

Intergenerational Caregiving within Chinese  
One-Child Transnational Families:  
Qualitative Study of How Chinese Migrants in Finland  
Experience Caring for Their Parents in China

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## Abstract

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### **Abstract:**

The one-child policy of the People's Republic of China created an entire generation of Chinese only-children, who have migrated abroad more often than any previous generation. However, despite the increased emigration, alongside the aging population, the Chinese elderly care system relies on the inputs of children. Therefore, there is a fundamental conflict between the filial intergenerational caregiving responsibilities and international migration processes, although some caregiving forms may be exchanged from a distance.

This master's thesis investigates how the Chinese first-generation only-child migrants who live in Finland experience caring for their parents in China. The research questions are: How do Chinese one-child transnational families practice transnational caregiving? What are the expectations and possibilities concerning caregiving? What are the elderly care arrangements like for the parents?

The theoretical framework of this study consists of three dimensions of transnational caregiving: care circulation approach, transnational caregiving types, and the capacity, obligation, and negotiated commitment as factors that explain the practices of transnational caregiving. The research data consists of nine semi-structured interviews of Chinese migrants of the only-child generation. The analysis method is qualitative theory-guided content analysis.

The results suggest that Chinese migrants and their parents practice transnational caregiving by exchanging emotional support. The migrants experience that their possibilities to provide care to their parents are limited. However, providing care is a cultural obligation. The future elderly care arrangements of the parents are unclear, which makes the situation stressful for the migrants. The situation is also frustrating as ideal options for arranging elderly care are lacking. If the migrants return to China to provide elderly care to their parents, they are forced to make sacrifices with their work and family. However, if they do not return to China, the alternative options of relying on institutional elderly care or hiring a maid or a nurse are not ideal either.

Although the migrants value filial traditions, they desperately demand societal and policy changes that would allow them to plan the future elderly care of their parents. Based on the results, there is a demand for establishing more quality institutional elderly care services in China. There is also a need for the Finnish migration policy to allow family-based old-age migration, as some other countries do. Overall, in the current situation, the national policymaking in Finland and in China does not recognize the needs of transnational families and transnational caregivers.



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### Tiivistelmä:

Kiinan kansantasavallan yhden lapsen politiikan seurauksena syntyi ainoiden lapsien sukupolvi. Ainoat lapset ovat muuttaneet ulkomaille useammin kuin yksikään aiempi sukupolvi. Maastamuuton lisääntymisestä ja samanaikaisesta väestön ikääntymisestä huolimatta Kiinan vanhustenhoitojärjestelmä perustuu lasten tarjoamalle hoivalle. Näin ollen lasten vanhempiinsa kohdistuvan hoivavastuun ja kansainvälisen muuttoliikkeen välillä on perustavanlaatuinen ristiriita, vaikka joitakin hoivan muotoja on mahdollista harjoittaa myös etäältä.

Maisterintutkielman tarkoituksena on tutkia, kuinka kiinalaiset Suomeen muuttaneet ensimmäisen polven maahanmuuttajat kokevat hoivaamisen Kiinassa asuvia vanhempiaan kohtaan. Tutkimuskysymyksenäni ovat: Kuinka kiinalaiset yhden lapsen transnationaaliset perheet harjoittavat transnationaalista hoivaa? Millaisia odotuksia ja mahdollisuuksia heillä on hoivaan liittyen? Minkälaiset vanhempien vanhainhoidon järjestelyt ovat näissä perheissä?

Tutkielman teoreettinen viitekehys koostuu kolmesta transnationaalisen hoivan ulottuvuudesta: hoivan kierron lähestymistavasta (care circulation approach), transnationaalisen hoivan tyypeistä (transnational caregiving types) ja kapasiteetista (capacity), obligaatiosta (obligation) ja neuvotellusta sitoutumisesta (negotiated commitment) transnationaalista hoivaa selittävinä tekijöinä. Aineisto koostuu yhdeksän maahanmuuttajan puolistrukturoiduista haastatteluista. Analyysimenetelmänä on laadullinen teoriaohjaava sisällönanalyysi.

Tutkielman tulokset osoittavat, että kiinalaiset maahanmuuttajat ja heidän vanhempansa harjoittavat transnationaalista hoivaa antamalla emotionaalista tukea. Maahanmuuttajat kokevat mahdollisuutensa hoivata vanhempiaan rajoitetuiksi. Hoivan tarjoaminen on kuitenkin maahanmuuttajien kulttuurinen velvollisuus. Vanhempien vanhainhoivan järjestelyt ovat tutkimuksen tekohetkellä epäselviä, mikä aiheuttaa paineita haastateltaville. Tilanne koetaan myös turhauttavaksi, sillä ideaalia ratkaisua vanhainhoivan järjestämiseksi vanhemmille ei ole tarjolla. Maahanmuuttajien työ ja perhe ovat Suomessa, joten Kiinaan palaaminen vanhempien hoivan tarjoamiseksi ei ole maahanmuuttajille houkutteleva vaihtoehto. Muut vaihtoehdot, kuten institutionaalisen hoivan muodot tai hoitajan palkkaaminen eivät myöskään ole optimaalisia vaihtoehtoja.

Vaikka maahanmuuttajat kunnioittavat hoivavastuun perinteitä, he kaipaavat kovasti yhteiskunnallisia muutoksia, jotka auttaisivat heitä vanhempiensa vanhainhoidon suunnittelussa. Tulosten perusteella Kiinassa olisi laajalti tarvetta laadukkaille vanhainhoivan palveluille. Toisaalta Suomen maahanmuuttopolitiikkaan toivottaisiin mahdollisuutta vanhempien maahanmuuttoon perhesiteen perusteella, mikä on joissain muissa maissa mahdollista. Tällä hetkellä kummankaan maan kansallinen päätöksenteko ei tunnista transnationaalisten perheiden ja hoivan antajien tarpeita.

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# 1 Introduction

Population aging, the increase in the number of elderly and the proportion of older persons in the population, is a current phenomenon in nearly all parts of the world. Improved nutrition, health, and medication have contributed to increased life expectancies in modern societies (Settles, Sheng, Zang, & Zhao, 2013, p. 632). The combination of increased longevity of human lives and the on-going decline in fertility result in gradual population aging (Peace, Dittmann-Kohli, Westerhof, & Bond, 2007, p. 1). Population aging transforms societies in various ways. It influences labor and financial markets and the demand for housing services, elderly care services, social security, family structures, and intergenerational relationships.

The population of the People's Republic of China is aging dramatically due to the increased life expectancy and low fertility rate. According to Chen, Xu, Fong, Wang, and He (2019), Chinese life expectancy increased from 43.83 to 70.58 years during the second half of the 20<sup>th</sup> century. Chinese total fertility rate, the number of children born to each woman in her lifetime, decreased from 6 in the 1950s–1960s to reach a historic low of 1.6 in 2000. Thus, the Chinese population is aging faster than populations in Western countries. It is also aging faster than the extremely rapidly aged Japanese population. Researchers argue that this pace leads China to become “an aged society” with 14 % of its population being 65 years and older by 2025 and “a super-aged society” with 20 % of its population being 65 years and older by 2035. (Chen et al., 2019.)

Furthermore, the consequences of the one-child policy, in other words, the dramatic family planning policy that allowed Chinese couples to have only one child in the years 1979–2015, may have accelerated the rapid demographic changes in Chinese society. Qian and Blomqvist (2014) state that the rapid population aging of China is accompanied by a reduced growth rate of the working-age population, further reducing GDP growth. As the prevalence of health issues is greater among the elderly than younger people, population aging also increases per capita spending on healthcare services. (Qian & Blomqvist, 2014, p. 55.)

However, Chinese society is also undergoing other significant changes. Chinese people are wealthier than in the past, and China is more open to foreign countries than in the past, which has led to increased migration. Migrants are people who move from their usual place of residence for various reasons, temporarily or permanently, and within a country or across an international border (IOM, 2020b). Chinese people migrate both abroad and from rural to urban areas within China (Morgan & Kunkel, 2011, p. 253). In the 21<sup>st</sup> century, Chinese migrants include university students, entrepreneurs, contract laborers, highly skilled professionals, and political refugees (Thunø, 2007, p. 2).

Despite the consequences of population aging and increased and changed Chinese migration, the Chinese elderly care system relies almost entirely on the support provided by family members, especially by children. The system then follows the Confucian tradition of filial piety. Although there are some institutional care

options in the urban areas of China, providing family-based elderly care is commonly thought to be the responsibility of the children. However, international Chinese migrants in host countries have limited opportunities to provide elderly care to their parents in their home counties. The combination of small family size and migration movements pose challenges to the Chinese elderly care norms (Morgan & Kunkel, 2011, p. 253). Therefore, there is an interesting conflict between filial caregiving expectations and international migration processes. This conflict is becoming more apparent in the rapidly aging society.

On the other hand, research shows that international migration and filial caregiving responsibilities do not automatically exclude each other. Although migrants establish a new life in the host country, they do not make a sharp break from their home country (Østergaard-Nielsen, 2003, p. 13). Families form and maintain ties to each other and create communities despite geographical distance and national borders. Families consider the effects of distance and borders on elderly care arrangements. Intergenerational caregiving is possible from a distance, although the caregiving practices may differ from proximate caregiving. (Baldassar et al., 2007, pp. 5–14.) Families who operate despite the distance and borders are called transnational families. Transnational families “live some or most of the time separated from each other yet hold together and create something that can be seen as a feeling of collective welfare and unity, namely ‘familyhood,’ even across national borders” (Bryceson & Vuorela, 2002, p. 3).

Transnational families have been a growing subject of interest in migration research. Furthermore, many of the consequences of the one-child policy to Chinese society have been studied widely. However, a limited number of studies focus on the consequences of the one-child policy on the filial elderly care responsibilities in the context of transnational families. Liu (2016) claims a research gap in the intersection of the intergenerational issues of Chinese families and transnational migration. In addition to Liu’s (2016) study of the intergenerational dimensions of transnational Chinese migrant families in New Zealand, few recent studies include Tu’s (2016; 2018) research on the experiences of Chinese only-child migrants and their parents on filial piety and traditional intergenerational practices in the United Kingdom and China.

Chinese one-child transnational families are transnational families that typically consist of an only-child who migrated abroad and parents who stayed in China. Chinese one-child transnational families are unique, which makes that a fascinating research subject. There is no other similar generation of only-children as no other country has implemented equally strict family planning policies or controlled the population size in equally dramatic matters. According to Tu (2016), Chinese one-child families are a relatively new family arrangement type that was created by the effects of the one-child policy, access to foreign travel, and the rise of the middle-class. Because physical closeness is considered a significant characteristic of families in Chinese society, the distance between transnational families poses challenges to the norms. Chinese one-

child transnational families are unique for allowing researchers to examine aging and intergenerational relations in the context of modernization and globalization. (Tu, 2016.)

In this master's thesis, I investigate the transnational intergenerational caregiving experiences of Chinese only-child migrants living in Finland. The migrants' experiences of transnational intergenerational caregiving have never been studied in the Finnish context. Furthermore, the Finnish context differs from many other countries because the strict Finnish migration policy does not allow the migrants in Finland to bring their parents to Finland for a long-term stay. Therefore, I am interested in studying the intergenerational caregiving experiences of Chinese migrants living in Finland, where future elderly care options are more limited than in many other countries. If the Chinese migrants living in Finland wish to fulfill the filial caregiving responsibilities, they must make sacrifices in terms of work and their own family life. Additionally, although the Chinese are one of the largest foreign nationals in Finland, Chinese migrants living in Finland are an understudied migrant group compared to other major migrant groups. Therefore, this thesis also contributes to the general social-scientific knowledge about Chinese migrants living in Finland.

More specifically, in this master's thesis, I investigate how the first-generation Chinese migrants to Finland, born in mainland China under the one-child policy, experience transnational caregiving possibilities and the filial elderly care responsibilities toward their parents living in China. This master's thesis is qualitative research. The data consists of nine individual interviews of Chinese migrants living in Finland. I analyze the data through the lens of transnational caregiving, following the principles of the theory-guided content analysis method. Therefore, the research questions are:

- 1) How do Chinese one-child transnational families practice transnational caregiving?
- 2) What are their expectations and possibilities concerning caregiving?
- 3) What are the elderly care arrangements like for the parents?

In the second chapter of this master's thesis, I contextualize the thesis by providing background information and knowledge about Chinese one-child transnational families. I also overview previous research on Chinese one-child transnational families and caregiving. In the third chapter, I introduce three theoretical approaches related to transnational caregiving. In the fourth chapter, I discuss the research data and methods. In the fifth chapter, I present the results of this thesis. Finally, in the sixth chapter, I overview concluding remarks and demands for further research.

## **2 Chinese One-Child Transnational Families and Caregiving**

In this chapter, I contextualize this master's thesis by providing information and knowledge about Chinese one-child transnational families. I also further overview previous research on one-child transnational families and caregiving.

### **2.1 Conceptualizing Chinese One-Child Transnational Families**

Here I briefly introduce the history of the one-child policy and Chinese migration and discuss the concepts of transnationalism and transnational families. I also discuss how the one-child transnational families are the product of the effects of the one-child policy and the changing experiences of Chinese migration. Additionally, I introduce filial piety and elderly care in China. Finally, I discuss what, if any, are the opportunities for old-age migration to Finland and other Western countries. The elderly care possibilities of the parents of the Chinese only-child migrants are defined by filial piety, the basis of the Chinese elderly care system, and old-age migration opportunities.

#### **2.1.1 One-Child Policy**

The one-child-per-couple policy of China, commonly known as the one-child policy, has been one of the most dramatic and unique attempts to control population growth in the world. The one-child policy was introduced in 1979, and it continued until 2015 in mainland China. In principle, during the years of enforcing the policy, Chinese couples were allowed to have only one child. By aiming to control the size of the Chinese population, the Chinese government further aimed to excel in economic growth and improve the living conditions of Chinese citizens. Fong (2002) argues that the primary goal of controlling the population size was promoting modernization and reducing competition for resources within the family and nation.

At the time when the one-child policy was implemented, the demographic situation in China was challenging. As Hesketh, Lu, and Xing (2005) argue, in 1979, approximately 25 % of the global population was Chinese. However, this one-fourth only controlled approximately seven percent of the global land suitable for agricultural purposes. Additionally, two-thirds of the Chinese population was under 30 years old, and the baby boomers of the 1950s and 1960s were to reach fertile age. The Chinese government saw overpopulation as a threat to development and started implementing the one-child policy to fight overpopulation threats. (Hesketh et al., 2005.)

Nevertheless, the Chinese government had aimed to control the population even decades before the one-child policy. As Settles et al. (2013) review, the first attempts to control population growth by the Communist Party of China date back to the late 1950s. At first, the Communist Party aimed to control population growth by propagandizing and popularizing birth control in population-dense areas. However,



gradually, the policies on birth control and family planning became more restricted and controlled. The first concrete step in implementing controlled family planning was introducing the “later, longer, fewer” (晚稀少) campaign in the early 1970s. The campaign promoted later marriage, longer intervals between childbirths, and fewer children per family. It also established contraceptive and abortion services in rural areas. By the mid-1970s, the Chinese fertility rate had decreased significantly. However, because most Chinese were very young, the Chinese population continued to grow, which led to establishing the strict one-child policy. (Settles et al., 2013, pp. 627–628.)

Chinese officials claim that the one-child policy reduced the Chinese population by approximately 250–300 million (Settles et al., 2013, p. 629). During the years of the one-child policy and the preceding “later, longer, fewer” campaign, the total fertility rate of China decreased significantly. In 1971, the total fertility rate of China was almost six, but during the 1970s and early 1980s, it decreased rapidly to only almost three in 1981, and by 1996 it had further decreased to less than two (Hesketh et al., 2005). In 2015, the last year of the one-child policy, the total fertility rate was as low as 1.67 in mainland China (World Bank, 2020b).

However, it is debatable whether the one-child policy and the preceding “later, longer, fewer” campaign significantly reduced the total fertility rate. According to the World Bank (2020a) data, the total fertility rate of the entire world decreased from 5.06 in 1964 to 2.42 in 2018, and the total fertility rate in some other Asian countries and regions, such as in Hong Kong, Singapore, and South Korea, decreased through very similar patterns than the total fertility rate in mainland China without any birth control policies. Thus, it is likely that the Chinese total fertility rate would have decreased even without implementing strict policies.

Nevertheless, it is notable that there were differences to which extent the one-child policy was enforced in the urban and rural areas of China. As a result, the fertility rate of China also varies significantly between urban and rural areas. The policy was enforced the strictest in urban areas. On the contrary, as Hesketh et al. (2005) argue, couples were typically allowed to have a second child five years after their first child was born in rural areas. Furthermore, some ethnic minorities were even allowed to have a third child. However, the principles differed between regions. (Hesketh et al., 2005.) Greenhalgh (2008, p. 1) argues that having at least two children, including one son, was essential in rural areas to the survival of the family.

The one-child policy was demolished gradually. Feng, Gu, and Cai (2016) claim that the policy was adjusted due to the demand to rehabilitate the dependency ratio of China. Since 2013, those Chinese people who themselves were only-children could have two children. Since 2016, all Chinese people could have two children. (Feng et al., 2016.) Therefore, in 2016, the over 35-year era of the one-child policy ended, and the current era of “the two-child policy” began. However, during the first years of the new two-child policy, the dependency ratio was rehabilitated only slightly. According to World Bank (2020b) data, the total fertility rate of China has increased from 1.67 in 2015 to only 1.69 in 2018.

The one-child policy had many significant and unintended consequences for Chinese society. Settles et al. (2013) argue that the one-child policy affected the social and economic situations, family processes, and family dynamics. Unbalanced sex ratios at birth, unbalanced urban-rural ratios of newborn babies, changes within family and kinship structures, and the rapid population aging are some of the most emerging unintended consequences. Additionally, the one-child policy also affected the family norms, intergenerational relationships, the stability and forms of marriages, and the socialization of the only-children. Statistically, Chinese only-children tend to have access to more opportunities and resources than children with siblings. However, they also face more pressure from their parents and grandparents and are more likely encouraged to self-centered behavior. Studies have described Chinese families with one child to value high achievements, outstanding leadership, educational success, and identification with the values of their parents. (Settles et al., 2013, pp. 630–638.)

Fong (2002) claims that although much literature on the one-child policy has concentrated on the damage of mandatory fertility limitation to women, the one-child policy also transformed the gender norms and empowered only-child daughters in urban areas. Historically, a patrilineal kinship system long characterized Chinese society, favoring sons at the expense of daughters. However, the one-child policy changed the demographic patterns. Daughters were no longer systematically excluded from family resources, leading to urban only-child daughters having more power and capabilities than ever to confront disadvantageous gender norms and advance their success. (Fong, 2002.) However, although the one-child policy was beneficial to some in the urban areas, it caused suffering and trauma on a large scale (Greenhalgh, 2008, p. 1).

Fong (2011) argues that the one-child policy created the generation of only-children that enjoyed unparalleled family resources in their childhood and early adulthood. The generation of only-children grew up young adults who had many family members and relatives investing in them and no siblings competing for the family resources. Furthermore, they often had no caregiving responsibilities toward their parents or other elderly dependents and no children of their own. Therefore, the generation of only-children was expected to utilize the concentrated resources to “launch themselves, their families, and their country into the developed world before dependency costs come in the form of marriage, childbearing, parental aging, and a social security crisis.” (Fong, 2011, p. 217.)

### **2.1.2 Chinese Migration Abroad**

Chinese people are migrating abroad at an accelerating rate. In 2017, approximately 10 million Chinese people lived abroad (IOM, 2020a). However, Chinese migration abroad is not a new phenomenon. In the colonial era of the past, Chinese migrants were dominantly male contract laborers who migrated to South-East Asia and settled in isolated areas such as Chinatowns and mining areas (Thunø, 2007, p. 2.) At that

time, Chinese migrants formed an exceptional and distinct migrant group that differed from other migrant groups in its patterns of movements and behavior types. However, the Chinese migration experiences began changing since the economic reforms of China at the end of 1978, when China incorporated into the global community. (Skeldon, 2007, pp. 35–38.)

Deng Xiaoping became the leader of China in 1978. His pragmatic reform and opening policy replaced the preceding leader Mao Zedong's Cultural Revolution as the primary policy line of the Chinese leadership. With Deng's lead, China altered into an era of fast economic growth and versatile modernization. (Liu, 2011, pp. 30–31.) According to Lieberthal (1995, p. 124), Deng's reform was the most extensive, systematic reform effort that any socialist state had ventured to implement. Skeldon (2007) argues that the reform ended the exceptionalism of Chinese migration and created a dividing line between the "old" and the "new" migration. The growing participation of the Chinese state in the global economy is one of the main reasons for the increased Chinese migration in the 21<sup>st</sup> and late 20<sup>th</sup> centuries. (Skeldon, 2007, pp. 35–47.) In the 21<sup>st</sup> century, Chinese migrants all people of all genders and from various socioeconomic backgrounds. Globalization, global capitalism, and the rising economic significance of China strongly influence Chinese migration experiences. (Thunø, 2007, p. 23.)

Traditionally, migration scholars in China have categorized Chinese migrants based on their citizenship: The term "overseas Chinese" (华侨) refers to migrants who are Chinese citizens, and the term "ethnic Chinese" (华人) to those who are non-Chinese citizens. However, the term "new Chinese migrant" may better describe those who migrated abroad since the early 1980s, not regarding their reason to migrate, legal status, or citizenship. New Chinese migrants mostly come from urban areas of China. These urban Chinese citizens migrate to global cities in developed countries in Asia, Europe, and North America. They migrate abroad to study, work professionally, and reunite with their families, extending their stays and becoming migrants. (Thunø, 2007, pp. 3–5, 23.)

However, the new Chinese migrant groups are certainly far from being similar to each other (Skeldon, 2007, p. 45). Generally, in the West, China is often mistakenly viewed as a culturally homogeneous nation, although there is great cultural variety among the Chinese population. For example, in addition to the majority ethnic group of Han Chinese that accounts for over 90 % of the Chinese population, there are 55 ethnic minority groups in China (Asikainen & Vuori, 2005). The 55 minority groups have a combined population of 67 million (Wu, 2011, p. 71). Furthermore, there are significant cultural and linguistic differences even within the majority ethnic group of Han Chinese (Zang, 2015, p. 22).

The proportion of Chinese migrants who have chosen a European country as their destination is small. However, the number has been growing over the past decades. In 1980, only approximately 600,000 Chinese citizens migrated to Europe. By 2007, the number had increased by three and a half times, with

2.15 million Chinese people migrated to Europe. France, Italy, Spain, and the United Kingdom have the largest Chinese populations of all European countries. (Latham & Wu, 2013.) Although the proportion of total Chinese migrants who have chosen Finland as their destination is tiny, the Chinese are one of the largest foreign nationalities in Finland. According to Statistics Finland (2021), altogether, 9,825 Chinese citizens lived in Finland at the end of 2019, Chinese being the fourth largest foreign nationality. Chinese migration to European countries is likely to continue to rise in the future, although the growth rate may slow down (Latham & Wu, 2013).

Chinese students account for a significant number of Chinese migrants in developed countries (Thunø, 2007, p. 5). The concentrated family resources allowed the generation of only-children to have more opportunities to study abroad than any previous Chinese generation (Tu, 2016). However, other factors also benefited the only-children to have more study abroad opportunities. First, the income and value of housing increased rapidly within urban Chinese families because of fast economic growth and migration from rural to urban areas. Second, international education infrastructure expanded. Developed countries saw developing countries like China as growing markets for educational services. Partnerships between institutions, study abroad programs, and foreign language schools were established. Third, many young Chinese from different socioeconomic backgrounds were motivated and eager to study abroad in developed countries. (Fong, 2011, pp. 4–5, 93.)

The generational differences between the only-children and their parents are massive. Fong (2011) argues that the parents who grew up during the Cultural Revolution from 1966–1976, when even teaching foreign languages were mostly prohibited, often experienced going abroad hard, impractical, and even undesirable. They felt socially, emotionally, and culturally bonded to China. However, their children grew up in China that valued foreign language proficiency. These children were also much more educated than their parents. They saw studying abroad as natural and reasonable and as a means to leapfrog over those who had succeeded in the extremely competitive Chinese education system. Parents supported their children's pursuits to study abroad because it was a broad strategy for upward mobility. (Fong, 2011, pp. 68–70.)

