuring that labour is still made available to nation-states that require labour from the Global South⁴². Building upon this work, this study incorporates an understanding of the im/migration trajectories and realities of labour commodification within Filipino diaspora communities in Canada by drawing on the life course experiences of its aging members.

It is worth reiterating that the first Filipino immigrants who settled in Canadian society were predominately middle-class professional immigrants consisting of nurses, medical technologists, doctors, teachers, managers and engineers (Alcuitas et al., 1997; Kelly, 2014; 2015). As highlighted in the findings of this dissertation, many first-generation Filipino-Canadian immigrants were able to find work that corresponded with their educational credentials, as was the case for participants Devina and Jinky. However, many of these immigrants, as reflected in the stories of Makario and Rommel, found themselves relegated to the secondary labour market (Coloma & Pino, 2016). An important additional point corroborated in my study is that, as this first wave of first generation immigrants settled, they petitioned their families to rejoin them through family sponsorship (Tungohan et al., 2015). This was the case for many of my participants such as Devina and Jinky who sponsored family members over a number of years, including spouses, children, siblings and parents. Likewise, some participants

⁴² Institutions such as the Philippine Employment Administration (POEA) and the International Labour Affairs Service (ILAS) are actively monitoring the availability and opportunity for short-term, temporary and low status overseas work. In this sense, the state has provided a model in mobilizing its citizens for overseas work by catering to labour needs across the world. Rodriguez (2010) argued that the Philippine state celebrates what she called "migrant citizenship", where migrant labourers are celebrated as modern-day heroes. This pacifies and placates fears of working abroad, while also ensuring that labour is still made available to nation-states that require labour from the Global South.

like Arnel, Flor, Gabriela, Jose, Juan, Makario, Rommel and Vicki were reunified with their families under the Family Reunification Program.

Filipino domestic workers from the Foreign Domestic Workers Program (FDM) in the 1980s constituted a second wave of Filipino im/migration to Canada. This program allowed participants like Charito, Laarni, Maryvic, Nenita, Pearl, and Rizza to enter and work in Canadian society, and eventually receive their permanent residency and/or citizenship. The Foreign Domestic Movement is a watershed program for the Filipino community because past and current iterations have enabled Filipino women to immigrate to Canada. Though Canada continues to accept Economic Class immigrants, the number of temporary migrant workers engaging in secondary or peripheral labour market work continues to grow; outpacing numbers reflected in traditional immigration trajectories, most notably amongst those who are independent applicants and able to contribute to the Canadian economy through permanent settlement in Canada (Kelly, 2014).

As emphasized in Chapter 7, Canadian domestic work policy has uniquely shaped the Filipino-Canadian diaspora experience. As the only program in the world that offers permanent residency upon completion, qualified applicants prefer to work in Canada (Tungohan et al., 2015; Pratt & PWC-BC, 2012). Existing scholarship on domestic work policy in Canada has highlighted how the majority of Filipino applicants are women, reflecting the growing feminization of migration (Parreñas, 2000; Tungohan et al., 2015). The majority of domestic workers are educated and professional women (for instance nurses), who entered the service sector industry to find work abroad. In the current context of globalization and commodified labour, Parreñas (2000; 2001) proposed that migration extended and altered the reproduction of labour, which is the ostensible labour needed to sustain and care for the family in the Global North and Global South. Both Parreñas (2000) and Glenn (1992) have argued that in a context where Global South economies are dependent on the labour contributions of its citizens, women harbor greater responsibility in the economic survival of their families, and are likely to do so through the ‘two-tier hierarchy’ of the global labour force. That is, racialized women of the Global South are placed in positions to satisfy the demand for low skilled service work prevalent

in post-industrial nations across the globe (Parreñas, 2005a; 2005b; Rodriguez, 2010; Tungohan et al. 2015).

Chapter 7 highlighted the lifestory of Laarni, a 63-year-old retiring domestic worker in Montreal, to showcase how the intersections between gender, age, and labour are experienced in the later lives of older Filipina women. Laarni came to Canada as a domestic worker in the 1980s under the Foreign Domestic Movement. After receiving her permanent resident status, she transitioned to the manual labour industry, when she began work in a garment factory. At the time of her interview, Laarni was recently laid off and had begun to receive employment insurance (EI). As a single woman in her early 60s, Laarni discussed the hardships of making ends meet, and being forced to work multiple part-time jobs in the underground economy to cover her daily costs of living. Laarni's story corroborates existing research on racialized and gendered caring labour in Canada, and the difficulties that older women face living in poverty (Young, 2011). At the age of 63, Laarni occupies a precarious space where her wages are not enough to sustain her late-life activities, and where she is not yet eligible to receive her pension. Her situation illustrates how despite having different objectives, immigration and retirement programs have profound impacts on each other. Retiring and retired Filipina domestic workers spend a significant portion of their early and mid-life participating in the secondary labour market, where they make contributions to their pensions. However, as Young (2011) and Marier & Skinner (2008) noted in their research on gender and retirement, racialized older women in Canada find that their pensions are insufficient to sustain their later life needs. The implications of not having adequate retirement provisions can have significant implications for those living at or under the poverty line (Grenier et al., 2016; Young, 2011).

Findings in Chapter 7 also highlighted how immigration policies and retirement programs such as the OAS/GIS place aging domestic workers in what I called the paradoxical binary of being *too old* and *too young*. Aging domestic workers find themselves too old to engage in the types of labour that the secondary and peripheral labour market demands. Thus, questions can legitimately be raised as to how aging domestic workers from the Global South are (a) subjected to higher risk of disability and physical stress, (b) placed at risk for age discrimination, and (c) dismissed as they approach retirement. At the same time, consideration must be given to older

women who are *too young* to retire. In these instances, retiring and retired domestic workers find that they cannot retire because of their ongoing financial support to local and transnational loved ones. Charito's retelling of the circumstances leading to her retirement offered a powerful glimpse into this dynamic. After immigrating to Canada under the FDM, Charito remained with her employer for close to 30 years where she was mostly responsible for childcare. Charito was fired at the age of 64 after her employers felt that her body was slowing down. Charito's dismissal highlighted how perceptions of domestic work can shift as caregivers age, and how relationships between employers become ruptured when the former fails to meet the standards of what and how a domestic worker is expected to perform. In Charito's case, these standards seem to have been predicated on discriminatory assumptions of domestic caregivers being young and durable; traits which may run counter to caregivers who are visibly aging and approaching their retirement. Charito's situation shed light on the commodification of caring labour when domestic caregivers are treated and ultimately deemed as expendable bodies in later life. The implications were particularly devastating for Charito, who at the age of 64, found herself financially vulnerable because she was no longer able to contribute to her family's financial security.

Though basic pensions are largely perceived to be inadequate, they nonetheless provide older people with much sought-after flexibility when choosing the number of hours worked and types of labour performed within the informal and underground economy. Such realities should propel researchers and policy makers to consider the gendered and racialized nature of poverty in later life – in particular, how members of these communities navigate through institutional barriers in order to ensure that their late-life needs are met. Some retiring and retired Filipinos must, out of necessity, continue to work in the secondary labour market or underground economy to survive. Here, the stories of Jose and Vicki (Chapter 6), Nenita and Pearl (Chapter 7), and Flor and Juan (Chapter 8) come to mind. These informants discussed the necessity but insufficiency of their retirement provisions, and identified the need to continue to work in the unreported labour market. While Juan discussed the possibility of working under the table, Jose, Vicki, Nenita, Pearl, and Flor described how engaging in unreported work was the only way to support their families locally, as well as in the Philippines.

Continued work ‘under the table’ presented new sets of risks and challenges, such as the physical challenges of providing care for families (and for domestic workers, care for their clients). While some continued to engage in domestic work (Nenita and Pearl), others took on custodian work and part time catering (Jose, Vicki, and Flor). Despite these risks, retiring and retired Filipinos asserted their agency by being able to choose the types of work they engaged in and identified rewards such as having a reduced work schedule and being compensated without having to pay taxes. More importantly, work in the secondary and/or underground economy allowed participants like Jose, Vicki, Nenita, and Pearl to continue caring for spouses, grandchildren, and local/transnational family members. These experiences offer what Solorzano and Yosso (2002) and Hulko, Brotman & Ferrer (2017) call ‘counter-stories’ to the dominant perceptions of older racialized people as passive recipients of care, and shed light to the newer dimensions of aging among retiring and retired Filipino older adults.

Experiences of financial exclusion, insecurity and precarity are due to structural events over the life course related to lack of recognition of education, delays in getting citizenship rights, family separation, and inaccessibility of pension entitlements. This creates a perfect storm for financial insecurity, where some participants like Flor, spoke about financial precarity, and how this reality has shaped her aging experiences and her ability to support her family in the Philippines. At the age of 81, Flor provides significant support and care to her extended family through financial remittances. Although she is a prominent transnational care provider, Flor laments being separated from her biological family, and expressed feelings of isolation and loneliness. At the time of her interview, she acknowledged how she would be completely isolated if not for her fictive kin network consisting of other older Filipina women, and community networks where she and a close group of friends visited each other regularly and utilized local community services such as foodbanks, church services, and monthly social events. Stories like Flor’s demonstrate the ways in which older people experience poverty and scarcity of resources that have yet to be addressed by service providers.

9.2 Interlocking oppressions at the intersections of care, labour, and immigration: The Othering of older Filipinos in Canada

This dissertation also highlights how state policies across immigration, labour, health and retirement sectors create and reinforce discriminatory assumptions about older racialized immigrants and their lack of productivity, and (mis)use of precious state resources. These perceptions serve to justify punitive eligibility requirements that (a) prevent older applicants from the Global South from entering Canada unless they meet strict financial and health requirements, (b) prevent older Filipinos living in Canada from receiving full retirement pensions and entitlements, (c) force families to take up the full financial cost of care (including housing, health and social services), and (d) restrict accessibility to permanent citizenship to older adults. While immigration and migration programs are categorized along economic, family reunification, refugee, and temporary work status, my findings chapters 6, 7, and 8 highlight the ways in which older Filipinos are both excluded and rendered invisible within Canadian society through strict eligibility criteria and requirements. This was particularly the case for older applicants under the Parent and Grandparent Program, and the Parent and Grandparent Supervisa, where sponsoring families must prove their financial capacity to pay for health and social care, and where older adults must demonstrate their “healthiness” in order to enter Canadian society. Such discourses render invisible, and put at risk, the considerable caring contributions that older racialized im/migrants provide to their intergenerational families and local and transnational communities.

The invisibility of older racialized immigrants in Canada is tied to the historical and current context of imperialism and colonialism, and what it means to be part of Canadian society. In her concept of the ‘exalted subject’, Thobani (2007) argued that “the figure of the national subject is a much venerated one, exalted above all others as the embodiment of the quintessential characteristics of the nation and the personification of its values, ethics, and civilizational mores” (Thobani, 2007, p. 3). National formations rely heavily on the conception of a common identity. Thobani (2007) suggested that the ‘Other’ becomes constituted as both an identity oppositional to that of the nation, as well as a threat to the exalted subject. Here logics of ‘Othering’ are operated throughout the life course where its cumulative impact is felt especially in later life,

where older racialized im/migrants encounter difficulties in accessing full entitlements as older adults. The notion of ‘Othering’, which is a form of interlocking oppression and process of differentiation, is a term used within critical race feminism and intersectionality scholarship. It has also received increasing attention in the context of social gerontology, where researchers such as Torres (2009) and Grenier (2012) have used ‘Othering’ to discuss how older people who have experienced different forms of marginality are excluded within the wider discourse on aging. My findings offer an illustration of the “Othering” of older racialized immigrants in Canada, whose numbers are managed by the state through im/migration policy, yet whose caring labour contributions are ignored. The experiences of Filipinos, and the challenges that they encounter in relation to their cumulative disadvantages offers an example of how older racialized bodies and experiences are rendered invisible within policy and practice discourse. These dynamics were discussed and elaborated by Christina, a community stakeholder and lawyer who spoke about the invisibility and precarity that older Filipinos experience despite their contributions to the Canadian economy. Christina spoke about the lack of meaningful policies at the federal, provincial, and municipal levels to elevate the quality of life of older Filipinos and their families.

My findings in Chapters 3, 6, and 7 offer an illustration of stories that (a) contest the popular discourse that older racialized immigrants would be a drain to existing health and social services, (b) highlight the (in)sufficiency and (in)adequacy of retirement policies in Canada, and (c) acknowledge the caring relationships and dynamics between generations and transnational networks. Each of my findings chapters implicitly and explicitly emphasize the need for social workers to recognize the interplay between life stories, structural barriers and policies, historical context, and actors who have prominent roles in caregiving exchanges. Before discussing the implications of my findings for the fields of social work and social gerontology, I would like to revisit my use of the term ‘immigrant’. Throughout my dissertation, I have used the term ‘immigrant’ to characterize individuals who have permanently moved from one country to another. The Government of Canada makes distinctions between immigrants, non-immigrants, and non-permanent residents based on status (Statistics Canada, 2017a). From a policy and administrative level the Government of Canada uses the term ‘immigrant’ to refer to a person

who is, or has been, a landed immigrant/permanent resident. In Chapters 3 and 6, I introduced ‘*im/migrant*’ and ‘*im/migration*’ to acknowledge the academic literature that frames ‘immigrant/immigration’ as social constructions that can include different typologies about permanence and non-permanence (and legal implications), gendred and raced migration flows, as well as forced and unforced border crossings (Li, 2008). For instance, scholarship on immigration and migration have begun to adopt transnational perspectives, acknowledging relationships formed between and within different diasporic communities (Zhou, 2010). The terms ‘im/migrant’ and ‘im/migration’ used in Chapters 3 and 6 offered a way to navigate through the complexities and nuances of moving across spaces from country to another, and the different convergences between older immigrants and older migrants/visitors as they age in Canadian society.

My findings across chapters suggest that categories of immigration are to some degree arbitrary, and must be flexible to account for the complex transnational and local relationships that exist between care and support networks. Take for instance, findings from Chapter 8 where some Filipinos who, concerned with the care needs of family members, would regularly cross-national borders depending on the needs of family members in different parts of the world. Equally compelling are the ways in which older Filipinos discussed and framed financial security and remittances as key pieces of their caring labour. These revelations frame caring labour as a more fluid concept than is currently captured within the category of immigrant status, and thus warrants the inclusion of these exchanges within policies. In order to account for the complexities of these transnational exchanges, the discourse and eligibility criteria on immigration and migration programs must de-emphasize the risk and burden that older immigrants and migrants pose to health and social services. Instead of high insurance costs and dependency clauses (such as the 20-year Dependency period), programs must be flexible so that older immigrants and migrants are able to cross borders so that they can engage in these transnational care relationships.

9.3 Relevance/Implications for research, policy and practice

In this section I explore the implications of my findings for research, policy, and practice. In particular, I offer new understandings which have the potential to both acknowledge the lived experiences of older Filipinos and inform the development of flexible policies that address the daily realities of older members of immigrant communities. Moreover, these new understandings challenge the many common misperceptions that exist about older racialized immigrants within society such as their passivity and dependency on others to meet care needs, and beliefs that they are a burden to Canadian health and social care services. In the following section, I underscore new understandings centered on (a) the restructured the family unit to inform immigration policy, (b) retirement and care to inform service provision, (c) the financial realities of older Filipinos in Canada, and (d) the insider/outsider dynamic, and knowledge building practices through Filipino ways of knowing.

