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Lifestyle migration is the movement of relatively affluent individuals to new destinations in pursuit of a better way of life (Benson and O’Reilly 2009). The movement may be permanent or temporary, full- or part-time, or a fluid combination of these. Nevertheless, this contemporary form of mobility holds a sense of permanence; lifestyle migrants often speak of establishing a new home, new attachments, and a new life, even while retaining a strong sense of their ‘roots’ (Korpela 2009a; Gustafson 2001 and 2009). Lifestyle migrants are distinguishable from labour migrants and corporate expatriates because they move as individuals or with families in pursuit of mainly leisured lives. They are relatively affluent but not necessarily wealthy in absolute terms, and therefore are neither economic refugees nor transnational global elites (see Farrar 2010). The ‘good life’ they seek is intangible rather than material; it is expressed as a slower pace (Korpela 2009b), quality of life (O’Reilly 2000), freedom from constraints, or downsizing (Hoey 2009), and the opportunity to enjoy a pleasant climate or a beautiful landscape (Benson 2011).

Lifestyle migration is not a new phenomenon, but it has undoubtedly been growing, and spreading. There is no survey of lifestyle migration around the globe (partly because it is not yet identified as a separate phenomenon by the migrants themselves or by policy makers), but existing academic studies enable it to be defined and delimited. Lifestyle migration especially has its roots in Europe and America, including, for example, internal migrants to rural mid-west America (Hoey 2009); the British in rural France and the Costa del Sol (Benson 2011, O’Reilly 2000); north to south European retired sun-seekers (King et al. 2000); and American and Canadian snowbirds (Bjelde and Sanders 2012; Coates et al. 2002). Routes, however, embrace the global south and east, with French lifestyle migrants seeking exotic lifestyles in Marrakech (Saigh Bousta 2007); Australia’s Grey Nomads embracing travel in later life (Hillman 2013); and older Americans moving to Mexico, Costa Rica, and Panama (Croucher 2009; Dixon et al. 2006; McWatters 2008). Recent studies have identified similar trends exiting from the global east, with Malaysia boosting its economy by attracting retirees from, among other places, Japan (Ono 2009), and Hong Kong Chinese moving north to mainland China in pursuit of a more relaxing way of life (Hui et al. 2007). Lifestyle migration therefore involves a growing diversity of populations and destinations.
Lifestyle migration and the pursuit of the ‘good life’

Although not exclusively associated with ageing, the connections between lifestyle migration and ageing are undeniable. Lifestyle migrants are, on average, older than the resident populations of the societies they leave as well as those they move to, and lifestyle migration populations in a range of destinations include a significant proportion of retired, early retired and semi-retired, as well as those reaching a later stage in their lives. Notions of successful, positive retirement and ageing are therefore often central themes, with the (potential) severing of the connection between place of work and residence signaling a turning point towards a period of greater control over where, how and with whom to live.

A considerable amount of research has been undertaken with older lifestyle migrants; this has been useful in describing motivations and experiences. From a phenomenological perspective, when asked why they move, migrants cite a range of factors, including: pleasant climate and natural environment; slower pace of life; lower living costs; social advantages, such as the existence of a community of compatriots; cultural attributes, such as low crime rates and acceptance of older people; health benefits; and ease of travel and proximity to the home country (see Casado-Diaz et al. 2004). As Longino and Marshall (1990: 231) noted of North American seasonal migration in later life: ‘In short, lifestyle reasons clearly define the motivational field’. Some also denigrate their home country, or speak of ‘escaping’, illustrating the power of push as well as pull factors in their decision to leave (O’Reilly 2000; Sunil et al. 2007). Finally, older age lifestyle migrants often have prior links to the country they move to through family or work, or more usually through tourism.

In terms of broader structural and cultural shifts, older age lifestyle migration can be attributed to increases in expendable wealth, improved life expectancy, the opportunity to take more holidays during one’s working life, faster and cheaper international travel, and the development of high-speed telecommunications (Bjelde and Sanders 2012; Casado-Diaz et al. 2004). Migration in retirement or later life has become a significant phenomenon for the ‘baby boomer’ generation, who have become familiar with long-distance travel and are often financially secure (Bjelde and Sanders 2012)—though we are yet to see the effects of the global financial crisis. However, lifestyle migration is not the sole preserve of the rich, the professional classes, or the highly-educated. Retirement itself may provide an opportunity, through release from regular work and care-oriented routines, to think afresh about the future, but lifestyle migration is also attempted by many as they approach later life, with some retiring early, taking temporary work in a new field, or working flexibly from home, in order to facilitate a move in pursuit of a better way of life. Older lifestyle migrants are thus creative and active in shaping their own lives as they age.

