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Negotiating the Challenges of Ageing as a British Migrant in Spain

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Abstract

There has been a proliferation of research on lifestyle migration, including studies of older people who move from Northern to Southern European countries in retirement. This body of research has generally focused on 'third age' retirees who exercise mobility to improve their quality of life and to achieve optimal ageing, and these healthy and active migrants are yet to face the challenges associated with the fourth age. In this paper we focus on how retirees in both the third and fourth ages of life experience and exercise mobility and how some experience the transition from 'young old' to 'old old' age in Spain. Whilst the third age is characterised by new opportunities and activities, the fourth age is a time of decreasing mobility, dependence and bodily decline. We bring together narrative interview data from two separate studies undertaken with older British people in Spain to examine three main issues: first we uniquely unravel how the experiences and identities of retired migrants change in response to the ageing body; second, we explore the strategies deployed by retired migrants to manage the fourth age; and third, we explicate how lifestyle migration as a theoretical category captures the experiences of migrants in their fourth age. This paper therefore presents an original contribution to knowledge by exploring how lifestyle migrants transition from the third to the fourth age, in particular how they negotiate bodily decline and decreasing mobility. We indicate that ageing represents an important structural context that both enables and restricts opportunities and experiences of mobility.

Keywords: Third and fourth Age; retirement/lifestyle migration; Spain; structural narrative analysis

Introduction

British retirement migration to Spanish coastal resorts (costas) has been well documented (see Ahmed 2011; 2012; 2015a; Hall, 2011; Hall and Hardill, 2014; Oliver, 2008; O'Reilly, 2000; 2003; 2007) and is in part attributed to enabling upper structural forces (O'Reilly, 2012) such as globalisation, economic growth, EU enlargement post the 1992 Maastricht Treaty (Huete and Mantecon, 2012; Janoshka, 2011; Warnes, Friedrich, Kellaher & Torres, 2004), and more proximate structural layers like speculative housing development, established tourist infrastructures and transport links (O'Reilly, 2012). No longer limited to an elite group (Ahmed, 2015a; Huete & Mantecon, 2012), retirement migration to Spain escalated dramatically during the late 20th and early 21st centuries as a result of early retirement¹ and longer life expectancy, changing aspirations, increased affluence and mobility among the older population alongside positive constructions of early old age (Casado Diaz, 2006; King, Warnes & Williams, 1998; Rodriguez et al., 1998; Warnes et al., 2004). Retired British people move to Spain to enjoy the Mediterranean climate, available amenities, relaxed pace of life, lower cost of living and the fact that English is widely spoken (see Ahmed, 2015a; Huete and Mantecon, 2012; King et al., 1998; King, Warnes & Williams, 2000; O'Reilly, 2003; Rodriguez, Fernandez-Mayoralas, & Rojo, 1998). Also, importantly, to experience a 'better life' in retirement, which can be understood as pursuing optimal – or positive (Oliver, 2008) - ageing. Further, the idea of moving to the seaside is imbued with symbolism and presented in terms of being able to achieve a 'golden old age' (Blaikie, 1999) in retirement. Retirement therefore no longer represents "a symbolic retreat into old age and social exclusion [rather] ...the beginning of thirty years of a new and rather different kind of life" (Hockey & James, 2003: 6).

Such movement of older people from one country to another has previously been conceptualised as 'International Retirement Migration' (King et al., 2000), 'Residential Tourism' (O'Reilly, 2000), and 'Lifestyle Migration' (Benson & O'Reilly, 2009), and retired British people living in Spain form a nebulous population and are often difficult to categorise

¹ However, early retirement is now no longer possible for future cohorts of retirees in the UK due to expectations of longer working patterns

and many are undocumented as they do not register with Spanish authorities². Further, this form of movement across borders has also been noted as a particularly fluid form of migration, involving complex mobility patterns (Huber & O'Reilly 2004; Warnes et al., 1999). 'Lifestyle migration' has been presented as a quest (Benson, 2011) for a better life which is premised on a number of related factors, including people's unique biographies and agency – that is their capacity to act in a given context - enabling structural and temporal contexts and culturally significant imaginings (Benson & Osbaldiston, 2014).