9.3.1 Implications for policy

9.3.1.1 New understandings of the restructured family unit to inform immigration policy

As discussed in Chapter 6, the Parent and Grandparent Supervisa, and the Parent and Grandparent Program are two age-specific programs that enable older adults to enter Canada either as sponsored or temporary visitors. Both programs impose strict eligibility criteria for the older applicant (related to health status) and sponsor (related to financial capacity). In Chapter 6, I argued that such measures explicitly categorize older adults as “visitors” who (a) must leave after a fixed period of time, (b) be “healthy” enough to enter Canadian society, and (c) be financially and physically “dependant” on their sponsors. These characterizations are highly problematic for several reasons which are outlined in the following paragraphs.

First, by reducing opportunities for older people to permanently immigrate to Canada these programs attempt to placate societal anxieties regarding the aging of the population, and in particular, concerns related to the influx of older adults from the Global South. The restrictions imposed by these programs have significant implications for Filipino families. For intergenerational families like Edwin and Analyn’s, the Parent and Grandparent Supervisa

imposes high health insurance costs that result in great financial strain. Although Analyn expressed a desire to have her mother visit as often as possible (and eventually apply for permanent residency), she also described her concerns about paying for higher insurance premiums. These thoughts dissuaded Analyn from renewing her mother's Supervisa despite the caring labour her mother provided to her young children. As a result, Analyn and Edwin must now find different sources of support for their three young children. Their childcare options might include paying for costly daycares, and/or relying more on Edwin's parents for support.

Analyn's decision to forgo the Supervisa will mean that both her and her children's caring relationship with her mother will be characterized by long-distance separation, and financial remittances. The social, financial and emotional costs to this separation should not be underestimated since Analyn described being close to her mother, and that her identity of being a 'good daughter' was tied to her mother's care. For Analyn's children, knowledge about their Filipino heritage will be potentially transformed and ruptured since grandparents offer links to culture and heritage (Feinian et al., 2011; Freuhauf et al., 2006). Policy makers must consider the extent to which the health insurance and other financial requirements of the Parent and Grandparent Supervisa curtail and discourage families from applying. In particular, policy makers must assess whether the Supervisa is preventing older people from reunifying with their families, and therefore blocking the intergenerational care exchanges provided by and for older parents and grandparents.

There is considerable work being done to address problems with the Temporary Foreign Worker Program and the Caregiver Program within activist and grassroots organizations generally, and within Filipino-specific organizations in Canada (Tungohan, 2017). For example, activist and advocacy groups like the National Alliance for Philippine Women of Canada and Migrante Canada have both campaigned for temporary foreign workers (including domestic workers) to have access to permanent residency status upon arrival (Pratt and PWC, 2012; Tungohan et al., 2016). Researchers have supported calls for permanency upon arrival by highlighting the ongoing barriers that temporary foreign workers face as they navigate and negotiate their status as 'citizens in waiting'. In particular, Tungohan (2017) identified the distress and ruptures caused by family separation for workers who leave their families for an

extended period of time while waiting to receive residency status (Tungohan, 2017). Older adults have faced similar barriers that TFW and LCP applicants encounter when applying to enter Canadian society under these temporary visitor programs. Yet, despite the onerous and burdensome criteria placed onto older adults and their sponsors, few advocacy and support organizations have identified the Parent and Grandparent Program and Parent and Grandparent Supervisa as a potential area for organizing and advocacy. This lack of attention highlights the invisibility of aging as a priority in community organizing work. Indeed, an important area for advocacy groups to consider is the implicit discriminatory regulations of these temporary programs, and to call for an end to sponsorship programs that disproportionately penalize families from the Global South who incur high financial costs and responsibilities. This would mean working towards the removal of the Parent and Grandparent Supervisa, and shifting focus to the improvement of family sponsorship programs that allow permanent residency for older applicants from the Global South. Emphasis on family sponsorship programs would allow older adults from the Global South to reunite with their families, and be supported commensurate to the caring labour they provide.

In addition to providing permanent residency status to incoming older adults upon arrival, it is important to underscore the need to support adult children who sponsor, and are therefore legally responsible for, their older parents. Chapters 6, 7, and 8 highlighted the heavy responsibilities and burden of care placed onto adult children and sponsors. Host societies where the immediate nuclear family is viewed as the primary source of care provision (i.e. spouses and adult children) do not take into consideration the fact that family and community networks are disrupted due to im/migration. This, coupled with the challenges of economic stability within racialized and immigrant families, results in increasingly unfamiliar and challenging caring arrangements (Koehn et al., 2010; Warnes et al., 2004). Even when family members are reunited in a given host society, the dynamics are such that adult children are required to work in the labour market for longer hours and often in lower paying jobs than their Canadian-born contemporaries (Li, 2003; Pratt & PWC-BC, 2012). For adult children who are largely participating in the secondary/peripheral labour market, these added responsibilities perpetuate the cycle of poverty, especially given the added financial burdens of supporting their parents

when they require medical attention and other health/social services. Im/migration programs such as the Parent and Grandparent Program and Parent and Grandparent Supervisa are age specific, and alter intergenerational norms of family care. Both programs emphasize family reunification as a temporary state, and reinforce the dominance of the traditional nuclear family as the primary (and oftentimes sole) source of care. Such arrangements inherently expose older parents to potentially vulnerable situations because they are structurally reliant on their sponsors (most often adult children) for financial, social, and health care (as well as systematically denied state rights and entitlements). Furthermore, the temporary nature of these programs disrupts the relationship building and sense of attachment/belonging between older people and their support networks. Instead, emphasis is placed on the potential ‘costs’ of having older people reunify with families who live in Canada.

Restrictive clauses which bind older people to their sponsors for an extended period of time⁴³ create dynamics wherein older people are structurally dependent on their adult children. Policies must take into account how these structured dependencies impact older people and their immediate families. Examples from participants such as Analyn and Edwin provide evidence that members of racialized communities are extremely hesitant to put themselves at financial risk in order to sponsor their older family members, even under conditions where such sponsorship would help to reunify the family and alleviate difficulties in accessing culturally-relevant childcare and other familial supports. Therefore, my policy recommendations include the removal of dependency clauses such as the Parent and Grandparent Program’s 20-year dependency period, and the Parent and Grandparent Supervisa’s insurance requirement. Instead, older applicants under the Parent and Grandparent Program, and Parent and Grandparent Supervisa should have immediate access to Canadian Medicare, or at the very least, provincial health insurance programs. Removal of these clauses would immediately relieve some of the financial pressures that families face in sponsoring older parents, and would allow federal and

⁴³ For the Grandparent and Parent Program it is the 20-year Dependency Period, and for the Supervisa it is the financial commitment of the sponsor to provide all amenities to their parents or grandparents during their stay.

provincial governments to better support racialized and immigrant families who provide necessary but unrecognized caring labour.

Policy makers must take into account the intersectional impact of immigration and retirement programs on the lives of older people. This would allow policy makers to account for the ways in which institutional and structural processes mutually reinforce racism, sexism and ageism. For instance, a person is required to have lived in Canada for 40 years (after the age of 18) to receive full OAS benefits. The majority of my participants immigrated in the 1980s and have not lived in Canada for 40+ years. Moreover, most of my participants have predominately worked in the secondary labour market where they have made smaller contributions to their Canadian Pension Plan/Quebec Pension Plan. As such, retiring and retired older Filipinos like Charito, Flor, Jose, Juan, Laarni, Makario, Maryvic, Nenita, Pearl, Rizza, Rommel and Vicki face situations where they receive and are reliant on OAS and GIS, which are (a) less than the maximum entitlement and (b) insufficient in meeting later life needs. Thinking about the impact of immigration and retirement programs in tandem rather than individually, offers a unique opportunity to better address the economic vulnerability that older immigrants face as they approach, and eventually reach their later lives. As such, one policy recommendation is to reduce the residency requirements (currently set at 40 years) so that older immigrants are able to receive the maximum amount provided by Old Age Security and the Guaranteed Income Supplement. Secondly, policy makers must raise OAS and GIS to an acceptable minimum standard so that it surpasses the poverty line (where the low-income cut-off is set at 23,861 CAD).

9.3.2 Implications for practice

9.3.2.1 New understandings of retirement and care to inform service provision

An important contribution is the ways in which older participants reframed retirement as a fluid life event. For instance, some older domestic workers like Nenita, Pearl, and Rizza did not retire at the age of 65. Rather these older women discussed transitions to the peripheral and unreported labour market where they continued to work as caregivers, cooks, or babysitters.

Others like Arnel, Makario, and Juan described the necessity of working past the age of 65 to address the insufficiency and inadequacy of the Old Age Security and Guaranteed Income Supplement. Charito, Laarni, Maryvic, Nenita, Pearl and Rizza discussed how their “under the table work” allowed them to continue to provide care to their intergenerational family both locally and transnationally. These dynamics reveal a more nuanced understanding of how retirement and care are (re)negotiated in later life. Ultimately, acknowledging these experiences dispel misperceptions related to the ways in which older Filipinos are assumed to retire once they turn 65. This complex and fluid experience of work and retirement is an important area of practice intervention, particularly as it relates to how social workers think about care practices, and connect older Filipinos to care services. Care services refer to the sector of formal provision of health and social care services which is designed and regulated by the state through health and social care institutions (Armstrong, 2012). Care practices, on the other hand, have been defined as the work performed within the domestic or private sphere, as tasks needed to sustain a household (e.g. cleaning, cooking, child care and child rearing) (Neysmith et al., 2012). Care practices are affected by a range of factors including access to formal care services, reconfigured family structures, and socio-economic realities which are shaped by policies, including most notably immigration, labour, and retirement policies (Brotman, 2003; Neysmith et al., 2012; Young, 2011). Service providers tend to define caregiving as unidirectional, a fixed state in which the immediate family (most notably spouses and adult children) provide the basic necessities of care (i.e. meals, coordinating care and transportation, and undertaking physical tasks such as cleaning and hygiene) for dependant, ill older adults. As indicated in Chapter 8, these types of caregiving assumptions reinforce cultural logics of reciprocity that frame older people as passive recipients of care.

In the case of older members of the Filipino community, caregiving is more likely to develop in the context of ‘care exchanges’ whereby older adults and their families and communities both give and receive care in multiple forms and across diverse local and transnational boundaries. Arnel, Christina, Charito and Laarni spoke specifically to how some older Filipinos relied on each other for health and social needs. This included, for instance, sharing information about local food banks, opportunities in the unreported labour market, and

retirement provisions. Other examples included visits to the hospital or long-term care facilities, as well as accompanying older friends to medical appointments. These reciprocal caring exchanges reflect older people's need for support but also their continued agency in providing support to family and community.

The findings of Chapter 8 provided an incentive for service providers to move beyond unidirectional and non-reciprocal notions of caregiving, and to consider reconfigured family units. As such, social workers can begin to include supportive networks such as transnational and intergenerational family members, and fictive kin within social work assessments and interventions. Acknowledgement of these dynamics offer an entry point in discussing the different types of caring exchanges such as financial contributions, and transnational and mobile care where older people leave Canada at specific times during the year so that they can provide and receive care from care networks in different parts of the world. For instance, Emma's case highlighted how older Filipinos like her mother engage in reciprocal exchanges where they receive instrumental support while providing financial remittances. These reciprocal relationships happen both within Canada and across national borders (e.g. in the Philippines, the United States, etc.). Knowledge of these caring exchanges would allow social workers to plan accordingly when accessing relevant services and entitlements (e.g. informing older people about how travel might impact their OAS/GIS or entitlements to homecare services), and to recognize older Filipinos as active partners in care provision.

Despite both health and financial concerns, older Filipinos continue to play a vital role in care exchanges across contexts, boundaries and sites. Here, Flor's case highlights the precarity that some older Filipinos find themselves in: being obliged to send financial remittances to transnational families, but not having enough to adequately address their daily needs. Therefore, my practice recommendations include adapting interventions, eligibility requirements, and entitlements to account for older people's reciprocal experiences of care. This might include adopting questions during an assessment phase that query one's immigration history, retirement experiences, and caregiving responsibilities. This would then give social workers and other professionals who undertake assessments an entry point for discussing immigration and retirement eligibility and provisions, and the types of retirement programs they might access.

Older adults in this study have identified that they are not aware of their rights and entitlements regarding pensions. Knowledge about these entitlements, provisions, and services is imperative to ensure a fuller response to economic precarity in later life. Information and education about retirement provisions would also facilitate planning and coordination of care for older adults who find themselves both providing and requiring instrumental care and who, as a result, might be subject to higher rates of poverty and increased economic vulnerability because they provide financial support to local and transnational families, and fictive kin.

Equally important are the local networks that emerge in the absence of formal provisions, or when care from normative caregiving sources (such as spouse or adult children) are limited or unavailable (Koehn, 2009; Koehn et al., 2010). In particular, community stakeholders like Aileen, Christina, Fred, Joseph, and Ramon provided examples of fictive kin networks that have contributed to the quality of life for older Filipinos in Montreal. As such, informal networks provided within local community organizations represent part of an organic growth within the Filipino community in response to gaps in services. In this context, community stakeholders are creating opportunities to address emerging issues such as loneliness and isolation that some older Filipinos encounter in their later lives. For instance, local malls offer a venue where older Filipinos can congregate, and share stories about services, provisions, and news. Further investigation of how older Filipinos, families, and fictive kin networks occupy and use these spaces open the possibilities for analysis from a space and care perspective. Therefore, my practice recommendation includes improved recognition of the diverse forms of support offered by informal and fictive kin networks within local community settings. Networks, for example, include advocacy and social groups that older people from the Philippines consider relevant to their needs. Acknowledging these caring contributions would allow formal service providers to work in tandem with informal community services, and to reach out and respond more appropriately to the needs of older immigrants. Concrete examples of appropriate service provision include the development of support groups that engage grandchildren, other intergenerational family members and fictive kin networks. Funding, transportation, and spaces to support fictive kin networks should also be developed. As Canadian society ages and becomes increasingly diverse, it is crucial for service providers to understand the caring dynamics of

immigrants generally, and Filipino older people specifically. By considering these diverse and extended experiences of reciprocity, we are better positioned to provide services and design programs that would recognize and strengthen caring relationships that exist outside of the biological family unit. As such, a key recommendation is to provide increased support and funding to care networks and organizations who already develop and offer informal programs and events catered to older Filipinos in Canada.

9.3.3 Implications for research

This dissertation examined the aging experiences of older Filipinos in Montreal and can be situated within a growing body of research on the intersections between aging, immigration, labour, and care within racialized and immigrant communities in Canada (for example, see Coloma & Pino, 2016; Zhou, 2015). Future research in Canada and elsewhere in the Global North must continue to document and identify the diverse experiences of aging within and across racialized immigrant communities.

