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FORCED MIGRATION AND SOCIAL EXCLUSION
IN LATER LIFE

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PLACED-Lives

FORCED MIGRATION IN LATER LIFE AS A POLICY CHALLENGE

Forced migration is a global challenge (UNHCR, 2020). Between 2009 and 2019, over 100 million people were displaced world-wide, and 9.2 million people sought asylum in Europe due to armed conflict, violence and natural disasters. In Ireland, 25,306 applications to the Irish International Protection Office have been made in the same period, and there are now sizeable refugee and refugee related populations (including prospective asylum seekers, asylum seekers, persons with protection status, and reunited refugee family members) resident in the state (Department of Children, Equality, Disability, Integration and Youth, 2021). Mirroring global demographic ageing patterns, a growing proportion of this refugee and refugee related population are older. Despite younger age groups dominating forced migration flows, emerging evidence indicates that significant numbers of older people have either migrated as a part of these flows, or have travelled subsequently through family reunification processes (Frounfelker et al., 2020; Mölsä et al. 2014). Consequently, and although there is a lack of data on the precise number of those aged 50 years and over within refugee/refugee related populations in Ireland, there is increasing recognition of older-adult forced migration and related phenomena. There is also growing concern for the wellbeing of older individuals and their longer-term resettlement and integration (UNHCR, 2016).

However, while research on the experiences of ageing migrant populations is becoming more prevalent (c.f. Meeks, 2020), knowledge of those who migrate in later life (outside of retirement migration) is underdeveloped. Consideration of forced migration and related pathways in older age has largely been neglected (Virgincar et al., 2016). The small number of studies that do exist suggest that refugee related migration is a transition in later life that can have substantial psychological impacts on older adults, with

the potential for longer-term vulnerabilities and social exclusion (Frounfelker et al., 2020; Mölsä et al. 2014; Heikkinen 2011). Social exclusion involves the separation of individuals and groups from mainstream society (Moffat and Glasgow, 2009). Pre-migration trauma (e.g. war; religious/racial persecution), the ordeal of migration itself (e.g. hazardous travel), and post-migration stressors (e.g. language difficulties; migration status) are likely to represent sources of risk that individuals have to negotiate (Siriwardhana and Stewart, 2013).

Without understanding how the lived experience of forced migration and related pathways unfolds for older adults – including the sequence and diversity of steps involved – we will always lack insight into the needs of this population, and the ways in which multifaceted forms of social exclusion might manifest.

What is social exclusion in later life?

Social exclusion of older people can be defined as interchanges between multi-level risk factors, processes and outcomes. Varying in form and degree across the older adult life course, its complexity, impact and prevalence is amplified by accumulated group-related disadvantage, old-age vulnerabilities, and constrained opportunities to ameliorate exclusion. Old-age exclusion leads to inequities in choice and control, resources and relationships, and power and rights in key domains of: neighbourhood and community; services, amenities and mobility; material and financial resources; social relations; socio-cultural aspects of society; and civic participation. Old-age exclusion implicates states, societies, communities and individuals.

(Walsh, Scharf and Keating: p.93, 2017)

PURPOSE OF THIS BRIEFING REPORT

This briefing report explores forced migration and the linked process of family reunification as a major transition in later life, and investigates its implications for multidimensional forms of social exclusion. Drawing on findings from the PLACED-Lives research study, the brief presents insights from older adult's lived experiences of this transition. The brief is divided into four sections. First, a short summary of the methodology used to collect and analyse the data will be outlined. Second, findings will be presented on transition trajectories related to forced migration in older age, and the key milestones and changes that can characterise these trajectories for older people. Third, the nature and the impact of these changes on people's lives are outlined in relation to social exclusion. Fourth, policy considerations are drawn from these findings.

This policy brief is a part of the PLACED-Lives Briefing Paper Series. For more information on the series and the PLACED-Lives study, please go to **https://icsg.ie/our-projects/placed-lives/**.

About the PLACED-Lives study

PLACED-Lives aimed to investigate the influence of critical life transitions in the older adult life course on the accumulation of multidimensional social exclusion, and the role of place in protecting against this exclusion.

The study focused on bereavement, dementia on-set and forced migration as examples of critical transitions. This research was supported by the Atlantic Philanthropies.

The study involved a mixed-methods approach and included qualitative and quantitative components, including: 15 interviews with national and local policy and practice stakeholders; 39 interviews with older individuals who experienced these transitions; and secondary analysis of data from The Irish Longitudinal Study of Ageing (TILDA).