Previous research on older people's migration, and the conceptual application of lifestyle migration, has centred on 'young old' or third age retirees – that is those who are aged 60-75 - who move to another country in retirement for a better lifestyle. Importantly, the experiences of 'old old' or 'fourth age' migrants – those aged over 75 - are under-researched. In this paper, we make an original contribution by exploring how retirees in both the third and fourth ages of life experience and exercise mobility and in particular how some transition from 'young old' to 'old old' age in Spain. We use a narrative analytical approach to illuminate the lived experiences of migration in retirement, and bring together qualitative data from two separate studies undertaken with older British people in Spain. The paper has three aims: first we examine how the experiences and identities of retired migrants change in response to the ageing body; second, we explore the strategies deployed by retired migrants to manage the fourth age; third, we explicate how lifestyle migration as a theoretical category captures the experiences of migrants in their fourth age. Central to our discussion is how the third age is characterised by new opportunities and experiences while the fourth age represents a time of dependence, bodily decline and decreasing mobility. Baltes (1997), coined the term 'the fourth age' to describe advanced old age and refers to the 'negative biological trajectory of the life course' (1997: 368), highlighting the occurrence of dramatic age related losses (cognitive, physical and psychological) as people move from the third to the fourth age. Further, a distinction is often made between those older migrants who migrate early in life and 'age in place' in the destination country, and those who migrate in retirement (Ahmed, 2015b; Warnes, et al.,

² If EU migrants stay in Spain for over six months they should apply for *Tarjeta de Residencia*, a residential permit

2004). In this paper we present a new differentiation; some of the retirees featured here migrated in the third age, but have aged in place in the fourth age.

The paper is presented in the following way: first we explicate our theoretical and conceptual positions in relation to ageing and mobility and then introduce the studies, the methodology and our narrative analytical approach to gaining knowledge of how retired migrants present their age-related identities. Using data from our narrative interviews, we then outline how retirement enables new opportunities and experiences of mobility in the third age and then explore experiences of transition from the third to fourth age. We contemplate how older migrants negotiate bodily decline and decreasing mobility. We conclude by considering the conceptual and theoretical usefulness of lifestyle migration to explain experiences of migrants in the fourth age.

Ageing and mobility

Traditionally, social gerontology and migration theory have focused on minority ethnic groups and social and economic disadvantage, but more recently migration scholars have focused on the experiences of relatively affluent migrants from the UK in relation to positive constructions of old age and increased freedom (King, Warnes & Williams, 2000; Oliver, 2008). Lifestyle migration (Benson & O'Reilly, 2009) is now widely used by researchers across a range of disciplines to capture the movement of comparatively wealthy people across borders to improve their quality of life. Associated with individualism (see Beck, 1992; Benson, 2011; Giddens, 1991; Oliver, 2008; Oliver & O'Reilly, 2010; O'Reilly & Benson, 2009), lifestyle migration usefully brings together a multiplicity of inter-related elements including individual unique experiences and agency, enabling and constraining structural forces underpinning migration and culturally significant imaginings (Ahmed, 2015a; Benson & Osbaldiston, 2014). The lifestyle migration concept is relevant and useful therefore, since it captures the detail of people's pre-migration lives and how these shape post-migration practices in the destination country: in this way locating life after migration within the context of life before (O'Reilly & Benson, 2009).

The lifestyle migration of retirees can be linked to positive ageing theories which echo the premise underpinning classical activity theory, of how older people maintain independence and exercise agency in later life (Ahmed, 2015a; McDonald, 2011). Positive ageing tends to be associated with the third age which Warnes (1992) argues is a time during which new social and recreational activities can be pursued. The third age follows economic activity and provides an opportunity to develop a fulfilling lifestyle separate from the world of work (Bond & Corner, 2004; Laslett, 1991). As a result, the lifestyles of older people today are more likely to be characterised by individualisation, mobility, choice and flexibility (Beck & Beck-Gernsheim, 2002), which can involve taking frequent holidays abroad and/or international mobility, including international migration (Beck, 2000). Therefore, people in the third age with sufficient resources are still able to make conscious choices about where they want to live and the lifestyles they wish to pursue, with place of residence emerging as a central feature of this development (Phillipson, 2007).

