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Introduction

In recent years, as a result of the increasing relevance of migration inflows from non-European countries, studies on the social integration of immigrants in Southern European societies have attracted increasing scholars' attention, thus paralleling what has been traditionally the case for countries with older immigration histories, such as Continental and Nordic European ones (e.g. Cebolla-Boado and Finotelli, 2015). Alongside this increasing attention to migrants' social inclusion, a marked change in the demographic characteristics of the population of immigrant origins is taking place: while most non-EU migrants are young adults, the number of elderly individuals among this population is growing very rapidly. Most importantly, the share of elderly persons among the migrant population is expected to rise significantly in the next few decades; a process largely connected with the fact that an increasing number of first-generation migrants are ageing in place – and do not go back to living in the country of origin in their later life, the so called “salmon effect” (de Valk et al., 2011; Lanzieri, 2011). Thus, while immigration has contributed to slowing down the rapid aging process affecting Southern European societies (Dalla Zuanna and Billari, 2008), an aspect that has been often overlooked, both in the scientific literature and in policy analyses, is the fact that the migrant population is also ageing. This, in turn, implies that in the next future the long-term care needs of the migrant population will represent a major issue in the evolution of national social policies (Ciobanu et al., 2017).

A frequent assumption in past studies on, and policies for, immigrants' integration in European societies was that a large part of migrants would return to their country of origin when approaching later life (e.g. Warnes et al., 2004). One of the consequences of this (implicit) expectation is that the welfare needs of this social group have been largely overlooked. As pointed out by Ciobanu et al. (2017), apart from a few early exceptions (e.g. Warnes and Williams, 2006; Baldassar et al., 2007), it is only recently that social science books (Horn and Schweppe, 2016; Karl and Torres, 2016; Lawrence and Torres, 2016; Walsh and Näre, 2016) and academic journals (Torres and Lawrence, 2012; Zubair and Norris, 2015) have started addressing this theme. Policy and academic debates on migrants' welfare needs have mostly focused on short-term economic aspects (Warnes and Williams, 2006) and only a few scholars have explored long-term care issues (Ebrahim, 1996; Bolzman et al., 2004). Moreover, when elderly needs have been addressed, this has been done within the narrow concern of income support and pension policies (Dwyer and Papadimitriou, 2006; Warnes and Williams, 2006), whereas their care needs and, most importantly, the availability of informal care support from their families have been rarely addressed (see Ciobanu et al., 2017 for a review).

Traditionally, in Southern European countries the long-term care needs of the elderly population have been met by adopting a “familism by default” approach, largely based on the provision of cash-for-care transfers and a very limited provision of care services (Saraceno and Keck, 2010; León and Pavolini, 2014; Albertini and Pavolini, 2017). Within this context, migrant workers have been perceived (and studied) as care providers, that is to say as key resources for middle-class families and their elderly parents' care demands (Bettio et al., 2006). Their care needs, at an older age, have been scarcely addressed by both domestic policies and migration studies. Yet, migrant individuals potentially face a triple disadvantage due to age, migration background and additional elements, associated with factors at macro (national and international migration regimes, social policies and care regimes, public opinion towards immigrants, economic conditions in the country of origin and at the destination), meso (ethnic communities and family networks/ resources) and micro level (individual factors, such as migration experience, socio-economic level, professional activity, health condition, technological literacy and language proficiency) (Norman, 1985; Bolzman et al., 2004; Cela and Fokkema, 2017).

In this context, the availability of informal intergenerational support in later life is likely to become a key factor in affecting the wellbeing of ageing migrants. Previous studies - mainly based on data from the US, Continental and Nordic Europe - have shown that often immigrant individuals follow different rationales in their intergenerational transfer behaviour and face a dramatically different set of opportunities and constraints with respect to the native population (Attias-Donfut et al., 2012). When considering social support exchanges from adult children to elderly parents, most studies have found that these transfers tend to be less common among the migrant than the native population, whereas an opposite tendency is registered for financial transfers. According to numerous scholars, the main explanation for this pattern resides in the higher average living distance between parents and children with migrant origins, and the high proportion of transnational families. In fact, when these factors are controlled for, most studies document that social support transfers to parents is more frequent among migrants than natives. However, existing evidence on the topic is mixed, also due to the fact that results seem to vary significantly depending on the specific country of origin and destination considered (Attias-Donfut et al., 2012; Bordone and de Valk, 2016; Schans and Komter, 2010; Van Mol and de Valk, 2016). Various scholars have also found that families with migrant origins, more than native ones, tend to use intergenerational co-residence as a strategy to support elderly and frail members (Glick and Van Hook, 2002; Taylor et al., 2012; Burr and Mutchler, 1993, 1999; Zorlu and Mulder, 2011).

Besides documenting the different patterns of intergenerational support characterizing the migrant population (vs. the native one), a number of studies have further focused on trying to explain the observed differences. A large part of these are clearly to be attributed to the different structure of opportunity, needs and resources characterising these two populations. Once controlled for these factors, the residual difference is often attributed to migrants' expectations, cultural and solidarity norms (Silverstein and Bengtson, 1997; Angel and Tienda, 1982; Giuliano, 2006; Steinbach, 2013). But, these (supposedly) different norms on intergenerational support characterising the migrant population have been rarely studied and documented so far.