The study objectives included:

1. To gather existing research and policy knowledge on older adult life-course transitions, their connections to place, and their association with experiences of exclusion in later life;

2. To develop an empirical understanding of pathways to exclusion arising from life-course transitions;

3. To explore older people's relationship with place for those who have experienced the life-course transitions, in different kinds of places, and to assess the impact of the rupture itself on this relationship;

4. To investigate how relationships with place can buffer against, and/or intensify, multidimensional social exclusion stemming from life-course transitions;

5. To explore what constitutes social inclusion in place for those who have experienced the life-course transitions, living in different kinds of places;

6. To direct a re-orientation of the role of place in policy and practice intervention models for addressing life-course ruptures.

METHODS & DATA

Fifteen in-depth life-course interviews were conducted with nine older women and six older men who experienced forced migration or related family reunification. Participants were aged from 51-77 years, and all individuals had arrived in Ireland after the age of 50 years. Nine participants had experienced forced migration, with five people entering Ireland through undocumented means, and then seeking asylum, and four individuals arriving in Ireland having received refugee status through the UN Refugee Agency's (UNHCR) Refugee Resettlement Programme. The six remaining participants entered Ireland through the family reunification programme. Participants came from a diverse set of countries, including Syria (n=4), Somalia (n=3), Iraq (n=2) and a range of African, and Western and Southern Asian nations. The length of residence in Ireland ranged from three months to 13 years. Most recent entrants, originally from Syria, entered Ireland through the UNHCR's Refugee Resettlement Programme. Participants lived in urban (n=9), urban deprived (n=2) and rural (n=4) areas. While the majority of participants lived in private dwellings, one participant resided in a hostel, and four lived in Emergency Resettlement Centres (EROCs).

Interviews lasted for approximately 1.5 hours and consisted of three parts: an open narrative portion; an in-depth, semi-structured portion; and a series of life-path exercises where participants worked with the researcher to map out (1) their life trajectory before and after migration, including other major events and turning points, (2) their residential history over their lives, and (3) particular points of exclusion and integration across the life course. The life-paths were used together to probe on where these patterns may have intersected. Eight interviews were carried out with the assistance of an interpreter.

Fifteen interviews were also conducted with national and local policy and practice stakeholders who work with ageing populations, including those specifically working with older members of refugee and refugee related populations. Aside from the excerpt 'what stakeholders say' (p.9 of this brief), these interview findings are not described in this briefing report but they have assisted in informing the recommendations presented later in this report. To read about stakeholders' perspectives in detail, please see Urbaniak and Walsh (2020). Ethical approval for the research was provided by the NUI Galway Ethics Committee. All names used in the presentation of findings are pseudonyms.
Data collection took place from 2019-2020, prior to the Covid-19 pandemic.

RESEARCH FINDINGS: FORCED MIGRATION TRAJECTORIES

Unsurprisingly, being displaced from one's home country was a major transition in the lives of participants. Participant experiences varied considerably and were shaped by their socio-economic and family situation, push-factors in their home country and often their ethnic background. Reasons for leaving included: severe economic deprivation; war, conflict and persecution; and environmental and public health crises – all of which placed the welfare of participants and their families at significant risk. Three broad transition trajectories of forced migration and related processes can be identified. These trajectories capture the key milestones and turning points in people's experiences of migration and starting their new lives in Ireland. Figures 1 to 3 present the general sequence of events for: individuals who fled their home countries and arrived in Ireland through undocumented channels: those who arrived through UNHCR's Refugee Resettlement Programme; and those who entered through Ireland's family reunification programme.

As with the other later-life transitions described in this briefing paper series, three broad stages (c.f. van Gennep, 1960) are used to help characterise the migration trajectories. These include: (1) recognising and comprehending the transition; (2) being in-between 'old and new statuses'; (3) incorporating and adapting to the 'new status'. Some steps within these stages were characterised by considerable stress and could occur amidst rapidly changing conditions in home nations. Others involve extended periods of time which exacerbated uncertainties around transitional journeys, bureaucratic processes, recognition of status, and resettlement supports.