A second set of theories to explain adjustments to ageing can be typified as ‘disengagement theories’, relating to how people withdraw from society as they age (McDonald, 2011; Rowe & Kahn 1997): this withdrawal often coincides with the onset of the fourth age. The third age is associated with ‘autonomy, choice and leisure’ (Higgs & Gilleard, 2015: 15), while ‘older old’ age has been reconceptualised as the fourth age, or ‘deep old age’ (Hockey & James (2003: 57) and is associated with ‘frailty’, a geriatric and gerontological term to describe older people who are in poor health. As such, “the fourth age ...remains an imagined state or position that is undesired by, and distasteful to all of those subject to its pull” (Higgs & Gilleard, 2015: 15). The third and fourth ages are usually understood to be chronological, and to represent boundaries and different life stages (Higgs & Gilleard, 2015).

Since the third and fourth age represent different life course junctures or phases, it is useful to draw on Trundle’s (2009) research on ‘Anglo’³ women’s migration to Florence in Italy for our analysis. Trundle identifies three life stages: young ‘romantic tourists’; being married with children; and third age migrants. The central premise of her analysis is whether ‘lifestyle’ remained a feature of each phase of her respondents’ mobile trajectories, and

³ English speaking migrants who moved to Florence as young women and aged in place

therefore, if the lifestyle migration category applies to the different stages of their lives. For our respondents, strong links can be made between the third age and the mobile practices of lifestyle migrants who move to search for new adventures and social experiences. However, as we will highlight, in the fourth age mobility becomes more limited, and this too allows us to consider whether and how the lifestyle migration category captures the experiences of this cohort.

The studies

The paper draws on two qualitative studies undertaken separately by the authors over a seven year period (2001-2007). The studies explored the experiences of older British people living in Spain, with Ahmed's research focusing on those in the third age and Hall's research on those in the fourth age (some of whom migrated in the fourth age, although the majority had moved in the third age and aged in place). Both studies originally adopted a narrative approach using in-depth interviews to understand the individual and collective life stories of participants as ageing individuals and members of a community. The 42 interviews explored respondents' lived experiences of migrating to Spain in retirement, focusing on belonging, community and values and relationships, across the third and fourth ages. A further important common feature of Ahmed and Hall's studies includes a consideration of how people present their identities through their narratives (Dingwall & Murphy 2003; Lawler 2002).

Ahmed's study (see Ahmed, 2011; 2012; 2013; 2015a) included 17 interviewees all of whom were with women who were interviewed individually (average age 61.4). All of the women in Ahmed's study had lived in Spain for less than five years with 13 moving to Spain one or two years prior to the interview. None of Ahmed's interviewees had worked in Spain and they had all moved to Spain in their late 50s or early 60s except two, one moving at 82 and another at 75. They all lived independently. Hall's research (see Hall, 2011; Hall and Hardill, 2014) included 25 interviewees (sixteen women and nine men). Six interviewees were married and five of these were interviewed together as a couple. Their average age was 78.25 and all were considered to be vulnerable, primarily as a result of a serious decline in

health. Most of Hall's interviewees (22) had lived in Spain for more than five years with 12 living in Spain for more than 15 years. Three of Hall's interviewees had worked in Spain and the remainder had moved after retirement when they were in their early to mid-60s, except five who moved in their late 70s or early 80s. Three interviewees had moved to Spain in their fourth age to live with or close to their daughter and the others had moved in their third age. Eighteen of Hall's interviewees were considered to be in their fourth age, although all were considered to be vulnerable as a result of a decline in health or financial difficulties. One interviewee was living in a nursing home, three were living with or very close to their daughter in Spain and the remaining interviewees were living independently. The interviews were carried out by each of the authors respectively. In order to unravel the experiences of migrants in both stages of later life these two studies were analysed collectively. Both studies were undertaken in the Coastal regions of Spain; the Costa Blanca (n=28), the Costa del Sol (n=8) and Mallorca (n=6). Most of our interviewees lived in Spain permanently (n=37) with the remaining 5 living in Spain part time (9 months or less). Twenty-two were married, eleven were widowed, six were divorced, one was single and two were co-habiting (in a sex-same relationship) and were both interviewed separately. Only nine interviewees were male which represents the fact that many respondents were mostly recruited through voluntary services with which women are more likely to engage (as previously indicated by Dwyer and Hardill, 2008), and the fact that Ahmed's study focused specifically on the experiences of women. We recognise that the study therefore focuses more on the experiences of retired women, which are still relatively under-researched in the migration literature (Ahmed, 2015a).

