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How Methodology Makes Topics: Ageing Immigrants as a Blind Spot in the Migration Research in Austria. A Research Note

Abstract

The current research note describes a process where by applying the qualitative method of expert interviews, researchers got confronted with a new topic in their area of expertise that was not on the radar of their research. In the framework of an evaluation study on health promotion interventions for migrants in an urban setting, researchers applied a mixed methods approach. Quantitative element was a self-assessment tool, where providers of health promotion measures described their clientele and rated the quality of their services along given categories. Qualitative element was a series of semi-structured interviews with management and front line service providers. While the self-assessment tool delivered expected results, the interviews revealed an aspect concerning needs and problems of a migrant group researchers had not thought of before. This is the group of immigrants from the 1960ies, coming mainly from Turkey and Former Yugoslavia, now reaching or having reached retirement age. This group was reported as being extremely vulnerable and at risk of a double discrimination as being “old” and “migrant”.

Desk research was conducted in reaction to such data, showing that information on this group is scarce. Given the demographic developments with rising shares of (old) aged immigrants living in Austria, it will be important to improve the respective knowledge base.

Keywords: guest workers, ageism, immigration policies, migration patterns, expert interviews.

Introduction: Migration as a topic for European societies

Migration is high on the agenda of European policy debates. One reason for this is the so far exceptional peak of asylum seekers coming to Europe in 2015, framed as “unprecedented humanitarian crisis” by OECD (OECD, 2015). In the year 2015, 1.255 600 people filed a first time application for asylum in Europe, out of which 85.505 did so in Austria. For this country, this is a rise of 233% compared to the year before (Eurostat, 2016). Given these numbers, the so far more permanent migration movements connected to labor are somewhat get-

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ting out of the spotlight. Still, the need of developed European countries for migrants to fill up the gaps of their labor markets is persisting and becoming even more important given the demographic dynamics of ageing societies. In the “European Agenda on Migration” launched by the European Commission (EC, 2015) it is stated that: “without migration the EU’s working age population will decline by 17.5 million in the next decade. Migration will increasingly be an important way to enhance the sustainability of our welfare system and to ensure sustainable growth of the EU economy.” (p. 14)

For Austria, migration has been important for the labour market ever since the 1960ies. Low-skilled so called “guest workers” from Former Yugoslavia and Turkey were recruited in the 1960ies to fill the gaps in the Austrian labour market in times of a booming post-war economy. The term “guest worker” was applied as a rotation principle was planned, with migrants being supposed to stay for one year and then going back to their countries of origin, being substituted by others. This principle didn’t work. A majority of these „guest workers” have spent their entire work life in Austria and are still living there. While the profile of the labour market has changed from a prevailing demand for unskilled to a prevailing demand for high skilled workers, Austria is still depending on migrants to sustain the population and to safeguard the welfare state under conditions of an ageing society (Fassmann & Reeger, 2008).

Integration of Migrants into the Austrian welfare state

Migrants legally residing in Austria are integrated into welfare schemes via their participation on the labour market and the connected scheme of compulsory insurance. The Migrant Integration Policy Index (MIPEX, 2015), a comparative measure for policies to integrate migrants providing information for 38 countries, includes 167 indicators in 8 dimensions: labour market mobility, family reunion, education, health, political participation, permanent residence, access to nationality, and anti-discrimination. In its latest assessment with data from 2014, MIPEX places Austria as mid-ranked in the overall assessment with rank 20. Looking at the single dimensions, it gets apparent that Austria’s integration efforts score much higher concerning integration into health care with rank 8 (MIPEX, 2015). Analysis shows that the public health system is sensitive for specific needs of migrants concerning health care and also health promotion (Country report IOM MHD RO Brussels, 2016).

Evaluation of Services providing Health Promotion for Migrant groups

It is in this vain that service providers in Austria receive public funding to develop appropriate measures to reach and support migrant population groups. In 2013/14, the Center for Health and Migration (C-HM) conducted an evaluation study on six NGOs providing health promotion and prevention measures for migrants (see Trummer & Novak-Zezula, 2014a). The evaluation study was commissioned by the Styrian health trust and aimed at contributing to the sustainable development of appropriate structures to integrate migrants into health promotion schemes in Styria. Styria is one of nine Austrian provinces, located in the southern part of the country with Graz as capital city.

The methodological design took a mixed method approach, combining quantitative and qualitative methods. Guiding principle was to make the evaluation as participatory as possi-

ble, meaning that providers themselves should be part of the research process and not be reduced to fill in pre-defined multiple choice questionnaires. The study was conducted in two steps: The first step was a self-assessment, using a self-administered questionnaire which was filled in by managers of each organisation. Main characteristics of the organisation in regard to personnel, clients and services provided were described and ratings concerning efficiency and effectiveness of services were given. The results of the self-assessment were used as a starting point for in-depth discussions with staff of the organisations in the framework of site visits. Main target groups of the organisations were migrants with unlimited residence permit – mainly from Turkey and Former Yugoslavia – and asylum seekers – at that time mainly from Chechenia and Afghanistan. Age wise, with 78% the majority of clients was working age and 20% minors up to 17. On average, only 2% of clients were 60 years of age and above (Trummer & Novak-Zezula, 2014a).

