



INSTITUTIONEN FÖR SOCIALT ARBETE

**Older people in Sweden –
Age at migration, poverty and utilization of long-term care services**

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Abstract

Title: Older people in Sweden – Age at migration, poverty and utilization of long-term care services

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This thesis studies the significance of age at migration for labor market integration and old-age poverty, as well as the utilization of long-term care services by older people. This thesis comprises four studies. All four are empirical studies using register data from National Board of Health and Welfare and Statistics Sweden, comprising a total population. The results showed that age at migration is a strong predictor for labor market integration compared to other factors such as educational level and number of children. Time until getting a first foothold in the labor market increases rapidly with age at migration, starting already at age 40+. This has implications for the financial situation in older age. Findings of this thesis show that the risk of being both income and wealth poor increases with rising age at migration. This thesis also show that every third person born in a low-income country are both income and wealth poor. Meanwhile the equivalent number among Swedish born older persons is nearly one percent. Later in life, migration may imply a disadvantage in relation to the labor market and increased poverty in older age. However, when it comes to LTCS, utilization in older age there is a different pattern. The results from this study suggest that late in life migration does not have to imply lower utilization of LTCS. Findings show substantial heterogeneity across and within different birth countries. Although migrating later in life may increase the risk of being poor in older age, it seems as the LTCS are relatively equally distributed across different income groups among Swedish and foreign-born older persons. The Inverse Care Law states that those who most need care are least likely to receive it, while those with least care needs tend to care services more. The results show that that the Inverse Care Law does not apply to the utilization of LTCS by Swedish-born older people, nor by the majority of older migrants. However, the Inverse Care Law does appear to operate for older persons born in low-income countries who do not have a partner.

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