In Search of Tranquility: Migration and Older Puerto Rican Adults' Quests for a Good Old Age

by Brooke V. Jespersen

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In Search of Tranquility:

Migration and Older Puerto Rican Adults' Quests for a Good Old Age

Abstract

By

Brooke V. Jespersen

This dissertation investigates how older Puerto Rican adults in Cleveland, Ohio conceptualize subjective good old ages and how they respond when their ability to achieve good old ages is constrained by inequitable political, economic, and socio-cultural forces. Of particular interest is the role of migration in this process. The older Puerto Rican adults in this study were born in Puerto Rico during the "Great Migration" period (1946-1964), during which one in five Puerto Ricans left the island to find jobs in the United States. They grew up and grew older in Puerto Rico during a time of economic restructuring and high outmigration, and subsequently came to Cleveland through a range of pathways. Now in old age, their life histories contain valuable insights regarding how repeated migration throughout the life course relates to aging, and how aging influences migration decisions.

Drawing on remote ethnographic research with older Puerto Rican adults, their families, and service providers in Cleveland, this dissertation challenges approaches that equate aging with stasis and rootedness, showing instead how quests for good old ages unfold across space and time. First, the author describes how older Puerto Rican adults envision good old ages characterized by feeling *tranquilo*, what the author calls a "tranquil old age." Second, the author analyzes older adults quests to feel *tranquilo*, from youth into old age, to show how nation-state policies beyond US immigration law condition migration as a strategy for the

pursuit of a tranquil old age and contribute to the inequitable circumstances that make a tranquil old age hard to find. Third, the author examines the role of temporality in older migrant experiences of social inclusion and exclusion. This dissertation advances understanding of how older people forge good lives, despite difficult circumstances. Moreover, this dissertation serves as a corrective to aging theories that have privileged stability and individual-level adaptations, while obscuring the broader power dynamics that organize who lives a good old age, as they define it, and who does not.

Chapter 1

Introduction

I met Ana María, age 82, in 2018 during preliminary fieldwork at Cleveland's Nuestra Señora de la Mercedes Senior Center (a pseudonym). I intended to study how older Puerto Rican adults and their families negotiated expectations for eldercare post-migration to Cleveland. I found, however, that for many older Puerto Rican adults there was no "postmigration." For instance, Ana María had migrated from Humacao, Puerto Rico to New York City in the 1950s "buscando ambiente," searching for a better life. This was the first of seven migrations she would undertake in her life time, as she moved between Humacao and several states in the continental US. When I met Ana María, she dreamed of returning to Humacao. She owned a house there with her brother—the only one left of her eleven siblings. Meanwhile in Cleveland, she resided in a government-subsidized apartment complex for low-income older adults and had no family nearby. When I followed up with Ana María in 2021, I learned that she had pursued her dream of returning to Humacao. Her time there, however, was short-lived. After four months, Ana María elected to move back to the Cleveland apartment complex. She explained: "I went to Puerto Rico but things were not so good there. As far as doctors and medicine go...It was terrible."

Over the course of fieldwork and interviews, I often heard older Puerto Rican adults position a "better life" emphasizing material resources in the United States against a different version of a "better life" in Puerto Rico, one emphasizing social connection. Some migrated to Cleveland and never left, while others negotiated these two versions of a "better life" by engaging in migration throughout the life course. In old age, the negotiation continued.

Puerto Ricans are a highly mobile population because, as US citizens, they do not face the legal barriers typical of international migration. Colonial and developmental discourses have historically framed Puerto Ricans' ability to freely migrate to the United States as a "privilege" (Pantojas-García 1990). The social conditions enabling older Puerto Rican adults to be mobile actors, however, are the result of historically specific processes shaped by Puerto Rico's persistent colonial status and global capitalist expansion (Pérez 2004).

Take for example Ana María's journey to New York City in the 1950s "buscando ambiente." She was part of a mass exodus of Puerto Rican laborers in what is known as the "Great Migration" period (1946-1964), during which one out of five Puerto Ricans left the island to find jobs (Vélez 2017). The Puerto Rican and US federal governments deliberately promoted outmigration from Puerto Rico as an economic development strategy (Pantojas-García 1990). More recently, Ana María's decision to move back to Cleveland because healthcare was "terrible" in Puerto Rico alludes to the island's neocolonial status. Although Puerto Ricans are US citizens, those residing on the island are denied some of the rights and benefits that status confers. For instance, residents of Puerto Rico have unequal healthcare benefits compared to those residing in the United States, even though their monetary contributions are the same (Rivera-Hernández et al. 2021).

Puerto Ricans born during the "Great Migration" period (1946-1964) are now in old age. They have grown up and grown older during a period of economic restructuring and high outmigration rates. Seizing this opportune moment, I undertake research with older Puerto Ricans who were born just before or during the "Great Migration" and subsequently came to Cleveland through a range of pathways. Their life histories have much to teach us about how

growing up and growing older in migratory contexts influences aging, and about how aging influences migration decisions. They have much to teach us about how people forge good lives despite difficult circumstances.

Older Puerto Rican adults' life histories also speak to current debates in the anthropology of aging and the anthropology of migration. The world's population is increasingly growing up and growing older in contexts of migration (Rosendahl et al., 2016). Anthropological approaches to aging, however, have not fully considered the impact of migration on aging. Meanwhile, anthropological approaches to migration have tended to overlook older adults entirely or have assumed that older adults are affected by migration only when passively left behind by younger, out-migrating kin (Dossa and Coe 2017; Leinaweaver 2010; Yarris 2014). In this dissertation, I argue that integrating the anthropologies of aging and migration serves as a corrective to aging theories that have privileged stability and individual-level adaptations, while obscuring the broader power dynamics that organize who lives a good old age, as they define it, and who does not (Cole and Durham 2007; Danely 2016; Dannefer and Settersten 2010). Integrating the anthropologies of aging and migration additionally foregrounds the role of temporality and age in shaping past, present, and future mobilities (Dossa and Coe 2017).

Research Aims

This dissertation seeks to integrate the anthropologies of aging and migration by examining how recurrent migration throughout the life course relates to good old ages, or subjective conceptualizations of a meaningful life in old age (Fry et al. 1997; Mattingly 2014). Concomitantly, this dissertation seeks to link lived experiences of aging to the politicoeconomic processes that structure inequality by examining how older adults respond when

their ability to achieve good old ages, as they define them, is constrained. Specifically, this study addresses two overarching research questions:

- 1. How do older Puerto Rican adults conceptualize subjective good old ages?
- 2. How do im/mobility regimes relate to how older Puerto Rican adults conceptualize, pursue, and experience subjective good old ages?

These research questions examine the interplay of two theoretical concepts: a good old age and im/mobility regimes. I define the concept of a "good old age" as the physical, economic, relational, moral, socio-cultural, and environmental aspects that make "life worth living" (Mattingly 2014, 9) from older adults' own perspectives (Keith et al. 1994). Meanwhile, im/mobility regimes refer to the political economic processes by which people are bounded, emplaced, forced and permitted to move and to migrate (Brandhorst, Baldassar, and Wilding 2020; Glick-Schiller and Salazar 2013). A comprehensive review of these concepts is included in Chapter 2.

To address the research questions, this dissertation employed remote ethnographic methods during the COVID-19 pandemic (January 2021-October 2021) with older Puerto Rican adults in the Greater Cleveland area. Older adults were at least 60 years of age, were born in Puerto Rico, and migrated to Cleveland through a range of pathways. Other participants included service providers and family members of older Puerto Rican adults. I also draw on data obtained through participant observation and interviews during preliminary fieldwork, which I conducted in-person before the pandemic.

Significance

This project contributes to anthropology by investigating an understudied group—older Puerto Rican adults who have engaged in migration throughout the life course—in order to integrate the anthropology of aging and the anthropology of migration. The integration of aging and migration advances theories in both fields.

First, the integration of aging and migration advances anthropological theories of aging by highlighting a tension between creative agency and inequality in old age, while linking older adults' lived experiences to the politico-economic forces that structure inequality. The anthropology of aging has been criticized for treating change as pathological in older adults' lives (Cole and Durham 2007) and for under-exploring how lived experience articulates with inequitable power dynamics shaping who lives a good old age and who does not (Baars et al. 2006; Danely 2016; Dannefer and Settersten 2010). This dissertation shows how anthropologists might reconcile the tension between creative agency and inequality in old age by attending to the interplay of two concepts: a good old age and im/mobility regimes. In so doing, this dissertation advances understanding of how people develop notions of good old ages and how they respond when their ability to achieve good old ages is constrained by inequitable political, economic, and socio-cultural forces.

Second, the integration of aging and migration advances anthropological theories of migration by foregrounding the role of temporality and age in shaping past, present, and future mobilities. This dissertation shows how migration decisions and experiences are moderated by stage of the life course. In addition, it advances understanding of how temporality relates to

migrant experiences of social inclusion and exclusion. This dissertation's focus on older Puerto Rican adults, in particular, advances the im/mobility regimes framework. Because Puerto Rico-US migration does not span international borders, the study of Puerto Rican migration effectively "controls" for legal citizenship status (Aranda 2008). This shifts attention away from nation-state immigration regimes, which regulate who may enter or exit the country, toward the ways that governments control internal migration. Moreover, Puerto Rican migration highlights how governmental policies that are seemingly unrelated to migration contribute to mobilities and immobilities, with important implications for older migrants' lives.

Organization of the Dissertation

In Chapter 2, I present an overview of how the integration of the anthropologies of aging and migration advances theory in both fields. I then examine the relationship of two concepts—a good old age and im/mobility regimes—and how they manifest in the Puerto Rican context. I call attention to the need for ethnographic approaches that document how im/mobility regimes constrain the ability of older people to achieve good old ages, while highlighting how they adapt and forge good old ages despite constraints. In Chapter 3, I discuss my research design, methods, and sampling strategies. In Chapters 4-6, I present my research findings. Chapter 4 shows how older Puerto Rican adults conceptualize good old ages as tranquil old ages. Tranquil old ages encompassed themes of relational harmony, meeting basic needs, and no problems or worries, with implications for eldercare and residence. Chapter 5 shows how, even though older adults articulated tranquil old ages as a cohesive ideal, they mapped the values that comprise tranquil old ages onto different places. I analyze older adults' quests for tranquil old ages (from youth into old age) through im/mobility regimes to show how

state power structures beyond US immigration law influence older migrants' lives and to show how older adults respond to and make sense of these power structures. I argue that im/mobility regimes rendered tranquil old ages elusive because older adults often had to choose one component of a tranquil old age over another. Chapter 6 shows how older adults forge meaningful lives in Cleveland, even if they would have preferred to grow older in Puerto Rico. I examine the role of nostalgia for Puerto Rico in creating spaces of belonging in Cleveland, specifically at the Nuestra Señora de las Mercedes Senior Center, churches, and apartment buildings for older adults on Cleveland's Near Westside. In contrast to approaches that frame nostalgia for the homeland as a limiting factor in older migrants' experiences of belonging in new places of residency, I take nostalgia for a Puerto Rico of the past to be a resource for belonging in the Cleveland of the present. In Chapter 7, I tie together my findings to show how they address my research questions. I conclude by discussing theoretical implications for the anthropology of aging, the anthropology of migration, and gerontology, and by proposing future research directions.

Chapter 2

Background

This dissertation engages with three bodies of academic literature: the anthropology of aging, the anthropology of migration, and the study of Puerto Rican migration. As I will argue in this chapter, the integration of the anthropologies of aging and migration serves as a corrective to aging theories that have privileged stability and individual-level adaptations, while obscuring the broader power dynamics that organize who lives a good old age, as they define it, and who does not. The integration of the anthropologies of aging and migration additionally foreground the role of temporality and age in shaping past, present, and future mobilities and immobilities. To integrate the anthropologies of aging and migration, I examine the relationship of two concepts—a good old age and im/mobility regimes—and how they manifest in the Puerto Rican context. I call attention to the need for ethnographic approaches that document how im/mobility regimes constrain the ability of older people to achieve good old ages, while highlighting how they adapt and forge good old ages despite constraints.

I begin this chapter by examining how a focus on migration advances the anthropology of aging, while a focus on aging advances the anthropology of migration. I then develop my definition of the good old age concept, threading together anthropological research on what constitutes a good old age cross-culturally with what Robbins (2013) has deemed the "anthropology of the good." I position a good old age against the more popular term in gerontology, "successful aging," to highlight the need for approaches that prioritize older adults' voices, while taking into account their socio-cultural, political-economic context. Next, I provide an overview of the im/mobility regimes theoretical framework, which examines how

globe-spanning power relationships shape movement within and across households, communities, nation-states, and constellations of nation-states (Glick-Schiller and Salazar 2013; King and Skeldon 2010). Note that I use the condensed term "im/mobility" in reference to the im/mobility regimes framework to succinctly convey that it considers mobilities and immobilities (more on that in the "Im/Mobility Regimes" section). Otherwise, I use the separate terms "mobilities" and "immobilities." I conclude by delineating the im/mobility regimes that have affected older Puerto Rican adults born in Puerto Rico during the "Great Migration" period (1946-1964) and their pathways to Cleveland. I argue that a focus on Puerto Rican im/mobility regimes advances understanding of how policies beyond the US immigration regime contribute to migration and adversely affect older migrants' lives.

Integrating the Anthropologies of Aging and Migration

The world's population is increasingly growing up and growing older in contexts of migration. Older adults engage in return and retirement migration; they are refugees, displaced by violence and environmental change; and they actively participate in transnational families, even when they do not migrate themselves. Anthropological approaches to aging, however, have not fully considered the impact of migration on aging. Meanwhile, anthropological approaches to migration have tended to overlook older adults entirely or have assumed that older adults are affected by migration only when passively left behind by younger, outmigrating kin. (Dossa and Coe 2017; Leinaweaver 2010; Yarris 2014).

In the introduction to their edited volume, *Transnational Aging and Reconfigurations of Kin Work*, Dossa and Coe (2017) caution against simply adding older adults to the burgeoning literature on migration and transnationalism. Instead, they advocate for approaches to

transnationalism that highlight how difference is generated through the category of age (see also Cole and Durham 2007). They also advocate for approaches to aging that consider how transnational aging "generates new thinking about the past, the life course, intergenerational effects, cohorts, and the habitus" (Dossa and Coe 2017, 4). Following Dossa and Coe, this dissertation integrates the anthropology of aging and migration by exploring how a focus on migration enhances aging theory and how a focus on aging enhances migration theory.

The Contribution of Migration to the Anthropology of Aging

The incorporation of migration into the anthropology of aging highlights a tension between creative agency and inequality in old age, while prompting consideration of how older adults' everyday lives articulate with global, macro-structural factors. This has important implications for understanding how older and disadvantaged populations conceptualize, pursue, and experience good lives amidst difficult circumstances.

First, the incorporation of migration into aging highlights creative agency and adaptability in old age (Lamb 2009), in contrast to approaches that portray old age as a time of stasis and decline (Buch 2015) or to those that privilege continuity and stability to the point of pathologizing change in older adults' lives (Cole and Durham 2007). Anthropologists have examined how older adults adapt to migratory contexts. For example, previous research finds that older Asian immigrants transform expectations for intergenerational reciprocity and eldercare (Ahlin 2018; Baldassar, Baldoc, and Wilding 2007; Lamb 2002), older Cuban refugees create fictive kin when separated from families (Martinez 2009), and older European and Middle Eastern immigrants participate in age- and ethnicity-based communities to resist social marginalization (Hegland 2009; Myerhoff 1978; Oliver 2008; Palmberger 2017). This work

emphasizes age as a locus for social change (Cole and Durham 2007) and approaches older adults as social actors who adapt to or initiate changes related to migration (Dossa and Coe 2017; Lamb 2009; Yarris 2014).

Second, the incorporation of migration into the anthropology of aging accentuates how older adults' lives articulate with global and macro-structural factors, including shifts in political economy, global flows of people and ideas, and state and non-state-based population management (Cole and Durham 2007). Anthropological approaches to aging have been criticized for focusing on individual-level narratives and adaptations to aging, while obscuring the inequitable power dynamics that shape who lives a good old age, as they perceive it, and who does not (Baars et al. 2006; Danely 2016; Dannefer and Settersten 2010). Migration, however, often reproduces the social, political, and economic inequalities that shape differential aging experiences and undergird the need to migrate in the first place (Coe 2017; Yarris 2014). Older migrating adults may encounter discrimination (Palmberger 2017), psychological distress due to forced displacement (Lewis 2008; Martinez 2009) or economic and linguistic barriers to receiving eldercare (Freidenberg 2006; Sokolovsky 2009). This work underscores how migration intersects with macro-level inequalities to undermine older adults' well-being.

Taken together, anthropological scholarship on aging and migration highlights a tension between creative agency and inequality in old age, as well as the need to merge micro and macro perspectives in theories of aging. This dissertation addresses these concerns by examining how im/mobility regimes configure older Puerto Rican adults' conceptualizations, pursuits, and experiences of good old ages. In so doing, this dissertation shows how inequitable

political, economic, and socio-cultural processes constrain the ability of older adults to experience good old ages, while drawing attention to how older adults adapt and forge good lives despite constraints.

The Contribution of Aging to the Anthropology of Migration

The incorporation of aging into the anthropology of migration highlights the role of temporality, especially past events and histories of migration, in shaping current and future mobilities. It also enables consideration of how age intersects with race, class, gender, and other categories of identity to influences mobilities and immobilities.

First, the incorporation of aging into the anthropology of migration emphasizes the effects of temporalities on migration and migrants (Dossa and Coe 2017). Anthropological research shows how past events, including histories of migration throughout life course, affect contemporary mobilities. For example, in her work with older Bangladeshi migrants in London, Gardner (2002) showed how older migrants continually assessed the advantages and disadvantages of living in Bangladesh or Britain. They characterized Bangladesh as the emotional and spiritual homeland, while regarding Britain as superior in terms of material security and healthcare. Gardner argued that how older migrants conceptualized each place, as well as how they made decisions about migration, depended on the phase of the life course.

In addition, Coe (2017) showed how the past experiences of older Ghanaian elder-care workers in the United States informed their future retirement strategies. Because they were paid low wages as elder-care workers, and because their work had exposed them to what an aged future in the United States might look like, older Ghanaians sought to return to Ghana for retirement. In Ghana, they would be able to live off their social security payments. Similarly,

Newendorp (2020) examined the experiences of older Chinese adults whose retirement strategies included migrating to the United States. She found that older Chinese migrants expressed nostalgia for the ideological values that they had experienced as younger people in Maoist China. Newendorp argued that nostalgia, despite being oriented to the past, contributed to older Chinese migrants' emotional attachment to the United States in the present, as they believed these values were accessible in the United States but not in contemporary China.

Second, the incorporation of aging into the anthropology of migration highlights how age as a category of difference (Cohen 1998) interacts with other categories of difference—including race, class, and gender, etc.—to influence mobilities. The racialization of migrants, which collapses multiple aspects of their identities into an essentialist non-citizen "other," has been well-documented (Ang 2021; Bastos et al. 2021; Fassin 2010; Parsons-Dick 2011; Silverstein 2005; Urciouli 1996). Our understanding of how age and ageism contribute to these processes, however, is limited (Ranjan-Rankin 2018). In her work with older migrant domestic workers in Singapore, Amrith (2021) shows how age contributes to racialized im/mobilities. Older domestic workers were mandated to return to their countries of origin because employers deemed migrants' ageing bodies as too frail and no longer productive, regardless of domestic workers' need to continue working.

By focusing on older Puerto Rican adults who have engaged in migration throughout this life course, this dissertation advances understanding of the complex ways past, present, and future interact, as well as shape migration decisions and experiences at various stages of the life course. Moreover, this dissertation takes aging as central to migrant identity construction,

exploring how age interacts with other forms of symbolic difference to potentially change migrants' values, needs, desires, and subjectivities (Nare, Walsh, and Baldassar 2017), as well as experiences of social inclusion and exclusion over time.

Good Old Ages

Cross-Cultural Research on Good Old Ages

In deploying the concept of a "good old age," this dissertation draws inspiration from two bodies of research. The first is the large body of work in the anthropology of aging that endeavors to understand what constitutes good old ages cross-culturally. The classic example is Project A.G.E. (Age, Generation, and Experience), which a team of anthropologists carried out in the 1980s across seven field sites. Their objectives were to understand how a good old age is defined for older people, and by older people, in different socio-cultural settings; to investigate how features of socio-cultural settings influence definitions of a good old age; and to understand how said features are mediated by cultural norms and values (Keith et al. 1994). Across seven field sites, the Project A.G.E. study team found consistency in the factors that produce a good old age. These included physical health and functioning; material security; family; and sociality. Consistency in the factors that research participants identified, however, does not mean these factors manifested uniformly. Project A.G.E. found major differences in how participants' conceptualized the factors that produce a good old age, with differences being linked to the social, economic, and political context of each field site. For example, in the field sites where the family was the primary safety net (e.g. Botswana and Hong Kong), participants reported that family members played an essential role in good old ages. The Ju/'hoansi and Herero in Botswana emphasized family physical and material support as

essential for survival in old age, whereas participants in Hong Kong conceptualized family support through filial piety, an arrangement in which older parents reside with and are cared for by the son and daughter-in-law. By comparison, in the field sites where the government is the primary safety net (e.g. the United States and Ireland), participants focused on the quality of familial relationships rather than the provision of economic and physical support from family members (Fry et al. 1997).

Project A.G.E. made valuable contributions to the study of aging: namely, the focus on how older adults' themselves define good old ages and the connection of subjective meanings of good old ages to social, economic, and political context. This dissertation builds on Project A.G.E. by examining how older Puerto Rican adults conceptualize good old ages. My objective is not to establish universals of good old ages, nor to test whether older Puerto Rican adults endorse Project A.G.E.'s "factors that produce a good old age." Rather, I follow Project A.G.E.'s focus on older adults' own voices by using the good old age concept as a subjective alternative to standardized measures of later-life well-being.

The Anthropology of the Good

The second body of work from which this dissertation draws inspiration is the anthropology of the good. This dissertation elaborates good old ages in response to Joel Robbins' (2013) call to move beyond the suffering subject toward an anthropology of the good. Robbins argues that, since the 1990s, anthropologists have focused especially on harsh dimensions of social life that reflect the effects of power, violence, and oppression. He attributes the disciplinary shift toward human suffering to the loss of "the savage," "the primitive," and the radically other as organizing motifs in anthropology. In noting this shift,

Robbins does not claim that anthropologists should no longer study suffering. He does, however, argue that the anthropological preoccupation with suffering forecloses any comparative investigation into how people try to fashion lives they believe to be of value in the world. Anthropologists can only study what people endure.

In response, Robbins advocates for an anthropology of the good. An anthropology of the good does not replace suffering, but complementarily examines how people living in different societies endeavor to create good in their lives, including under difficult or oppressive circumstances. The objective of an anthropology of the good is not to identify a universal definition of "good." Rather, it considers the ways that individuals imaginatively conceive the "good" by constructing moral ideals of aging and well-being (Matthews and Izquierdo 2009; Mattingly 2014; J. C. Robbins 2013), practicing care in social relations (García 2010; Hollan and Throop 2011), and imagining and hoping for a "good" life beyond present circumstances (Deeb 2009; Mattingly 2010).

The study of the good requires a critical orientation. People endeavor to create good in their lives, as Marx would say, under circumstances not of their choosing. Anthropologists have extensively examined how people, the world over, suffer under the oppressive forces of neoliberalism (e.g. Adams 2013; Berlant 2011; Ferguson 1999) and colonialism (e.g. Asad 1973; Merry 2000; Varma 2021). These oppressive forces create barriers to achieving a good life. In examining and even celebrating how people adapt, find meaning, and resist oppressive circumstances, anthropologists must be wary of obscuring unequal, globe-spanning power relationships (Ferguson 2006). Moreover, anthropologists must be mindful of how broader political, economic, and socio-cultural forces shape how people construct and imagine good

lives to begin with (Lim Chua 2014). For example, older people's narratives of good old ages may reveal their desires and preferences. But they may also reveal what types of lives and futures they believe are available to them, and what types of lives and futures are closed off (Danely 2016). The complexities of "the good" illustrate the need for ethnographic approaches that assess the relationship between politico-economically structured inequality and attempts to forge meaningful lives (Knauft 2018).

Drawing on these bodies of literature, I define the concept of a "good old age" as the physical, economic, relational, moral, socio-cultural, and environmental aspects that make "life worth living" (Mattingly 2014, 9) from older adults' own perspectives (Keith et al. 1994). My approach to a good old age operates on the following five assumptions:

- Beliefs about what constitutes a good old age are inextricably linked to the sociocultural, political, and economic context (Clark and Anderson 1967; Keith et al. 1994; Sokolovsky 2009).
- 2. When studying older adults' beliefs about good old ages, researchers should maintain a critical stance. How older people define good old ages may reveal their desires and preferences, but it may also reveal what types of lives and futures older people imagine to be available to them, and what types of lives and futures are foreclosed due to broader circumstances (Danely 2016).
- 3. The ability to achieve good old ages is stratified according to inequities of race, class, gender, and other categories of identity. Inequitable power relations constrain the ability of some groups to achieve good old ages, while supporting the ability of others (Buch 2018).

- Despite inequitable and difficult circumstances, older people find ways to forge meaningful lives. Older people are creative, adaptable, and resourceful (Dossa and Coe 2017; Lamb 2009; Myerhoff 1978).
- 5. The conceptualization, pursuit, and experience of a good old age is related to the life course. Older adults' past life experiences, and the historical context in which they grew up, affects their ideas about a good old age (Danely and Lynch 2013).
 Moreover, the strategies that older adults employ to pursue good old ages do not spontaneously emerge after the age of 65, but may be a continuation of the strategies they have employed throughout their lives.

Why Use "Good Old Age" Instead of "Successful Aging?"

Before transitioning to a discussion of im/mobility regimes, I briefly wish to address why I have elected to use the term "good old age" instead of the more popular term in gerontology, "successful aging." Successful aging has been the dominant gerontological paradigm since the 1980s, influencing research, policy, and popular culture (Alley et al. 2010; Rowe and Kahn 2015; Lamb et al. 2017). The paradigm, however, has a number of limitations. Below I briefly define the successful aging paradigm and delineate its limitations before returning to a discussion of why I use good old age as a subjective alternative to more standardized measures of later-life well-being.

The term successful aging first appeared in Havighurst's 1961 article for the inaugural issue of *The Gerontologist*. While Havighurst's definition emphasized individual life satisfaction and happiness, contemporary notions of successful aging draw on the medical framework developed by Rowe and Kahn (1987, 1998). In their landmark book, *Successful Aging*, Rowe and

Kahn defined successful aging as 1) the avoidance of disease and disability; 2) maintaining high levels of mental and physical function; and 3) active engagement with life, including "relationships with other people, and behavior that is productive" (1998: 40). Productivity here includes "all activities, paid or unpaid, that create goods or services of value" (p. 47). Key to their framework is individual agency. Rowe and Kahn emphasize the individual's ability, even responsibility, to control aging through lifestyle choices: "To succeed…means having desired it, planned it, worked for it. All these factors are critical to our view of aging which…we regard as largely under the control of the individual. In short, successful aging is dependent upon individual choices and behaviors. It can be attained through individual choice and effort" (Rowe and Kahn 1998, 37).

One of the strengths of the successful aging paradigm is that counters portrayals of old age as a time of inevitable disengagement and decline, which had previously been the norm in gerontology (e.g. Cumming and Henry 1961). Anthropologists and other scholars, however, have criticized the successful aging paradigm for the following reasons.

First, successful aging is ethnocentric. In *Successful Aging as a Contemporary Obsession*, Lamb, Robbins-Ruszkowski, and Corwin (2017) show how successful aging is not an objective acultural construct, but reflects American cultural-historical values related to personhood. For example, they note that successful aging's focus on individual action (as opposed to emphasizing biology, fate, or structural constraints in shaping the way one ages) aligns with American notions of personhood that favor individualism and self-control. Lamb, Robbins-Ruszkowski, and Corwin also note that successful aging idealizes independence. Rowe and Kahn argued that "few issues strike greater fear than the prospect of depending on others," as older

adults see independence as a central goal (1998, 42). This perspective aligns with American forms of individualist personhood which tend to valorize autonomy and self-sufficiency throughout the life course (Lamb 2017).

As I have already shown throughout this chapter, anthropological research demonstrates that preferences for and interpretations of aging vary cross-culturally. These preferences and interpretations often contradict American concepts of personhood embedded in the successful aging paradigm. For example, in Mexico, changing physical capacities are not inherently a threat to personhood, but may present an opportunity for older men experiencing erectile dysfunction to embrace "mature masculinities" (Wentzell 2013). In India, those with Alzheimer's disease continue to be full social persons enmeshed in reciprocal kin relations, despite cognitive declines (Brijnath 2014). And in Kenya, the risk of aging is not too little independence, but too little dependence, as successful aging requires sufficient people on whom one can depend (McIntosh 2017). Cross-cultural investigations of successful aging, thus, reveal that independence, activity, and agelessness are not attributes with inherent value, but products of the contemporary American cultural context.