When reviewing the two studies collectively, the number of years lived in Spain ranged from one to 34 years and therefore captures those who undertook a recent move to Spain, as well as those who have 'aged in place'. All except two interviewees lived on urbanisations (purpose built tourist and residential complexes where many residents are British). The ages of our respondents ranged from 51 to 93 and the average age of all the interviewees was 71.5 years. The fourth age is commonly linked to those over the age of 75 (e.g. Hockey & James, 2003), and of our respondents, fifteen respondents were over the age of 75, of whom 10 were over the age of 80. However, in reality, mapping chronological ages onto these phases is somewhat problematic since the onset of dependence and decline

associated with the fourth age is much more fluid. Indeed, some of our respondents in their 80s and even 90s were very independent and enjoyed a good quality of life, whilst others in their early 70s or even 60s were very frail as a result of a decline in health. We therefore consider the fourth age to represent a time of dependence characterised by living with one or more ailments which negatively impacts on quality of life; rather than a specific age point. Many of our older respondents were physically immobile and were housebound and were accessed through voluntary organisations supporting older British people in Spain. The interviewer went to their home or the nursing home to undertake the interview.

We acknowledge that as retired *migrants*, the study participants are not necessarily representative of all retired people in the UK. Although they could be understood to be part of the 'Baby Boomer' generation, - which is often characterised by having greater affluence, more opportunities and better health in older age than previous generations (Ahmed, 2015a; Phillipson Leach, Money & Biggs, 2008)- the majority would not be described as being particularly 'wealthy'. Many respondents were reliant on state pensions, yet, they had sufficient financial resources to allow them to migrate, often through the sale of their home in the UK. The research was carried out to the standards set in the ESRC's Research Ethics Framework and the British Sociological Society's Statement on Ethical Practice. In accordance with these guidelines, the research was conducted with the welfare of participants in mind, and both studies had received ethical approval through the host university. Pseudonyms are used to protect the identity of all individuals, and their exact location in Spain.

Unravelling Third and Fourth Age experiences through narrative analysis

Personal and public narratives of ageing interact to shape individual and collective identities of older people (Hubble & Tew, 2013). However, there is no agreement of what narrative 'is', or how narratives should be analysed (Ahmed, 2013; 2015a). We construe narratives as recorded, transcribed stories, which require interpretation, and our interpretivist epistemological positions represent narratives as subjective and contextual (Ahmed, 2013; 2015a). Here we present both a thematic and structural narrative (re) analysis of migrants'

accounts. First, the transcribed interviews from both studies were re-analysed using thematic analysis through the development of a coding framework based on both the theoretical interests guiding the aims of this paper centring on mobility, ageing and identity (Attride-Stirling 2001). Second, our structural narrative approach involved analytical bracketing (see for example; Ahmed, 2013; 2015a; Doucet & Mauthner, 2008; Gee, 1985; Goffman, 1975; Labov & Waletzky, 1967; Riessman, 1993) - that is, paying attention to one particular aspect of narrative practice while suspending an interest in others (Ahmed, 2015; 2015a; Gubrium and Holstein, 1998). We focus on 'positioning' (Ahmed, 2015a; 2015b; Somers, 1994), or how narrators establish their identity through narrating. Another way of describing positioning is as how narrators want to be known by the stories they tell (Riessman, 2000), how they establish subject positions (Day Sclater, 1998), or narrative footing (Gubrium & Holstein, 1998).

Here we focus on narrative identity in relation to the third and fourth ages regarding how mobility and being a migrant is experienced across these age cohorts and how biographical ageing impacts on mobility. As such, we present age as a social location or social identity. In so doing we are relating biographical and subjective experiences to wider social processes, or linking the micro to the macro. A thematic and structural narrative approach centring on the use of positioning (Anthias, 2002; 2006) provides linkage to and ethnographic understanding (Gubrium & Holstein, 1998) of the structural and material circumstances of older migrants' lives.