Chinese students typically migrate to study abroad for a specific period but stay longer and settle in the host countries. Studies show that approximately only a quarter of Chinese students return to China after studying abroad. (Thunø, 2007, p. 5.) According to Tu (2016), significant life events such as graduation, employment, relationships, marriage, and having children affect the only-child migrants' decision-making processes of settling in the United Kingdom, even if that was not the original plan at the moment of migration. The migrants have accumulated social and economic capital in the foreign country, which cannot easily be transferred to China. They have established careers and families there, gained work experience, formed professional networks and social connections, and achieved a specific quality of family life. Furthermore,

external affairs, such as migration policy, job opportunities, and unexpected events, also impact decision-making. (Tu, 2016.)

### **2.1.3 Transnationalism and Transnational Families**

Vertovec (2009) defines transnationalism as “economic, social, and political linkages between people, places, and institutions, crossing nation-state borders and spanning the world.” Transnationalism may also be understood as a condition in which some relationships are intensified globally. Thus, the relationships now occur in the “worldwide virtual arena of activity.” Transnationalism and globalization are intertwined. Globalization produces transnationalism. However, transnational processes and practices also intensify globalization. (Vertovec, 2009, pp. 1–3, 25.) The transnational linkages construct and reform the world of the 21<sup>st</sup> century.

Portes, Escobar, and Radford (2007) further draw upon the idea of transnationalism to describe migrant transnationalism, which they define as the economic, political, and socio-cultural activities that form linkages between the migrants and their counterparts in the home countries. Due to the increasingly available communication technologies, migrants and their family members in the home countries can communicate often and intensively, being aware of what is going on in each other’s lives. Even the people who themselves never migrate are strongly influenced by the practices, events, and values of their migrant family members because they are all connected transnationally (Vertovec, 2009, p. 15). Moreover, as Zhou (2013) argues, growing attention is also pointed to the socio-cultural and structural foundation of transnational families, instead of only to the advances in communication and transportation technologies.

The notion of transnationalism is relatively new. For most of the 20<sup>th</sup> century, social-scientific research focused on analyzing phenomena within one nation-state. This approach of research is called methodological nationalism. (Wimmer & Glick Schiller, 2002.) Transnationalism aims to recognize and avoid the limits of methodological nationalism (Martikainen, 2009). Thus, transnationalism exceeds the limitations of national contexts and nation-state borders. Nevertheless, as Chambon, Schröer, and Schweppe (2012, p. 2) argue, transnationalism does not deny the importance and relevance of nation-states. If nation-states and national borders did not exist, there would not be cross-border migrants. National contexts shape the lives of migrants significantly by affecting their mobility possibilities, opportunities to work, and access to rights in many ways.

Only recently, it has been recognized that migration is not always a simple one-way process of a person moving from a country to another. Instead, migrants sustain transnational linkages that are of high importance. (Lightman, 2012, p. 13.) For most of the 20<sup>th</sup> century, social-scientific migration research focused on studying adaptation and integration processes. In that time, before the 1990s, the concept of transnationalism was not yet introduced. (Vertovec, 2009, p. 13.) Thus, the notion of “transnational” was

only used to describe commercial and organizational cross-border activities. However, since the early 1990s, anthropologists began to use the notion of transnational to describe all kinds of practices that cross borders. (Baldassar et al., 2007, p. 11.)

Martikainen, Sintonen, and Pitkänen (2006) divide transnationalism into macro, meso, and micro-levels. Macro-level transnationalism refers to a framework that influences cross-border activities through various international agreements. Meso-level transnationalism refers to the cross-border activities of companies and organizations. Micro-level transnationalism refers to the relations between migrant family members. (Martikainen et al., 2006, p. 24.) Micro-level transnationalism creates transnational families. Transnational family members develop and sustain practices of mutual belonging despite living far away from each other. Baldassar and Merla (2014a, p. 21) conclude descriptively that transnational families “routinely live their lives together across distance.” Defining transnational families as a specific type of family arrangement increases the awareness that family members often maintain their sense of collectivity and kinship even when separated by distance and borders (Baldassar et al., 2007, p. 13).

Communication technologies have an essential role in enabling the maintenance of social networks, especially within transnational families (Vertovec, 2009, p. 160). However, as Baldassar et al. (2007) argue, although communication technologies create “presence” between family members across time and distance, visits are also significant to transnational families. During the visits, family relationships are established, maintained, and reinvigorated. Visits can be conceptualized as moments of the unity of transnational social fields, which may fortify joyful reunions or painful tensions. Visits offer opportunities to understand and accept changes in family relations, fulfill obligations and duties toward family members, and reinforce the relationship between identity and place. Frequent communication from a distance may increase the desire also to visit more frequently. (Baldassar et al., 2007, pp. 137–138, 169–171.)

Nevertheless, according to Baldassar, Nedelcu, Merla, and Wilding (2016), the expansion and enhancement of communication technologies are even more revolutionary than affordable travel to the ubiquitous connectivity and the radical transformation of migration experiences. Baldassar and Wilding (2020) propose the concept of “digital kinning” to describe the transforming practices of older migrants in constituting and maintaining social support networks through communication technologies, including WeChat, WhatsApp, Skype calls, and text messages. These communication technologies enable geographically distanced networks to maintain supportive and involved relationships that assist the well-being and social and cultural identities of the migrants. (Baldassar & Wilding, 2020.)

Central to the understanding of transnational families is acknowledging that settlement to a host country is not the ending point of the migration process of an individual. Migrants keep in touch and exchange care regularly across distances and borders. (Kilkey & Merla, 2014.) Therefore, migration does not

straightforwardly imply a spatial-temporal closure (Olwig, 2002, p. 101). Transnational families encompass several national contexts, precisely like other transnational phenomena (Mazzocato & Schans, 2011). Migration both relies on upon and creates social networks (Vertovec, 2009, p. 38). Migrants live their lives across borders by developing and maintaining multiple homes. Migrants may develop “dual” or even “hybrid” identities, oriented toward the home and host countries of the migrants, or a mixture of both. (Baldassar et al., 2007, pp. 11–13.)

The “non-migrants” or “local translocals,” the family members of migrants whom themselves do not migrate, are also crucial in conceptualizing transnational families. They may feel a sense of attachment to the country of residence of the migrant family members through the transnational family ties. (Baldassar et al., 2007, pp. 13–14, 216.) Migration and transnational practices may also bring diversity to the host societies of the migrants and reverse-cultural ideas, values, habits, practices, and material culture to the home societies of the migrants (Vertovec, 2009, p. 162). However, belonging to a transnational family is also a choice and matter of negotiation because all family identities are social constructs confirmed and renewed through exchanges and contact points (Bryceson & Vuorela, 2002, p. 10). Furthermore, both state policies and international regulations impact the lives of transnational families and the solidarity between transnational family members (Kilkey & Merla, 2014).

Nonetheless, even in the era of technological innovations and rapid and intensive communication methods, migrants do not always participate in forming and sustaining transnational relationships. As Vertovec (2009) argues, some migrants may never engage in any transnational activities, and the level of engagement or participation may also vary within specific groups of migrants. Therefore, the concept of transnationalism has been criticized for assuming that all migrants engage in transnationalism when the types of transnational social, economic, and political exchange may vary depending on multiple factors and conditions and may develop variously depending on the settlement and the life cycle of migrants. (Vertovec, 2009, pp. 13–17.)

Notions of transnationalism have also received critique for other reasons. First, the concept of transnationalism has been criticized for being too close to or even a synonym for the concepts of “international,” “multinational,” “global,” and “diasporic.” Second, some researchers have claimed that the differences between “transnational,” “transstate,” and “translocal” are not apparent. Third, the concept of transnationalism has also been criticized for focusing on and reinforcing “the nation” instead of conceptualizing the phenomenon beyond the social-scientific model of a nation-state. Finally, some have criticized transnationalism for being a function of technology determining the development of society, caused by advances in, for example, cheap air travel and real-time communication from a distance. (Vertovec, 2009, p. 17.)

#### **2.1.4 Filial Piety and Elderly Care in China**

Aging changes the motor, perceptual, cognitive, and emotional functions of people (Macroen, Coleman, & O'Hanlon, 2007, p. 38). Age-related diseases, functional declines, and the inability to perform everyday life tasks are often involved in the later lives of many people (Boll & Ferring, 2013, p. 223). When people age, they may become dependent on other people for help and assistance in daily tasks. Physical and psychological dependency refers to the social needs of an individual that arise from illness, impairment, or disability, or the reliance of an individual on the assistance of other people to meet the needs of personal care and health-related matters (Bond & Rodriguez Cabrero, 2007, pp. 123–124.)

Globally, many institutional solutions are designed to meet the needs of older people for assistance or dependence on others, including assisted living, home care, long-term care, and residential care. However, in many parts of the world, family members have traditionally been responsible for providing old-age assistance and caregiving to elderly family members. In China, elderly care relies heavily on the responsibilities and caretaking inputs of family members of younger generations, following the Confucian traditions. Confucianism is the oldest and most respected philosophy in China (Goldin, 2011, p. 1). It values hierarchy in political arenas and social relationships and the impeccable behavior in each social relationship as the key to a harmonious society (Lieberthal, 1995, pp. 6–7).

Confucianism has laid the foundation for much of Chinese culture, including the idea of filial piety – the devotion to family (National Geographic, 2020). Although there is no single version of filial piety that characterizes entire China (Ikels, 2004, p. 2), two critical dimensions of filial piety are widely shared. First, respecting the authority of parents, other elders, and ancestors, and second, children having the duty to provide physical and emotional care to their aging parents (Sun, 2014; Chen, 2006). Therefore, Chinese children are usually responsible for providing care to their elderly parents. Settles et al. (2013, p. 634) describe the children's support as a moral and economic obligation and an opportunity to balance the older generation's investments toward them. However, studies also suggest that filial support is no longer an equally essential form of elderly care as it was in the past.

Traditionally, Chinese generations have cohabited together in the same household. In the past, women in heterosexual marriages typically moved in with the extended families of their husbands. The married couple was responsible for providing elderly care to the parents of the husband. Typically, the wife faced a heavier caregiving burden toward her parents-in-law than her husband did. However, as Settles et al. (2013) argue, the one-child policy challenged these gender-normative expectations concerning caregiving. Because the only-children do not have siblings, a married couple must provide care to their parents on both sides without help from siblings. (Settles et al., 2013, p. 632.) Therefore, the only-children of all genders face caregiving responsibilities.



Zhang and Goza (2006) call the relatively new form of family structure created by the one-child policy “the 4–2–1 family structure.” The families of this structure typically consist of four grandparents, two parents, and one child. It is heavy duty and much required from the only-child to provide care to all two parents and four grandparents. Furthermore, the generation of only-children may also be responsible for taking care of their children, thus possibly facing pressure to provide care to younger and older generations. Thus, the generation is sometimes referred to as “the sandwich generation.” Sun (2014) argues that the elderly are not encouraged to rely entirely on their children for elderly care because of “the structural squeeze” of the younger generation, their struggles with combining family life, caregiving, and work. Yan (2008) further suggests that the stigma of rural elderly living apart from one’s married son(s) has virtually disappeared because most elderly, who do not require frequent caregiving, now live in empty-nest households.

Meng and Luo (2008) claim that filial support as the primary form of elderly care is demolishing. Especially the living arrangements of elderly citizens are undergoing significant changes. Fewer adult children choose to cohabit with their elderly parents, and fewer elderly parents ask their offspring to live together with them. The role of filial support and cohabiting is changing because of the changing cultural values and social norms of Chinese society. The Chinese economic and political system has begun to value the role of individual responsibility, which also affects family values and housing arrangements. Additionally, the Chinese elderly are healthier than in the past, they have more financial resources than in the past, and there is more housing available than ever before. (Meng & Luo, 2008, pp. 268–270.)

However, Hu and Peng (2015) suggest that although Chinese parents today do not have similar authority over their children as parents did in the past, it does not affect the elderly care responsibilities. Nevertheless, the changes in the housing arrangements are visible in the censuses. The proportion of elderly living with their children has declined, and the proportion of elderly-only housing arrangements has increased. Whereas in the census of 1982, only 34 % of all Chinese households were households of one, two, or three people, by the 2010 census, this percentage had increased to 64.9 %. (Hu & Peng, 2015.) Although censuses only have a limited ability to describe the living conditions of people, the decreasing size of Chinese households implies that fewer people live together with their extended family. Living together or close to their extended family is not possible for many. Young Chinese adults are moving cities and even countries for educational opportunities, experience on more mobile career paths, and international traveling (Settles et al., 2013, p. 640).

The traditional option of family-based elderly care is no longer available for many Chinese elderly (Zhang & Goza, 2006). Johansson and Cheng (2016) argue that it will be impossible to continue the traditions of family-based caregiving similarly in the past because of merely too few grandchildren and too many grandparents. According to Hu and Peng (2015), access to elderly care is becoming more difficult due to

the decreased birth rate and increased number of elderly-only families. However, the elderly may also seek care from other family members than their children, such as their partners, siblings, or even parents. (Hu & Peng, 2015.) Overall, there are not many other elderly care options available in Chinese society. Neither the state nor private corporations provide much institutionalized elderly care. The limited available options for “non-traditional old-age assistance” include care homes, hiring maids, and financial support via retirement insurance or pension plans; however, these options are often concentrated only to the urban areas of China (Zhang & Goza, 2006). Commonly, elderly care institutions can care for approximately 5–7 % of the elderly in developed countries, whereas this percentage is only approximately 1.5 % in China (Hu & Peng, 2015).

Some researchers claim that the Chinese government has unreasonably taken for granted that family members either cohabit or live within proximity (Settles et al., 2013, p. 640). It has led China to face the disproportionate supply and demand of elderly care and urgent needs to establish service systems for the elderly in rural and urban areas (Hu & Peng, 2015). Although one cannot straightforwardly state that establishing more institutional care services would be the key to solve the issue of lacking elderly care services, many researchers argue that the current system is uncertain because it depends only on families (Settles et al., 2013, p. 640). Studies show that the elderly who are financially able to are making independent plans for getting support in their twilight years (Zhang & Goza, 2006). However, simultaneously, some Chinese elderly are at risk for limited support by society and their family members (Settles et al., 2013, p. 640). The traditional family-based elderly care arrangements may not be successful in the modern realities of Chinese society.

However, the Chinese government has responded to the elderly care dilemma by introducing laws that enforce the responsibility of children to take care of their parents (Hu & Peng, 2015). According to The Central People’s Government of the People’s Republic of China (2012), the children of Chinese citizens over 60 years of age alongside their spouses, or other persons entitled, are obligated to provide financial support, emotional support, and elderly care to their parents by the law. According to Chinese legislation, children need to visit and keep in touch with their parents “often,” or they risk being sued (Liu, 2016). Thus, the family is a unit for welfare even at the policy level.

Nonetheless, China has established some unemployment insurance and social security programs, to which employees and their employers contribute. These programs provide benefits when the employees retire or if they lose their jobs. However, these programs mostly only consider urban formal-sector workers. (Qian & Blomqvist, 2014, p. 221.) Overall, there are paradoxes of rural-urban inequality in China, enforced by the limited possibilities for rural Chinese migrants in cities due to the “hukou” (户口) household registration system. (Whyte, 2010, pp. 1–15). The hukou system requires the registration of every Chinese

citizen. The citizens are treated differently according to their officially registered location and identity. (Wang, 2005, p. 22.) Although the hukou status does not prevent mobility, it limits one's access to services, such as healthcare, some forms of employment, and education at the local government level in places other than one's registered location (Young, 2013, p. 1).

Nevertheless, Morgan and Kunkel (2011) claim that the shifting age structure of China demands change to the pension financing mechanism and the healthcare system. The public policies concerning pension and healthcare have not changed accordingly with the rapidly changing age structure. The pension financing mechanism may be developed by increasing taxes, decreasing outlays, allowing the current accumulation of funds to be used in the future, or combining these strategies. The healthcare system may need to shift its focus toward care for chronic conditions and the unique needs of the elderly, which requires retraining of healthcare professionals and versatile adaptation of the healthcare system. (Morgan & Kunkel, 2011, pp. 253–255.)

Johansson and Cheng (2016) studied the options of China for overcoming the issues related to the rapid aging of society and compared the situation of China to when Sweden established a universal pension system a century ago. The researchers suggest that an old-age pension system or another social security system could reduce the individual risks that increase in old age. However, financial autonomy, nevertheless, does not eliminate the caregiving obligations of family members. The researchers also state that the family care contributions must be recognized in developing the old-age pension system. A fair distribution of welfare must be further examined. The measuring instruments of an old-age pension system must be adapted to the changing situation. The social security issue is becoming increasingly urgent. (Johansson & Cheng, 2016.)

However, authoritarian decision-making allows China to make timely decisions on emerging issues (Liu, 2011, p. 83). In 2016, the Central Committee of the Communist Party and the State Council announced the *Healthy China 2030* blueprint, a strategic plan to promote healthy lifestyles and improve healthcare services and the healthcare industry, altering health as a priority in policy-making (Fu, Zhao, Zhang, Chai, & Goss, 2018). Furthermore, according to recent news from the National Health Commission of the People's Republic of China (2019), a national healthcare system for the elderly is expected to be established by 2022, including more than a half of all secondary general hospitals in China to have a geriatric department by 2022, the establishment of door-to-door healthcare services, and a significant improvement in the overall quality and quantity of healthcare services for the elderly. The planned national healthcare system for the elderly may be a needed response to the demand. However, although China is building more elderly care infrastructure, Liu (2016) argues that there may be a cultural stigma associated with the utilization of

institutional elderly care. Because family-based elderly care as the primary option is a significant cultural value, the utilization of institutional elderly care may indicate a lack of filial piety. (Liu, 2016.)

### **2.1.5 Old-Age Migration to Western Countries**

As argued earlier, the opportunities for adult migrants to bring their elderly parents to live with them in Finland for caregiving and elderly care purposes are minimal, if not non-existent. Chinese citizens require a visa for visits up to 90 days and a residence permit for more extended stays. Finnish authorities recognize several reasons for migrating into the country, such as working in Finland, studying in Finland, or moving to Finland to be with a family member (Finnish Immigration Service, 2020a). However, the family-tie-based residence permit type only considers spouses, registered partners, cohabiting partners, guardians of children under 18 years of age, and children under 18 years of age as legible family members to apply for this type of residence permit (Finnish Immigration Service, 2020b).

Therefore, family-based old-age migration to Finland is practically impossible because of the narrow concept of the family according to the Finnish migration policy. Bryceson and Vuorela (2002) argue that generally, in Western countries, a family is understood as a synonym to a household, and households are positioned as targets of social policies. However, referring to the family as a household does not consider the composition and structure of the transnational families of migrants. (Bryceson & Vuorela, 2002, p. 28.) Because the Finnish migration policy understands a family as a synonym to a household, it does not consider the needs of transnational families well.

Nevertheless, many other Western countries allow family-based old-age migration through family-tie-based residence permits and family sponsorship. For example, Australia, Canada, New Zealand, the United Kingdom, and the United States allow the migration of elderly parents to be with their children who have settled in these countries. Nevertheless, strict regulations apply to the migration process. In many countries, family-tie-based residence permits and family sponsorship are costly, and there may be only a limited number of permits issued every year. Furthermore, often, only citizens, permanent residents, or green card holders can apply for this type of family reunification. (Australian Government, 2021; Government of Canada, 2021; GOV.UK, 2021; Immigration New Zealand, 2021; U.S. Citizenship and Immigration Services, 2021.)

Mazzocato and Schans (2011) argue that family reunification has become more challenging, costlier, and more time-consuming in almost all Western countries over the past years. Migration policies typically do not encourage old-age migration. For the migrant-receiving Western societies, old-age migration is not economically profitable because the elderly are likely to require expensive elderly care and healthcare services and pension or other social support. Furthermore, the retired elderly do not work and thus do not

profit societies in taxation. Migrant communities and activists have strongly criticized government decisions of reducing the number of family reunification permits issued (Zhou, 2013).

## **2.2 Previous Research on Chinese One-Child Transnational Families and Caregiving**

Here I present previous results of research on Chinese one-child transnational families and caregiving. Tu (2016) has studied the experiences of Chinese only-child migrants living in the United Kingdom and some of the experiences of their parents living in China. The purpose of her study was to investigate what the future of the migrants looked like if they did not return to China, what happened to the relationship between the migrants and their parents and the traditional intergenerational practices, and whether filial piety could transform into the settings of transnational families. The researcher argues that both the migrants in the United Kingdom and their parents in China could be considered minorities within the local societies. They both develop coping strategies against the social pressure in the local society, although they may also express ambivalent feelings toward the transnational family arrangements. (Tu, 2016.)

For the migrants living in the United Kingdom, not returning to China was both a moral and practical dilemma regarding filial caregiving responsibilities. However, the parents of the migrants had mixed feelings about the situation. Their expectations were somewhere in between the traditional filial responsibilities and reconfigured lessen expectations. The parents of the migrants compared their situation to both their experiences with their parents and their peers of the same generation. The parents expressed gratitude and satisfaction toward the success of their children and their role in supporting the achievement of the children, rather than disappointment or unfairness toward filial piety and reciprocity. The filial caregiving expectations were compromised for the success of the children in the host country. (Tu, 2016.)

Although there is an apparent conflict between the family arrangements of transnational families and the traditional filial support expectations, the study results of the migrants living in the United Kingdom indicate that even when Chinese family members live in different countries, there is no sign of any erosion of filial piety. Migrants may develop a romanticized view of the parent-child relationship, leading them to support the notion of filial piety. However, filial piety is undergoing a complex transition of its logic in the settings of transnational families. (Tu, 2016.)

Based on her results, Tu (2016) suggests that emotional support becomes a critical element of filial piety and transnational caregiving after migrants settle in their host country. When distances separate family members, the family members tend to face social pressure to compensate for the lack of physical closeness and practical care by offering more emotional support – by practicing “long-distance intimacy.” Migrants report the use of technology, such as phone calls, messages, and video calls, as ways of maintaining long-distance intimacy at a low cost. Furthermore, the parents in China also demand more emotional support than practical or material support. (Tu, 2016.)

However, the results of the research indicate that although migrants are likely to offer their parents emotional support, they do not require the same from their parents toward them. Migrants are more likely to seek emotional support from their spouses or friends than their parents when feeling sad or anxious or facing hard times. Sometimes migrants may even follow an “only telling parents good news” principle in their daily life. Altogether, long-distance intimacy is sensitive. What migrants or parents decide to tell or not tell each other has psychological impacts on their lives because there are not many alternative ways of learning about each other’s lives than mutual communication. Although the emotional obligations may not be visible in the behavior of migrants and their parents, the obligations still affect how family members express their feelings about the behavior. (Tu, 2016.)

When examining Tu’s (2016) study results, it is notable that all the parents of the migrants were in good health and often even supported their offspring financially. Within middle-class one-child transnational families, children are likely not to have material responsibilities toward their parents. Instead, the well-being of the parents is considered a priority, even instead of observing the filial actions. Both the children and their parents view willingness to care for the parents as the main issue. However, the future elderly care arrangements are yet to decide. Thus, one cannot exclude the possibility that migrant children could even return to China to provide elderly care. (Tu, 2016.)

Tu’s (2018) further study on the Chinese only-child migrants living in the United Kingdom and their parents living in China shows that changes in macro-level ideologies and micro-level family dynamics challenge the traditional Chinese family values that have dominated intergenerational relations in China for thousands of years. These radical changes are occurring in the context of modernization and globalization in the 21<sup>st</sup> century. However, the intergenerational expectations and responsibilities are by no means becoming “Westernized.” Instead, family adaptation seems to result in reconfigured reciprocity. The rapid transformation of family values and global engagement is not a threat. The key elements of Chinese families have not changed. However, the changing environment has allowed many Chinese families to develop into and configure in ways that were previously limited due to social, economic, and political conditions. (Tu, 2018, pp. 159–160.)

The results of Tu’s (2018) further research demonstrate that the reconfigurations of filial piety are uneven among the only-child migrants living in the United Kingdom and their parents living in China. The unevenness is a result of the separation of filial feelings and filial behavior. The migrants valued and respected the traditional filial responsibilities toward their parents, but the moral awareness of the filial responsibility did not necessarily translate into action. For instance, even though most parents did not expect their children to provide practical support for them when they would get older and need it, more children than parents opposed the idea of paid care service replacing family-based care. However, none of the

parents required elderly care services yet. Thus, the steadiness of the opposition of the migrants to the idea of paid care service shall be seen in the future when the elderly care arrangements are a timely issue. Despite the lack of filial actions, the abstract notion of filial piety still existed among family members. (Tu, 2018, pp. 159–160.)