Second, the prevailing successful aging discourse obscures social inequalities. By focusing on individual responsibility and effort, successful aging overlooks the inequitable power relations that shape the ability of some groups to achieve Rowe and Kahn's vision of health and active engagement. Inequitable power relations do not suddenly emerge in old age, but operate throughout the life course. For example, research has shown that childhood living conditions, including higher parental socioeconomic status and good childhood health, are positively associated with successful aging (Brandt, Deindl, and Hank 2012). Social forces in

midlife can also exacerbate inequality. For example, Crystal (2006) argues that differential access to healthcare and differential health behaviors along socioeconomic lines in mid-life set the stage for inequality after retirement.

Third, the prevailing successful aging discourse perpetuates ageism and ableism. Rowe and Kahn proposed that successful aging would challenge ageism by emphasizing "the positive aspects of aging," rather than focusing on negative aspects such as frailty or long-term care needs (1998, xii). Research suggests, however, that successful aging does not reduce ageism. Calasanti (2016) found that belief in successful aging did not decrease her middle-aged participants' ageism or fears of aging; the successful aging discourse merely existed alongside rhetoric of later-life disease and decline. Calasanti argues that successful aging produces a new form of ageist exclusion, one based not necessarily on chronological age but one's proximity to the successful aging paradigm. Those who have aged "unsuccessfully" are those who look old, who experience disease or disability, who have cognitive impairments, and who are not socially engaged. Because successful aging emphasizes individual effort and responsibility, ageism toward those who have not met the criteria for successful aging is justified (Calasanti 2016). Similarly, Lamb (2014) found that older adults sought "permanent personhood," believing that one must defy the effects of aging and maintain the self of one's earlier years. When older adults experienced physical decline, they reported a sense of personal failure and embarrassment. Lamb notes that permanent personhood is a distinctly American cultural ideal (see also Lamb, Robbins-Ruszkowski, and Corwin 2017).

Moreover, the prevailing successful aging discourse is ableist in that it excludes individuals with chronic disease or disability—whether they enter old age with these conditions

or acquire them in old age—from being able to age successfully. Can't older adults with disabilities, chronic health problems, or cognitive deficits still achieve good old ages? In posing this question, I do not mean to suggest that health is irrelevant to good old ages. However, it is unlikely that people will spend the last years of their lives without disability or disease, despite people living longer. The dominant successful aging discourse, in mandating the avoidance of disability and disease, obscures the ways that older adults cope with (Becker 1980; Golant 2015) and cultivate meaningful, loving relationships (Brijnath 2014) amidst changing physical and cognitive capacities.

Fourth, the successful aging paradigm excludes the voices of older adults. Notions of successful aging do not only vary cross-culturally, they may also vary between lay older people and gerontology professionals within the same culture. It is therefore important to incorporate older adults' subjective perspectives to enhance understanding of diverse aging experiences, aspirations, and needs (Cosco et al. 2013; Cosco et al. 2015). This gap in successful aging research is widely acknowledge, yet remains under-addressed. Indeed, Martinson and Berridge (2015) found that 30 of 67 published critiques of successful aging lamented the inadequate attention given to older adults' own voices. This dissertation represents an example of listening to older adults' subjective perspectives on aging and what they desire for their lives.

This dissertation employs the concept of a good old age to circumvent the limitations of the successful aging paradigm. The good old age concept is not ethnocentric because it does not presume that all older adults value the same things; nor does it evaluate whether older adults live up to pre-determined measures of well-being. Rather, the good old age concept acknowledges that beliefs about and preferences for aging vary cross-culturally. The good old

age concept also does not obscure social inequalities because it does not emphasize individual responsibility for aging outcomes, but examines how the ability of individuals to achieve good old ages is stratified according to inequities of race, class, gender, etc. The good old age concept is not ageist or ableist because it does not require the avoidance of disease or disability.

Instead, it conceives a meaningful life in broad terms (beyond medical criteria) and considers how older people forge good lives despite chronic disease, cognitive deficits, and disabilities.

Lastly, the good old age concept does not exclude the voices of older adults. It prioritizes older adults' subjective perceptions of aging and employs an inductive approach, meaning that the factors that contribute to a good old age emerge from the data.

Im/Mobility Regimes

This dissertation employs an im/mobility regimes framework, which refers to the political economic processes by which people are bounded, emplaced, forced and permitted to move and to migrate (Brandhorst, Baldassar, and Wilding 2020; Glick-Schiller and Salazar 2013). The terms "regimes" and "political economic processes" call attention to the role of nation-states and shifting global governance structures that affect individual and population mobility. According to Glick Schiller and Salazar (2013), "regimes" also reflects notions of governmentality and hegemony in which similarity, difference, belonging, and exclusion are constantly questioned, celebrated, challenged, and transformed (see also Foucault 2000; Hall 1997).

The im/mobility regimes framework builds on the mobilities paradigm, which seeks to understand how social relations necessitate the intermittent and interconnected movements of people, objects, information and images across space (Sheller and Urry 2006; Urry 2007).

Mobility here is an intentionally inclusive category. It refers to "both the large-scale movements of people, objects, capital and information across the world, as well as the more local processes of daily transportation, movement through public space and the travel of material things within everyday life" (Hannam et al. 2006, 1).

The mobilities paradigm emerged as a critique of what Wimmer and Glick Schiller (2002, 2003) call "methodological nationalism": The assumption that social and historical processes are contained within the borders of individual nation-states. The methodological nationalist perspective in migration scholarship has produced the internal-international migration dichotomy, which overlooks many similarities in the migration process regardless of a nationstate border being crossed. Methodological nationalism also causes scholars to ignore histories of human movement and interconnection and to consequently treat movement across nationstate borders as novel and disruptive (e.g. Appadurai 1996; Bauman 2000; Castells 1996). By contrast, mobilities studies highlights how people and their cultural practices are not confined to fixed territories but participate in multiple social fields across space and time (Greenblatt 2009; Salazar 2010). By examining multiple scales of movement, not just movement across nation-state borders, mobilities studies also decenters the nation-state in migration analysis. That is not to say that the nation-state is irrelevant. Nation-states impose barriers on the emigration and immigration of some groups, while facilitating the movement of others. And as I will show in this dissertation, nation-state policies beyond immigration law influence migration between Puerto Rico and the United States. But by decentering the nation-state in the study of migration, mobilities studies opens analytic possibilities. For example, it foregrounds similarities between internal and international migration (King and Skeldon 2010); highlights

conceptualizations of the nation beyond the nation-state (see Dávila 1997 and Duany 2002 for analysis of the Puerto Rican nation; see Vasantkumar 2013 for analysis of Tibetan nation); and calls attention to how nation-states promote and restrict internal migration (Glick Schiller and Salazar 2013).

Despite opening analytic possibilities in migration scholarship, mobilities studies has two notable shortcomings. First, by approaching all categories of migrancy—from tourists to labor migrants—through the same analytical lens, it minimizes differential barriers to movement.

Access to mobility is one of the sharpest stratifying dimensions of the contemporary world (Bauman 1998; Glick Schiller and Salazar 2013; Shamir 2005). Financial resources, legal status, and global racializing categories affect one's ability to travel or migrate, the ease with which one travels, the consequences of trying to move, and whether or not one gains or loses status from being elsewhere (Canzler et al. 2008; Glick Schiller and Salazar 2013). Second, mobilities studies has tended to equate movement and migration with freedom. Migration, however, is not always a choice. Refugees and asylum-seekers are forced to flee their homelands; meanwhile, undocumented immigrants may have to move from residence to residence in order to avoid surveillance (Block et al. 2009).

To address the under-theorization of unequal power relationships in mobilities studies, Glick Schiller and Salazar (2013) propose a "regimes of mobility" approach. They undertake a regimes of mobility approach to "explore the relationships between the privileged movements of some and the co-dependent but stigmatised and forbidden movement, migration and interconnection of the poor, powerless and exploited" (Glick Schiller and Salazar 2013, 188). They challenge the equation of mobility with freedom, examining instead how movement

simultaneously relates to connection and new confinements and forms of exploitation (Salazar and Smart 2011). Their approach advances understanding of mobility as multi-scalar, embedded in globe-spanning power relations, and inextricably linked to immobilities.

Recent scholarship on transnational family care during the coronavirus pandemic emphasizes immobilities, rather than mobilities. In the introduction to their special issue in the *Journal of Intergenerational Relationships*, Brandhorst, Baldassar, and Wilding (2020) use "immobility regimes" to examine how migration restrictions and closed borders can "put on hold" transnational intergenerational care practices (see also Merla et al. 2020 for "immobilizing regimes of migration"). For example, the reduced functional mobility associated with the aging body is reinforced by policies that restrict immigration among older people, whom the receiving country perceives to be an economic burden (Askola 2016). Age-restrictive migration policies make it difficult for older adults to travel or immigrate for the purpose of reuniting with their children who have already migrated. This puts the onus on younger family members to find a way to provide in-person care to older adults in the home country, instead of providing care at a distance (Brandhorst, Baldassar, and Wilding 2020).

This dissertation uses the term "im/mobility regimes" to succinctly convey the influence of mobilities *and* immobilities on older Puerto Rican adults' aging experiences. Im/mobility regimes builds on several of the assumptions outlined above. First, it conceptualizes mobility as multi-scalar, occurring within and across households, communities, nation-states, and constellations of nation-states (King and Skeldon 2010). The multi-scalar approach is particularly useful for understanding both aging and Puerto Rican migration. A large body of work in gerontology seeks to understand how multiple levels of the environment (e.g.

household, neighborhood, region, nation-state) interact to influence older adults' well-being (Golant 2015; Lawton and Nahemow 1973). Gerontologists, however, have tended to emphasize the household and neighborhood levels and have under-examined mobility within and across nation-states. This dissertation employs im/mobility regimes to advance understanding of how national-level mobilities influence aging. In addition, the multi-scalar mobilities approach is useful for conceptualizing Puerto Rican migration because it does not fit well in internal or international migration categories. Puerto Rican migration to and from the United States does not entail the crossing of nation-state borders, but it does entail crossing colonial, cultural, racial, and linguistic boundaries (Dominguez 2005; Duany 2002; Grosfoguel 2003; Urciuoli 1996) and it has implications for full citizenship rights and access to federal benefit programs. I thoroughly address the latter point in the "Puerto Rican Im/Mobility Regimes" section.

Second, im/mobility regimes follows Glick Schiller and Salazar (2013) by theorizing mobility in ways that normalize neither stasis nor mobility, neither rootedness nor cosmopolitan openness. Although Glick Schiller and Salazar had in mind human migration, this dissertation contends that theories of aging must also resist normalizing stasis and mobility. As I showed in the "Integrating the Anthropologies of Aging and Migration" section, migration challenges the perception that old age is a time of stasis, decline, and rootedness (e.g. aging in place). Migration also highlights the political-economic processes that shape who lives a good old age, and who does not. This dissertation, therefore, does not equate mobility in old age with freedom.

Third, im/mobility regimes also follow Glick Schiller and Salazar's (2013) call to theorize mobilities within unequal globe-spanning relationships of power, which privilege the mobility of some groups while stigmatizing or restricting the mobility of others. By focusing on Puerto Rican migration, this dissertation advances understanding of how policies beyond US immigration law influence older migrants' lives, shaping when and where they might find good old ages.

Puerto Rican Im/Mobility Regimes

The Commonwealth of Puerto Rico is known in Spanish as an *Estado Libre Asociado* of the United States. The term *Estado Libre Asociado* is misleading in that it implies independence (*libre*) and US statehood (*estado*). Puerto Rico has neither. The United States invaded Puerto Rico in 1898, and even though Puerto Ricans were naturalized as US citizens in 1917, Puerto Rico has not been incorporated as a state. Puerto Rico is also not an independent nation-state. It is a people democratically constituted into an autonomous territory, with self-governance over internal affairs, and permanently associated with the United States. This essentially amounts to national autonomy under neocolonial rule; that is, colonialism by consent and thus only partly colonial (Rodríguez-Vecchini 1994). This ambiguous status means that Puerto Ricans on the island receive some federal benefits but not the full political rights available to citizenresidents of the United States (e.g. cannot vote in presidential elections; no elected representative or vote in Congress). Puerto Ricans who move from the island to the United States, however, automatically qualify for full federal benefits and political rights. As US citizens, Puerto Ricans do not face the legal barriers that are typical of international migration.

Puerto Rico offers a distinctive vantage point from which to consider the relationship of aging and im/mobility regimes for three reasons. First, Puerto Rico has sustained some of the highest rates of outmigration in modern history (Duany 2002). Outmigration peaked during the "Great Migration" period (1946-1964), during which one out of five Puerto Ricans left the island to find jobs in the US (Vélez 2017). They headed primarily to New York, Chicago, and Philadelphia, where there was high demand for low-wage workers in manufacturing industries. Some also migrated to the Greater Cleveland area (Zentos and Marley n.d.), as I will discuss in the "Coming to Cleveland" section. By the early 1970s, manufacturing jobs declined due to deindustrialization in the American Northeast and Midwest, which resulted in decreased outmigration from Puerto Rico until the mid 1980s and 1990s, when outmigration from Puerto Rico increased once more (Perez 2004). Between 2006 and 2016, 14 percent of Puerto Rico's population emigrated as unemployment rates increased amidst Puerto Rico's economic and debt crises (Meléndez and Hinojosa 2017; Vélez 2017). Another 5 percent left during the year following the devastation of Hurricanes Irma and María in 2017 (Hinojosa and Meléndez 2018).

Second, Puerto Rican migration is not unidirectional. Scholars emphasize the multi-directional nature of Puerto Rican migration, one in which the flow of goods, people, ideas, and capital connect island and mainland communities (García-Colón and Meléndez 2013; Ortiz 1993). This back and forth movement—popularly referred to as *el vaivén*—has become a culturally conditioned way for Puerto Ricans to improve their economic and social well-being, as they make use of "dual home bases" (Alicea 1990, 14) and engage in flexible survival strategies (Duany 2002). The overwhelming majority of scholarship on aging and migration emphasizes one-way migration (for exceptions see Gardner 2002; Coe 2017). A focus on Puerto

Rican migration, however, draws attention to how repeated migrations throughout the life course influence aging.

Third, because Puerto Rico-US migration does not span international borders, the study of Puerto Rican migration effectively "controls" for legal citizenship status (Aranda 2008). This shifts attention away from nation-state immigration regimes, which regulate who may enter or exit the country, toward the ways that governments control internal migration. Moreover, Puerto Rican migration highlights how governmental policies that are seemingly unrelated to migration contribute to mobilities and immobilities, with important implications for older migrants' lives.

The older Puerto Rican adults with whom I undertake this research were born in Puerto Rico during or just before the "Great Migration" period (1946-1964) and have grown up and grown older during a time of economic restructuring and high outmigration. They have all migrated at least once, with many engaging in back-and-forth migration throughout the life course and into old age. During interviews about their migration decisions, older Puerto Rican adults often alluded to how policies beyond the US immigration regime have influenced or continue to influence their decisions about where to live. The stories of their lives have much to teach us about the relationship of im/mobility regimes and aging.

This dissertation focuses on two im/mobility regimes in older Puerto Rican adults' lives.

The first is the economic development strategy that led to the "Great Migration" from Puerto Rico. The second is differential access to federal benefit programs based on place of residence. In discussing these regimes, my focus is on the policies of the Puerto Rican Commonwealth

government and the US federal government, but take note: these policies unfolded in relation to global capitalist production and international politics.

Out-Migration as an Economic Development Strategy

After WW2, the Puerto Rican and US federal governments promoted mass outmigration from Puerto Rico as an economic development strategy, part of a broader colonial project of transforming Puerto Rico from an agricultural to industrial economy. Puerto Rico's emigration policy was unprecedented in its deliberate character. The emigration policy was implemented through Operation Bootstrap, also known as the "Puerto Rican model" of industrialization, initiated between 1947 and 1948. Operation Bootstrap constituted a shift in development strategy, as the Puerto Rican government moved away from the promotion of state-owned industries to the attraction of US capital in the form of export-oriented manufacturing industries. Operation Bootstrap implemented export-promotion strategies accompanied by incentives, including tax holidays, and wage and rent subsidies, to attract US investment. What we know today as export processing, outsourcing, or maquiladoras in the Global South was first developed in the late 1940s and early 1950s through Operation Bootstrap in Puerto Rico (Pantojas-García 1990).

One of the consequences of Operation Bootstrap was that a large sector of the working population was excluded from production (Pantojas-García 1990). Puerto Rico was also struggling with high poverty rates and rapid population growth. To deal with the "excess" workforce and population, the Puerto Rican government established the Employment and Migration Bureau, which later became the Migration Division of the Department of Labor, to

promote and organize the migration of Puerto Rican workers to the United States. According to a report written by one of the members of the governing party:

Every country has something to export. If some have petroleum, others nitrate and others sugar, we [Puerto Rico] are the only country in America that besides sugar, has an incalculable wealth that should be exported and should be used for the benefit of all. We have men, intelligence and working hands (qtd. in Pantojas-García 1990, 92).

The establishment of the Employment and Migration Bureau was accompanied by population control measures. Overpopulation, Laura Briggs argues, was a key aspect of development narratives in the postwar era as US policymakers worried that "excessive, uncontrolled reproduction was an obstacle to capital formation" (2002, 116). The Puerto Rican government promoted women's emigration to not only reduce unemployment but its potential growth (Pantojas-García 1990).

The US was motivated, in part, to support massive outmigration from Puerto Rico because Puerto Rico was a "symbolic showcase" and military stronghold in the Caribbean (Grosfoguel 2003). Puerto Rico served as proof of the "benefits" of capitalist development in cooperation with the colonizer, and Operation Bootstrap served as "America's Answer to Communism" (Pantojos-García 1990). The US, therefore, was eager to demonstrate that the export-oriented industrialization model had succeeded in reducing poverty and underdevelopment in Puerto Rico. Consequently, the US collaborated with the Puerto Rican government to facilitate migration through the availability of cheap air fares between Puerto Rico and the US, and job advertising campaigns (Grosfoguel 2003). In addition, Puerto Rican workers served as a labor supply to meet the high demand for low-wage workers in the American manufacturing industry after WW2 (Pérez 2004, Vélez 2017).

As a result of these economic development policies, there was a mass exodus of Puerto Rican workers. The mass exodus became known as the aforementioned "Great Migration" period (1946-1964), during which my research participants were born. Recall that one in five Puerto Ricans lefts the island to find jobs in the US during this time period (Vélez 2017).

Why did Puerto Rican workers go along with development policies encouraging mass outmigration? In *Development Strategies as Ideology*, Pantojas-García (1990) argues that the Puerto Rican government presented the migration policy as beneficial to the workers who were allegedly being displaced by rapid population growth, thus downplaying the inequitable processes causing their impoverishment. Additionally, the Puerto Rican government framed the colonial relationship as beneficial to Puerto Rican workers. Through colonialism, Puerto Ricans had become US citizens and could enter the US without restriction. The Puerto Rican government framed citizenship and related mobilities as "privileges" that enabled Puerto Ricans to pursue a better life in the United States. However, as Pantojas-García notes, the Puerto Rican migrants worked in the lowest paying jobs and often experienced racial discrimination. Migrants' quality of life did somewhat improve, in that their income averaged higher than that of workers in Puerto Rico and they were able to actually find jobs in the United States, whereas it was unlikely they would have found jobs in Puerto Rico.

Federal benefit programs

The second im/mobility regime concerns differential citizenship rights and healthcare access on the basis of residence. Approximately 40 percent of adults over the age of 65 in Puerto Rico live under the federal poverty level (US Census Bureau 2019). Older adults rely on Medicare, Social Security, and public assistance (Fericelli 2013), with the majority receiving

health insurance through public health care systems (e.g. Medicaid, Medicare, and Veterans Affairs). Although most older adults are insured, Puerto Ricans have unequal healthcare benefits compared to those residing in the United States even though their monetary contributions are the same (Rivera-Hernández et al. 2021). For example, Puerto Ricans receive lower payments and more limited low-income assistance programs than beneficiaries in any state (Rivera-Hernández et al. 2016).

Differential citizenship rights and healthcare access on the basis of residence might seem to be disconnected from mobility or migration. However, differential rights and access contribute to inequitable circumstances in Puerto Rico that make it difficult for low-income older adults to meet their basic needs. Throughout my research, I frequently heard older adults claim that access to federal benefit programs influenced decisions to migrate to or stay in the US, decisions that they might not otherwise have made.

The benefit programs that my research participants mentioned are Medicaid and SSI. Medicaid is a needs-based program that provides healthcare coverage for poor children, pregnant mothers, the disabled, and poor older adults. Medicaid is a joint federal-state program, which means the federal government provides a higher share of funding in low-income states than in high-income states. Puerto Rico has lower per-capita income than any state in the country. One would therefore expect that Puerto Rico would receive an exceptionally high rate of funding. Medicaid in Puerto Rico, however, has been capped since 1968. This means that the federal government allots a fixed block of funds. The federal government only provided 15 percent of Puerto Rico's Medicaid funding between 2012 and

2019. In comparable states with a high proportion of residents on Medicaid, the federal share of spending is 78.6% in Mississippi and 73.3% in West Virginia (Mulligan 2014).

SSI helps disabled, blind, and older people who struggle financially. SSI benefits are available to American citizens residing in the United States, but not available to American citizens residing in Puerto Rico. Puerto Rico's version of SSI—Aid to Aged, Blind, and Disabled—has more stringent eligibility requirements and a much smaller benefit payout. For example, the average SSI benefit is \$591 a month, while the average Aid to the Aged, Blind, and Disabled benefit is only \$75 a month. Note that the average cost of living in Puerto Rico is 12 percent higher than the average cost of living in the United States mainland, so differences in average benefit payouts are not due to lower cost of living in Puerto Rico (IEPR 2016). The argument for Puerto Ricans being excluded from SSI is that residents of Puerto Rico do not pay federal income taxes. However, the groups that receive SSI (e.g. older adults who struggle financially and people with disabilities) typically do not pay taxes.

The examination of Puerto Rican im/mobility regimes calls attention to the ways that governments regulate internal migration. The first example—outmigration as an economic development strategy—shows how the Puerto Rican and US federal governments deliberately promoted a mass exodus of Puerto Rican laborers after WW2. The second example—differential citizenship rights and healthcare access on the basis of residence—suggests that policies that are seemingly unrelated to migration or mobility also contribute to outmigration from Puerto Rico. As I will show in Chapter 5, these policies also produce immobilities, keeping older adults stuck in the US even if they prefer to spend old age in Puerto Rico.

Puerto Rican Aging in Contexts of Im/Mobility Regimes

Although a growing body of anthropological research investigates the relationship of aging and migration, few anthropologists have specifically examined the experiences of older Puerto Rican adults. One notable exception is Judith Freidenberg's (2000) ethnography, Growing Old in El Barrio, which examined the life course and daily life experiences of lowincome older Puerto Rican adults residing in Spanish Harlem. Freidenberg's research participants had migrated to New York as young people in the 1940s and 1950s, "buscando ambiente," in search of a better life (2000, 47). Growing Old in El Barrio focuses on the challenges of aging as a low-income person in Spanish Harlem, not on the influence of repeated migrations on aging. The book advanced the anthropology of aging by showing how individual stories are embedded within a larger political economic context. Freidenberg argues that older Puerto Ricans' aging experiences, and especially their low-income status, must be understood as the result of several intersecting factors, including: premigration family and work experiences in Puerto Rico, migration to the United States, work history in New York, and the social networks older adults developed in Spanish Harlem. Her findings also illustrate the complexities of Puerto Ricans' second-class citizenship status. For example, many of her research participants, despite being US citizens, were unaware of their rights and were exploited by employers when they migrated.

Another exception is Meredith Rúa's (2017) ethnographic research with older Puerto Rican adults in Chicago, whom she characterizes as "aging in displacement." Rúa highlights mobility as multi-scalar, in that she links displacement via outmigration from Puerto Rico to displacement via neighborhood gentrification in Chicago. Rúa argues that by securing low-

income senior housing, older Puerto Rican adults were able to "age in place." However, the rapid upscaling of their neighborhoods through urban development projects caused older adults to feel segregated, as places fostering age-friendly social exchanges in their neighborhood were limited. Thus, older adults experienced a sense of displacement, despite "aging in place."

Anthropological scholarship on Puerto Rican aging and migration has emphasized aging experiences in urban enclaves post-migration to the United States. It highlights the ways that the political economic structures that contributed to older adults' migration as younger adults continue to operate in old age, but in different ways. For Freidenberg, the political economic structures contribute to older adults' poverty. For Rúa, these structures manifest through urban development project. Both of these accounts, however, treat migration as part of older Puerto Rican adults' back stories and do not examine migration as a strategy for pursuing a good old age. This dissertation advances understanding of the Puerto Rican aging-migration nexus by examining how repeated migration throughout the life course relates to the pursuit and experience of a good old age.

Coming to Cleveland

While the Puerto Rican diaspora in Ohio has been largely overlooked—with studies focusing on New York, Chicago, and Miami—there is a long history of migration from Puerto Rico to Cleveland. Puerto Ricans began arriving in Cleveland after World War 2, during the city's industrial boom. The demand for labor was high. Cleveland had been losing its Mexican labor force since the tightening of immigration policies in the 1930s. Seeking to fill labor shortages, recruiters were sent to Puerto Rico to entice workers with employment and a dream of a better

life. Puerto Ricans migrated to Cleveland in large numbers (Bonutti and Prpic 1977; Pap 1973).

After their contracts expired, many stayed in Cleveland and sent for their families from the island (Zentos and Marley n.d.). Historically, the Puerto Ricans who migrated to Cleveland came from three Puerto Rican municipalities: San Lorenzo, Yauco, and Yabucoa.

After 1960, Cleveland's Puerto Rican population increased steadily. In 1960, there were only 4,595 Puerto Ricans living in Cleveland. As of 2015, there were 30,240 Puerto Ricans in Cleveland, comprising 7.8 percent of Cleveland's total population (US Census Bureau 2015). Much of this growth occurred in the 1990s (Benedict and Kent 2004).

The majority of Puerto Ricans who came to Cleveland in the 1950s, after World War 2, lived on the Eastside around Hough, Lexington, and Superior avenues. These areas were attractive because of their proximity to Our Lady of Fatima Catholic Church, where there were Spanish-speaking priests. In 1958, Puerto Ricans moved from the Eastside to the Near Westside. Competition for housing, as well as a desire to be closer to jobs in the steel mills and industrial mills located on the Westside, prompted this mass exodus (Zentos and Marley n.d.) Puerto Ricans relocated to the Near Westside, especially the neighborhoods of Ohio City, Clark Fulton, and Tremont (Benedict and Kent 2004).

Chapter 3

Methods

Overview

This research investigates how im/mobility regimes configure older Puerto Rican adults' conceptualizations, pursuits, and experiences of subjective good old ages. This research was conducted over a three-year period. The preliminary research, which took place August-December 2018 and July 2019, employed a multi-sited, ethnographic design (Marcus 1995). The intended start-date of the dissertation research coincided with the onset of the COVID-19 pandemic, which rendered in-person research unfeasible and unethical. The dissertation research, thus, switched from a multi-sited, ethnographic design to a remote ethnographic design. Remote ethnography refers to anthropological fieldwork—including participant observation and interviews—conducted from afar through technology (Postill 2017). As with in-person ethnography, triangulation is crucial. The ethnographer gathers primary and secondary materials on a given question through as rich a variety of sources as possible (Ortner 1998), which may include "being there" through technology (Postill 2017). In the case of this dissertation, remote ethnography entailed semi-structured and life history interviews conducted over Zoom and the phone with older adults, services providers, and family members. The research was carried out January-October 2021.

Data collection consisted of semi-structured interviews, life history interviews, and and participant observation. Purposive, respondent-driven sampling (Bernard 2011) was used for all methods. Interviews and conversations during participant observation were conducted in Spanish or English, according to participants' preferences.

Data collection primarily took place in the Greater Cleveland area. Participants included lower socio-economic status older Puerto Rican adults, who were at least 60 years old and had migrated to the Greater Cleveland area from Puerto Rico through a range of pathways. Other participants included service providers and family members of older Puerto Rican adults. Data collection also occurred in San Juan, Puerto Rico among older Puerto Rican adults, ages 60 and over, who had migrated to the United States at least one time in their lives and had returned to Puerto Rico. Other participants included service providers who worked with older Puerto Rican adults. Table 1 summarizes the sample size for each site and phase of data collection.

Table 1. Final Sample Sizes

Research phase	Sample size
Cleveland preliminary study	6 older adults
San Juan preliminary study	9 older adults + 6 service providers
Remote dissertation study	24 older adults + 7 family members + 9 service
	providers

In this dissertation, I focus on the findings obtained during the "remote dissertation study" with the sample of twenty-four (n=24) older adults. I also include ethnographic vignettes and interview data obtained during the in-person preliminary studies. In the remainder of this chapter, I briefly present the methods and findings from the preliminary research studies. Then I describe in detail the sampling strategies, data collection procedures, and analysis for each phase of the "remote dissertation study."

Preliminary Research Findings

Cleveland Study

I conducted preliminary ethnographic research from August 2018 through December 2018 to examine why older Puerto Rican adults migrate to Cleveland, Ohio in later-life and how

they negotiate eldercare post-migration. I conducted semi-structured, open-ended interviews with six (n=6) Puerto Rican adults, who were at least 60 years of age and had migrated from Puerto Rico to Cleveland after the age of 60. I additionally conducted participant observation at the Nuestra Senora de las Mercedes Senior Center, where lower-income older Latinx adults gathered during the day to socialize, play bingo, eat lunch, and access social services.