9.3.3.1 Examining the financial realities of older Filipinos in Canada

An important area that warrants further investigation relates to the financial realities of older Filipinos specifically, and older racialized immigrants in Canada generally. According to the Government of Canada (2016b), more than three million Canadians live in poverty, where issues of poor health outcomes, lack of access to healthy food, and adequate and affordable housing represent key priorities for provincial and federal governments. The most vulnerable are people aged 45 to 64, single parents, recent immigrants, Indigenous people living off reserve, and people with disabilities (Statistics Canada, 2016c). In response to these issues, the Government of Canada (2016b) has initiated a Poverty Reduction Strategy that examines the multiple dimensions of poverty. Academic scholarship has also supported the call for research on poverty among older people and racialized immigrants (Prast & van Soest, 2016). Datta (2009) noted how racialized immigrants are less likely to access banking services because of structural barriers (e.g. language barriers). Older racialized immigrants, in particular, are vulnerable to financial abuse, and are more likely to be taken advantage of by financial predators, loan

agencies, as well as family members (Prast & van Soest, 2016). Although persons 65+ are not identified within the most vulnerable due to the availability of universal pension entitlements (such as the OAS and GIS), attention must center on the financial realities of older immigrants; especially considering how their access to pensions is tied to (and hindered by) residency requirements. This area of inquiry is urgent given how the financial conditions of older racialized immigrants are rarely accounted for within social gerontological and social work research and practice.

My research offered a glimpse into how some older members of the Filipino community experience their financial realities. Here, the stories of retiring and retired older Filipinos offered in Chapters 7 and 8 provide a starting point for understanding the financial insecurity that some older Filipinos experience in later life. Drawing on the intersectional life course in particular could help deconstruct and account for the multiple forms of financial exclusion rooted in the intersections of age, immigration, and labour history. For instance, future research could extend on the findings identified in Chapters 7 and 8 by specifically engaging with the experiences of older adults who continue to work past the age of 65, and who engage in the unreported labour market. Though Chapter 7 provided a starting point in this inquiry by looking at the specific experiences of aging domestic workers, additional research must examine the types of labour provided by retiring and retired racialized older adults who work past the age of 65.

Foregrounding these experiences capture the complexities of care that exist following retirement.

Likewise, future studies might examine financial realities through the lens of intergenerational, local and transnational contexts. For instance, older Filipinos in my study described how social support and care networks exist across local, national, and international contexts. As such, it becomes important to understand how older Filipinos exchange money and resources across provincial and international borders, and how remittance exchanges contribute to experiences of poverty and precarity. Indeed, future research could start to examine how older Filipinos understand and experience their financial conditions in later life and offer conceptualizations of financial realities that address the lived experiences of older racialized immigrants. Such research is timely given the Canadian government's emphasis and priority of financial literacy programs among older adults. Canada's National Strategy for Financial

Literacy (2014), for example, has highlighted the need for research and programs to address how “Canadians approaching their senior years often face unique financial challenges as they enter and move through [their] lives” (p. 5).

9.3.3.2 New understandings of the insider/outsider dynamic: Towards reflective knowledge building practices through Filipino ways of knowing

A final research contribution of my dissertation centers on the development of a methodology that addresses the challenges of being both an insider and an outsider. My social location as a young male, second-generation Filipino-Canadian, and ongoing work within the Filipino community has raised important questions about how to negotiate my roles as researcher and community member. Among the many questions that emerged throughout my dissertation were: *how does my insider status inform my interview questions, interview style, and eventual analysis? How do I incorporate the unarticulated but shared assumptions about being Filipino in Canada? How does my location as a second-generation Filipino impact my interactions with older participants, adult children/grandchildren, and stakeholders? How do I negotiate my relationship with non-Filipino service providers? How does my activism inform and/or disrupt my research?* Though ethnographic research demands that the investigator prioritize and amplify the voices of participants (Madison, 2012), there are few explicit guidelines that speak to the nuances of researching one’s own community, especially in a context where the intersections of aging, immigration, and labour are at play. While I found very good critical ethnography guidelines (see Madison, 2012) for incorporating personal reflections, interviews, participant observations and textual analysis in order to center the lived experiences of older Filipinos, I constantly found myself thinking about how my implicit and explicit understandings of Filipino culture guided my data collection and analysis. I searched for methodologies that acknowledged my liminal status (Grenier, 2012) as an insider and outsider within the Filipino-Canadian diaspora. I was, and continue to be, an insider with visible physical markers of being Filipino (i.e. brown skin, black hair, etc.), but an outsider with the inability to speak the language. I was, and continue to be, an insider with lineages from maternal and paternal lines, but an outsider with limited knowledge of my ancestral roots. These thoughts and reflections left me with a

yearning for understanding how to engage with the Filipino community in ways that recognize and acknowledge these tensions and connections.

A partial response to the issues outlined above was finding about, and applying a Filipino-specific methodology. My incorporation of *Sikolohiyang Pilipino* (Filipino psychology) (Pe-Pua & Protacio-Marcelino, 2000) allowed me to adopt a research orientation that took into account my shared understandings of Filipino experiences, ideas, and cultural orientations. This process provided a more concrete guide in listening to my participants, but also to track my own reflections, and to deconstruct my insider status. Among the questions I was able to specifically address was “*how do I begin to trace my story with that of my participants, and our shared community?*” Moreover, I was given time and space to consider ethical questions, and generate broader reflections about responsibility and accountability to my data. For instance, in thinking about my study, I was compelled to share my results with my participants. While this process of data analysis verification is an important point in member checking, *Sikolohiyang Pilipino* places emphasis on ensuring the stories are being accurately being represented. Reflecting back on this process, some participants like Nora and Pearl specifically spoke about how their stories should be used to engage in meaningful policy change, and to highlight the courage, resilience, and sacrifices that have been made for the next generation.

9.4 Closing reflections

I conclude this chapter with closing reflections on how this dissertation has transformed my ongoing development as a social gerontological researcher and social work practitioner. To help frame this section, I draw from Notisha Massaquoi’s (2011) concept of ‘transformative disruption’. In her work on radicalizing social work practice and education, Massaquoi (2011) argued that we must pay attention to the transformative disruptions that significantly shift what we know, and our ways of knowing. Massaquoi (2011) noted how these disruptions offer learnings that “end our silence and speak our truths about oppression as we know them” (Massaquoi, 2011, p. 228). As an organizer and scholar positioned within the burgeoning Filipino-Canadian diaspora, this dissertation was certainly a transformative disruption that allowed me to reflect on the experiences of my participants, as well as situate my own past

experiences within the community. The study re-configured what I knew about the Filipino-Canadian diaspora, and highlighted the challenges, tensions, and resilience that older members of my community face. Moving forward, my hope is that this dissertation will inspire future research to push “theory and practice forward in ways that are linked to the constantly changing realities of social life” (Massaquoi, 2011, p. 228). More specifically, I hope that this study serves as a starting point for future social workers and researchers to consider their place within the broader Filipino-Canadian community, and to (re)imagine ways of amplifying and celebrating our elders, their stories, and contributions to Canadian society.

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APPENDIX A: Participant Recruitment (Filipino newspapers)



Study on aging among Filipino seniors: Participants needed

The study examines the aging experiences of Filipino seniors aged 65 years and older. Interested participants will be interviewed on their experiences of aging, immigration, and care in Canada. Each interview will last approximately one to two hours. Participants will be given a \$25 gift certificate (e.g. Pharmaprix, Tim Hortons) as compensation.

This study is also looking for Filipino adult children taking care of their older parent(s) (aged 65+). In this context, adult children will be interviewed on their perceptions of aging based on their caretaking experiences. A \$25 gift certificate will also be given as compensation.

The results of this study will highlight experiences of aging within the Filipino community, and has the potential in identifying potential needs of older Filipino men and women as they age in Canadian society.

For more information or to participate, please contact:

Ilyan Ferrer

ilyan.ferrer@mail.mcgill.ca

Principal investigator:

Ilyan Ferrer, PhD Candidate
McGill University School of Social Work
ilyan.ferrer@mail.mcgill.ca

Academic Supervisor:

Shari Brotman, Associate Professor
McGill University School of Social Work
shari.brotman@mcgill.ca

APPENDIX B: Participant Recruitment (Flyer)



Filipino seniors **WANTED** to discuss experiences of aging



The study will interview participants *aged 65 years old and older* about their experiences of aging, immigration, and care in Canada. Each interview will last approximately one to two hours.

The results of this study will highlight the experiences of older Filipino adults in Canada, and identify their specific needs.

For information or to participate please contact:

Ilyan Ferrer

Ilyan.ferrer@mail.mcgill.ca



Principal Investigator:
Ilyan Ferrer, PhD Candidate
McGill University School of Social Work
Ilyan.ferrer@mail.mcgill.ca



Supervisor:
Shari Brotman, Associate Professor
McGill University School of Social Work
Shari.brotman@mcgill.ca



APPENDIX C: Participant Consent Form (Older People)



Interview and Participant Observation Consent Form (Older Filipino adults)

Aging in the context of im/migration and labour: The case of older Filipino migrants

PARTICIPANT CONSENT FORM

In this study, I am interested in the aging experiences of older Filipinos as they relate to immigration, migration, labour and care. This study is being conducted for my doctoral dissertation in the School of Social Work at McGill University.

For this study, I would like to talk to you about your life in Canada, and the relationships you have with your family. Part of our discussion will focus on how you came to Canada (more specifically, your story of immigration or migration), what it is like for you to grow older in Canada, your roles within the family, and your daily experiences within your community. The interview should last about one to two hours, and with your agreement, I would like to audio tape this interview.

I would also like to take part and observe how you go about your everyday. For this reason, I am asking if I could spend a few hours with you as you go to the mall, the church, or other social activities.

By participating in this interview, you are given the opportunity to voice your own life experiences, and to discuss what you find to be relevant in your aging process. Your participation in the project will be completely voluntary, and you have the choice to withdraw and/or stop the interview at any time. You are free to refuse to answer any or all of the questions, and may request that your portion of the interview be excluded from the study. To assure your confidentiality, you will be given a pseudonym so that your lifestory will not be revealed in an identifiable way. The audio recording of your interview will be transcribed and then coded for analytical purposes. For example, some of your stories will be coded and then categorized in order to better understand how older Filipinos enter and age in Canada. This information will then be stored and secured in a computer file at my office (Rm 313) in the School of Social Work. Once again, no identifiable information will be used in the transcription or stored files. Access to this information will be given to myself and my supervisor (Dr. Shari Brotman), and will be disposed of after a period of 12 months. At the end of the interview, copies of the transcript will be sent to you if you desire.

Compensation for this study will come in the form of a \$25 gift certificate to Pharmaprix or Tim Hortons. I might ask for a follow-up interview for clarification purposes (to clarify what you might have said in our first interview), of which you will receive an additional \$10 gift certificate per follow-up. Compensation for our observation will be an additional \$25 gift certificate to Pharmaprix or Tim Hortons.

Results of this study will likely inform the ways in which older Filipino men and women age in Canadian society. General themes and findings will be disseminated through various social gerontology journals (for

example: The Journal of Gerontological Social Work) and conferences (for example: The Canadian Association of Gerontology). Moreover, I intend on presenting the study's results through workshops and presentations in various community organizations within the Cote des Neiges area.

Please sign below if you agree to participate in the study:

- I agree to have the interview audio-taped for analysis purposes
_____ Yes _____ No
- I agree to spend a few hours with the researcher in the community
_____ Yes _____ No

Name (or initials): _____
Signature _____
Date _____

Interviewer: _____
Signature _____
Date _____

If you have any questions or concerns, please feel free to contact the principal researcher (Ilyan Ferrer) and/or his supervisor (Dr. Shari Brotman) in the coordinates listed below. Furthermore, if you have any questions or concerns regarding your rights or welfare as a participant in this research study, please contact the McGill Ethics Office at [REDACTED] or lynda.mcneil@mcgill.ca.

Please note that two consent forms will be signed. One copy will be kept by the principal research, and the second copy will be provided to you. Thank you for your participation.

Ilyan Ferrer
PhD Candidate
McGill University - School of Social Work
[REDACTED]
Ilyan.ferrer@mail.mcgill.ca

Shari Brotman (Supervisor)
Associate Professor
McGill University - School of Social Work
[REDACTED]
Shari.brotman@mcgill.ca

APPENDIX D: Participant Consent Form (Adult Children and Grandchildren)



Aging in the context of im/migration and labour: The case of older Filipino migrants

PARTICIPANT CONSENT FORM (Family members)

The purpose of this study is to understand the aging experiences of older Filipinos as they relate to immigration, migration, labour, and care. This study is being conducted for my doctoral dissertation in the School of Social Work at McGill University.

For this study, I would like to interview you about your experiences with your older parent. Some of the topics that we will be discussing are: the intergenerational caretaking practices and exchanges with your older parent(s), your role in providing care for your parent, the roles you're your parents play in your family, and what you believe to be the major issues of your parent(s) as they age in Canada. The interview should last about one to two hours, and with your agreement, I would like to audio tape this interview.

By participating in this interview, you are given the opportunity to voice your own experiences, and what you find to be relevant in your parent(s) aging experiences. Your participation in the project will be completely voluntary, and you have the choice to withdraw and/or stop the interview at any time. You are free to refuse to answer any or all of the questions, and may request that your portion of the interview be excluded from the study. To assure your confidentiality, you will be given a pseudonym so that your experiences will not be revealed in an identifiable way. The audio recording of your interview will be transcribed and then coded for analytical purposes. For example some of your stories will be coded and then categorized in order to better understand how older Filipinos enter and age in Canada. This information will then be stored and secured in a computer file at my office (Rm 313) in the School of Social Work. Once again, no identifiable information will be used in the transcription or stored files. Access to this information will be given to myself and my supervisor (Dr. Shari Brotman), and will be disposed of after a period of 12 months. At the end of the interview, copies of the transcript will be sent to you if you desire.

Compensation for this interview will come in the form of a \$25 gift certificate to Pharmaprix or Tim Hortons. I might ask for a follow-up interview for clarification purposes (to clarify what you might have said in our first interview), for which you will receive an additional \$10 gift certificate per follow-up.

Results of this study will likely inform the ways in which older Filipino men and women age in Canadian society. General themes and findings will be disseminated through various social gerontology journals (for example: The Journal of Gerontological Social Work) and conferences (for example: The Canadian Association of Gerontology). Moreover, I intend on presenting the study's results through workshops and presentations in various community organizations within the Cote des Neiges area.

Please sign below if you agree to participate in the study:

- I agree to have the interview audio-taped for analysis purposes
_____ Yes _____ No

Name (or initials): _____
Signature _____
Date _____

Interviewer: _____
Signature _____
Date _____

If you have any questions or concerns, please feel free to contact the principal researcher (Ilyan Ferrer) and/or his supervisor (Dr. Shari Brotman) in the coordinates listed below. Furthermore, if you have any questions or concerns regarding your rights or welfare as a participant in this research study, please contact the McGill Ethics Office at [REDACTED] or lynda.mcneil@mcgill.ca.

Please note that two consent forms will be signed. One copy will be kept by the principal research, and the second copy will be provided to you. Thank you for your participation.

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PhD Candidate
McGill University - School of Social Work
[REDACTED]
Ilyan.ferrer@mail.mcgill.ca

Shari Brotman (Supervisor)
Associate Professor
McGill University - School of Social Work
[REDACTED]
Shari.brotman@mcgill.ca

APPENDIX E: Participant Consent Form (Community Stakeholders)



Aging in the context of immigration and labour: The case of older Filipino migrants

PARTICIPANT CONSENT FORM (Community Stakeholders)

The purpose of this study is to understand the aging experiences of older Filipinos as they relate to immigration, and labour and care. This study is being conducted for my doctoral dissertation in the School of Social Work at McGill University.