Intra-European (retirement) migration and ageing in place

In the European context, it is the body of research on retirement migration to Spain that has best been able to illustrate how cultural attitudes, expectations of increased social and recreational activities, and notions of self-transformation frame attempts at and experiences of positive ageing (see Gustafson 2001; Casado-Diaz 2006; Oliver 2007, 2008; Haas 2012; O’Reilly 2000). Caroline Oliver’s (2007, 2008) ethnography of Northern Europeans living in Spain locates retirement migration within sociological understandings of ageing and the life course. Some lifestyle migration, she argues, is informed by specific cultural expectations of a ‘Third Age’ as providing time and space for the pursuit of new social and recreational activities. Here,
migration is interpreted as a positive act of agency in which control and autonomy contrast starkly with visions of the ageing and degenerating body and mind that are more usually associated with old age. Migration in later life, and the new lifestyle pursued, are thus part of the active denial of ageing.

Similarly, O’Reilly (2000: 70) noted, with respect to the British in Spain, that while sensationalist British press reports have tended to equate being older in Spain with loneliness, disability, ill health, and poverty, migrants instead emphasized the positive experience of ageing there. Their narratives continually celebrated their new lives, as they contrasted life for older people in the UK (with discourses of grey weather, sedentary indoor lives, feeling devalued or discarded) with a discourse about life in Spain, where they are welcomed, are more active, and feel happier and healthier, and less of a burden. Retired and older age migrants in Spain play sports, are members of ‘expatriate’ clubs and committees, go for long walks, swim, and sit outside cafes and restaurants to chat and watch the world go by (O’Reilly 2000). Diseases such as arthritis are much easier to cope with and loneliness easier to overcome. Their new lives are thus celebrated as illustrative of an active and positive fulfilment of their own individual aspirations for a positive and active ageing.

Older people are drawn to specific places partly by the obvious natural and social attractions of places, but also by cultural imaginings informed by tourism literature, shared sets of expectations, and other discourses or imaginaries (see Benson 2012; Osbaldiston 2012). Their lives as lifestyle migrants are therefore socially constructed, and reconstructed, over time. Many older lifestyle migrants continue actively to shape their lives post-migration. In the face of sometimes contradictory experiences, they work hard in their communities to live their lives the way they expected them to be, by pulling together, providing for their own community’s needs and desires, and living out the cultural norms they expected to find (Benson 2011, O’Reilly 2000).

Acting on culturally specific notions of positive ageing has consequences for individual migrants when their ageing bodies contradict their image of themselves as active and independent. Even witnessing the ageing and degeneration of others reminds them of their own ageing bodies, but it also draws attention to cultural differences in ageing well, and to how ill-equipped the destination can be for dealing with these foreign bodies. As Caroline Oliver (2007) so eloquently illustrates, Spanish society is perceived by British lifestyle migrants to value the experience that comes with later life, but its welfare system is founded on the expectation of family rather than state support. Migrants, who have often left their families behind in their pursuit of independence and autonomy (their version of the good life in older age), can find themselves lonely, isolated, and lacking sufficient care and support when faced with the Spanish cultural expectation that care for older people is firstly the responsibility of close relatives.

As a result, within the foreign retired community, some means of support have been developed including hospices and informal care organizations established by foreign residents. But, as Oliver (2007) stresses, demand for services outstrips supply, as difficulties (perhaps exacerbated by economic and social hardships) are experienced, leading to repatriation in some cases. As Hardill et al. (2005) have noted, relying so heavily on a community of compatriots suddenly seems woefully inadequate when one finds oneself in hospital and unable to speak the local language. It is clear that Spain is not necessarily a destination that can provide for the increase of migrants in older age, even as the discourse of active ageing retains such a strong hold over the imagination. Indeed, independent successful ageing has become such a cultural norm (Oliver 2007) that many British migrants, when they get ill, slip away quietly, leaving the destination to return to Britain (O’Reilly 2000). The quality of life that destinations are imagined to offer therefore masks cultural differences and brutal realities.
The British in rural France, the subject of Benson’s research (2011), a predominantly middle-class population, pursued a good life characterized by the rural idyll rather than the active ageing sought by British retirees in Spain. Nevertheless there was considerable discussion of how these migrants planned to manage the ageing process. In some cases, this had already started, with residential choice reflecting concerns over future mobility. As one retiree explained, he and his wife had chosen to live on the outskirts of a well-serviced town, which they could walk to if they could no longer drive, and had bought a bungalow so there were no stairs. These retirees also often stressed that they would live and die in rural France, arguing that the healthcare was much better than in Britain. Others, however, readily admitted that perhaps rural France would no longer be a suitable location for them as they aged. Their main concerns seemed to be about receiving medical care in France, and how when you are ill you need the comfort of people who speak the same language as you. As Hillman (2013: 583) has noted with respect to Australia’s Grey Nomads, older people travelling abroad need to know they can access health and welfare services either locally or through the use of digital technology when necessary, and they negotiate ways to meet these anticipated needs. As discussed further below, the quest for a better way of life that underscores much lifestyle migration is an ongoing endeavour (Benson 2011). In other words, the better way of life that inspired lifestyle migration at retirement, and the destination, may not be equally valued as the body ages, and the individual develops different needs.