Preliminary research resulted in three key findings. First, participants identified two competing visions of a good old age. Participants described a good old age emphasizing material resources (e.g. safe housing, healthcare, social services), which they tended to associate with Cleveland and the United States as a whole. They also described a good old age emphasizing social connection and family, which they tended to associate with Puerto Rico.

Second, participants negotiated these two competing good old ages through migration.

For example, participants reported migrating to Cleveland to mitigate risks in Puerto Rico posed by poverty, insufficient access to social and medical services, and Hurricanes Irma and María.

Once in Cleveland, however, participants encountered a number of new risks, such as social isolation due to limited English proficiency and separation from family. As they narrated hopes for the future, participants suggested that they hoped to return to Puerto Rico to experience good old ages emphasizing social connection.

Third, many participants reported that they had migrated between Puerto Rico and the United States throughout the life course. I had originally intended to study why older Puerto Rican adults migrated to Cleveland after the age of 60 and how they negotiated eldercare post-migration. Preliminary findings, however, revealed that for many older Puerto Rican adults

there were no pre- and post-migration categories. The back-and-forth nature of Puerto Rican migration necessitated a life course approach.

San Juan Study

Based on findings from the preliminary Cleveland study, I conducted a second preliminary study in San Juan, Puerto Rico. The objectives were to 1) prepare for a multi-sited dissertation study, examining the experiences of older adults who returned to Puerto Rico in addition to the experiences of those who stayed in Cleveland; and 2) examine how recurrent migration throughout the life course shapes older Puerto Rican adults' experiences of aging. In San Juan, I conducted nine (n=9) life history interviews with older adults who had migrated over the life course. I also conducted six (n=6) semi-structured interviews with staff, while conducting participant observation at senior centers, retirement communities, and nursing homes.

Preliminary research resulted in two key findings. First, San Juan findings suggest that migration narratives parallel those of the Cleveland study, in that participants reported migrating to the US largely to pursue material resources, and then returned to Puerto Rico to pursue social connection and belonging. Reasons for migration, however, varied by the life stage at which migration occurred. For example, young adult migration to the US mainland tended to be associated with economic opportunity, while mid- or later-life migration to the mainland was associated with access to medical care, the effects of Hurricane Maria, and the desire to reunite with children who had already migrated. Participants additionally stressed the importance of returning to Puerto Rico in old age to meet the end of life in their homeland.

Second, Older adults emphasized the importance of *la tranquilidad*, or peace, which they defined as financial stability and harmonious familial and social relationships. Both of these themes were reiterated during staff interviews. The search for *tranquilidad* and stability may also reflect a response to a life of movement and precarious economic circumstances.

Dissertation Research Methods

This research employs a remote ethnographic research design (Postill 2017) to investigate two questions:

How do older Puerto Rican adults conceptualize subjective good old ages?
 How do im/mobility regimes relate to older Puerto Rican adults' conceptualizations, pursuits, and experiences of subjective good old ages?

Field Site

This research took place remotely among the Puerto Rican diaspora in the Greater Cleveland area. While the Puerto Rican diaspora in Ohio has been largely overlooked— with studies focusing on New York, Chicago, and Miami—Puerto Ricans have been migrating to Ohio since the post-WW2 industrial boom (See Chapter 2 for overview). As of 2019, Ohio had the tenth largest concentration of Puerto Ricans in the United States (Center for Puerto Rican Studies 2021).

The Puerto Rican population in Cleveland is concentrated on the Near Westside, especially in the Clark Fulton, Ohio City, and Tremont neighborhoods (Benedict and Kent 2004). This research focused on the Near Westside of Cleveland. However, when the study pivoted to a remote ethnographic design during the COVID-19 pandemic, the selection criteria were broadened to include those residing in the Greater Cleveland area, defined as Cuyahoga County. Selection criteria were broadened for two reasons. First, the remote design meant that

research activities were less bound to geographic place (e.g. conducting in-person fieldwork in one or two neighborhoods). Second, remote sample recruitment had a number of limitations, which are addressed in "Part 2: Older Adult Interviews." Broadening the selection criteria to the Greater Cleveland area reduced barriers to participation. In the remainder of this section, I present the demographic characteristics for the Puerto Rican population in Cleveland and then for the Puerto Rican population in the Greater Cleveland area. Note that I use the 2015 American Community Survey for all statistics because Puerto Rican-specific statistics are not available for more recent years.

In Cleveland, the Latinx population comprises 10.6 percent of the total population of 388,059 residents. Puerto Ricans are the largest Latinx group in Cleveland, comprising 73.7 percent of the Latinx population and 7.8 percent of Cleveland's total population. Older Puerto Rican adults, ages 60 and over, make up 8.1 percent of Cleveland's Puerto Rican population. Forty-two percent of Puerto Ricans in Cleveland live below the poverty level. Among older adults, the percentage is slightly lower: 38.6 percent of Puerto Rican adults ages 65 and over live below the poverty level. Regarding living arrangements, 13.7 percent of Puerto Rican households in Cleveland have one or more people at least 65 years of age. Of these households, 47.4 percent are single-person households, meaning that almost half of older Puerto Rican adults in Cleveland live alone (US Census 2015).

In the Greater Cleveland area (defined as Cuyahoga County), the Latinx population comprises 5.6 percent of the total population of 1,255,921. Puerto Ricans are the largest Latinx group, comprising 59.5 percent of the Latinx population and 3.3 percent of the Greater Cleveland area's total population. Older Puerto Rican adults, ages 60 and over, make up 7.4

percent of the Greater Cleveland area's Puerto Rican population. Thirty-six percent of Puerto Ricans live below the poverty level. Among older adults, the percentage is slightly lower: 34.3 percent of Puerto Rican adults, ages 65 and over, live below the poverty level. Regarding living arrangements, 12.7 percent of Puerto Rican households in the Greater Cleveland area have one or more people at least 65 years of age. Of these households, 46.8 percent are single-person households, meaning that almost half of older Puerto Rican adults live alone.

Sampling and Data Collection

This research employed a purposive, respondent-driven sampling strategy (Bernard 2011) to recruit service providers, older Puerto Rican adults, and family members. Purposive sampling generates information rich cases for study in depth, enabling the researcher to learn about issues of central importance to the study purpose (Patton 1990). Respondent-driven sampling is a network sampling method for studying hard to find groups. Research participants are asked to recruit members of their networks into the study (Bernard 2011). Purposive, respondent-driven sampling was the most appropriate sampling strategy for this study because it ensured that all research participants shared the cultural pattern of interest (e.g. migrating from Puerto Rico to the Greater Cleveland area). Data collection occurred remotely over 10 months (January 2021-October 2021) in the Greater Cleveland area. This research employed semi-structured, open-ended interviews and life history interviews. All data collection procedures were carried out in Spanish or English, according to participants' preferences. All interview guides are available as an appendix to this dissertation.

Table 2. Dissertation Research Activity by Month

	Part 1: Service Providers (n=9)														
		Par	Part 2: Older Adults (n=24)												
		Par	Part 3: Family Members (n=7)												
				Data Analysis											
Research Activity by Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	
Sample Recruitment	Х	х	х	х	х	х	х	х	х						
Semi-Structured Interviews		Х	х	Х	х	Х	Х	Х	Х	х					
(n=40)															
Life History Interviews (n=24)			х	Х	х	х	Х	Х	Х	Х					
Transcription and Coding								Х	Х	х	х	Х	Х	Х	

Part 1: Service Provider Interviews (January-April 2021)

Sample. A purposive sample of nine (n=9) service providers from social service agencies, senior centers, senior housing complexes, and a private therapy practice in the Greater Cleveland area were recruited remotely. Three were recruited through a direct email message, four were recruited through participant referrals, and two were contacts established during preliminary research. To be included, service providers had to be at least 18 years old and work with older adults or the Latinx population in Cuyahoga County.

The service provider sample included service coordinators, directors, community engagement coordinators, a social insurance specialist, and a clinical psychologist. The average age of the sample was 49 years. The sample was 100 percent female. The majority identified as Puerto Rican (67%), followed by non-Hispanic white (22%) and Guatemalan (11%). Duration of residence in Cuyahoga County ranged from 6.5 to 57 years, with an average duration of 29 years.

Data Collection. <u>Semi-structured</u>, <u>open-ended interviews</u> were conducted with nine (n=9) service providers in the Greater Cleveland area. Interviews were conducted over the

phone and through Zoom. Interviews elicited service providers' perspectives on aging in general and specifically among Puerto Ricans in the Greater Cleveland area, including provision of services and care, benefits and challenges of aging in respective locations, and cultural beliefs related to old age. Interviews also elicited perspectives on migration, family relationships, and the impact of the COVID-19 pandemic on older adults. Interviews lasted approximately one hour.

Part 2: Older Adult Interviews (February-October 2021)

Sample. A second purposive sample of twenty-four (n=24) older Puerto Rican adults in the Greater Cleveland area were recruited remotely. Remote recruitment had limitations. Directly recruiting older adults through social media was not feasible, as the older Puerto Rican population in the Greater Cleveland area has limited access to the internet and social media. And unlike service providers, their contact information is not posted publicly. I addressed these limitations in four ways. First, I posted in Spanish and English to Puerto Rican Facebook groups targeting the middle-age children of older Puerto Rican adults, who were more likely to have access to the internet and social media. The middle-age children, in turn, recruited their parents to my study. I recruited seven participants using this strategy (four older adults responded to the Facebook post directly, three were recruited through their children). Second, I asked local service providers (including the service provider sample and others who did not formally participate) to refer older adults to my study. Two service providers included my study flyer in monthly COVID-19 care packages for older adults, two distributed flyers at apartment complexes for low-income older Latinx adults while they were working, and another provided me with the contact information of older adults who agreed to participate. I recruited four

participants using this strategy. Third, I distributed flyers at Puerto Rican restaurants, senior centers, and churches when they re-opened in July and August 2021 after the COVID-19 shutdown. I recruited six participants using this strategy. Fourth, I requested all study participants to identify one or two potential participants who met selection criteria. I recruited seven participants using this strategy.

To be included, older adults met the following criteria: 60 years of age or older, born in Puerto Rico, currently reside in Cuyahoga County, and have at least one child. Those with cognitive impairments were excluded. While selection criteria allowed for a large age range (60 years and over), the sample was not stratified by age, as it has not been found to correspond to life stage or well-being (Rubenstein, 1990). Older adults were required to have at least one child in order to explore family relationships.

The average age of the older adult sample was 70 years (ranged from 60 to 85 years). The sample was predominantly female (83%). Thirty-eight percent were widowed, 25 percent were divorced, 25 percent were married, and 13 percent were married but separated. Living arrangements were mixed, with the majority residing in single family homes (50%), followed by senior apartment complexes (38%), and other residence types including mobile homes and duplexes (12%). Nearly half lived alone (46%). On average, the sample had three children. The majority identified as Catholic (58%), followed by Pentecostal (29%), and other (13%). The majority were retired (83%), reported receiving social security benefits (75%), and reported receiving other social services (58%). A minority reported requiring daily assistance (17%). One hundred percent spoke Spanish. The majority (79%) did not speak English or did not speak English well.

Regarding backgrounds, the sample predominantly came from poor families in rural areas of Puerto Rico. They grew up in large families with an average of 8 children. Their fathers were agricultural workers (38%), followed by tradesmen (25%), government employees (13%), maintenance professionals (8%), service industry workers (8%), and factory workers (4%). One father was absent. Their mothers were predominantly homemakers (63%), followed by factory workers (17%), laundry washers (13%), and midwives (4%). One mother was absent. As for highest level of education obtained, 42 percent of the sample had less than a high school education; 33 percent received a high school diploma or GED; and 25 percent attend vocational school or college. Careers were mixed. The majority were factory workers (50%), followed by office employees (17%), nursing or caretaking staff (13%), housekeepers (8%), agricultural workers (4%), and utilities police officers (4%). One was never able to work due to a disability. They had all migrated to the Greater Cleveland area through a range of pathways. On average, they had spent 27.25 years in Cleveland, though not necessarily consecutively

Data collection methods. <u>Semi-structured</u>, <u>open-ended interviews</u> were conducted with twenty-four (n=24) older adults. Interviews were conducted over the phone and through Zoom in English and Spanish, according to the participant's preference. Interviews began with the structured collection of demographic information, including age, gender, race, ethnicity, language, job, marital status, number of children, retirement status, residence type, and types of social services and care received. Interviews elicited perspectives on how older adults and families negotiate "good" lives in contexts of migration and how COVID-19 has influenced migration, family dynamics, and the ability to achieve "good" lives. Interviews collected information on migrations, beliefs about aging and eldercare, the role of older adults in

families, meanings of a good life in old age, quality and quantity of family relationships, health and mobility, meanings of aging well, moral ideals, and how participants' current realities align or do no align with ideals. Interviews lasted approximately one hour.

Life history interviews were also conducted with the older adult sample. Life history interviews are tools for accessing cultural models, discourses, and self-fashionings (Fischer 1991), which are embedded in retrospective descriptions of the major phases and events of participants' lives. Interviews began with a "migration history," or a list of all the cities in which participants lived for one year or more and the age at which they moved. Migration histories were then used to structure the interview. Interviews moved chronologically throughout the life course, pausing at every instance of migration. Interviews then delved deeply into the experience of that migration, including reasons for migration, potential discrepancies between pre-migration expectations and post-migration experiences, challenges encountered, feelings of social inclusion or exclusion, and how migration influenced participants' identities and senses of self. Interviews also elicited older adults' hopes and plans for the future. All questions were open-ended, except for the use of one likert scale question. For each city in which they had lived for one year or longer, older adults rated their sense of belonging using a 1 to 5 scale. A score of 1 indicated "I felt that I did not belong," while a score of 5 indicated "I really felt part of the community." Life history interviews were scheduled after the participant completed the semi-structured interview. Life history interviews lasted 1-3 hours.

Part 3: Family Member Interviews (February-October 2021)

Sample. A third purposive sample of seven (n=7) family members of older Puerto Rican adults were recruited remotely. Three participants were recruited by posting in Facebook

groups (as described in "Part 2: Older Adult Interviews"). Four participants were referred by members of the older adult sample. To be included, family members met the following criteria: 18 years of age or older, identify as Puerto Rican, and be related to one of the members of the older adult sample. Family members were not required to reside in Cuyahoga County in order to allow multiple family living arrangements to be represented.

The average age of the family member sample was 49 (ranged from 33 to 60). Regarding the relationship to members of the older adult sample, six were daughters, one was a son. The majority resided in Cuyahoga County, Ohio (71%), followed by Lorain County, Ohio (29%). They were born in Ohio (29%), Puerto Rico (29%), New York (29%), and Pennsylvania (13%).

Data collection methods. Semi-structured, open-ended interviews were conducted with seven (n=7) family members. Interviews were conducted over the phone and through Zoom. Interviews began with the structured collection of demographic information, including age, gender, race, ethnicity, language, job, marital status, and number of children. Interviews elicited perspectives on how older adults and families negotiate "good" lives in contexts of migration and how COVID-19 has influenced migration, family dynamics, and the ability to achieve "good" lives. Interviews collected information on migrations, beliefs about aging and eldercare, the role of older adults in families, meanings of a good life in old age, quality and quantity of family relationships, health and mobility, meanings of aging well, moral ideals, and how participants' current realities align or do no align with ideals. Interviews lasted approximately one hour.

All interviews were digitally recorded by audio recorders. English interviews were transcribed verbatim using Trint, an automatic transcription service. Spanish interviews were transcribed verbatim by a Spanish-speaking transcriptionist. I verified all interview transcripts to ensure accuracy.

This project employed thematic analysis (Bernard 2011; Schensul, Schensul, and LeCompte 1999), which emphasizes organization and rich description of the data set to address Questions 1-2. Using the qualitative data analysis software, NVivo 12, three code types were systematically applied to interview transcripts: 1) structural codes, describing features of participants; 2) inductive thematic codes, emerging from the data; and 3) deductive thematic codes, selected beforehand and derived from theory and preliminary research findings (Bernard, Wutich, and Ryan 2017). Examples of deductive thematic codes include good old age and *la tranquilidad* (including descriptions of places, people, and feelings as tranquil).

The transformation of coded data into ethnographic findings was both deductive and inductive. It was deductive, in that I focused on the themes of a good old age and migration decisions from the outset. It was inductive, in that interview questions were open-ended, meaning that I did not know how participants would respond. Themes emerged that I did not anticipate. The inductive nature has important implications for how I present my findings.

When possible, I provide the number of participants, expressed as a percentage, that identified a given theme. For example, in Chapter 5, I note that 46 percent (n=11) of older adults mapped the value of good health onto the United States. This means that 46 percent identified the theme of good health in the United States, in response to open-ended questions about aging

and migration. It does not mean that the remaining 54 percent of older adults mapped poor health onto the United States. The fact that 46 percent of participants brought up the theme of good health in relationship to the United States highlights the theme's importance. I draw on data obtained through semi-structured interviews and life history interviews with service providers, older adults, and family members to address Questions 1-2.

Ethics

This study was approved by Case Western Reserve University's Institutional Review Board. Participants provided verbal informed consent before participating. Participants did not provide written informed consent because consent procedures and interviews were carried out remotely. Participants were compensated for their time with one \$25 Visa gift card per interview completed. To protect confidentiality, all names of participants and senior centers in this dissertation are pseudonyms.

Chapter 4

The Meaning of a Good Old Age

A retired factory worker and self-proclaimed mother to everyone, Sylvia, age 81, lives alone in a state-subsidized apartment building for older adults in the Detroit-Shoreway neighborhood on Cleveland's west side. She hails from Yauco, a rural Puerto Rican municipality known for coffee production and strong ties to Cleveland. After decades of moving between New York City and Puerto Rico, Sylvia moved to Cleveland at the age of 66 because it is "mas tranquilo"—calmer, more tranquil, and therefore a more appropriate location for older adults.

During an interview on a humid afternoon in August 2021, Sylvia again emphasized the importance of feeling *tranquilo*, but this time in reference to a good old age:

Vivir una buena vida es vivir tranquilo [Living a good life is living tranquily], without worries. It is a little difficult, but I believe that you have to look to yourself and amidst difficulties, the things that happen to us, we have to be prepared and try to find things that distract us. Like I do brain teasers...so that I do not think about the problems that currently affect us.

By "problems that currently affect us," Sylvia referred to the Covid-19 pandemic. She continued: "Distract your mind with something, whatever it is...do something to forget if you are in a situation."

"You mentioned having a tranquila life. What does that mean?" I asked.

"That is the most wonderful feeling that there is—to feel *tranquilo*, relaxed," Sylvia replied. "That nothing worries you. For me, that would be having a *tranquila* life. That you are well-treated, that you feel loved, you feel wanted, that your grandchildren or children visit and hug you and they tell you how much they love you. Yes, that is wonderful and to know that they are there for you, from that perspective I am *tranquila*."

I probed further: "When you say 'nothing worries you,' do you have particular worries in mind?"

"Sometimes worries pop up, there are times when you get sick. I have gotten sick many times. Sometimes I do not tell them [my children] because I do not want them to worry," Sylvia explained, shifting the meaning of "no worries" from the absence of problems in her own life to avoiding becoming a source of worry for her children.

Tranquil Old Ages

The desire for a tranquil life in old age was a salient theme in my research with older Puerto Rican adults in the Greater Cleveland area. Like Sylvia, older adults conceptualized good old ages through the value of la tranquilidad. The Spanish term is directly translated as tranquility, but has multiple uses. For example, it is common in Spanish to tell someone to be tranguilo (i.e. to be calm, to not worry), to describe a place as tranguilo (i.e. tranguil, peaceful), or to describe a person as tranquilo (i.e. even-tempered). In interviews, the value of tranquilidad took on additional meanings as older adults described their desires for old age. They identified three key components to the ideal good old age, which I henceforth refer to as a tranquil old age: 1) relational harmony, 2) meeting basic needs, and 3) no problems, no worries. While 58% (n=14) of older adults directly used the term tranquilidad or a variation in describing a good old age, I use the phrase "tranquil old age" to encapsulate the themes of relational harmony, meeting basic needs, and no problems, no worries, even if the specific term was absent. 100% (n=24) of older adults identified one or more of these broader themes. Note that I never used the terms "tranquilidad" or "tranquilo" in interviews unless it was first raised by the participant.

In this chapter, I first explore how older adults envisioned tranquil old ages characterized by relational harmony, meeting basic needs, and no problems, no worries. I then examine how desires for tranquil old ages manifest in two domains deemed important for

older adults' well-being: care and residence.

Relational Harmony

Ninety-two percent (n=22) of older adults envisioned tranquil old ages characterized by relational harmony, or living in peace among family, friends, and neighbors. Living in peace among family, friends, and neighbors had several dimensions. Older adults emphasized loving familial relationships, the absence of conflict, and social connection.

Loving familial relationships. First, older adults reported feeling *tranquilo* when they experienced love and intimacy with family members. Sylvia's definition of a good old age, with which I opened this chapter, emphasized feeling loved by her children and grandchildren. Sylvia connected love to in-person contact. She longed for her three living children to be near her always, although she recognized this was impossible. Two of Sylvia's children lived in Cleveland, one resided in Texas, and two had passed away. She remembered her son's visit from Texas, which was the last time her three living children were together, as the "most wonderful three days."

Similarly, Angelita, age 71, emphasized loving relationships with family in her definition of a tranquil old age: "What does a good old age mean? Have love, when we are old...it is to be loved in order to be able to continue to be happy in life until your last day. For me, it's that.

Because if I don't have love, I am nothing...When [my daughter] comes to visit me, I am happy, but when she leaves, I am sad because she is part of me...When I see my children, I am happy."

Sylvia, Angelita, and many other older adults tied the experience of loving relationships to proximity. They wanted their children, grandchildren, and other family members to be near them. But older adults also reported maintaining intimate relationships with family from a

distance. They communicated through phone calls, text messages, and Facebook with family members in Puerto Rico and scattered across the United States. For example, Juan, age 72, drew on the image of tentacles [nosotros somos unidos por todos los tentáculos] to describe how he maintained a strong bond with his children and siblings even though they lived in Massachusetts and Puerto Rico. He proudly cited his children calling him three to four times per day, seven days per week as evidence of family unity.

The centrality of loving family relationships to a tranquil old age was highlighted by the pain and distress caused by its absence. Ana María, age 85, defined a good old age as "feeling mentally tranquila, not having worries about anything, even though there are things that torment you, things happen in the family that hurt you." As Ana María described her family relationships, the torment became clear. She asserted that she had no family: Ana María's oldest son had passed away, as well as 9 of 11 of her siblings. She described her remaining son, who lived in New Jersey, as uncommunicative. "I don't believe we have [a good relationship]. Just one phone call every fifteen days and it's been a year since we've seen each other...For me, a good relationship is when we're communicating with one another daily." Other older adults who perhaps felt close to their own families often pointed to situations like Ana María's as the reason that older adults they know do not live tranquil old ages. They mourned for older adults whose children did not visit or help them, as well as for those who were alone because their family members had died. According to Marisol, age 68, many older adults do not live a tranquil old age because "they're totally alone, perhaps because no one cares about them. Like family members, it's like they've set them aside. They don't have anyone to assist them in a given moment. I've seen [older adults] sad, saying 'my sister, my daughter doesn't talk to me,

my brother doesn't talk to me.' Sometimes even when they're living in the same place."

Absence of Conflict. Second, older adults reported feeling *tranquilo* when they could avoid conflict. Several older adults referenced the importance of not having problems with people in general. In the words of Rosario, age 75, "Being *tranquilo* is no one bothers you." But, more important was not having problems with family members. Older adults expressed concern about how familial conflict would impact their quality of life in the present, as well as how they would be remembered after death. For example, Cel, age 70, defined a tranquil old age as "No problems. No bad situations." He elaborated, "you don't want to be arguing with anybody and you don't want to have no, you know, your kids, you don't have no problems with them. They're all doing fine." Similarly, Héctor wished to avoid creating problems for his family. He emphasized the importance of leaving behind "good ways" for his wife, children, and grandchildren. "It's very important for me to minimize my wrongdoings and not put myself and my family in a situation that I had control, but I lost my ability to control it."

Sometimes avoiding conflict meant removing family members or types of relationships from one's life, rather than resolving issues. In describing their hopes for a tranquil old age, several older women, who had been widowed or divorced, indicated they would never remarry after experiencing abusive relationships in the past. Myrta, age 63, was the most ardent supporter of the single life, passionately recounting how she had at last found *tranquilidad* after two divorces. This new-found peace was the most important quality of a good old age, from her perspective. Myrta's explanation was rooted in the experience of being married to men who she characterized as abusive and demanding: "Mental peace is worth a lot, *la tranquilidad* is worth a ton. Let me tell you, peace and *tranquilidad*—don't change them for

anyone, I would say. I am *tranquila*, you know, and no one bothers me and I don't bother anyone...I got divorced in 2017...I want to spend my life *tranquila* because men say 'bring me water, what are you making for dinner?'...You know that men mess up everything." Feeling *tranquilo* in old age, therefore, was not simply a matter of cultivating the positive aspects of relational harmony—that is, loving familial relationships; it was also a matter of cutting out the negative—or avoiding conflict and problems with family members.

Social connection. Third, older adults reported feeling *tranquilo* when they enjoyed social connection. Family members were not the only source of love and intimacy in older adults' lives. They valued the friendships they had established at the local senior center, at church, and in their neighborhoods and apartment buildings. Ana María, who had asserted that she had no family, moved to Puerto Rico from Cleveland at the age of 84 in search of social connection. But when she found Puerto Rico's healthcare system unable to meet her needs, she returned to Cleveland four months later with no belongings. She recalled how her friends in Cleveland supported her, as she described her vision of a tranquil old age: "[A good old age is to]...feel happy, loved by the world...I feel happy because, through God's blessings, when I moved I had nothing. When I left [Cleveland], I gave everything away, and when I returned [to Cleveland], my apartment was full. It was full of food. I saw how people valued me." Other older adults relied on their friends for rides to doctors' appointments, meals, and companionship.

One place where older adults experienced social connection was at Cleveland's Nuestra Señora de las Mercedes Senior Center, which served low-income, Latinx adults. They described the senior center as their "second place," "therapy," and a "tranquilo place." At the senior

center, older adults played bingo, engaged in exercise, worked on arts and crafts projects, shared meals, and conversed with other Spanish-speaking older adults. The center also took older adults on occasional field trips and hosted celebrations, featuring lively salsa, merengue, and bachata dance parties with Puerto Rican food and sometimes singing performances from older adult participants. Participating in these social activities was important to older adults. Ricardo, for example, believed that participating in social activities served as evidence that he was not yet an old person. With a laugh he explained: "If I want to dance, I dance and chat with other people. I like to chat with people who are older than me so that they teach me more about the past." Sonia was another regular participant at the senior center, who I first met during preliminary fieldwork in 2018 and reconnected with during the pandemic for remote interviews. She felt *tranquila* at the center and similarly credited her love for dancing there for making her feel young.

Older adults, thus, derived great pleasure and meaning from their social and familial relationships. These relationships factored prominently in older adults' conceptualizations of tranquil old ages. Older adults reported feeling *tranquilo* when they experienced loving relationships with family—either in person or through frequent phone calls, texts, and Facebook messages; when they avoided conflict; and when they participated in social activities. Conversely, lack of communication and conflict with family members caused distress and dissatisfaction.

Meeting Basic Needs

Ninety-two percent (n=22) of adults envisioned tranquil old ages based, in part, on the ability to meet their basic needs. It was common for older adults to describe tranquil old ages

humbly, with comments like: "A good life is eating, sleeping, and bathing...tranquilamente" or "I have food to eat...I don't have to cook, I live tranquila." The desire to meet their basic needs, however, centered around good health, safe environment, and the financial resources to maintain these items.

Health. First, older adults associated tranquil old ages with good health. At first glance, the desire for good health in old age was straightforward. Older adults stressed the importance of avoiding disease, delaying physical decline, and occasionally identified cognitive impairment as a threat to tranquil old ages. Actually experiencing good health in old age, however, was seemingly contradictory as many older adults equated old age with poor health and physical decline. They described old age as a time of disease and loss of strength and energy, resulting in the reduced ability to complete daily life tasks. Many older adults attributed decline to the arrival of los achaques—or aches and pains specifically tied to aging. For example, Marisol, age 68, conceptualized old age as a time "when you no longer can do the things you used to do...either because of a disease or some condition." Correspondingly, Marisol defined a good old age as "living without disease, without los achaques ... I believe that is part of feeling older...Your body doesn't respond how it should because of sickness. Well, I think los achaques have a lot to do with that." For similar reasons, Graciela declared she wished she could avoid aging altogether. At age 69, she worried that growing older would induce physical decline: "Old age worries me because, imagine, when you're elderly...you don't have abilities, or energy, or health, you don't know if you'll see the future...the only one who knows is God."

Consequently, older adults hoped to circumvent health problems as they grew older.

Alma, age 73, defined a tranquil old age as "a life without worries, or at least, nearly without

worries. A life in health. For me, that is a *tranquila* life. That you enjoy life in peace, *tranquilos*, in health." Others went so far as to say that they desired a long life, provided that they remained in good health. Marquita, age 71, for instance, said she hoped to "live a long time," pausing to clarify, "in good health." Good health was of utmost importance to Alma and Marquita. Although both women considered themselves healthy, they had experience as long-term caregivers of loved ones with health issues. Alma cared for her husband with dementia, a situation she wish had never occurred: "it is better to spare yourself," she confessed. Similarly, Marquita had been the caregiver for her father before he died from prostate cancer.