For this study, I would like to interview you about your experiences with older Filipinos in Canada. Some of the topics that we will be discussing are: dealing with older Filipino adults and their families, the extent to which your organization is mandated to serve the older Filipino community, and your thoughts on aging among Filipinos. The interview should last about one to two hours, and with your agreement, I would like to audio tape this interview.

By participating in this interview, you are given the opportunity to voice your own experiences in working with the older Filipino population, and to discuss what you find to be relevant in their aging experiences. Your participation in the project will be completely voluntary, and you have the choice to withdraw and/or stop the interview at any time. You are free to refuse to answer any or all of the questions, and may request that your portion of the interview be excluded from the study. To assure your confidentiality, you will be given a pseudonym so that your experiences will not be revealed in an identifiable way. The audio recording of your interview will be transcribed and then coded for analytical purposes. For example some of your stories will be coded and then categorized in order to better understand how older Filipinos enter and age in Canada. This information will then be stored and secured in a computer file at my office (Rm 313) in the School of Social Work. Once again, no identifiable information will be used in the transcription or stored files. Access to this information will be given to myself and my supervisor (Dr. Shari Brotman), and will be disposed of after a period of 12 months. At the end of the interview, copies of the transcript will be sent to you if you desire.

I might also ask for a follow-up interview for clarification purposes (to clarify what you might have said in our first interview).

Results of this study will likely inform the ways in which older Filipino men and women age in Canadian society. General themes and findings will be disseminated through various social gerontology journals (for example: The Journal of Gerontological Social Work) and conferences (for example: The Canadian Association of Gerontology). Moreover, I intend on presenting the study's results through workshops and presentations in various community organizations within the Cote des Neiges area.

Please sign below if you agree to participate in the study:

- I agree to have the interview audio-taped for analysis purposes
_____ Yes _____ No

Name (or initials): _____
Signature _____
Date _____

Interviewer: _____
Signature _____
Date _____

If you have any questions or concerns, please feel free to contact the principal researcher (Ilyan Ferrer) and/or his supervisor (Dr. Shari Brotman) in the coordinates listed below. Furthermore, if you have any questions or concerns regarding your rights or welfare as a participant in this research study, please contact the McGill Ethics Office at [REDACTED] or lynda.mcneil@mcgill.ca.

Please note that two consent forms will be signed. One copy will be kept by the principal research, and the second copy will be provided to you. Thank you for your participation.

Ilyan Ferrer
PhD Candidate
McGill University - School of Social Work
[REDACTED]
Ilyan.ferrer@mail.mcgill.ca

Shari Brotman (Supervisor)
Associate Professor
McGill University - School of Social Work
[REDACTED]
Shari.brotman@mcgill.ca

APPENDIX F: Interview Guides

INTERVIEW QUESTIONS FOR OLDER FILIPINO ADULTS

- 1) “I’m interested in how older Filipinos first come to Canada, the work they do, and how these experiences might affect aging. What can you tell me about this?”
- 2) “Let’s talk about how you came into Canada. How long have you been here? Do you remember how you came, and the type of work of you did upon arrival?”
- 3) “How do you think the experience of migration has affected the way you live now? How did migration affect family relationships, or caring relationships?”
- 4) “What kind of help do you give to your family? What kind of help do they give you?”
- 5) “Can you speak about your experiences of growing older in Canada? Can you speak about your experiences of growing older in the Philippines?”
- 6) “What are the major issues that might affect Filipino seniors as they grow older?”

GUIDING QUESTIONS FOR PARTICIPANT OBSERVATIONS: OLDER FILIPINO ADULTS

- 1) What are the spaces occupied by older Filipino adults?
- 2) How do older Filipino adults and their families use public spaces?

INTERVIEW QUESTIONS FOR FILIPINO FAMILY UNIT

- 1) “I’ve been speaking with older Filipino adults about their experiences of migration, and care, and how this might affect their experiences of aging. What I’d like to hear from you are the reasons you decided to bring your parent(s) to Canada.”
- 2) “Can you talk about the step by step process of how they came to Canada? When it was first brought up; what made your parent decide to come?”
- 3) “What roles do your parent(s) have in your life? What role do you play in your parent’s life?”
- 4) “Can you describe some of the difficulties that your parents have encountered with regards to aging?”

INTERVIEW QUESTIONS FOR COMMUNITY ORGANIZATIONS

- 1) “I’m interested in the experiences of older Filipinos, and was wondering whether you work with them; why or why not?”
- 2) “What is the experience of your organization in relation to aging immigrants?”
- 3) “In your experience, what are the specific service needs of older immigrants? What would you say are the most notable gaps in service provision?”
- 4) “Given your experiences in working older immigrants, what policy recommendations do you have in order to address gaps or issues related to aging, immigration and/or care?”

GUIDING QUESTIONS FOR TEXTUAL ANALYSIS

- 1) What is the overarching language used within this document?
- 2) To what extent does this policy affect racialized older adults?
- 3) What is the dominant language within each policy?
- 4) To what extent does this policy address the needs of racialized older adults?
- 5) What conditions are put into place that regulate (or pose as barriers) older adults
- 6) Who are the benefactors of this policy? Who is neglected from this policy?

APPENDIX G: Texts as empirical data

List of references used as empirical data for textual analysis

Total number of texts: 48

- 1) After you apply: Get next steps (CIC). Retrieved from the Department of Citizenship and Immigration Canada (CIC). http://www.cic.gc.ca/english/visit/supervisa/next_steps.asp
- 2) Allowance for people aged 60 to 64 – Overview (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/old-age-security/guaranteed-income-supplement/allowance.html>
- 3) Allowance for the survivor (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/old-age-security/guaranteed-income-supplement/allowance-survivor.html>
- 4) Apply – Visit your children or grandchildren (CIC). Retrieved from the Department of Citizenship and Immigration Canada (CIC). <http://www.cic.gc.ca/english/visit/supervisa-how.asp>
- 5) Canada Pension Plan – Overview (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp.html>
- 6) Canada Pension Plan – Eligibility (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/cpp-benefit/eligibility.html>
- 7) Canada Pension Plan – How much could you receive (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/cpp-benefit/amount.html>
- 8) Canada Pension Plan – What you need before you start (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/cpp-benefit/before-apply.html>
- 9) Canada Pension Plan – Apply (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/cpp-benefit/apply.html>
- 10) Canada Pension Plan – After you’ve applied (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/cpp-benefit/after-apply.html>
- 11) Canada Pension Plan – While on CPP benefits (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/cpp-benefit/while-receiving.html>
- 12) Caregiver Program (CIC). Retrieved from the Department of Citizenship and Immigration Canada (CIC). <http://www.cic.gc.ca/english/immigrate/caregivers/index.asp>
- 13) Check application processing times (CIC). Retrieved from the Department of Citizenship and Immigration Canada (CIC). <http://www.cic.gc.ca/english/information/times/index.asp>
- 14) Determine your eligibility – Visit your children or grandchildren (CIC). Retrieved from the Department of Citizenship and Immigration Canada (CIC). <http://www.cic.gc.ca/english/visit/supervisa-who.asp>
- 15) Extend your stay in Canada as a visitor (CIC). Retrieved from the Department of Citizenship and Immigration Canada (CIC). <http://www.cic.gc.ca/english/visit/extend-stay.asp>
- 16) Family sponsorship (CIC). Retrieved from the Department of Citizenship and Immigration Canada (CIC). <http://www.cic.gc.ca/english/immigrate/sponsor/index.asp>
- 17) Find out if you need an electronic travel authorization (eTA) or a visitor visa (CIC). Retrieved from the Department of Citizenship and Immigration Canada (CIC). <http://www.cic.gc.ca/english/visit/visas.asp>

- 18) Guaranteed Income Supplement – Overview (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/old-age-security/guaranteed-income-supplement.html>
- 19) Guaranteed Income Supplement – Eligibility (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/old-age-security/guaranteed-income-supplement/eligibility.html>
- 20) Guaranteed Income Supplement – How much could you receive (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/old-age-security/guaranteed-income-supplement/benefit-amount.html>
- 21) Guaranteed Income Supplement – What you need before you start (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/old-age-security/guaranteed-income-supplement/before-applying.html>
- 22) Guaranteed Income Supplement – Apply (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/old-age-security/guaranteed-income-supplement/apply.html>
- 23) Guaranteed Income Supplement – After you’ve applied (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/old-age-security/guaranteed-income-supplement/after-applying.html>
- 24) Guaranteed Income Supplement – While on GIS (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/old-age-security/guaranteed-income-supplement/while-receiving.html>
- 25) Letter of invitation (CIC). Retrieved from the Department of Citizenship and Immigration Canada (CIC). <http://www.cic.gc.ca/english/visit/letter.asp>
- 26) Old Age Security – Overview (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/old-age-security.html>
- 27) Old Age Security – Eligibility (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/old-age-security/eligibility.html>
- 28) Old Age Security – How much could you receive (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/old-age-security/benefit-amount.html>
- 29) Old Age Security – What you need before you start (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/old-age-security/before-applying.html>
- 30) Old Age Security – Apply (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/old-age-security/apply.html>
- 31) Old Age Security – After you’ve applied (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/old-age-security/after-applying.html>
- 32) Old Age Security – While on Old Age Security (Service Canada). Retrieved from Canada.ca. <https://www.canada.ca/en/services/benefits/publicpensions/cpp/old-age-security/while-receiving.html>
- 33) Prepare for arrival – Visit Canada (CIC). Retrieved from the Department of Citizenship and Immigration Canada (CIC). <http://www.cic.gc.ca/english/visit/supervisa/arrival.asp>
- 34) Citizenship and Immigration Canada (2011), “Government of Canada to cut backlog and wait times for family reunification – Phase I of Action plan for Faster Family Reunification”, available at: <http://news.gc.ca/web/article-en.do?nid=635499> (accessed 3 May 2013).

- 35) Citizenship and Immigration Canada (2012), “Parent and Grandparent Super Visa a great success”, available at: <http://news.gc.ca/web/article-en.do?nid=675029> (accessed 7 May 2013).
- 36) Citizenship and Immigration Canada (2013a), “Backgrounder – Action Plan for Faster Family Reunification: Phase II”, available at: <http://www.cic.gc.ca/english/department/media/backgrounders/2013/2013-05-10b.asp> (accessed 5 January, 2014).
- 37) Citizenship and Immigration Canada (2013b), “Backgrounder – Action plan for faster family reunification”, available at: <http://www.cic.gc.ca/english/department/media/backgrounders/2013/2013-10-29a.asp> (accessed 12 February, 2015).
- 38) Citizenship and Immigration Canada (2013c), “Speaking notes for the honourable Jason Kenney, P.C., M.P. Minister of Citizenship, Immigration and Multiculturalism”, available at: <http://www.cic.gc.ca/english/department/media/speeches/2013/2013-05-10.asp> (accessed 5 January, 2014).
- 39) Citizenship and Immigration Canada. (2014a). *Live in Caregivers*. Available at: <http://www.cic.gc.ca/ENGLISH/work/caregiver/index.asp> (accessed 7 January 2015).
- 40) Citizenship and Immigration Canada (2014b). http://news.gc.ca/web/article-en.do?nid=898729&_ga=1.88917784.242401776.1443999467 (accessed 7 January 2015).
- 41) Citizenship and Immigration Canada (2011), “Government of Canada to cut backlog and wait times for family reunification – Phase I of Action plan for Faster Family Reunification”, available at: <http://news.gc.ca/web/article-en.do?nid=635499> (accessed 3 May 2013).
- 42) Citizenship and Immigration Canada (2012), “Parent and Grandparent Super Visa a great success”, available at: <http://news.gc.ca/web/article-en.do?nid=675029> (accessed 7 May 2013).
- 43) Employment and Social Development Canada. (2015). Minister Wong announces new initiative to help vulnerable seniors receive CPP and OAS benefits. Retrieved from: <http://news.gc.ca/web/article-en.do?nid=921809>
- 44) Flaherty, J. (2012). Economic Action Plan 2012 Jobs, Growth and Long-Term Prosperity: The Budget Speech. Retrieved from: <http://www.budget.gc.ca/2012/rd-dc/speech-eng.pdf>
- 45) International Labour Organization (2011). Convention concerning decent work for domestic workers. Retrieved from: http://www.ilo.org/dyn/normlex/en/f?p=NORMLEXPUB:12100:0::NO::P12100_ILO_CODE:C189
- 46) Liberal Party of Canada. (2015). Liberals committed to helping Canadian seniors [Press release]. Retrieved from <http://www.liberal.ca/liberals-committed-to-helping-canadian-seniors/>
- 47) Service Canada. (2014). The Old Age Security Pension. Ottawa, ON: Service Canada.
- 48) Service Canada. (2015). *Canada Pension Plan Retirement Pension*. Retrieved from <http://www.servicecanada.gc.ca/eng/services/pensions/cpp/retirement/index.shtml>

APPENDIX H: Field Observations

Participant Observation Notes #1: December 11th, 2012 at Local mall

Today I went to the local mall with Stacy (name changed for anonymity) to recruit participants for my study. Stacy is a long-time activist who I've worked with for several years in Montreal. While at the mall, it always struck me how the building served as a defacto daycare. While the interior looked like it was in a state of disrepair, where floor tiles were chipped or noticeably worn down, it maintains a character or past. An aura about the building can be sensed, where it was once the community center from a past time. Commercial shops are in the minority. Instead, there are a lot of locally run stores running from dentists, local jewelers, furniture salespeople, and even a grocery shop. It is one of the very few places I've been (perhaps Chinatown but even then, you see local tourists), where the clientele is decidedly immigrant and working class. The basement was where most of the action was. Older Filipinos congregated with a diversity of people. Groups would stay near the escalators and members would visit each other every so often. There were three events or main observations that caught my eye as I underwent the process of recruitment.

- 1) **The presence of a Walmart, and other signs of gentrification:** Walking to the food court, I notice the new Walmart which replaced the old Zellers. I wonder to what extent will the presence of a major corporation will impact the surrounding neighborhoods that have thus far withstood gentrification. Is this borough, which has a rich history and legacy of immigrants and racialized poor, able to coexist with these larger corporations.*
- 2) **The basement food court:** Stacy and I eventually found ourselves at the basement food court, where a swath of older adults from different communities are congregating. Stacy directs me to three older women over the age of 65, and each having canes. It seems that they have already eaten, and are waiting for their adult children to pick them up. I would learn that this represented their routine; especially during the winter months. Rather than stay home, they would be brought to the mall with their children, and at the end of the day picked up after their sons and daughters were done with their work. We spent a few minutes chit-chatting in Tagalog (my limited spoken ability rendered me an active listener throughout the exchange) and introduced myself as a research looking to highlight Filipino experiences of aging. One of the women, Nanay Leni (name changed for anonymity), spoke at length about how she was preparing to leave for the Philippines for a period of 6 months to take care/be cared for by family in the homeland. She mentioned a preference of living in the Philippines but could only stay for a maximum of 6 months because the "government" would take away her pension if she stayed longer. She recently lost her husband, who she was married to for more than 60 years. Her children, who she had in her early 20s are even entering late life! My assumption that Nanay Leni was taking care of her grandchildren was right, as she spoke proudly of how her great granddaughter was now in university. Now that they have grown Nanay Leni proudly declared that she can spend more time walking [the mall], and going to the Philippines to avoid the arduous Montreal winters. Nanay Leni talked about receiving a federal and provincial pension even though she never worked a day on Canadian soil. She explained that when she was sponsored by her children, she was declared as a caregiver to her grandchildren while they worked in the secondary labour market. At the time, she didn't receive a fixed income (rather it was declared), and she would do this under the table. The ways in which Filipinos can survive amidst surveillance and eligibility of the state is something that I have always admired as a Filipino. This was valorized by my family; survival with as little*

resources as possible. With this pension, Nanay Leni could provide for her large family back home. I would assume that Nanay Leni receives about \$1000 a month. She sends some of this to the Philippines, and proudly described how she was planning to send a tricycle to one of her great grand-nieces. Nanay Leni also talked about how she used to live outside of the city but inevitably returned to the borough because it was close to the hospitals, her family doctor, and the support of the community. She leaves Stacy and I momentarily to buy a \$2 poutine. She returns with the two older women, who also bought fried chicken and hamburgers. Stacy asks Nanay Leni if she has diabetes, which she laughs off and responds that she's too old to worry about that. Nanay Leni declares that she has spent 22 years in Canada, and spoke about wanting to die in the Philippines because they celebrate death differently. She spoke about owning a plot in her home village, and how she was planning her final resting place with her husband.