The present paper aims at filling some of the gaps in the existing scientific literature: the study focuses on the description and analysis of solidarity norms and support expectations among immigrants living in Southern Europe. Specifically, by using original data and a mixed method approach, we investigate the norms regulating filial obligations among Maghrebine migrants (mainly from Morocco), and their descendants, living in Italy. The study has two specific objectives. The first goal is to document: the support strategies considered more appropriate for dealing with the long-term care needs of elderly parents of migrant origins, the factors associated with preferences for specific strategies which are similar to the ones adopted by the native population, and the justifications underlying the preferences for these support strategies. The second objective is to describe the prevalent cultural norms regarding the identification of who is (mainly) responsible for the provision of informal support to elderly parents – with a special attention to the gender dimension of the division of care work. We also aim at identifying the correlates of gender-neutral norms and the arguments underpinning interviewers' positions. The next section of the paper will set the background of our empirical research work; the third will introduce the research design and the details of the survey through which our data was collected, as well as the variables we used for the analysis. The fourth section will present the findings. Some final remarks will close the paper.

Background

With her theory of family change, Kağıtçıbaşı (1996) presented a general framework to understand family relationships and the relevant variations in different socio-economic and cultural contexts. She distinguished between family systems that stress the collective dimension (relatedness) and those that focus more on the individual one (separateness). Kağıtçıbaşı suggests that the former is associated with less developed countries, that are expected to perceive caring for family members as a natural

function of family life; the latter is associated with Western countries, that are expected to act more individualistically. Kaııtçıbaşı, as well as other authors adopting her theoretical framework, have suggested that whenever migrant families are moving from countries where the collective dimension prevails to countries with (more) developed welfare systems, they experience a transition to a more individualistic context (Phalet and Schönplflug, 2001; Kaııtçıbaşı, 2005; Rooyackers et al., 2014). This transition in turn can create strains in family solidarity, adaptation to the patterns and cultural values that are typically found in the context of arrival and, thus, a reduction in the intensity and frequency of intergenerational relations. There are, though, authors who have argued that the framework of family change does not facilitate a comprehensive understanding of variance across groups (Dykstra et al., 2006). Moreover, there are theoretical and empirical studies showing that, in fact, the experience of migration *per se* may lead to a strengthening of the collectivistic values within families and increased intergenerational solidarity, also in the case of transnational families in which emigrated family members can still represent the major source of support for left behind elderly people (Baldassar et al., 2007; de Valk and Liefbroer, 2007; Nauck, 2007; Arends-Tóth and van de Vijver, 2008; Díaz Gorfinkiel and Escrivá, 2012; Boccagni, 2015; Vianello, 2016; Cela and Fokkema, 2017). Much of the previous empirical literature on the topic has revolved around these two contrasting hypotheses: does the experience of migration strengthens or weakens intergenerational relations? The findings, thus far, have been mixed (for a review of these studies see Albertini et al., 2019).

In the context of the above debate there are two micro-level social mechanisms that are particularly interesting for the present study. First, it has been suggested that acculturation, in association with the erosion of traditional values, customs and language and the adoption of host society values may cause strain in migrant families, by challenging consensual and normative solidarity across generations. This mechanism could be amplified by the different pace and degree of acculturation across family generations - the so called “acculturation gap” (Berry, 1997; Portes and Rumbaut, 2006; Thomson and Crul, 2007). Following from this, one would expect that norms regarding filial support obligations towards elderly parents would be less strong among second generation migrants and that they weaken with increasing duration of stay in the country of arrival. A second, different, social mechanism has been discussed and tested in previous research. It has been argued that the need to cope with the stress and difficulties connected with the migration process, the (possible) experience of social marginalisation in the country of arrival and, most importantly, the desire to preserve country of origin’s cultural identity can lead not only to the preservation of the original norms regulating family solidarity, but also to their reinforcement (de Valk and Liefbroer, 2007; Nauck, 2007; Arends-Tóth and van de Vijver, 2008; Cela and Fokkema, 2017, Baykara-Krumme and Fokkema, 2019, Karpinska and Dykstra, 2019). At the same time it is worth stressing a clear indication that comes from existing empirical studies: the correlates of the migrant status, in terms of family solidarity norms and practices, vary considerably depending on individual and family characteristics – see, for instance, the debate on super-diversity (Vertovec, 2007; Crul, 2016) – and on both the specific country of origin and arrival. The generalizations from previous empirical results, therefore, should be taken with caution.

Elderly care support strategies in the countries of origin

When looking at elderly care support strategies within immigrant communities, it is certainly crucial to address the topic with reference to the countries of origin too, in order to understand values, norms and perceptions associated with it.