Sun (2014) studied migration and elderly care from the perspective of elderly Taiwanese migrants living in the United States. Although the research did not consider one-child transnational families, the notions regarding changes in cultural logics of aging and intergenerational reciprocity further show how international migration demands changes to the procedures of intergenerational responsibility. International migration requires migrants to reorientate their expectations of geriatric care and reconfigure the logic of reciprocity. Especially in the contexts of solemn Confucian traditions, where children's support as the primary form of elderly care has been taken for granted, migrants are required to resolve the tension between tradition and modernity. Therefore, the assumption that elderly migrants consistently hold onto their ancestral roots in the family setting must be challenged. (Sun, 2014.)

Mujahid, Kim, and Man (2011) researched how population aging in mainland China may impact caregiving patterns and experiences of Chinese migrants living in Canada. The researchers forecast that an increasing number of Chinese migrants in Canada may have to support their elderly parents in China in remittances and frequent visits to China. Furthermore, the researchers also forecast that an increasing number of newly arriving migrants from China may send their young children to China to let the grandparents take care of their grandchildren so that the migrants have time to work toward integrating into Canada. Finally, the researchers also forecast that Chinese migrants in Canada may be encouraged to bring their parents to Canada as visitors or under family sponsorship arrangements if they are in good health. Overall, transnational intergenerational support among the Chinese diaspora may increase and become more entrenched. (Mujahid et al., 2011, pp. 183–198.)

Mujahid et al. (2011) found out that many Chinese migrants living in Canada thought that it was hard to provide care to their elderly parents living in China. Although phone calls were a relatively convenient and inexpensive way of keeping in touch with family members, migrants still did not experience that it was sufficient. On the other hand, visiting China was expensive, exhausting, and time-consuming. Many migrants wished that their parents could migrate to Canada because it would make caregiving easier. Migrants also wished that if their parents migrated to Canada, they could also help the migrants with childcare. When the migrants still lived in China, their parents had typically supported them with childcare and housework. (Mujahid et al., 2011, p. 196.)

Zhou (2013) studied the relationships between care, migration, and social policy by focusing on grandparents who had migrated to Canada to take care of their grandchildren. The grandparents rarely

declined their children's invitation to migrate because caring for grandchildren is a traditional family obligation. Furthermore, the grandparents experienced that their children needed help in combining childcare and career requirements. However, many issues impacted the capabilities of transnational mobility. The visa application and renewing processes were time-consuming, uncertain, and anxious. The long-haul flights were stressful for the elderly migrants who often lacked foreign language skills. Living in a foreign country was difficult because of loneliness, boredom, and language barriers. (Zhou, 2013.)

However, according to Zhou (2013), the grandparents were devoted to helping their children in childcare. Both the grandparents and parents saw careful caregiving at home by the grandparents as beneficial to the children's early development. The grandparents also viewed the caregiving they provided as support for their children's upward social mobility. If the grandparents could take care of the children and do house chores, the parents could focus on their careers and save money. Many of the grandparents also helped their children financially by subsidizing a house purchase or minimizing their children's spending on them. In some cases, the grandparents also saw migrating to Canada as a great option because they could end up aging alone if they stayed in China. (Zhou, 2013.)

Liu (2016) researched the intergenerational dimensions of transnational Chinese migrant families living in New Zealand. When the migration policy of New Zealand changed in 2012, family sponsorship-based migration became more difficult, especially for migrants from non-English speaking countries. The researcher argues that the policy change disturbs the arrangements of migrant families. The policy change increases stress on Chinese migrants who often do not have siblings with whom to share caregiving responsibilities and who may typically be responsible for providing care to younger and older generations. However, despite the policy change, the researcher argues that Chinese migrants will do their best to bring their parents to New Zealand. If the migrants choose to continue to live in a different country than their elderly parents, they face much pressure for caregiving responsibilities. When families decide about the potential relocation, both elderly parents and younger generations impact the decision-making. (Liu, 2016.)

Liu (2016) further argues that there is a research gap in the intersection of intergenerational experiences and issues and transnational migration. The researcher argues that this study field should be further researched to contribute to theoretical knowledge about transnationalism as an evolutionary process with embedded personal and family transitions. Because both external and inner factors may transform the transnational behavior of individuals and families, further knowledge of transnationalism as an evolutionary process is needed. External factors, such as class, gender, and social, economic, political, and local circumstances, can impact transnational behavior. However, internal factors of family composition, family relations, and transforming roles of different family members can also impact transnational behavior. (Liu, 2016.)



The intersection of filial caregiving responsibilities and international migration interests researchers also in other cultural contexts. Krzyżowski (2015) researched the changes in the Polish cultural logics of aging and elderly care due to the intense international migration movements of Poles. The researcher concentrated on the physical labor and investments of time and money within intergenerational relationships. The study concerned Polish migrants living in Austria and Iceland. The researcher argues that there is “a reciprocity norm” in traditional Polish culture. According to the normative expectations, the responsibility of daughters is to provide care to the elderly and therefore “repay” for the previous support mothers have provided for them in childcare. Whereas Polish migrants are typically responsible for supporting their parents financially, their siblings who do not migrate help their parents in the household. (Krzyżowski, 2015.)

Krzyżowski (2015) further argues that as the migrants experience different systems of elderly care in Austria and Iceland, their views and attitudes of the Polish culture of caregiving change. These changes also affect the parents of the migrants in Poland. The parents of the migrants accept non-family-based elderly care practices to a greater extent than other Polish elderly. However, migrants still experience being responsible for the socio-cultural practices associated with elderly care, even if the elderly care practices may differ from non-migrants. Migrants must make many sacrifices and difficult decisions on whom to help and to which extent to fulfill caregiving obligations. (Krzyżowski, 2015.) Although Polish and Chinese cultures and demographic characteristics undoubtedly differ significantly, there seem to be similarities in how transnational practices lead to reconfigurations of the logics of intergenerational caregiving.

Fong (2011) studied the motivations, experiences, and perspectives of transnational Chinese only-child students who studied abroad in developed countries. Although the transnational students of her study were eager to acquire some aspects of “developed world citizenship” by studying abroad, most of the students had thought of possibly returning to China permanently one day. The students could return to China for various reasons, including the belief that they could get better career opportunities in China, the belief that they would have a greater purchasing power in China, patriotism, preferences for Chinese lifestyle, and the desire to reside close to especially their parents, but also other relatives and friends. The only-children assumed that they would be responsible for arranging the future elderly care of their parents and providing them companionship when they aged. Filial caregiving responsibilities were among the most significant reasons why transnational Chinese students were unwilling to stay abroad permanently. (Fong, 2011, pp. 5, 206.)

However, some of the transnational students did plan on staying abroad in the developed countries for the rest of their lives. They hoped to eventually be able to sponsor the migration of their parents to the country too. Nonetheless, sponsoring the migration of a family member often requires legal citizenship in the host country. Therefore, some of the migrants worried that the whole process of becoming a legal citizen and

sponsoring the migration would take too long. However, most transnational students assumed that they would still have many years before they would have to plan the elderly care of their parents. When the transnational students had left China, their parents were healthy and active. Only in sporadic cases, students had left China knowing that their parents needed their care. Nonetheless, parents would hide or downplay their disabilities or illnesses in some cases because they did not want their children to feel that they needed to stay in China. (Fong, 2011, pp. 206–207.)

Overall, the research evidence suggests that filial piety and intergenerational responsibilities are changing and being reconfigured within Chinese one-child transnational families due to the conflict between transnational family arrangements and the traditional filial caregiving responsibilities. Chinese people are mobile and Chinese culture does not stay unchanged in the 21<sup>st</sup> century, and therefore families are required to negotiate new family contracts (Tu, 2016). Although migrants saw returning to China for caregiving responsibilities as a possibility, intergenerational responsibilities seem to be transforming in ways that do not require physical closeness to a similar extent as in the past. Family members take the consequences of distances and national borders into account when deciding how to best provide support and care for the aging parents (Baldassar et al., 2007, p. 5). However, the elderly care arrangements for when the parents of the migrants require frequent assistance remain undecided when parents are in good health and financially stable.

### **3 Transnational Intergenerational Caregiving**

In this chapter, I aim to overview theoretical premises to transnational intergenerational caregiving. First, I introduce general aspects to intergenerational caregiving and transnational caregiving. Second, I introduce three theoretical dimensions of transnational caregiving: the care circulation approach to transnational caregiving by Baldassar and Merla (2014), different types of transnational caregiving by Finch (1989) and Baldassar et al. (2007), and finally, the capacity, obligation, and negotiated commitment as factors that explain transnational caregiving practices by Baldassar et al. (2007). These three dimensions of transnational caregiving form the main theoretical framework of this study.

#### **3.1 Intergenerational Caregiving**

According to Boll and Ferring (2013, p. 225), intergenerational caregiving tasks may include skilled nursing, care management, and performing both daily life tasks and life-enriching tasks. On the other hand, Finch (1989) defines intergenerational caregiving as support practices divided into the following five types: economic support, accommodation, personal care, practical support, and emotional and moral support. Economic support is “giving and lending money for specific purposes.” In other words, it is material support between generations that may appear in the forms of money transfers, gifts, assistance in finding work, and the promise of inheritance. Generations sharing accommodation either permanently or for some time is another form of family exchange that may also be viewed as a form of caregiving. Personal care is “nursing someone who cannot fully look after themselves.” Practical support is mostly assistance with domestic duties, such as shopping, laundry, or childcare. Emotional and moral support is “listening, talking, giving advice, and helping people to put their own lives in perspective.” Emotional and moral support can be further divided into routine and crisis support. (Finch, 1989, pp. 15–33; Baldassar et al., 2007, pp. 80–94.)

Intergenerational caregiving is reciprocal. It is something exchanged between and across generations. Commonly, parents support their children financially, emotionally, and in other ways across their life courses, but when parents get older, it tends to be the adult children’s turn to begin supporting their parents. However, the type, timing, direction, flow of caregiving, and who is the recipient and the provider of care vary depending on the life stages and life courses of family members. Additionally, gender, culture, class, context, state-level policies and services, community involvement, and individual and family factors affect family caregiving. (Baldassar et al., 2007, pp. 2, 203.) The reciprocal exchange of caregiving is an essential factor in maintaining a sense of belonging to a family (Baldassar & Merla, 2014a, p. 7).

Baldock (2000) notes a paradox between the research results on intergenerational family relationships: Whereas some studies assume that caregiving depends on geographical proximity, other studies claim that proximity is not needed to maintain close contact between family members. However, recent studies support the view that intergenerational caregiving does not require proximity. Baldassar et al. (2007, p. 11)

argue that many researchers challenge the aspect of caregiving and geographical proximity assumed being strongly linked. Baldassar and Merla (2014a, pp. 12–21) claim that caregiving should be conceptualized open-mindedly, without sticking to normative, mostly Western understandings of proximity and caregiving being undivided. Furthermore, the previously presented perspective of digital kinning renders the dichotomy of proximate and distance caregiving problematic (Baldassar & Wilding, 2020). Nevertheless, some forms of intergenerational caregiving, such as personal care, obviously require geographical proximity.

### **3.2 Transnational Caregiving**

Globalization has spawned aging to become an issue that is no longer only national (Phillipson & Baars, 2007, p. 81). Intergenerational caregiving may be divided into local, translocal, and transnational caregiving, depending on the distance between family members. Local caregiving is caregiving between family members who live either together in the same house or close to each other. Translocal caregiving is caregiving between family members who live in the same country but far away from each other. Transnational caregiving is caregiving between family members who live in different countries. Translocal and transnational caregiving have similar features. High travel costs and potential issues of combining caregiving with work responsibilities may concern both translocal and transnational caregivers. (Baldassar et al., 2007, p. 3.)

Thus, transnational caregiving is intergenerational caregiving within transnational families. Baldassar et al. (2007) suggest that most migrants experience a sense of moral responsibility to care for their aging parents, regardless of the cultural and ethnic backgrounds of the migrants. This sense of moral responsibility does not deminish due to migration. For some migrants, transnational caregiving is a moral responsibility for “repaying” for their parents’ support and care for them. For other migrants, the moral responsibilities rise from the community obligations. Successful transnational caregiving requires active kin relations. However, factors like gender, socioeconomic status, class, and educational background may also affect transnational caregiving preferences. (Baldassar et al., 2007, pp. 100, 204–211.) Often, there are stereotypical gender-normative differences in the amount of caregiving provided. Women are likely to experience a heavier share of the caregiving burden than men (Baldassar & Merla, 2014a, p. 7).

Exchanging care is often especially important to transnational family members because they do not have many other ways of expressing family belonging (Baldassar & Merla, 2014a, p. 11). Transnational migrants create transnational communities of care and support and consider the effects of distance and borders on caregiving. As the advances in communication and aviation technologies revolutionized transnational families by transforming the patterns and frequency of contact, they also revolutionized transnational caregiving. Transnational caregiving differs from other forms of caregiving in the following three

dimensions. First, transnational caregiving is characterized by crossing national borders and maintaining relationships in multiple nations. Second, the broader context for transnational caregiving is constructed through the processes of migration. Finally, transnational caregiving tends to take place even despite great distances between family members. (Baldassar et al., 2007, pp. 5–14, 203–204.)

Baldock (2000) defines transnational caregiving as both the practices and emotions of “caring about” and “caring for.” Caring about refers to the frequency of contact, the sense of loss when apart, and the importance of visits to the homes of elderly parents. Caring for refers to the participation in making decisions about well-being and health-related issues and the practical and physical caregiving during the return visits of migrants. The researcher further argues that two significant aspects describe well the transnational caregiving practices of migrants. First, traveling back to the home country is often expensive and time-consuming, and the trips back home are often planned thoughtfully and a long time ahead. Second, staying in close touch with family members living in the home country leads some migrants to develop a sense of ambiguity about their national identity, despite settling in the host country for a long time. (Baldock, 2000.)

Compared with other caregiving forms, some issues are specific to transnational caregiving. These issues include visa restrictions, immigration regulations, and differences in the availability of telecommunication and health services. The realities and regulations of nation-states, where transnational family members reside, affect the practices of transnational caregiving. (Baldassar et al., 2007, p. 3.) On the other hand, in many aspects, transnational caregiving practices are not very different from caregiving within proximity.

Participating in transnational caregiving activities may strengthen migrants’ connections to their home countries, even if they feel fully integrated into their host countries. Research even suggests that transnational caregiving can ensure the quality of interaction between family members. Sometimes, family members who live within proximity may not even experience a similar quality of interaction as the migrant family members do. However, simultaneously, family members who live within proximity are likely to be more aware of the health conditions of elderly family members than the migrants. (Baldassar et al., 2007, pp. 3–6.)

Nonetheless, it is notable that there are undoubtedly also migrant families who never participate in transnational caregiving. Some families may also participate in transnational caregiving to different extents at different life stages. Their participation in transnational caregiving may decrease for extended periods. Furthermore, it is notable that neither the migrants nor their parents are homogenous groups, and thus their different needs must be considered. (Baldassar et al., 2007, pp. 21–22, 221.) Additionally, family members do not always participate in transnational caregiving equally, but neither do all family members living within proximity (Baldassar & Merla, 2014a, p. 7).

Studies suggest that one's identity as "a cosmopolitan" or "a global citizen" and one's familiarity with mobility may to some extent impact one's transnational identity and willingness or motivation to practice transnational caregiving. The people who identify as cosmopolitans or global citizens are likely to be used to traveling frequently, moving places, and living at a distance from family members. Therefore, they may also be familiar with the need for support and provide support transnationally. They may also be more aware of coping strategies with the stress and the burden of living at a distance from loved ones. (Baldassar et al., 2007, p. 217.)

Studies suggest that the relationships between migrants and their possible local siblings, siblings who live close to their parents, are essential in transnational caregiving. Migrants may depend on the willingness of their local siblings or other close family members to share information about their elderly parents, especially if the parents suffer from conditions that do not necessarily allow them to communicate with the migrants. Some transnational families may see a distance as a legitimate excuse for the migrants not to provide care or provide less care than the homeland-based kin. The local siblings or other local family members may be burdened in a way that the migrants do not experience. Migrants may also feel guilt or even disapproval toward their local siblings. However, this is subject to equity and reciprocity between the family members. (Baldassar et al., 2007, pp. 105–106.)

Transnational caregiving is not a well-recognized phenomenon in policy-making. In many societies, local caregivers enjoy the benefits of the state, such as paid caregivers' leave or special consideration from the employers. On the contrary, transnational caregivers do not enjoy similar support or assistance. Instead, public policies may even pose institutional limitations to providing transnational care. One significant barrier is the often-limited old-age migration. (Baldassar et al., 2007, pp. 8–9, 172–173.) Overall, there is a growing need for social policy, migration regulations, services, and resources that facilitate transnational caregiving and do not precondition physical proximity for caregiving (Baldassar & Merla, 2014b, pp. 35–40).

Mazzocato & Schans (2011) argue that currently, policies in both the home and host countries of migrants are ill-equipped to challenge the issues of transnational caregiving. However, as Zhou (2013) claims, state governments could also have a significant role in solving the disagreements between migration and care, reducing inequality embedded in transnational caregiving, and pursuing global justice by considering policy effects beyond the nation-state. The states already facilitate the mobilization of paid care workers through the global care market. However, unpaid kin-based caregivers are often forgotten in policy-making. (Zhou, 2013.)

### 3.2.1 Care Circulation Approach

According to the care circulation approach by Baldassar and Merla (2014), transnational caregiving is reciprocal, multidirectional, and asymmetrical. Furthermore, transnational caregiving sustains family ties through the intergenerational networks of reciprocity, obligation, love, and trust. Care circulates through time and distance and among family members. Various types of care may flow back and forth, and even in multiple directions. Transnational caregiving is asymmetrical because the care may be exchanged at different times and different life stages, and even by different people. However, the expectation that caregiving must be reciprocated is important to transnational caregiving, even if the expectation is not realized in all cases. (Baldassar & Merla, 2014a, pp. 6–7, 22; 2014b, p. 54.)

Transnational families will use all the available technologies to circulate care, including but not limited to calls, video calls, messaging apps, social media, email, and text messages. Furthermore, transnational families may also use other technologies, such as travel, postal, and international banking services. Different technologies may be used for different purposes. Transnational family members may also incorporate new technologies into their caregiving practices rapidly. Access to technologies is a significant factor in circulating care. However, participating in transnational caregiving also requires skills and resources to transform physical absence into connectedness through virtual communication. (Baldassar & Merla, 2014b, pp. 49–54.)

The researchers argue that emphasizing the asymmetrical reciprocity and inherent circularity of transnational family processes is an excellent method for understanding the realities of transnational families: how the transnational families overcome the issues of distance and absence to transnational caregiving and other family processes. The care circulation approach also allows researchers to define transnational families as a contemporary family form and think of migration as a dynamic set of processes during one's life course, rather than a significant incident that changes and potentially damages family connectedness. (Baldassar & Merla, 2014a, pp. 21–22.)

The care circulation approach is different from the social-scientific theorization of care chains, which focuses on one-directed care that is exchanged for financial returns. The care circulation approach broadens the focus of the care chains to consider the entire networks where care flows. It simultaneously emphasizes the multidirectional nature of care more visibly. The care circulation approach considers the intersections of the complex issues of migration, labor, and family life more holistically than the care chains framework. It also considers the diversity of transnational families regarding socioeconomic, educational, cultural, ethnic, and religious backgrounds. (Baldassar & Merla, 2014a, p. 9; 2014b, p. 33.)

On the other hand, the researchers argue that the care circulation approach may be useful in analyzing the methodological implications of transnational family practices and processes. However, on the other hand,

it may also help in capturing the full extent of people's caring activities that maintain their membership in the family. Nevertheless, the care circulation lens may also allow researchers to study how all family members, including migrants and "non-migrants," practice caregiving at different times. (Baldassar & Merla, 2014a, p. 11; 2014b, p. 25.)

Although the researchers have named the theoretical framework as the care circulation approach, it does not mean that care would always travel along "a circle." Instead, there may be various circuits of care that involve different family members. These circuits may also coexist at specific points in time. Furthermore, the quality, quantity, direction, presence, and absence of care circulation differ remarkably and are constantly renegotiated. Various factors, both within and outside the family, also impact the care circulation. A person's care to a specific family member may be returned to the person by this family member or another family member. (Baldassar & Merla, 2014b, pp. 30–31.)

### **3.2.2 Transnational Caregiving Types**

The five types of intergenerational caregiving by Finch (1989), economic support, accommodation, personal care, practical support, and emotional and moral support, may have different characteristics in the settings of transnational intergenerational caregiving. Baldassar et al. (2007) argue that emotional and moral support are the ground for transnational family relations. Emotional support helps migrants cope with homesickness, and their parents cope with the feelings of being separated from their offspring by a long-distance and often for extended periods. The emotional bonds between family members may strengthen if the migrants have children on their own, when their parents get older, and when critical life events, such as the divorce or death of their parents, happen. Through these life events, emotional and moral support becomes vital. However, some transnational family members prefer not sharing any negative emotions with loved ones. It may also be understood as a form of emotional and moral support itself, as it aims not to burden one's family. (Baldassar et al., 2007, pp. 86–91.)

Emotional and moral support is a form of caregiving that is easily given from a distance through phone calls, messages, and other communication forms. As argued earlier, Finch (1989) divides emotional and moral support into routine support and crisis support. Routine support is casual, frequently occurring emotional and moral support. Crisis support is a matter of negotiation. (Finch, 1989, p. 33.) However, Baldassar et al. (2007) suggest adding a third division of extensive emotional support during the time of emigration to this in the context of transnational caregiving. Transnational migration may spotlight some special emotional issues that often do not occur within family members who live close to each other, such as homesickness, loneliness, a sense of loss, and anguish during long periods of not seeing each other. Although extensive emotional support may also be conceptualized as a part of the crisis support, it is unique to transnational families. (Baldassar et al., 2007, pp. 87–92.)



Exchanging economic support is also easily possible from a distance. Baldassar et al. (2007) noticed that migrants from various cultural backgrounds often desire to contribute economic or material support for their parents on special occasions, even if their parents live comfortably without any monetary gifts from their offspring. Sometimes the economic or material support is a symbolic representation of filial piety. Many migrants also receive economic support from their parents, such as gifts for birthdays or cash during visits. On the other hand, for refugees, who migrate for humanitarian reasons, economic support could be the most critical caregiving aspect toward their parents. (Baldassar et al., 2007, pp. 80–86.)

Caregiving in the forms of accommodation and practical support most often occurs only during visits. During the visits, transnational family members may share accommodation for lengthy periods, often desirably. Thus, accommodation as a form of caregiving should be included in the studies of transnational caregiving. Migrants may further see sharing accommodation as an opportunity to save costs during the visits. Although practical support is mostly provided during the visits, some forms of it may also be provided from a distance. The parents of the migrants may help the migrants with practical matters in the home country, such as renewing a passport or a driver's license, looking after a property or a bank account, or maintaining contact with friends on behalf of the migrant. During the visits, the migrants and their parents may provide practical support for each other by cooking, helping in the garden, or babysitting grandchildren, to name a few examples. Practical care may also be a way of expressing one's emotions. (Baldassar et al., 2007, pp. 80–97.)

Finally, providing personal care requires geographical proximity. Therefore, transnational families may often seek to purchase paid personal care if it is financially possible. However, the organization of personal care also depends on the available elderly care options. Overall, research suggests that the degree of exchangeability between the caregiving types might be extraordinary to transnational caregiving. It is especially relevant to providing personal care because migrants cannot provide it from a distance. By substituting a caregiving type for another caregiving type, the reciprocity in caregiving between generations may be maintained even if family members live far away from each other. (Baldassar et al., 2007, pp. 97–99, 107.)

Overall, transnational migrants tend to have four main ways of practicing transnational caregiving. First, the migrants seek to provide emotional and moral, financial, and some forms of practical support from a distance. Second, the migrants seek to provide emotional, practical, and personal care to their elderly parents when visiting their home countries. These visits are planned at times of need. Third, sometimes the migrants seek to bring their parents to their residence for extended periods. Finally, sometimes the migrants may seek to return to their home country to care for their elderly parents in their place of residence for extended periods. (Baldassar et al., 2007, p. 173.)