Other older adults accepted that physical decline and disease were part of getting older, but reasoned that should not prevent older adults from completing basic life tasks or maintaining a rich social life. Angelita, age 71, humorously summarized old age as a time of doctors' appointments: "My black book used to be full of friends, now it's just doctors." From Angelita's perspective, growing older was marked by new physical limitations. Older adults were stuck at home, often calling doctors. Sometimes they could not drive or go where they desired. They could not walk as far as they used to. Despite identifying these limitations, Angelita insisted that older adults keep living their lives: "We have to keep moving forward. We cannot stop because life doesn't stop even if we have thousands of problems and needs."

Yolanda, age 61, echoed this sentiment of persevering in spite of aches and pains. In fact, this was central to how she conceptualized a good old age: "A good life in old age? I think you should not limit yourself because of your age. As far as you can do things, still do things and move around. Don't depend on other people. And that's me, you know, I don't depend a lot. I do everything, thank you, Lord. So I think it's really how you feel." I probed for what feelings

would indicate that she had a good life, and Yolanda elaborated, "I mean, if I can get out of bed in the morning and do my usual and go to work and not like if I feel a little pain, like in my right hand or a headache, I'm going to say, well, I'm going to stay here today. No. Because I think once you start doing that, you are going to make a habit of it." Yolanda made it a point to continue to move around and complete her tasks, regardless of how her body felt. For this subset of older adults, recognizing and overcoming physical decline and disease were essential to experiencing tranquil old ages.

Regardless of an orientation toward circumventing or persevering, older adults believed maintaining good health was important because it had implications for independence and social participation. For example, Annie, age 69, defined a tranquil old age as: "having good health, being able to participate in things. If there is a party, being able to go. Not having any impediment to participating in family events or things you're invited to." She clarified that "impediments" referred to physical and mental barriers to participation, and she noted that being unable to complete daily tasks, like chores and walking, is a sign that one is growing older. Similarly, Rosario, age 75, believed she was not old because she could "do any activity, help with any activity." Older people, from her perspective, "cannot do anything." Thus, good health allowed older adults to continue participating in social and practical activities.

The ability to participate in social and practical activities also seemed to affect whether older adults considered themselves healthy and whether they considered themselves old.

While analyzing interviews, I was puzzled by how the majority of older adults (67 percent) considered themselves to be generally healthy and considered themselves to be healthier than their friends of a similar age, even when listing multiple health problems. For example,

responses like Sonia's was a common one: "I consider myself healthy. Sometimes I have my achaques, sometimes I get sick...I'm always a little achacosa because los nervios, back pains, ...I have arthritis in my neck, in my back." The majority of older adults (79 percent) also did not consider themselves to be old, even when they equated old age with disease and physical decline, and admitted to having several diseases or aches and pains themselves. The relationship between social participation and health helps us to understand this apparent contradiction. Sonia, who considered herself healthy despite experiencing achaques, also did not consider herself to be old. She pointed to her two sisters as examples of being old because they always complained about their aches and pains: "One always has un achaque, it hurts here, it aches there, all of that." Although Sonia had previously described herself as having achaques, and although she later revealed that she was losing her vision, she claimed she was not old for one simple reason: "I like to dance. Girl, I go crazy dancing." She referenced the parties hosted at the senior center: "I kill myself dancing, I don't miss a single song...I dance, like you've seen, like a spinning top." Sonia's ability to participate socially through dance seemed to alter her self-perception. She was healthy, she was youthful because she danced. Experiencing good health as part of a tranquil old age was not necessarily tied to an objective measure—for example, the presence or absence of disease. It also involved the feeling of good health as it relates to older adults ability to participate socially.

Older adults, therefore, envisioned tranquil old ages characterized, in part, by good health. Some wished to circumvent disease and physical decline altogether, while others accepted that disease and decline were part of growing older. They focused instead on persevering, on not allowing physical changes to limit them. Regardless, health had important

implications for independence and social participation. And being able to participate socially helped older adults feel healthy.

Safe environment. Second, older adults associated tranquil old ages with a safe environment—places where they felt stable, protected from harassment, and had access to help when necessary. Nilda, age 74, for example, stressed the importance of feeling safe in her home in her definition of a tranquil old age: "being tranquilo, stable in a place like what I have here [referring to a subsidized apartment complex for older adults]. An apartment where, if I need help, help will come quickly because they have tools, telephones to call help and nurses immediately show up." When I probed for what she meant by "being tranquilo," Nilda elaborated that she wanted to feel safe. "For example, if I'm seated in my house, I can watch a show, I can eat something tranquila, I don't feel harassed... a younger person doesn't show up to bother me." Her concerns about harassment were rooted in the experience of witnessing younger people try to take advantage of other older people she knew. Rosario echoed the desire to feel safe. She defined a tranquil old age as "being tranquilo, no one bothers you, you have everything at hand, everything is made easy for you. That's where la tranquilidad comes from. If you have everything around you, you will be tranquilo."

Finances. Third, older adults associated tranquil old ages with having the financial resources to meet their basic needs. Notably, older adults did not focus on abundance. Instead, they expressed desires to take care of themselves and their families, recognizing the inability to do so was a heavy burden. For example, Gladis explained that "the financial aspect plays a part [in a tranquil old age] because you have no way to meet your needs. That takes a toll not only on me, on anybody. And it's not about having a nice house and a nice car. It's not all that. It's

about for me thinking, what is the legacy that I'm passing onto my children and grandchildren."

Similarly, Angelita recognized that financial issues made health problems even more difficult.

For her, living a tranquil old age was complicated by the fact that when she retired and started receiving social security, she made less money. She explained that resulting money shortages made health problems more burdensome.

Older adults, thus, envisioned tranquil old ages in which they were able to meet their basic needs. They emphasized the importance of good health, a safe environment, and the financial resources to take care of themselves and their families. Often, these themes were interconnected. Financial resources impacted access to healthcare and safe housing, and health problems strained financial resources.

No Problems, No Worries

Fifty-eight percent (n=14) of older adults envisioned tranquil old ages characterized by having no problems or worries. They often referenced general desires for "spending old age without problems, without difficulties," "living without so much worry," and "not suffering from fear." These desires were intertwined with relational harmony and meeting ones basic needs, as family issues, health problems, and finances were the primary causes of worries. The theme of no problems or worries warrants its own section, however, because of how often older adults employed that specific wording to describe tranquil old ages and how older adults identified not worrying—or not letting problems get to them—as a strategy for experiencing tranquil old ages.

Older adults desired to avoid problems and worries in old age, especially those related to family. As discussed in the first section, relational *disharmony*—including interpersonal

conflict and lack of communication with family—prevented older adults from feeling tranquilo. Some older adults utilized the language of "no problems, no worries" to explore the relationship between relational harmony and tranquil old ages. Take for example Juan, who believed la tranquilidad was the most important component of a good old age. La tranquilidad, in Juan's experience, was inconsistent. Reflecting on his life circumstances, he assured me (and perhaps himself), "I'm tranquilo, I live as well as I can." But minutes later, Juan confessed that he was not tranquilo. The reason was tied, in part, to relational disharmony. "My only complaint regarding my old age is my familial environment...that is, the ones that are closest to you give you problems, when your children...," Juan explained before stopping himself. He continued vaguely referring to "problems" that "one shouldn't have...one is fragile and thinks more and it takes up a lot of time." Juan later revealed that "problems" referred to the strained relationships he had with his daughter and his ex-wife. "These situations cause a lot of pain, they cause one to think." For Juan, a tranquil old age was tied to no worries or problems in his family. Sometimes feeling tranquilo implied accepting problems ("I live as well as I can"); sometimes feeling tranquilo meant not experiencing familial problems. Familial problems caused older adults to "think" — to worry—which they framed in opposition to tranquil old ages.

The theme of no problems or worries also included health issues. For example, María, age 66, defined feeling *tranquilo* in old age as "not having problems in the mind, living a *tranquila* life in the time you have left. As of today, I have a *tranquila* mind, but I also think a lot about *los achaques* that are coming. I think about them." Like Juan, María framed thinking—or worrying—in opposition to tranquil old ages. But her worries focused on the aches and pains of

aging that she believed were around the corner. Lourdes, age 75, also connected worrying to the aches and pains of aging; however, her emphasis was on not allowing these worries to get to her. "In my opinion, living a good life in old age...First, forget that you have pain!" she commanded with humor and conviction. "Life will be chaos everyday if you're complaining about pain. Forget that you have pain." Lourdes conceded this was easier said than done for those with Alzheimer disease and diseases that inhibit mobility. But she believed it was important to maintain a positive mindset, regardless of the health problems one encountered: "Be positive, believe in God and believe that while God has you, life continues." In her comments, Lourdes connected the hope of no health problems to the action of not worrying. She echoed the earlier theme of persevering despite health problems or physical decline, with an explicit focus on not allowing health problems to affect her mentally or emotionally. For Lourdes, who was a devout Catholic, trusting God was an important piece of this puzzle.

Many older adults explicitly identified not worrying as a strategy for experiencing tranquil old ages. They asserted that older adults need to remain mentally *tranquilo*—to forget about their problems, refrain from thinking too much, and ultimately not allow their problems to affect them mentally and emotionally—in order to enjoy tranquil old ages. For example, when Angelita reflected on her life, she noted that she had survived many "lows": childhood sexual abuse, a divorce, unemployment, the deaths of her siblings and parents, and two hurricanes in Puerto Rico—one as a child, the second being Hurricane María in 2017. All were profoundly sad events. But Angelita believed she had a good life. "Do you know why my life is all good?" she asked. "Because I'm talking with you now, and everything that was good or bad, it is in the past." Angelita then added, "It's like Celia Cruz sings: *Hay que vivir la vida siempre*

alegre." You have to live life always cheerful.

The idea of staying cheerful and calm despite problems was central to tranquil old ages. Ricardo defined a tranquil old age as "being *tranquilo*...being *tranquilo* is not thinking about this or that, you're relaxed. You don't get flustered, you're relaxed." When I probed for what made life feel relaxing, Ricardo posed a hypothetical scenario in which an older adult dropped something on the floor. He advised: "Just pick it up calmly and don't swear, 'ah this or that fell!' For Ricardo, the key to feeling *tranquilo* was not reacting emotionally to inconveniences or problems.

Marquita similar believed staying calm despite problems was important for tranquil old ages. When I asked what it means to have a good life in old age from her perspective, she mused: "Hmm, a good life? Actually that's what everybody tells me that I seem to have—a good life. I just don't worry about anything. I don't let anything bother me...I take life easy." She contrasted her perspective from that of one of her friends, who loses sleep over his children's struggles. "I mean, no sleep is not going to solve the problem. So I do sleep." Marquita clarified: "It's not that I have no worries, but I just don't let it get to me. Because I know thinking about it or letting it get to me, it's not going to solve the situation...When it gets solved, it gets solved and that's it." Marquita's pragmatic outlook, along with that of Ricardo and Angelita, provides important nuance to the theme of no problems or worries. While some older adults envisioned tranquil old ages characterized by the absence of worries or problems, others emphasized not giving in to their worries or problems. That is, they advised staying calm and cheerful, despite problems.

In addition to recognizing that worrying prevented older adults from feeling tranquilo,

some argued that worrying actually accelerated the aging process. Rita, age 60, for instance, claimed that she does "not think [about aging] because it makes [her] older." Ricardo, who recommended picking up a fallen object calmly, stressed that it was important to do things "tranquilamente" because "many thoughts make [him] older." Not worrying or thinking too much, thus, was a strategy for avoiding aging itself.

One might conclude from the repeated admonishments to "not worry" and "not think too much" that older adults lived in denial. I too contemplated this possibility, especially when I asked older adults questions about the most important problems in their lives, as well as their concerns for the future, and found that 50 percent (n=12) denied having current problems or future worries. They maintained that they had "no problems, no worries," even when they discussed problems in their lives elsewhere in interviews (e.g. interpersonal conflict, loneliness, health problems, disabilities). At the very least, they were living through the COVID-19 pandemic. Was that not a problem? While puzzling, I do not believe these findings support the conclusion that older adults denied the reality of their lives. Rather, they show how older adults employed the strategy of not worrying in order to experience tranquil old ages, even in the face of events beyond their control. As I mentioned in Chapter 2, older adults' perspectives on good old ages may reveal their desires and preferences, but they may also reveal what types of lives and futures older adults believe are possible, and what types of lives and futures are closed off due to older adults' broader circumstances. It is therefore important to read older adults' descriptions of good old ages critically, a point that I return to in Chapter 7. For now, I aim to show how the theme of no problems or worries was tied to older adults' conceptualizations of tranquil old ages in a number of ways. They wished to avoid family and health problems, and

when that was not possible, they tried to stay calm, cheerful, and not worry too much. Older adults believed these strategies would ameliorate the mental and emotional toll of their problems and would even deter the aging process. Ultimately, "no problems, no worries" helped older adults feel like they experienced tranquil old ages.

Together, these findings show that older Puerto Rican adults understood a good old age to be a tranquil old age. The ideal tranquil old age encompassed three themes: relational harmony, meeting basic needs, and no problems or worries. These themes are not unique to older Puerto Rican adults, but the use of the words "tranquilo" and "tranquilidad" to discuss these themes suggests a culturally-patterned way of conceptualizing good old ages. Older adults envisioned tranquil old ages in which they experienced closeness with family, but avoided conflicted. They hoped for tranquil old ages in which they were able to meet their basic needs: maintaining good health, safe environment, and adequate financial resources. They desired to spend tranquil old ages with no problems or worries, especially worries related to family and their health. Older adults also acknowledged that is was impossible to avoid all problems and worries. They emphasized the importance of continuing to live their lives, despite health problems, and they resolved to not let their worries affect them.

While I have discussed tranquil old ages in three distinct themes, the themes often overlap. Health, for example, is part of older adults meeting their basic needs, but it also influenced social relationships. Health had important implications for older adults' ability to engage socially (which was part of relational harmony), and older adults' ability to participate socially influenced how healthy they felt. The theme of "no problems, no worries" often overlapped with relational harmony and meeting basic needs, as family conflict and health

issues were the primary causes of older adults' worries.

Care and Residential Components of Tranquil Old Ages

In this section, I explore how desires for tranquil old ages manifest in two domains considered important for well-being in old age: care and residence. I focus on older adults' responses to three open-ended questions: What type of care is best for older adults and why? Who is responsible for caring for older adults and why? And what type of residence is best for older adults and why? In responding to these questions, older adults identified more than their ideal care or residence type. They explored the same tensions between relational harmony, meeting basic needs, and no problems or worries that characterized descriptions of tranquil old ages, but in the specific domains of care and residence. I also draw on interviews with older adults' family members, focusing on how they answered the same questions.

Care

In responding to the questions, what type of care is best and who is responsible for caring for older adults?, older adults identified two types of care. The majority preferred family-based care, while a minority preferred professional care.

Family-Based Care

Sixty-seven percent (n=16) of older adults reported that family-based care is the best type of care for older adults. Most older adults indicated that children should care for their parents, but some suggested that another family member, such as a grandchild, could perform care if older adults' children were unavailable or unsuitable for providing care. Older adults argued that family-based care was best because family members perform care with

understanding and love, and because it is family members' responsibility to care. However, the preference for family-based care was not without its complexities and disclaimers. Older adults feared being a burden to their children, and therefore tried to negotiate their eldercare preferences as well as their children's familial and economic obligations.

Performing care with love and understanding. Older adults purported that family-based care was best because family members perform care with understanding and love. For example, Alma wanted her children to care for her if she became unable to care for herself. She explained: "[My daughter] understands us, she understands me. She is very understanding. My son is understanding too...He lives with us and is very understanding. Whatever I need, he is there." Marisol claimed that family-based care was ideal because "family members love you." She continued: "And you love that person. You would have something good, you would have joys with that person, because that person will help you and will do everything with love, and that is very beautiful." Beyond the daily practices of care—feeding, bathing, and driving to doctor's appointments, etc.—older adults considered *how* care was performed. It was important for older adults to feel that care was performed as an act of love and understanding. Family members, thus, were often the best positioned to make this happen.

Sometimes family-based care overlapped with professional care. Two older adults were cared for by their daughters, who were also paid home health aides. Both older adults preferred that their daughters cared for them, instead of a stranger, because their daughters made them feel comfortable and understood. Sonia's eldest daughter worked as her home health aide, attending daily to Sonia in her apartment. Sonia only felt comfortable with her daughter working as her home health aide, as opposed to a stranger, because "[my daughter]

knows how to care for me, and I don't get embarrassed to remove my clothes in front of her.

She bathes me, but I don't like to do that in front of people I don't know."

Of course, family members do not always perform care with understanding and love.

Older adults pointed out that family-based care was only preferable when performed voluntarily and lovingly. For instance, Rosario hoped that her daughter would care for her because she trusted her daughter. However, Rosario did not believe that family-based care was inherently best. She cautioned that family members must be willing: "Right now the youth and sometimes children do not want to care for or be in charge of mom and dad...[The family] has to be willing. The love of the child toward the mother and father has to be profound." When performed without love, older adults believed family-based care to be unjust to the child performing care and the older adult receiving it.

Our responsibility. Older adults also purported that family-based care was best because it aligned with cultural beliefs regarding familial responsibility and reciprocity. In the words of Marquita, "that's what relatives are for." Ideas about familial responsibility were so pervasive that 75 percent (n=18) of older adults reported that family members are responsible for caring for older adults in response to the open-ended question: who has the responsibility to care for older adults? By contrast, 13 percent (n=3) believed that individuals are responsible for taking care of themselves, while another 13 percent (n=3) provided miscellaneous responses (e.g. those who are knowledgeable are responsible; senior centers are responsible; or it depends). Notably, no one identified the government as responsible for older adults' care.

The family members of older adults I interviewed largely shared the perception that family members are responsible for caring for older adults. Sylvia's son, Oscar, aptly

summarized the imperative for family-based care: "We have to be reciprocal, not only because of the laws of life, but because of what our hearts tell us. Children have to care for their parents, just as parents care for their children."

In discussing family-based care, older adults and their family members often pointed to familial responsibility as a distinguishing feature of Puerto Rican culture. They sometimes deviated from the question I had asked to teach me—a non-Hispanic, white woman—about what it means to be Puerto Rican, focusing on the importance of family. For example, Héctor claimed that children typically are responsible for caring for their parents, explaining: "In Puerto Rican culture...the family is very, very important. It's our richest cultural thing that we live by. In our Puerto Rican culture, the finances of millions is few and far between. We live by the richness of being close to each other, our family." Similarly, Gabriela believed familial responsibility differentiated Puerto Ricans and Latinx groups from other racial groups. When she worked as a teenager in a nursing home in Cleveland, the majority of residents were white or African American. She rarely saw Latinx older adults in nursing homes. Gabriela reasoned this was because: "Hispanics take care of their own. We take care of our family members." From Héctor's and Gabriela's perspectives, the emphasis on family and family-based care distinguished Puerto Ricans from other groups.

Fears of becoming a burden. Even though the majority of older adults preferred family-based care and believed family members were responsible for caring for older adults, many worried about being a burden to their children. Sylvia, for example, reported that her only desire for the future was "to not be a burden, not be a bother." She elaborated that she wanted to always depend on herself and to "continue being of use" to her family. Megdalia, age 63,

echoed this fear of being a burden. When I asked about her desires for the future, she stated: "Oh my God, I don't want to have to depend on another person to care for me. I think about that a lot. I wouldn't like to give extra work to someone, not even my children."

Fears of becoming a burden complicated older adults' preferences for family-based care. Some expressed ambivalence. For example, when I asked Gladis, age 60, about her preferences for eldercare, she felt a tension between her desire for family-based care and the fear of being a burden. "Well that is a very difficult question," Gladis said, "because what first comes to my mind is like my daughter, my son [would provide care], but let's be realistic. I do not want to be a burden for them." The tension between Gladis's desires and fears seemed to play out in her communications with her daughter as well. When I interviewed her daughter, Laura, about her perspective on her family and aging, she reported that her mother had told her in no uncertain terms that she would care for her parents in their old age. Laura explained that she was the only child who lived in Cleveland and was the most family-oriented, therefore she was the only one suitable for the job.

Other older adults expressed desires for family-based care, but only up to a certain point. When they became too much of a "burden," they instructed their children to put them in a nursing home. Yolanda had candid conversations with her son on the subject. "I don't want to be burden on my son...I already talked about this and I told him, I don't want to be a burden on you. The day you cannot take care of me, you're going to place me in a nursing home." Yolanda was so afraid of being a burden that she found death preferable: "I always pray and say, God, please let me live till the day that I can take care of myself. The day that I cannot take care of myself, you can take me." Her fear of being a burden was rooted, in part, to her experience of

caring for her mother, who she brought from Puerto Rico to Cleveland after Hurricane María.

Yolanda described the experience as "really hard, it was awful." She did not wish to put her son in the same situation.

Professional Care

Forty-six percent (n=11) of older adults reported that professional care was best.

Professional care referred to home health aides and nurses who came to older adults' houses and apartments. Some older adults preferred professional care because it enabled them to stay in their own homes, while receiving assistance with daily life tasks. For example, older adults described how home health aides helped with cleaning, cooking, bathing, and dressing. They also provided companionship, someone with whom older adults could share their lives.

Other older adults preferred professional care because they believed their children were too busy to provide care. These older adults echoed the fears of being a burden explored in the previous section, but were matter of fact in their preference for professional care. For example, Megdalia acknowledged that as she aged, she would probably need someone to live with and care for her. Although her daughters were attentive to her needs, Megdalia believed receiving care from a professional, rather than her daughters, was more realistic: "It can be a professional. My daughters, they are very busy but they always take care of me. They always call me and see how I'm doing...I know that I'm going to change." She reasoned that these changes—such as physical decline—would require professional care. Similarly, Annie explained that she would like a nurse or home health aid to care for her if she no longer could care for herself because her granddaughter—the family member to whom she was physically and emotionally closest—had four children and would not be able to care for her.

Residence

In responding to the question, what type of residence is best for older adults?, older adults identified two types of residences. The majority preferred living independently in their own home, while a small group preferred living in the household of a family member. Older adults agreed that nursing homes were undesirable.

Living Independently in Own Home

Eighty-eight percent (n=21) of older adults reported that living independently in a house or apartment was best for older adults. Living independently in their own home gave older adults the freedom to do as they pleased and allowed them to avoid the complexities of residing with their children. At the same time, older adults wanted to balance independence with feeling safe.

Freedom to do as you please. Older adults claimed that living independently in one's own home was best because it gave older adults the freedom to do as they pleased. In the words of Rosario, "In your house, you are the king or queen of the house." Part of being the "king or queen of the house" was being free to do what one liked and to maintain one's routine. For example, Carmen preferred to live in her own house because "in your own home, you do what you feel like...In someone else's house, you can't do what you feel like. [In your own home] if you have to clean, you clean; if not, you don't clean. If you want to go to bed early, you go to bed." Olga also desired to maintain her routine in her own house. She explained: "There's no place like home. I like to get up early, I like to go to bed early, to pray in God's presence, to watch television....I have done what I have always done." Older adults worried they would lose the freedom to do as they pleased, as well as the comfort of their

routine, if they lived in the home of a family member or in a nursing home.

Sonia's daughters had asked her to live with them, but Sonia insisted that she loved "living alone, alone with God" [vivo solita con Dios] in an apartment complex for seniors. Her eldest daughter worked as her home health aide, visiting the apartment daily to cook, clean, and help with any of Sonia's needs. Sonia appreciated her daughter's help, but valued the freedom she experienced in her own apartment. "I like to live alone, in my house if I sleep with no clothes on, no one says anything to me...I like to live alone, tranquila." Freedom, thus, was an important piece of feeling tranquilo in old age.

Living with family is complicated. Older adults additionally claimed that living independently in one's own home was best because living with family could be complicated. Just as older adults expressed ambivalence about family-based care because they feared being a burden, some older adults preferred to live independently because they did not want to burden their children by living with them. For example, Marisol hoped to live in her own home and never live with her children. She believed living with her children would put them in an untenable situation: "If you live in the house of a child, well that child has their own family. They have things to do, they have to take care of their own, so I know that I would be robbing them of their own time." Angelita believed it could be beneficial for older adults to live with families, provided they were well enough to help care for the grandchildren. If older adults were sick, however, Angelita reasoned it would be better for older adults to stay in their own homes so they do not become a burden to their families.

In addition to being a burden to their families, older adults considered that living with their children might negatively affect them. Nilda advised that older adults should live alone

because older people and younger people often do not get along. She elaborated: "The older person thinks differently from the younger person. And the older person has their own ideas on how to do things. The young people say 'no, this is how it is done'. Because there are different ways of thinking." For example, Nilda's children had suggested that she no longer drive, even though, from her perspective, she drove without issue and often used her car to assist her family. "I think they say it to criticize me," Nilda confessed, "but that is not good because that diminishes one's self-esteem." It was therefore preferable for Nilda to live alone and avoid what she considered to be intergenerational conflict.

Another reason that living with children might negatively affect older adults is that some children are not well-suited to caring for their older parents. For instance, Lourdes, age 75, claimed that it is best for older adults to live in their home because some children do not have the necessary patience: "There are children that cannot support mom and instead of helping her, they harm her. Because they do not know how to deal with the problems of old age." She gave the example of a child who loses patience when they have to change their parent's bedding or when the parent eats slowly. Residing with someone with an impatient, uncaring temperament could expose the older adult to harm and maltreatment. It was therefore better to live independently in one's own home.

Balancing independence and safety. While the majority of older adults preferred to live independently in their own homes, an important caveat was that they needed to feel safe doing so. Some older adults believed staying in one's own home was best as long as the home did not have a stair case or as long as the bathtub was equipped with a safety railing. Sylvia extolled the merits of her senior apartment complex, which was equipped with a button to call help in case

of an emergency, one button in the bedroom, one in the bathroom, and another in living room.

Older adults and their families sometimes employed creative approaches to enable older adults to stay in their own homes. For example, Héctor spoke at length regarding the living arrangements of his own mother. She lives alone in her own home in Puerto Rico, and wants to continue to do so. However, she is terrified of being alone at night. The family collaborates to keep her from being alone. During the day, an assistant keeps her company. During week nights, her sister spends the night with her, and during weekend nights, Héctor's brother stays with her. On the one or two nights a week that she spends alone, Héctor and his two brothers who do not live in the Puerto Rico take turns calling her before bed, reminding her to lock the gate, the door, and to keep a light on. Together, the family is able to honor the mother's desire to stay in her own home, while helping her to feel safe.

Residing with Family

Twelve percent (n=3) reported that residing in the household of a family member was best for older adults. This small subset argued that older adults should live with family because it is not good for older adults to live alone and because no one will care for you like your family. *Nursing Homes*

While there was some variation in what type of residence older adults believed was best, older adults agreed that they did not want to live in nursing homes. Rosario asserted that "no nursing home is good." She proceeded to describe what approximated a horror movie. "I know many friends that have been hit in nursing homes...I tell you that all nursing home are bad because there is no compassion for anyone...they don't give you your medicine, if they do, it's a miracle. Or they don't give it to you daily. It is possible that they give you a liquid so that you die

quickly. All of that happens in nursing homes," Rosario warned. Not everyone painted such as dismal picture of nursing homes, but they often pointed to inadequate care, loneliness, and boredom as reasons that nursing homes were undesirable. Juan preferred a simple, but free life over a solitary one in a nursing home: "I speak to you as a *jibaro*, it is better to be underneath a branch with rain falling down than to be in single-colored room waiting for the day [you die.]. It is better to be outside listening to the pigeons." The undesirability—and foreignness—of the nursing home was highlighted by the fact that older adults always switched from Spanish to English, using the term "nursing home."

Tensions

In describing their preferences for care and residence, older adults explored the same tensions between relational harmony, meeting basic needs, and no problems or worries that characterized their descriptions of tranquil old ages. For example, the majority preferred family based care, over professional care, and believed that family members are responsible for caring for older adults. Their preferences suggest the importance of relational harmony to good care. Older adults reasoned that family members were the best caregivers because they performed care with love and understanding. However, older adults balanced preferences for family-based care with fears of becoming a burden. Here they applied the theme of meeting basic needs to their children; they feared that their children, by caring for them, would not be able to meet their own familial and economic obligations.

Residential preferences also suggest tensions between relational harmony and meeting basic needs. Although older adults preferred family-based care, the majority did not want to live with a family member. They preferred to live independently in their own homes or

apartments because it gave them the freedom to do as they pleased. In addition, living in their own homes allowed older adults to avoid the complexities of residing with their children. The latter point reiterates the importance of relational harmony. Recall that relational harmony refers not only to familial closeness, but the absence of conflict. Older adults also clarified that living independently was only desirable so far as they could do so safely. Again, older adults sought to strike a balance of meeting their basic needs (e.g. safety) with independence and relational harmony.

Uniformly negative perceptions of nursing homes suggests that older adults understood life in a nursing home to be the opposite of a tranquil old age. In nursing homes, older adults were lonely (i.e. no relational harmony); they received inadequate and sometimes damaging care (i.e. do not meet their basic needs).

Taken together, older adults' care and residential preferences suggest that achieving tranquil old ages was complex. Older adults reported that the themes of relational harmony, meeting basic needs, and no problems or worries were in conflict with one another, and older adults endeavored to strike the right balance. I delve into the complexities of achieving tranquil old ages in the next chapter.