Lifestyle migration in the global south and east

The comparison of intra-European lifestyle migration with migrations further afield reveals that these latter migrants make longer-term assessments of how a better way of life is constituted, and can benefit from cultural differences in attitudes to coping with older age. Increasing numbers of British migrants have been attracted to Asia on a permanent or part-time basis, including Singapore (56,000), Thailand (51,000), China (including Hong Kong) (36,000), and Malaysia (16,000) (Sriskandarajah and Drew 2006). Such movements of British citizens are matched by the migration of US citizens to Mexico and Central America. The 2006 report America’s Emigrants emphasized the increase in US senior populations in Mexico (17 per cent) and Panama (136 per cent) between 2000 and 2006 (Dixon et al. 2006). The recent Panamanian census concluded that there were 10,645 people born in the USA living in Panama (X1 Censo de Población y VII de Vivienda 2010). But these figures belie many movements that are difficult to monitor and do not distinguish corporate expatriates and other migrants from those who are ostensibly seeking more leisure-oriented lifestyles; similarly, they may not include peripatetic lifestyle migrants.

Recent and not yet published fieldwork in Panama and Malaysia by O’Reilly and Benson demonstrates that migration is an act of agency, securing or planning a positive older age. Among North Americans living in Panama, a common narrative around leaving the US was the unsustainable rising cost of healthcare following retirement. Moving to Panama offered the prospect of receiving quality healthcare by US-trained doctors and healthcare professionals (as Panama does not have its own medical training facilities) at an affordable price (Benson 2013). In their anecdotes about healthcare, respondents stressed that the cost of their annual health insurance in Panama was equivalent to what they had been paying a month in the US. They could also afford to employ people to care for them round the clock if necessary. Indeed, one woman who already needed significant care explained that she had chosen to move to Panama City precisely because this was more affordable than in the US.

In Malaysia, the warmer climate and availability of fresh food, the multiculturalism, and the strong ‘expatriate’ communities are all considered to contribute to a better quality of ageing. But
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an added bonus is being able to have paid ‘help’ in the home and perhaps a live-in carer as one gets older. Hiring paid help (often Filipina or Indonesian migrants) is so common in Malaysia that it has become a cultural norm among all nationalities of the elite classes. Migrants admitted this with some embarrassment, aware that the situation was the result of long-term global inequalities, but they also saw it as an individual choice, and as an individual coping strategy that meant they would not be so reliant on other people, family, friends or the state, as would be the case had they stayed in (or returned to) their home countries.

A further issue for lifestyle migrants in more exotic destinations is the role of the family. As they age, migrants who have not moved far (for example intra-European migrants and internal US and Australian migrants) can draw on fairly strong connections to family and friends maintained through constant visits and the use of modern telecommunications, and they can usually return home if necessary. Migrants who have moved farther afield as they age are more likely to have their families dispersed around the globe, and to have severed ties to their home countries long ago (as a result of long-term migration trajectories). They are therefore forced to think more strategically about how to cope with the irresistible forces of ageing. While their peers within Europe, the US, Canada and Australia often migrated from and to countries with a welfare system that partially or wholly supported healthcare, there is very little, if any, state support for healthcare in the global south and east. For some migrants, this is a norm—in other words, prior to migration, they had to pay for healthcare (for example US citizens)—while for others this is a significant change. What is important is that in the marketing of these destinations the availability of affordable and high quality healthcare is emphasized. Beyond this, it also becomes clear that these destinations may additionally offer affordable care that can be and is substituted for family care-giving. These destinations not only offer the possibility of positive ageing, but also provision for the management and care of the ageing body. In this respect, there are structures in place to support the shift from the desire for western ideals of positive ageing to the need for the ageing process to be managed.