Undertaking a secondary or supplementary analysis of qualitative data has become a widely recognised methodology involving an in-depth examination of a theme or subset of prior interview data for the purpose of extending the primary work (Corti, Witzel & Bishop, 2005; Thorne, 1994). Secondary narrative analysis (Elliot, Edwards, Phoenix & Boddy, 2015; Heaton, 2008) is often undertaken on archived data to re-investigate key themes within a contemporary paradigm. We are instead using it to re-analyse narrative interview data collected by the authors to offer crucial new perspectives within the contemporary conceptual lens of lifestyle migration. Whilst the initial analysis of the interviews originally identified key themes around experiences of migration and mobility in the third and fourth age, this re-analysis offers not only a comparison of British migrants in the third and fourth

ages, but enables us to develop a theoretical understanding of lifestyle migration and its applicability to fourth age migrants. Therefore, through a process of re-analysis, we are providing alternative understandings to our interview data. However, as Riessman (2004: 321) argues, the issue is not whether subsequent analysis of data is truer, rather, reinterpretation “illuminates a layered complexity...there is never a single authorised meaning” (cited in Montgomery, Mossey, Bailey & Forchuk, 2011: 2).

Retirement migration: new opportunities and optimal ageing

As we highlighted above, retirement represents a particular structural context enabling and facilitating mobility. Retirement migration also intersects with other, age-related – or demographic - contexts: our respondents can be understood to belong to the ‘baby boomer’ generation who had increased opportunities, affluence, capital gains from owner-occupation, and many were able to take early retirement (Ahmed, 2015a). Significantly too, baby boomers were the first generation to experience mass tourism and experience foreign holidays. Retirement represents new opportunities, yet is shaped from an age-related vantage point within the context of positive ageing discussed earlier (Nilsson, 2013; Oliver, 2008). For our interviewees who moved to Spain in the third age, migration presented an opportunity to develop a fulfilling lifestyle and undertake a new ‘adventure’ away from both paid and unpaid work. The following excerpt from Cynthia’s narrative illuminates this:

We always said we’d move abroad when we retired, we’d worked hard all our lives... We’d brought up our children, looked after the grandchildren when they were little, so we thought, right, it’s time for us now while we’re still fit (Cynthia, 54, married)

In this part of her narrative, Cynthia positions herself as deserving her new life in Spain: she and her husband had ‘worked hard’ throughout their lives, and had fulfilled their parental responsibilities. Through her use of ‘it’s time for us now’, she presents a justification for exercising individualism while they were ‘still fit’. Being in good health allowed Cynthia and her husband to pursue a new lifestyle in Spain. Retirees are not constrained by employment and so have greater freedom to choose when, where and how to move than migrants of

working age. For example, in the excerpts from Enid and Rachel's narratives below, they talk about how they 'trial' their life in Spain before making a decision to move there permanently:

So we thought we'd see if we liked it round here... give it a couple of years or so. If not we can move further inland or even somewhere totally different... I've always fancied Florida myself (Enid, 57, married)

Enid presents herself as being able to exercise choice and mobility. In this new phase of her life she and her husband have new opportunities and few restrictions. Rachel also positions herself as having agency and as able to take control of her life:

The reason I came was for this arthritis. So I have put myself on trial to see if I am any better here in Spain than I was in England because this arthritis was really bad [in the UK] (Rachel, 68, widowed)

In this way, retirement for those with sufficient resources facilitates flexible mobilities and the pursuit of optimal ageing. For Rachel, this involved delaying the onset of frailty and impairment, whilst for others, migration was an opportunity for adventure and the seeking out of new opportunities.

Being Mobile: The Third Age in Spain

Older British migrants who move to Spain in the third age enhance their quality of life through a combination of a more outdoor lifestyle, lower living costs and new social networks, often with people from similar backgrounds (Ahmed, 2015a). Retirees therefore tend to have active lives, spending their time participating in social events, making friends and building 'communities' (Ahmed, 2011; 2012; 2015a; O'Reilly, 2000). There are a plethora of social clubs and activities catering for the needs of British people, ranging from small activity groups where members undertake art, music, sport, dancing or other creative activities, to larger and more formal organisations such as the British Legion. For older migrants, social clubs and friendships with other British people are an integral part of daily life as explained by married couple Richard and Victoria:

You can see it in the papers, there are just pages and pages of clubs. I think if you have got a hobby you could do it here in Spain (Richard, 69)

We do Irish roll bowls, and we go to a slimming club on a Friday, all be it that it doesn't work very well. It's good anyway, it's got a social side to it. (Victoria, 67)

And then friends, social, always going out for dinner somewhere. Marvellous. (Richard, 69)

Richard and Victoria present themselves as being actively engaged in social life, able to exercise agency and enjoy a range of activities. For them, as for Enid and Rachel and Cynthia, this phase of their lives and their migration to Spain centres on lifestyle.