Chapter 5

In Search of Tranquility:

Mapping Older Puerto Rican Adults' Quests for a Good Old Age

"A good old age? For me, to be able to see my whole family together, living together...That would be the happiest I could be," Raúl mused longingly. I met the 63-year-old former construction worker at Cleveland's Nuestra Señora de las Mercedes Senior Center in 2018, when he spotted me two pennies (the customary entrance fee) to play bingo. Raúl was a quiet, straightforward man. He sported the same ensemble most days—a black flat cap and colored polo shirt tucked into blue jeans. And although he was not an anthropologist, he had seemingly mastered the role of "participant-observer," diligently participating in the center's activities without attracting too much attention.

Raúl emphasized close familial ties in his definition of a good old age: "to see my whole family together." Raúl's recent move from Puerto Rico to Cleveland, however, seemed to contradict his desire for familial togetherness. The move to Cleveland brought Raúl and his wife, Celia, closer to their daughter and three grandchildren. But in the process, the couple left behind their seven other children, twenty-one grandchildren, and extended family in Puerto Rico. If close familial ties were central to Raúl's definition of a good old age, why did Raúl move 1,800 miles away from the majority of his family?

Over the last two decades, Raúl and Celia had moved from Puerto Rico to Cleveland whenever one of them became ill. The couple relied on Medicaid—a needs-based program that provides care for poor children, pregnant mothers, the disabled, and the poor older adults—for healthcare coverage. Medicaid funding in Puerto Rico, however, has been capped since 1968

and the proportion of federal funding for Medicaid is far lower than it is stateside (Mulligan 2014). Raúl and Celia found themselves in an underfunded health care system, their insurance unable to cover the cost of their medications and treatments. The couple elected to move to Cleveland, where they automatically qualified for the full benefits of American citizenship, including better funded social safety net programs. When they recovered from their illnesses, Raúl and Celia returned to Puerto Rico. Raúl explained why he was currently in Cleveland: "I got diabetes and a brain tumor so...the plan [in Puerto Rico] doesn't cover any of that so we thought we would stay [in Cleveland]."

As Raúl recounted his migration decision-making process, he imbued Cleveland and Puerto Rico with values—ideas about "good" and "bad," "better" and "worse" (Livingston 2005). He maintained that care for older adults was "better" in Cleveland than it was in Puerto Rico. Superior healthcare, transportation services, and pharmacies that make home deliveries served as examples. Yet, Raúl also imagined a future good old age in Puerto Rico, reunited with his family.

In this chapter, I examine how im/mobility regimes relate to how older Puerto Rican adults, like Raúl, imagine and pursue good old ages. Im/mobility regimes refer to the political-economic processes by which people are bounded, emplaced, forced and permitted to move and to migrate (Brandhorst, Baldassar, and Wilding 2020; Glick-Schiller and Salazar 2013). As I discussed in Chapter 2, im/mobility regimes affected older adults in my study primarily in two ways. First, they were born in Puerto Rico during the "Great Migration" period (1946-1964) and subsequently came to Cleveland through a range of pathways. During the "Great Migration" period, one out of five Puerto Ricans left the island to find jobs in the United States (Vélez

2017). The Puerto Rican and United States federal governments promoted mass outmigration from Puerto Rico as an economic development strategy, part of a broader colonial project of transforming Puerto Rico from an agricultural to an export-oriented industrialized economy. Mass outmigration also provided American manufacturing and agricultural industries with cheap labor supply (Pérez 2004, Vélez 2017). Second, although Puerto Ricans are American citizens, those residing on the island are denied some of the rights that status confers (e.g. cannot vote in presidential elections, differential access to federal benefit programs). Those who migrate to the United States automatically qualify for full citizenship rights. Differential citizenship rights on the basis of residence might seem to be disconnected from mobility or migration, but they contribute to inequitable circumstances in Puerto Rico that make it difficult for economically-disadvantaged older adults to meet their basic needs. Some older adults, like Raúl and Celia, choose to move to the United States to access resources, a choice that they might not otherwise have made.

My argument in this chapter is three-fold. First, I show how older adults map the values that comprise tranquil old ages onto different spaces. In Chapter 4, I argued that older adults imagined good old ages characterized by *la tranquilidad* (tranquility), which I termed a tranquil old age. Tranquil old ages are comprised of three values: relational harmony, meeting basic needs, and no problems or worries. In this chapter, I focus on the first two of the three values constituting a tranquil old age to show how older adults map the value of meeting basic needs onto the United States and the value of relational harmony onto Puerto Rico. I discuss the third value—no problems or worries—and its relationship to older adults' life histories in Chapter 6. Second, I examine two older adults' quests for a tranquil old age. I argue that im/mobility

regimes shape the relationship between value and space, ultimately rendering the quest for a tranquil old age anything but tranquil. Third, I contend that older adults imbue their quests with moral value in order to make sense of im/mobility regimes. Taken together, my findings advance understanding of how individual, moral narratives of aging interact with inequitable political, economic, and socio-cultural processes.

Map as Metaphor

In this section, I examine how older adults mapped the values that comprise tranquil old ages onto the United States and Puerto Rico. The metaphor of a map is advantageous in that, on a map, older adults can plot multiple courses and imagine life in multiple destinations simultaneously (Wendland 2012). Imagination plays an important role in the cultural logics of migration, as migrants envision a presumed "better" life in the new land and nostalgically recall life in the homeland (Jackson 2008). Migration is about these imagined lives as well as about the physical movement from one place to another (Salazar 2012). My interview data show older adults imagining life in multiple destinations at the same time. Although they reside in Cleveland, older adults drew on past experiences, current circumstances, and expectations for the future to imagine old age in the United States and in Puerto Rico. In the process, they imbued both locations with value.

My use of the term value here refers broadly to cultural conceptions of the good or desirable, as opposed to that which is desired (Kluckhohn 1951; Robbins 2012). Values relate to older adults' understanding of that which is moral. Throughout this chapter, I show how older adults framed migration in moral terms. Moral refers both to that which conforms to cultural expectations and meets the demands of cultural norms, and that which concerns making

choices between competing goods, or beliefs about right and wrong, good and bad (Robbins 2012).

Mapping values often entailed comparison. Older adults often characterized the United States as "better" than Puerto Rico because of greater economic opportunity in the United States, or they characterized Puerto Rico as "better" because of its less individualistic culture. I use evaluative terms when older adults used them, but I do not evaluate which location is "better" for older adults. Instead, I am interested in what values and attributes older adults emphasize when imagining life in the United States and Puerto Rico. Note that I did not directly ask older adults to compare the United States and Puerto Rico, nor did I ask if they associated the values that comprise tranquil old ages with specific places (e.g. Do you associate "good health" with the United States or Puerto Rico?). The ways that older adults mapped values onto the United States and Puerto Rico emerged in response to open-ended questions about migration, beliefs about aging, and their life histories.

Mapping "Meeting Basic Needs" onto the United States

When imagining life in the United States, older adults emphasized the value of meeting basic needs. The value of meeting basic needs, as discussed in Chapter 4, includes good health, a safe environment, and the financial resources to maintain those items. Below I explore how older adults charted those three components onto the United States. Sometimes they focused on Cleveland or another city in the United States, but more often than not, older adults referenced the United States as a whole.

Forty-six percent (n=11) of older adults mapped the value of good health onto the United States. They associated the United States with effective and efficient healthcare, made accessible through healthcare benefits (e.g. Medicaid and Medicare). Older adults compared healthcare in the United States to healthcare in Puerto Rico, which they lamented as inefficient and less accessible.

The stakes of accessing effective, efficient healthcare were high. Sonia, age 78, put it plainly: "[In Puerto Rico] I would die." Sonia contended that she was healthier in the United States because healthcare providers responded rapidly to her "complaints." For example, an ambulance had arrived swiftly to transport Sonia to the hospital when she became sick with Covid-19. In another instance, Sonia's primary care doctor had quickly ordered her daughter to "bring her to me, bring her to me!" when Sonia was feeling ill (Sonia did not speak English so her daughter had called the doctor on her behalf). Efficient care was even more important now, Sonia explained, because her bout with Covid-19 had left her weak, depressed, and anxious. She believed that she would not receive the necessary care in Puerto Rico: "The care that I have here [in Cleveland], they would never give me in Puerto Rico...In Puerto Rico, you get sick and by the time the ambulance arrives, you're already dead. May God forgive me, but it's the truth." For this reason, Sonia would never move back to Puerto Rico and, at least while the pandemic lasted, would not visit her family there.

Marquita, age 71, echoed Sonia's perception that healthcare was efficient in the United States and inefficient in Puerto Rico. But Marquita replaced Sonia's critique of the ambulance (which was swift in Cleveland, but so slow "you're already dead" in Puerto Rico) with a critique

of long doctor's office wait times. "I have friends [in Puerto Rico] who have to get up at five o'clock or three o'clock in the morning to go to a doctor's office and stand in front of the door at five in the morning because they have a ten o'clock appointment," she said in disbelief. "And they don't get out of there until three in the afternoon!" Marquita was correct about long wait times. Puerto Rico is experiencing a shortage of health professionals: Seventy-two of Puerto Rico's 78 municipalities are classified as medically underserved areas by the US Health and Resources Administration. The shortage of health professionals is due, in part, to high outmigration rates among health professionals; the Puerto Rican Statistical Institute estimates a 36 percent reduction in the health professionals workforce between 2006 and 2016 (Velazques Estrada 2018). But Marquita did not find the health professional shortage particularly relevant. She attributed long wait times to worker laziness: "The people that work there, they just...you see the person sitting there filing, and you're just sitting there waiting and waiting. I don't know what's going on behind that." Marquita believed that many people move from Puerto Rico to the United States because "the health system is so bad" in Puerto Rico.

The association of the United States with good health was bolstered by differences in healthcare benefits. Like Raúl, older adults sometimes left Puerto Rico in order to access healthcare benefits in the United States, and, like Raúl, older adults tended to frame the availability of healthcare benefits in moral terms, the idea that care was "better" for older adults in the United States. Annie, age 69, for example, believed it was better for older adults to live in the United States because "older adults are treated better." She clarified: "In other words, there are more benefits [in the United States] than in Puerto Rico." Annie pointed to insurance, medication, and transportation services as examples of benefits in the United States.

She characterized Puerto Rico, in contrast, as "wishy-washy": "Puerto Rico is very wishy-washy in this. They have some [benefits] but they're not all the same...[Puerto Rico] denies some benefits because they don't exist or they cannot, or there is not enough whatever...That's how it is there." Although the United States federal government, not the Puerto Rican government, decides how benefits are distributed, Annie blamed Puerto Rico's government for benefit disparities.

Safe Environment

Thirty-eight percent (n=9) of older adults charted values of safety onto the United States. While narratives of a "safe environment" in Chapter 4 focused on the indoor environment, here older adults focused on the neighborhood and city environment. Older adults used the language of feeling tranquilo to characterize Cleveland as safe and their former neighborhoods in Puerto Rico as dangerous. For example, Alma, age 73, moved at age 59 from Rio Grande, Puerto Rico to Cleveland in search of safety. Growing up, Alma felt that Puerto Rico was safe, but overtime violent crime had increased. Gang activity and gun violence in her neighborhood had rendered the outdoors and even the street-facing rooms within her home risky. Alma and her husband resolved: "we cannot stay here any longer because a stray bullet could hit us or our children. So we did not live tranquilos there." They elected to move to Cleveland because Alma's brother, who already lived there, assured her that Cleveland would be safer for her sons. I asked Alma if she liked living in Cleveland. She answered in the affirmative, emphasizing safety: "At least you can leave the house with *la tranquilidad*, you don't leave with fear. At least we are tranquilos here [in Cleveland]."

Myrta, age 63, also characterized Cleveland as "very tranquilo." She insisted that she would not return to Puerto Rico because it was dangerous. "I'm Puerto Rican but I would not consider living there." Myrta elaborated: "I'm afraid to live there...I cannot live in an environment with shooting...Because I live alone, I seek out safety. If I see that I am not safe, I cannot live in an environment with robbery, shootings, and drugs." Myrta associated feeling "tranquilo" with Cleveland and feeling unsafe with Puerto Rico. Her perspective was shaped by her position as a single woman living alone: "Because I live alone, I seek out safety."

Perceptions of the United States as "more tranquilo" than Puerto Rico as it relates to safety were specific to Cleveland, not necessarily the United States as a whole. Sixty-three percent (n=15) of older adults had migrated from Puerto Rico to another city in the United States before finding their way to Cleveland. Among those who had migrated to a city in the United States besides Cleveland, New York City was the most popular destination (60 percent). Older adults drew on their experience of living in large cities to characterize Cleveland as "more tranquilo." For example, Sylvia, age 81, explained why many Puerto Ricans from her hometown of Yauco move to Cleveland: "I believe...[Cleveland] is more tranquilo than New York, much more tranquilo." She pointed to train accidents in New York City as evidence that it was not as "tranquilo" as Cleveland. "At least because of my age," Sylvia maintained, "I believe this is the best place that I could have chosen." Other older adults identified crime, gun violence, and overcrowded streets as reasons why larger cities were unsafe. Cleveland, they perceived, was safer, more tranquilo.

Financial Resources

Seventy-nine percent (n=19) of older adults charted the value of financial resources to

meet their basic needs onto the United States. The value of financial resources was two-fold. First, older adults perceived the United States to offer more economic opportunity—in the form of jobs and socio-economic advancement—than Puerto Rico. Second, older adults perceived the United States to offer more "help" in the form of social services. Social services that older adults identified included Supplemental Security Income (SSI), Supplemental Nutrition Assistance Program (SNAP) benefits, and public transportation. I distinguish social services here from the healthcare benefits discussed in the previous section.

Economic opportunity was a major contributor to migration decisions: Sixty-seven percent (n=16) of older adults reported migrating to the United States at least one time to find a job. One older adult—Cel (short for Celestino), age 70—alluded to the policies of the "Great Migration" period designed to pull Puerto Ricans to the United States to meet the demand for low-wage labor. Cel explained why he and his mother moved from Puerto Rico to New York City: "See people don't understand the migration and what happened. What happened was at that time they were offering jobs to people...A lot of people took that offer just to get out and advance themselves in the world." Cel embedded the story of migration as a socio-economic advancement strategy in its historical, political-economic context.

With the exception of Cel, older adults rarely portrayed their migration decisions as part of a broader political-economic process. Instead, they referenced quests for a "higher quality of life" or "a better life for [their] children" in the United States. Take, for example, Ana María, age 85, who moved from Puerto Rico to New York City in her early twenties "buscando ambiente," in search of a better life. I asked for clarification. Better in what sense? "[Better] in every sense," Ana María replied, "because in Puerto Rico there was a lot of poverty at that

time. So I went to find a better life, to try to better myself." She continued: "People from all over come to New York searching for a better life...I was lucky to get a job, I got a job at a factory sewing." Ana María repeatedly used the term "better life" as a proxy for work and potential socio-economic advancement.

Older adults additionally framed job opportunities in the United States against joblessness in Puerto Rico. For some, navigating job opportunities in the United States and joblessness in Puerto Rico structured the rhythm of their lives. Ricardo, age 65, for instance, worked seasonal agricultural jobs in the United States for twenty-three years. Seasonal work required seasonal migration. Ricardo moved to Delaware one year to pick apples, then to Connecticut to pick pears, and so on. He completed his work in six-month stints, returning to Puerto Rico to be with his family in between harvest seasons. Women and children, Ricardo explained, were not permitted to live in the temporary housing provided to male farmworkers. Ricardo decided to pursue seasonal agricultural work in the United States even though it required him to live apart from his family half the year: "I was searching for good jobs in order to support my children." I wondered if there were many job opportunities in Puerto Rico at that time. "There [in Puerto Rico], no," Ricardo responded flatly, "Here [in the United States], yes. Here there are many jobs in farms, factories, there are many jobs." Ricardo's dichotomy, "there, no, here, yes," shows how older adults mapped values onto the United States through comparison. They associated the ability to support their children with the United States and the inability to support their children with Puerto Rico.

The quest for higher quality of life through employment in the United States typically did not unfold how older adults had imagined. With the exception of three older adults who

achieved lower middle-class status, older adults still lived in poverty. Social services in the United States filled gaps in income, helping older adults to meet their basic needs.

Older adults charted the value of "help" in the form of social services onto the United States. Megdalia, age 63, characterized life for older people in Puerto Rico as "very difficult" and "requiring a lot of work." In contrast, she characterized life for older people in the United States as "more convenient" and "less work." Megdalia pointed to inequalities in social services as the cause: "Governmental benefits are not the same, even though we are American citizens." One "governmental benefit" that differs is SSI, which helps disabled, blind, and older people who struggle financially. As I explained in Chapter 2, SSI benefits are available to American citizens residing in the United States, but not available to American citizens residing in Puerto Rico. Puerto Rico's version of SSI—Aid to Aged, Blind, and Disabled—has more stringent eligibility requirements and much a smaller benefit payout. For example, the average SSI benefit is \$591 a month, while the average Aid to the Aged, Blind, and Disabled benefit is only \$75 a month. Note that the average cost of living in Puerto Rico is 12 percent higher than the average cost of living in the United States mainland, so differences in average benefit payouts are not due to lower cost of living in Puerto Rico (IEPR 2016). Older adults reported that Puerto Ricans often move to the United States to access SSI benefits.

As with economic opportunity, older adults portrayed the need for social services as quests for a "better life" in the United States. For example, Lourdes, age 75, moved from Puerto Rico to Cleveland at age 30 because there "is a higher quality of life here [in the United States]." I probed for what she meant. "[Better] in the sense that things are more accessible...You get a job quickly. The government helps." Lourdes continued for several

minutes listing examples of assistance in the United States. She marveled at the aid provided during the pandemic: "Downtown [Cleveland] since the pandemic started they are giving food all week...They give milk, cheese, bread, eggs, meat, vegetables. And you should see the line that forms of people looking for food! In other words, the government here [in the United States] helps more than Puerto Rico's government." It was unclear if Lourdes' examples were all forms of governmental aid, or if some were donations from charitable organizations. It was clear, however, that Lourdes had concluded from these examples that the United States government was more "helpful" than Puerto Rico's government. The "help" available in the United States shaped her perception that it was a better place to live.

Mapping "Relational Harmony" onto Puerto Rico

When imagining life in Puerto Rico, older adults emphasized the value of relational harmony. The value of relational harmony, as discussed in Chapter 4, includes close, loving relationships with family, the absence of conflict, and social connection. Below, I explore how older adults charted relational harmony onto Puerto Rico.

Close Familial and Social Ties

Fifty percent (n=12) of older adults mapped the value of close familial and social ties onto Puerto Rico. Their descriptions of life in Puerto Rico were often idyllic. Older adults emphasized large, multi-generational families that lived near each other in the mountains of Yabucoa, by the coffee plantations of Yauco, or the sugar cane fields of San Lorenzo. They reminisced about neighbors who knew and supported one another. Older adults spoke of close familial and social ties as being characteristic of life in Puerto Rico, the idea that "that was just how things were." For example, when I asked Silvia, age 81, about her childhood in Yauco, she

immediately responded: "I loved [my childhood] because it was in *el campo*, the countryside, and everyone in *el campo* is very united. The neighbors are like family. From a young age, you had a lot of protection from family members, aunts and uncles, they always looked out for you."

Older adults interwove stories of close familial and social ties in Puerto Rico with values of solidarity—the idea that, in Puerto Rico, people are united, people help each other. Take, for example, Héctor's story of returning to Yabucoa at age 16 after spending the majority of his childhood and adolescence in New York City. Suddenly, his family expanded: "Every turn around the corner, this is your cousin, this is your cousin! This is your aunt, this is your uncle....The family's all over." Héctor attributed living near extended family to Puerto Rican culture: "In Puerto Rico, all the families are all together, both sides." His family's living arrangements also changed when they moved to Puerto Rico. In New York City, Héctor's family lived in an apartment, but in Puerto Rico they had to build their own house. "It was crazy!" Héctor exclaimed, as he recalled how the extended family gathered to construct his house from the ground up. Again, Héctor attributed his experience to Puerto Rican culture: "That's how it was in Puerto Rico. Everybody was building the home from the ground up. All the family members participated." It was not just that families lived near each other, it was the sense of solidarity that older adults associated with Puerto Rico.

Older adults contrasted solidarity in Puerto Rico with individualism in the United States. For example, Megdalia believed that older adults in the United States suffered from Ioneliness, despite leading lives made more comfortable by social services. Older adults in Puerto Rico, by contrast, benefitted from strong social bonds. "In Puerto Rico everyone helps each other, they

seek each other out. Here [in the United States] I've seen how people cast aside members of their own family. They do not help each other how they should," Megdalia said. I wondered if people helped one another more in Puerto Rico. "Oh, yes....We are a big family. Like me, I have a big, big, big family right there. We always share...People help each other, they especially help older people." Gladis, age 60, similarly framed social connection in Puerto Rico against individualism in the United States. She characterized the move from Puerto Rico to Cleveland as a "culture shock," explaining: "American culture is very individualistic and we are more community-geared." With the use of "we," Gladis positioned Puerto Ricans outside of American culture. She recalled how she experienced a major depression when she left Puerto Rico, where she "felt [she] belonged one hundred percent." She attributed the depression to the sense of disconnection she felt in Cleveland. Disconnection, Gladis explained, was partly related to the absence of family members in Cleveland, but also American culture being more individualistic. *Grounded Relationality Expressed as National Pride*

Fifty percent (n=12) of older adults charted feelings of national pride onto Puerto Rico. They expressed deep love for and a sense of attachment to their homeland, as well as a bond with the people of Puerto Rico. While Chapter 4 focused on relational harmony as feelings of love and intimacy with family members, here older adults spoke of a broader relationality. This relationality was geographically bound. It was tied to the land itself—"*mi patria*," my homeland—and rooted in oneness among the people of Puerto Rico—"*mi gente*."

Attachment to the homeland shaped older adults' aging and end of life expectations.

Some older adults wanted to die in Puerto Rico, while others planned to have their ashes scattered there. Juan, age 72, yearned for Comerió, his hometown. When I asked Juan about his

hopes for the future, he said wistfully: "The most essential is to return to my land...And to be with my family members there...May the Lord grant me health and allow me to spend my final days as well as I can." He attributed the yearning he felt for Comerió to his heritage: "I do not know if it is our upbringing, the roots of our people...For me, it is very important to go back to the land where I was born." Juan clarified that he intended to die in Puerto Rico, not simply live there again. "I am 72 years old. It would be difficult to live in another way," he remarked in good humor, "It is something that one carries with oneself, it is the inheritance of my people." The deep connection Juan felt to his homeland and to his people compelled him to return.

Angelita, age 71, did not want to live in Puerto Rico permanently, but the connection between the land and death still influenced her attachment to the island. Although Angelita had lived in Cleveland for the last 53 years, she mapped her "heart," her emotional center, onto Puerto Rico. Angelita explained: "My heart is also in Puerto Rico because my father and mother are buried there...my aunts and uncles and my siblings are there, so I always like to go to the cemetery to bring flowers to my parents and to my husband's mother. I will never forget my parents." The emotional connection she felt to her family members, although they had passed away, continued to pull her to Puerto Rico. Other older adults had scattered the ashes of their loved ones in Puerto Rico or planned to have their own ashes buried near the graves of their parents.

Other older adults did not want return to Puerto Rico, except for visits, and did not have plans to have ashes scattered. Yet, they professed strong emotional connections to the island. Professions of emotional connection tended to precede or follow positive statements about the United States. For example, when I asked Lourdes, age 75, about how living in the United States

had affected her life, she responded as though my question implied that living in the United States made her less Puerto Rican. Lourdes set the record straight: "even though there are better things here [in the United States] than in Puerto Rico and life here is better than in Puerto Rico, that does not give anyone the right to deny where I come from. My roots will always be in Puerto Rico." Graciela, age 69, responded to the same question by asserting her identity as a Boricua, a person born in Puerto Rico: "I keep being Puerto Rican. One hundred percent Boricua. I cannot abandon or change my island, no, no, no. It is my island, my birthplace." With the use of the term "Boricua," Graciela underscored her ancestral connection to the land. Puerto Ricans use the word "Boricua," which comes from the Taíno, the indigenous people of Puerto Rico, to express cultural pride and identity. Puerto Ricans born outside of the island cannot use the term to describe themselves. Older adults also referred to Puerto Rico as "my island," "my homeland," "the place of my people," and "[the place] I love with my whole heart" to express pride and attachment to the homeland, even if they did not plan to live there permanently.

Layering Space and Value in the Quest for a Tranquil Old Age

Older adults mapped different values onto the United States and Puerto Rico. When they imagined life in the United States, older adults emphasized the ability to meet their basic needs. They cited access to healthcare, deemed to be effective and efficient; they highlighted safe neighborhoods and cities that made them feel *tranquilo*; and they stressed financial resources in the form of jobs and social services. In contrast, when they imagined life in Puerto Rico, older adults emphasized relational harmony. They commended the presence of strong

familial and social ties; and they proudly touted the deep connection they felt to their homeland.

By exploring how older adults map different values onto the United States and Puerto Rico, I do not mean to argue that the values of meeting basic needs and relational harmony could only be found in one place or another. Rather, I aim to show which values older adults tended to emphasize when discussing life in the United States and in Puerto Rico. Older adults emphasized the value of relational harmony in Puerto Rico, but that does not mean they never experienced relational harmony in the United States. To the contrary, 83 percent (n=20) of older adults had migrated to Cleveland, in part, because at least one family member already lived there. And older adults who did not have family in Cleveland reported finding meaningful sources of social support through friendships at churches and senior centers. Moreover, many of the resources that older adults associated with the United States were also available in Puerto Rico. The values of meeting basic needs and relational harmony are not distinctive place-based categories in practice.

The charting of meeting basic needs and relational harmony onto different places has important implications for aging. In Chapter 4, I argued that older adults imagined tranquil old ages as a cohesive ideal, comprised of relational harmony, meeting basic needs, and no problems or worries. As they discussed their migration decisions, beliefs about aging, and life histories, however, older adults indicated that tranquil old ages were not cohesive. They charted the values that comprise tranquil old ages onto the United States and Puerto Rico, layering together value and space. If older adults mapped the values that comprise a tranquil old age onto different places, how could they ever experience a tranquil old age?

In the next section, I examine two older adults' quests for tranquil old ages. Their quests represent broader patterns in my sample: namely, the tension between relational harmony and meeting one's basic needs in the quest for a tranquil old age and the role of mobility—imagined or real—in navigating this tension. I argue that im/mobility regimes shape the layering of value and space, and consequently the pursuit of tranquil old ages, in complex ways.

Longing for Puerto Rico, but Accepting God's Will: Carmen's Quest

I met Carmen, age 68, on the porch of her yellow and green craftsman home. We had only ever spoken on the phone since Covid-19 research guidelines did not permit us to meet in person. Typically, I mailed research participants their compensation (a \$50 Visa gift card), but Carmen had requested that I deliver the gift card directly because she needed it to pay her bills. A petite woman, with round glasses perched on her nose and brownish-grey hair pulled into a low bun, opened the door. Carmen and I exchanged greetings and the gift card, but Carmen seemed eager to chat. Through the door, she gestured proudly to the tan leather sofa and matching chair in her living room: "My son bought these for me. He's back there making breakfast." I glanced down the hallway where a middle-age man hovered at the stove. Carmen confirmed what my nose had already suspected: Her son was making scrambled eggs and ham.

The breakfast-maker must have been Carmen's "good" son, the one who had purchased a refrigerator, microwave, and—as I had just learned—a sofa set for her house. Sometimes he accompanied Carmen to the doctor's office as her translator. Carmen's other son, the "cantankerous" one, also lived in Cleveland, while her daughter, the oldest of the three, lived in Puerto Rico. If her health declined to the point where she could no longer care for herself, Carmen hoped that her daughter would care for her. For now, Carmen preferred living alone in

the house she rented in the Clark-Fulton neighborhood on Cleveland's Westside. "In your own home," she explained, "you can do what you like." Plus, Carmen had no intention of parting with her house plants.

Carmen's definition of a good old age reflected several of the values that comprise a tranquil old age. She emphasized the importance of maintaining good health (meeting basic needs), having someone help you with house chores (meeting basic needs), and traveling from time to time. Carmen recommended that, in order to have a good life in old age, one should live "una vida tranquila, a tranquil life. She elaborated: "Be tranquila: no one bothers you and you are with people." She meant that one should avoid conflict (relational harmony).

Carmen was born in 1953 in Bayamón, a suburb of the capital, San Juan. Carmen was one of ten children. The ten of them, along with Carmen's parents and grandparents, crammed together in a two-bedroom house. They were poor, but she characterized her childhood positively: "It was a good childhood. There [in Bayamón] all of the neighbors share, all of the children shared everything. And everyone loved each other very much." Carmen left school after ninth grade, due to an illness, and obtained a job as a house cleaner. Unlike most older adults in my sample, Carmen did not move to the United States in her youth to pursue work opportunities. She spent the first 60 years of her life in Puerto Rico, predominantly in Bayamón, working as a housekeeper and in factories, while raising her three children. She also separated from her husband during this time.