- 3) **Who takes care of Lolo Emilio?** This is perhaps the most heartbreaking observation that I saw during my recruitment phase. I knew Lolo Emilio (named changed for anonymity) informally as he would sometimes participate in various community events that we organized. I also knew Lolo Emilio had developed Alzheimer's. So, I was happy and saddened to see him at the mall, where he was walking along consistently and repetitively for almost an hour. Nanay Leni knew Lolo Emilio, and said that they would see him every day as he did laps around the mall. As I saw Lolo Emilio walk up and down the escalators, I began to wonder: who takes care of him? Why is he here? Where is his family?

Participant Observation Notes #2: December 13th, 2012 at local mall

I went with my partner on a brief excursion to the [local mall]. Stacy mentioned that weekends are a better time to see Filipino seniors at the mall because many would be running household errands before going to church, and spending time with family members. There were about three tables with Filipino seniors (mostly men) sitting around and drinking their coffees. I recognized a few, particularly the women I saw earlier this month, and a few of the men I have seen whenever I have been at the local mall.

My first observation was that while there was the usual 10 – 15 seniors who I would characterize as “regulars”, I was a bit surprised that there weren't as many people as I was expecting. Based on what I was told, I assumed that there would be tables filled with seniors. Instead, it just seemed as if the regulars were there having their coffees and chatting. I also wondered whether the weather was at play – Nanay Leni mentioned that she didn't want to venture out when the weather was poor. While it was a frigid minus 15C, there wasn't any snow (it would snow as the day wore on). At the time of my observation, I did not observe anything particularly new. There was a group of 4 Filipino men speaking in Tagalog sipping coffee from the local coffee shop. I was too far to hear what they were saying, but I did see that when two of the older men left, the remaining two joined another older man at another table to resume their socialization. My partner and I began to have a brief conversation on the nature of [the local mall] being such a common area for seniors to meet and congregate. We reflected on what was being told by other Filipino organizers where in the Philippines there is a huge mall in Manila called ‘SM Mall of Asia’ (<http://smmallofasia.com/moa/?p=1097>). While it is one of the largest malls in Asia, and houses a countless number of department stores, many Filipinos enter these spaces not necessarily to shop (because of how expensive the goods were) but as a form of respite, and shelter from the sweltering heat. Is this the type of culture that we see here at [the local mall]?

Participant Observation #3:
December 16th, 2012 at Filipino seniors' event: Monthly birthday celebrations

I took the bus to the [local church], where a Filipino senior's organization was having their monthly birthday celebrations. This is something of a monthly tradition at [the organization]. I arrived at the church at around 13h00. At time of my arrival the place was already set up with its usual podium at center stage, and around 15 tables set up on each side of the hall (around 30 in total). Though there was only a small number of people at the time, the DJ was blasting his music through the sound system, which echoed through the empty halls of the church basement. I never liked attending the event because the music was so loud, and I could not possibly understand how conversations could take place. The following are some field notes I could take while I participated in the event:

Clothing and vending - I return to my seat, as I watch people stroll in. As people enter, those in attendance quickly and enthusiastically welcome the incoming guests. They all settle into their seats with the music blaring in the background. People are laughing and smiling as they walk in, shedding themselves of their winter garb. The mostly women in attendance complement each other on the clothes that they are wearing, and even have some items to exchange. Some older women go to the back of the hall where there is the vendor ready to sell affordable clothing or exotic clothing from the Philippines. As both older men and women settle into their tables, they take off their jackets, and withdraw whatever food they have. I notice, that most of them brought snacks like Shrimp chips and garlic popcorn and share it with the entire table. Even though this event is catered, it seems that most know that the food will be served later, and so they snack on whatever they bring. An older woman with graying hair in a bun, takes out her baon (English translation: meal) of rice and meat and shares it with a friend. As she does this, she smiles and laughs at a conversation with her friend – I don't know what because again, the music is blaring.

The age divide – dancing and looking good! Noticing the types of clothes is quite interesting. It seems that everyone is wearing their Sunday best. The men in a nice collared shirt and sweater – some with blazers, and the women with extravagant clothing. Almost immediately after taking out their jackets, I noticed that most of the younger older women take out shoes from their bags. Nearly all have some form of high heels. Much of the younger old women (those in their 60s – 70s) are wearing make-up, and long dresses and heels. Almost immediately after saying the plenary hellos and dressing up, they enthusiastically hit the dance floor. As time passes, more and more people enter the basement, and more and more tables are filled. It's hard to keep up with the people coming in with so much going on.

By the time 15h45 hits, the hall is buzzing with people. It's difficult for me to characterize the types of people who come to these spaces. I can only assume that there is a mix of those who have aged in place, newcomers who have been sponsored. This truly is a mix of people. I would say however, that there is certainly an age divide, and a gendered one too. The number of older women outnumber men by I would say 3 to 1. Like I mentioned in a previous entry, the men are usually content to sit on the sidelines. A bunch of older men (around two tables of them) sit in the back with their beers prominently displayed (they are near the bathroom). The area also smells of cigarettes which I find to be quite funny considering that this is a church, and it is illegal to smoke in public institutions. Surprisingly there are number of white visitors (either partners or people who were invited). Though a few men join in the dancing, it's the women who are consistently there – particularly younger older women who enthusiastically move their arms especially when a familiar song comes on. It's interesting because these women are obviously more agile (even when wearing heels). They're the ones who usually are dancing while the older women (who I would say are over 75 – 80) are sitting watching quietly while everyone

dances. Every so often, and by that, I mean, most of the time, a few older adults engage in some form of line dancing, which is something that I noticed even as a kid. I assume that it must do with the song, but I later realize that this form of dance can be done regardless of song. There was one song that sparked it all, and soon the entire dance hall was dancing in unison.

Older man and younger grandchild – It was during the middle of the celebration where I saw another younger person my age enter the room. There were a handful of younger participants my age, but I was struck by this younger man because I've seen him before in these types of events. He usually emerges with his grandfather who sits with other men his age. This younger man would sit a while and take pictures of the person I assume to be his Lolo. He would leave, and then pick up his assumed family member at the end of the event.

Participant Observation #4: December 30th, 2012 at Community hall

I took the bus to the community hall, a common space for various groups and organizations to hold events. I came in, and noticed that it was standing room only, and I had a bit of difficulty finding a place to sit. Local community leaders from greeted me at the door. I was most struck by the ways in which people at this party clearly had more social capital (or gave the appearance of having more). Generally speaking, the main difference between this event, and the one that I just went to was not only age, but social class. Here, everyone was wearing designer clothes. The mood was more family oriented with a bunch of children running around and playing with the clown. As I set up my coffee, [the organization president] stops the program to acknowledge the presence of the municipal mayor. A heavy applause greets him as he begins a two-minute speech on how important the community is to him; [the president] takes the mic to say that she hopes that he will run for mayor because "we can't forget all the good that he's done for our community". This brings up a heavy applause from the crowd. I couldn't clap to that, and I'm somewhat in shock but not surprised that the community would receive him in this manner. As I've mentioned to several community organizers, municipal politicians are akin to heads of state, and always seem to appear whenever Filipino events are held; and especially during times of elections.

I ran into a Tito; I've known for a long time. After exchanging pleasantries and updates, I finally tell him how frustrated I am at how members of the Filipino community glamorize the [local] mayor. He explains that this is just politics. Our discussion then turns to the [Filipino organization] election this summer. Again, we talk about the inevitable and vicious the politics will be. Tito mentions that the program at the beginning was meant for children, and that seniors would be coming in soon. I mention that the [senior's event] I had just attended was still ongoing, and that despite the weather many people attended.

Participant Observation #5: February 2013 at local church

Following Shari's advice, I went to [the borough] to attend the mass at [local church]. There wasn't a huge opportunity to observe Filipino seniors as most of the church goers ranged in age. But it was nonetheless an opportunity to see the extent to which Filipinos congregate in these spaces, especially knowing that organizations hold events dedicated to seniors in the church basement. This wasn't the best place to observe I sat towards the middle of the pew, and many folks had their backs turned towards us. It was only at the end that I observed interesting dynamics of older Filipinos walking together either with other older people or with their families as they returned to their homes.

JOURNAL ENTRY: Summer 2015

I write this journal entry after hearing an update about Jessica (name changed to protect confidentiality). Jessica is a domestic worker that I had the privilege of meeting a few years ago, and who truly personifies the hardship and difficulties of domestic worker policy in Canada; but at the same time the type of agency and resistance that I have come to respect and appreciate from most Filipina domestic workers I have met. Jessica was completing her hours as a live-in caregiver, when she was fired by her employer for being pregnant (after a trip to the Philippines). Scrambling to find work, Jessica disclosed the hardships of being separated from her family (she was then separated for five years) and watching her young son grow up before her eyes in front of a Skype screen. She spoke lovingly about what she and her family would do in Canada once they were reunited in Canada.

Jessica had a quiet dignity and joy about her. Her smile radiated whenever she spoke about her past and her family. I notice this smile disappear each time I saw her. At first weeks, and then months, and then years. The next time I would see her, Jessica gave birth to her beautiful son Kieran, who was three at the time, and already running around and laughing. Jessica had still not been reunified with her husband and oldest son; although she could secure a new employer and finished the terms of contract. Now awaiting her permanent residency status (which she has applied for), Jessica was unable to place Kieran into public daycare. Thus, while working as a domestic worker for a different employer, Jessica was essentially placing most of her salary to a private daycare; unable to save her money, and unable to request the support of her family who were waiting to be sponsored. The smile that once radiated on Jessica's face was less bright, but still a glimmer of hope when we discussed the possibility of reunifying with her family. Jessica was perplexed that her son, a Canadian by birthright was unable to access Canadian services (daycare).

A year would go by when I heard that Jessica received her permanent residency, and could reunify with her oldest son, and husband. I smiled to myself knowing that Jessica's hardship and barriers were somewhat alleviated by the reunification of her family; something that she always talked about. I would not let the thoughts of the challenges that Filipinos face interrupt the joy that was emanating through Jessica and her family – the barriers that her oldest child might face, the secondary labour market work that probably welcomed her husband, the vicious cycle known as the racialized poverty. I have come to learn that sometimes, just sometimes, we have to appreciate the small victories when they come. Jessica never wavered with everything that she has gone through; something that I am not sure I would have the same strength and resolve to get through. At the time of writing this entry, I learned a few days ago that Jessica's husband passed away from a brain aneurysm. Just as they were getting reacquainted a family, a rupture was presented to Jessica. These are ruptures that seem to continue despite decades of reform, and advocacy work on domestic worker policy. I can't help but think about how Jessica will age in Canadian society. What will happen to her children? While the newly instituted Caregiver Program has been introduced to ward off criticism of its abuses, it at the same time has curtailed one of the opportunities through which Filipinos can come permanently into Canada. What happens now to a people who have, and continue to be valorized and commodified for our labour?

APPENDIX I: Summary of journal articles

LITERATURE ON CAREGIVING

Author	Year	Title	Publishing Journal
Abel-ghany, M	2008	Problematic progress in Asian: Growing older and apart	<i>Journal of Family and Economic Issues</i>
Ajrouch, KJ	2005	Arab-American immigrant elders' views about social support	<i>Ageing and Society</i>
Amin, I., Inmgan, S	2014	Eldercare in the Transnational Setting: Insights from Bangladeshi Transnational Families in the United States	<i>Journal of Cross Cultural Gerontology</i>
Armstrong, M. J.	2003	Is being a grandmother being old? Cross-ethnic perspectives from New Zealand.	<i>Journal of Cross-Cultural Gerontology,</i>
Alizadeh-khoei, M., Matthews, MR., Hossain, SZ	2011	The Role of Acculturation in Health Status and Utilization of Health Services among the Iranian Elderly in Metropolitan Sydney	<i>Journal of Cross Cultural Gerontology</i>
Angel, J., et al.	2014	Nativity Status and Sources of Care Assistance Among Elderly Mexican-Origin Adults	<i>Older people; Hispanics; Caregivers; Families & family life</i>
Baldassar, L	2007	Transnational Families and Aged Care: The Mobility of Care and the Migrancy of Ageing	<i>Journal of ethnic and migration studies,</i>
Becker, G.	2002	Dying away from home: quandaries of migration for elders in two ethnic groups.	<i>The journals of gerontology. Series B, Psychological sciences and social sciences</i>
Boontarika, N., Kusakabe, K.	2013	Issues challenging future Thai elder care by women and family	<i>The International Journal of Sociology and Social Policy</i>
Bourgeault, IL., Atanackovic, J., Rashid, A., Parpia, R.	2010	Relations between Immigrant Care Workers and Older Persons in Home and Long-Term Care	<i>Canadian Journal on Aging</i>
Burr, JA., Mutchler, JE., Gerst-emerson, K.	2013	Residential Segregation, Nativity Status, and Hispanic Living Arrangements in Later Life	<i>Population Research Policy Review</i>
Brown, SH., Herrera, AP, Angel, JL	2013	Opportunity Costs Associated with Caring for Older Mexican-Americans	<i>Journal of Cross Cultural Gerontology</i>
Bryant, L., Lim, S.	2013	Australian-Chinese families caring for elderly relatives	<i>Ageing and Society</i>
De valk, HA., Schans, D.	2008	'They ought to do this for their parents': perceptions of filial obligations among immigrant and Dutch older people	<i>Ageing and Society</i>
Cangiano, A., Shutes, I.	2010	Ageing, demand for care and the role of migrant care workers in the UK	<i>Journal of Population Ageing</i>