Figure 1: Migration trajectory for people who arrived in Ireland through undocumented channels
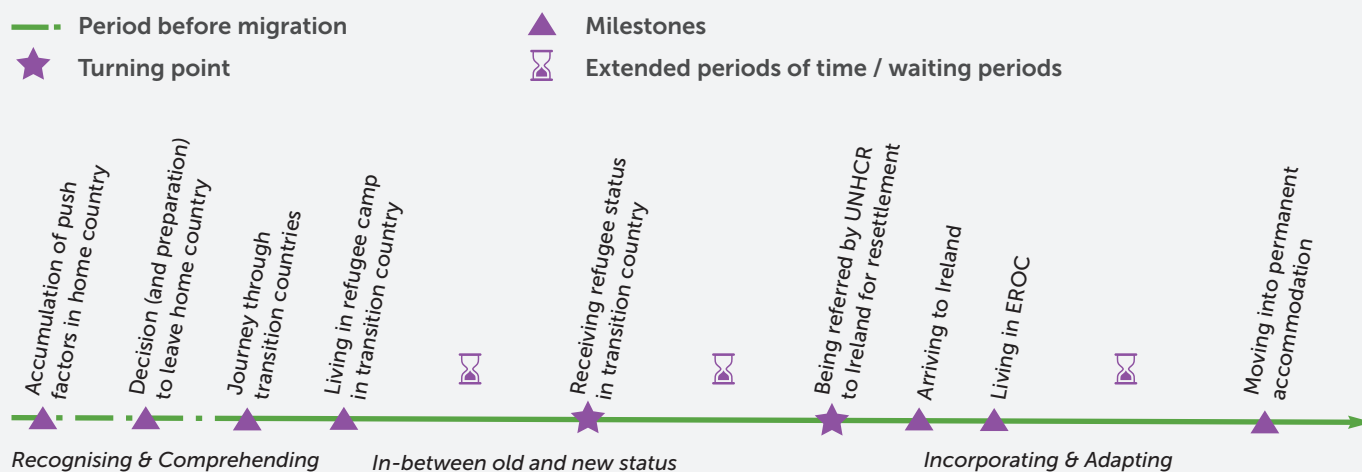
Figure 2: Migration trajectory for people who arrived in Ireland through UNHCR's Refugee Resettlement Programme
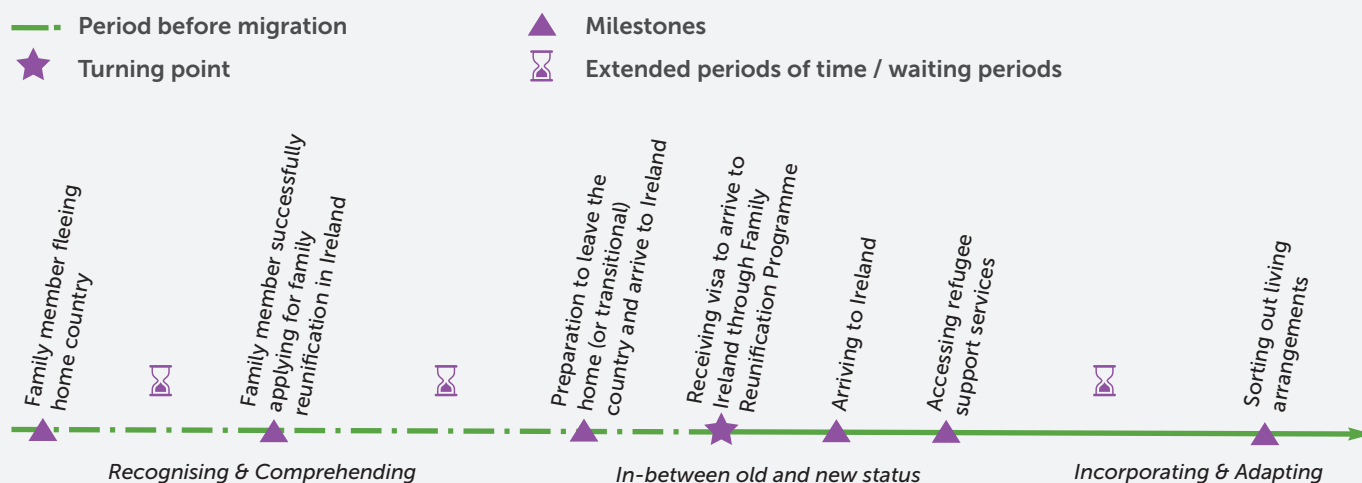

Figure 3: Migration trajectory for people who arrived in Ireland through family reunification

In the first phase of the transition, there was clear similarities between those who experienced the first and second trajectories, with commonalities across the nature and urgency of the departure, and the risk that could be encountered. Those who left their home nations as a result of war and conflict often did so in extreme circumstances with little time to plan their journey or to arrange documentation. For others, decisions to leave were made over time, and reflected the worsening economic and social conditions within their regions or home countries. In these cases, people described leaving amidst a complex set of push factors, which could include political instability, severe poverty, or public health crises, like an outbreak of Dengue fever. For people who arrived in Ireland through the

Family Reunification Programme, the preparation and planning phase may have been less urgent but could still involve many uncertainties.