I wondered: what had enticed Carmen to leave Puerto Rico at the age of 60 and to move somewhere new? Carmen moved to Cleveland to care for her mother, who had moved to Cleveland twenty years prior to be near two of Carmen's siblings. Unlike Carmen, they had

sought employment in the United States. Carmen was familiar with Cleveland before she officially moved there. For two decades, she had been "yendo y viniendo," coming and going, a process whereby Carmen visited her mother in Cleveland every sixth months for one to two months at a time, and then returned to Puerto Rico.

Curiously, Carmen elected to stay in Cleveland after her mother passed away. It is here that the tension between the values of relational harmony and meeting one's basic needs manifests in Carmen's quest for a tranquil old age. When I asked about her plans for the future, Carmen dreamed of returning to Puerto Rico. "I was born there, I was raised there," Carmen stated matter-of-factly, as though the desire to return to Puerto Rico was obvious. The pull toward Puerto Rico was bolstered by two other factors: Carmen has grandchildren and great grandchildren in Puerto Rico whom she has yet to meet, and she absolutely detests Cleveland's cold weather. However, Carmen did not believe relocating to Puerto Rico was feasible, at least for now: "I would like to be in Puerto Rico...But my health conditions [referring to diabetes, thyroid problems, gastritis, and high blood pressure]...But you have to accept God's will," Carmen said, alluding to her devout Pentecostal faith. She then added, "My children are here lin Cleveland] too."

From Carmen's perspective, older adults were treated better in Cleveland—and by extension the United States—than they were in Puerto Rico. She pointed to the healthcare system and social services in the United States:

"Here [in Cleveland] they treat you better."

"They treat you better? Can you give me an example?" I asked.

"When I was in [Puerto Rico], they didn't discover that I was diabetic, that I had thyroid problems. Here in Cleveland they discovered it," Carmen replied.

I wondered: "But why? Why do you think older adults are treated better here?"

"Here in many aspects of life, in health and assistance. Here they help you a lot," Carmen explained. "Right now, look, I have internet from the government—for a limited time, but I have it. A free telephone. They gave me a new computer too...If you don't have food, they give it to you. You don't experience hunger."

"So if you return to Puerto Rico, you will not continue to receive these benefits?" I clarified.

"No, there no," said Carmen.

The benefits to which Carmen referred were multiple: She currently received social security,

SSI, and SNAP benefits from the federal government, and received charitable assistance from a
local organization. While Carmen could receive social security and SNAP benefits in Puerto Rico,
she would have to forgo SSI if she returned. Remember that SSI benefits (averaging
\$591/month) are only available to American citizens residing in the United States, not those
who reside in Puerto Rico. Returning to Puerto Rico, therefore, would have serious financial
consequences for Carmen. Currently, she did not even have the money to visit.

Between Stability and Nostalgia: Nilda's Quest

Nilda, age 74, lives alone in an apartment complex for older adults—80 percent of whom are Latinx—in the Detroit-Shoreway neighborhood on Cleveland's Westside. The building's imposing, austere exterior contrasted with Nilda's self-description. She described herself as someone cheerful, *tranquila*, and as someone who loves to dance—salsa, merengue, bachata, everything. Nilda is divorced, but has close relationships with her four children, three of whom live in Cleveland. One lives in Puerto Rico.

In her definition of a good old age, Nilda emphasized the importance of living in a stable place where help was immediately available:

Being *tranquilo*, stable in a place like this one that I have here, an apartment for me where if I need help, the help is going to come quickly because it has all these tools, a phone, things to call for help and nurses and people who help immediately appear.

Her apartment was located in section 8 complex for older adults, subsidized by the Department of Housing and Urban Development (HUD). By living in the apartment complex, Nilda had access to service coordinators, security guards, and emergency assistance, which contributed to her feeling "tranquilo, stable." Nilda also received social security benefits and SSI from the federal government. She liked living in a complex for older adults because she felt protected from younger people who take advantage of older adults.

Nilda was born in 1947 in San Lorenzo, a rural municipality of Puerto Rico, known for sugar cane production. She is the oldest of eight children. Her father lived apart from the family, as he had been recruited to work on a farm in Youngtown, Ohio, an arrangement common for that time (Suárez Findlay 2014). Nilda described her childhood as "very difficult," citing poverty and frequent food insecurity.

When Nilda was 17, she dropped out of high school to move with her mother and youngest siblings to the Bronx, New York. Nilda explained that they moved to "live *tranquilo*": to find employment in factories and to live in a better apartment. In contrast, she felt that there was "no *tranquilidad*" in San Lorenzo due to the poor economy. Nilda's newfound peace in the Bronx, however, was disturbed a few years later when she was assaulted. New York was no longer *tranquilo*. She and her husband had begun looking for a new place to live, when a family friend advised them that Cleveland was safer and more "*tranquilo*." At the age of 22, Nilda relocated to Cleveland because she wanted to raise her children in a "*tranquilo* place."

Twenty-three years later, Nilda and her husband returned to Puerto Rico. She attributed this decision to the longing they felt for their homeland. Her husband was a Puerto Rican nationalist (i.e. pro-independence from the US) and Nilda felt nostalgia and deep love for Puerto Rico: "Nostalgia for their country always stays with Puerto Ricans, it always, always stays with us."

At the age of 50, Nilda divorced her husband and moved back to Cleveland. The decision was related, in part, to her age. When she was younger, she was more independent and could live in Puerto Rico. But as she grew older, she wanted the "help" provided by the United States government to those living in the United States. The decision to relocate was additionally motivated by a desire to be near her children and grandchildren who lived in Cleveland.

Nilda has now lived in Cleveland for twenty-four years. She plans to stay in Cleveland indefinitely. But, like Carmen, Nilda reported a tension between meeting her basic needs in Cleveland and relational harmony in Puerto Rico as she discussed her hopes for the future:

"I still come and go from here, from the states to Puerto Rico. I love my country. I love Puerto Rico, but I do not see it as a permanent residence. I see myself more here in Cleveland, Ohio."

"Why don't you want to live in Puerto Rico permanently?" I asked.

"Because I adapted...I've lived here for many years. And one of the things I like about Cleveland is la *tranquilidad* that, at least, I feel there is *tranquilidad*. I have my own apartment approved by the housing for older people [referencing a HUD subsidized section 8 building]. I have security, I feel safe here. My children were born here and my grandchildren were born here," Nilda replied.

Even though Nilda did not want to live in Puerto Rico, it was important that Puerto Rico be her final resting place. She planned to have her ashes scattered in Puerto Rico: "We, Puerto Ricans, always choose to rest in the land where we were born. I told my daughter...that I want

to be cremated...and my ashes go to be with my mom in Puerto Rico, in the cemetery where my mom is buried." Nilda's plan to have her ashes scattered in Puerto Rico underscores the emotional connection she feels to her homeland.

Im/mobility Regimes: Why Quests for Tranquil Old Ages are Seldom Tranquil

Carmen and Nilda's quests for tranquil old ages help us to understand how im/mobility regimes relate to how older Puerto Rican adults imagine and pursue tranquil old ages. In the remaining section, I outline four ways that im/mobility regimes interact with older adults' quests for tranquil old ages.

First, Carmen and Nilda's quests illustrate how im/mobility regimes shape the relationship between value and space. I previously showed how older adults map the values that comprise a tranquil old age onto different spaces. Carmen and Nilda's quests reiterate the association of meeting basic needs with the United States and the association of relational harmony with Puerto Rico. The former is evidenced by Carmen and Nilda's plans to stay in Cleveland, at least for the time being, due to perceived "better" healthcare, perceived safety, and access to social services. Meanwhile, the latter is evidenced by the feelings of comfort, love, kinship, and nostalgia for Puerto Rico reported by both women. Carmen longed to return to the island, where the climate was more comfortable and where she could meet her grandchildren. Nilda similarly felt an emotional pull to Puerto Rico, although she did not care to reside there permanently. For Nilda, relational harmony in Puerto Rico would be established after her death, once her ashes were spread near her mother's grave in Puerto Rico.

It is one thing to demonstrate that older adults mapped different values onto the United States and Puerto Rico. It is another to claim that im/mobility regimes shape the ways that value and space are layered together in older adults' imaginations. In her study of clinical tourism at a Malawian medical school, Claire Wendland (2012) showed how Malawian and foreign medical students mapped notions of "good" medical work onto different locations.

Malawian medical students, for example, imagined good medical work to exist "out there" in the Global North, where doctors had access to technologies associated with medical progress and modernity. Meanwhile, foreign medical students imagined good medical work to occur among suffering bodies in the Global South, which they associated with a past, more authentic medicine. Wendland argued that the inequitable power dynamics of clinical tourism influenced where Malawian and foreign medical imagined they might practice "good" medicine.

Following Wendland, I argue that older adults' tendency to map meeting basic needs onto the United States and relational harmony on to Puerto Rico does not occur in a vacuum. Im/mobility regimes shape what options are available to older adults, where those options can be found, and what strategies older adults can employ to pursue those options. Carmen's quest points to how resources are inequitably distributed across space. The resources she needs to survive, including SSI benefits and adequate healthcare coverage, are not available in Puerto Rico. Economically-disadvantaged older adults like Carmen, therefore, seek those resources in the United States. Nilda's quest alludes to how economic development policy—implemented by Puerto Rican and American federal governments—encouraged migration from Puerto Rico to the United States. The charting of "meeting basic needs" onto the United States must be understood as part of Puerto Rico's colonial relationship with the United States. Just as

inequitable power dynamics of clinical tourism influenced where medical students imagined they might practice "good" medicine, im/mobility regimes influenced where older adults imagined they might find a tranquil old age.

Second, Carmen and Nilda's quests demonstrate how the process of achieving a tranquil old age was itself seldom tranquil. In Chapter 4, older adults discussed tranquil old ages as a cohesive ideal, encompassing the values of meeting basic needs, relational harmony, and no worries. Carmen and Nilda's quests, however, suggest the ideal tranquil old age was fractured across space. Both women reported navigating a series of tradeoffs through migration. Carmen forewent relational harmony in Puerto Rico in order to meet her basic needs in Cleveland. Nilda moved to the United States in her youth and again in mid-life to meet her basic needs. In between, she returned to Puerto Rico to experience relational harmony. Although she plans to spend old age in Cleveland, she too experienced a tension between meeting her basic needs in Cleveland (e.g. stability, social services) and relational harmony in Puerto Rico (e.g. longing for the homeland). Pursuing one component of a tranquil old age, thus, often meant forgoing another.

Third, Carmen and Nilda's quests highlight connections between mobilities and immobilities. I have focused so far on the role of mobility in Carmen and Nilda's quests.

Carmen, for example, engaged in "coming and going" between Puerto Rico and Cleveland for twenty years. Nilda moved from Puerto Rico to New York, New York to Cleveland, Cleveland to Puerto Rico, and back again. Based on this back and forth movement, one might conclude that mobility regimes enhanced Carmen and Nilda's freedom to pursue tranquil old ages. Remember that mobility regimes do not only restrict movement, they enable and even promote movement

among some groups (Glick Schiller and Salazar 2013). Puerto Ricans experience a heightened mobility in that, as American citizens, they do not face the legal barriers typical of international migration. So long as they could afford the cost of travel, Carmen and Nilda could move to the United States to access healthcare or social services and return to their homeland with relative ease. Older adults were even strategic about enacting their mobility to pursue tranquil old ages. The theme of strategic mobility is especially clear in Raúl's quest for a tranquil old age, as he migrated to the United States to access healthcare and insurance coverage whenever he or his wife became ill, and returned to Puerto Rico upon recovery. To simplistically equate mobility with freedom, however, would be to obscure the uneven terrain upon which older adults undertake their quests for tranquil old ages.

We must consider how, in older adults' quests for tranquil old ages, mobility is connected to immobility. Glick Schiller and Salazar contend that migration scholars must "move beyond the ready equation of mobility with freedom by examining not only movement as connection but also as an aspect of new confinements and modes of exploitation" (2013, 190). The tension between meeting basic needs and relational harmony in Carmen's quest exemplifies the mobility-immobility connection. Carmen longs for Puerto Rico, but she has accepted that she cannot return. No policies restrict her movement; yet, Carmen is immobilized. If she resides in Puerto Rico, she will no longer qualify for SSI. She will also have to navigate an underfunded and understaffed healthcare system. For Carmen, returning is not an option. The same inequitable forces that draw older adults to the United States, and that underlie im/mobility regimes, now make it difficult for Carmen to leave.

Fourth, Carmen and Nilda's quests reveal how older adults make sense of im/mobility regimes. This has been one of the more challenging points to convey in this chapter. By examining how older adults layer value and space in pursuit of tranquil old ages, I have endeavored to make visible the inequitable political, economic, and socio-cultural processes that constrain options for aging without presenting said processes in a deterministic manner. Im/mobility regimes impact people's lives. But Carmen, Nilda, and the other older adults in my study do not present themselves as victims. To extend the mapping metaphor, they do not portray themselves as helpless wanderers, navigating the uneven terrain of mobility regimes without a compass. Rather, they carry with them tools—maps, compasses—to interpret their surroundings and discern where a tranquil old age may be found and where old age is not as it should be.

Throughout this chapter, we see older adults making sense of im/mobility regimes by couching their migrating decisions in moral terms. Older adults tended to abstract migration decisions from their political-economic context. Nilda, for example, tells the story of migrating between Puerto Rico and the United States as a search for *una vida tranquila*. She imbues places with *tranquilidad* throughout her quest, though the term takes on different meanings across space and time. First, Nilda seeks out *tranquilidad* as employment in New York, next *tranquilidad* as safety in Cleveland, and finally in old age she feels *tranquilo*—safe and stable—in her HUD-subsidized senior apartment complex. In contrast, Nilda believes there was no *tranquilidad*—no safety, no stability, no opportunity to make a living—in Puerto Rico because of the poor economy. Her narrative echoes those of older adults in the previous section, who recounted their migrations to the United States as quests for a "better life" or a "higher quality

of life." Carmen glosses disparities in healthcare and social services simply as evidence that older adults are "treated better" in the United States. She believes healthcare is higher quality, the government "helps you a lot," and "you don't experience hunger" in the United States.

Carmen's perspective aligns with those of older adults in the previous section, who argued that it is better to reside in the United States than in Puerto Rico because healthcare is "better," neighborhoods are safer, and there is "better" access to social services.

Older adults also described returning to or longing for Puerto Rico in moral terms. When imagining life in Puerto Rico, older adults highlighted solidarity, the idea that families, neighbors, and friends are united and help one another. They criticized individualism in the United States, meanwhile, for negatively affecting older adults' socio-emotional well-being. Older adults also indicated that maintaining a sense of attachment to the homeland was a moral imperative. They suggested that Puerto Ricans live a good life when they remember their ancestors, are proud of their heritage, and, in death, re-connect with the land of their birth.

The moral framing of migration decisions suggests that older adults' layered time onto space and value. Older adults expressed nostalgia for a past Puerto Rico and their criticisms of Puerto Rico's government and healthcare system incorporated temporal trajectories of improvement and decline, or ideas about modernity and backwardness (e.g. healthcare workers are "lazy;" the Puerto Rican government does not help). As Bonnie Urciuoli (1996) notes, the United States framed Puerto Rico as "backward" in order to justify colonialism. The interplay of time, space, and value is the subject of the next chapter. For now, I focus on how older adults layered together value and space as they made sense of im/mobility regimes. They endeavored to forge "good" lives, despite their difficult circumstances.

Taken together, these findings enhance understanding of how individual, moral narratives of aging articulate with inequitable political, economic, and socio-cultural processes.

They show how im/mobility regimes shape how older adults imagine and pursue tranquil old ages, and how older adults make sense of im/mobility regimes.

Chapter 6

Living in the Past or Creating Space in the Present?

The Role of Nostalgia in Older Puerto Rican Adults' Experiences of Belonging

October 2018 – The Nuestra Señora de las Mercedes Senior Center

"Me gustas como me gusta un dolor de muelas," [I like you like a toothache], Beatriz quipped as the man with a thin mustache walked past her. "I like you like a hangnail," he responded. Beatriz leaned toward me to explain the playful exchange: "I joke around with everyone, you know? You have to. I can't be rude to people."

It was 9am at the Nuestra Señora de las Mercedes Senior Center, where approximately 40 older Latinx adults had gathered to socialize. Four men played dominoes in the corner, while two more shot pool. A pair of women walked laps around the building. Most older adults, however, congregated around wooden tables to chat with friends and drink their morning coffee. A row of twenty-two flags served as the backdrop to their interactions, each flag representing a different Latin American country or territory. In the middle, the American and Puerto Rican flags formed an "x" from which the other flags emanated.

It was good to sit next to Beatriz. She manned the morning coffee station, so other older adults periodically stopped by our table to purchase a cup of coffee for 50 cents. Beatriz was a petite, uninhibited woman, known for dressing up in wacky costumes at holiday parties. She knew everyone at the center and had taken it upon herself to help me recruit study participants. She called Francisca over to introduce me. "Oh no, she thinks I am giving her food," Beatriz whispered. It was customary to share snacks at the center. Beatriz had just offered me trail mix, and across the table, our table mates exchanged corn chips. I greeted the

others: Irina, Ana María, and Sonia, like Beatriz, hailed from Puerto Rico. Manuel had immigrated from Ecuador, Marícarmen from the Dominican Republic.

Suddenly, I heard the musical stylings of Puerto Rican-Dominican singer Romeo Santos behind me. Pilar blasted the song from her cell phone, as she whirled past the table with a flip of her long brown ponytail. She made eye contact. "Girl, I'm going to teach you how to dance bachata!" Pilar pulled me to my feet. Right, right, together, left, left, together. We repeated the steps a few times before she grew bored and she sauntered off.

Amidst the chatter, the thin mustache man meandered over to our table to collect money. Irina, who sat to my left, pitched in a few dollars. They were purchasing lottery tickets, and intended to win the Mega Millions, she explained. Irina had moved to Cleveland from Puerto Rico two years prior, after a stroke had made living alone untenable. She currently resided with her daughter and spent her days at the center while her daughter was at work. Irina's doctor hoped that the regular social interaction would improve her health. But Irina's hopes for herself were even greater. "I just need to win two thousand dollars in the lottery so I can return to Puerto Rico," she said.

The clock struck 10am: time for bingo. Older adults pulled out their bingo cards, some playing as many as six cards at once, and paid the entrance fee of two pennies per card. A grey-haired woman stood at the front of the room to call bingo. She wore a t-shirt that said, "running late is my cardio." The grey-haired woman pulled the number 20 from the ball cage: "¡Veinte!" In unison, the crowd asked: "¿A dónde?" I came to learn that certain numbers were accompanied by phrases. For example, the number 21 is *la juventud* (youth). The number 33 is *la edad de Cristo* (the age of Christ). And, a personal favorite, the number 66 is *la gordita* (the

fatty). The number 20 sounds like the command *vete*, meaning get out. Referencing this double meaning, the crowd had yelled "¿a dónde? where to?" Rubén was the first to achieve bingo, his prize the bowl of pennies to which everyone had contributed their entrance fee. Rather than hoard the wealth, Rubén distributed two pennies to everyone at our table. Beatriz fondly called him "abuelito." "No, ella es abuela mía," [No, she is my grandma], Rubén corrected her as he kissed her hand.

After bingo, older adults ate lunch provided by the center and then returned to their homes. I had to cut out early to attend my afternoon class. As I left, I heard Beatriz's ring tone sing out loudly, "¡Puerto Rico, te adoro!" Puerto Rico, I adore you.

In his commentary on Puerto Rican Chicago, Ramón López (1995) describes the erection of two steel Puerto Rican flags on Division Street not as an ethnic marker, but the claiming of space:

[The flag] commemorates the nostalgia, the visible symbol of our belonging to a territory that we always remember, always with the hope to return or to visit...It commemorates the tradition of images—The Three Kings Day celebration, *coquis*, *vejigantes...*—that accompanies us in a city that belongs to another climate and whose rented walls we want to paint and ornament with our own footprint...(qtd. in Ramos-Zayas 2003, 214).

Older Puerto Rican adults in Cleveland shared Lopez's nostalgic sensibilities. Although a steel Puerto Rican flag did not mark their neighborhoods, symbols of nostalgia for Puerto Rico dotted the social interactions and physical environment at the Nuestra Señora de las Mercedes Senior Center. The fabric Puerto Rican flag in the middle of the wall, Irina's lottery ticket, the impromptu bachata lesson to the music of Romeo Santos, and Beatriz's ringtone—all were indications of nostalgia for and emotional attachment to Puerto Rico.

Through nostalgia, older adults integrate space and time. They express a wistful longing for life "back there," as well as a longing for "back then" (Parla 2009). Research has demonstrated that migrants orient themselves toward their ancestral homelands through nostalgia for a past that may no longer exist—or perhaps never existed—except in their imaginations (Ikels 1983; Jackson 2008; Safran 1991; Wyman 1993). These accounts take nostalgia for life "back there" and "back then" to be a limiting factor in migrants' experiences of belonging in new places of residency as well as motivation for returning to their homelands (King 2016).

In her book, *Chinese Senior Migrants and the Globalization of Retirement*, Nicole Newendorp (2020) challenged the notion that nostalgia is an obstacle to experiences of belonging. She argued that nostalgia—despite being oriented to the past—can also be forward-facing, emotionally anchoring older migrants to the new nation-state, rather than their place of origin.

In this chapter, I examine the relationship between older adults' nostalgia for Puerto Rico and their experiences of belonging in Cleveland. I follow Newendorp by approaching nostalgia as neither a barrier to belonging in Cleveland nor evidence that older adults are living in the past. Instead, I argue that nostalgia anchored older adults to a Puerto Rico of the past, yet formed the basis for experiences of belonging in the Cleveland of the present.

Belonging in Cleveland

To understand older adults' experiences of belonging throughout the life course, I asked them to rate how much they belonged to their local area for each city in which they had lived for one year or longer. Older adults rated their sense of belonging using a scale of 1 to 5. A

score of 1 indicated "I felt that I did not belong," while a score of 5 indicated "I really felt part of the community." Older adults reported feelings of belonging in Cleveland. On average, they rated their current sense of belonging as 4.2 out of 5. By comparison, older adults rated their sense of belonging while growing up in Puerto Rico as 4.5 out of 5, meaning that older adults felt that they belonged in both places, but felt they belonged slightly less in Cleveland than in Puerto Rico.

I was surprised to learn that older adults rated belonging in Cleveland so highly. In Chapter 5, older adults reported strong feelings of nostalgia and national pride for Puerto Rico. They felt split between Puerto Rico and the US, with many longing to return to the homeland but staying in Cleveland to access resources. Moreover, research shows that, despite being US citizens, Puerto Ricans see themselves outside the American mainstream as prejudicial interactions with Americans has limited socio-cultural integration (Aranda 2007). What factors contributed to older adults' sense of belonging in Cleveland, despite the nostalgia they felt for Puerto Rico?

Newendorp (2020) encountered a similar surprise in her work with older Chinese adults who had migrated to the United States. Older Chinese adults expressed nostalgia for the ideological values for which they strove as younger adults in Maoist China—collective cooperation, state support of workers, equality, and financial security. However, older adults believed these values were elusive in contemporary Chinese society. They longed for the Chinese state to make them feel valued as human beings, but they saw barriers to accessing medical treatment as evidence that they were not valued. They felt nostalgic for a simpler time, when life was oriented around production, but felt that contemporary Chinese lifestyles were

flashy and consumption-driven. Newendorp argues that older Chinese adults believed that, in the United States, they could access the values for which they were nostalgic. Nostalgia for the China of the past, thus, provided the emotional basis for belonging in the United States.

Similar to Newendorp's older Chinese migrants, older Puerto Rican adults expressed nostalgia for the ideological values they experienced as young people in Puerto Rico. But unlike their Chinese counterparts, older Puerto Rican adults did not associate these values with the United States. Rather, older Puerto Rican adults enacted these values in shared Puerto Rican spaces, often understanding these values to make them different from Americans (meaning non-Hispanic, white Americans). In the remainder of this chapter, I examine the creation of shared Puerto Rican spaces on Cleveland's Near Westside and how participation in these spaces contributed to older adults' experiences of belonging in Cleveland. I focus on the interview data that I collected during the pandemic in 2021, but also draw from my field notes when I conducted an in-person preliminary study at the Nuestra Señora de las Mercedes Senior Center (henceforth known as the "senior center") in 2018.

Creating Shared Puerto Rican Spaces in Cleveland

Older adults identified two factors that primarily contributed to their sense of belonging in Cleveland. First, 54 percent (n=13) attributed belonging to establishing meaningful relationships with other Puerto Ricans and Latinx community members. Second, 42 percent (n=10) attributed belonging to participation in organizations where other Puerto Ricans and Latinx community members gathered, namely the senior center, Puerto Rican or Latinx Catholic and Evangelical Protestant churches, and senior apartment complexes. These two factors were

often intertwined, as older adults built friendships by participating in these organizations. For this reason, I gloss both these factors as participating in Puerto Rican space—physical spaces in Cleveland where older Puerto Rican adults socialized and enacted the values they experienced while growing up in Puerto Rico. These spaces were not occupied exclusively by Puerto Ricans; members of other Latinx groups also participated. I use the term Puerto Rican space, as opposed to Latinx space, to highlight the ways that older adults re-created the Puerto Rico of their youths in a new place and time.

A Brief History

Puerto Ricans began arriving in Cleveland after World War 2, during the city's industrial boom. The demand for labor was high. Cleveland had been losing its Mexican labor force since the tightening of immigration policies in the 1930s. Seeking to fill labor shortages, recruiters were sent to Puerto Rico to entice workers with employment and a dream of a better life. In many ways, Puerto Ricans were ideal. As US citizens, they did not face legal restrictions on immigration like the Mexican labor force. Puerto Ricans migrated to Cleveland in large numbers (Bonutti and Prpic 1977; Pap 1973). After their contracts expired, many stayed in Cleveland and sent for their families from the island (Zentos and Marley n.d.). Historically, the Puerto Ricans who migrated to Cleveland came from three Puerto Rican municipalities: San Lorenzo, Yauco, and Yabucoa.

After 1960, Cleveland's Puerto Rican population increased steadily. In 1960, there were only 4,595 Puerto Ricans living in Cleveland. As of 2015, there were 30,240 Puerto Ricans in Cleveland, comprising 7.8 percent of Cleveland's total population (US Census Bureau 2015). Much of this growth occurred in the 1990s (Benedict and Kent 2004).

The majority of Puerto Ricans who came to Cleveland in the 1950s, after World War 2, lived on the Eastside around Hough, Lexington, and Superior avenues. These areas were attractive because of their proximity to Our Lady of Fatima Catholic Church, where there were Spanish-speaking priests. In 1958, Puerto Ricans moved from the Eastside to the Near Westside. Competition for housing, as well as a desire to be closer to jobs in the steel mills and industrial mills located on the Westside, prompted this mass exodus (Zentos and Marley n.d.) Puerto Ricans relocated to the Near Westside, especially the neighborhoods of Ohio City, Clark Fulton, and Tremont (Benedict and Kent 2004).

Religious institutions have played an important role in creating Puerto Rican space in Cleveland. The Catholic Archdiocese of Cleveland created the Spanish Catholic mission in 1954, and several Roman Catholic churches began offering services in Spanish, in order to meet the needs of the early Puerto Rican population (Bonutti and Prpic 1977). In 1975, Puerto Rican Catholics established their own church in the Ohio City neighborhood: the San Juan Bautista Catholic Church. As Cleveland's Puerto Rican population continued to grow, so did the congregation of San Juan Bautista, eventually causing them to outgrow their church building. San Juan Bautista partnered with another Catholic church to build a new church on Detroit Avenue: La Sagrada Familia. La Sagrada Familia was completed in 1998, its Spanish mission style similar to many churches in Puerto Rico. La Sagrada Familia is located across the street from the Nuestra Señora de las Mercedes Senior Center. There are also many Evangelical Protestant churches serving the Spanish-speaking population. The first Pentecostal church in Cleveland was the Spanish Assembly of God founded in 1952 (Zentos and Marley n.d.)

Clubs, social groups, and social service organizations have also played an important role in the establishment of the Puerto Rican community. Clubs often bear the names of Puerto Rican's island hometowns. For example, Club Alma Yaucana was named for the city of Yauco, Puerto Rico. The club was established in the Clark Fulton neighborhood in the 1960s to provide a haven for Puerto Ricans newly arrived in Cleveland. Similarly, Club San Lorenzo was established in 1963 for Puerto Ricans to socialize, learn English, find help navigating a new city, and enjoy Puerto Rican culture. Over time, these clubs became important sites of Puerto Rican community activism. The Spanish American Committee, located in the Ohio City neighborhood, was founded in 1966. The Spanish American Committee provides many services to low-income individuals and families, including translation services, English language classes, career counseling, childcare, and more.

Older Adults and Puerto Rican Space

For the older Puerto Rican adults in my study, "Puerto Rican space" in Cleveland has two levels. The first level of Puerto Rican space is the neighborhood; the majority live on Cleveland's Near Westside, where the Puerto Rican and Latinx population is concentrated. The second level of Puerto Rican space is organizations. Older adults' social lives revolve around their churches with Spanish services (Catholic and Evangelical Protestant), the senior center, and apartment buildings.