Carr, D.	2011	Racial differences in end-of-life planning: Why don't blacks and Latinos prepare for the inevitable?	<i>Journal of Death and Dying</i>
Casado, B.L., & Leung, P.	2001	Migratory grief and depression among elderly Chinese American immigrants	<i>Journal of Gerontological Social Work</i>
Cravey, T. and A. Mitra	2011	Demographics of the sandwich generation by race and ethnicity in the United States.	<i>Journal of Socio-Economics</i>
Chappell, N., Funk, L.	2011	Filial Caregivers; Diasporic Chinese Compared with Homeland and Host Land Caregivers	<i>Journal of Cross-Cultural Gerontology</i>
Chappell, N., Funk, L.	2012	Filial responsibility: does it matter for caregiving behaviors	<i>Ageing and Society</i>
Choi, et al.	2014	The Experience of Korean Immigrant Women Adjusting to Canadian Society	<i>Journal of Cross Cultural Gerontology</i>
Chowdhury, R., Gutman, G.	2012	Migrant Live-in Caregivers Providing Care to Canadian Older Adults: An Exploratory Study of Workers' life and job satisfaction	<i>Journal of Population Ageing</i>
Delgadillo, L., Sorensen, S., Coster, D.C.	2004	An Exploratory Study of Preparation for Future Care Among Older Latinos in Utah	<i>Journal of Family and Economic Issues</i>
Dilworth-Anderson, P., Williams, I. C., & Gibson, B. E.	2002	Issues of Race, Ethnicity, and Culture in Caregiving Research: A 20-Year Review	<i>Gerontologist.</i>
Diwan, S., Lee, S., Sen, S.	2011	Expectations of Filial Obligation and Their Impact on Preferences for Future Living Arrangements of Middle-Aged and Older Asian Indian Immigrants	<i>Journal of Cross Cultural Gerontology</i>
Fiori, K., Consedine, NS., Magai, C.	2008	Ethnic differences in patterns of social exchange among older adults: the role of resource context	<i>Ageing and Society</i>
Fiori, KL., Consedine, NS., Magai, C.	2009	Late Life Attachment in Context: Patterns of Relating Among Men and Women from Seven Ethnic Groups	<i>Journal of Cross Cultural Gerontology</i>
Forssell, E., Torres, S., Olaison, A	2015	Care managers' experiences of cross-cultural needs assessment meetings: the case of late-in life immigrants	<i>Ageing and Society</i>
Funk, LM	2012	'Returning the love', not 'balancing the books': talk about delayed reciprocity in supporting ageing parents	<i>Ageing and Society</i>
Garrouette, E. M., Sarkisian, N., Goldberg, J., Buchwald, D., & Beals, J.	2008	Perceptions of medical interactions between healthcare providers and American Indian older adults	<i>Journal of Social Science and Medicine</i>
Gerst, K., Burr, J.A	2011	Welfare Use Among Older Hispanic Immigrants: The Effect of State and Federal Policy	<i>Population research and Policy Review</i>
Goodman, C., Silverstein, M.	2002	Grandmothers raising grandchildren: Family structure and well-being in culturally diverse families	<i>The Gerontologist</i>

Graham, C. L., Ivey, S. L., & Neuhauser, L.	2009	From hospital to home: Assessing the transitional care needs of vulnerable seniors	<i>Gerontologist</i>
Grewal, I., Nazroo, J., Bajekal, M., Blane, D., & Lewis, J.	2004	Influences on quality of life: a qualitative investigation of ethnic differences among older people in England.	<i>Journal of ethnic and migration studies</i>
Haralambous et al.	2014	Help seeking in older Asian people with dementia in Melbourne: Using the Cultural Exchange Model to explore barriers and enablers	<i>Journal of Cross Cultural Gerontology</i>
Heikkila, K., Ekman, SL	2003	Elderly Care for Ethnic Minorities -- Wishes and Expectations among Elderly Finns in Sweden	<i>Ethnicity and Health</i>
Heikkinen, S	2011	Exclusion of Older Immigrants from the Former Soviet Union to Finland: The Meaning of Intergenerational Relationships	<i>Journal of Cross Cultural Gerontology</i>
Hilcoat-nalletamby, S.	2010	Exploring Intergenerational Relations in a Multicultural Context: The Example of Filial Responsibility in Mauritius	<i>Journal of Cross Cultural Gerontology</i>
Iecovich, E.	2005	Elder Abuse and Neglect in Israel: A Comparison Between the General Elderly Population and Elderly New Immigrants	<i>Family Relations</i>
Johnson, K. S., Kuchibhatla, M., & Tulskey, J.A.	2008	What Explains Racial Differences in the Use of Advance Directives and Attitudes Toward Hospice Care?	<i>Journal of the American Geriatrics Society</i>
Katz, R.	2009	Intergenerational family relations and life satisfaction among three elderly population groups in transition in the Israel multi-cultural society	<i>Journal of Cross Cultural Gerontology</i>
Koehn, S.	2009	Negotiating candidacy: ethnic minority seniors' access to care.	<i>Ageing & Society</i>
Koehn, S., Neysmith, S., Kobayashi, K., Khamisa, H.	2013	Revealing the shape of knowledge using an intersectionality lens: results of a scoping review on the health and health care of ethnocultural minority older adults	<i>Ageing and Society</i>
Kobayashi, K., Funk, L	2010	Of the Family Tree: Congruence on Filial Obligation between Older Parents and Adult Children in Japanese Canadian Families	<i>Journal on Aging</i>
Kosloski, K., Schaefer, J., Allwardt, D., Montgomery, R., & Karner, T	2002	The Role of Cultural Factors on Clients' Attitudes Toward Caregiving, Perceptions of Service Delivery, and Service Utilization.	<i>Home Health Care Services Quarterly</i>
Kuhn, R., Everett, B., Silvey, R.	2011	The Effects of Children's Migration on Elderly Kin's Health: A Counterfactual Approach	<i>Demography</i>
Lai, D. W. L. & Chau, S.B.	2007	Predictors of Health Service Barriers for Older Chinese Immigrants in Canada	<i>Health & Social Work</i>
Liu, Y.-L.	2003	Aging Service Need and Use Among Chinese American Seniors: Intragroup Variations.	<i>Journal of Cross-Cultural Gerontology,</i>
Lee, SP	2014	The rhythm of ageing amongst Chinese elders in sheltered housing	<i>Ageing and Society</i>

Lee YS., Chadhuri, A., Yoo, G.J	2015	Caring from Afar: Asian H1B Migrant Workers and Aging Parents	<i>Journal of Cross Cultural Gerontology</i>
Liu, D., Hinton, L., Tran, C., Hinton, D., Barker, JC	2008	Re-examining the Relationships Among Dementia, Stigma, and Aging in Immigrant Chinese and Vietnamese Family Caregivers	<i>Journal of Cross Cultural Gerontology</i>
Lowenstein, A., Katz, R	2005	Living arrangements, family solidarity and life satisfaction of two generations of immigrants in Israel	<i>Ageing and Society</i>
Lowenstein, A., Daatland, S.O	2006	Filial norms and family support in a comparative cross-national context: evidence from the OASIS study	<i>Ageing and Society</i>
Machizawa, S., Lau, DT	2010	Psychological Needs of Japanese American Elders: Implications for Culturally Competent Interventions	<i>Journal of Cross Cultural Gerontology</i>
Mahoney, DF., Cloutterbuck, J., Neary, S., Zhan, L.	2005	African American, Chinese, and Latino Family Caregivers' Impressions of the Onset and Diagnosis of Dementia: Cross-Cultural Similarities and Differences	<i>The gerontologist</i>
Martin, S. S., Trask, J., Peterson, T., Martin, B. C., Baldwin, J., & Knapp, M.	2010	Influence of culture and discrimination on care-seeking behavior of elderly African Americans: a qualitative study.	<i>Social work in public health</i>
Min, J. W. and C. Barrio	2009	Cultural Values and Caregiver Preference for Mexican-American and Non-Latino White Elders	<i>Journal of Cross-Cultural Gerontology</i>
Min, J.W	2005	Cultural competency: A Key to Effective Future Social Work with Racially and Ethnically Diverse Elders	<i>Social work; Multiculturalism & pluralism; Older people</i>
Milne, A., & Chryssanthopoulou, C.	2005	Dementia Care-giving in Black and Asian Populations: Reviewing and Refining the Research Agenda	<i>Journal of community & applied social psychology</i>
Miyawaki, CE	2016	Caregiving Practice Patterns of Asian, Hispanic, and Non-Hispanic White American Family Caregivers of Older Adults Across Generations	<i>Journal of Cross Cultural Gerontology</i>
Nguyen, D.	2010	The effects of sociocultural factors on older Asian Americans' access to care	<i>Journal of Gerontological Social Work</i>
Nguyen, D., Shibusawa, T.	2013	Gender, Widowhood, and Living Arrangement among Non-married Chinese Elders in the United States	<i>Ageing international</i>
Peek, MK., Stimpson, JP., Townsend, AL., Markides, KS	2006	Well-Being in Older Mexican American Spouses	<i>Gerontologist</i>
Pinquart, M., Sorensen, S.	2005	Ethnic Differences in Stressors, Resources, and Psychological Outcomes of Family Caregiving: A Meta-Analysis	<i>Gerontologist</i>
Porat, I., & Iecovich, E.	2010	Relationships between elderly care recipients and their migrant live-In home care workers in Israel.	<i>Home Health Care Services Quarterly</i>
Rabi, K.	2006	Israeli perspectives on elder abuse	<i>Educational Gerontology</i>

Ramos, B.	2004	Culture, ethnicity, and caregiver stress among Puerto Ricans	<i>Abstracts in Social Gerontology</i>
Redfoot, D., & Houser, A.	2008	The International Migration of Nurses in Long-Term Care.	<i>Journal of Aging & Social Policy</i>
Roberto, K.A., Blieszner, R.	2015	Diverse Family Structures and the Care of Older Persons	<i>Canadian Journal on Aging</i>
Salinas, J.	2008	Tapping Healthcare Resource by Older Mexicans with Diabetes: How Migration to the United States Facilitates Access	<i>Journal of Cross Cultural Gerontology</i>
Sarkisian, N., Gerstel, N.	2004	Kin Support among Blacks and Whites: Race and Family Organization	<i>American Sociological Review</i>
Sacco, P., B. L. Casado, Unick, G.J.	2011	Differential item functioning across race in aging research: An example using a social support measure.	<i>Clinical Gerontologist</i>
Scharlach, A. E., Giunta, N., Chow, J. C. C., Lehning, A.	2008	Racial and ethnic variations in caregiver service use.	<i>Journal of Aging and Health,</i>
Scharlach, A. E. & E. Sanchez	2011	From interviewers to friendly visitors: Bridging research and practice to meet the needs of low-income Latino seniors	<i>Journal of Gerontological Social Work</i>
Siegler, I. C., Brummett, B. H., Williams, R. B., Haney, T. L., & Dilworth-Anderson, P.	2010	Caregiving, residence, race, and depressive symptoms.	<i>Aging and Mental Health</i>
Sudha, S.	2014	Intergenerational Relations and Elder Care Preferences of Asian Indians in North Carolina	<i>Journal of Cross Cultural Gerontology</i>
Solé-Auró, A., & Crimmins, E. M.	2008	Health of Immigrants in European Countries.	<i>International Migration Review</i>
Teshuva, K., Wells, Y	2014	Experiences of ageing and aged care in Australia of older survivors of genocide	<i>Ageing and Society</i>
Taylor, R.J., Chatters, L.M., Woodward, A.T., Brown, E	2013	Racial and Ethnic Differences in Extended Family, Friendship, Fictive Kin, and Congregational Informal Support Networks	<i>Family Relations</i>
Van Hook, J., Glick, J.E.	2007	Immigration and living arrangements: Moving beyond economic need versus acculturation	<i>Demography</i>
Walsh, K., O'shea, E.	2010	Marginalized Care: Migrant Workers Caring for Older People in Ireland	<i>Journal of Population Ageing</i>
Walsh, K., Shutes, I.	2013	Care relationships, quality of care and migrant workers caring for older people	<i>Ageing and Society</i>
Williams, A., Sethi, B., Duggleby, W., Ploeg, J., Markle-Reid, M., Peacock, S., Ghosh, S.	2016	A Canadian qualitative study exploring the diversity of the experience of family caregivers of older adults with multiple chronic conditions using a social location perspective	<i>International Journal for Equity in Health</i>
Wong, S.T., Yoo, G.J., & Stewart, A.L.,	2006	The changing meaning of family support among older Chinese and Korean immigrants.	<i>Journal of Gerontology: Social Sciences</i>

Xiao, L.D., Habel, L., & De Bellis, A.	2015	Perceived Challenges in Dementia Care by Vietnamese Family Caregivers and Care Workers in South Australia	<i>Journal of Cross-Cultural Gerontology</i>
Yarry, S.J., Steven, EK., MacCallum, TJ	2007	Cultural influences on Spousal Caregiving	<i>Generations</i>
Zhan, HJ., Luo, B., Zhang, G.	2013	Faith and Health: Meanings of Faith for Chinese Elders with Diverse Religious Backgrounds	<i>Ageing International</i>

LITERATURE ON HEALTH

Author	Year	Title	Publishing Journal
Abramson, T., Trejo, L., Lai, DWL	2002	Culture and mental health: Providing appropriate services for a diverse older population	<i>Generations</i>
Afable-munsuz, A., Gregorich, SE, Markides, KS., Perez-stable, EJ	2013	Diabetes Risk in Older Mexican Americans: Effects of Language Acculturation, Generation and Socioeconomic Status	<i>Journal of Cross Cultural Gerontology</i>
Algeria, M., Canino, G., Shrout, P.E., Woo, M., Duan, N., Vila, D., Torres, M., Chen, C., & Meng, X.L.	2008	Prevalence of mental illness in immigrant and non-immigrant US Latino groups	<i>American Journal of Psychiatry</i>
Anson,J.	2004	The Migrant Mortality Advantage: A 70 Month Follow-up of the Brussels Population	<i>European Journal of Population</i>
Angel, J.L., Jimenez, M.A., & Angel, R.J.	2007	The economic consequences of widowhood for older minority women.	<i>The Gerontologist</i>
Arean, PA, Alvidrez, J., Nery, R., Estes, C., Linkins, K.	2003	Recruitment and retention of older minorities in mental health services research	<i>The Gerontologist</i>
Barnes, L., Leon, CF., Lewis, T.T., Bienias, JL., & Wilson, RS.	2008	Perceived discrimination and mortality in a population-based study of older adults	<i>American Journal of Public Health</i>
Barrio, C., Palinkas, LA., Yamada, AM., Fuentes, D., Criado, V., Garcia, ., Jeste, DV.	2008	Unmet Needs for Mental Health Services for Latino Older Adults: Perspectives from Consumers, Family Members, Advocates, and Service Providers	<i>Community Mental Health Journal</i>
Becker, G.	2004	Deadly Inequality in the Health Care "Safety Net": Uninsured Ethnic Minorities' Struggle to Live with Life-Threatening Illnesses	<i>Medical Anthropology Quarterly</i>
Black, H. K., White, T., & Hannum, S. M.	2007	The lived experience of depression in elderly African American women	<i>Journals of gerontology Series B, Psychological sciences and social sciences,</i>