Similarly, in the following narrative excerpts retired migrants present themselves as active and able to exercise agency to enjoy 'the good life' in Spain. Being able to exercise mobility while in Spain is also an important feature of the lifestyle of retired migrants:

We go on day trips, for meals...I've even started glass painting (Myra, 62, divorced)

We go out a lot more here than we did in England...we're always planning days out, trips and what not (Agatha, 60, married)

We've been all over [this part of Spain], on coach trips and the like...There's a few ladies here on their own and we tend to go to places together (Margot, 60, divorced)

Myra, Agatha and Margot position themselves as active and able to enjoy new opportunities in their post migration lives. However, whilst British retirees are very socially active in Spain, they often live on the margins of Spanish society and tend to live in purpose built tourist and residential complexes, known as 'urbanisations' (which includes all except two of our interviewees) and as a result only mix with other British people. As such, they can experience geographical and cultural exclusion and have been accused of developing an 'enclave mentality' (Champion & King, 1993: 54). This includes the previously mentioned social clubs which are usually formed specifically for British people. Most of our interviewees spoke little or no Spanish and as such were unable to interact on any more than a superficial level with the Spanish community:

My problem is that I mix with too many English people... I suppose really, I should go to Spanish lessons but I don't really feel the need at the moment. (Rachel, 68, widowed)

The amount of time spent in Spain had little impact on levels of integration, with very few of the interviewees having Spanish friends or speaking a reasonable level of Spanish, even those who had lived in Spain for twenty years or more. Additionally, respondents in both studies regularly travelled back to the UK to visit family and friends and maintained social networks there.

From the third to the fourth age: Immobility and dependence

It is clear then, that for our interviewees who were in the third age of life and were psychologically and physically healthy, being in Spain offered an improved quality of life. Their mobility and freedom from work provided an opportunity to undertake new activities and make new friends in a new environment. This phase of life then can be understood to centre on lifestyle. However, some retirees worried about how they would manage their lives in Spain as they aged; being unable to speak Spanish, being unfamiliar with the health system and being away from the familiarity of the UK. As such, some of our interviewees had made the decision to return to the UK (discussed further below), whilst others made the decision to stay in Spain.

As they became older and frailer, migrants experienced the declining mobility and increasing dependence associated with the onset of the fourth age. This included physical immobility and also social isolation due to becoming unable to travel, attend clubs, or visit friends. Having access to a car symbolised independence, autonomy and enhanced quality of life (Davey, 2007; Gilhooly et al., 2003); losing the ability to drive (either because of their health problems or their partners) led to increased social isolation and a loss of freedom. Elsa spoke about the consequences of this:

We were out during the days too, for tapas and drinks and things like that and would go to the beach and different places in Spain in the car. I miss the car ever so much. (Elsa, 78, widowed)

Elsa places her experiences of 'the good life' in the past and lifestyle migration, which is associated with flexibility and ongoing mobility, can therefore be restricted by ageing. Cohen, Duncan & Thulemark (2015) have previously argued that mobility and lifestyle choices may be limited by certain forces, mechanisms and institutional arrangements that facilitate movement across borders and cultures, and we argue that for retired migrants, there can be additional structural constraints to mobility. Some of our older interviewees in the fourth age referred to their frustrations with bodily decline and frailty, in particular the immobility this brought:

When you are younger you can pack a bag and you can find a bolt hole just like that. But when you get to our age, the bolt holes are very few and far between, mainly because of your health and your age. (Roger, 81, married)

I think Spain is wonderful if you have got a spirit of adventure ... or are fit. When you are old and ailing it's not so good. (Ida, 79, divorced)

This loss of mobility led to migrants feeling tied to one place rather than being able to move back and forth between multiple destinations as associated with lifestyle migration. Fred and Felicity (a married couple) explain how Fred's health problems meant that they were no longer able to fly, and therefore unable to return to the UK to visit family and friends:

I had a bit of minor...heart attack and they said, they told me that I can't fly for a period (Fred, 86)

So we can't go home...I don't think he would be able to fly again with this heart. They won't let him (Felicity, 80)

Both Fred and Felicity present themselves as unable to exercise agency and autonomy in their fourth age. They refer to 'they' in relation to 'they told me I can't fly/they won't let him' suggesting that they are no longer able to be in control of their lives. Fred is more optimistic, saying he is prevented from flying 'for a period', while Felicity suggests that this restriction will permanently affect their transnational mobility.