The family constitutes the main source of support for most Arab populations (Yount and Sibai, 2009). The exchange of intergenerational support is driven by and built around three main principles of kinship: paternal lineage, patriarchal bargain, patrilocal residence and kin endogamy (Charrad, 2001). The relevance of the patrilineal descent is particularly strong among the rural and low educated population (Baykara-Krumme and Fokkema, 2019). Next, because systems of public support are embryonic in many Arab societies – including in the three countries from where respondents to the

survey considered here come from: Morocco, Tunisia and Algeria - co-residence remains one of the main strategies adopted by families to meet the needs of older adults (Yount and Sibai, 2009). Data suggest that older Arab women have a higher propensity than older Arab men of living in co-residence, consistently with the “kin keeping hypothesis”, according to which women’s higher prior investment in children results in higher levels of co-residential support in later life - even after accounting for differences in needs. Notwithstanding, variation and changes in living arrangements have become evident over time, thus suggesting increasing heterogeneity and the need for more analysis. For example, in spite of trends toward nuclear living in the earlier part of the family life cycle, older and younger generations may continue living in close proximity, visiting and supporting each other (Altorki, 1986; Barakat, 1988). Changes may be most dramatic among younger women (Al-Sanabary, 1985), due to improved access to school and employment and to competing support demands to raise children, working and caring for frail older parents and parents-in-law (Brink, 1987).

Norms on social support among migrants

Various previous studies have shown that norms on family support, especially those regarding filial support obligations towards elderly parents within families of immigrant origins, are stronger than those typically characterizing native population. This seems to be even more so for individuals migrating from Maghrebine countries. As a matter of facts, while underling the relevance of the religious culture, previous studies have also suggested that cultural norms and values regulating care provision are specific to the Arabic Muslims, which in turn are different from the ones found among Muslims ailing from other countries (Begum and Seppänen, 2017).

In the context of their research on family relationships in five cultural groups in the Netherlands, Arends-Tóth and van de Vijver (2008) found that differences in family related values are stronger between natives and migrants from Morocco (and Turkey) than for other migrant groups. The strength of attitudes towards filial obligations among migrants from Morocco have been confirmed by various studies (e.g. de Valk and Schans, 2008; Rooyackers et al., 2014), thus also showing that this characteristic is particularly accentuated among those who have migrated more recently and report affiliation to Islam (Merz and Özeke-Kocabas, 2009). In line with these norms and expectations, it has been found that – at least in Continental Europe – Maghrebine migrants are more likely to provide social support to their family members than both natives and members of other migrant groups. Financial support from parents to children, instead, tend to be rarer and it is biased in favour of sons versus daughters. Maghrebine migrants are also more likely than natives and other migrants to adopt intergenerational co-residence as a support strategy, which also reflects Islam prescribed obligation for adult children to take care of their elderly parents (Wolff et al., 2007; Attias-Donfut and Wolff, 2009; Silverstein and Attias- Donfut, 2010; Schans and Komter, 2010; Saeed, 2003).

Data & methods

The data presented in this paper draws from a survey conducted between November 2014 and June 2015, in Bologna (Northern Italy). The target group included adult migrants (18 years old or older) born (or with at least one parent born) in Tunisia, Morocco, or Algeria and residing in the province of Bologna. A total of 144 face-to-face interviews were conducted, by selecting cases through a snowball sampling procedure. As this procedure does not provide a representative sample of first and second-generation immigrants from Maghreb in Bologna, the validity of our findings is restricted to our interviewees. Most of the interviews were conducted in Italian, but, when necessary, the interviewers interacted in French, Arabic or English (Mantovani et al., 2018). We report in the appendix the original (Italian) and translated language (English) of the extracts selected, from the interviews conducted, for the qualitative part of this paper.

The interviews were conducted with the support of a questionnaire structured in three main parts: the first part with basic socio-demographic questions (such as sex, year and place of birth, partnership/marital status, year of (first) arrival in Italy, occupational status, educational level, household composition) the second part with questions on the respondents’ parents and parents’ in

law, their age, place of residence, living distance and contact frequency with the respondents; the third part with six vignettes in the form of short realistic stories (Finch, 1987), with the goal to explore the different dimensions and directions of intergenerational support obligations, and the family norms connected to both financial and social support to parents and adult children. The vignettes were followed by open-ended questions and, where relevant (depending on respondents' answers), a follow-up.

Two of the vignettes used in the survey focused on elderly care and this paper builds specifically on them. The two vignettes have a factorial design aimed to capture if and how different stimuli, along the dimensions of children's gender and birth order, produce systematically different responses. They comprised both the situation of intergenerational relations within transnational families and within families with both parents and children who migrated to Italy.

In the first vignette (Vignette A) a young adult migrant – married and with two small children – has an old, widowed mother, who lives alone in the country of origin and has limitations in carrying out the activities of daily living. The brothers and sisters of the main character of the vignette also migrated to Italy. The respondents were asked what the main protagonist and his/her siblings should do to support their mother. Four different versions of the vignette were used: in two of them the main character of the vignette is the son of the elderly woman in need of support (in one version he is the oldest son, in the other the youngest one); in the other two versions of the vignette, the main character is the daughter of the elderly woman in need of support. In this first vignette the interviewers had a set of pre-coded answers that were not read out to the respondents but utilized to codify respondents' answers. In some occasions further comments were added to account for the complexity of the responses provided. In the second vignette (Vignette B), a lone frail widowed mother lives in Italy. Her daughter and son live in the same city and are both married with children. The respondents were asked who should help the elderly mother with daily living activities and how. Two versions of the vignette were used: the first one portrays a first-born son and a second-born daughter, in the second the birth order is inverted. In this case there were no pre-coded answers available to the interviewees. The responses to the vignettes were post-coded by using a two-step procedure: in the first step we identified the support strategy that the respondent identified to be the best/most suitable to cope with the mother's care needs. To be noted is that in some cases, in the second vignette, more than one strategy was mentioned, without a specific priority order; in these cases multiple codes were utilized for the same respondent. In the second step, we identified who - the son, daughter or any other specific relative, friend or institution - should take the main responsibility for providing support to the elderly mother. The analysis of the empirical material collected was conducted through a mixed-method approach comprising statistical and textual analysis of vignettes responses.