### **3.2.3 Capacity, Obligation, and Negotiated Commitment**

The concepts of capacity, obligation, and negotiated commitment may be useful in discussing caregiving, especially in the context of cultural differences within families, communities, and nations. These three concepts are likely to explain the practices of transnational caregiving rather than a geographic distance alone. National borders and the circumstances created by borders impact the capacity, obligation, and negotiated commitment of care. The relations of transnational migrants are tied to family life cycles. The processes of international migration influence the caregiving that the migrants have the capacity, obligation, and negotiated commitment to offer and through which patterns transnational caregiving is organized. Furthermore, different macro, meso, or micro-structural factors may impact transnational family relations and transnational caregiving. (Baldassar et al., 2007, pp. 15–16, 77, 100, 213–214.)

Capacity can be defined as various factors that impact the opportunity and ability of an individual to participate in transnational caregiving. These factors may be macro, meso, or micro-level. Macro-level factors may be issues of migration policies, visa restrictions, employment policies, access to technology, international relations between host and home countries, and the political stability and safety of relevant nations. Meso-level factors may be issues of the availability of welfare services, infrastructure, and local support. Micro-level factors are personal factors, for example, issues of the available financial resources, employment status, language, health, time, observations of the risks, safety and effectiveness of caregiving, and willingness to use one's resources to exchange care. However, the latest notion is also closely related to the obligation and negotiated commitment. Overall, the capacity to care depends on the available resources and their affordability. Money, time, technology, physical and mental ability, and mobility, alongside other resources, are required to provide transnational care. (Baldassar et al., 2007, pp. 204–206.)

To cover travel and communication technology costs, such as flights home, hosting visitors, phones, computers, and Internet access, one requires finances. Furthermore, to access and to be able to use technologies, one may also need confidence, language skills, and possibly training. Additionally, to make phone calls, send messages, and organize visits, one requires time. The time consumption may be an additional burden for migrants who also tend to be engaged in time-consuming local matters. It is often underestimated how much time the practices of transnational caregiving may require. To organize visits, the migrants may also have to negotiate with employers or make arrangements for family life. Migration policies, visa restrictions, high traveling costs, possibly limited travel availability, and work demands may restrict mobility. Transnational caregiving also requires a certain level of physical and mental ability, depending on the care type. Reasons such as poor health, fear of flying, anxiety about traveling, and the sense of insecurity associated with terrorism might be reasons that interfere with family visits, even if the family members had the time and resources to visit. (Baldassar et al., 2007, pp. 206–207.)

In a recently published article, Brandhorst, Baldassar, and Wilding (2020) argue that the mobility restrictions and lockdowns in many countries worldwide have affected many families during the COVID-19 pandemic. These factors also affect families that were previously not impacted by international migration and restrictions on mobility and travel. The researchers argue that migrants and non-migrants are likely to practice intergenerational caregiving from a distance during the pandemic. Simultaneously, non-transnational caregivers may face a heavier caregiving burden. (Brandhorst et al., 2020.)

Overall, the immobility regime and other consequences of the COVID-19 pandemic may be understood as macro and meso-level factors that impact the capacity to practice transnational caregiving. According to Brandhorst et al. (2020), during the pandemic, transnational families are required to reconfigure and reinforce family roles and obligations within caregiving. Transnational caregiving in the situations of closed borders, lockdowns, and mobility restrictions is not ideal. Nevertheless, transnational caregiving is seldom adjourned entirely. (Brandhorst et al., 2020.)

If individuals lack the capacity to provide transnational care, they tend to choose to support other people, commonly other family members, to engage in the caregiving practices on behalf of them. Although migration is often not experienced as a valid excuse to neglect care, many migrant individuals cannot provide care, especially personal care, to the extent their parents had possibly hoped. Choosing to support other people in the caregiving practices is closely related to the dimensions of obligation and negotiated commitment in transnational caregiving. The sense of obligation encourages people to find and spend the resources needed for transnational caregiving and manage any possible risks related to the caregiving practices. (Baldassar et al., 2007, pp. 207–208.)

Obligation can be defined as a dimension of transnational caregiving that explicates the cultural understandings of caregiving and emphasizes the outcomes of cultural values and expectations to family relations. In other words, the obligation is the cultural sense of moral duty. The obligation affects how and why individuals care, whom they care for, how they cope with the effects of mobility and distance, and how they allocate their resources. Thus, the obligation is related to the expectations and notions of responsibilities and appropriate social roles. When migrants and their families decide about transnational caregiving practices, their decisions on resources, mobility, and time are made to fulfill care obligations. The awareness of cultural differences is required in analyzing any transnational practices. The cultural constructions of responsibilities, social roles, and expectations may transform through life experiences, such as migration. (Baldassar et al., 2007, p. 208.)

Despite distance and mobility issues, migrants do experience caregiving obligations. However, the caregiving obligations may be shared with other family members and institutional care services. The sense of obligation to care is tied to both the needs of the migrants and their parents and the public and private

organization of care. The availability of services affects the needs of individuals and the sense of obligation in caregiving. Besides, the cultural notion of appropriate care affects the public organization of care and its development. The perceptions of care are also affected by local knowledge that may demolish through migration and even lead to stereotypical or idealized care perceptions. New experiences and practices in the host country may impact the perceptions of care and the expectations of caregiving obligations. The sense of obligation and the capacity to care influence each other but are also further affected by a complex set of external factors, the negotiated commitment. (Baldassar et al., 2007, pp. 208–211.)

The negotiated commitment within transnational caregiving means family relationships that develop over time and in the context of migration. Some aspects of the negotiated commitment are “the license to leave,” the family members reactions’ to the migration decision, and support from kin, life cycle, transnational migration processes, and transnational identity. Migrants and their “local kin,” the family members who do not migrate, develop different perspectives on migration. The different perspectives may sometimes raise tension between the kin. For example, the family members’ reactions to the migration decision may severely affect the relationships between the migrants and their family members, especially if the family members do not give the migrants the license to leave. The feelings toward each other and the decision to migrate may also impact the caregiving expectations of the family members. Additionally, one’s family history and the life cycle stage are other significant aspects within the negotiated commitment that impact who can take more responsibility in caregiving, when, and how. (Baldassar et al., 2007, pp. 211–213.)

Finch and Mason (1993, p. 79) argue that the processes of negotiations can only be understood regarding the biographies of individuals. Drawing upon Finch and Mason (1993), Baldassar et al. (2007) argue that understanding family responsibilities as the results of negotiations is central. The cultural obligations to care may arise from the processes of negotiations. However, the negotiations are built on the combinations of normative regulations and the negotiated commitment. The normative obligation tends to be the strongest between the parents and their children than other family members. Reciprocity is a crucial element in the negotiations because people may feel “beholden” to each other if it is imbalanced. However, the reciprocal services and gifts may also be provided later or by another person. (Baldassar et al., 2007, pp. 78–79.)

Governments, industries, and communities impose several macro and meso-level obstacles to the transnational migrants’ ways of providing transnational caregiving. Solutions to these obstacles are sought within the framework of capacity, cultural obligations, and negotiated commitment. However, to which extent the transnational caregivers themselves may develop solutions to the obstacles also depends on macro-level factors, such as social policy changes at the institutional level. Transnational caregivers living in different nations may thus have different opportunities to seek solutions to the obstacles because their opportunities depend on the policies of their countries of residence. (Baldassar et al., 2007, pp. 173–174.)

## **4 Research Data and Methods**

In this chapter, I describe how I collected the data of this master's thesis. I also present the method of theory-guided content analysis. Additionally, I discuss ethical considerations regarding the data collection and research process.

### **4.1 Data Collection and the Backgrounds of the Participants**

Miller and Glassner (2011, p. 145) argue that qualitative interviewing allows researchers to investigate what evidence there is about the nature of a phenomenon and how people who have experienced the phenomenon understand it. As Tuomi and Sarajärvi (2018) argue, the people who contribute to the data collection of qualitative research must know about the phenomenon researched or have experienced it. Therefore, the idea behind interviewing as a data collection method is elementary: If one wants to know what people think or why people act in a certain way, it is wise to ask these people. (Tuomi & Sarajärvi, 2018, pp. 84, 98.)

In this master's thesis, I investigate the transnational caregiving phenomenon among Chinese migrants living in Finland. I investigate how the Chinese migrants living in Finland practice transnational caregiving, what their possibilities and expectations concerning caregiving are, and what the elderly care arrangements are like for their parents. Therefore, the research subjects are Chinese migrants living in Finland. I chose to collect the data through qualitative interviews. Interviewing Chinese migrants living in Finland allows collecting data that can answer the research questions addressing the experiences of Chinese migrants in Finland.

As the research questions of this study specifically address the experiences of Chinese only-child migrants and their transnational families, all participants of this study had to meet three relevant criteria: being born under the one-child policy in mainland China, being a first-generation migrant to Finland, and having at least one parent who still lived in China. I interviewed nine Chinese migrants who met these criteria in September and October 2020. I conducted most of the interviews online over a video call due to the COVID-19 pandemic safety measures. On the one hand, conducting interviews online allowed me to easily interview migrants in several Finnish cities. On the other hand, conducting interviews online did not allow me to observe the expressions, gestures, postures, and movements as much as I probably would have during a face-to-face interview. Although observing the interaction is one of the advantages of interviews (Tuomi & Sarajärvi, 2018, p. 86), online interviews did not enable taking full advantage of it. The duration of the interviews varied between 30–60 minutes. On average, each interview took 45 minutes.

I posted an interview recruitment advertisement in the public Facebook group named “Chinese Alliance in Finland” to find participants. Chinese Alliance in Finland is a non-political association that promotes exchange among Chinese people living in Finland and adapting Chinese people to Finnish society

(Moniheli, 2021). Most participants contacted me on the messaging applications of Facebook and WeChat because they had seen the interview recruitment advertisement in the Facebook group. Moreover, I also found two participants through my own social networks.

Initially, I planned to use snowball sampling to recruit participants. Snowball sampling is a method where the researcher knows a key person or key people, who may introduce more suitable participants to the researcher (Tuomi & Sarajärvi, 2018, p. 99). I thought that it could be challenging to find people who would meet the criteria and be interested in participating in interviews. Moreover, snowball sampling would have been easy because I know several Chinese only-child migrants who could have acted as the key people for the sampling. However, to my great surprise, I found many interested participants through the Facebook group. Therefore, snowball sampling was not needed.

I conducted most of the interviews in English. However, I also conducted one interview in Finnish and one interview mostly in Chinese. Although I am more confident in conducting interviews in English and Finnish than in Chinese, I wanted to offer the possibility to speak Chinese to reach some participants who may not be comfortable in expressing themselves in English or Finnish. Depending on the participants, some interviews were more like discussions and some more like structured interviews. The atmosphere during all the interviews was friendly and empathic. I did not offer any compensation or reward for the participants.

All the participants had personal experience of filial caregiving expectations and responsibilities toward their parents in China. Therefore, they were valuable sources of information addressing the research topic. However, it is important to keep in mind that the experiences of the participants may not represent the experiences of all Chinese only-child migrants. It is possible that there are Chinese migrants living in Finland who do not provide care to their parents, nor do they experience any related responsibilities. Accordingly, they would not likely wish to participate in the interview about that topic. Furthermore, it is notable that I did not interview the parents of the migrants. Therefore, the results only reveal the experiences of the migrants on the issues that also consider their parents.

Eight of the nine participants were presumably women and one man. Six participants were in their thirties and three in their twenties. Whereas two participants had only moved to Finland recently, the other seven participants had lived in Finland for many years, three of them for even longer than a decade. Many said they had settled down in Finland and planned to stay in Finland in the future. The typical and reoccurring story within the backgrounds of the participants was that the participant had initially moved to Finland to study abroad for a specific time, either on a study exchange program or to complete a master's degree at a Finnish university. However, during the studies, they found a Finnish partner and thus decided to settle in Finland. Altogether eight participants mentioned they had or had previously had a Finnish spouse or partner. Some also had children whom they are raising in Finland. One participant had gained Finnish citizenship.

All nine participants were highly educated. They all have attained at least a bachelor's degree. Six of the nine participants mentioned they had completed or were currently studying to get a master's degree, and one participant had also attained a doctoral degree. The participants were working and studying in various fields. Additionally, two of the participants were currently looking for jobs, and one of them was currently staying home to care for their child. Two participants said they worked in lower-ranked positions than their educational background because it was hard to get employed in Finland without either sufficient Finnish language skills or a Finnish university degree. Most of the working participants described their income level in Finland as middle-class. Most of the currently studying or unemployed participants stated their income level as a lower-class or stated that it was too early to say because they had not graduated or got jobs yet. All the participants described the financial background of their families in China to be either middle-class, lower-middle-class, "normal level," or "not wealthy but not poor."

Eight of the nine participants were originally from cities with populations of many millions. However, none of the participants were from the first-tier mainland Chinese metropolises of Beijing, Shanghai, Guangzhou, or Shenzhen. One participant was from a small town with a population of several tens of thousands. Eight participants were the only-children in their families. One participant had two siblings who lived in China. Six of the participants still had both of their parents living in China. In the case of three participants, one of their parents had passed away, but all their other parents lived in China. All the parents of the participants were in their fifties and sixties, except for one mother in her late forties. Some parents had retired, and some were still working. Although several of the parents of the migrants suffered from health issues, all their parents lived independently and did not require daily or frequent assistance. Many parents were responsible for providing care to their parents, to the grandparents of the participants.

I used the method of semi-structured interviews to organize the structure and questions of the interviews. On the one hand, the approach allowed me to create a structure to cover topics related to the theoretical framework of transnational caregiving. It further better abled comparing the data collected from different interviews. On the other hand, the approach allowed the interviews to be partly data-driven and discussion-like. There was time for the participants to find ideas and viewpoints that were important to disclose. Nevertheless, this approach was suitable for this study. I collected data that both answered the questions I had prepared and provided some new aspects to the phenomenon.

Following Tuomi and Sarajärvi's (2018) introduction to qualitative interviewing, I designed the interview questions based on previous research on transnational families and caregiving. As the researchers argue, the purpose of interviews is to find meaningful insights and answers to the research questions. (Tuomi & Sarajärvi, 2018, p. 88.) I designed the interview questions after reviewing the literature on transnational families and transnational caregiving. Baldassar et al.'s (2007) and Baldock's (2000) studies on

transnational families and transnational caregiving were especially inspirational for designing the interview questions. I decided to ask the participants questions about their migration experiences, how they keep in touch with their family members in China, what caregiving practices they have, how they provide reciprocal support, the future elderly care plans and arrangements of their parents, and their national identity. Based on the previous literature and research, these interview questions contribute knowledge to the research questions. However, as Ruusuvaori, Nikander, and Hyvärinen (2010, p. 9) claim, the interview questions are notably different from the research questions. Furthermore, I also asked background questions concerning the participants' ages, professions, income classes, educational backgrounds, and hometowns in China. The interview questions are presented in Appendix I.

Before conducting the interviews, I told all the participants about the topic of my master's thesis and about the themes I would like to discuss in the interviews. If the participants wished so, I sent them the interview questions beforehand to help the participants to become more familiar with them in advance. Because the aim of interviews is to gain as much knowledge about the researched topic as possible, it is recommended that participants can familiarize themselves with themes or questions beforehand (Tuomi & Sarajärvi, 2018, p. 85). Before conducting the interviews, I also asked the participants for their permissions to record the audio for my use. I emphasized that all research data and results on the master's thesis would be anonymous and that I would delete the audio files after transcribing the content into a literal format.

At the beginning of the interviews, I again introduced myself and the topic of my master's thesis, as well as why I was interested in studying it. I again asked the participants for their permission to record the audio for my use and underlined that all the interviews would be anonymous and confidential. I emphasized that being interviewed was entirely voluntary. I also told the participants that if they preferred not answering any of the questions, that would not be an issue and that refusal from answering would not be disapproved in any way. During the interviews, I listened attentively. I asked additional questions to understand the viewpoints of the participants further and to ensure I understood everything correctly. As Tuomi and Sarajärvi (2018, p. 85) state, flexibility is the advantage of interviewing: The researcher can repeat questions, ask the questions in any order, correct misunderstandings, ask more details, and discuss the matters with the participants.

Altogether, the data I collected from nine interviews was 6 hours and 45 minutes. I transcribed all the interviews to a literal format, and that data document was 168 pages long. Following Ruusuvaori et al.'s (2010, p. 13) introduction to interviewing and its analysis, transcribing audio material into literal format may be an excellent way for the researcher to approach and manage the data. Although transcribing was arduous, it allowed me to orient toward the following analysis process. In the transcribing process, I deleted all personal information that could potentially risk the anonymity of the participants from the data.



In this master's thesis, I refer to all the participants with ordinal numbers (participant 1, participant 2, et cetera) and non-binary they/them pronouns. I decided to use ordinal numbers and they/them pronouns to protect the anonymity of the participants because, after all, some of the themes discussed in the interviews are quite personal, and Chinese only-child migrants living in Finland are a specific group of people. Furthermore, specifying the gender of each participant is not necessary because there were no differences between participants of different genders.

## **4.2 Qualitative Theory-Guided Content Analysis**

An analysis is an active and interpretive process in which researchers assign meanings based on the research evidence (Rinehart, 2021). Content analysis is an empirically grounded analysis method that allows researchers to analyze data systematically and objectively in text form. The content analysis aims to reveal meanings that are embedded in the text. However, contrary to discourse analysis, the content analysis method examines how the meanings in the text are produced. (Tuomi & Sarajärvi, 2018, pp. 103–117; Krippendorff, 2013, pp. 1–2.) In the analysis of the research data, I investigate how the participants experience transnational caregiving. In other words, I investigate what meanings the participants give to transnational caregiving. Therefore, the content analysis method suits the purpose of this study well.

Some studies that involve the content analysis method have been criticized for incompleteness: Even if a researcher describes the analysis process throughout, the researcher may not have been able to have meaningful results, but instead only presents the categorized or organized research data as the results (Tuomi & Sarajärvi, 2018, p. 117.) According to Krippendorff (2013), some may even criticize the content analysis method for incompleteness by saying it is “nothing more than what everyone does when reading a newspaper, except on a larger scale.” However, the researcher further argues that although the content analysis may have been incomplete or narrowly defined at its early stages, that is no longer true today. Content analysis researchers do their best to explicate and describe their research processes to let others replicate the results. Thus, today, the content analysis method is a research technique that allows researchers to draw replicable and valid conclusions from texts to their used contexts. (Krippendorff, 2013, pp. 5–24.)

There are three approaches to the content analysis method: data-based content analysis, theory-based content analysis, and theory-guided content analysis. In the data-based content analysis, the analytical units are chosen from the data, whereas in the theory-based content analysis, the analysis is guided by a theory, framework, or model based on previous research results. Theory-guided content analysis situates in between these two approaches. In the theory-guided content analysis, theory contributes to the analysis, but it is not entirely based on the theory. Although previous research results are recognized and may guide new reasoning, the previous research is not used in testing a theory. (Tuomi & Sarajärvi, 2018, pp. 108–121.)

The theory-guided content analysis is also called abductive analysis. According to Timmermans and Tavory (2012), central to abductive analysis is that researchers should begin the data collection process with profound and comprehensive theoretical knowledge and develop it throughout the research process. In other words, it is not wise to put all preconceived theoretical knowledge aside at any point of the research process. (Timmermans & Tavory, 2012). Furthermore, according to Rinehart (2021), the abductive analysis has many similarities to other forms of qualitative research, as it draws from a variety of disciplines, study fields, and theoretical perspectives. It may be a potential strength of the abductive analysis. (Rinehart, 2021.)

As the analysis method in this master's thesis, I have used the qualitative theory-guided content analysis (abductive analysis) because it allows answering the research questions comprehensively. Therefore, I analyze the research data through the lens of the three theoretical dimensions of transnational caregiving. I investigate how the migrants experience, first, the circulation approach to transnational caregiving. Second, I investigate the different types of transnational caregiving. Finally, I investigate the capacity, obligation, and negotiated commitment as factors explaining transnational caregiving. I overview the analysis process in the following subchapter.

### **4.3 Analysis**

In the theory-guided content analysis, the researcher has outlined a theoretical framework or categories to which the data is proportioned. The theoretical framework and categories used in the analysis are something already known about the researched phenomenon based on previous studies. However, the analysis may also begin with data-based content analysis methods. The analysis aims to combine data-based findings and theoretical models. (Tuomi & Sarajärvi, 2018, pp. 109–110, 133.) I chose the theoretical framework of transnational caregiving based on previous studies on transnational families and transnational caregiving. Therefore, the analysis aims to combine the new information from the interviews into the previous knowledge of transnational caregiving.

I consider listening to the interviews and transcribing them to text format as the first step of the analysis process. Although transcribing was mainly a technical process where I did not reflect what I had transcribed, I did get an overall idea of the data simultaneously. Transcribing somewhat forced me to dwell on the data because it was a laborious and time-consuming process. After transcribing was completed, I continued the analysis by reading the data while keeping the research questions in mind. I had saved the data as a Word document, and I utilized different Word document tools, such as font colors, bolded font, text highlight colors, and the commenting tool to assist in making notes, categorizing findings, and tracking ideas.

Following the principles of analysis by Ruusuvuori et al. (2010, p. 12), after getting familiar with the data, categorizing, and selecting notions, I analyzed and compared the notions and formed rules of interpretation based on the theoretical framework, and compiled, interpreted, and evaluated the results. Furthermore, as

Rapley (2011, p. 288) presents qualitative analysis, this analysis process also began from the description and summary level but shifted to investigating and explaining the underlying patterns, processes, and structures. In the analysis process, I aimed to observe how specific contact points, matters, and contexts the participants discussed were related to the research questions.

In qualitative research, data is examined as an entity, and the analysis highlights the structures of this entity (Alasuutari, 2011, p. 38). As argued earlier, I analyzed the data through the lens of transnational caregiving: the care circulation approach to transnational caregiving, the different types of caregiving, including emotional and moral support, economic support, accommodation, practical support, and personal care, and the capacity, obligation, and negotiated commitment as factors that explain transnational caregiving. Therefore, in the analysis process, I aimed to highlight the structures of transnational caregiving in the data entity.

Ruusuvuori (2010) argues that data transcribed to the text format is already an interpreted version of the original interview situation because the researcher interprets the data in many ways during the transcribing process. As an observer, the ability of the researcher to pay attention may exclude some information. Furthermore, the cultural background of the researcher affects the interpretation of the data. The researcher also performs interpretations on which parts of the data are relevant to the research aim. (Ruusuvuori, 2010, pp. 427–428.) I acknowledge my position as a researcher who interprets the data. Therefore, the analysis must be considered only as one interpretation of the phenomenon of transnational caregiving.

Pietilä (2010) argues that analyzing data in foreign languages and related to foreign cultures requires foreign language skills and knowledge about the culture, history, and communication habits of the foreign culture in question. Both the language skills and knowledge about the culture, history, and communication habits are essential because language and culture are intertwined. (Pietilä, 2010, p. 412.) I had a better understanding of the aspects of Chinese language, culture, history, and communication habits because of my related knowledge attained through my minor studies in Chinese language and Asian studies, previous living experience in China, and personal social networks.

Furthermore, during the interviews, most participants repeatedly explained aspects related to the Chinese culture carefully – more detailed than I assume they would have explained these aspects to a researcher who shares the same cultural background. Pietilä (2010) further argues that a researcher's different cultural background or native language might be advantageous because the participants may therefore explicate and reflect matters to the researcher. These explications and reflections could be otherwise easily ignored as foregone conclusions. (Pietilä, 2010, pp. 415–416.) Therefore, my different cultural background and native language might even be an advantage in the research process.

#### 4.4 Ethical Considerations

According to Ryen (2011), there are three major ethical concerns within qualitative research: consent, confidentiality, and trust. Research subjects have the right to know that they are being researched. They also have the right to be informed about the type and nature of the research. Furthermore, they also have the right to withdraw from participating in the research at any time. Researchers must protect the identity of the participants and consider the relationship between the participants and the researcher. (Ryen, 2011, pp. 416–419.)