For the majority of participants, the 'in-between' stage commenced with the start of their migration journey and ended when participant's felt they could begin the resettlement process in Ireland – usually after receiving certainty in relation to their resident status. The second stage could, therefore, extend across a significant period of time. This stage was typically shortest for those who travelled through the family reunification programme. But even for these participants the resettlement process did not simply begin when they moved in with their family members after arrival, but

when they were able to make their own living arrangements. Both for the undocumented and UNHCR participants, this stage started without formal protection or permission to enter/remain in third countries. As 61-year-old Axmed recalls, who arrived in Ireland as an asylum seeker, this period could incorporate multiple journeys and substantial risks.

... in 2005 I fled the country, I fled [home country]. I came to [name of the country] and then I paid money to the international traffickers. They brought me here [Ireland]. They said 'We'll take you to America!'

For those who were a part of the UNHCR programme, it was the arrival in Ireland that was key and as 53-year old Samir describes it was as much about regaining a sense of personhood, as the destination itself.

The day I arrived here I felt like I was a human being. I didn't feel like a person in the [home country name] or [home country name] at all...like all the war and everything is, you feel like you are nothing.

The third stage, where people attempt to adjust to their migration transition and their settlement in Ireland, depended both on length of residence, and experiences since arriving. A number of participants talked about the different mechanisms that helped them to adapt to their new country of residence. People mentioned spirituality and faith, building social connections, and practices that allowed them to express their cultural identity, and re-make a sense of home. Participants often conveyed a strong sense of gratitude for the opportunity to make a life in Ireland. But for some of these individuals it appeared that there were significant feelings of pressure not to be a 'burden' on the state, as highlighted by Axmed:

To tell yourself that you're settled here. To settle, to work as if you are working your home country, your home of origin. You have to work. You have to try secondly to try not to be a burden of the government. To make yourself working to learn. To learn the system, the ways that people are living, the ways that people are making progress.

For other participants, especially those who were in Ireland for a shorter period of time, it was clear that the incorporation stage had not commenced, with several individuals struggling to cope with the losses incurred in their home nations and/or the extent of the

disruption that forced migration had created. For all participants, even long-term residents, this stage was on-going with many individuals doubting whether full integration in Ireland was achievable.

RESEARCH FINDINGS: IMPACTS OF FORCED MIGRATION IN OLDER AGE

The impact of these migration transitions on participants was linked to the combined influence of the different events that people had experienced. For participants who came from low-and middle-income country contexts, arriving in Ireland had over time generally brought a higher standard of living. For others, who had lost considerable assets in their home countries or as a result of their migration, Ireland provided in overall terms additional security. While it seemed unlikely that these individuals would regain the level of material assets they once possessed, there was once again a path to a stable standard of living. Notwithstanding these findings, it was evident that these migration transitions could conspire to create multidimensional forms of social exclusion that people had to contend with. The push factors that forced people to leave, the departure and migration itself, and experiences since arriving in Ireland could all have considerable legacy effects on people's lives. Five different domains of social exclusion could be identified from interview findings. These included: social relations; services amenities and mobility; material and financial resources; socio-cultural aspects; and neighbourhood and community.

Exclusion from social relations was hugely significant in the lives of participants and reflected the magnitude of their dislocation from the relationships and communities of their home countries. The potential for weak or non-existent support networks was exacerbated by what participants saw as the lack of cultural integration, deficient social opportunities outside of their immediate family, and, as 61-year-old Fatima highlights, language barriers:

> *Yes, I would say [we are left out] because I say I don't interact with them [Irish people] because of the lack of the language. We have family friends come and go but they [Irish] wouldn't talk to them because they don't have the [English] language.*

The provisional nature of some participant's accommodation also intensified feelings of social disconnection and isolation from local communities. But the spectrum of exclusion from social relations was far reaching and could include the complete loss of social networks, and perhaps severed ties with family. Yessenia, 59-years-old, was separated from her children when she fled her home country 10 years previous and continues to hope for reunification with them:

> *I am old, I am sick, I am not healthy. That's why I still wait [...], I hope. Any time they [Irish Naturalisation and Immigration Service] call me, 'Yes, I agree, have your son or your daughter' I hope, please. Yes. I miss them so much. 10 years [waiting] is a long time for a mum, you know?*

Finally, while several participants spoke highly of the general welcome they received in Ireland, a small number of participants described instances where they were specifically excluded, with some of these instances ethnically and racially motivated (see later in this section).