After describing the sample characteristics, in the first step of the analysis, we described the main support strategies envisaged by our respondents. We also carried out a multivariate analysis to check the main factors correlated with the choice of financial support as the support strategy which is considered most adequate. In the second step, we dug out who, according to our respondents, should provide support to the elderly mother. Multivariate regression models were used to analyse the association between individual socio-demographic characteristics and the likelihood of adopting a consistent gender-neutral perspective on family support obligations towards the elderly.

The independent variables introduced in the models were the following: sex, age¹, age at arrival, educational level, employment status, a dummy to account for the cases in which the respondents had an Italian partner, a dummy for the cases in which the respondents had no religious affiliation (or reported they never pray), individual positions in the family generational lineage or (alternatively to the latter) a variable for the cases in which any of the respondents' parents or parents-in-law were alive and in which their closest living parent resided in Italy or abroad.

Results

¹ Models with age squared as independent variable were also tested but it turned out that there was no quadratic relation between respondents' age and our two independent variables.

The largest part of our respondents, 106 (74 per cent) were born in Morocco, 17 individuals in Tunisia, 7 in Algeria, one in France and 13 in Italy. The respondents' age varies between 18 and 79 years, but the average is relatively low – 34 years. The majority of the respondents arrived in Italy in their young adulthood – between 18 and 28 year – while those born in Italy or arrived before compulsory school age are 1 out of 5 interviewed individuals. Most of them are highly educated – 53 per cent have a secondary high school diploma, 19 per cent a tertiary education. Since the average age of the respondents is relatively low, it is not surprising that the large majority – almost 62% – belongs to the child family generation: they have parents but not children (yet). More than three quarters of our respondents declare to have a religious affiliation, and to be Muslims.

The profile of our respondents are largely in line with the statistics for the Northern Italian Emilia-Romagna Region, in which Bologna is located: the Moroccan community is the second largest immigrant community, following the Romanian one; the number of university students with families of immigrant origins is higher compared to the national average, probably due to both the snowball sampling procedure and the fact that the university student's community is particularly large in Bologna (Osservatorio Regione Emilia-Romagna, 2019).

[here table 1]

Filial obligations and preferred support strategies

When confronted with the first short story – in which the old mother in need of help is still living in the country of origin of the main story character – the majority (60 per cent) of our respondents suggested that the best solution to cope with her needs is for the mother to move to Italy and co-reside with her children (table 2). The preference for intergenerational co-residence as a support strategy emerged even more clearly when we sum to this group those respondents who indicated that one of the children should go back to the country of origin to co-reside with the elderly mother.

Differently, the strategy of providing economic support to the mother – which might be considered (more) typical of “individualistic cultures” and easier to implement for transnational families – was indicated as the best solution by less than a third of individuals in our sample. Moreover, within this group of respondents, a small part further specified that the money transferred to the country of origin should not go to a generic care provider, but to a relative of the mother who will take care of her. We interpret this as a further possible sign of the strength of the cultural traits associated with family relations in “collectivist cultures” (Kağıtçıbaşı, 2005) that would deserve more in-depth qualitative research. Strategies that involve public or private welfare institutions, such as social services or nursing/old age homes, are even less frequently mentioned, if they are cited at all.

Similarly to the first vignette, when reacting to the second short-story, a large part of the respondents identified co-residence as one of the preferred strategies to cope with the care needs of an old frail mother. The provision of economic support - supposedly to buy paid care, but the reason was often left unspecified - was suggested as an adequate solution only by less than a third of the respondents. At the same time, changing the setting of the story, with the elderly mother residing in Italy, resulted in more heterogeneous responses: 37 per cent of the individuals in the sample said that children should directly support the mother by providing personal care (i.e. help with activities such as washing, getting dressed); 19 per cent answered that they should provide support without providing any further indication on the type of support that they think children should give; 15 per cent identified instrumental support (i.e. help with shopping, cooking, household chores) as one of the main forms of help to be provided. Interestingly, while we could expect respondents would mention public welfare provision, considering that the story involves a family residing in Italy, a country with limited but still available public welfare provision, only a handful of respondents explicitly mentioned nursing homes or social services as potential sources of support. This is even more interesting if we consider that, according to data by the Emilia-Romagna Region (Osservatorio Regione Emilia-Romagna, 2019), the majority of non-national users of the “sportello sociale” (social services helpdesk) are of Moroccan nationality (24.7%) and are aged on average 33 years – an age very close

to that of most of our respondents. These data suggest it is unlikely that our respondents were totally unaware of existing services and rather reinforce the hypothesis that family obligations towards elderly parents are strong. Once more these results underline the relevance of Arab Muslims' cultural and religious values in (i) shaping filial support obligations and norms of family solidarity; (ii) creating potential challenges in accessing public care services for elderly people (Begum and Seppänen, 2017; Odeh Yosef, 2008).