I considered consent, confidentiality, and trust when conducting the research. Although most participants had initially contacted me because they wished to participate in the study, I still took many ethical considerations into account to ensure that all participants consented to participate. As stated earlier, I told the participants about the topic of my master's thesis, the aim of the research, and research practices both when the participant and I decided on the interview date and at the beginning of each interview. I emphasized that participating was entirely voluntary and that the participants could withdraw or choose not to answer a question at any time. I also asked permission to record the interview audio both when deciding the interview date and at the beginning of each interview.

I deleted the audio recordings after I had transcribed them to literal format and did not need them anymore. I protected the identity of the participants by removing all personal information that could potentially risk their anonymity from the transcription. In this master's thesis, I refer to participants with ordinal numbers and they/them pronouns to protect the anonymity of the participants. Furthermore, I also only overview background information about the participants in general, not individually, to protect their anonymity. Some of the interview topics may be personal, and overall, the Chinese only-child migrants living in Finland are a small group of people. Therefore, it is essential to protect their privacy and anonymity.

Additionally, Doucet and Mauthner (2008) claim that power relations and inequalities exist in conducting research. Factors like gender, class, ethnicity, age, sexuality, and global location may matter and impact the research in ways that are not straightforward. Researchers must consider how, when, and where the power relations and inequalities between the researcher and participants influence knowledge production and knowledge construction processes. (Doucet & Mauthner, 2008, pp. 332–337.)

In the research process, I considered the power relations and my position as a member of the Finnish majority group researching members of a minority group ethically. When designing the interview questions, I avoided any questions that could, in any way, be considered othering. Furthermore, I aimed to be sensitive about the cultural background and not draw unconsidered conclusions based on cultural stereotypes. The data and analysis method only allows making limited conclusions, which obviously cannot be generalized to all Chinese migrants.

## 5 Results

In this chapter, I present the results of the analysis. Therefore, I present how the Chinese only-child migrants living in Finland practice transnational caregiving, what their expectations and possibilities concerning caregiving are, and what the elderly care arrangements are like for the parents of migrants. To describe the data vividly and to allow the reader to evaluate the analysis, I have included citations. I have translated all citations that were initially in Chinese or Finnish into English. Translated citations are marked with a superscript. The original versions in Chinese and Finnish are presented in Appendix II.

### 5.1 Practices of Transnational Caregiving

Overall, most of the participants experienced that it was possible to practice some types of caregiving transnationally. In this subchapter, I review how the participants and their family members practice transnational caregiving. I compare the experiences of the participants to the three theoretical dimensions of transnational caregiving.

#### 5.1.1 Transnational Caregiving Is Reciprocal but Asymmetrical

Here I discuss the participants' experiences of caregiving that they, in line with previous research, found reciprocal but asymmetrical. As argued earlier, Baldassar and Merla's (2014) care circulation approach helps to understand the effects of mobility and absence on family life. According to the approach, transnational caregiving is reciprocal but asymmetrical. Therefore, the care may be understood to circulate through time and distance and among family members. Family members of different generations may provide reciprocal caregiving to each other to different extents; in other words, asymmetrically. (Baldassar & Merla, 2014a, pp. 6–7.)

Following the principles of the care circulation approach, all the participants in this study had provided and received care from their parents at different times of their lifetime. The intensity and direction of caregiving had typically varied remarkably at different times, depending on the life cycle. Some participants currently felt that they mostly received caregiving and support from their parents, whereas some mostly provided care and support for their parents. In addition to who provides care to whom, the quality, quantity, presence, and absence of care circulation vary and are continuously renegotiated, as many factors, both within and outside the family, impact the care circulation (Baldassar & Merla, 2014b, p. 31).

The life cycle stage and health conditions of the participants and their parents impacted their caregiving practices. Commonly, the participants provided more caregiving to their parents if their parents were older or suffering from health conditions. For example, participant 5 said that currently, it was their duty to provide care and support for their father who had fallen ill, whereas the participant did not require any caregiving from him:

*How to say, so, it is not that I am really offered... It is not that I would need any support from my father's side. So, now the situation is that I need to help my father because he has fallen ill and is living by himself now that my mother has passed away. I am seriously worried about him because I live so far away. I live here, and he lives there by himself.<sup>1</sup> (Participant 5)*

Therefore, the health condition of the father of participant 5 was a factor that increased the intensity of caregiving and impacted the direction of caregiving. As the mother of participant 5 had passed away, and the father lived by himself, the life cycle stage of the father of the participant further intensified the need for caregiving. On the other hand, if the parents of the participants were still relatively young and healthy, or the participants were young and had only recently migrated to Finland, the parents commonly provided more care to the participants. Many participants also mentioned that their parents were currently responsible for providing care to their parents, the grandparents of the participants. Therefore, it was not necessarily the time for the participants to provide care to the parents.

According to the care circulation approach, care that a family member provides to a specific family member may be returned to this family member by another family member (Baldassar & Merla, 2014b, p. 30). Therefore, the asymmetry of reciprocal caregiving may also mean that other people, such as other family members, provide care to the parents on behalf of the migrants. Many participants expressed that the siblings of their parents often helped their parents in times of need because the participants lived so far and could not help in practical matters that required proximity:

*My father has two siblings... Eh no, three siblings. And my mother has two. So, they have quite often, like, meetups at home, or they visit somewhere together because all of them are kind of the same age. And not every kids of them who would like to attend the meetup, so-, so... They're like supporting each other, the same things, supporting each other. (Participant 3)*

Therefore, the care circulation between participant 3 and their parents is asymmetrical, as the siblings of the parents help in providing care on behalf of the participants. Moreover, having the possibility to circulate care asymmetrically could even be considered as an advantage of the generation of the parents of the participants:

*My father and mother, they both have siblings, and their siblings help out a lot. That's like one advantage of their generation; they have siblings to help out. (Participant 4)*

However, not all the parents of the participants had family members or relatives living close to help them. Therefore, the possibilities to circulate care among these families are more limited. Some parents got help from their neighbors, friends, and colleagues, however. For example, participant 9 said that their mother had access to some services through the residential community where she lived:

*My mother lives in China now, and the community she lives in has very excellent community management. [- -] There are also some social work services in the community. The community regularly organizes some festive activities, and then she can go there for holidays, to celebrate holidays with other old people.<sup>2</sup> (Participant 9)*

The care the community management and social work services provided to the mother of participant 9 could also be understood as care provided on behalf of the participant. Thus, the care circulates asymmetrically, also in the case of participant 9 and their mother.

According to Baldassar and Merla (2014a), transnational family members do not always participate in transnational caregiving equally. Women are likely to experience a heavier share of the caregiving burden than men. (Baldassar & Merla, 2014a, p. 7.) However, as mentioned earlier, the one-child policy transformed the gender norms in China (Fong, 2002). When families only have one child, gender-normative caregiving expectations may not appear. One participant of this study talked about how her parents would especially like to take care of her because she is their daughter. However, none of the participants in this study brought up any experiences of gender-specific differences regarding the care they provided to their parents. Nevertheless, it is also notable that gender-specific differences were not especially asked during the interviews.

Exchanging caregiving is often very important to transnational family members who use all technologies available to circulate care (Baldassar & Merla, 2014a, p. 11; 2014b, p. 52). The participants kept in touch with each other through regular video calls, messages, and audio messages on the Chinese messaging application WeChat. Therefore, they utilized the different features of WeChat to circulate care. The WeChat video calls were crucial to many participants. For example, some participants expressed that they did not feel good if they had not called their parents in a while.

Overall, the results suggest that the participants and their parents may provide and receive caregiving differently at different times in their life cycles. The differences and different timings of care circulation depend on various factors. Migration is one of the processes that impact caregiving during one's life cycle. Additionally, other family members, such as the siblings of the parents, may practice caregiving on behalf of the participants. Therefore, transnational caregiving among the participants is reciprocal but asymmetrical, circulating through time and distance and among family members, precisely as the care circulation approach by Baldassar and Merla (2014) shows.

### **5.1.2 Different Types of Transnational Caregiving**

Here I discuss the types of care that the participants and their parents provided to each other. Finch (1989) introduces five types of intergenerational caregiving: emotional and moral support, economic support, accommodation, practical support, and personal care. According to Baldassar et al. (2007), emotional and moral support are the ground for transnational family relations. Emotional and moral support helps migrants cope with homesickness, and their parents cope with their feelings of being separated from offspring by a long-distance and often for extended periods. (Baldassar et al., 2007, pp. 86–91.)

First, I discuss how the participants and their parents provided **emotional support** for each other. In line with theorization, some participants in this study thought that receiving emotional support from their parents was necessary and essential:

*I think it [emotional support] is my emotionally need... [—] We don't think that much while calling. It's just a kind of habit for us. And I don't feel very well if I do not call. Like, more than a week, I feel something is missed. [—] There is, of course, a very good comfort when able-, when we are able to see each other and talk some-, talk about something. (Participant 7)*

On the other hand, for some participants, providing emotional support for their parents was important:

*I don't think economically, financially, I need to support them [the parents of the participant] that necessarily. But realize I can, yeah, but it's more about like emotion out here. That's not something they can buy or pay for on their own. So, that's what's the really important thing, I think. (Participant 8)*

Therefore, receiving and providing emotional support helped both the participants and their parents cope with being separated by a long-distance and often for extended periods. Emotional support is vital because it is a type of support that may easily be exchanged from a distance. The participants often felt that it is even the only type of support they may offer and a support type that their parents may not access outside the family.

The WeChat messaging application was essential to the participants because it enabled providing and receiving emotional support. The participants and their parents exchanged emotional support through WeChat video calls, calls, messages, and audio messages. For example, participant 1 said that they and their family members supported each other through the video calls:

*Well, now when people are physically far away from each other, it's... It's a way to express the care, probably, the video [calls]. That is a way to show the care. (Participant 1)*

For some participants, exchanging emotional support through WeChat communication was not much different from in-person communication:

*It doesn't matter what media you use, if you are having face-to-face communication, or just calling or sending audios. [—] It's just like when you are having something that bothers you or what, you can talk with them [the parents of the participant]. (Participant 8)*

Some participants even preferred providing emotional support from a distance or viewed it as enjoyable:

*I actually enjoy it [providing emotional support from a distance]. [—] We actually communicate quite often that I wouldn't feel that lonely. And they also know what was going on in my life. (Participant 3)*

However, although many participants saw video calls as a great way of providing emotional support for each other, some participants also felt that it was not the same type of emotional support as when family members could be with each other during visits:



*It is very nice to be around them [the parents of the participant], so it is not the same when I am in Finland, and they are there [in China], although we call every week. It is a little bit different when we are right next to each other. The feeling is totally different. [– –] So, when you sit right next to each other, it is very different from calling via phone. Yeah, yeah. The feeling is very near, close to heart. This kind of feeling.*<sup>3</sup> (Participant 5)

*When I visit China or when my mother came to Finland to visit us, I think the caregiving aspects are very important. Because although we can make video calls every day, it does not mean that we can get involved in each other's lives through video calls. There are some details of life. If she is in Finland or I am in China, we can contemplate the issues we face more directly, and then we can solve [any issues within] our relationship, and it is very convenient to take care of each other. Especially in terms of caregiving, if we are separated and communicate via messaging and calling applications, the communication lacks a little bit of warmth.*<sup>4</sup> (Participant 9)

Therefore, the citations from participants 5 and 9 demonstrate that although exchanging emotional support from a distance is possible, visits are also essential to exchanging emotional support. Furthermore, the participants had different ways and habits of exchanging emotional support from a distance. Some participants expressed their feelings and emotions directly, and some in more indirect ways. For many participants, talking about daily life topics was a way of exchanging emotional support:

*We do not talk about things that are special, it is just how are you doing, what you have for the meal today, and anything happened, and yeah, very casual things. But it's important to spend time together and to see each other. I think the moments that we spend together is-, is a great comfort and help to both of us.* (Participant 7)

Additionally, participant 7 felt that they and their family members supported each other emotionally by being well themselves:

*We're not a family that express our feelings very directly. Like most of the Chinese families, we do not say it, but we support each other by being well ourselves. [– –] Like being healthy, like work well, and have a happy family. Like whenever one is living a decent life, it is the best thing for each other.* (Participant 7)

Thus, by talking about casual topics and being well, participant 7 and their family indirectly exchanged emotional support. Moreover, according to Baldassar et al. (2007, pp. 80–83), sometimes migrants may contribute economic or material support for their parents on special occasions as a symbolic representation of filial piety. All the parents of the participants were financially stable and did not require monetary gifts from their children. However, several participants desired to order small gifts on online shopping websites and send them to their parents on special occasions. By sending the gifts, the participants aimed to provide indirect emotional support. The gifts included flowers and cakes that the participants sent to their parents on national holidays and birthdays:

*Every single holiday, I send flowers to my mom. So, for example, for her birthdays, I also order some flowers or cakes. But I think that's the only thing I can do.* (Participant 6)

*While it is not really necessary, but I really want to sometimes buy-, every now and then buy something for my family, like order things on Taobao. [– –] And then I send it to there, make them*

*feeling that I'm not that far away, still somewhere around. Just something financially, and for some other like emotional-, emotional help, or caregiving. (Participant 7)*

However, although providing and receiving emotional support was critical for most participants, few participants also said that they usually do not provide much emotional support for their parents, and their parents also do not provide much emotional support for them. Some participants said that they did not exchange emotional support because neither they nor their parents needed it. Some participants preferred seeking emotional support from their spouses, partners, or friends. Additionally, participant 4 said that providing emotional support for their parents felt difficult because the participant had not lived together with their parents for a long time. Therefore, the participant did not have a close relationship with their parents:

*I think we're not doing well in terms of like emotional support. Well, like I said, I wasn't very close to them because I haven't lived with them since I was very young. [—] I went to a boarding school and went to live with my relatives. So, that's like a really long time we're not really living together, and we're not emotionally close either. So, I can feel my parents really need a lot of emotional support, especially now when they're getting old. And I'm like, really far from them. And if they look around, everybody have their children and grandchildren around them. So, I understand that they have this strong need, but because of this, like, historical reason, so, it's hard-, it's hard for me to give enough support for them. I-, I can see that. (Participant 4)*

According to Baldassar et al. (2007), sometimes choosing not to share emotions may also be understood as a form of emotional support because it aims not to burden one's family. However, emotional bonds between family members may also strengthen through different life events, for example, when parents get older. (Baldassar et al., 2007, pp. 87–91.) Some participants felt that they would provide more caregiving to their parents in the future than they did now. For example, although participant 8 felt that they did not provide any emotional support for their parents now, they thought it was going to change in the future when their parents get older:

*I will offer the emotional care within my command; I mean as much as possible, all aspects and all dimensions. Yeah. Because I-, I want to offer them, like, emotional care. (Participant 8)*

Therefore, the emotional bonds between participant 8 and their parents could strengthen through the parents getting older. It could be the reason why participant 8 would provide more emotional support for their parents in the future.

The participants and their parents also exchanged, to some extent, **moral support** with each other. Some participants discussed how their parents had offered suggestions or advice when there were some concerns or issues that bothered the participants. On the other hand, some participants had helped their parents make decisions or recommended something to their parents. For example, participant 3 discussed how their parents trusted them in decision-making:

*Because I'm young, I get the information from all kinds of channels from-, from the internet, from my friends, from like, all kinds of channels. So, my understandings about the society or their health issues can be like, um, more approved than theirs. So, in that sense, I think they will trust me in decision-making. And in the later on, either doesn't matter investment, in finance, or investment in house, that they started to... I can feel that they started to rely on me more that they would ask for my opinion. (Participant 3)*

The advice and opinions that participant 3 provided their parents are examples of moral support. Furthermore, according to Finch (1989, p. 33), emotional and moral support may be divided into **routine support** and **crisis support**. Many of the examples above describe routine support, casual and frequent emotional and moral support. However, several participants had also experienced support during crises. There had been situations where emotional and moral support was critical. These situations could be seen as examples of crisis support. For example, the mother of participant 6 had visited Finland to provide intensive support for the participant when their child was born:

*I think it's good support. Because it's like, you know, you might, you are first time being parents, and you don't know what to do. Obviously, that she [the mother of the participant] doesn't know what to do either. Because at her age, when she gave birth to me, pretty much my grandparents take care of me. So, it's not a big help, but more like emotionally, some sort of support she has provided. (Participant 6)*

Furthermore, participant 8 said that their mother had given comfort and helped them solve personal issues. These personal issues were related to worries regarding a relationship:

*She [the mother of the participant] helps me, like, comfort me, but also, she helps me analyze, like saying things, and help me figure out what is a better way-, good way, or how it should go. [– –] And this is, I feel like, one specific occasion or situation she is quite helpful in caregiving. (Participant 8)*

Therefore, the mothers of participants 6 and 8 offered crisis support for the participants in specific situations when emotional and moral support was especially needed. The birth of the child of participant 6 and the worries regarding a relationship could be seen as situations with a crisis. Additionally, several participants had had experiences of their parents being hospitalized because of urgent health issues. In these situations, the participants felt that exchanging emotional and moral support was essential. However, simultaneously, they felt quite helpless if they could not be physically near their families:

*A couple of years ago, my father had a heart attack, and he went to surgery. And there were a couple of times, like, we almost lost him. So, that I remember, that was a really hard time, especially for my mother because I wasn't there. I wasn't much involved. I was really, like, worried, but there's really nothing I can do. So, in this situation, I'm really, like, useless. [– –] So, those kinds of situations happen, and this is really helpless for me to really do anything. (Participant 4)*

Therefore, the hospitalization of the father of participant 4 was a specific situation with a crisis where emotional and moral support was especially needed. The participant felt that especially their mother needed crisis support from them. However, the participant also felt that they had limited possibilities to offer the

crisis support because they were far away from their mother. Therefore, sometimes providing sufficient crisis support from a distance may be challenging.

In addition to dividing emotional and moral support into routine support and crisis support, Baldassar et al. (2007, p. 87) suggest adding a third division of **extensive emotional support during the time of emigration**. Participant 7 discussed how their parents had helped them when they prepared their migration, which could be understood as extensive emotional support during the time of emigration:

*When I was moving, they [the parents of the participant] help me with packing up. It sounds like a very small thing, but it was very important for me when I was trying to migrate to Europe, and many things are around me. Packing and moving. This is... It seems small but important and very troublesome to do it. And your parents are there for you to do something. You feel like, ah, a big part of the job is now clearly done, and I feel very easy, or easier, less stressful. (Participant 7)*

Therefore, by helping participant 7 with packing up for the migration, the parents of the participant provided them extensive emotional support. Moreover, in addition to the emotional and moral support, it is also possible to provide **economic support** from a distance. Besides the small gifts some participants sent to their parents, none of the participants provided any regular economic support for their parents. Their parents were financially stable and did not need any economic support. So far, only participant 7 had given money to their parents occasionally, for instance, to cover the high costs of the medical treatment of a relative. Nevertheless, most participants said that if their parents ever needed financial support, they would be willing to provide it:

*I have never really given money to them [the parents of the participant] because they... My mother is still working, my father retired, but they have their own money to support themselves. Yeah. So, I think financially so far, we haven't really support each other that much in terms of like, elderly care. But I think when-, when, for example, if they're older, and then maybe at that some point, I can support them more. (Participant 4)*

However, all the participants themselves had received economic support from their parents at some point, when they were students or at other times when their financial situations were not stable:

*They [the parents of the participant] supported me financially when I just moved to Finland. At that time, my spouse and I both didn't have good jobs. [– –] But after we got jobs, we didn't really like get money from them. But either way, we didn't support them financially because they are financed by themselves quite well, by their jobs or the retire fund. And they wouldn't want the money from me. They just don't want. (Participant 3)*

*Of course, my parents, like-, like all the Chinese parents, they have given me a lot of like support, especially financially. And when I came to Finland to study, at that point, I didn't have to pay the tuition fee yet. But all the like, the expense of living here are paid by my parents; I think that's quite common in China that parents pay for those. [– –] So, it's one way that they supported me a lot in Finland. But when I started working, well, they will give me money sometimes, but not that regular, because I've been, like, making wages by myself, and I can support myself and so I have never really asked money from them. (Participant 4)*

As participant 4 claims, it is common for Chinese parents to support their offspring financially during their studies. Participant 4 further said that their parents could support them financially in the future to help in buying a car or a house, which is also traditional in China:

*For example, they [the parents of the participant] always say, when you get married or-, or if you have kids, then we want to buy your car or something like that, or support to buy houses, something like that. So, that's very common in China; especially, I don't even have siblings. (Participant 4)*

Altogether, so far, the parents of the participants had offered more economic support for the participants than vice versa. As the parents of the migrants were middle-class and financially stable, it is not likely that the participants would begin to offer economic support for their parents in the future.

Additionally, during visits, transnational families may exchange care in the forms of **accommodation**, **practical support**, and **personal care**. According to Baldassar et al. (2007), sharing accommodation for lengthy periods during visits is standard and often desirable, and most of the practical support, such as helping each other with cooking, cleaning, garden work, babysitting grandchildren, et cetera, happens during visits. However, transnational families may also exchange some forms of practical support from a distance, such as renewing a passport or a driver's license and looking after property or bank account. (Baldassar et al., 2007, pp. 80–96.)

When the participants visited their parents in China, they always accommodated at home with their parents. The parents of the participants also often stayed with the participants during their visits to Finland. However, sometimes the parents of the participants stayed in rental homes or hotels during their visits to Finland if the apartments where the participants lived did not have enough room to accommodate the visitors. The participants' visits to China and their parents' visits to Finland were rather long. The family members often visited each other for several weeks, sometimes even for months. For some participants, accommodating together with their parents during the visits was a very positive experience:

*I very much like when I was home, and both of my siblings also come to my parents' place, and we have really like... Everyone is there, [it is] a big family gathering. Then you can talk about lots of things, and you can cook together and making jokes. It is a very happy time. (Participant 7)*

*At that time [when the mother of the participant visited Finland], we all had a very happy time because I felt like I could see my mother every day without having to make a video call. And, during the time when she was here, I could take her to see places near where I lived and let her learn about our life in Finland. Then, this made her feeling more at ease.<sup>5</sup> (Participant 9)*

Overall, several participants felt that especially their visits to China were crucial:

*Well, it is very important [to visit the parents of the participant in China]. [—] So, I think it is very important that a child is there by their side, not all the time, but sometimes should be there by their side. Yeah. It is important in my opinion.<sup>6</sup> (Participant 5)*

However, for some participants, accommodating together with their parents was nothing special or something with positive and negative sides to it. On the one hand, some participants enjoyed having more free time when their parents took care of their children, eating delicious dishes cooked by their parents, and simply spending time together with the family. On the other hand, some participants felt that they did not have as much freedom when they stayed with their parents as they did at home. Furthermore, some participants felt that after a while of living together, their parents began to complain about small things:

*I don't have that strong feeling [about accommodating together with the parents] because I'm very independent. [– –] It's like it has positive sides and negative sides. Positive side is like your life is much easier, you don't have to [do] cleaning, and they're making food, and... You know. Even they do your laundry, and you have a lot of time to go outside with friends and-, and-, eat delicious food at home. A lot of own time. But then, negative things is somebody is always "bla bla" to you, and then you have to answer yes, yes, and then, yeah. Yeah, in Finland, nobody complain why you this and this, do that and that. [– –] They do not complain, but maybe just... [– –] Like, if I put some clothes, my mother was all this is not a nice color. They give a lot of comments and feedback. And why you leave your stuff there... Like control. You know? (Participant 2)*

During the visits, the participants and their parents exchanged practical support, such as helping each other with cooking or cleaning. Some participants said that during their visits to China or their parents' visits to Finland, they helped their parents to do the dishes, clean the apartment, or accompany their parents to visit relatives, whereas some participants said that their parents cooked the meals, cleaned the apartment, or washed the clothes:

*My parents were really diligent in a way that they were responsible for almost all the housework or cooking [during the parents' visit to Finland]. Like they were really like... delightful to help. (Participant 3)*

*As for me, when I return to China, I often cook some delicious food for her [the mother of the participant], to let her feel my care. Because she is not good at doing housework, usually, I help her clean the house. When I return to China next time, I plan to buy her a robot vacuum cleaner. I hope she can have more time for her hobbies and rehabilitation activities.<sup>7</sup> (Participant 9)*

If the participants had children, it was expected that their parents helped with childcare during visits:

*I visit China with my child; they [the parents of the participant] also take care of my child, and then they also [stayed] in Finland for three months to take care of my child. (Participant 2)*

*She [the mother of the participant] helped me, for example, when I was making food, and she's just playing or watching the kid. And she also helped me going to the supermarket. (Participant 6)*

Several participants also had experiences of helping their parents with practical matters related to their parents' visits:

*I need to help them [the parents of the participant] a lot, with the visa, with how to live everyday life together there, and how to take transportation. So, it's help you in every aspect, because they-, they do not have any experience in living in Europe and they cannot speak any foreign languages. (Participant 7)*

Participant 1 felt that life was inconvenient for their mother because she lived by herself and did not have her child nearby to help her with practical matters, especially in case of illnesses:

*Now my mom lived by herself. If she had a flu or does not feel good, then there will be no help-, no helper for her, for example, to visit the supermarket or cook, or go to the pharmacy to fetch the medicine. She has to do it all by herself. So, of course, this makes life inconvenient. (Participant 1)*

Additionally, many participants worried if there would be situations where practical support would be much needed, but they could not be in China. Such a situation could be if the parents urgently fell ill:

*Although we call every week, but then when he [the father of the participant] would need some help, for example... So... Because he is suffering from a disease, if there are any issues at the hospital-, when he visits the hospital, there may sometimes be an issue... I would like to help, but I cannot help because I am here in Finland. What could I do? I call, it does not help at all. Yeah, yeah... It is a little hard to support the other person, to provide him support.<sup>8</sup> (Participant 5)*

*What I fear the most is my mother becoming sick. This is because her health is not very good, and she was already hospitalized once because of her illness. So, if she lives alone in China, I am especially worried that she will get sick. If she gets sick, there is no one taking her to see the doctor.<sup>9</sup> (Participant 9)*

Therefore, participants 5 and 9 worried about possibly not being able to provide practical support at times of need. Their experiences suggest that support types that can be exchanged from a distance, mainly emotional and moral support, do not offer sufficient help at times when their parents urgently need practical support. The hospitalization of a parent is one example of a situation where practical support is urgently needed. It is also a situation that the participants feared.