The need for a postcolonial lens

What has become apparent is that international lifestyle migration flows follow well-established routes, reflecting long-standing relationships between countries. While lifestyle migration research focused on migration within Europe, the relative positions of power between sending and receiving countries were overlooked as scholars paid attention to continuities between tourism and migration (O’Reilly 2003). However, it is difficult to ignore the global inequalities of power that facilitate and shape lifestyle migration to the global south and east, and as these flows grow, it becomes increasingly appropriate to apply a postcolonial theoretical lens (Fechter and Walsh 2010; see Hall 1996). Many current destinations were previously colonies (if not of the sending country then of another), and/or had been occupied by western powers in their recent histories, with the result that existent hierarchies on the ground are often racialized as well as classed. Lifestyle migrants, who are often white, middle-class and in receipt of larger incomes than many within the local population, enter at the top of these hierarchies, and are in an undeniable position of power within the destination (Benson 2013). As Croucher (2009) reminds us, this frames the reality of everyday life for lifestyle migrants living within such destinations in ways that reveal the ongoing legacies of relationships of colonization. This includes very practical things such as being able to speak German in Namibia (Armbruster 2010) and English in Malaysia; and access to special visas designed to attract the ‘right kind’ of elite older migrant (for example the ‘Jubilados (retirement) Visa’ (Panama) and the ‘Malaysia My Second Home’ Visa). But even places that were not directly colonized are affected by the ‘shared Western
tradition of viewing the Other with a sense of superiority [that] seems to transcend the particular national heritages and specific colonial cultures’ (Fechter and Walsh 2010: 1200).

This sense of hierarchy works both ways. Destinations are often legible to potential migrants; for example, the long history of US political and military intervention and their stake in the Panama Canal has resulted in Panama occupying a position within the geographical imagination of many US citizens. At the same time, destination countries appropriate global inequalities as they market their territories. Such logics clearly underpin the provision of particular visas for these affluent migrants. If it were not for the inequalities of power between the incoming migrants and members of the local community, the visions of a better way of life discussed above, framed in part around the successful management of later life, would not be possible.

However, both O’Reilly and Benson have found in their current research that this position of power does not always sit easily with lifestyle migrants living in Panama and Malaysia. Migrants are aware that as white westerners, they are privileged simply because of their position in a global hierarchy. They are relatively wealthy, have privileged access to visas and property rights, have the security of knowing they can return home to (at least relatively) politically and economically stable countries should they need to. But their awareness is often critical and self-conscious (Benson 2013). They express discomfort when locals are obsequious, and condemn westerners who flaunt or exploit their privilege. We also need to guard against treating lifestyle migrants as a homogenous group; even when referring to one nationality and/or one destination, power and privilege are mediated by class (see Fechter and Walsh 2010). These are all themes for further study for the field of lifestyle migration in later life.

**Conclusion**

Lifestyle migration is just one step in the quest for a better way of life (Benson 2011; see also Benson and O’Reilly 2009). In this respect, it is understandable that as the body ages, so too are adjustments made to how a better way of life is constituted. Indeed, the brief examples presented here show how perceptions of what quality of life is may change.

What is often overlooked is how expectations and imaginings of post-migration life intersect with the decision to migrate, in particular taking for granted the underlying westernized cultural construction of retirement, which privileges a sense of active and positive ageing. Future research should consider the way in which migration is influenced, not only by imaginings of the destination, but also ideas about ageing and how these may be supported or not by the life on offer within the destination.

However, it is also clear that while ideas about ageing influence the choice of destination and act as a reference for how lives are led within the destination, the physical experience of ageing, particularly the gradual or sudden deterioration of the body, may call into question and fundamentally change the terms of the better way of life that migrants seek. This may mean that migrants have to reconsider whether the destination can still support their quest for a better way of life, as they may find themselves in a situation where they ‘have no precedent to follow’ (Oliver 2007: 3).

The embodied experience of ageing is undoubtedly part of the context in which the ongoing quest for a better way of life that underscores lifestyle migration takes place. How this is experienced may be highly dependent on migrant expectations and imaginings of ageing and retirement and how these influence the decision to migrate, the support and care available locally, and the resources migrants can put to work in accessing these. The experience of the ageing lifestyle migrant is one of continuous negotiation and management as they attempt to bring their experiences and expectations in line with one another.
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