[here table 2]

Providing financial support (and/or utilising financial support provided by the public welfare system) to buy long term care services on the market is a common practice to deal with the care needs of elderly parents in Italy, and even more so in the Emilia Romagna Region, where the survey took place. These services are not an alternative to instrumental and personal care provided by the (female) members of the family. They are an essential component of the welfare mix used by natives to reconcile family and work-related obligations, as well as the (competing) demands for support from both the younger and older generations. What we expected therefore was that the more respondents were socialized into the Italian society, the more they would be familiar with the Italian welfare system, the more they would be likely to indicate economic support as one of the strategies to cope with the care needs of an elderly widowed mother. We also expected individual factors - usually associated with higher levels of social integration - such as a higher educational level, being a university student and having a low degree of religious observance (not having any religious affiliation or never praying), would all be factors positively associated with the preference for economic support as higher exposure to Italian educational institutions, as well as a low degree of religious observance, is likely to be associated with a process of acculturation and the acceptance of a more individualistic strategy to face parent's needs than directly providing personal care.

The results of the multivariate analyses only partially confirmed our expectations (table 3). The likelihood of indicating economic support as one possible strategy – either in vignette A or B – is positively related with being born in Italy or arrival in the country before age 6. Arrival in the country after school age (after age 18) is strongly and negatively associated with identifying economic support as a solution. Furthermore, having a tertiary education is positively associated with the dependent variable. However, in contrast with this pattern and our expectations, having an Italian partner being a university student and having no religious affiliation or a low level of religious observance – generally assumed as indicators of integration in a more individualistic society – are not positively associated with viewing economic support as a viable care option. It would then seem the case that either there are mixed findings about individuals' integration in the host society and the preference for this specific “individualistic” care strategy, or that these characteristics are poor indicators of integration in the host society.

[here table 3]

The qualitative analysis of the information collected provides further insights on the motivations underlying the preferred support strategies indicated by the respondents.

The preference for the option involving the mother moving to Italy and co-residing with one of the children is based on the priority accorded to remaining in Italy, where the mother's children have settled:

“They should allow her to move to Italy, as they all live here, with their families, their jobs.”
(male, 39 years, Morocco, 28 years when migrated, unmarried, high school, unemployed)

A second key factor supporting this option is linked to the perceived better quality of public health care services in Italy:

“The best solution could be for the mother to move to Italy, if they can assist her, particularly because medicine is more advanced in Italy and health assistance would be free of charge.”
(female, 21 years, Morocco, 11 years when migrated, unmarried, high school, student)

Some respondents questioned the willingness of the mother to move to Italy, where she would probably feel isolated, due to missing language competence and little or no familiarity with the Italian context. Based on this argument, they suggested that (one of) the children should go back to the country of origin to co-reside with her:

“The children should take turns to go back and co-reside with their mother in the country of origin, they should stay there for some time and take care of her. This would be the best solution both because there are many children and because elderly people that have always lived in the same place would find it hard to move to a country that is not theirs.” (male, 69 years, Morocco, 43 years when migrated, married, lower secondary, retired)

“[The children] should find an agreement among them for a solution to take care of their mother. The best solution would be to organise for the elderly mother to move to Italy, but such a solution should be taken by weighting its negative side, that is to say the fact this would mean taking her away from her life, her habits, her friends and relatives in Morocco, against its positive one, that is to say the fact she would be close to her children (...). Another possible solution would be for one of her children to move back to Morocco: it would be the child that is more willing to do so – not necessarily the eldest. In any case the elderly mother should by no means be left alone, although she would be probably unwilling to leave her country.”
(male, 29 years, Morocco, 24 years when migrated, unmarried, post high school, student)

Regarding the possibility of supporting the mother by providing financial support or paying for a caregiver, those respondents who suggest this as viable strategy expressed diverging motivations. Some justified the solution of sending money to the country of origin (vignette A) on the basis that it is much more expensive to pay a caregiver in Italy:

“The children should collect some money to help their mother and send it to Morocco – even a small amount, as much as they can. Life in Morocco is much cheaper than in Italy, hence even a small amount of money would do. (...) The money sent to the mother could be useful to employ a caregiver, or a woman with a difficult [socio-economic] situation, to take care of her.” (male, 18 years, Italy, unmarried, lower secondary, student)

Others mentioned financial support - sometimes as a second best option - to face the potential problems connected to direct care provision (both in Italy or in the country of origin) while in paid work or taking care of small children, thus again suggesting an awareness of insufficient public welfare support in both contexts:

“The daughter is married, it is her elder brothers, if they work, who should first take up responsibility for their mother. If the daughter is married and has got children she is unlikely to work and is likely to take care of her children, while her husband is likely to work: how could she help her elderly mother? She will also be responsible over her mother, but less than her brothers. If the elderly mother lives alone, the male children could ask her to move to Italy, but the mother is old and in Italy she would be lonely and she would stay at home all the time and would have difficulties with the language. Hence they could collect some money

and send it to Morocco every month to pay someone to take care of her, either a neighbour or a caregiver, so that she could stay in her country of origin and be always surrounded by other elderly people, neighbours, etc.” (male, 23 years, Morocco, 18 years when migrated, unmarried, high school, unemployed)

As clearly highlighted in the above quotations, adult children weighted options for support arrangements by taking into consideration their perceptions on how best to grant the well-being of their mother.