Exclusion from services, amenities and mobility was a feature of daily life for many individuals. For some, these issues were simply a function of not being familiar with Ireland's service system. This was again exacerbated by language proficiency issues. While the standard of health and social care was generally praised, particularly targeted services provided by voluntary organisations, several people spoke about the difficulties in accessing specialised and/or culturally appropriate provisions. Those who had experienced significant trauma and who had complex mental health challenges appeared to be more likely to encounter these difficulties. However, exclusion from services, amenities and mobility was generally greatest for participants resident

in temporary accommodation and resettlement centres, which were often former hotels that were not intended as long-term residences. In addition to the inappropriateness of the accommodation, participants sometimes described their experiences of these environments as being characterised by overcrowding, poor food quality, lack of transport, and lack of social connectivity. As highlighted by 54-year-old Nabil, this compounded the stress of not knowing when they would be moved to more appropriate accommodation:

> And the stress of living in a hotel and the food, [and] waiting for a house [is exclusion]. We've been waiting for a house for three months now and they constantly tell us 'Next time, next time'. And now, well we just met the Department of Justice now and they just told us 'This house is not going to work for you', so they just cancelled the house for us.

Exclusion from material and financial resources was primarily related to the changes in participants' economic status. Notwithstanding the additional economic security that people had in Ireland, many individuals spoke about the impact of the loss of previous financial and material assets such as savings and housing. Sixty-one-year-old Fatima, who was from an affluent background in her home country, highlights her poor housing conditions and points to the potential implications for her health and well-being:

> ... we are not comfortable in this house because it's cold and there is a lot of moisture, it's damp. I spend my time cleaning the walls, my arms are hurt me now because I [am cleaning so much] – and it cause me allergy in my throat.

But participants also described substantial difficulties in accumulating new resources and identifying suitable employment. This was especially highlighted by those whose professional qualifications had not been recognised. These individuals were more likely to encounter exclusion from the labour market, and to have their career trajectory cut short, as highlighted here by 56 year old Yara:

> I am a teacher for 26 years in my country, and I expected here to come and continue my career here as a teacher. Even being assistant, first of all being assistant to get to know the teaching method here in Ireland. But unfortunately, I didn't get this [...] Here, just for a job, it's difficult to find a job. But people respect and they show their respect for us... But for job, it's different. It is different.

Socio-cultural exclusion was experienced by some participants in this study. This involved a complex set of challenges that contributed to people being discriminated against. Reflecting the intersection of ethnicity and migration status, experiences of homogenising language and prejudicial treatment were evident in the accounts of a number of participants. This appeared to be linked to stereotypes and cultural assumptions and to the ways in which individuals were viewed only in terms of being a migrant, or a refugee, with little consideration of their personal identity. It was, however, also clear that self-stigmatisation based on negative personal associations was a challenge for some, as highlighted by Yara:

> I felt stressed first when I came here... I felt not discriminated, but I felt it's hard for me when someone asks me. It's hard for me to say 'refugee'. When I came here, when I [was] authorised 'refugee', I cried.

For other individuals, this form of exclusion was more severe and linked directly to explicit instances of discrimination and abuse which were underpinned by racism. While these events were not experienced by the majority, they could lead to traumatic and potentially violent situations for those who did experience them, as 66-year-old Sanyu describes:

> I think most black people would experience that [racism]. It happens, it happens, people.... the bus is packed - you come and sit next to somebody and the person gets up. That one you feel really, really slighted [...] I remember one time I was going to [name of the location]... as I crossed the road, from up, someone poured water on me. But fortunately it splashed. In the end I discovered it was not water, it was urine.