Lifestyle considerations seem to recede in the fourth age and health becomes a primary preoccupation and limitation. This is indicative of Hockey and James' (2003: 135) argument that "in the process of age identification there is an ongoing tri-partite relationship between social environment, human agency and the body". For some of our respondents, immobility and feeling trapped was not always determined by a decline in their own health; the health of their partner could be a key influence on being able to exercise mobility. Caring for a spouse or partner significantly curtailed the lifestyles, social activities and interactions of some interviewees, as Wilma explained:

I have lost quite a few friends over this [caring for her husband], because I couldn't go out really and share lunch, because I had to stay in and look after him. (Wilma, 76, Widowed)

Wilma presents herself as a dutiful wife who had fulfilled her responsibilities towards her husband, but she paid a price; although she was now widowed so no longer caring for her husband, Wilma had not retrieved these friendships.

Coping with the death of a spouse or partner also had a considerable effect on some interviewees. Eleven of our interviewees were widowed and for most, their partner had died whilst they were living in Spain. Bereavement was a particularly difficult experience in Spain as most of our participants had no family close by to offer support. Loneliness was often experienced by those who were widowed, especially those who had also seen a decline in their own health. Many felt that their partner had been their main source of emotional and social support and bereavement led some British migrants to retreat from social clubs and networks leading to isolation as the following narrative excerpts illustrate:

Sometimes I might drop in [to restaurant/bar] for a coffee, I might have a full dinner sometimes. Not very often, I feel so you know, when I am down there I am on my own I might as well stay in my own home. (Elsa, 78, Widowed)

Elsa positions herself as feeling isolated and alone, even when in social spaces. Despite living in Spain for 18 years, she could speak little Spanish, had made few Spanish friends and many of her British friends had returned to the UK or were friends of her late husband and this

exacerbated her loneliness as she had few people to call on for help and support. For her, being 'alone' precluded her enjoyment of social activities and she felt inclined to stay at home.

The fourth age, as well as involving immobility and frailty, is also characterised by loss which shapes sociability and the ability to enjoy life in Spain. For Elsa, Sheila and Wilma being a widow restricted their lives and shaped their identities, and this restriction is perhaps compounded by being away from established social networks and the familiarity of the UK.

It is clear then, that mobility reduces with age and shapes how lifestyle preferences can be enacted and fulfilled. Immobility often leads to a loss of engagement with friends, social activities and the community in Spain, as well as with social networks in the UK. The mobility that characterises lifestyle migration in the third age becomes restricted in the fourth age and this in turn shapes how migrants present their identities as lifestyle migrants. Whilst some of our respondents decided to stay in Spain, others decided to return to the UK. Ten of our interviewees who had reached the fourth age, and four who were in the third age at the time of interview, intended to return to the UK to access healthcare, financial support or informal support from family. Evidence suggests that growing numbers of the baby boom generation of retired migrants are returning to the UK (Giner et al., 2015; Huete & Mantecon (2012) Heute et al., 2012). Our interviews support prior research (Ackers & Dwyer, 2004; Age Concern, 2007; Hall & Hardill, 2014; Warnes et al., 1999) indicating that return decisions are usually based on the need to access additional care or financial support in old age. As retired migrants often maintain strong links and base at least part (or all) of their identity on connections to the UK (Betty & Cahill, 1999; O'Reilly, 2000;), they may return to the UK at times of ill health or in a crisis especially to access care from family members. In the excerpts from their narratives of Deidre and Agnes below they position themselves as fearful about the future, and the onset of the fourth age and more comfortable with the prospect of navigating systems in their country of origin:

Thinking ahead we're worried about future health problems really... we know our way around things in England so this is partly why we're going back (Deidre, 62, in same sex relationship)

At home we've got everything we need locally... doctors and so on... [it will be] so much easier for us there (Agnes, 69, married)