Burr, J. A., Mutchler, J.E., & Gerst	2010	Patterns of residential crowding among Hispanics in later life: Immigration, assimilation, and housing market factors.	<i>Journals of Gerontology - Series B Psychological Sciences and Social Sciences</i>
Buys, L, Aird, R., Miller, E.	2012	Active ageing among older adults with lifelong intellectual disabilities: The role of familial and nonfamilial social networks	<i>The Journal of Contemporary Social Services</i>
Bryant, CM., Taylor, RJ., Lincoln, KD., Chatters, LM, Jackson, J.	2008	Marital Satisfaction Among African Americans and Black Caribbeans: Findings From the National Survey of American Life*	<i>Family Relations</i>
Cabo., R & Manly, J.J.	2009	Differences in Rates of Dementia and Quality of Education Among Diverse Older Adults	<i>Generations</i>
Carr, D.	2011	Racial differences in end-of-life planning: Why don't blacks and Latinos prepare for the inevitable?	<i>Journal of Death and Dying</i>
Casado, B.L., & Leung, P.	2001	Migratory grief and depression among elderly Chinese American immigrants	<i>Journal of Gerontological Social Work</i>
Cho, S., et al.	2015	Socio-demographic and Health Behavioral Correlates of Depressive Symptoms among Korean Americans	<i>Community mental health journal</i>
Chow, HPH	2010	Growing old in Canada: physical and psychological well-being among elderly Chinese immigrants	<i>Ethnicity and Health</i>
Chow, H.	2012	Health Care Service Needs and Correlates of Quality of Life: A Case Study of Elderly Chinese Immigrants in Canada	<i>Social Indicators Research</i>
Chow N.	2011	Modernization and its impact on Chinese older people's perception of their own image and status	<i>International Social Work</i>
Consedine, N. S., & Magai, C.	2002	The uncharted waters of emotion: Ethnicity, trait emotion and emotion expression in older adults.	<i>Journal of Cross-Cultural Gerontology</i>
Consedine, N., Magai, C., Conway, F.	2004	Predicting Ethnic Variation in Adaptation to Later Life: Styles of Socioemotional Functioning and Constrained Heterotopy	<i>Journal of Cross-Cultural Gerontology</i>
Coustasse, A., Bae, S., Arvidson, C., Singh, KP., & Trevino, F.	2009	Disparities in ADL and IADL Disabilities among Elders of Hispanic Subgroups in the United States: Results from the National Health Interview Survey 2001-2003	<i>Hospital Topics</i>
Cordasco, KM, Asch, SM., Franco, I., Mangione, CM.	2009	Health literacy and English language comprehension among elderly inpatients at an urban safety-net hospital	<i>Journal of Health and Human services Administration</i>
Crimmins, E. M., Kim, J. K., Alley, D. E., Karlamangla, A., & Seeman, T.	2007	Hispanic paradox in biological risk profiles.	<i>American journal of public health,</i>
Dallo, FJ., Booza, J., Nguyen, ND	2015	Functional Limitations and Nativity Status Among Older Arab, Asian, Black, Hispanic, and White Americans	<i>Journal of immigrant and minority health</i>

Damron-Rodriguez, J., Frank, J.C., Enriquez-Haas, V.L., & Reuben, D.B.	2005	Definitions of Health Among Diverse Groups of Elders: Implications for Health Promotion	<i>Generations</i>
De Jong Gievel, J., et al.	2015	Loneliness of Older Immigrant Groups in Canada: Effects of Ethnic-Cultural Background	<i>Journal of Cross Cultural Gerontology</i>
Diwan, S., Jonnalagadda, S.S., Balaswamy, S.	2004	Resources Predicting Positive and Negative Affect During the Experience of Stress: A Study of Older Asian Indian Immigrants in the United States	<i>Gerontologist</i>
Du, Y. Xu, Q.	2016	Health disparities and delayed health care among older adults in California: A perspective from race, ethnicity, and immigration	<i>Public Health Nursing</i>
Dunlop, D. D., Song, J., Manheim, L. M., Daviglus, M. L., & Chang, R. W.	2007	Racial/ethnic differences in the development of disability among older adults	<i>American journal of public health,</i>
Ejiogu, N., Norbeck, J. H., Mason, M. A., Cromwell, B. C., Zonderman, A. B., & Evans, M. K.	2011	Recruitment and retention strategies for minority or poor clinical research participants: Lessons from the healthy aging in neighborhoods of diversity across the life span study.	<i>Gerontologist</i>
Fernandez-Ballesteros, R. et al.	2010	The concept of 'ageing well' in ten Latin American and European countries	<i>Ageing and Society</i>
Fiori, K.L., Antonucci, T.C., & Akiyama, H.	2008a	Profiles of social relations among older adults: a cross-cultural approach	<i>Ageing and Society</i>
Gallant, M.P., Spitze, G., Grove, J.G.	2010	Chronic Illness Self-care and the Family Lives of Older Adults: A Synthetic Review Across Four Ethnic Groups	<i>Journal of Cross Cultural Gerontology</i>
Gonzalez, H.M., Ceballos, M., Tarraf, W., West, B.T., & Bowen, M.E.	2009	The Health of Older Mexican Americans in the Long Run	<i>American Journal of Public Health</i>
Gorman, B.K., Porter, J.R.	2011	Social Networks and Support, Gender, and Racial/Ethnic Disparities in Hypertension Among Older Adults	<i>Population Research and Policy Review</i>
Guruge, S., Thomson, M.S., Seifi, S.G.	2015	Mental health and service issues faced by older immigrant in Canada: A scoping review	<i>Canadian Journal on Aging</i>
Hayes-Bautista, D.E., Hsu, P., Perez, A., Gamboa, C.	2002	The 'browning' of the graying of America: Diversity in the elderly population and policy Implications	<i>Gerontologist</i>
Higginbottom, G. M. A. (2006)	2006	Pressure of life: ethnicity as a mediating factor in mid-life and older peoples experience of high blood pressure	<i>Sociology of Health and Illness</i>
Hinton, L., Haan, M., Geller, S., Mungas, D.	2003	Neuropsychiatric symptoms in Latino elders with dementia or cognitive impairment without dementia and factors that modify their association with caregiver depression	<i>The Gerontologist</i>

Hilton, JM., Gonzalez, CA., Saleh, M., Maitoza, R., Anngela-Cole, L	2012	Perceptions of Successful Aging among Older Latinos, in Cross-Cultural Context	Journal of Cross Cultural Gerontology
Hung, L.-W., G. I. J. M. Kempen, & De Vries, N.K.	2010	Cross-cultural comparison between academic and lay views of healthy ageing: a literature review	<i>Ageing & Society</i>
Horton, K., Dickinson, A.	2011	The role of culture and diversity in the prevention of falls among older Chinese people	<i>Canadian Journal on Aging</i>
Iliffe, S., & Manthorpe, J	2004	The debate on ethnicity and dementia: From category fallacy to person-centered care?	<i>Aging and Mental Health</i>
Jackson, J.S., et al.	2004	The national survey of American life: A study of racial, ethnic and cultural influences on mental disorders and mental health	<i>International Journal of Methods in Psychiatric Research</i>
Jang, Y., Park, NS., Kang, S., Chiriboga, D.A.	2014	Racial/Ethnic Differences in the Association Between Symptoms of Depression and Self-rated Mental Health Among Older Adults	<i>Community Mental Health Journal</i>
Jang, Y., & Kim, G.	2007	A bidimensional model of acculturation for Korean American older adults	<i>Journal of aging studies.</i>
Jang Y. Chiriboga, DA., Herrera, JR., Martinez, T., Schonfeld, L.,	2011	Attitudes Toward Mental Health Services in Hispanic Older Adults: The Role of Misconceptions and Personal Beliefs	<i>Community Mental Health Journal</i>
Jang, Y., et al	2015	Social Capital in Ethnic Communities and Mental Health: A Study of Older Korean Immigrants	<i>Journal of Cross Cultural Gerontology</i>
Jones, A.	2012	Disability, Health and Generation Status: How Hispanics in the US Fare in Late Life	<i>Journal of Immigrant and Minority Health</i>
Kanitsaki, O.	2002	Mental health, culture and spirituality: implications for the effective psychotherapeutic care of Australia's ageing migrant population	<i>Journal of Religious Gerontology</i>
Kim., G., Chiriboga, D.A., & Jang, Y.	2009	Cultural Equivalence in Depressive Symptoms in Older White, Black, and Mexican-American Adults	<i>Journal of the American Geriatrics Society</i>
Kim, H., Lee,, J.	2005	Unequal Effects of Elders' Health Problems on Wealth Depletion across Race and Ethnicity	<i>The Journal of Consumer Affairs</i>
Kim, G., Jang, Y., Chiriboga, DA	2012	Personal Views about Aging among Korean American Older Adults: The Role of Physical Health, Social Network, and Acculturation	<i>Journal of Cross Cultural Gerontology</i>
Kim, W., Chen, YL.	2011	The Social Determinants of Depression in Elderly Korean Immigrants in Canada: Does Acculturation Matter	<i>Journal of Aging and Human Development</i>
Kobayashi, K.M., Prus, S.G., & Lin, Z.,	2008	Does ethnic differences in self-rated and functional health: Does immigration status matter?	<i>Ethnicity and Health</i>

Koehn, S. et al.	2011	Understanding Chinese-Canadian pathways to a diagnosis of dementia through a critical constructionist lens	<i>Journal of Aging Studies</i>
Kodwo-nyameazea, Y., Nguyen, PV	2008	Immigrants and Long-distance Elder Care: An Exploratory Study	<i>Ageing International</i>
Laditka, JM. et al.	2011	Older adults' concerns about cognitive health: commonalities and differences among six United States ethnic groups	<i>Ageing and Society</i>
Laditka, S et al.	2013	How do older people describe others with cognitive impairment? A multiethnic study in the United States	<i>Ageing and Society</i>
Lai, D.W., Tsang, K.T., Chappell, N., Lai, D.C., & Chau, S.B.	2007	Relationships between cultural and health status: A multi-site study on older Chinese in Canada.	<i>Canadian Journal on Aging</i>
Lai, D.W.	2011	Perceived Impact of Economic Downturn on Worry Experienced by Elderly Chinese Immigrants in Canada	<i>Journal of Family and Economic Issues</i>
Lai, D.W.	2009	Older Chinese' attitudes toward aging and the relationship to mental health: An international comparison.	<i>Social Work in Health Care,</i>
Lai, D.W., & Surood, S.	2008	Predictors of depression in aging South Asian Canadians.	<i>Journal of Cross Cultural Gerontology,</i>
Lai, D.W., & Surood, S.	2010	Types and Factor Structure of Barriers to Utilization of Health Services among Aging South Asians in Calgary, Canada	<i>Canadian Journal on Aging</i>
Lai, DWL, Surood, S.	2013	Effect of Service Barriers on Health Status of Aging South Asian Immigrants in Calgary, Canada	<i>Health and Social Work</i>
Lai, DWL	2016	Ethnic Identity of older Chinese in Canada	<i>Journal of Cross Cultural Gerontology</i>
Landy, D. C. et al.	2011	Hispanic Ethnicity and Unintentional Injury Mortality in the Elderly.	<i>Journal of Surgical Research</i>
Lariscy, JT., Hummer, RA., Hayward, MD	2015	Hispanic Older Adult Mortality in the United States: New Estimates and an Assessment of Factors Shaping the Hispanic Paradox	<i>Demography</i>
Lawrence, V. et al.	2006	Concepts and Causation of Depression: A Cross-Cultural Study of the Beliefs of Older Adults.	<i>Gerontologist</i>
Leach, C., Schoenberg, NE	2008	Striving for Control: Cognitive, Self-Care, and Faith Strategies Employed by Vulnerable Black and White Older Adults with Multiple Chronic Conditions	<i>Journal of Cross-Cultural Gerontology</i>
Litwin, H., Shiovitz-Ezra, S	2006	Network Type and Mortality Risk in Later Life	<i>Gerontologist</i>
Lum, TY., Vanderaa, JP.	2010	Health Disparities Among Immigrant and Nonimmigrant Elders: The Association of Acculturation and Education	<i>Journal of Immigrant and Minority Health</i>
Lee, HS., Mason, D.	2015	A comparative study of coping strategies and optimism among Korean, Korean-American and Caucasian American Older men	<i>Journal of Ethnic and Cultural Diversity</i>

Martin-Matthews, A., Tong, C., Rosenthal, C.J., McDonald, L.	2013	Ethnocultural diversity in the experience of widowhood in later life: Chinese widows in Canada	<i>Journal of Aging Studies</i>
Mathews, A. E. et al.	2009	Older Adults Perceived Physical Activity Enablers and Barriers: A Multicultural Perspective.	<i>Medicine & Science in Sports & Exercise</i>
Markides, K., Rote, S.	2014	Aging, Minority Status, and Disability	<i>Generations</i>
Milne, A., & Chrysanthopoulou, C.	2005	Dementia Care-giving in Black and Asian Populations: Reviewing and Refining the Research Agenda	<i>Journal of community & applied social psychology</i>
Miyawaki, CE	2015	Association of social isolation and health across different racial and ethnic groups of older Americans	<i>Ageing and Society</i>
Mui, AC., Kang, D., Domanski, MD.	2007	English Language Proficiency and Health- Related Quality of Life among Chinese and Korean Immigrant Elders	<i>Health and Social Work</i>
Mui, A., & Lee, ES	2014	Correlates of depression among Chinese and Korean immigrant elders in the US	<i>Ageing International</i>
Mukadam, N., Cooper, C., & Livingston, G.	2011	A systematic review of ethnicity and pathways to care in dementia	<i>International Journal of Geriatric Psychiatry</i>
Murray, K., Marx, D.M.	2013	Attitudes toward unauthorized immigrants, authorized immigrants and refugees	<i>Cultural Diversity and Ethnic Minority Psychology</i>
Mutchler, J.E., Prakash, A., Burr, J.A.	2011	The demography of disability and the effects of immigrant history: Older Asians in the United States	<i>Demography</i>
Nguyen, D., & Lee, R.	2012	Asian immigrants' mental health service use: An application of the life course perspective	<i>Asian American Journal of Psychology</i>
Olshansky, SJ. et al.	2012	Differences In Life Expectancy Due To Race And Educational Differences Are Widening, And Many May Not Catch Up	<i>Health Affairs</i>
Pang, E., Jordan-Marsh, ., Silverstein, M., Cody, M	2003	Health-seeking behaviors of elderly Chinese Americans: Shifts in expectations	<i>The Gerontologist</i>
Parra-Cardona, JR., Meyer, E., Schiamberg, L., Post, L.	2007	Elder Abuse and Neglect in Latino Families: An Ecological and Culturally Relevant Theoretical Framework for Clinical Practice	<i>Family Process</i>
Philipps, DR., Siu, OL., Yeh, AG., Cheng, K.	2008	Informal Social Support and Older Persons' Psychological Well-Being in Hong Kong	<i>Journal of Cross Cultural Gerontology</i>
Poulin, J., Deng, R., Ingersoll, TS, Witt, H., Swain, M.	2012	Perceived Family and Friend Support and the Psychological Well-Being of American and Chinese Elderly Persons	<i>Journal of Cross Cultural Gerontology</i>
Powers, D.	2016	Erosion of Advantage: Decomposing Differences in Infant Mortality Rates Among Older Non- Hispanic White and Mexican-Origin Mothers	<i>Population Research and Policy Review</i>