Neighbourhood and community exclusion was transnational in form. Reflecting experiences in the pre-migration phase, a number of interviewees noted that the issues that motivated migration were manifested at very local levels, and as a result their links with their places had often become problematic, and damaged. This is acutely illustrated by 66-year old Thania:

> The week before at the front of my house, they killed my neighbour. [...] He was very, very nice, and then came a car and shot him and killed him and the bullets, you know, all over my wall of the house... so I must take the decision [to leave]... So I said 'Just leave.'

In Ireland, neighbourhood and community exclusion was a cross-cutting form of disadvantage that drew in other domains of exclusion, for example: social relations, with respect to the lack of social opportunities within their localities; services, with respect to difficulties accessing place-based services; and material resources with respect to substandard housing quality. Reflecting the continued challenge of integration for many participants, some interviewees also spoke about feelings of displacement. This for some was due to a short length of residence in Ireland, and/or their longing for home country places. But for many participants it was also compounded by obstacles that prevented permanent settlement. The isolating structures of resettlement centres were again highlighted, but so too were more general difficulties in finding appropriate housing. Axmed, who along with his family was currently homeless, highlights this challenge:

We could rent a house, but there's no house. There's a crisis everywhere in Ireland. House crisis.

What stakeholders say

Lack of integrated approach:

It's so disjointed thinking [...] there's no follow up, there's no coming together. There's no standards. *[17_FM_L]*

Forgotten populations:

Services [should be designed] for the whole range of older people, not just a kind of a I suppose middle class cohort.[...] The agencies for older people have to kind of look at what they're doing and what they can do to make sure they are addressing the needs of a whole range of people. *[06_GA_N]*

The challenge of migration in later life:

And so, if you're elderly you may not have the coping mechanisms to deal with a new scenario, a new country. Then you have to navigate when you're here the various policies and procedures that exist. *[5_FM_N]*

CONCLUDING REMARKS

This briefing report explored forced migration and the linked process of family reunification as a major transition in later life. It investigated the principal pathways associated with these forms of migration for older people, and their relationship to multidimensional social exclusion. From the outset, it is important to acknowledge that the full diversity of experiences within the refugee and refugee related populations could not be sufficiently accounted for within the scale of the research. Participants who are currently seeking asylum, and resident in Direct Provision, are for example a notable absence from the sample. But it is also difficult to reflect the full range of experiences represented across the 15 participants and the depth of the trauma that some individuals had encountered within this short report. Notwithstanding these limitations, this briefing report offers important insights into a poorly understood later-life transition and a growing sub-group of the older population.

The findings indicate that the various stages of forced migration can impact social and economic resources, the accessibility of formal supports and provisions, and the material and symbolic status of these older populations. Migration for many participants served as a significant and unexpected turning point in their lives, massively altering what interviewees had anticipated for their own future. The combined effects of disadvantages encountered prior to migration, during the migration journey and since arriving in Ireland appeared to catapult some participants into more precarious lives. Research on general relocation routinely highlights challenges around inclusion for older people (e.g. Rowles and Bernard, 2013). Trans-national migration with little or no resources, (potentially) significant psychological distress, and a lack of host country knowledge will exacerbate those challenges exponentially (Schock et al., 2016).

The influence of legislative systems and migration policy on people's lives was clear, and structured both their daily routines and their capacity for inclusion. This is with respect to the areas of: migration status; accommodation; resettlement location; employment; and family reunification. Such patterns were particularly apparent for those who came to Ireland seeking asylum, and who had spent significant amounts of time in Direct Provision, and for those who arrived as a part of the UNHCR resettlement programme and are awaiting permanent re-housing. With a palpable fatigue in their accounts, these participants were frustrated by the restrictiveness and length of time that different bureaucratic processes could take and how delays impacted on their ability to plan and move on with life in Ireland. Temporary accommodation that was being used for long-term residency, with little formal supports for integration, was clearly problematic - both for interviewees and for key stakeholders working with these individuals. With respect to family reunification, the length of time it took to approve applications, and the lack of support for the integration of family members upon arrival were key issues that have been documented previously (UNHCR Ireland, 2020). On the basis of these sorts of challenges, some participants, public and voluntary stakeholders, and local communities appear to be stranded to negotiate significant obstacles very much on their own.

It is also unsurprising that questions have been raised about the legality of some of the existing reception and resettlement services and supports – specifically the Direct Provision system – and their adherence to the State's obligations to uphold the human rights of those seeking and those who have received protection (IHREC, 2020). In this regard the White Paper (Department of Children, Equality, Disability, Integration and Youth, 2021) to establish a new international protection service that will account for these issues is certainly welcomed.