An unexpected topic emerges: ageing migrants, now in retirement age, forgotten by policy

In the interviews, there emerged a new topic. Especially in one NGO, the manager expressed that his main concern is not so much with the migrant groups that he named as the most common in the self-assessment tool and which now appear as majority in the quantitative analysis. It is with a group that is, as he said “forgotten by everybody, because the perception is they should not have any problems as they are part of the welfare state with all its benefits” (Trummer & Novak-Zezula, 2014b). In the interview, he started to report what he called a “typical story”:

“This former guest worker, he is now retired. His children are grown ups, some of them have been born in Austria. They are at home in Austria. He has a very low command of the local language, the little German he needed at work he forget after not using it any more. In the 60ies, he started with a big dream of a better life, a dream of building a house in his country of origin where he planned to live in retirement age, driving an expensive car, and everybody will look up to him. Now he realizes this dream did not come true. The house which he has built in his former home country stays empty; his wife is not willing to live far away from her children and grandchildren. In Austria, he lives in a small apartment, and nobody looks at him with respect. He is still a stranger here, he never learned proper German because in his job, he did not need it. He feels no dignity in his life. There is no home. This is so depressing, and there is no help. There is a social worker at the NGO in the neighborhood, she even speaks his language. But how should he explain to her – a young woman! how he feels? How it feels to have failed as a man?”

In reaction to these findings, a desk research, financed with internal funds, was conducted at C-HM. The Aim was to find out if there is any research going on concerning this group of ageing migrants, being described as so vulnerable, and what the possible size of the possible problem is in terms of numbers. A review of studies on this issue was conducted in 2017. Twelve social sciences databases and ten health sciences databases (including SCOPUS and PubMed) available at the library service of the University of Vienna were searched with the combination of keywords Österreich (Austria), Gastarbeiter (guest worker), alternd (aging). This combination of keywords did not yield any results. The introduction of the keyword Alter (age) yielded 164 results. A review of abstracts showed that only two of these publications can be identified as relevant for the specific issue. A sociological study (Reinprecht, 2006)

on precarious aging in the immigration society addresses conditions of aging of “guest workers” in Austria, quality of life, expectations towards aging and available resources. The most recent publication is a master thesis at Vienna University. Based on oral history it outlines life stories of Turkish “guest workers” and concludes that there are two types of elderly former “guest workers”: those who have arranged with their living situation in Austria and those who have stacked to their dreams to return after retirement but could not realise this dream due to external circumstances (Herburger, 2010).

Main findings

Without the qualitative element of interviews with service providers and the participatory approach that invited inputs complementary to the research rationale, the stories would not have been told to the researchers. These stories did leave an imprint so impressive that three years later and with internal funding, a desk research was conducted to pursue the hints recorded in the interview field notes.

The desk research reveals that in Austria, research on the former “guest workers”, now aging is scarce and little evidence is available to build a solid base for development of appropriate policies. Findings suggest that in the context of contemporary immigration policies in Austria being in favor of young and high-skilled migrants, elderly migrants are not in the focus of attention – neither policy – nor research wise. It can be hypothesized that those former “guest workers” might be exposed to ageism or even to multiple -isms.

A look at statistics reveals that currently about 76.000 people in Austria are at risk to be in a situation similar to the “guest worker” as described above. Official statistics recorded that 63.391 people born in former Yugoslavia and 12.913 people born in Turkey living in Austria are in the age of 65 years and above (Statistik Austria, Kommission für Migrations, 2017). The share of people who might be affected will steadily rise: 94.620 people born in former Yugoslavia and 40.640 people born in Turkey are in the category of 50-64 years of age. These data give an indication of the need for a closer look into the stories that were told by first line service providers to researchers in the framework of a health promotion evaluative study.

References

- European Commission (EC, 2015, May 13). *Communication from the Commission to the EU Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions: A European Agenda on Migration* (Brussels, 13.5.2015COM /2015-240. Retrieved from: https://ec.europa.eu/anti-trafficking/sites/antitrafficking/files/communication_on_the_european_agenda_on_migration_en.pdf.
- Eurostat (2016, March 4). *Asylum in the EU Member States Record number of over 1.2 million first time asylum seekers registered in 2015 Syrians, Afghans and Iraqis. In: top* Citizenships 44/ 2016. Retrieved from: <http://ec.europa.eu/eurostat/documents/2995521/7203832/3-04032016-AP-EN.pdf>.
- Fassmann, H., & Reeger, U. (2008). Austria: From guest worker migration to a country of immigration. *IDEA Working Papers, 1*, 1-39.
- Herburger, S. (2010). *Er hat alles vergessen, er hat einfach sein Leben gelebt* (Doctoral dissertation). Vienna: University of Vienna. Retrieved from: http://othes.univie.ac.at/10224/1/2010-06-09_0348428.pdf.
- IOM MHD RO Brussels (2016) MIPEX Health Strand Country Report: Austria. Retrieved from: http://equih.ealth.eea.iom.int/images/MIPEX/AUSTRIA_MIPEX_Health.pdf.

- MIPEX (2015). *Migrant Integration Policy Index*. <http://www.mipex.eu>.
- OECD (2015, September). *Is this humanitarian migration crisis different?* Migration Policy Debates N°7 September 2015, Paris: OECD Publishing.
- Reinprecht, C. (2006). *Nach der Gastarbeit: prekäres Altern in der Einwanderungsgesellschaft*. Viena: Braumüller.
- Statistik Austria, Kommission für Migrations (2017). *Migration & integration. Zahlen.daten.indikatoren2017*. Retrieved from: [ahrbuch_migration_integration_2017.pdf](#).
- Trummer, U., & Novak-Zezula, S. (2014a). *Evaluation von sechs durch die Gesundheitsabteilung des Landes Steiermark geförderten Einrichtungen für Gesundheitsförderungs- und Präventionsmaßnahmen für MigrantInnen*. Endbericht, Vienna: C-HM.
- Trummer, U., & Novak-Zezula, S. (2014b). *Retired Labour Migrants in Austria*. Unpublished Field notes. Vienna: C-HM.