In describing their experiences of belonging, older Puerto Rican adults emphasized social relationships with other Puerto Ricans and Latinos in these spaces. They both emphasized their national identity as Puerto Ricans and asserted a pan-ethnic Latino identity, a symbol of solidarity among Spanish-speaking groups against assimilation in the United States (Acosta-

Belén and Santiago 1998). Regardless, older adults always positioned themselves as outside the American mainstream. For example, Lourdes, age 75, said that she did not belong to Garfield Heights—the suburb of Cleveland in which she resides—because it is "a community of Americans." She used the term "American" to indicate Non-Hispanic, white people who speak English. I was intrigued by the way Lourdes framed herself as non-American because in a previous interview she had made a point of ensuring I understood that Puerto Ricans are US citizens. I had asked her a question about how the pandemic had affected migration (using the Spanish word, "migración") between Puerto Rico and the United States. I had been careful to use the term "migration," not "immigration," as the former refers to movement from one place to another, whereas the latter implies movement across a nation-state border. In responding to my question, Lourdes claimed association with the United States: "I do not believe [the pandemic has affected migration]. I don't believe so because I do not know if you know that for Puerto Ricans, we do not have to obtain permission to come here because we are part of the United States."

Instead of belonging to the "community of Americans," Lourdes felt that she belonged in Puerto Rican spaces in Cleveland. As one of the few study participants who lived outside of Cleveland's Near Westside, Lourdes drove approximately twenty minutes to participate at the senior center and La Sagrada Familia church, so she could interact with other Puerto Ricans and Latinos.

Like Lourdes, older adults emphasized Puerto Rican space in their descriptions of belonging in Cleveland. Annie, age 69, for example, rated her sense of belonging in Cleveland a 5 out of 5. When she moved to Cleveland, she felt as though she had never left San Germán. "I

felt as though I were still in Puerto Rico because everyone spoke Spanish where I was," she said, referencing the apartment complex for older adults located on Cleveland's west side where she lived. Similarly, Rosario, age 75, claimed that she "knows more people here than in Puerto Rico." Over the twenty-one years she had lived in Cleveland, she had developed friendships with Puerto Ricans and other Latinos at her Catholic church, the senior center, and her apartment building—the same one occupied by Annie. "At church all the time there are parties, and they invite you. You meet people that way," she explained. I wondered if it was difficult for her to live in a city where the majority of people do not speak Spanish. "No, for me it is not difficult because where we live—I live in one of those government buildings and half of the residents are Latinos."

The Spanish language was an important feature of Puerto Rican space that contributed to older adults' experience of belonging. Seventy-nine percent (n=19) of the older adults in my sample did not speak English or did not speak English well. Although older adults had lived in Cleveland, on average, for 27 years (though not necessarily consecutively), they had not needed to learn English because they had always held jobs where English was not required and the majority of workers also spoke Spanish. After retirement, they sought out opportunities to socialize with other Spanish speakers.

Notably, only two older adults directly brought up experiences of discrimination while discussing belonging in Cleveland. They were both women who were fluent in English and had worked in English-speaking settings. For example, Gladis, age 60, moved to Garfield Heights at the age of 34 after the company she worked for shut down its office in Puerto Rico and offered to transfer her to Cleveland. Gladis was surprised to learn that many Americans do not know

that Puerto Ricans are US citizens. "Excuse me, sister, but my passport looks just like yours," she said as she recounted being asked whether she had a green card. "I know there's a social stigma about Latinos. I always found out that we had to work probably twice as much. I mean, in my workplace or any other workplace, twice as much as the average American, just to prove myself, just to stay there." Similarly, Yolanda, age 61, who worked for the city, identified racists as the most important issue she faces. She recounted switching departments several times over the twenty-five years that she has worked for the city due to the racism she encountered from her coworkers. Both women, however, still rated their sense of belonging in Cleveland a 5 out of 5 due to relationships with family, friends, and participation in shared Puerto Rican spaces.

Enacting Nostalgic Values

Beyond linguistic or national identity affiliations, Puerto Rican spaces played an important role in older adults' experiences of belonging in Cleveland. They were spaces where older adults enacted the values that they had experienced while growing up in Puerto Rico, and for which they were nostalgic. Nostalgia for the values they had experienced as youths emerged as older adults described experiences of belonging while growing up in Puerto Rico. Recall that I asked older adults to rate their sense of belonging for each city in which they had lived for one year or more. On average, older adults rated their sense of belonging as 4.5 out of 5 when growing up in Puerto Rico. They attributed the feeling of belonging to three values:

Compartiamos—the idea that we used to spend time together; Solidarity and reciprocal exchange—the idea that we helped each other; and Era tranquilo—the idea that there used to be nothing to worry about. These values not only shaped belonging in Puerto Rico, but contributed to experiences of belonging in Cleveland as well.

In the section that follows, I examine each value and how it contributed to experiences of belonging in Puerto Rico. I then examine how, despite associating these values with the Puerto Rico of the past, older adults enacted these values in shared Puerto Rican spaces, thus contributing to their experiences of belonging to Cleveland in the present.

Compartíamos: We Spent Time Together

When describing experiences of belonging while growing up in Puerto Rico, older adults fondly reminisced about the quality of social relationships. As I showed in Chapter 5, older adults associated Puerto Rico with close familial and social ties, characterized by multigenerational relationships and unity. Here older adults explicitly connected belonging to the idea that, back then, in Puerto Rico, compartíamos: we spent time with friends and family. Alma, age 73, for example, felt that she belonged while growing up in Carolinas because: "We spent time together, we spent time together well [Compartíamos, compartíamos bien]. It was not a bad community, we all got along well." Alma again invoked the idea that "compartíamos," as she remembered tagging along with her mother to visit her mother's friends or spending time with her aunts and grandfather who lived next door. María, age 66, similarly connected her sense of belonging while growing up in Santa Isabel to experiencing close relationships. "At that time in my neighborhood, there were many people. Now there are fewer," María explained, recognizing that many people "from before" had passed away. She connected the presence of many people to the experience of close relationships: "We did many activities and we were united, we were like a family."

Older adults' memories of close relationships reflected not only nostalgia for Puerto Rico, but the Puerto Rico of their youth. They felt that things had changed in Puerto Rico since

they had lived there. For example, Juan, age 72, felt "part of everything" when he was growing up in Comerío, which he attributed to close relationships among family, neighbors, and the community. But things had changed: "In those years, life was wholesome. There was not so much, there was not...For example, we did not know drugs. Yes, bad things happened, but not to the extent today. So the neighbors, the people, and the community always looked out for you, and if you made a mistake, they went to your parents and told them what you had done. And between them, they raised us to be better."

Although they no longer lived in Puerto Rico, and the Puerto Rico of their youth no longer existed, older adults continued to emphasize the importance of "compartir"—spending time with family and friends—when they described experiences of belonging in Cleveland.

Alma, who had felt she belonged in Puerto Rico because "compartiamos" used the same term to describe why she felt she belonged in Cleveland. "I arrived [in Cleveland] and everything was different, but I met brothers and sisters in Christ. We went to church, we congregated, we spent time together [compartimos]", she explained. Older adults, like Alma, came to feel that they belonged in Cleveland when they established relationships with other Puerto Ricans and Latinx community members. These relationships developed in Latinx Catholic and Pentecostal churches, as well as senior centers and apartment buildings where other older Latinx adults resided.

The ethnographic vignette with which I opened this chapter highlights how older adults enacted the value of *compartir*—spending time with friends—in shared Puerto Rican spaces. At the senior center, older adults spent approximately five hours a day socializing. They gathered around tables to converse; they played bingo, dominoes, and pool with friends; they worked on

craft projects; and they ate lunch together before departing. As exhibited by the warm exchange between Beatriz and Rubén, older adults also created "fictive" kin at the center. Beatriz had called Rubén "abuelito"—grandfather—while Rubén had jested that Beatriz was actually his grandmother. Indeed, I had a hard time keeping track of Beatriz's "fictive" kin network. She considered one woman her aunt, another her mother. Meanwhile, Beatriz was "mom" to another woman at the center. They debated whether they looked like each other—like biologically related aunt-niece and mother-daughter pairs—and teased each other about who was older and therefore should hold the senior position.

The relationships forged at the senior center and other Puerto Rican spaces were not mere sources of entertainment, and "fictive" kin designation were not simple niceties. They provided older adults meaningful sources of social support, especially in the absence of adequate familial involvement. For example, Graciela, age 69, attributed the feeling of belonging in Cleveland to the relationships she had cultivated at the senior center and her Pentecostal church. "[I feel I belong because] of the ease with which I feel *la tranquilidad*, spending time with friends, going to the center," she said. Graciela's friendships were of utmost importance to her, since her husband had passed away during the pandemic and many of her family members lived in Puerto Rico. She lived alone and relied on friendships for support. "The most important thing is I have Jesus Christ who gives me power, who gives me strength. I go to church three times per week and I feel very joyful in my church because I have a very beautiful relationship [tengo un compartir bien bonito], a very beautiful union with my pastors, my brothers and sisters in Christ. And even though my family is not here, but in Puerto Rico, what I do have here is the church and my friends here where I live. And at the center I also have

support."

The manner in which older adults looked to each other for support is reminiscent of Barbara Myerhoff's (1978) study of older Eastern European Jews at a senior center in California. Older Jewish adults had immigrated to the United States in poverty, having survived the Holocaust, to pursue better lives for themselves and their children. They had reared first generation Americans to become successful professionals and business people. Older Jewish adults longed to be remembered, for their children to bear witness to their past and present lives. Yet, the upward social mobility of their children had created strong social and cultural barriers between the generations. Myerhoff shows how older Jewish adults turned toward each other for this role, bearing witness to each other's stories at the senior center. They made each other feel visible.

Solidarity and Reciprocal Exchange: We Helped Each Other

Older adults also expressed nostalgia for the values of solidarity and reciprocal exchange that they had experienced while growing up in Puerto Rico. They described their youth as a time when people were unified, helped one another, and shared material resources. Older adults connected solidarity and reciprocal exchange among family, friends, and neighbors to their experiences of belonging while growing up in Puerto Rico. Older adults emphasized that, when they were growing up, everyone shared. Lourdes, age 75, for example, rated her experience of growing up in Vega Baja as a 10, which she acknowledged would be a 5 using my scale. Lourdes attributed her sense of belonging to mutual trust and exchange among neighbors, characteristics that she believed were lacking among neighborhood social networks today. "In *el barrio* where I lived, today you see a lot of drugs. But before, when I lived in *el*

barrio, you could go leave the door open and no one robbed you." She continued by describing in detail her memories of Christmas festivities, recalling how leading up to Christmas, her family celebrated Las Posadas—a festival marking Mary and Joseph's search for an inn, during which Lourdes and her family traveled from house to house singing religious songs. "It was so beautiful and everyone trusted each other. And everyone loved each other. It was a party during Christmas. Food was distributed everywhere, things were distributed, everything was donated." Lourdes again emphasized how things have since changed: "Now everything is lost...Last time I visited Puerto Rico, I had to pay five dollars for an avocado...My dad used to grow those...Now you have to pay for everything...No one gives you anything. But that's life, right? Everything changes."

Although Lourdes asserted that "everything changes," she connected solidarity to her experience of belonging in Cleveland. Lourdes described herself as "a person who, when I can help someone, I never say no." When I asked why she felt she belonged in Cleveland, Lourdes answered:

Let me tell you something, I belong to the senior citizens here. Now [the senior center] is closed because of the pandemic. But when I was there, I felt that I helped people because I am very active in things, I planned activities for Lent, Christmas. And if I had an idea, I went and told the [senior center] director, "let's do this." And she always carried it out. At church too, I am a leader...I am basically the one who plans things in the kitchen, I am the president of the ladies of La Sagrada Corazón.

For Lourdes, belonging was intimately tied to her commitment to helping others. She demonstrated her commitment by planning activities for the senior center and for La Sagrada Corazón, a Catholic church across the street from the senior center. Those activities were just the beginning. Lourdes also regularly visited and prayed for the sick with her church, she

brought groceries to those in need, and gave rides to friends and acquaintances who were unable to drive. Even during our interview about her life history, Lourdes multi-tasked by preparing a soup to bring to a wedding. She explained that when she participated in these acts of service, when people asked her for help, or complimented her cooking, that she felt she belonged: "It makes me feel part of the community because they treat me like I know something."

Note that Lourdes identified the senior center and her church as spaces where she can enact the values of solidarity and exchange. She was careful to specify the communities to which she belonged as she discussed belonging in Cleveland more broadly. First, she noted that she belongs among senior citizens. Later, Lourdes differentiated these Puerto Rican spaces from political activities in Cleveland. She notes that she does not participate in the local government sponsored activities during Hispanic Heritage month or the annual Puerto Rican parade because she "is not part of the community, as such." Lourdes's description revolved around shared Puerto Rican spaces for aging—the senior center and her church.

As an organization, the senior center represented the values of solidarity and reciprocal exchange. The center provided older adults with free lunch, rides to and from the center, and assistance from social workers. Perhaps more importantly for experiences of belonging, solidarity and reciprocal exchange also characterized social interactions at the center. Within the first couple weeks of fieldwork, I had noted the emphasis on small acts of sharing at the center and had scribbled tips on "how to fit in" in my field notes:

- 1. Greet everyone with a hug and kiss
- 2. Bring snacks to share. Cookies, crackers, pork rinds will do.

- 3. Share your bingo winnings
- 4. Learn to dance
- 5. Did I mention snacks?

These "tips" emphasize sharing material items, in addition to spending time with others. Take, for example, the tip to share bingo winnings. As I noted in the opening vignette, the prize for winning bingo was the pot of pennies, to which all players had contributed. The winner rarely kept the pennies for themselves. Instead, the winner distributed pennies to table mates, friends, or individuals who had previously shared pennies with them. Most of the time, the prize of pennies amounted to less than a dollar, so sharing pennies was no real financial sacrifice. The value of winning the pennies lay in the ability to share them with others as a gesture of friendship or a reciprocation of pennies previously shared with them.

Sharing food was also important. It was customary to share snacks while socializing, playing bingo, or engaging in other activities. Older adults would also bring food and coffee to members who were older than them or had cognitive impairments, demonstrating care and respect. On occasion, someone would bring desserts to share in celebration of a birthday or anniversary.

These small acts of sharing, as well as older adults' commitment to helping one another, were reminiscent of the solidarity and reciprocal exchange that older adults said characterized Puerto Rico while they were growing up. They expressed nostalgia for the values of that time and place, while enacting those same values in Puerto Rican spaces in Cleveland.

Older adults expressed nostalgia for the value of *tranquilidad*, which in the context of their upbringing referred to a simple, calm life, a life in which they had few worries or problems. They connected a general sense of *tranquilidad* to belonging while growing up in Puerto Rico. Take, for example, Megdalia's (age 63) account of growing up in San Lorenzo in the 1950s-1970s.

"It was good, very good. It was something very *tranquilo*, humble. We had to do everything, you know, in the bouse. I lived in *el campo*. It was like a farm where I lived in [San Lorenzo]...There was not very much help from the government. We had our animals...It was very calm. You had to do a lot of work, of course, because finances were tight, but everyone had their own land to grow food. It was very beautiful. There was nothing to worry about. There weren't as many problems like today—killings, we never heard nor saw that. Everyone went to church. We were very poor, but my childhood was beautiful. There was extreme poverty, a lot, a lot, but it was beautiful. I loved it. I wish that I could go back to that time with my children and grandchildren so that they could see it. I would love them to understand our beautiful culture and for them to understand what we went through."

Megdalia interweaves nostalgia for what she considered a tranquil, calm, beautiful childhood in San Lorenzo with memories of hardship, seeming to hold two contradictory accounts at the same time. In one instance, Megdalia fondly recalls "there was nothing to worry about." But in another, she identifies several worries: a work-intensive life style, extreme poverty, and the absence of governmental aid. By framing their childhoods as *tranquilo*, older adults idealized the Puerto Rico of the past as a simpler time, "simpler" meaning less morally-fraught. Megdalia acknowledges that there were problems, but problems she perceived to be less serious. As she mentions, there were no killings and everyone went to church. Older adults' descriptions of spending time together, solidarity, and reciprocal exchange similarly idealized the Puerto Rico

of the past as less morally fraught. For example, they described it as a time of no drugs, less crime, and mutual trust.

Nostalgia for a past in which there were fewer worries aligns with how older adults envisioned tranquil old ages. In Chapter 4, older adults identified three components that comprised a tranquil old age: relational harmony, meeting basic needs, and no problems or worries. The third component—no problems or worries—refers to the desire to avoid problems in old age, especially problems related to family, health, and finances. Older adults acknowledged, however, that problems to an extent were unavoidable. Accordingly, they endeavored to stay calm, cheerful, and not worry too much about what they could not control. Older adults believed these strategies would ameliorate the mental and emotional toll of their problems and would even deter the aging process. They advised seeking distraction, not thinking too much, and, above all, staying mentally *tranquilo* in order to have a good life in old age. Recall Lourdes' command to "Forget you have pain!" And Sylvia's advice to "Distract your mind with something, whatever it is...do something to forget if you are in a situation."

Just as feeling *tranquilo* contributed to experiences of belonging in Puerto Rico, so too did it contribute to experiences of belonging in Cleveland. Older adults cultivated tranquility at the senior center, viewing the center as a distraction from their troubles. The relationship between tranquility, distraction, and the center featured prominently in Sonia's account of belonging in Cleveland. Sonia, age 78, grew up in Isabela, but had lived in New York City for thirty years before she moved to Cleveland at the age of 58. She moved to Cleveland to be closer to her children, but struggled to navigate the city. In New York, she frequently walked or used the public transportation system. But in Cleveland, Sonia found public transportation to be

less accessible. Moreover, Sonia did not know how to drive and disliked bothering her children.

She felt trapped at home: "I used to feel very depressed, stuck at home, not talking to anyone."

When a social worker brought her to the senior center, Sonia began to feel that she belonged in Cleveland. She connected her newfound sense of belonging to *la tranquilidad* at the center: "I like Cleveland because it is *tranquilo...*I like to make friends...I have been at the center for nearly five years. At the center the women [referring to the employees] have treated me well, I cannot complain about any of them. They have treated me well, you know?" Sonia emphasized that the center offered distraction: "I do crafts, I entertain my mind, I put my mind on what I am doing, and I get along with everyone. I had depression and since I have been going to the center, that all disappeared." She also valued the social support she received from the center employees. "I feel great, proud because they treat me well and the days that I do not come, they go crazy asking me: 'Ay, why did you not come?'"

As we discussed her daily routine, Sonia brought up the center and its virtues as a distraction: "I like to go to the center because it keeps me entertained, I do crafts, it keeps my mind entertained doing other things, doing crafts. It clears my mind. I spend the day *tranquila* and feeling awesome with friends."

When the center closed during the COVID-19 pandemic, Sonia lost her primary source of friendship and distraction. The staff sent monthly packages to older adults hoping to "keep their minds on something instead of being in front of the tv all day," a staff member explained. For example, they sent out a booklet once per month that contained memory games and cross word puzzles, as well as instructions and supplies to complete a craft project. But these activities did not satisfy Sonia's desire for distraction.

I asked Sonia how the center closing had affected her. "Aye, so much, *mija*," she said. "I thought a lot, I was going crazy. I prayed that they would open the center. I kept calling and they would say no, that they were not going to open it, that it was going to take a long time." Finally, the center did reopen and Sonia could rejoin her friends. Some things had changed. The older adults were split into two groups: Group A attended the center on Mondays and Wednesdays, while Group B attended on Tuesdays and Thursdays. Everyone wore masks and followed social distancing guidelines. And Sonia had grown weaker from the social isolation and her own experience of catching Covid-19.

But Sonia again experienced *la tranquilidad* that she had originally connected to her sense of belonging in Cleveland: "I feel very *tranquila* because now, I'm telling you, the [staff] help us to make crafts, to make many beautiful things, and so you put your mind on the things that you are doing and you have fun joking and laughing. I like it, I like it. I was dying for them to finally open the center!"

Sonia's description of the center touches on the previously discussed values of spending time with friends, solidarity, and reciprocal exchange. She treasures her relationships with friends and staff members, who check on her when she misses a day at the center. But her description also highlights the value of feeling as though one has nothing to worry about. Sonia never claimed that the senior center completely eliminated her problems. But she did believe that the center offered a distraction from them. Throughout the interview, Sonia repeatedly contrasted thinking too much with having a clear mind. Before a social worker brought her to the center, she felt depressed. Then when the center closed during the pandemic, Sonia says she "thought a lot" and "was going crazy." In contrast, the center "clears the mind," "keeps the

mind entertained," and puts "your mind on the things you are doing and you have fun joking and laughing," all of which contributed to Sonia feeling *tranquilo* and less depressed.

At the senior center, older adults like Sonia had the opportunity to enact the value of feeling *tranquilo*, of having few worries, for which they were nostalgic. In examining this theme, I do not mean to imply that older adults denied the existence of problems. Nor do I suggest that, instead of receiving support to address problems in their lives, older adults should just seek distraction. I mean to highlight the ways that older adults mitigated stress in their lives by participating in Puerto Rican spaces. Their participation made them feel more *tranquilo*, which in term contributed to a sense of belonging in Cleveland.

Conclusion

This chapter examined older Puerto Rican adults' experiences of belonging in Cleveland. Despite maintaining strong attachments to Puerto Rico, older adults reported feeling that they belonged in Cleveland. They attributed their feelings of belonging to participation in shared Puerto Rican spaces, which included the senior center, churches, and apartment buildings for older adults on Cleveland's Near Westside. Puerto Rican spaces were powerful for fostering a sense of belonging. They were spaces where older adults engaged with others who shared their linguistic and national identity affiliations, and more importantly, they were spaces where older adults enacted the values that they had experienced as younger people in Puerto Rico, and for which they were nostalgic. In Puerto Rican spaces, older adults spent time together, practiced solidarity and reciprocal exchange, and sought peace of mind through entertainment. Older adults did not see these values as characteristic of the US; rather, they were evidence of spaces of belonging in Cleveland, despite viewing themselves as outside the American mainstream.

These findings show that for migrants, nostalgia for the homeland is not necessarily a barrier to belonging in a new place, and that for older adults, nostalgia is not a sign of being "stuck in the past." Instead, nostalgia for life "back there, back then" can contribute to experiences of belonging in new places and times.

Chapter 7

Discussion and Implications

This dissertation examined the aging and migration experiences of an understudied group: older Puerto Rican adults who grew up in Puerto Rico during the postwar period of economic restructuring and high out-migration, and subsequently came to Cleveland through a range of pathways. This dissertation addressed two research questions: How do older Puerto Rican adults conceptualize good old ages? And how do im/mobility regimes relate to the ways older adults conceptualize, pursue, and experience good old ages? In this final chapter, I tie together my findings to show how they address the research questions. Then I discuss theoretical implications for the anthropology of aging, the anthropology of migration, and gerontology. I conclude by proposing future research directions.

Research Question #1: How Do Older Puerto Rican Adults Conceptualize Good Old Ages?

One of the primary contributions of this study is the finding that older Puerto Rican adults conceptualized a good old age as a tranquil old age. I use the phrase "tranquil old age" to reference older adults' frequent use of the Spanish terms "la tranquilidad, "una vida tranquila," and "estar tranquilo" to describe their hopes and desires for old age. These terms, directly translated, capture a sense of tranquility or peace, but they took on additional meanings when I asked older adults about good old ages.

In Chapter 4, I showed how a tranquil old age encompassed three themes: relational harmony, meeting basic needs, and no problems or worries. First, relational harmony referred to living in peace among family, friends, and neighbors. Older adults emphasized the importance of maintaining loving familial relationships, avoiding conflict, and cultivating social

connections at senior centers, churches, and in neighborhoods and apartment buildings.

Second, meeting basic needs referred to maintaining good health, living in a safe environment, and having the financial resources to support the previous two aspects. In describing this theme, older adults specified that they did not desire abundance or wealth, but wanted to be comfortable. Older adults also acknowledged that disease and physical decline were often unavoidable. Under those circumstances, they focused instead on persevering and not allowing physical changes to limit their activity. Third, the theme of "no problems, no worries" referred to the absence of problems, as well as not worrying as a strategy for dealing with problems when they inevitably arose. Older adults recommended staying calm, seeking distraction, and not worrying in order to feel *tranquilo* and even to avoid aging altogether.

Tranquil old ages also included beliefs about the best types of care and best types of residence for older adults. Regarding care, the majority reported that family-based care is the best type of care for older adults. Most older adults indicated that children should care for their parents, but some suggested that another family member, such as a grandchild, could perform care if older adults' children were unavailable or unsuitable for providing care. Older adults argued that family-based care was best because family members perform care with understanding and love, and because it is family members' responsibility to care. However, the preference for family-based care was not without its complexities and disclaimers. Older adults feared being a burden to their children, and therefore tried to negotiate their eldercare preferences as well as their children's familial and economic obligations.

Regarding residence, the majority preferred living independently in their own home, while a small group preferred living in the household of a family member. Older adults

indicated that living independently in their own home gave them the freedom to do as they pleased and allowed them to avoid the complexities of residing with their children. At the same time, older adults wanted to balance independence with feeling safe. Older adults agreed that nursing homes were undesirable.

The themes constituting a tranquil old age are not unique to older Puerto Rican adults. However, the frequent use of the Spanish terms "la tranquilidad, "una vida tranquila," and "estar tranquilo" to describe their hopes and desires for old age suggests a culturally-patterned way of conceptualizing a good old age. This observation is supported by previous research that found that older Latinx adults emphasize tranquility and peace. For instance, Plascencia found that older Latinx adults (including Puerto Ricans) described their community as age-friendly through the concept of "tranquilo ambiente," translated as a calm or peaceful environment.

Plascencia (2022) found that tranquilo ambiente included 1) a sense of perceived personal safety, 2) ethnic and social connectedness, and 3) spatial and cultural accessibility. Other researchers found that older Latinx adults in both the US (Hilton et al. 2012) and Mexico (Reyes-Uribe 2015) emphasized social engagement and positive attitude in their definitions of successful aging, followed by independence, spirituality, and physical health. Regarding the theme of positive attitude, older Latinx adults in Mexico specifically identified having a sense of peace and enjoying life, in addition to coping and having a positive attitude (Reyes-Uribe 2015).

The notion of a tranquil old age advances understanding of older Puerto Rican adults' cultural preferences for aging, care, and residence. At the same time, it is important to maintain a critical stance toward definitions of good old ages. In Chapter 2, I made the point that how older people define good old ages may reveal their desires and preferences, but it may also

reveal what types of lives and futures older people imagine to be available to them, and what types of lives and futures are foreclosed due to broader circumstances (Danely 2016). For example, it is striking that older adults emphasized willpower and a positive attitude in two of the three themes constituting a tranquil old age. For meeting basic needs, older adults recommended persevering and not complaining when health declines. For "no problems, no worries," older adults explained the importance of staying calm and seeking distraction so as not to allow their problems to mentally and emotionally affect them. The emphasis on willpower and a positive attitude reveals the limited options available to older adults.

In making this point, I do not mean to ignore what older adults said about their own desires and preferences, nor do I mean to minimize their agency and resilience. Throughout this dissertation, I have shown how older adults aspire to better lives, support one another, and creatively respond to challenges, all while maintaining a sense of humor. Taking narratives of tranquil old ages at face value, however, risks causing harm. For example, one might conclude from the theme of "meeting basic needs," in addition to the emphasis on willpower, that older Puerto Rican adults do not desire much, and therefore improving social safety net programs for low-income older adults is unnecessary. Or one might note the preference for family-based care and conclude that investments in state-funded care programs are unnecessary; they prefer the family anyway. For these reasons, it is important to balance older adults' narratives of tranquil old ages with consideration of their broader circumstances and the options that are available to them. The importance of that consideration becomes even more clear in my analysis of research question #2.

Research Question #2: How Do Im/mobility Regimes Relate to How Older Puerto Rican Adults

Conceptualize, Pursue, and Experience good Old Ages?

Older adults imagined tranquil old ages as a cohesive ideal, comprised of relational harmony, meeting basic needs, and "no problems, no worries." As they discussed their migration decisions, beliefs about aging, and life histories, however, older adults indicated that tranquil old ages were not cohesive. Rather, they were fractured across space. In Chapter 5, I showed how older adults mapped the values that comprise tranquil old ages onto different spaces. When they imagined life in the United States, older adults emphasized the ability to meet their basic needs. They cited access to healthcare, deemed to be effective and efficient; they highlighted safe neighborhoods and cities that made them feel *tranquilo*; and they stressed financial resources in the form of jobs and social services. In contrast, when they imagined life in Puerto Rico, older adults emphasized relational harmony. They commended the presence of strong familial and social ties; and they proudly touted the deep connection they felt to their homeland. That is not to say that older adults believed those values were only available in the United States or in Puerto Rico. It is simply a matter of what they emphasized.

I argued that the mapping of values onto different spaces does not occur in a vacuum, but is shaped by im/mobility regimes. Im/mobility regimes shape what options are available to older adults, where those options can be found, and what strategies older adults can employ to pursue those options. For example, some federal benefits are not available to citizen-residents of Puerto Rico, or are only available in very limited capacities. For low-income older adults, this differential access to federal benefits makes it difficult for them to meet their basic needs in Puerto Rico. They can access those benefits, however, by relocating to the US. Therefore, the

ways that older adults map tranquil old ages cannot be understood apart from the politicaleconomy.