Although many participants expressed an emotional and cultural loneliness for their home country, it must be acknowledged that the majority of participants were relieved and happy to have the opportunity to rebuild their lives in Ireland. This was in part because of the supports they received from individual resettlement workers, intercultural workers, counsellors, and public and voluntary organisations with representative, and health and social care remits. Nevertheless, findings suggested that low expectations were operational for some participants and reflected a relative comparison with deprived circumstances in their home country. While obtaining leave to remain was a positive development in people's lives, this relative appreciation could also mask substantial disadvantages. Dealing with relocation; dealing with loss; dealing with social and material deprivation and transplanting those vulnerabilities to a different socio-cultural and linguistic context conspires to construct entrenched forms of exclusion for some members of these groups.

The research points to the significance of the intersection of ageing and migration for social exclusion amongst older refugees and refugee related populations. There are generally four risk factors that are specific to older members of these populations. First, there is a general lack of opportunities for social integration, with a higher dependence on immediate family networks, and an absence of employment and education-related engagement channels for adults aged 65 years and over. Second, for those of working age, reduced opportunities for labour market participation due to language issues, age and difficulties in recognition of prior qualifications limit the potential for income generation. Third, age-related changes, life experiences and, potentially, less social and economic resources are likely to increase the potential for poor health outcomes and decrease someone's capacity for overcoming structural inequalities and for self-advocacy. This is notwithstanding the considerable levels of resilience and adaptive abilities evident amongst many of the participants in this study. Fourth, because of the multiple sets of attachments, memories, and material investments accumulated over a lifetime of living in their home country, older members of these populations may experience profound feelings of displacement, undermining the possibility of belonging in Ireland.

Some of the exclusions with respect to older members of these populations have been recognised in the White Paper – including the need for specific considerations with respect to accommodation, language barriers and employment activation. Building on this initial recognition, a comprehensive approach is required to ensure that existing exclusions are not compounded by the structures that older members of these populations encounter on arriving in Ireland. Active consideration of this group and tangible actions must be integrated within ageing-related policy and strategy development.

RECOMMENDATIONS

Based on the findings of the research presented in this summary report, we make the following recommendations:

1 It must be recognised that older members of the refugee and refugee related population can experience entrenched forms of social exclusion, which accrue from disadvantages encountered during different stages of forced migration. These can be due to macro and meso-level circumstances within home countries, individual level experiences, and institutional structures regulating migration and resettlement in Ireland.

2 Building on the recent White Paper on a new international protection service, a multifaceted approach based on the personhood and inclusion of individuals is required to enhance connectivity, access, and material and financial certainly for this population, and to counter challenges related to depletion of resources and deprivation of rights.

3 Regulatory structures and administrative processes related to seeking asylum, resettlement and family reunification should be reassessed from an ageing and equality perspective, and with a view to streamlining bureaucratic procedures to ameliorate challenges regarding older age migration.

4 Specialised training with respect to gerontological illiteracy, and aging-related considerations, should be provided to resettlement and intercultural workers, who are tasked with supporting older adult forced migrants.

5 Programmes and services developed to support older members of the refugee and refugee related population must work to bolster the self-efficacy and considerable agency of these populations, by integrating their voices in service design and delivery – whether this is in social, economic, cultural or health and social care domains.

6 Orientation programmes specifically targeted at older adult members of the refugee and refugee related populations should be available if desired, and should incorporate in-depth pre-arrival orientation packages (in native languages), information on rights, entitlements and services, and age-appropriate language classes.

7 Opportunities for personal and cultural identity expression should be nurtured for older members of this population, responding to the significance of life-course connections to host country contexts, and to the disruption that forced migration can pose.

8 Public and voluntary sector organisations working with older adult and migrant groups should be supported to expand the social resources of older members of this population beyond immediate family and cultural communities in order to foster opportunities for social connection that can buffer against isolation, and loneliness.

9 For those of working age, and to avoid precarious work conditions, appropriate employment supports (e.g. job finding; training) need to be developed that are sensitive to language proficiency issues, previous employment and qualifications, and potential health challenges related to age and migration experiences.

