

# COMPARING THE SUPPORT MODEL FOR AGEING NATIVES AND MIGRANTS IN SWITZERLAND

Ruxandra Oana Ciobanu & Marie Baeriswyl

## Building on the existing literature

Care for the ageing migrants is provided within the family and community. (Bolzman et al. 2004, Patel 2003)  
Migrants over-use health services. (Solé-Auro et al. 2012)  
The Swiss welfare is characterised by a complex welfare mix between the family (informal), public, private and third sector (formal).  
→ the principle of subsidiarity: the state intervenes only when the family and other informal networks are inefficient. (Bütschi & Cattacin 1994)  
In Switzerland, many migrants are in vulnerable situations. (Bolzman et al. 2004)

## Objectives

Compare ageing natives and migrants in Switzerland

1. Types of formal and informal support for the ageing, and within informal, of family and friends providers of support
2. Mediating factors leading to differences between them

## Research methodology

### Source of data

Survey «Vivre-Leben-Vivere: Old Age Democratization? Progresses and Inequalities in Switzerland» (Oris et al. 2016)

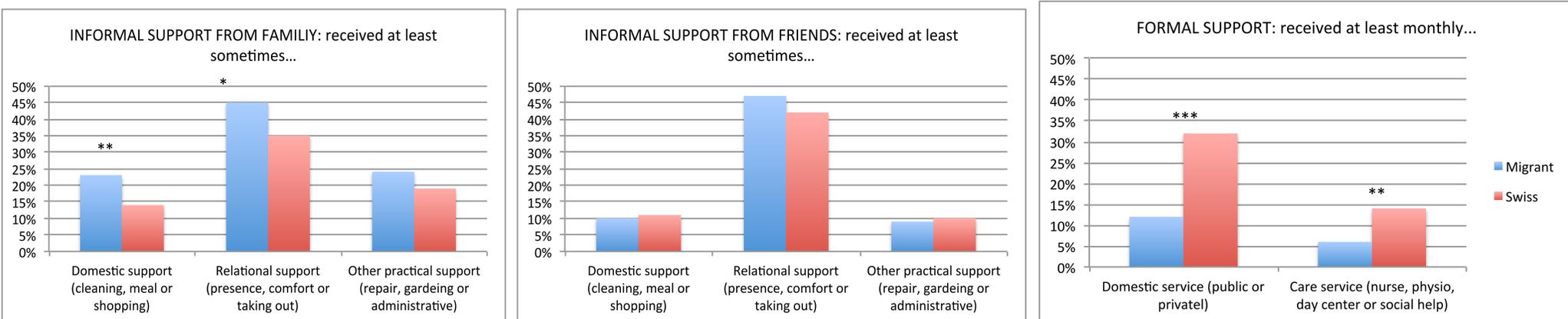
- Interdisciplinary survey on the living and health conditions of persons aged 65 and older in 5 cantons (Geneva, Valais, Berne, Basel and Ticino) (N= 3659).
- Sub-sample of immigrants aged 65 to 79 including people from Spain and Portugal in the canton Geneva and from Italy in Basel and Geneva (N=299 migrants: 179 Italians, 57 Spanish, 63 Portuguese). (Kaeser 2016)

**Working sample:** 65-79 years old persons living in Geneva canton, Swiss (N=211) and migrant population (N=231)

**Analyses** to study the impact of being a migrant:

- Descriptive analyses: identify inequalities between ageing migrants and Swiss in support received.
- Regression analyses: question socio-economic and health factors and the mediator effects on inequalities between ageing migrants and Swiss natives.

## Empirical analysis 1: Who, from whom and what?



## Empirical analysis 2: mediating factors

Regression analyses are done for the type of support where there were identified significant differences between ageing migrants and Swiss natives.

**Migrants probability with respect to Swiss natives - mediator effects of education, last socio-professional status and self-rated health (Average Marginal Effect in %)**

	Relational support from family	Domestic support from family	Formal support	Formal domestic support
<b>Model 1 (sexe, age, origin)</b>	0.12**	0.09*	-0.06*	-0.20***
<b>Model 2 ( M1 + education)</b>	0.06	0.08	-0.04	-0.15***
<b>Model 3 (M2 + last socio-professional status)</b>	0.04	0.07	-0.02	-0.14**
<b>Model 4 (M3 + self-rated health)</b>	0.05	0.06	-0.03	-0.14***

p<.1; \*: p<.05; \*\*: p<.01;\*\*\*

## Conclusion

### Main results

In the total sample regression analyses show that:

- **Education level** influences the probability to receive different types of support: (1) lower level of education increases the probability to use family support and (2) higher level of education increases the probability to use formal service.
- **Health state** is associate only with the probability to received formal help care.

Inequalities between ageing Swiss and migrants:

- Ageing migrants are in a **worse socio-economic situation**, which allows us to understand their **higher probability to receive family support**.
- Even if we control for socio-economic and health inequalities, **migrants still underuse formal domestic support**.

### Limitations

- 'Young' population (65-79), while more important support is needed later on in life.
- Small sample: we cannot differentiate between the migrant groups.
- Data does not allow to distinguish between public and private formal support.

### References

Bolzman C, Poncioni-Derigo R, Vial M & Fibbi R. 2004. Older labor migrants' wellbeing in Europe: the case of Switzerland. *Ageing and Society*, 24(3): 411-30.  
Bütschi D & Cattacin S. 1994. *Le modèle suisse du bien-être*. Lausanne: Réalité sociales.  
Kaeser L. 2016. Adapting Quantitative Survey Procedures: The Price for Assessing Vulnerability? Lessons from a Large-scale Survey on Aging and Migration in Switzerland In: Oris M, Roberts C, Joye D, Ernst Stähli M. eds. *Surveying Human Vulnerabilities Across the Life Course*. Heidelberg: Springer.  
Oris M, Guichard E, Nicolet M, Gabriel R, Tholomier A, Monnot C, Fagot D, Joye D. 2016. Representation of Vulnerability and the Elderly. A Total Survey Error Perspective on the VLV Survey In: Oris M, Roberts C, Joye D, Ernst Stähli M. eds. *Surveying Human Vulnerabilities Across the Life Course*. Heidelberg: Springer.  
Patel N. ed. 2003. *Minority Elderly Care in Europe: Country Profiles*. Leeds and London: PRIAE.  
Solé-Auró A, Guillén M & Crimmins E. 2012. Health care usage among immigrants and native-born elderly populations in eleven European countries: results from SHARE. *The European Journal of Health Economics*, 13(6): 741-754.