Limited importance was accorded to the actual mother's preferences. In contrast with the view of some scholars, according to whom Islam intends healthcare as taking care holistically of physical, but also social, spiritual and environmental needs of care receivers (Fonte and Horton-Deutsch, 2005), only very few respondents mentioned this aspect should be duly considered:

“The hypothesis of the elderly mother moving to Italy should be weighted against the willingness of the mother to do so rather than staying in Morocco. Moving to Italy would involve thinking of and organising an adequate housing solution for her, besides an economic support.” (male, 25 years, Morocco, 16 years when migrated, unmarried, lower secondary, employed)

Another crucial factor affecting care giving arrangements and related perceived obligations are migration regimes and bureaucratic issues, as suggested by other authors (Kilkey & Merla 2014):

“The female children who do not work should move to their mother, because it is a big problem for her to move to Italy, considering documents, permits to stay.” (female, 21 years, Italy, years when migrated, unmarried, high school, student)

Expectations for support from the (Italian) welfare system were addressed, although scarcely any reference was made to specific support measures – such as public transfers, home care, nursing homes - and it was not clear to what extent this depended on a limited knowledge of how the system operates or, alternatively, on cultural and religious barriers to the utilization of public elderly care services with limited “cultural competence” (Albertini and Semprebon, 2018; Begum and Seppänen, 2017; Odeh Yosef, 2008).

“If the children are on a low income, they must ask social services for the ‘indennità di accompagnamento’². In this way they would receive some economic and care support and their elderly mother could have her meals delivered at home every day, for example. A few days a week she could stay at her children, but this depends on the relationship between the male child and his wife, between the female child and her husband and between the elderly mother and her daughter-in law/ son in law.” (female, 46 years, France, 20 years when migrated, married, none, redundancy)

In spite of (some) expectations of welfare support, the last extract shows well how a strong sense of filial support obligation prevails on the side of respondents in determining their preferred care strategy. In several occasions, independently of the specific support strategy envisaged, respondents stressed the cultural/ religious grounds of these perceived filial obligations:

“They must absolutely help their elderly mother in need and take her to Italy, thus ensuring she can enjoy good health and access to economic and health support. The children could take turns, starting with the elder child. It is a honour for us, Muslim Tunisians, to have our

² This is an economic benefit given to people that are not self-sufficient.

mother co-residing.” (male, 30 years, Tunisia, 27 years when migrated, unmarried, graduate, employed)

“The best solution, if they are ‘real’ Moroccans, is for the elderly mother to leave the house in which she lives to move to her male or female child.” (female, 21 years, Morocco, 11 years when migrated, unmarried, high school, student)

“According to the Moroccan culture, whenever couples give birth to children, these will be their ‘pension’ and will have to help them when in need, all of them in the same way.” (male, 48 years, Morocco, 23 years when migrated, unmarried, lower secondary, employed)

“[The children] must do everything for their mother because she has done everything for her children! The Coran does prohibit children to cause any harm to their parents, particularly their mother – it is unacceptable and it would be unforgivable.” (male, 37 years, Morocco, 36 years when migrated, married, post high school, unemployed)

However, in several occasions cultural and religious motivations were mentioned to justify a strong refusal with respect to specific strategies and to stress the respondent identification with the culture of the origin country vis-à-vis that one that they think characterizes the country of arrival. An example is the use of nursing home, that is not considered in line with cultural values and social norms of the country of origin, as opposed to the country of destination:

“Often, here in Italy, elderly people are taken to a nursing home, but in the Muslim world this practice is very much reproached - it means that sons/daughters do not show any gratitude towards their parents, after all they have done to bring them up.” (female, 34 years, Tunisia, 25 years when migrated, married, graduate, employed)

“Taking care of one’s own parents is not only a precept of Islam, it is actually part of the Moroccan culture; it is not allowed to abandon them, we would never think of taking them to a nursing home.” (male, 29 years, Morocco, 22 years when migrated, married, high school, employed)

Although scholars have reported contrasting findings in this regard, many have stressed that the experience of migration may contribute to reinforcing collectivistic family values in transnational families. Our findings are in line with this finding and thus signal that filial support obligations towards elderly parents within families of immigrant origins are strong, and possibly stronger than those of natives, particularly for Maghrebines and more specifically Moroccans. Furthermore, we found evidence that individual’s demographic (age and gender) and cultural and religious traits operate in synchrony in shaping family support obligations: female, older and more religious respondents are less likely to embrace individualistic strategies of support, while reporting higher adherence to cultural and Islamic-specific precepts about filial support obligations (Wolff et al., 2007; Attias-Donfut and Wolff, 2008; Bjornberg and Ekbrand, 2008; Silverstein and Attias-Donfut, 2010; Schans and Komter, 2010; Baykara-Krumme and Fokkema, 2019).