Currently, none of the participants provided personal care to their parents. The parents of the participants were all able to live independently and did not require frequent assistance or personal care. However, in subchapter 6.2, I overview the expectations of the participants toward the future elderly care arrangements of their parents.

Overall, the results on the different types of transnational caregiving complement Tu's (2016) findings of emotional support being a critical element of filial piety and transnational caregiving within the only-child migrants living in the United Kingdom and their parents living in China. Emotional and moral support is the most crucial form of support among the participants of this study and the only-child migrants in the United Kingdom. However, few participants also did not exchange any emotional and moral support with their parents.

Moreover, although the only-child migrants are likely to offer their parents emotional support, they do not require the same from their parents (Tu, 2016). Also, participants of this study felt more likely to seek emotional support from their spouses and friends than their parents. However, on the contrary, for some participants, receiving emotional support from their parents was important – even essential and needed.

Like in previous studies, also the participants of this study rarely supported their parents economically. In middle-class Chinese one-child transnational families, the children do not need to provide economic support for their parents (Tu, 2016). All the parents of the participants were financially stable. Therefore, none of the participants had any economic obligations toward their parents.

The exchangeability between support types, which is unique to transnational caregiving, may explain why emotional and moral support was crucial to the participants (Baldassar et al., 2007, p. 107). As the participants had limited possibilities to provide other caregiving types, they possibly provided more emotional and moral support through video calls and messages instead.

### 5.1.3 Capacity Explaining Transnational Caregiving

Here I discuss how the participants experienced capacity as a factor that explains their transnational caregiving practices. The capacity means various macro, meso, and micro-level factors that impact the opportunity and ability of an individual to participate in transnational caregiving. Macro-level factors may be issues of migration policies, visa restrictions, or employment policies. Meso-level factors may be issues of the availability of welfare services, infrastructure, or local support. Finally, micro-level factors may be issues of personal relations, such as financial resources, employment status, language, health, and time. (Baldassar et al., 2007, pp. 204–206.)

The on-going **COVID-19 pandemic is a macro and meso-level factor** that had changed the travel plans of the participants and their parents. As Brandhorst et al. (2020) argue, practicing transnational caregiving in the circumstance of closed borders, lockdowns, and mobility restrictions is not ideal. Due to macro-level border closures and travel bans and restrictions, the participants could not meet their family members or provide care within proximity. Some participants and their parents had had to cancel already planned trips because of the pandemic. The participants often visited China regularly, but now they had to stay in Finland:

*[The participant usually visits China] at least once in a year. But this time is corona, and I'm staying in Finland. (Participant 2)*

In addition to the border closures and the travel bans and restrictions, the participants saw traveling during the COVID-19 pandemic as limited and challenging because of required hotel quarantines when entering China and the decreased availability of international flights. Regarding the issues of quarantine regulations and the decreased availability of flights, the COVID-19 pandemic can also be seen as a meso-level factor that influences the capacity to practice transnational caregiving.

Participant 3 had decided to return to China after 5–10 years to be closer to their parents. The COVID-19 pandemic was even one of the reasons that had verified their decision to return to China:

*Especially during this pandemic, you see some really, like, sad stories. For example, one of our relatives died at home really, really, suddenly. However, his daughter works in the United States,*



*but really just couldn't come back even for the funeral because of COVID-19. And all other kinds of situations. Like, if this world continues normally, you probably can fly back in 20 hours if you have money. But sometimes, it's kind of like a pandemic thing. So, things might also happen in the future and more often. So, there's many uncertainties that I want to avoid [by returning to China].* (Participant 3)

Furthermore, **visa restrictions are a macro-level factor** that impacted the capacity to practice transnational caregiving. Most participants felt that the visa procedures and policies were inconvenient or restricted. For example, participant 1 discussed how getting the visa for their mother was a complicated process and how it was inconvenient that the visa was only valid for a maximum of 90 days per one visit:

*Before [coming to Finland], she [the mother of the participant] has to apply to the embassy, the Finnish embassy in China, directly. And now, in recent years, they have the visa procedure changed or reformed. People have to go individual-, people have to go to the service agent. [—] And also, for the visa for my mom to visit the Finland, for the family and for the friend visiting, it's valid for maximum 180 days and for one entrance, it's maximum 90 days, so it's pretty inconvenient; if she... Basically, it means every time when she visit, she has to apply for the visa and... Not convenient.* (Participant 1)

Participant 6 said that their mother needed to take the visa restrictions into account when visiting Finland often after the participant's child was born:

*During the first year of my child, I think my mom has been visiting us every three months because that's how-, that's how, you know, the tourism visa allows.* (Participant 6)

Therefore, in the cases of participants 1 and 6, the visa restrictions were one of the barriers that affected the possibilities of how often the parents of the participants could visit them in Finland. Although the parents of the participants would have preferred staying for a more extended period, the visa only allowed them to stay for three months.

Furthermore, participant 9 felt that the three-month period for which the visa for granted is too short because it is tiring for the elderly to travel often, and that is why the participant did not plan to invite their mother to visit Finland:

*The problem is that every time she [the mother of the participant] comes to Finland, she can only stay for three months before she has to return to China. The time is quite short. For the elderly, um, when she came to Finland, her living environment suddenly changed. [—] Besides, traveling is tiring. There is still the problem of the time difference and jet lag. There may be some elderly whose health cannot adapt within three months. Although they could not fully adapt, they have to return to China. This way, for some elderly, traveling is quite hard. In fact, because of my mother's health condition, I want her to come to Finland only if there are some special circumstances. At the moment, I think it is better I return to China more often to stay with her in China. Now I don't consider inviting her to Finland.<sup>10</sup>* (Participant 9)

Therefore, in the case of participant 9, the visa restrictions were a barrier that prevented the participant from inviting their mother to visit Finland. Additionally, **career requirements and health issues are some of the micro-level factors** that influenced the possibilities of the parents of the participants to visit Finland.

For example, participant 8 discussed how their father was not able to visit Finland because he worked for the Chinese government, and it was inappropriate for government employees to travel abroad for personal reasons:

*I think he [the father of the participant] could come here because, like, work or business, but I don't think he will come here for a visit here, because like, he is working [—] for the government. So, it is not really convenient to go-, to go abroad on the private reason. (Participant 8)*

On the other hand, participant 5 said that their father was not able to travel to Finland because of his health issues:

*My father got sick three years ago, which means he cannot come [to Finland] now. I had thought earlier, four or five years ago, and also my father had said that he would come to visit Finland someday. But once he got sick, then he cannot [come to Finland].<sup>11</sup> (Participant 5)*

Therefore, the career requirements and health issues that participants 8 and 5 discussed impact their capacity to practice transnational caregiving. Moreover, **differences in personal characters, communication manners, and behavior are micro-level factors** that affected the capacity to practice transnational caregiving and the quality of transnational caregiving. Several participants discussed how the different personal characters, different communication manners, and different expectations of how to behave or act in specific situations between them and their parents influenced the caregiving practices:

*With my father, it's a bit more difficult because he doesn't really know, like, um, what's going on, for example, in my studies or in my work. And once I want to communicate about that part, he shows less understanding than my mother. (Participant 3)*

*Maybe like my dad and I sometimes don't really understand each other's communicating language, like, but this is like, also because you have different personal characters, or you don't know each other that well. So, you may misunderstand if the other one is just joking, and you take it too seriously. (Participant 8)*

*At some point, I have to change my behavior and the way I interact with my parents, not like as a child anymore. [—] My mom and I have always been treating myself more like a child, and that's why I can feel not guilty at all like, okay, mom cooks every meal, and I'm just sitting and enjoy every meals, and not doing anything at home. I was like this. [—] Yeah, so, I feel that... Time is passing, and I'm like older and older, I cannot just be... I will have to start treating myself as an adult. [—] You cannot just be a child, doing whatever you want. And so, I don't think the old interaction-, the way to interact will work that well in the long run, maybe in a couple of years. (Participant 8)*

Altogether, the capacity to care depends on the available resources, including money, time, technology, physical and mental ability, and mobility (Baldassar et al., 2007, pp. 204–206). The issues of mobility and physical ability significantly impacted the capacity of the participants to practice transnational caregiving. The issues of mobility and physical ability include the inconvenience of traveling in the COVID-19 pandemic, visa restrictions, and not being able to travel because of career requirements and health issues. These issues significantly influenced what type of transnational care the participants had the capacity to

provide. However, differences in personal characters, communication manners, and behavior also impacted the capacity to provide care.

#### 5.1.4 Obligation Explaining Transnational Caregiving

Here I discuss how the participants experienced obligation as a factor that explains their transnational caregiving practices. As argued earlier, Baldassar et al. (2007) define the obligation as a dimension of caregiving that explicates the cultural understandings of caregiving and emphasizes the outcomes of cultural values and expectations to family relations. Therefore, the obligation can be understood as a sense of duty to provide care, which originates from cultural values. (Baldassar et al., 2007, p. 208.) Although the participants had different perceptions of this cultural duty, most participants felt that they were responsible for providing care to their parents, especially when their parents got older:

*When they [the parents of the participant] get older, I, of course, have to provide them caregiving, more caregiving. And that will be a different phase of-, phase of each other's lives. And I will be maybe in my forties or thirties-, forties, and they will be in their seventies or something. And that would be completely different, I think. (Participant 8)*

*As far as I know, there are two laws in China that describe and regulate caregiving obligations in detail. One law is the "Marriage Law" (婚姻法), and the other law is the "Elderly Rights Protection Law" (老年人权益保障法). Besides considering the legal bindings, in my heart, it is still my responsibility to let my mother have a happy and blessed life at old age. From a biological point of view, without my mother, I would not exist; from an emotional point of view, my mother gave me a warm, stable, and comfortable living environment in childhood. I hope that during my mother's elderly years, I can give her enough support and emotional care as she gave to me earlier.<sup>12</sup> (Participant 9)*

The citation from participant 9 reveals that the participant saw their duty of providing caregiving to their mother as a "repayment" for the care their mother had provided to the participant earlier. Furthermore, participant 1 implied their sense of obligation to provide care by describing how their decision to migrate was not convenient to their mother because they would not be able to provide family-based care:

*This [migration] is not convenient to her [the mother of the participant]. [—] In China, family members are very important to families. People provide both financially and emotionally help as well as probably daily care and elderly care. These are family-based. So, If I stay far away from her, so, the life for her is not that convenient. (Participant 1)*

The situation of participant 7 differed from all the other participants and many others of the generation because they had siblings living in China. However, the participant felt that it did not lift their responsibility or obligation to provide care to their parents:

*Although I have a sibling at home together with them [the parents of the participant], I don't think it is the responsibility-, only their responsibility. I'm also very responsible for doing something for them. (Participant 7)*

Nevertheless, few participants also said that caring for their parents was not something they were obligated to do but something they wanted to do. Additionally, some participants said that it depended on the situation if the children were obligated to provide care to their parents or not. For example, some participants said that because their parents are financially stable or middle-class and have excellent healthcare insurance coverage, they do not feel obligated to provide care. However, if their parents did not have the financial abilities and healthcare insurance coverage, they would be more obligated to support them or hire somebody to care for them.

As Baldassar et al. (2007, p. 208) argue, the cultural constructs of responsibilities, social roles, and expectations may transform through migration experiences. Participant 6 discussed the generational changes in the sense of obligation: how it differed between them and their parents and between them and their children. Although the participant experienced filial responsibilities toward their parents, the participant also thought that the processes of migration had changed the obligation between them and their children:

*If you think about my kids, I don't want to burden my kids, either. I would say if I'm getting old, I would rather go to the elderly house, take care of myself, or let some professionals take care of me, instead of giving burden to my kids. [— —] Because I have been living here already for almost ten years, I think it's kind of okay. I'm getting-, getting to the fact that, the status, that I'm okay to accept how society works. If it's fine for my-, you know, for my kids in the future that she doesn't have to take care of me. But I thought from my point of, you know... Upwards, I still have an obligation to take care of my parents because I have been raised to do so. But my kid, obviously... They received Finnish education, and they doesn't really need to act like Chinese. (Participant 6)*

Baldassar et al. (2007, p. 79) argue that the sense of obligation is typically the strongest between parents and children. As presented earlier, the parents of the participants often received help and support from their siblings. However, most participants felt that although the siblings or other relatives helped and supported their parents, this was different from the support provided by the children. The sense of obligation was different between the participants and their parents and between other family members and the parents. The primary obligation to provide care was still on the participants. For example, participant 3 talked about how they thought that the parents valued the care they provided more highly:

*[The care] I provide my parents, of course, is way more than their siblings, from their siblings. Because my parents also think that I'm more important, I guess. So, what I ever say or provide, I think they value more-, value more. Um... But... I cannot really be physically caring them like being on their side. So, this is the difference from the siblings-, from what siblings are offering. Because they can meet up, they eat together; they can chat, and talk about all kinds of gossips in life. That is really different. (Participant 3)*

Furthermore, participant 5 talked about how providing care was the responsibility of the children and how other relatives would not be able to provide constant caregiving to the father of the participant because they also had other caregiving duties:

*Yes, it [the care the participant provides] is different, in my opinion. [– –] Because although [the father of the participant] has siblings, they have their own life and their own child and their own grandchild, they cannot take care of my father all the time. It is a little bit different, in my opinion. [– –] Because I am Chinese, already when I was a child, I was taught that this [providing elderly care to parents] is your responsibility. [Laughter.]<sup>13</sup> (Participant 5)*

Therefore, the citations from participants 3 and 5 demonstrate that the sense of obligation was stronger between participants and their parents than between other family members and the parents. Furthermore, the experiences of participant 5 suggest that other family members are not equally obligated to provide care to the parents of the participants. The other family members have their own care obligations. Moreover, participant 1 felt that care provided by other family members was not as convenient as the care provided by children, particularly if generations lived together:

*Well, sometimes, the other-, some of her [the participant's mother's] relatives came to help, but it's still not as convenient as if the children live in the same apartment. (Participant 1)*

Additionally, participant 1 felt that the help provided by relatives only occurred in emergencies:

*If in emergency situations, other family members or relatives, they will come to help. But no daily life. (Participant 1)*

The experiences of participant 1 further suggest that although other family members help and support the parents of the participants, it is not their primary obligation. Therefore, other family members may only help in emergencies.

However, some participants' sense of obligation to provide care to their parents could also be interpreted from how they described the possible future options for the elderly care of their parents. The participants described the future options of elderly care from the viewpoint of what they themselves would do. For example, several participants said that some of the options included buying an additional apartment for their parents near their apartment if they returned to China. However, if they did not return to China, they could hire a nurse to assist their parents. Some participants even referred to other options than them moving to China for caregiving matters as “a supplement.” Therefore, they implied that the culturally preferred option would be the children returning to China to provide care. Nonetheless, the sense of obligation was also present in the ways the participants described their negative feelings toward the option that their parents would live in care homes in the future:

*Maybe I'm also, like, partly influenced by the idea that in China, is still, like, not everybody embraces the idea of sending your parents to institutions. Or maybe, maybe still, many parents don't feel that happy there if they are sent to institutions. [– –] I just feel that then they somehow feel that they're disconnected with me. [– –] But that then they are emotionally disconnected, and you feel that it's just not that.... Not that good. I don't like that. I will not choose that. (Participant 8)*

The citation from participant 8 suggests that institutional elderly care is not the culturally preferred option for elderly care arrangements. Therefore, the obligation does not encourage the participants to choose that.

Altogether, as Baldassar et al. (2007, p. 208) claim, in addition to the sense of obligation defining the duty to provide care, it is also related to the expectations and notions of responsibilities and appropriate social roles. Most participants experienced being responsible for providing care to their parents, and the attitudes of the participants toward the elderly care of their parents reveal that for many, the appropriate social role is to be the primary caregiver for their parents as they get older. Many participants believed that it is their responsibility to organize the elderly care arrangements of their parents, even when they have migrated abroad. Nevertheless, I will review the participants' expectations of the future elderly care arrangements more throughout in subchapter 6.2.

### 5.1.5 Negotiated Commitment Explaining Transnational Caregiving

Here I discuss how the participants experienced negotiated commitment as a factor that explains their practices of transnational caregiving. The negotiated commitment within transnational caregiving means family relationships that develop over time and in the context of international migration. Migrants and the "local kin," the family members of the migrants who stay in the home country, develop different perspectives on migration. The attitudes of family members facilitate the practices of transnational caregiving. The differences in the attitudes toward the decision to migrate may impact the caregiving expectations of family members. (Baldassar et al., 2007, pp. 211–213.)

As overviewed earlier, most participants had moved to Finland to study abroad only for a specific time but ended up settling in the country. Initially, all the parents whose children moved to Finland to study had viewed the study abroad opportunities of their children positively. The parents had given their children "the license to leave." As Baldassar et al. (2007) state, the license to leave, the reactions of the family members to the decision to migrate, is an essential aspect of the negotiated commitment. Especially if the family members do not support the migration, these reactions may have a severe effect on the relationships of the family members. (Baldassar et al., 2007, pp. 211–212.) The migration decisions did not raise any tensions between the participants and their family members.

However, although many parents of the participants had initially supported the study abroad opportunities, most participants felt that their parents were not happy that they decided to stay in Finland for a long time and settle down. Many participants thought that their parents would have preferred that they stayed in China:

*I came to study and then that is-, they [the parents of the participant] totally, completely, support because I come to study. Then we-, we were not expecting that I will stay here. And then... Then because of marriage and so on, then I decided to stay here. [– –] My parents are really like, um, a little bit worried and also... [– –] They would like me to go back to China, but they didn't say it. [– –] I can feel they really face-, want me back. But they didn't say it. But they say, oh, if you feel happy, then it's fine. (Participant 2)*

*She [the mother of the participant] really wishes that I can return to China because she feels that having children accompanying her will make her feel more at ease and live happier during her*

*elderly years. However, I am-, I am a person who loves being independent. [– –] I can also do many things I want to do here [in Finland], things that are difficult to achieve in China.*<sup>14</sup> (Participant 9)

As the citations from participants 2 and 9 demonstrate, the participants and their parents had developed different perspectives on migration. Some of the parents had more pessimistic thoughts of the migration than the participants themselves. The parents were worried about their children staying abroad. Like participant 9 in the citation above, some participants felt that their parents wished they could stay in China to accompany or provide care to them when they got older. Caregiving expectations within the transnational families were intertwined with the attitudes and perspectives on migration (Baldassar et al., 2007, p. 212).

However, the perspectives that the parents of the participants developed on migration were also complicated. Although many parents were not happy that their children settled abroad, simultaneously, they had been quite prepared for that to happen. The parents did not want to additionally burden their children by setting up expectations for returning to China. Many participants felt that their parents respected their choices of staying abroad:

*She [the mother of the participant] has an open mind, and although she is not happy that I stayed abroad that is far away from her, but still, she accepted that, and she respects my choice.* (Participant 1)

*It's a better choice for them, actually, that I stay in China. But when I decided this, they didn't say lots of things. And they-, they are just not quite happy, but they do not disagree. [– –] So, there is kind of like emotional-, emotionally, it's not very easy to accept, but still, they are quite open-minded and supportive to me.* (Participant 7)

In many cases, neither the participants nor their parents had initially expected that the participants would stay in Finland, possibly permanently. As overviewed earlier, finding a partner in Finland was the main reason why the participants decided to stay. However, establishing a career or social networks in Finland also encouraged the participants to stay. Although the parents of the participants would often not have preferred their children to stay abroad and had not initially supported the decisions to settle in Finland, they had accepted it. Therefore, the families of the participants just happened to become transnational families.

Migration may cause changes to family relationships (Baldassar et al., 2007, p. 211). However, most participants of this study said that their relationship with their parents stayed similar despite their migration abroad:

*It [the relationship between the participant and their parents] is similar. Yeah. People care about each other. Yeah, that's it.* (Participant 1)

*Because they [the parents of the participant] are still quite young and healthy, and they can care for each other, I don't have any, like, I don't have any strong feeling about it [changes in the relationship]. Because if they are sick, maybe they need somebody to take care, and then probably it's like some trouble, and. But... But nowadays, no troubles. And they are happy; they have own life; they are traveling together.* (Participant 2)

As the citation from participant 2 demonstrates, if the parents are healthy and active, the participants usually do not have concerns about their relationship with their parents. Furthermore, even before the migration, many participants had already studied in other Chinese cities but where their parents lived. Thus, the participants and their parents had already got used to living within a distance from each other. Several participants expressed that this was the reason why their relationship with their parents had not changed much after migration:

*It [the migration] really does not [affect the relationship between the participant and their parents], not at all. So, when I was in China, at the time, I was... At that time, I lived in another city in the South of China for many years, and when I was 20 years old, I left home to study-, to study at a university. So, my parents had already got used to it that I am not there at home. [Laughter.] Coming to Finland really does not affect it at all.<sup>15</sup> (Participant 5)*

*I think [the relationship between the participant and their parents did] not [change] much because I have actually studied in-, in Beijing back then during my bachelor's degree. And we had almost the same kind of frequency of contact. Yeah. So, they have already gotten used to it, even before I moved to Finland. And for them, it's pretty much the same. Either I'm in-, either I'm in Helsinki, or I'm in Beijing because even if I were in Beijing, I still have to-, you know, have a limited time of chatting with them, and I can only go back to my hometown every now and then. (Participant 6)*

Moreover, several participants thought that their relationship with their parents had even got better after migration. Staying together with their parents for too long was uncomfortable for some participants, whereas staying farther away from each other positively changed the relationship between them. Living at a distance from parents enhanced the relationship between some participants and their parents:

*When I was in China, I was always wondering, like, how my, like, relationship with my parents is gonna be if we live in the same city, or if they demand me to go back to my home city to live, then that's going to be a problem because I don't want to do so, I don't want to live very close to them. So, I think, like, moving to Finland, in a way has, how to say, widen the physical distance, in a way they have much less influence or, or this control, I don't know, like, over my life. In that way, I think that's positive. (Participant 4)*

*Sometimes when it is too close and stay for too long time, there is some kind of uncomfortable feeling for myself. It's hard to say but-, but there is. And when we're living in two different places, but we're still keeping in touch, um, I feel pretty comfortable with this kind of relationship. (Participant 7)*

Generally, the life cycle stage is a significant element of the negotiated commitment because the life cycle stage commonly affects who can take more responsibility in caregiving and how (Baldassar et al., 2007, p. 213). However, as overviewed earlier, the parents of the participants were mostly in their 50s and 60s and did not require personal care or frequent assistance. As personal care or frequent assistance was not currently needed, the life cycle stage did not significantly affect the negotiated commitment. However, the future needs of the parents for elderly care are a stage in the life cycle that may affect the negotiated commitment in the future.