10 Adopting a life-course perspective in relation to accumulation of needs and late life, older members of refugee and refugee related populations (aged 50 years and over) must be considered within health and social care service planning for older people, both in terms of mainstream and targeted service delivery.

| 11 | Housing of appropriate quality, design and tenure must be mobilised as an enabling factor in the resettlement process for older migrants, with a commitment to ensuring environmental security and certainty for this group earlier in the resettlement process. |

| 12 | In line with the ethos of the Community Sponsorship Ireland Programme, and regardless of an individual's migration/refugee status, embedding older migrants and their families within localities and communities must be a central goal fostering practical and affective dimensions of place making and belonging. |

| 13 | Older members of the refugee and refugee related populations must be actively considered within policy and practice agendas that target the older adult population, and that promote the achievement of equitable ageing societies. |

References

Department of Children, Equality, Disability, Integration and Youth (2021). *A White Paper to End Direct Provision and to Establish a New International Protection Support Service.* Government of Ireland.

Frounfelker, R.L., Mishra, T., Dhesi, S., Gautam, B., Adhikari, N., and Betancourt, T. (2020). "We are all under the same roof": Coping and meaning-making among older Bhutanese with a refugee life experience. *Social Science & Medicine,* 264, https://doi.org/10.1016/j.socscimed.2020.113311.

Heikkinen, S. J. (2011) Exclusion of Older Immigrants from the Former Soviet Union to Finland: The Meaning of Intergenerational Relationships. *Journal of Cross-Cultural Gerontology,* 26: 379-395.

HelpAge International (2012). *Older people in emergencies: identifying and reducing risks.* HelpAge International, 1—11.

IRHEC (2020). *Statement from the Irish Human Rights and Equality Commission In Respect of Direct Provision.* https://www.ihrec.ie/statement-from-the-irish-human-rights-and-equality-commission-in-respect-of-direct-provision-2/

Meeks, S. (2020). Common Themes for Im/migration and Aging: Social Ties, Cultural Obligations, and Intersectional Challenges, *The Gerontologist,* 60(2), 215—218, https://doi.org/10.1093/geront/gnz193

Moffatt, S., and Glasgow, N. (2009). How useful is the concept of social exclusion when applied to rural older people in the United Kingdom and the United States? *Regional Studies,* 43, 1291-1303.

Mölsä, M., Punamäki, R-L, Saarni, S.I., et al. (2014) Mental and somatic health and pre-and post-migration factors among older Somali refugees in Finland. *Transcultural Psychiatry,* 51, 499-525.

Rowles, G. D., and Bernard, M. (2013). The meaning and significance of place in old age. *Environmental gerontology: Making meaningful places in old age,* 3-24. Springer.

Schock, K., et al. (2016). Impact of new traumatic or stressful life events on pre-existing PTSD in traumatized refugees: results of a longitudinal study. *European Journal of Psychotraumatology,* 7(1), DOI: 10.3402/ejpt.v7.32106.

Siriwardhana, C., and Stewart, R. (2013). Forced migration and mental health: prolonged internal displacement, return migration and resilience. *International Health,* 5(1), 19—23. https://doi.org/10.1093/inthealth/ihs014

UNHCR - United Nations High Commissioner for Refugees (2016). *UNHCR Age, Gender and Diversity: Accountability Report 2015.* http://www.unhcr.org/en-us/older-people.html

UNHCR - United Nations High Commissioner for Refugees (2019). *Global Trends: Forced Displacement in 2019.* https://www.unhcr.org/flagship-reports/globaltrends/globaltrends2019/

UNHCR-Ireland (2020). *Realising family reunification. Travel assistance and related matters. Report on the UNHCR, IOM and Irish Red Cross travel assistance programme.* https://emn.ie/wp-content/uploads/2021/03/Realising-Family-Reunification.pdf

Urbaniak, A., and Walsh, K. (2020). Policy and practise perspectives on older adult critical life-course transitions and place in Ireland. *Health and Social Care in the Community,* early view, https://doi.org/10.1111/hsc.13249

Van Gennep, A. (1960). *The Rites of Passage* (trans. Vizedom, MB, Caffee, GL). Chicago, IL: The University of Chicago Press.

Virgincar, A., Doherty, S., and Siriwardhana, C. (2016). The impact of forced migration on the mental health of the elderly: A scoping review. *International Psychogeriatrics,* 28(6), 889-896. doi:10.1017/S1041610216000193

Walsh, K., Scharf, T., and Keating, N. (2017). Social exclusion of older persons: A scoping review and conceptual framework. *European Journal of Ageing,* 14(1), 81-98.

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