Who should support an elderly mother, gender bias or gender neutrality?

As mentioned above, in the second step of codification of the responses to the two vignettes, we focused on whom the respondent identified as holding the main responsibility for providing support to the elderly mother.

As shown in table 4, the majority of our respondents held a gender neutral view with respect to the sharing of responsibilities, when confronted with vignette A. Half of the remaining respondents deemed the son(s) as the main person(s) in charge of providing support and the other half the

daughter(s). Such responses seem to be partly driven by the vignette version. When the main character in the vignette is the son of the elderly the share of those reporting the son should have most responsibility is higher and *viceversa* when the main character is the daughter.

In vignette B, the portrays an elderly mother who lives in the same country as her children, a different gender pattern emerges: the majority of respondents (37 per cent) attributes the primary responsibility of taking care of the mother to the daughter, 12 per cent to the son, while about 29 per cent of respondents adopt a gender neutral perspective. Most interestingly, about 22 per cent of respondents indicated that both children should take care of their mother and yet put forward a clear gendered division of tasks. On the one side, they stated that daughters should provide support with personal care activities (dressing, washing) or certain instrumental care tasks, such as cooking, cleaning the house, etc.; on the other, they suggested it is the sons that should be in charge of providing economic support to the mother, helping with paperwork and bureaucratic issues, paying bills, shopping.

[here table 4]

By drawing from data on table 4, we can argue that the majority of respondents think that both male and female children hold responsibility towards their mother. However, behind an apparent gender-neutral stance, we noticed a gendered position in relation to task-division. The answers provided by the same individual to the two vignettes tend to be quite consistent. We will now analyse the main factors correlated with reporting gender-neutral views in answering both the vignettes. Slightly more than 21 per cent respondents (n=30) provided a gender-neutral view in both the vignettes.

The multivariate results (table 5) indicate that respondents who were either born in Italy or who migrated before age six are considerably more likely to hold gender-neutral views on the division of informal care work. Most notably, the same applies to the degree of religiosity: not praying or not having religious affiliation are associated with a much higher likelihood of holding gender neutral preferences. Higher educational levels, being a university student, having an Italian partner, belonging to the child-generation and having parents living in the country of origin are also characteristics positively associated with gender-neutral views. Similarly, to what reported in previous analyses, we see that also in this case being a woman and religious is associated with a stronger adherence to more traditional practices in care-giving.

[here table 5]

Once more, the qualitative analysis of the vignette responses helps us shed some light on the arguments underpinning interviewees' positions. It also helps uncover nuances in relation to task division. In particular, a substantial quota of respondents, who reported the son(s) should be in charge (or the main person in charge) of providing support, pointed out his specific responsibility would be on economic support and housing, while his wife should ensure practical and personal care to the elderly mother:

"I would not search for a nursing home, I would have my mother co-residing with me. The male child should not take her to a nursing home. The elderly mother should be helped by his wife." (male, 28 years, Morocco, seven years when migrated, unmarried, high school, employed)

Many of the respondents who identified the daughter as holding the main responsibility for care provision explained their preference on the basis of intimacy related motivations:

"All of the children should contribute financially to allow for a paid external support; unless there is a female cousin [who can help] in Morocco. Maybe as a first choice, I would take her [the elderly mother] to Italy. She should stay with the female child as there is more intimacy

between a mother and her daughter.” (female, 22 years, Morocco, 14 years when migrated, unmarried, high school, student)

Other respondents expressed evident gendered stereotypes in their views, including for example the fact that women are better carers than men. Similar motivations are associated with responses by interviewees who envisaged a gendered-division of tasks, while stressing that both children should provide support:

“By no means should they leave their elderly mother alone. She should go and live with her daughter because in Morocco elderly mother go and live with their daughter as they are more patient, while sons are the symbols of strength and prestige!” (female, 39 years, Morocco, 29 years when migrated, unmarried, high school, unemployed)

“The daughter possibly understands more the elderly mother’s needs. It will be her to help.” (female, 19 years, Italy, years when migrated, unmarried, lower secondary, student)

“One of the two children must take the elderly mother to co-reside with them: it would be better if the daughter did it, because she can best take care of the mother: washing her, shopping, cooking, etc. But the son has responsibility too and must help, for example by taking the mother to the doctor, to the hospital, etc.” (male, 29 years, Morocco, 22 years when migrated, married, high school, employed)

“The daughter could support the elderly mother as far personal issues are concerned, such as personal care, cooking, cleaning. The son should take care of the financial aspects, for example by doing the shopping every now and then.” (female, 19 years, Italy, years when migrated, unmarried, lower secondary, student)

Other respondents explicitly refused gendered views of filial obligations and task division:

“The elderly mother could live with one of her sons, or else they could take turns. Sometimes, male adult children manage to take care of their parents better than their sisters.” (female, 33 years, Morocco, 23 years when migrated, married, lower secondary, employed)

“They [children] should take turns, in their free time, [and share the burden] equally. They are both [no matter if male or female] children, in the same way.” (male, 33 years, Morocco, 28 years when migrated, unmarried, high school, unemployed)

Interestingly, support by sons was sometimes associated with a conflicting scenario, whereby the co-residence of the mother at the daughter’s house might generate clashes with the son in law:

“They could take the mother to live with them, first of all with the son. If she lived with the daughter, she could have difficulties getting along with the son in law. If she lived at her son’s house she could get along better with her daughter in law, that could also take care of her.” (male, 31 years, Morocco, 23 years when migrated, unmarried, high school, employed)

Despite the associations uncovered in the quantitative analyses, respondents have made no explicit reference to religion to explain/motivate their opinion on tasks division, nor could we find specific mentions to gender issues that we could associate with a culture-specific idea of gender-roles. This result can also be understood in light of the fact that the family still represents a crucial resource for migrants coming from country where systems of public support is very limited and where co-residence often remains the only viable solution (Yount and Sibair, 2009).