## 5.2 Future Elderly Care Arrangements

Here I examine what the future elderly care arrangements are like for the parents of the participants. While most participants felt that they were obligated to provide care to their parents in the future, the practical arrangements were still unclear. Many participants said that they, of course, wished that their parents would be healthy and able to live independently in their own home for still a long time. Often, the participants had neither investigated the practical elderly care options, decided anything yet, nor negotiated the matter with their parents. Still, many participants felt that the future elderly care arrangements of their parents would become an essential and challenging issue in the future:

*When it is five years later, or let's say ten years later, when my parents really need somebody to be around and help them with the daily living, then I think that is the hard time for us. And I don't know about that yet very clear. (Participant 7)*

It may be interpreted from the citation of participant 7 that because the available elderly care options are limited, arranging the future elderly care is worrying. As providing personal care or old-age assistance is not possible from a distance, the issue is complicated. However, as argued earlier, many participants felt that returning to China to provide care to their elderly parents would be the culturally preferred option. After all, elderly care has traditionally been the filial responsibility of children.

It is straightforward that most participants were, to some extent, responsible for arranging the future elderly care of their parents. However, there were differences between the participants in which ways or extent they experienced being responsible for providing the elderly care. In most cases, the participants, their parents, and possibly the spouses and partners of the participants would discuss and decide on the elderly care arrangements together:

*We [the participant and their parents] will discuss. And then, of course, I have to respect their opinion. And then... Yeah. But-, but of course, I can say my opinion, but of course, if they want, I will respect. (Participant 2)*

*I think it [arranging the elderly care of the parents of the participant] will be a decision based on discussion. And we will take into consideration both what their preferences and my preference. (Participant 8)*

Therefore, the negotiated commitment would likely have a crucial role in the decisions of future elderly care. The family members would discuss the available options and preferences of the family members and make decisions based on that. However, as the citation from participant 2 demonstrates, the preferences of the parents are of great importance, and respecting the opinion of parents is necessary.

Differing from the cases of other participants, the parents of participant 6 would independently decide on elderly care arrangements. However, participant 6 also said that if their parents were unable to make the decisions, the participant would discuss the elderly care arrangements with other family members and relatives who lived in China.

As mentioned earlier, participant 3 had decided to return to China after 5–10 years. The elderly care of the parents of the participant was the main reason why the participant had decided to return to China, alongside reasons related to career development. For participant 3, returning to China was easy and preferable:

*I think [there are] two big reasons [why the participant plans to return to China]. The first reason is because my parents. I'm the only-child in the family. And also, I'm the daughter, so my parents actually really want to take care of me. I mean, in daily life, they really care about did I feel well today and what I did, and also, they are also growing old. Probably I think it's better to be on their side and take care of them as well. The second reason is more about the career development. I personally see that there are more and better career opportunities in China. (Participant 3)*

Participant 3 said that their parents were pleased about their plans of returning to China. They would be willing to see it happen soon, although they also understood that the participant first planned on gaining more work experience abroad. However, although the participant was sure of their decision of returning to China, their father had doubted their plans:

*My father kind of doesn't believe it [that the participant will return to China] because he's a little bit pessimistic person. He wouldn't think that this is possible that I go back because I have all kinds of like-, I have a kind of good life in Finland. So, he kind of doesn't believe so. But it doesn't matter if he believes or not. [Laughter.] [– –] Because I will come back anyway and then, no problem for that. (Participant 3)*

Additionally, for participant 5, returning to China was a possibility, although it had not been decided yet. If participant 5 returned to China, it would be because of caregiving matters:

*If he [the father of the participant] one day needs, then, so, I live with him, although not in the hometown, but we have an apartment in the other city. He can come to live there with us. Although I may go to work, there could be some personal assistant-, I could pay for some personal assistant. [– –] But if I need to go to work and someone has to take care of my father, maybe this is a good option. Some personal assistant is at home with him, and I go to work. But in the evenings, we could spend time together, and so on. And be close to each other anyway.<sup>16</sup> (Participant 5)*

Nevertheless, returning to China was a hard choice for participant 5 to make:

*It [returning to China] is a really big thing for me. Because anyway, I have my own life in Finland, I have my job here, and also my husband here, and maybe one day I also want to have children. Then, we have our own life here; it is a very big thing for us. But sometimes, one must not only think about oneself but think about my father. [– –] It is a big thing and a hard decision.<sup>17</sup> (Participant 5)*

Many other participants also struggled with the possible obligations to return to China for caregiving matters. Possibly returning to China was challenging and often unappealing or undesirable, and sometimes even an impossible choice to make. The participants faced the dilemma of filial responsibilities on the one hand and their personal life in Finland on the other hand. Choosing to return to China for longer or permanently would require flexibility and rearrangements from the participants. As can also be seen from the citation of participant 5 above, many factors, such as career and family requirements, also impacted the participants' opportunities and willingness, the capacity, to return to China:

*Of course, it [moving to China] will impact in a lot of aspect. If I move to China, and then... Will my spouse and my children also move back to China? If yes, and then how the education would be for the children and how... What kind of work can my spouse find in China? (Participant 1)*

*I hope that one day, one day when I need to be around them [the parents of the participant] to-, to be there for them, I can go back. I, I-, hopefully I'm financially free and, and also, I have that free time to do that. That is what I hope, but so far, it's-, it's-, it's only a beginning for us in Finland. We don't know what is our job is going to be like. And we don't know whether we have a kid ourselves in the future. So, those are the things that are hard to tell from now. (Participant 7)*

Furthermore, many participants had migrated to Finland at a young age and had stayed in Finland for many years. They had their social networks in Finland, which again impacted the participants' capacity to return:

*Because I came to Finland when I was so, so young, I came as a student, so, basically, I don't really have my social network and social connection in China, rather than my family. In that sense, it doesn't really make that much sense for me to move back to China. (Participant 4)*

The citations above from participants 5, 1, 7, and 4 again demonstrate how challenging the elderly care dilemma is for the participants. The participants genuinely worry about the colliding care obligations and their limited capacity to fulfill them. For many participants, the alternative elderly care options to family-based care, including their parents residing in a care home and hiring a nurse or a maid, were undesirable. The alternative options do not represent the cultural value of elderly care being the duty of the children and the appropriate social role of children as the primary caregivers. Overall, many participants saw the family-based elderly as the primary option of elderly care arrangements for their parents:

*I don't think they [the parents of the participant] would like to go to any elder house. [—] I don't think we don't want them to go there either. And I was thinking we can, um... I can go back if I can. This is the first choice. And luckily, I have my sibling there; they can offer help too. And it's also possible to hire somebody to take care of them. (Participant 7)*

Furthermore, some participants worried that their elderly parents could only receive emotional support from their family members, which is why the institutional elderly care options were not preferred:

*Either I move back to China [to provide care], or the other solution is that she [the mother of the participant] go-, she goes to the elderly care place in China. But it's... For the emotionally feeling, if parents stay in the elderly care place, it might be difficult for them. [—] Since the worker in elderly home, they can provide only daily healthcare, but not emotionally. Emotional, it's... Care is only available from family members. For thousands of years, the... In China, the expect from both parents and from society is that when people get older, there would be some people to accompany by. (Participant 1)*

Overall, care homes were the most undesirable option for most of the participants. Many participants said that they would not wish that their parents would have to reside in a care home because they felt that the care homes in China were not developed enough, one could not receive quality service there, the atmosphere would be gloomy, and the care homes were located outside the cities:

*I wouldn't even send my parents there [to a care home]. Because... [—] I feel like, at least based on my-, on my imagination or my experience, those elderly centers are quite far from cities or the*

*old people there, they're quite sick. Somehow, they are less active or energetic than those elderly in the cities that they go to square to dance and sing and so on. So, I'd rather have my parents in the cities, in this city, to have a familiar environment as they can still meet their friends. [– –] My father was joking that he would go to the elderly center because he doesn't want to be a burden for me. But I think that's definitely a joke because he doesn't want to go there. (Participant 3)*

*In our city, I'm from a very small city in China, and there, I don't think there's any very good care service. That's it. And if the service is not good, it will be a disaster to be there, like everybody around you is-, is someone old, and someone who is very sick. And the atmosphere is very negative there. And it feels like when you-, when you are sitting there; you have no future already. So, it's kind of atmosphere, emotionally, very negative. And I don't want them [the parents of the participant] to experience that. (Participant 7)*

The experienced underdevelopment, low quality, undesirable locations, and gloomy atmosphere of the care homes in China could be understood as meso-level factors that impact the capacity to care. These factors limit the possibilities of the participants to organize the elderly care. These factors also impact the negotiations of the future elderly care arrangements between the participants and their parents. The negative attitudes toward institutional caregiving complicate the negotiations of the elderly care arrangements.

Furthermore, the negative feelings and perceptions of the care homes reveal something about the cultural sense of obligation and the filially appropriate social roles of the participants. The feelings and perceptions of the care homes seem to be especially negative because the institutional elderly care options are the furthest from the traditional expectations of family-based elderly care. Therefore, sometimes, participants would not even allow their parents to go to the care homes even if their parents themselves wanted to:

*I think they [the parents of the participant] decide the style [of the elderly care arrangements]. [– –] Well, but if they want to go to the elderly center, I wouldn't allow. (Participant 3)*

Furthermore, many participants also said that neither their parents liked the idea of residing in a care home:

*That [residing in a care home] is not a trendy culture yet in China. They [the parents of the participant] don't want it. I think they... At least my mom has given me this kind of impression that if they end up in the elderly house, that means that I'm-, I'm such a bad kid, I just dumped them there. (Participant 6)*

*To be honest, I don't know [what kind of elderly care arrangements the parents of the participant expect]. But I know that they don't-, they don't like to go to the elderly house either. (Participant 7)*

Therefore, the citations from participants 6 and 7 demonstrate that the parents of the participants likely have similar negative thoughts about the care homes than the participants. However, it is notable that often, the participants had not discussed the matters of future elderly care with their parents, and in this study, the parents were not interviewed. Therefore, the experiences of the parents of the participants being opposed to institutional elderly care may not entirely represent the thoughts of the parents.

The study results of Tu (2018) on Chinese migrants living in the United Kingdom and their parents living in China reveal that sometimes more children than parents oppose the idea of paid care service replacing

family-based care and that the parents are more likely to reconfigure the filial expectations. It could potentially also be the case within the Chinese migrants living in Finland and their parents living in China. Certainly, it was the case with participant 8. Participant 8 did not wish their parents to reside in a care home. However, the parents of participant 8 were not resistant to the idea of going to a care home:

*I think they [the parents of the participant] are quite open-minded. They will not resist the idea of going to institutions. (Participant 8)*

Moreover, few participants did not view the care homes or institutional elderly care as negatively as the other participants. Some participants said that if one were able and willing to afford more expensive institutional care services, it would be possible to receive excellent care. Therefore, care homes were also a possible option for a few participants:

*I think she [the mother of the participant] is okay if she go to this elderly healthcare because, in China, they also depend on how's your financial. If you have quite okay money, then you can also get a very nice place and take care. Well, but let's see. I don't know. It's difficult to think about. (Participant 2)*

The experiences of participant 2 are again related to the concept of capacity. Participant 2 and their parents have the capacity to afford quality care. Therefore, their financial means are a micro-level factor that positively impacts their capacity to arrange elderly care. This micro-level factor again impacts the negotiations of the future elderly care of the parents. In the case of participant 2 and their parents, the negotiations of elderly care arrangements may not be as complicated as for some other participants because they have the capacity and willingness to utilize institutional elderly care. However, on the other hand, participant 2 also experienced the issue to be challenging. Therefore, solving the elderly care dilemma may not be straightforward even if the participants and their parents are open to institutional options.

If the parents of the participants would not go to the care homes, and the participants would not return to China, the available option for arranging the elderly care was hiring a nurse or a maid. The hired nurse or maid could support the parents when they required frequent assistance:

*The second choice [the first choice being family-based elderly care] is to-, to pay, um, a housemaid for them if they really need some physical assistance. (Participant 3)*

*Maybe they can get a nurse, or I can help them to get a nurse or daycare assistance. [– –] Those kind of, you know, living with them and taking care of them all the time, 24 hours. (Participant 8)*

However, finding a suitable nurse or maid was challenging and required effort from the family members, and therefore not an easy solution to the elderly care dilemma:

*But again, we need to have really high standards for the-, for the maid, because, you never know like... I think it's hard to be trustworthy, that they can treat my parents as-, as well as I do. I also need to collect feedback from my parents really like regularly. How's the behavior-, how's the behavior of the maid. (Participant 3)*

*There are also some options like you hire a caregiver, like some kind of assistance to help some way. But that's not an easy task either. You have to find somebody suitable; you have to, like, monitor everything goes well. (Participant 4)*

Therefore, the effort and monitoring that hiring a nurse or a maid requires from the participants or their parents are again a micro-level factor that impacts the capacity to arrange elderly care. Furthermore, this factor that impacts the capacity to arrange elderly care again impacts the negotiations of the elderly care arrangements.

Moreover, some of the parents of the participants planned on relying, sometimes unwillingly, on the help of other family members, relatives, or neighbors in the elderly care aspect. For example, the parents of participant 4 were thinking of moving closer to other family members or relatives:

*Because they [the parents of the participant] are living in a rather small place, a small town, they're thinking about moving to a bigger city where more-, like most of my relatives live. So, there they have their sibling, like, they are closer to each other. And for example, their niece and nephew, like my cousins, live there. So, that's one way to get emergency help when needed. [—] I think I put a lot of hope on their [the participant's parents'] siblings. (Participant 4)*

Nevertheless, as argued earlier, although the caregiving inputs of other family members are a significant factor in the circulation of the care, other family members than children are not equally obligated to provide care. Therefore, the care provided by other family members is likely not a sufficient form of elderly care.

Previous research on Chinese one-child transnational families and Chinese migrants living in other countries suggests that migrants often wish to sponsor their elderly parents to their host country because it makes caregiving easier (Fong, 2011, p. 206; Liu, 2016; Mujahid et al., 2011, p. 96). However, due to the Finnish migration policies and visa restrictions, bringing parents to Finland is nearly impossible for the participants of this study. None of the participants had seriously considered bringing their parents to Finland:

*Yes, so, in the beginning, I had thought that if my father could move to live in Finland. But, probably, my father... It is not-, it is not so easy, it is very hard. Because in Finland, the father and mother are not family members. Husband and child are family members. Then, it is not possible to get a visa... They get a visa, but only for three months, to visit here, and then they must leave Finland. [—] I hope that this regulation changes one day.<sup>18</sup> (Participant 5)*

*One problem is that it's not like in the US or some other countries that if your daughter or son is here, then you can also get some sort of residence permit. (Participant 8)*

Therefore, the migration policies and visa restrictions are macro-level factors that limit the capacity to arrange future elderly care. As the option of bringing parents to Finland is impossible, the possibilities of the participants to provide care are additionally limited compared to the Chinese migrants living in many other countries. Thus, the migrants living in Finland may face an additional heavy burden with the elderly care dilemma if compared to their counterparts in other countries.

Many participants felt that it was unfair and frustrating that there were no options to bring their parents to Finland. For example, participant 6 felt that it would be humane if the parents could come to Finland on the expenses of the migrants:

*Why can't they join us? On all our expenses, do you understand? [— —] I don't know, like, why Finnish government doesn't offer the long-term support because, technically, they could just come here with a long-term visa and, just, we provide the healthcare coverage. [— —] I think that it would be like quite humane to-, to like-, to the children like us because we-. I'm the only one. I cannot... I'm living here. I cannot take care of my parents. (Participant 6)*

A few participants had heard of some migrants bringing their parents to Finland on employment-based residence permit arrangements. Some migrants attempting to circumvent the migration policies by bringing their parents to Finland as employees again demonstrates the frustration of having no ideal solutions to the elderly care dilemma. The participants thought that bringing their parents to Finland on employment-based residence permits was nearly impossible though and therefore would not solve the dilemma:

*There are some people who succeed in doing that [bringing their parents to Finland], by, for example, investing in a business and bring the parents here by a form of employment. So, that's possible, but it's really hard. Not everybody can do that. [— —] So, that's another issue. Another possibility, but another barrier. (Participant 4)*

*I've seen, like, a lot of case, and I've heard of a lot of case also, for example, the-, the kids tried to hire their parents to take care of their grandkids. But that case was... I think the father was deported. [— —] I think there should be some solution to that if the parents don't have, you know, a good condition in China. It's just-, it's just sad that there is no solution to it. (Participant 6)*

Moreover, even if the Finnish migration policy and visa restrictions would allow old-age immigration, most participants said their parents would not want to migrate to Finland. The parents of the migrants had their friends, families, and leisure activities in China that they did not want to leave. Additionally, the parents of the migrants did not speak English, did not have any experience of living abroad, and had not got used to the Finnish living habits:

*My mother, she doesn't like Finland. [— —] Because she said, it's a nice country, but it's not... [— —] She likes people, and she likes-, she has her own friends and social life. And-, and then language also is... She doesn't want to, you know, study a new language and then... And... And also, food, she feels like not so many food in Finland. And then, yeah, she doesn't understand anything. [— —] And the cold and dark and so on. She doesn't like it here. (Participant 2)*

*I think that they [the parents of the participant] are not really fan of going to Finland. [Laughter.] [— —] I would say that if they come to Finland to live, they're rather lonely. They don't have their friends. They have nothing to do. And except for the good environment, the darkness... They don't really have so much positive thing in life. So, they-, at least my mom would rather stay in China. (Participant 6)*

Furthermore, several participants specifically mentioned that not being used to the Finnish cuisine was one of the main reasons why their parents did not want to move to Finland:

*The most important reason is that they don't like the food here. Yeah. Other things, it's okay, but the food is the problem. [Laughter.] (Participant 7)*

Thus, the various reasons why the parents of the migrants wished to stay in China are micro-level factors that impact the capacity to arrange future elderly care. However, due to the macro-level legal constraints, the possibilities of the participants to bring their parents to Finland are limited if non-existent. Therefore, the micro-level factors that impact the capacity have little relevance.

Overall, the future elderly care arrangements were not agreed on or even planned in almost all the cases of the participants – except for participant 3, who had decided to return to China for caregiving matters. Because there are no ideal options for solving the elderly care dilemma, many participants seemed to be quite hopeless, frustrated, or afraid of what would happen in the future when their parents aged:

*I think it [the future elderly care arrangements of the parents of the participant] is a big, big question. I was always discussing with my friends, for example, we were like the first generation to migrate, like, the first Chinese migration to Finland, and we came more young, so... [– –] So, practically, there is no Chinese people who have, like, immigrated to Finland until their parents are really old or they are old. So, it's kind of like unseen problems for us so far. (Participant 4)*

*I have to think about how I balance my life in Finland and the caregiving responsibilities toward my mother in China. [– –] But this question is what I am the most afraid to think of at this stage. [– –] I have not thought of how to change.<sup>19</sup> (Participant 9)*

Some participants even purposely avoided discussing the dilemma with their parents:

*I guess everybody is-, is trying to, like, is trying to avoid think about this question so far. Before anything really comes yet, people are avoiding it. [– –] It's hard, and there's no perfect solution. They can't really say, like, you move back to China and taking care of us. It's impossible to say something like that. And I can't take them to Finland. And then, well, we just don't have a perfect solution. (Participant 4)*

Many participants hoped and believed that changes in Chinese society could solve the elderly care dilemma and lessen the stigma around alternative options to family-based elderly care. After all, the dilemma considers both the one-child transnational families and the one-child families in China. The traditional caregiving duty may be too heavy when it is not shared with siblings. Furthermore, the only-children have often moved to other cities to work and study. Many participants simultaneously respected the filial caregiving traditions and demanded societal and policy changes. Although many participants felt that providing elderly care is the responsibility of the children, they still thought that the government should also take some responsibility for the caregiving burden of the generation of the only-children. The government could take responsibility by, for example, developing the Chinese elderly care system:

*I think the-, of course, the elderly care centers, they need to improve their conditions. [– –] For example, improve the hygiene-, the hygiene conditions, or the nutrition, like, the level of the food. Or they-, they need to somehow win the trust of people that they would provide a really good living environment for-, for elderly of course. [– –] You need to win the image, like the trust, and you need to win your own reputation on that one. (Participant 3)*



*We still don't know, like, what kinds of elderly care system will be developed, for example, after 20 years, and I'm sure it's a common problem for our whole generation in China. So, I hope there is something in development in this-, this aspect. [—] Also, in my mind is that Chinese people would think, like, staying in elderly home means your kids are not really taking care of you, so a really sad thing. So, I think that kind of mindset is probably gonna change because it's a common problem for the whole generation. (Participant 4)*

Some participants also hoped that the government would establish home care services:

*I think that there should be some change to this [to the elderly care system in China]. Yes, this elderly care is the responsibility of children, but-, but the government or society needs to participate in it. Not in all of it, although in some, they must participate. Establishing elder care homes and especially home care is very good. So, the elderly can live even with their children, but home care services visit even every day.<sup>20</sup> (Participant 5)*

Additionally, many participants hoped that the Finnish migration policy would change, allowing their parents to migrate to Finland or stay in Finland for a more extended period and thus solving the dilemma:

*I hope that one day, there will some change to the visas in Finland. So, if considering this example, I now have a very hard decision, so I don't know what I could do. Because my father cannot move to Finland to stay with us here, then we must do something. We must make some decisions about this in the future, whether to live here or move to China. I hope this will change somehow someday. If someone sees your thesis, then they know, what our situation is, then they can understand.<sup>21</sup> (Participant 5)*

*I hope system will adapt. [—] Or like if they are able to have, having this long-term visa, at least, I would say that if my parents can travel every three years back then, that's fine. I guess technically if Finnish government doesn't have to pay a dime, why can't they come? (Participant 6)*

Not even having the option to bring their parents to Finland was frustrating to many participants. However, as the elderly care arrangements did not yet have to be realized, many participants hoped that societal and policy changes in the Chinese elderly care system and old-age migration to Finland would make the future easier. The possible societal and policy changes could be factors that would positively impact the capacity of the participants to arrange the elderly care of their parents. The participants hoped for the changes desperately and frustratingly because, with the currently available options, the participants only had limited possibilities to arrange the future elderly care of their parents. Despite having only limited possibilities, most participants expected to be responsible for arranging the elderly care.

Nevertheless, decisions on the elderly care of the parents will have to be made in the future. If there are no societal and policy changes, the possible solutions to the elderly care dilemma include participants returning to China, their parents residing in a care home, and hiring a paid nurse or a maid to provide care. As Tu (2016) argues, finding the solution is both a moral and practical dilemma. From a theoretical perspective, the solutions to the dilemma are likely to be sought within the framework of capacity, obligation, and negotiated commitment. The sense of obligation encourages people to spend the needed resources and manage any possible risks related to elderly care; the obligation and capacity to care influence each other, and the negotiated commitment also impacts the decision-making (Baldassar et al., 2007, pp. 207–211).

## 6 Conclusions

In this master's thesis, I have investigated how the first-generation Chinese migrants living in Finland, born in mainland China under the one-child policy, practice transnational caregiving and how they experience the expectations and possibilities concerning caregiving. Additionally, I have investigated what the elderly care arrangements are like for the parents of the migrants in China. In the first chapter of the thesis, I introduced the topic. In the second chapter, I conceptualized Chinese one-child transnational families by providing background information on the one-child policy, Chinese migration, transnationalism, transnational families, filial piety, elderly care in China, and old-age migration to Western countries. I further discussed previous research results on Chinese one-child transnational families and caregiving.

In the third chapter, I introduced a theoretical framework of transnational caregiving by overviewing intergenerational caregiving and three theoretical dimensions of transnational caregiving. These three dimensions of transnational caregiving included the care circulation approach, different types of transnational caregiving, and the capacity, obligation, and negotiated commitment as factors that explain transnational caregiving. In the fourth chapter, I presented the data collection method, the method of qualitative theory-guided content analysis, the analysis process, and ethical considerations. In the fifth chapter, I presented the results, investigating how the Chinese one-child transnational families practice transnational caregiving, what expectations and possibilities they have concerning caregiving, and what the elderly care arrangements are like for the parents.