'Home' for migrants is often linked to the location of family and for those with children and grandchildren in the UK, return migration was particularly common following the onset of the fourth age. For some, return migration featured as part of the retirement 'plan', as the 'natural outcome' of a successful migration project (Cassarino, 2004). For other interviewees, the UK was seen as a safety net and somewhere to return 'if things go wrong' and this kind of forced return including to access healthcare and support been conceptualised as a 'failed migration experience' (Cassarino, 2004). This included not only ill health, but also bereavement. Indeed, worrying about the future and how she would cope with her husband's death while in Spain was a preoccupation for Agnes, and a reason for wanting to return to the UK:

I really felt ... one reason I didn't want to stay here is because of the rules and regulations if anything happened to [husband] how I'd be left as a widow. It seems very uncertain and I don't really want to go through that... there's lots of rules and you never know what's coming, nothing's fixed and there's nothing you can do. You're very vulnerable (Agnes, 69, married)

The onset of frailty and vulnerability associated with the fourth age therefore required a re-evaluation of home and place of belonging, but also their identity, and all of these are inextricably linked (Ahmed, 2015a).

The amount of time these returnees had spent in Spain had no bearing on their return decision, as returnees included those who had lived in Spain for less than five years to those who had lived there for more than 20 years. Therefore, for some people, the UK was identified as 'home' regardless of that fact that they had lived in Spain for over a decade. What was important in return decisions was the location of support networks, and those who had close family in the UK and who were not integrated and had few friends in Spain were the most likely to return (and this was not generally determined by amount of time in Spain).

Conclusion

We highlighted above that the concept 'lifestyle migration' captures the motivations and experiences of retired migrants in their third age (see Ahmed, 2015; 2015a; O'Reilly & Benson, 2009); however, there has not yet been any consideration of the applicability of this category to the experiences and motivations of migrants in the fourth age. Existing literature on retirement migration has focused on 'young old' retirees who exercise mobility in search of optimal ageing (Benson & O'Reilly, 2009), and migrants in the third age are able to experience new opportunities and new activities, exercising autonomy, control and individualism through their lifestyle choices. Experiences of migration at this lifecourse juncture therefore represent positive ageing, and retirees are able to maintain independence and exercise agency (Ahmed, 2015a; McDonald, 2011). Respondents in our study were able to pursue a fulfilling lifestyle by exercising mobility through moving to Spain: in this way, the third age is strongly aligned to the principles of lifestyle migration since this phase is defined by the quest for a better quality of life.

However, as we have shown, there are a growing number of lifestyle migrants who are ageing in place and experience decreasing mobility, bereavement, dependence and poor health. Whilst migration is centred on a quest for a better lifestyle in the third age (Benson & O'Reilly, 2009), the bodily decline and reduced mobility associated with the fourth age (Baltes, 1997) forces migrants to re-evaluate not only their lifestyles, but also their identity as independent agents. In the fourth age, migration experiences are restricted by a loss of autonomy, immobility and frailty and as such, we questioned whether the conceptual lens of lifestyle migration captures migration experiences in this phase of life. Since the fourth age is characterised by disengagement and a withdrawal from society (McDonald, 2011; Rowe and Kahn, 1997), retirees in their fourth age appeared less focused on pursuing 'lifestyle' goals and instead were preoccupied and constrained by health concerns. This precipitated some of our respondents to return to the UK to seek support and services, while others adjusted by developing strategies to manage older age in Spain. Unable to exercise freedom and autonomy in the fourth age, retired British migrants in Spain no longer positioned themselves as agents in their own lives. Instead, their identities were eroded as their experiences altered across different life stages. However, our respondents

could still be seen to be exercising agency - albeit in a limited capacity - to pre-empt and manage physical decline, since: 'In old age, more and more resources are directed towards regulation or management of loss' (Baltes, 1997: 370). Although they are no longer able to be active agents in all aspects of their lives, choosing to return to the UK to benefit from family support, or devising strategies to remain in Spain to continue their life in advanced old age can still be construed as seeking a better quality of life. As with Trundle's Anglo women, whose experiences of lifestyle migration alter across their different life-stages, the experiences of respondents in our studies also destabilizes the theoretical cohesiveness of the lifestyle migration category. Although the third age is strongly aligned to the principles of lifestyle migration and captures experiences of migration during this phase of life, it is important to highlight that this category does not illuminate shifts in life span developments (Trundle, 2009). This is particularly significant for fourth age migrants, whose experiences of mobility change in relation to the ageing body, and for whom managing failing health, immobility and frailty ultimately restrict quality of life.

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