Prus, SG., Tfairly, R., Lin, Z.	2010	Comparing Racial and Immigrant Health Status and Health Care Access in Later Life in Canada and the United States	<i>Canadian Journal on Ageing</i>
Rabi, K.	2006	Israeli perspectives on elder abuse	Educational Gerontology
Raghuram, P., Bornat, J., & Henry, L.	2011	The co-marking of aged bodies and migrant bodies: Migrant workers' contribution to geriatric medicine in the UK	<i>Sociology of Health and Illness</i>
Ramos, B.	2004	Culture, ethnicity, and caregiver stress among Puerto Ricans	<i>Abstracts in Social Gerontology</i>
Redfoot, D., & Houser, A.	2008	The International Migration of Nurses in Long-Term Care.	<i>Journal of Aging & Social Policy</i>
Rote, S., Markides, K.	2004	Aging, Social Relationships, and Health among Older Immigrants	<i>Generations</i>
Salinas, JJ., Su, D., Al Snih, S.	2013	Paradox: Issues in the Conceptualization of Health Disparities in Older Mexican Americans Living in the Southwest	<i>Journal of Cross Cultural Gerontology</i>
Sandoval, DA., Ran, MR., Hirschl, TA.	2009	The increasing risk of poverty across the American life course	<i>Demography</i>
Schensul, J. et al.	2006	Building Interdisciplinary/Intersectoral Research Partnerships for Community-Based Mental Health Research with Older Minority Adults	<i>American Journal of Community Psychology</i>
Schoenberg, NE, Traywick, LS., Jacobs-lawson, J., Kart, CS	2008	Diabetes Self-care among a Multiethnic Sample of Older Adults	<i>Journal of Cross Cultural Gerontology</i>
Sereny, MD., Gu, D.	2011	Living Arrangement Concordance and its Association with Self-Rated Health Among Institutionalized and Community-Residing Older Adults in China	<i>Journal of Cross Cultural Gerontology</i>
Shibusawa, T., & Mui, A.C.	2009	Stress, coping, and depression among Japanese American elders.	<i>Journal of Gerontological Social Work</i>
Siegler, I. C., et al.	2010	Caregiving, residence, race, and depressive symptoms.	<i>Aging and Mental Health</i>
Solé-Auró, A., & Crimmins, E. M.	2008	Health of Immigrants in European Countries.	<i>International Migration Review</i>
Solway, E., Estes, CE., Goldberg, S., Berry, J.,	2010	Access Barriers to Mental Health Services for Older Adults from Diverse Populations: Perspectives of Leaders in Mental Health and Aging	<i>Journal of Aging and Social Policy</i>
Sun, F., Gao, X., Shen, H., Burnette, D.	2014	Levels and Correlates of Knowledge about Alzheimer's Disease among Older Chinese Americans	<i>Cross-cultural Gerontology</i>
Sorkin, D. & Ngo-Metzger, Q.	2014	The unique health status and health care experiences of older Asian Americans: Research findings and treatment recommendations	Clinical Gerontologist
Tran, T.V., Nguyen, D., Chan, K., Nguyen, T.	2013	The association of self-rated health and lifestyle behaviors among foreign-born Chinese, Korean, and Vietnamese Americans	Quality of Life Research
Uretsky, MC., Mathiesen, SG.	2007	The Effects of Years Lived in the United States on the General Health Status of California's Foreign-Born Populations	Journal of Immigrant and Minority Health

Valencia, WE et al.	2014/ 2015	Diabetes in older Hispanic/Latino Americans: Understanding who is at greatest risk	Generations
Victor, CR., Burholt, V, Martin, W	2012	Loneliness and Ethnic Minority Elders in Great Britain: An Exploratory Study	Journal of Cross Cultural Gerontology
Wagner, J. et al.	2013	Health Beliefs About Chronic Disease and its Treatment Among Aging Cambodian Americans	Journal of Cross Cultural Gerontology
Wallace, SP.	2014/ 2015	Equity and Social Determinants of Health Among Older Adults	Generations
Weitzman, PF., Ballah, K., Levkoff, SE.	2008	Native-born Chinese Women's Experiences in Medical Encounters in the U.S.	Ageing International
Weitzman, PF. Chang, G., Reynoso, H.	2004	Middle-Aged and Older Latino American Women in the Patient-Doctor Interaction	Journal of Cross Cultural Gerontology
Williams, D. et al.	2007	The Mental Health of Black Caribbean Immigrants: Results from the National Survey of American life	American Journal of Public Health
Wu & Penning	2015	Immigration and loneliness in later life	<i>Ageing and Society</i>
Yang, F., Levoff, SE	2005	Ageism and Minority Populations: Strengths in the Face of Challenge	<i>Generations</i>
Yoo, GJ., Musselmn, El., Lee, YS., Yee-Melichar, D	2014/ 2015	Addressing Health Disparities Among Older Asian Americans: Data and Diversity	<i>Generations</i>

LITERATURE ON IMMIGRATION AND MIGRATION

Author	Year	Title	Publishing Journal
Angel, J.L.	2003	Devolution and the social welfare of elderly immigrants: Who will bear the burden?	<i>Public Administration Review</i>
Becker, G.	2003	Meanings of Place and Displacement in Three Groups of Older Immigrants	<i>Journal of Aging Studies</i>
Burr, JA., Gerst, K., Kwan, N., Mutchler, JE	2008	Economic Well-Being and Welfare Program Participation Among Older Immigrants in the United States	<i>Generations</i>
Burr, J., Mutchler, JE	2007	Employment in later life: A focus on race/ethnicity and gender	<i>Generations</i>
Burr, JE., Mutchler, JE	2012	Housing Characteristics of Older Asian Americans	<i>Journal of Cross Cultural Gerontology</i>
Da Rosa et al	2014	Examination of Important Life Experiences of the Oldest-Old: Cross-Cultural Comparisons of U.S. and Japanese Centenarians	<i>Journal of Cross-Cultural Gerontology</i>
de Haas, H., & Fokkema, T.	2010	Intra-household conflicts in migration decision-making: Return and pendulum migration in Morocco	<i>Population and Development Review</i>

De Vos,, & Arias, E.	2003	A Note on the Living arrangements of Elders 1970-2000, with Special Emphasis on Hispanic Subgroup Differentials	<i>Population Research and Policy Review</i>
Dubus, N.	2014	Self perception of when old age begins for Cambodian elders living in the United States	<i>Journal of Cross-cultural Gerontology</i>
Dwyer, P., & Papadimitriou, D.	2006	The Social Security Rights of Older International Migrants in the European Union.	<i>Journal of ethnic and migration studies,</i>
Grewal, I., Nazroo, J., Bajekal, M., Blane, D., & Lewis, J.	2004	Influences on quality of life: a qualitative investigation of ethnic differences among older people in England.	<i>Journal of ethnic and migration studies</i>
Johnson, K., Voss, P.R., Hammer, R.B., Fuguitt, G.V., McNiven, S.	2005	Temporal and spatial variation in age specific net migration in the United States	<i>Demography</i>
Kaida, L., Boyd, M.	2011	Poverty Variations among the Elderly: The Roles of Income Security Policies and Family Co- Residence	<i>Canadian Journal on Aging</i>
Kim, J., Kim, H., DeVaney, S.	2012	Intergenerational transfers in the immigrant family: evidence from the new immigrant survey	<i>Journal of Personal Finance</i>
Lagace, M., Charmarkeh, H., Grandena, F.	2012	Cultural Perceptions of Aging: The Perspective of Somali Canadians in Ottawa	<i>Cross cultural Gerontology</i>
Lewin, A. C. and H. Stier	2003	Immigration, State Support, and the Economic Well-Being of the Elderly in Israel	<i>Research on Aging</i>
Lee, HY, Lee, S., Eaton, CK	2012	Exploring Definitions of Financial Abuse in Elderly Korean Immigrants: The Contribution of Traditional Cultural Values	<i>Cultural Values; Asian Cultural Groups; Immigrants; Elder Abuse; Ethnicity;</i>
Lee, EK., Chan, K.	2009	Religious/Spiritual and Other Adaptive Coping Strategies Among Chinese American Older Immigrants	<i>Journal of Gerontological Social Work</i>
Lui, CW., Warburton, J., Winterton, R., Bartlett, H.	2011	Critical reflections on a social inclusion approach for an ageing Australia	<i>Australian Social work</i>
Lynch, F.R.	2008	Immigrants and the politics of aging boomers: Renewed reciprocity or ‘bade runner’ society?	<i>Generations</i>
Nam, Y.	2014	Immigration and Economic Conditions Among Older Asian Americans	<i>Race and Social Problems</i>
Martin, SS	2012	Exploring Discrimination in American Health Care System: Perceptions/Experiences of Older Iranian Immigrants	<i>Cross Cultural Gerontology</i>
Matsuoka, A., Guruge, S., Koehn, S., Beaulieu, M., Ploeg, J.	2012	Prevention of Abuse of Older Women in the Post- Migration Context in Canada	<i>Canadian Review of Social Policy</i>
McDonald, L.	2011	Theorizing about ageing, family and immigration	<i>Ageing and Society</i>
Murray, K., Marx, D.M.	2013	Attitudes toward unauthorized immigrants, authorized immigrants and refugees	Cultural Diversity and Ethnic Minority Psychology

Ng, CF., Northcott, HC	2015	Living arrangements and loneliness of South Asian immigrant seniors in Edmonton, Canada	Ageing and Society
Oh, J.H.	2003	Social Bonds and the Migration Intentions of Elderly Urban Residents: The Mediating Effect of Residential Satisfaction	Population Research and Policy Review
Preston, V., Kim, A., Hudyma, S., Mandell, N., Luxton, M., Hemphill, J.	2012	Gender, Race, and Immigration: Aging and Economic Security in Canada	Canadian Review of Social Policy
Nam, Y.	2014	Immigration and economic conditions among older Asian Americans	Race and Social Problems
Nguyen, A., Seal, DW	2014	Cross-Cultural Comparison of Successful Aging Definitions Between Chinese and Hmong Elders in the United States	Journal of Cross Cultural Gerontology
Raghuram, P., J. Bornat, J., Henry, L.	2011	The co-marking of aged bodies and migrant bodies: Migrant workers' contribution to geriatric medicine in the UK	<i>Sociology of Health and Illness</i>
Riosmena, F., Wong, R., Palloni, A.	2013	Migration Selection, Protection, and Acculturation in Health: A Binational Perspective on Older Adults	<i>Demography</i>
Selvarajah, C.	2004	Expatriation Experiences of Chinese Immigrants in New Zealand: Factors Contributing to Adjustment of Older Immigrants	<i>Management Research News</i>
Shemirani, F. S., & O'Connor, D.	2006	Aging in a Foreign Country: Voices of Iranian Women Aging in Canada	<i>Journal of Women & Aging,</i>
Shin, J.	2014	Living Independently as an Ethnic Minority Elder: A Relational Perspective on the Issues of Aging and Ethnic Minorities	<i>American Journal of Community Psychology</i>
Takamura, J.	2002	Social policy issues and concerns in a diverse aging society: Implications of increasing diversity	<i>Generations</i>
Tieu, Y., Konnert, C.	2015	Measuring acculturation and enculturation among Chinese Canadian older adults	<i>Canadian Journal on Aging</i>
Torres, S.	2006a	Elderly immigrants in Sweden: 'Otherness' Under construction.	<i>Journal of Ethnic Migration Studies,</i>
Torres, S.	2009	Vignette Methodology and Culture-Relevance: Lessons Learned through a Project on Successful Aging with Iranian Immigrants to Sweden	<i>Journal of Cross-Cultural Gerontology</i>
Torres, S.	2015	Expanding the gerontological imagination on ethnicity: Conceptual and theoretical perspectives	<i>Ageing and Society</i>
Torres-Gil, Suh, Angel	2013	Working across borders: the social and policy implications of aging in the Americas	Journal of Cross-Cultural Gerontology
Torres-Gil & Moga, KB.	2008	Multiculturalism, social policy and the new aging	Journal of Gerontological Social Work
Treas, J.	2008	Transnational Older Adults and Their Families	<i>Family Relations</i>
Treas, J., & Carreon, D.	2010	Diversity and our common future: race, ethnicity and the older American	<i>Generations</i>

Usita, P.	2005	Social geography and continuity effects in immigrant women's narratives of negative interactions	<i>Journal of Aging Studies</i>
Vega, A.	2015	The Impact of Social Security on Return Migration Among Latin American Elderly in the US	<i>Population Research and Policy Review</i>
Vullnetari, J. & King, R.	2008	Does your granny eat grass; On mass migration, care drain and the fate of older people in rural Albania	<i>Global Networks</i>
Warburton, J., McLaughlin, D.	2007	Passing on our culture: How older Australians from diverse cultural backgrounds contribute to civil society	<i>Journal of Cross-Cultural Gerontology</i>
Warnes, A. M., & Williams, A.	2006	Older Migrants in Europe: A New Focus for Migration Studies.	<i>Journal of ethnic and migration studies</i>
Wray, S.	2003	Women Growing Older: Agency, Ethnicity and Culture.	<i>Sociology</i>
Zubair, M., Norris, M.	2015	Perspectives on ageing, later life and ethnicity: ageing research in ethnic minority contexts	<i>Aging and Society</i>
Zubair, M., Victor, C.	2015	Exploring gender, age, time and space in research with older Pakistani Muslims in the United Kingdom: formalized research 'ethics' and performances of the public/private divide in 'the field'	<i>Ageing and Society</i>

FILIPINO-SPECIFIC LITERATURE

Author	Year	Title	Publishing Journal
Becker, G., Beyene, Y., Newsom, E., Mayen, N.	2003	Creating continuity through mutual assistance: Intergenerational reciprocity in four ethnic groups	Journal of Gerontology; Social Sciences
Becker, G.	2003	Meanings of place and displacement in three groups of older immigrants	Journal of Aging Studies
Becker, G; Beyene, Y; Canalita, L.C..	2000	Immigrating for status in later life: Effects of Globalization on Filipino American Veterans	Journal of Aging Studies
Braun, K.L; Browne, C.V	1998	Perceptions of dementia, caregiving, and help seeking among Asian and Pacific Islander Americans.	Health and Social Work
Browne, C.V; Braun, K.L.	2008	Globalization, Women's Migration, and the Long-Term-Care Workforce.	Gerontologist
Browne, C.V.; Braun, K.L.; Arnsberger, P.	2006	Filipinas as residential long-term care providers: influence of cultural values, structural inequity, and immigrant status on choosing this work.	Journal of Gerontological Social Work
Chang, M.;Moon, A.	2016	Correlates and predictors of psychological distress among older Asian immigrants in California.	Journal of Gerontological Social Work

Chow, TW.; Ross, L; Fox, P; Cummings, JL.; Lin, KM.	2000	Utilization of Alzheimer's disease community resources by Asian-Americans in California.	International Journal of Geriatric Psychiatry
Cichello, M.A.; Thomas, T. & Xenos, S	2005	The aged Filipinos in Australia: A case of double jeopardy?	Annual conference of the Australian Association of Gerontology
Costello, MA	1994	The Elderly in Filipino Households: Current Status and Future Prospects.	Sociological Review
de Guzman, AB.; Lacampuenga, PE; Lagunsad, AP	2015	Examining the Structural Relationship of Physical Activity, Cognition, Fear of Falling, and Mobility Limitation of Filipino in Nursing Homes.	Educational Gerontology
de Guzman, AB.; Lacao, RA Larracas, C.	2015	A Structural Equation Modelling on the Factors Affecting Intolerance of Uncertainty and Worry Among a Select Group of Filipino Elderly.	Educational Gerontology
de Guzman, AB.; Satuito, JC; Satumba, M.; Segui, DR.; Serquina, FE.; Serrano, LJ.; Sevilla, MD.	2011	Filipino Arts Among Elders in Institutionalized Care Settings.	Educational Gerontology
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