The Chinese only-child migrants interviewed for this study and their family members practice transnational caregiving mainly by exchanging emotional and moral support. It is the primary caregiving type because the migrants can easily provide it from a distance. The one-child transnational families exchange transnational emotional and moral support via WeChat video calls and messages. Sometimes, the migrants also provide emotional support indirectly by sending gifts. Although some previous results of research suggest that it is essential for the only-child migrants to offer emotional support for their parents (Tu, 2016), this study suggests that sometimes receiving emotional support from the parents may be equally important. However, some migrants do not exchange emotional and moral support with their parents. Furthermore, although economic support may also be exchanged from a distance, the migrants do not have economic obligations toward their parents. The new Chinese migrants typically come from middle-class backgrounds, and their parents are financially stable.

The results of this study indicate that transnational migrants have limited possibilities to practice caregiving types that mostly require proximity, such as practical support or sharing accommodation. The one-child transnational families of the migrants interviewed only exchange these support types during visits. However, the limited possibilities to provide practical and accommodational support may contribute to the greater

importance of exchanging emotional and moral support. The migrants possibly offer more emotional and moral support for their parents on behalf of the limitedly exchanged caregiving types. As stated earlier, Baldassar et al. (2007, p. 107) suggest that this type of exchangeability between caregiving types is unique to transnational caregiving. Additionally, although personal care is a caregiving type that may only be exchanged during visits, the only-child migrants do not currently need to provide personal care to their parents.

In most cases, the only-child migrants living in Finland feel that they are expected to provide care to their parents. The migrants experience being especially obligated to provide care when their parents get older. Providing care is a traditional filial responsibility and a cultural obligation. The primary caregiving obligation is on the children, although other people, such as the siblings of the parents, may also provide care to the parents on behalf of the migrants. The filial obligations are often imposed by the migrants and their parents, although the obligations also arise from societal ideals and cultural values. However, some migrants also experience that whether they are obligated to provide care depends on the situation. The life cycle stage is an essential factor that impacts the caregiving obligations. Additionally, sometimes the migrants experience that caregiving is not their obligation but something they want to do. Nevertheless, these experiences are certainly also impacted by the underlying cultural obligations.

However, the only-child migrants interviewed for this study experience their possibilities to provide care to be limited. As the migrants live far away from and in another country than their parents, it is hard to fulfill the filial obligations and caregiving expectations embedded in the Chinese culture. Already the fact that the migrants are only-children affects their perceptions of the caregiving possibilities. The only-children generation does not have the possibility to share the caregiving burden with siblings like the previous Chinese generations and many migrants from other cultural backgrounds. Additionally, several other reasons influence the experiences that the migrants have about their limited possibilities to provide care. These reasons include the immobility regime caused by the COVID-19 pandemic, visa restrictions, health issues, and career requirements.

In terms of transnational caregiving, the results of this master's thesis are in line with current research results on migration and aging to a large extent. The only-child migrants living in Finland provide transnational care to their parents with similar patterns than research on transnational families suggests. The relationship between the migrants and their parents stays similar than before migration and sometimes even gets better. Emotional and moral support is the most crucial form of caregiving for transnational families. Participating in transnational caregiving is a moral duty of the migrants. The migrants are responsible for providing care to their parents, especially when their parents get older. Furthermore,

different factors such as migration policies, family life, and career requirements affect the opportunities to practice transnational caregiving.

What comes to the elderly care arrangements within the transnational families of the migrants interviewed, practical arrangements are not yet decided. The transnational care practices, mainly exchanging emotional support, offer only limited help when the parents of the participants require daily or frequent old-age assistance. Because the possibilities of the migrants to provide elderly care to their parents are limited, there are no great solutions to the elderly care dilemma. If the migrants wish to return to China to fulfill the filial responsibilities, they are forced to make sacrifices in work and family life and leave behind social networks. However, if they do not return to China, neither the alternative institutional elderly care options seem ideal. Chinese care homes are experienced to be underdeveloped and of low quality. There is also a cultural stigma associated with utilizing institutional care. Hiring a maid or a nurse to assist the parents would require monitoring efforts from the family members. Furthermore, some migrants experience that it is impossible to receive emotional support within the alternative institutional care options to family-based elderly care.

Although arranging the elderly care of the parents is not a timely issue for the Chinese only-child migrants interviewed for this study, the migrants worry about it. The migrants may even be afraid to think about the future and avoid discussing the topic with their parents. Although the migrants respect and value the filial traditions and see elderly care as their duty, they wish for societal and policy changes. Therefore, on the one hand, the migrants value filial piety, but on the other hand, they reconfigure the caregiving logics related to filial norms. Changes in Chinese society and Finnish migration policies would allow the migrants to plan the future and better fit their caregiving responsibilities and personal life together. These results are in line with Tu's (2018) findings: The key elements of Chinese families and intergenerational responsibilities are not changing. However, the transnational families and their caregiving responsibilities develop and reconfigure in the context of modernization and globalization. (Tu, 2018, pp. 159–160.)

In terms of social policy, the results of this study suggest that national policy and legislation do not consider the needs of transnational families well. Although old-age migration is not economically profitable, policymakers in Finland should consider adding a family reunification of the parents or a family sponsorship-type residence permit for humane reasons. Furthermore, although the children traditionally have the primary elderly care duties in China, the Chinese government should offer better support for the elderly parents of the only-child generation. Policymakers in China are demanded to establish more quality elderly care services as alternatives for entirely family-based elderly care. However, as argued earlier, a national healthcare system for the Chinese elderly is expected to be established by 2022 (National Health Commission of the People's Republic of China, 2019). It may provide a solution to the dilemma. However,

lessening the stigma associated with institutional elderly care in China may be an additional issue needing to be tackled.

Without policy changes or societal solutions to the dilemma of arranging elderly care for the parents, the Chinese only-child migrants living in Finland are required to make difficult decisions. From the theoretical perspective of this study, these decisions are likely to be made within the framework of capacity, obligation, and negotiated commitment by Baldassar et al. (2007). Various macro, meso, and micro-level factors influence the capacity of the migrants to arrange the elderly care of their parents. However, the sense of obligation encourages the migrants to spend the needed resources and manage any possible risks related to the elderly care duties toward their parents. Finally, the negotiated commitment, the family relationships between the migrants and their parents, facilitate the arrangements of the elderly care. (Baldassar et al., 2007, pp. 207–213.)

Overall, what seems to be particular to the Chinese only-child migrants living in Finland compared to their counterparts in many other countries is the consequences of the strict Finnish migration policy. The migrants cannot bring their parents to Finland, and therefore the possibilities to arrange the elderly care of their parents are very limited. Although the migration of the parents to the new country of their children is not an easy process in any country, nor are the parents necessarily willing to migrate, it is still devastating and frustrating for the participants not to even have this option available. Fulfilling the filial elderly care obligations requires additional sacrifices from the Chinese migrants living in Finland compared to the Chinese migrants living in many other countries. Thus, the only-child migrants in Finland face a heavy burden with the elderly care dilemma.

Generally, this thesis further contributes to the general social-scientific knowledge of Chinese migrants living in Finland. The caregiving and elderly care obligations are a significant matter in the lives of Chinese migrants. As the migrants and their parents get older and require more care, the elderly care matter will be even more significant in the lives of the migrants than it is now. The effects of the elderly care dilemma on the migrants should be better considered within social policy. Whereas local family caregivers in Finland may be entitled to financial benefits, leave, and services (Ministry of Social Affairs and Health, 2021), transnational caregivers do not have similar rights. Furthermore, the elderly care dilemma may also impact the labor market. As the migrants may need to return to China for extended periods, they consequently might have to ask for longer leaves or even quit their jobs.

A significant limitation of this study is not interviewing the parents of the Chinese migrants about their views on caregiving. Previous studies suggest that the views of the only-child migrants and their parents on caregiving expectations may differ. As overviewed earlier, Tu (2018, pp. 159–160) argues that Chinese migrants and their parents reconfigure the reciprocity unevenly, with more children than parents opposing

the idea of paid care service. Therefore, there is a possibility that the Chinese migrants in Finland could also value filial obligations more than their parents in China. It could also be possible that the parents of the migrants could have reconfigured the reciprocity of caregiving. However, this question does not fit in the scope of this master's thesis.

What comes to researching transnational families, it would be appropriate to investigate transnational caregiving by including all the members of the transnational families in this study, not only the Finland-based family members – the children. This would be extremely important because it is impossible to investigate the experiences and expectations of the parents by interviewing their children. Furthermore, the migrant and non-migrant members of the transnational families should be treated equally in the research process. Thus, studies like this could be further expanded and improved by including the first-hand experiences of the parents of the migrants in the study. However, that was not possible due to the limited characteristics of a master's thesis. Interviewing people in multiple countries requires language skills and monetary and time resources or good online connections and comfortable online environments.

Furthermore, it is notable that all the migrants whose experiences were studied in this thesis represent a relatively specific group. The participants were highly educated and came from middle-class backgrounds. Although the backgrounds of the participants represent the backgrounds of the new Chinese migrants well, their experiences may not apply to all Chinese migrants living in Finland. Although all the participants provided care or would provide care to their parents if needed, there could be other Chinese migrants living in Finland who do not. Therefore, again, the results of this thesis should be interpreted with reservation.

Regarding future research on transnational families and caregiving practices, Chinese one-child transnational families are an intriguing subject of study. It would be fascinating to research the elderly care arrangements of the one-child transnational families when it is a current issue, perhaps a decade or two later. It would be interesting to study again to see what kind of solutions were created, possibly in Chinese society or even within the Finnish migration legislation, how the migrants decided to organize the elderly care of their parents, and how did the elderly care dilemma impact the social policies and labor markets in Finland and in China.

Similar caregiving and elderly care concerns may also apply to translocal only-child caregivers who have migrated within China and to only-child migrants from other countries with cultural traditions of elderly care being the responsibility of the children. Their experiences would further be interesting subjects of study. Furthermore, as the one-child policy was transformed into the two-child policy in 2016, it would be interesting to study whether the transnational caregiving experiences of the Chinese transnational “two-child” migrants differ from the experiences of the transnational only-child migrants. Could having a sibling change the caregiving obligations and practices?

It would also be interesting to research what type of future innovations or technologies may again revolutionize transnational caregiving, as the cheap aviation and communication technologies did relatively recently. It would also be fascinating to research if the COVID-19 pandemic had any long-term effects on transnational caregiving and transnational family arrangements. Could the immobility regime caused by the pandemic affect the migrants' decisions of possibly returning to the home country, like it did in the case of one participant of this study?

Overall, the uniqueness of the generation of Chinese only-children can arouse interest in migration research and social-scientific studies. As argued earlier, the generational differences between the only-children and their parents are massive. Therefore, it would be intriguing to study further the differences between the experiences of these generations regarding migration, caregiving, or other social-scientific areas of research. Additionally, it would be interesting to compare the experiences of the only-child generation to people of similar age from different national and cultural backgrounds, again regarding migration, caregiving, or other social-scientific areas of research.

Finally, as argued earlier, despite the Chinese being one of the largest foreign nationals in Finland, the Chinese migrants living in Finland are an understudied migrant group. Therefore, there is a growing need for more comprehensive social-scientific studies on the Chinese migrants in Finland. Finnish social-scientific studies on China and China-related matters are also generally limited. As the importance of China as a world power and the Chinese influence in Finland are growing, there is a demand for a better understanding of Chinese society, its policy changes, and the Chinese political and diplomatic actions. Therefore, it would be essential to conduct more studies on China from the Finnish perspective.

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## Appendices

### Appendix I: Interview Questions

#### 1 Experiences of migration

- When and why did you move to Finland? When and why did you decide to stay in Finland?
- How did your family, especially your parents, react to your decision to migrate to Finland?

#### 2 Keeping in touch with family members in China

- Who belongs to your family? Who of these family members live in Finland, and who in China?
- How and how often do you keep in touch with your family members?
- How has migration or being absent and at a distance from your parents affected your relationship with your parents?
- How often do you visit China? What is the purpose of your visits to China?
- Where do you accommodate when visiting China? If you accommodate with your parents, how do you experience living together at these times?
- How often do your parents visit Finland? What is the purpose of their visits to Finland?
- Where do your parents accommodate when visiting Finland? If they accommodate with you, how do you experience living together at these times?

#### 3 Practices of caregiving and mutual support

By caregiving and mutual support, I mean all kinds of caregiving and support provided within family members, not only elderly care. For example, emotional support, financial support, or help in practical matters such as cooking or cleaning.

- How do you and your family members support or provide care to each other?
  - What type of caregiving (for example, financial support, emotional support, practical help)?
  - How (from a distance and/or during visits)?
- How do you experience providing care from a distance?
- How important do you consider your visits to China or your parents' visits to Finland for exchanging care?
- In your opinion, whose obligation is it to provide care to your parents?
- Do any other people, such as other family members, provide care to your parents?
- What are the differences between the care provided by the other people and the care you provide?
- How do your parents support you? How have they supported you earlier?

- Have there been any specific situations where caregiving was especially important or needed? Could you describe the situation?
- Are there any barriers that affect the caregiving practices between family members? (Such as visa requirements, family stage and history, job requirements, the quality of relationships between family members, et cetera.)
- If you have children, what type of roles do your parents have in caring for their grandchild/grandchildren? How and how often do your parents help you with childcare?

#### 4 Practices of elderly care

- Do you think the ways you provide care to your parents will change in the future? How?
- What type of elderly care options are available for your parents when they require daily or frequent old-age assistance?
- What kind of elderly care arrangements do your parents expect?
- Who decides on your parents' elderly care arrangements?
- Have you ever considered returning to China because of elderly care matters? Why or why not?
  - What would be the pros and cons for moving back to China for caregiving,
    - Regarding your career
    - Regarding your children (if you have children)
    - Regarding your social life
  - How do you think your parents would feel about you returning?
- Have your parents ever considered moving to Finland?
- In general, how do you think the family-based Chinese caregiving practices or children's expectations of caring for their elderly parents are going to change in the future? How should the practices or expectations change?
- What are your thoughts about the Finnish institutional elderly care system in general (positive and negative aspects), if you are familiar with it? How would you improve it?

#### 5 Identity

- Where is your home?

#### 6 Background information

- How old are you?
- How old are your parents?
- What is your citizenship?

- Where is your hometown in China?
  - Is it in a rural or urban area?
  - What is the approximate population size?
- How would you describe your and your parents' income classes? (E.g., middle-class, lower-class, or upper-class)
- What is the highest educational degree you have attained?
- What kind of work do you do now? Could you work in a similar position in other countries? How about in China?
  
- Anything else you would like to say?
- How did you feel about this interview? Any feedback?

## Appendix II: Translated Citations in Original Languages

<sup>1</sup>Miten nyt sanotaan, elikkä ei ole oikeasti mulle tarjotaan... Ei ole että minä tarvisin mitään tukea mun isän puolelta. Elikkä siis nyt tilanne on se, että mun pitää auttaa mun isää, kun hän on sairastunut ja hän nyt asuu yksin kun äiti ei ole enää elossa enää. Mä oon tosissaan huolissaan hänen puolesta, kun mä asun niin kaukana. Mä asun täällä ja hän asuu siellä yksin.

<sup>2</sup>我母亲现在住在中国，然后她住的小区有非常完善的社区管理的管理。然后也有一些社区社工小区的服务。[- -] 然后呢，社区会定期举办一些节日的活动，然后她可以去那里过节。跟别的老人在一起庆祝过节。

<sup>3</sup>On tosi kiva olla heidän [haastateltavan vanhempien] lähellä, elikkä se ei ole sama kun mä olen Suomessa ja he ovat siellä [Kiinassa], vaikka joka viikko soitellaan. Se on vähän erilaista kun on ihan vieressä. Se tunne on ihan erilaista. [- -] Elikkä kun istuu sun vieressä, se on tosi erilaista kun soitellaan puhelimesta. Niin, niin. Se tunne on ihan vieressä, sydämen lähellä. Sellainen tunne.

<sup>4</sup>就是我回国还是我妈妈过来芬兰看我们，这方面的关怀和照顾我觉得是非常重要的。因为虽然我们可以每天视频，可是呢，不代表我们通过视频更好地融入我们之间的生活。然后呢，有一些生活上面的细节的处理。如果她在芬兰的时候或者我在国内的时候我们就能更直观地看待我们遇到的问题，然后让我们解决我们自己的关系，或者互相照顾的时候，比较方便。尤其人文关怀方面如果我们隔着就是我们通过社交媒体进行沟通的话会缺少一点温度。

<sup>5</sup>就是 [受访者的母亲在芬兰的时候] 那段时间我们都过得很快乐，因为我觉得我不用通过视频，我也能每天都能见到我的母亲。而且呢，她在那段时间呢，我能可以带她去我们居住附近的地方，了解一下我们在芬兰的生活的情况。然后让她更放心一点。

<sup>6</sup>No, kyllä se [Kiinassa vieraileminen] on todella tärkeää. [- -] Eli mun mielestä se on tosi tärkeää, että lapsi on siellä vieressä, ei koko ajan, mutta pitäisi olla joskus siellä vieressä. Joo. Se on tärkeää mun mielestä.

<sup>7</sup>我呢，我在回国的时候会经常给她做一些好吃的给她，让感受一下我对她的关心。然后呢，由于她不擅长做家务，然后一般情况，正常情况下，我会帮她打扫家里的卫生。然后呢，我也打算下一次回国的时候，我就会买那种带有吸尘和拖地功能的机器人给她。希望她能有更多的时间在自己兴趣爱好和治疗活动上。

<sup>8</sup>Vaikka soitellaan joka viikko, mutta sitten kun hän [haastateltavan isä] tarvisi jotain apua, esimerkiksi... Elikkä... Koska hänellä on toi sairaus, jos tulee jotain-, jotain ongelmaa sairaalassa, kun hän käy sairaalassa, välillä voi olla ongelma... Mä haluaisin auttaa, mutta mä en voi auttaa, kun mä oon täällä Suomessa. Mitä mä voisin tehdä? Mä soitan, ei auta mitään. Niin, niin... Vähän vaikeaa antaa toiselle tukea, antaa hänelle tukea.

<sup>9</sup>我最怕的就是我母亲生病的问题，这是因为她的身体不是很好，然后，她也曾经有过生病住院的经历。所以呢，如果她在国内一个人生活的时候，我就特别担心她生病了。如果她病了，就没人带她去看病。

<sup>10</sup>然后呢，就是问题就是她[参加者的母亲]每次来芬兰都只能逗留三个月，又要回国。由于时间比较段。然后对老人而言，就是，她来到芬兰她的生活环境一下子变化了，有突变了。然后，加上旅途的劳累，然后还有时差的问题。有可能有一些老人三个月内他们的身体没办法适应的。然后在他们没办法完全适应的情况下他们又回国了。这样呢，对部分老人而

言，旅途会比较辛苦一点。其实我母亲的身体状况，就是除非我们有特殊的情况想要她过来芬兰。我觉得现阶段我还是增加回国的次数，在国内多陪她。暂时不考虑让她过来芬兰。

<sup>11</sup>*Kun mun isä sairastui kolme vuotta sitten-, hän ei pysty tulemaan [Suomeen] nyt. Olin ajatellut silloin neljä vuotta sitten, viisi vuotta sitten. Mun isäkin sanoi, että joskus mä tuun Suomeen-, Suomeen käymään. Mutta sitten kun hän sairastui, niin sitten ei voi [tulla Suomeen].*

<sup>12</sup> 据我所知，中国有两部法律对子孙对祖父母的赡养义务有详细的说明，一部是《婚姻法》，另一部是《老年人权益保障法》。假如不考虑法律的约束，在我的心里，能让母亲过上幸福美满的老年生活，依然是我应尽的责任。从生物学而言，没有我的母亲，我就不存在了；从感情上而言，母亲给予了我一个温暖稳定舒适的童年生活环境。我希望在母亲的老年生活中，我也能像她以前照顾我那样，给予母亲足够的支持和情感关怀。

<sup>13</sup>*Juu kyllä on, [hoiva, jota haastateltava tarjoaa] on erilaista mun mielestä. [– –] Koska vaikka [haastateltavan isällä] on sisaruksia, eli heillä on oma elämä ja oma lapsi ja oma lapsenlapsi, he eivät voi koko ajan pitää huolta isästani. Se on vähän erilaista mun mielestä. [– –] Koska olen kiinalainen, lapsena jo opetettiin, että tää [vanhainhoivan tarjoaminen vanhemmille] on teidän vastuulla. [Naurua.]*

<sup>14</sup> 就是她非常希望我能回国，因为她觉得有孩子陪伴对她来说，就是她会更安心，老年过得更快乐。可是呢，我是一个，我是一个很爱独立自主的人。[– –] 然后呢，我也可以在这里 [在芬兰] 做很多我想做的事情。这是我在中国的时候比较难达到的。

<sup>15</sup>*Ei oikeasti [maahanmuutto vaikuta haastateltavan ja vanhempiensa suhteeseen], ei mitään. Eli kun mä olin Kiinassa, silloin mä olin... Silloin mä asuin toisessa kaupungissa Etelä-Kiinassa monta vuotta ja kun mä olin 20-vuotias ja lähdin kodista opiskelemaan elikkä yliopisto-opiskelemaan. Eli vanhemmat oli jo tottunut siihen, että mä en ole siellä kotona. [Naurua.] Ei oikeasti vaikuta mitään Suomeen tuleminen.*

<sup>16</sup>*Jos hän [haastateltavan isä] joku päivä tarvii, sitten elikkä asun hänen kanssa, vaikka ei kotikaupungissa, mutta meillä on asunto siellä toisessa kaupungissa. Hän voi tulla meidän mukaan asumaan sinne. Jos vaikka mä käyn töissä, voisi joku henkilöavustaja-, mä voisin maksaa joku henkilöavustajalle. [– –] Mutta jos pitäisi käydä työssä itse ja joku pitää vielä huolta isästä, ehkä tää on se hyvä vaihtoehto. Joku henkilöavustaja on kotona hänen kanssa ja mä käyn työssä. Mutta illalla voisi viettää aikaa yhdessä ja tämmöistä. Ja on kuitenkin lähellä.*

<sup>17</sup>*Se, [Kiinaan palaaminen], on todella iso asia mulle. Koska mulla on kuitenkin oma elämä Suomessa, mulla on työpaikka täällä ja mieskin on täällä, ja ehkä joskus mäkin haluan lapsia. Sitten on ihan oma elämä tässä, se on tosi iso asia meille. Mutta joskus vaan pitää, ei vain ajatella itseä, että ajatella isää. [– –] On varmaan, on tosi iso asia ja vaikea päättää.*

<sup>18</sup>*Joo siis, alussa olin ajatellut, että jos isä voisi muuttaa Suomeen asumaan. Mutta, todennäköisesti isä... Se ei ole-, se ei ole niin helppoa, se on tosi vaikeaa. Koska Suomessa isä ja äiti ei ole perheenjäsen. Mies ja lapsi on perheenjäsen. Sitten ei saa viisumia... Saa viisumia, mutta vain kolme kuukautta, täällä tulee käymään ja sitten pitää poistua Suomesta. [– –] Toivottavasti joku päivä tää sääntö muuttuu.*

<sup>19</sup> 我还要考虑一下我怎样平衡我在芬兰的生活和我要照顾我国内的母亲。[– –] 不过这个问题呢是我现阶段最害怕考虑的问题。[– –] 还没想到怎样去改变。

<sup>20</sup>*Mä luulen, että pitäisi tulla tästä jotain muutos. Kyllä tää vanhustenhoito on lasten vastuu, mutta-, mutta hallitus tai yhteiskunta pitää ottaa tästä osa. Ei kaikki, vaikka osa pitää. Rakennetaan*

*vanhainkotia tai varsinkin kotihoito on tosi hyvä. Eli vanhukset voi asua vaikka lasten kanssa, mutta kotihoito tulee käymään vaikka joka päivä.*

<sup>21</sup>*Toivon, että joku päivä Suomessa tulee jotain muutosta viisumista. Elikkä, eli jos on tää esimerkki, mulla on nyt todella vaikea tilanne, eli ei tiedä, mitä vois tehdä. Koska isä ei voi muuttaa tänne Suomeen asumaan meidän kanssa, sitten on pakko tehdä jotain. Pitää tehdä jotain päätöstä tästä tulevaisuudessa, asuuko täällä vai muuttaako sitten Kiinaan. Toivottavasti joku päivä tästä tulee jotain muutos. Jos joku näkee sun toi opinnäytetyö, sitten tietää, mikä meidän tilanne on, sitten voi ymmärtää.*