Conclusion

In spite of demographic trends towards increasing aging population within groups of immigrant origins, the academic literature has devoted relatively little attention to the theme of informal long-term care to non-autonomous older members of immigrant families. Intergenerational support is of paramount importance in the context of migration studies. First, it is a key factor shaping the wellbeing of ageing-in-place-migrants in later life. Second, thanks to the lower costs of travel and improved means of communication, it is also at the basis of specific migratory moves motivated by the need of giving/receiving support. Furthermore, within the context of transnational-care provision and shuttle-migration, intergenerational support obligations can also (potentially) represent a new source of insecurity; this is the particularly the case for young-old women sandwiched between support provided to both migrated children and left-behind parents, women than often moves between national contexts that have not yet set in motion specific policies to address the care needs of elderly migrants and/or to recognize the social rights of care-migrants women (Baldassar et al., 2007; Deneva, 2012; Boccagni, 2015).

The present article aimed at investigating norms on filial responsibility towards elderly parents among Maghrebine immigrants living in Italy. In particular the focus was on the respondents' perceptions about what are the best solution to address the care needs of elderly parents, and on how care responsibilities should be shared (or not) among multiple actors and family members. We think that these responses are a reliable measure of family norms prevailing in the Maghrebian immigrants community, while other data and survey techniques should be utilized to investigate actual behaviour or more subjective and individualized preferences. Through the adoption of a mixed quantitative and qualitative methodology, including also the use of the vignette technique, attention has been put on support strategies, on the justifications underlying the fact that such strategies were deemed to be the most adequate, as well as on gendered patterns in the division of tasks.

The findings highlight that the majority of respondents opt for co-residence in Italy as the best solution, while economic support is envisaged by less than a third of individuals in the sample, with a positive correlation to individual factors, such as being born in Italy and arrival in the country before age 6. The main reasons advanced to explain the preference accorded to co-residence in the country of destination comprise the perceived better quality of public health care services in Italy. On the other side, limited reference was made to any expectation of support from the Italian welfare system, thus making it questionable whether this may depend on scarce knowledge of the system and/or scarce access to it or rather the fact that family obligations are strong and prevented the respondents from explicitly referring to it in order to stress their own responsibility or, again, the presence of cultural and religious barriers to the utilization of care services with limited "cultural competence" Author(s); Begum and Seppänen, 2017; Odeh Yosef, 2008. Adult children weighted options for support arrangements by considering the overall well-being of their mother, although the actual preference expressed by (or to be asked to) mothers themselves was not pointed out as an issue. A crucial factor influencing decisions related to perceived filial obligations are migration regimes, on the one side, and related bureaucratic restrictions on the other.

What must be stressed is that, regardless of the specific support strategy indicated, the importance of cultural and religious motivations at the basis of norms of filial obligations emerged explicitly: not only having a religious affiliation and praying is a factor negatively associated with the individualistic practice of providing financial help instead that in-kind support, but also Islam, is mentioned explicitly as a guiding principle in terms of the choice of coresiding with elderly parents in need and of the individual's responsibility towards one's own family and elderly parents even more. We also found evidence that age, gender and religiosity simultaneously affect norms of family solidarity: older, female and more religious respondents are less likely to embrace individualistic strategies of support, while reporting higher adherence to Islamic precepts about filial obligations.

Interesting findings regard also the gendered division of obligations that seem to be more influenced by individual factors. The majority of respondents held a gender-neutral view with respect to the sharing of responsibilities, although some gendered divisions emerged. Particularly as far as vignette B - portraying an elderly mother living in the same country as her children – is concerned, the majority of respondents associated the primary responsibility to the daughter. In this sense, the multivariate results indicate that respondents who either were born in Italy or migrated before age six are considerably more likely to hold gender-neutral views on the division of informal care work, thus highlighting the relevance of an acculturation pattern on this dimension (see also Mertz et al., 2009, Maxwell, 2010, Rumbault, 2015). Next, once more we find evidence of the interplay of gender and religion: being a woman and religious is associated with a stronger adherence to more traditional non-gender neutral division of care work within the enlarged family.

Overall, the results suggest the need for further investigation on the future demand for family and elderly care, on care strategy and the relevance of multigenerational living arrangements. More qualitative attention should be paid also to values and attitudes and to comparing them to actual behaviours. They may spur into support and (care) opportunities, they may add to elderly migrants' vulnerability or else further crystallize social inequalities, associated, among other things, with a welfare provision that often fails to address the needs of elderly cohorts adequately.

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