The relationship between tranquil old ages and im/mobility regimes additionally lays the foundation for migration as a strategy for the pursuit of a good old age. As I showed in Chapter 5, some older adults strategically enacted their heightened mobility as US citizens to migrate between Puerto Rico and the United States depending on their current desires and needs. For instance, some migrated to Cleveland to access healthcare when sick and then returned to Puerto Rico to be near family. Others migrated to Cleveland for work, federal benefits, or family, but always planned to return to Puerto Rico. In old age, they find that they cannot leave the United States because doing so will require giving up the federal benefits upon which they rely, or it will mean navigating an underfunded healthcare system in Puerto Rico. Older adults' conceptualizations of tranquil old ages involved conscious consideration of where they might find tranquility. It is in this context that migration becomes a strategy for the pursuit of a tranquil old age.

It is tempting to frame migration to the United States as an adaptation to aging because migration helped older adults to access what they needed. However, framing migration as an adaptation obscures the inequitable circumstances to which older adults were responding (Oliver-Smith 2016). Migration always entailed tradeoffs. When older adults migrated to the US, they accessed resources that helped them to meet their basic needs. However, they forewent the relational harmony that they associated with Puerto Rico. Similarly, when older adults returned to Puerto Rico, they experienced the relational harmony that was so important

for feeling *tranquilo* in old age. However, they sacrificed their SSI benefits and had to navigate an underfunded healthcare system in Puerto Rico.

These findings demonstrate how achieving a tranquil old age was complex, if not altogether elusive. Because of their inequitable circumstances, older adults often had to choose one component of a tranquil old age over another. They could experience relational harmony in Puerto Rico, or they could meet their basic needs in the United States. The older adults in my study chose to stay in the United States, even though many would have preferred to grow older in Puerto Rico.

Despite these inequitable circumstances, older adults found ways to forge good lives. In Chapter 6, I showed how older adults cultivated belonging in Cleveland through the creation of Puerto Rican space. Puerto Rican space included the Nuestra Senora de las Mercedes Senior Center, churches, and apartment buildings for older adults on Cleveland's Near Westside. Puerto Rican spaces were powerful for fostering a sense of belonging. They were spaces where older adults engaged with others who shared their linguistic and national identity affiliations. But, more importantly, they were spaces where older adults enacted the values that they had experienced as young people in Puerto Rico and for which they were nostalgic. In Puerto Rican spaces, older adults spent time together, practiced solidarity and reciprocal exchange, and sought peace of mind through entertainment. I argued that, even though older adults associated these values with a Puerto Rico of the past and not with the contemporary US, these values contributed to older adults feeling like they belonged in Cleveland.

Implications for the Anthropology of Aging

Throughout this dissertation, I have shown how a focus on migration advances the

anthropology of aging. First, the incorporation of migration into the anthropology of aging counters approaches that portray old ages as a time of stasis and decline (Buch 2015) and those that privilege continuity and stability to the point of pathologizing change in older adults' lives (Cole and Durham 2007). It does so by highlighting creative agency and adaptability in old age, and by approaching older adults as social actors who adapt to or initiate changes related to migration (Dossa and Coe 2017; Lamb 2009; Yarris 2014). This dissertation shows multiple ways in which older Puerto Rican adults actively participate in migration. They engage in back-anforth migration to negotiate good old ages; they sustain transnational family ties in Puerto Rico and across the United States; and, even if they do not physically migrate, they participate in cognitive mobility by dreaming of returning to Puerto Rico. I also show how older adults create new spaces for belonging after migrating to Cleveland, even if they prefer to spend old age in Puerto Rico.

Second, the incorporation of migration into the anthropology of aging accentuates how individual narratives of aging articulate with inequitable socio-cultural, political, and economic processes (Cole and Durham 2007). Anthropological approaches to aging have been criticized for focusing on individual-level narratives and adaptations to aging, while obscuring the inequitable power dynamics that shape who lives a good old age, as they perceive it, and who does not (Baars et al. 2006; Danely 2016; Dannefer and Settersten 2010). Older Puerto Rican adults' migration histories, however, show how they have navigated inequitable political-economic processes throughout the life course. These processes simultaneously undergirded the need to migrate (e.g. seeking employment, accessing federal benefits) and limited the options available to older adults in old age.

Taken together, anthropological scholarship on aging and migration highlights a tension between creative agency and inequality in old age, as well as the need to merge micro and macro perspectives in theories of aging. This dissertation proposes that anthropologists might reconcile the tension between creative agency and inequality in old age by attending to the interplay of two concepts: a good old age and im/mobility regimes. As I showed in Chapter 2, my approach to the good old age concept blends the cross-cultural study of factors constituting a good old age (e.g. Project A.G.E.) with the anthropology of the good. The anthropology of the good examines how people living in different societies endeavor to create good in their lives, including under difficult or oppressive circumstances (Robbins 2013). Meanwhile, im/mobility regimes calls attention to the political-economic processes by which older people are bounded, emplaced, forced, and permitted to migrate. This framework approaches mobility as multi-scalar, related to globe-spanning power dynamics, and inextricably linked to immobility.

By examining the interplay of a good old age and im/mobility regimes, this dissertation advances understanding of how people develop notions of good old ages and how they respond when their ability to achieve good old ages is constrained by inequitable political, economic, and socio-cultural forces. I have shown how older Puerto Rican adults envision tranquil old ages, hoping to finally obtain in old age the tranquility they have been seeking over the life course. In analyzing their quests for tranquil old ages, I have attempted to balance consideration of how older adults forge meaningful lives, navigate difficult circumstances, and create spaces of belonging, with criticism of the inequitable forces rooted in US colonialism that have often rendered tranquility elusive. The anthropology of aging will be enhanced by ethnographic approaches that assess the relationship between politico-economically structured

inequality and attempts to forge meaningful lives in old age.

Implications for the Anthropology of Migration

Temporality and the Life Course

Throughout this dissertation, I have also shown how a focus on aging advances the anthropology of migration. By focusing on older adults, my findings foreground the role of temporality and age in shaping past, present, and future mobilities and immobilities. In Chapter 5, I showed how the search for tranquility did not begin in old age, but was a process that had occurred throughout the life course, taking on various iterations. Recall that Maria cited the ability to meet her basic needs as the motivation for both of her moves to the US. In her youth, she focused on economic opportunity, but in mid-life, she focused on security as access to social services. As older adults envisioned their futures, they turned their attention to tranquility in Puerto Rico, where they hoped to spend their final years and ultimately die.

Previous work, not focused on older adults, has similarly found that back-and-forth migration occurs throughout the life course (Courtney-Smith 2005) and that migrants aspire to return to their homelands (Safran 1991; Wyman 1993). The focus on older adults and their retrospective life histories, however, highlights the ways that migration decisions and experiences are moderated by stage of the life course (Gardner 2002).

My findings additionally advance understanding of how temporality relates to migrant experiences of social inclusion and exclusion. In Chapter 6, I examined the role of nostalgia—a wistful longing for life "back there," "back then"—in older Puerto Rican adults' experiences of belonging. Previous research has demonstrated that migrants orient themselves toward their ancestral homelands through nostalgia for a past that may no longer exist—or perhaps never

existed—except in their imaginations (Ikels 1983; Jackson 2008; Safran 1991; Wyman 1993). These accounts take nostalgia for life "back there" and "back then" to be a limiting factor in migrants' experiences of belonging in new places of residency as well as motivation for returning to their homelands (King 2016). My findings, however, build on Newendorp's (2020) work with older Chinese migrants by approaching nostalgia as neither a barrier to belonging in Cleveland nor evidence that older adults are living in the past. Instead, I argue that nostalgia anchored older adults to a Puerto Rico of the past, yet formed the basis for belonging in the Cleveland of the present. The focus on older adults, therefore, advances understanding of the ways past, present, and future interact.

Im/Mobility Regimes

In addition, my findings advance the im/mobility regimes framework. Here I shift focus from aging to how the study of Puerto Rican migration contributes to the anthropology of migration. First, my findings illustrate how nation-state policies beyond immigration regimes, which regulate who many enter or exit the country, influence migration and affect older migrants' lives. In my review of the mobilities literature in Chapter 2, I explained how "methodological nationalism"—which refers to the assumption that social and historical processes are contained within the borders of individual nation-states (Wimmer and Glick Schiller 2002, 2003)—forecloses certain analytical connections within migration scholarship. For instance, methodological nationalism leads scholars to overwhelmingly investigate international migration and to label as mobile only those that migrate across nation-state borders (Glick Schiller 2010). As a result, scholars have tended to ignore internal migration (King

and Skeldon 2010) and have overlooked similarities between internal and international migration categories (Glick Schiller and Salazar 2013).

The study of Puerto Rican migration, however, calls attention to the ways that governments regulate the movement of their own citizens. In Chapters 2 and 6, I show how my research participants were affected by two Puerto Rican im/mobility regimes. First, they were born and grew up during a mass exodus of Puerto Rican laborers (the "Great Migration") which resulted from the Puerto Rican and US federal governments deliberately promoting outmigration as an economic development strategy. Second, they attempted to navigate differential access to federal benefits on the basis of residence through migration. While policies restricting federal benefits to citizen-residents of Puerto Rico are seemingly unrelated to migration or mobility, they contribute to outmigration from Puerto Rico and deeply influence older migrants' lives.

By focusing here on internal migration, I do not mean to reproduce the categories of methodological nationalism. Rather, I aim to highlight similarities between internal and international migration, even though the former has tended to be side-lined. Scholars of Puerto Rican migration tout the study of Puerto Rican migration as a way to "control" for legal citizenship status (Aranda 2008) and examine the factors that shape migration beyond the US immigration regime (Pérez 2004). Similarly, I argue that Puerto Rican migration helps us to identify aspects of the migration process that influence migrants' lives, beyond crossing nation-state borders. It showcases similarities between internal and international migration, thereby advancing understanding of mobility as multi-scalar and related to forces that structure the

political economy (which may include nation-state immigration regimes, but is not limited to them).

Furthermore, my findings advance understanding of how unequal power relationships simultaneously configure mobilties and immobilities. In Chapter 5, I showed how older adults strategically enacted their heightened mobility, as US citizens, to migrate between Puerto Rico and the United States, depending on their current needs and desires. For example, many older adults migrated to the United States in order to access federal benefits that are not available to citizen-residents of Puerto Rico, or are only available in a very restricted capacity. Colonial and developmental discourses have historically framed Puerto Ricans' ability to freely migrate to the United States as a "privilege" (Pantojas-García 1990). Meanwhile, policy analysts have chastised Puerto Ricans for not achieving the same upward social mobility of other Latinx groups in the United States, even though Puerto Ricans have an "advantage" as citizens (e.g. Chavez 1991). Older Puerto Rican adults themselves sometimes echoed the message that the ability to migrate, unrestricted, to the United States and access federal benefits was a "privilege" distinguishing them from other Latinx groups (see also De Genova and Ramos-Zayas 2003 for Puerto Ricans in Chicago). Puerto Ricans' heightened mobility, however, must be understood in relationship to unequal power dynamics. The withholding of federal benefits from citizen-residents of Puerto Rico is discriminatory. The need to leave one's homeland in order to obtain federal benefits is unjust, especially because access to these benefits is necessary for low-income older adults' survival.

These unequal power dynamics are further illustrated by older Puerto Rican adults' immobilities. As I showed in Chapter 5, the very policies that contribute to Puerto Rican

mobility also produce immobility. Some older adults reported that, even though they preferred to live in Puerto Rico, they could not leave Cleveland because they relied on federal benefit programs. No policies restricted their movement, yet they were immobilized. This finding builds on previous research using "immobility regimes" and "immobilizing regimes of migration" to examine how migration restrictions and closed borders can "put on hold" transnational intergenerational care practices (Brandhorst, Baldassar, and Wilding 2020; Merla et al. 2020) or prevent the migration of older people altogether (Amrith 2021; Askola 2016). However, older Puerto Rican adults' experiences of immobility again highlight the utility of a multi-scalar approach that considers how policies that are not specifically targeted at limiting migration can also produce immobilities.

Implications for Gerontology

While I have focused on the anthropologies of aging and migration throughout this dissertation, my findings also have implications for gerontology. First, these findings highlight the utility of the good old age concept as a subjective alternative to successful aging, which has been the dominant gerontological paradigm since the 1980s. As I showed in Chapter 2, successful aging has a number of limitations. These include the uncritical application of American cultural values to other groups; the under-theorization of how social inequalities shape aging; the perpetuation of ageist and ableist ideas; and the exclusion of older adults' own voices. The good old age concept, however, circumvents these limitations and opens analytic possibilities. For instance, the good old age concept does not presume that all older adults value the same things; nor does it evaluate whether older adults live up to pre-determined measures of well-being. Instead, the good old age concept links beliefs about aging to the socio-

cultural, political, and economic context. It elicits older adults' subjective perceptions of aging and employs an inductive approach, meaning that the factors that contribute to a good old age emerge from the data. In so doing, the good old age concept facilitate questions that the successful aging paradigm obscures, such as: How do diverse groups of older adults define meaningful lives in old age? What is most valuable to them? And how do they forge meaningful lives, despite chronic disease, cognitive deficits, and disabilities?

My findings highlight the value of taking an inductive approach. Older Puerto Rican adults conceptualize good old ages in ways that challenge and align with Rowe and Kahn's criteria for successful aging. As I demonstrated in Chapter 4, older Puerto Rican adults envisioned good old ages characterized by feeling tranquilo—tranquil, calm, at peace. To feel tranquilo, older adults emphasized the importance of cultivating loving familial relationships, and they suggested that older adults stay positive and seek distraction so that their problems could not affect them emotionally. These two themes are not included in Rowe and Kahn's criteria. To feel tranquilo, older adults additionally emphasized the importance of good health, which does align with Rowe and Kahn's criteria of avoiding disease and disability and maintaining high levels of physical and cognitive functioning. However, older Puerto Rican adults vision of good health adds complexity to Rowe and Kahn's criteria. Some older Puerto Rican adults did not think of good health as tied to an objective measure (e.g. the presence or absence of disease), but understood feeling healthy to be mediated by social participation.

Second, my findings contribute to environmental gerontology, which seeks to understand how multiple levels of the environment (e.g. household, neighborhood, region, nation-state) interact to influence older adults' well-being (Golant 2015; Lawton and Nahemow

1973). Gerontologists, however, have tended to emphasize the household and neighborhood levels and have under-examined mobility within and across nation-states. My findings advance understanding of how older adults negotiate aging within and across nations.

Future Research

Older adults' quests for tranquil old ages illustrate the need for ethnographic approaches that assess the relationship between politico-economically structured inequality and endeavors to forge meaningful lives in old age (Knauft 2018). Future aging research can build on that approach in three ways. Some of the research directions I identify are specific to research with older Puerto Rican adults, while others apply to the study of aging generally.

First, future research should examine how interlocking networks of power connect older migrants' mobilities within and across households, neighborhoods, and nations. This dissertation focused on mobility between Puerto Rico and the United States. However, future work should take full advantage of the multi-scalar approach embedded in the im/mobility regimes paradigm by examining how older adults' mobilities at various scales influence one another. For example, some of my research participants suggested that migrating to Cleveland results in limited mobility within neighborhoods because Cleveland's climate is harsh and because older adults leave behind their social networks in Puerto Rico. Future research might investigate how mobility across nations influences mobility within and across households and neighborhoods.

Second, future research should employ a multi-sited approach to aging and migration.

This dissertation focused on the aging and migration experiences of older Puerto Rican adults in Cleveland. Older adults reported their perceptions of aging in Puerto Rico but they were not *in*

Puerto Rico. As such, this dissertation captures the Cleveland side of Cleveland-Puerto Rico migration pattern. More research is needed to understand the aging experiences of older Puerto Rican adults who return to Puerto Rico.

Third, future research should investigate how older Puerto Rican adults negotiate tranquil old ages in everyday life. Due to pandemic-related research restrictions, this research was carried out remotely. I relied on interviews to elicit older adults' perspectives on aging and reports of their experiences. Future in-person ethnographic fieldwork will enhance understanding of how older Puerto Rican adults and their families negotiate tranquil old ages in everyday life, and may identify discrepancies between what people say and what they do.

APPENDIX

Older Adult Semi-Structured Interview Guide

START RECORDING

I am here today [interview date] with participant [study ID] from [city/neighborhood].

First, I have a few demographic questions: *Primero, tengo algunas preguntas demográficas para usted.*

- 1. Age ¿Cuántos años tiene?
- 2. Race/Ethnicity ¿Cuál es su raza e etnicidad?
- 3. Gender ¿Cuál es su género?
- 4. What language do you speak at home? ¿Cuál idioma habla en casa?
- 5. Marital Status ¿Qué es su estado civil?
- 6. Children ¿Cuántos hijos tiene?
- 7. Are you a religious person? If so, which religion? ¿Usted es una persona religiosa? Cuál religión?
- 8. What city and neighborhood do you live in? ¿Dónde vive ahora? En cuál ciudad vive? En cuál barrio?
- 9. What type of residence do you live in? ¿En qué tipo de residencia vive usted? (Propia casa, apartamento, con un hijo)
- 10. How many people live with you? ¿Cuántas personas viven con usted?
- 11. Job? Retired? ¿Está jubilado/a?
- 12. Do you currently receive any social services? ¿Recibe actualmente servicios sociales? Cuáles?
- 13. Do you currently receive any type of care? ¿Recibe actualmente algun tipo de cuidado o asistencia?

Now I have some questions about your daily life. Ahora tengo algunas preguntas sobre su vida diaria.

- 14. What is a typical day like for you? ¿cómo es un día típico para usted ahora?
- 15. What types of activities do you participate in? Do you have hobbies? Work? Who do you do these activities with? ¿En qué actividades participa? ¿Tiene pasatiempos? ¿Trabaja? ¿Con quién hace esas actividades?
- 16. How would you describe yourself? What kind of person are you? ¿Cómo se describiría a si mismo/a? ¿Qué tipo de persona es usted?
- 17. Overall, how healthy do you consider yourself? En general, cuán saludable se considera a si mismo/a?
- 18. Do you think you are healthier or less healthy compared to friends of a similar age? Mental and physical health? Piensa que usted está mas or menos saludable que sus amigos de edad similar? Diría la misma para la salud física y mental?

Next, I would like to learn about your perspective on aging. Ahora quisiera aprender sobre su perspectivas en el envejecimiento.

- 19. From your perspective, what does it mean to be old? ¿En su opinion, qué significa ser Viejo/a?
- 20. Do you consider yourself an old person? ¿Cree que usted es una persona vieja?
- 21. What does it mean to live ¿ a good life in old age to you? ¿En su opinion, qué significa vivir una Buena vida en la vejez?
- 22. What type of care is best for older adults? If you were unable to take care of yourself, who would you want to care for you? ¿Qué tipo de cuidado es el mejor para las personas mayores? Si usted no pudiera cuidar de si mismo/a, quién quisiera que lo cuide?
- 23. What type of residence is best for older adults? (E.g. own home, with children, retirement community, nursing home, etc.) ¿Cuál tipo de residencia es el mejor? (Propia casa, vivir con hijos, una égida, hogar)
- 24. What steps should someone take in order to live a good life in old age? ¿Cuáles medidas debe tomar para vivir una Buena vida en la vejez?
- 25. Who has the responsibility to care for older adults? ¿Quién tiene la responsabilidad para cuidar de las personas mayores?
- 26. How often do you see your family? Very often, somewhat often, not often. *Con que frecuencia ve a su familia? Muy frecuentemente, a veces, o no frecuentemente.*

- 27. Tell me about your family. What is your relationship with them like? *Cuéntame de su familia y su relación con ellos*.
- 28. How do your family members contribute to your life? Probe: On a day-to-day basis. ¿Cómo contribuyen los miembros de su familia a su vida? Día por día?
- 29. In what ways do you contribute to your family? ¿Cómo contribuye usted a las vidas de sus familiares?
- 30. Do you have any caregiving duties? ¿Tiene algunas oblicaciones del cuidado? (e.g. cuidado maternal)
- 31. How satisfied are you with your family relationships? Very satisfied, somewhat satisfied, not satisfied. Cuán satisfecho/a está con sus relaciones familiares? Muy satisfecho, poco satisfecho, no satisfecho.
- 32. How satisfied are you with your current life circumstances in general? Very satisfied, somewhat satisfied, not satisfied. Cuán satisfecho/a está con las circunstancias de su vida en general? Muy satisfecho, poco satisfecho, no satisfecho.
- 33. Is there anything you would change? Hay algo que le gustaría cambiar si pudiera?
- 34. Do you think most older adults you know get to live a "good" life in old age? Why or why not? Piensa que la mayoría de las personas mayores que usted conoce viven una Buena vida en la vejez? Por qué?
- 35. What are the important worries and concerns that older Puerto Rican adults in your community face? What do you think is the most important issue? *Cuáles son los problemas e inquietudes grandes en las vidas de los ancianos puertorriquenos en su communidad?*
- 36. What is the most important issue you personally face? *Cuál es el problema mas grande en su vida?*

In this final section, I have some questions about the impact of the coronavirus pandemic. En esta sección final, tengo preguntas sobre el impacto del coronavirus.

- 37. Overall would you say that COVID has had a big impact on your life? How so? En general, diría que la pandemia del coronavirus ha afectado su vida mucho? Cómo?
- 38. How has COVID changed your daily routine? Cómo ha cambiado el coronavirus su rutina diaria?

- 39. How has COVID affected your relationships and interactions with family members? Cómo ha afectado el coronavirus sus relaciones e interacciones con los miembros de su familia?
- 40. Do you think COVID has impacted migration to and from Puerto Rico? How? *Piensa que la pandemia ha afectado la migración entre Puerto Rico y los EEUU?*
- 41. Have you or anyone in your family been unable to travel to Puerto Rico because of the pandemic? Usted o un miembro de su familia tuvo que cancelar un viaje a Puerto Rico debido a la pandemia?
- 42. Is there anything else you would like to share that I did not ask you about? Hay algo más que a usted le gustaría contarme de que no le pregunté?

STOP RECORDING. Pausaré la grabación ahora.

Older Adult Life History Interview Guide

START RECORDING

I am here today [interview date] with participant [study_id] from [city/neighborhood].

Last time we chatted about your current life circumstances. Today I would like to learn about your life history. *El propósito de esta entrevista es aprender sobre su vida—que considera importante, que le interesa, sus experiencias de migrar, etcétera.*

Migration History

To start, I would like to learn about all the cities you have lived for one year or more from when you were born until now. For now, I'll just ask about how old you were when you moved and which city/state you moved to. If you don't remember the exact age or city, that is ok. Just give me your best estimate.

Para empezar, quisiera aprender sobre todas las ciudades en que usted ha vivido por un ano o mas desde cuando nació hasta ahora. Para ahora, la única información que necesito es: cuantos anos tenia cuando se mudó? Y a qué ciudad se mudó? Si usted no recuerda la edad o ciudad exacta, no se preocupe. Usaremos la mejor aproximación.

Number	AGE	CITY	STATE
1			
2			
3			
4			
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Childhood/Su ninez

1. Tell me about your childhood in Puerto Rico. Cuénteme sobre su ninez en PR.

- 2. Where were you born? Where did you grow up? ¿Dónde nació? ¿Crecía?
- 3. What was it like growing up there? Paint me a picture of life there. *Cómo era creciendo allá? Hagame una imagen mental.*
- 4. What type of residence did you live in? En qué tipo de residencia vivía?
- 5. How many siblings do you have? Where do they live? ¿Cuántos hermanos tiene? ¿Dónde viven ellos?
- 6. What did your parents do for work? ¿A qué se dedicaban sus padres (por trabajo)?
- 7. How would you characterize your childhood? ¿Cómo caracterizaría su ninez? ¿Sus relaciones familiares?
- 8. When you lived there, how much did you feel part of your local area? On a scale of 1 to 5, how much did you feel you belonged? 1 meaning "I felt that I didn't belong," 5 meaning "I really felt part of the community." Cuando vivía alla, se sentía parte de la comunidad? En una escala de 1 a 5, cuán se sentía que pertenecía? 1 significa = Me sentía que no pertenecía. 5 significa = Me sentía mucho que era parte de la comunidad.
- 9. Did your parents reach old age? Who cared for them when they were older? Sus padres llegaron a la vejez? ¿Quién cuidó de sus padres cuando eran viejos?

Education/Educación

- 1. What level of education did you complete? *Qué nivel de educación completó?*
- 2. Did you like school? *Le gustaba asistir a la escuela?*
- 3. Where did you study? What did you study? ¿Dónde estudió? Qué estudió?

Work History/Trabajo

- 1. Tell me about your work history. *Dígame sobre su historial laboral (or experiencia de trabajo)?*
- 2. How old were you when you started your first full-time job? *Cuántos anos tenía cuando empezó su primer trabajo de jornada complete?*
- 3. What did you do for your career? ¿A qué se dedicaba (Carrera)?
- 4. How did you like it? ¿Cómo le gustaba?

5. How did you feel when you retired? OR when you think about retiring, how do you feel? ¿Cómo se sentía cuando retiró? (retiro/jubilación) OR cuando piensa en retirar, cómo se siente?

Family, Marriage, Kids/Familia, Matrimonio, Hijos

- 1. How old were you when you got married? How long were you married for? Cuántos anos tenía cuando se casó? ¿Por cuánto tiempo estuvo casado? O Cuánto tiempo lleva con su esposo/a?
- 2. What did you spouse do for work? ¿A qué se dedicaba su esposo(a)/pareja?
- 3. Do you have children? How many? ¿Tiene hijos? ¿Cuántos?
 - i. Probe for how old they are, where they live, what they studied and do for work. ¿Cuántos anos tienen? Dónde viven? Dónde estudiaron? Trabajan?
- 4. Grandchildren? ¿Nietos?

Future/ El futuro

- 1. When you think about the future, what are your hopes/desires? ¿Cuándo piensa en el futuro, cuáles son sus deseos?
- 2. When you think about the future, what do you worry about? ¿Cuándo piensa en el future, que le preocupa?
- 3. Where do you plan to live in the future? ¿Dónde planea vivir en el future?
 - a. Probe for residence type and city. Tipo de residencia y ciudad.
- 4. Do you think you will go back to Puerto Rico? ¿Piensa que regresará a Puerto Rico?

Looking Back/Mirando Hacia Atrás

- 1. Looking back over your life, what experiences do you think have most influenced you? Mirando hacia atrás, ¿cuales experiencias han tenido un gran influencia en su vida?
- 2. Looking back, do you think your migration experiences have influenced the person you have become? How so? *Mirando hacia atrás, ¿piensa que sus experiencias migratorias han influido la persona que se ha vuelto? Cómo?*

- 3. Do you think your migration experiences have influenced your sense of being Puerto Rican? *Piensa que sus experiencias migratorias han influido su sentido de ser puertorriqueno/a?*
- 4. "The statement that Puerto Ricans have one foot on the island and one in the U.S. has been used to describe Puerto Ricans who move between the United States and the Island. Do you feel that way now, have you ever felt this way, or would you say that this statement does not apply to you? Why?" Algunas personas han usado la frase: "Los puertorriquenos tienen un pie en la isla y uno en los EEUU" para describir la situación de los puertorriquenos que se mudan entre los EEUU y la isla. Se siente así ahora, se ha sentido así alguna vez en su vida, o diría que esta frase no aplica a usted? Por qué?
- 5. Based on your experiences, do you think there is a difference between being an older person in the US and being an older person in Puerto Rico? How? Basado en sus experiencias, ¿piensa que ser una persona mayor en los EEUU es diferente de ser una persona mayor en PR? ¿Por qué? ¿Cómo?
- 6. What do you consider to be your home? ¿Dónde es su hogar? ¿Qué lugar considere su hogar?
- 7. What advice do you have for a young person? Que consejo tiene para una persona joven?

I have asked about many things in your life from the time you were born up to now, but there may be something especially important that I have missed. Is there anything else you would like to share about your life that I did not think to ask you about? Le he preguntado sobre muchas cosas en su vida, desde cuando nació hasta ahora, pero es posible que yo no pensara en preguntarle sobre algo particularmente importante. Hay algo mas que le gustaria contarme sobre su vida?

Migration Event Interview Guide

This guide is to be used in conjunction with the "Older Adult Life History Interview Guide." For each migratory event in the life history, pause and ask the migration event questions.

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1.	Where did you move? ¿A dónde se mudó?
2.	Why did you decide to leave? ¿Por qué decidió salir de PR?
3.	Why did you choose your destination specifically? ¿Por qué eligióespecificamente?
4.	After moving to, was it how you expected it to be? Did it meet your expectations? Despues de mudarse a, ¿qué pensó? Era lo que esperaba?
5.	What did you like? ¿Qué le gustó?
6.	What did you not like? ¿Qué no le gustó?
7.	When you lived there, how much did you feel part of your local area? On a scale of 1 to 5, how much did you feel you belonged? 1 meaning "I felt that I didn't belong," 5 meaning "I really felt part of the community." Cuando vivía alla, se sentía parte de la comunidad? En una escala de 1 a 5, cuán se sentía que pertenecía? 1 significa = Me sentía que no pertenecía. 5 significa = Me sentía mucho que era parte de la comunidad.
Migrat	cion Event #2
1.	Where did you move? ¿A dónde se mudó?
2.	Why did you decide to leave? ¿Por qué decidió salir de?
3.	Why did you choose your destination specifically? ¿Por qué eligióespecificamente?
4.	After moving to, was it how you expected it to be? Did it meet your expectations? Despues de mudarse a, ¿fue cómo lo que pensó sería? Cumpló con sus expectativas?
5.	What did you like? ¿Qué le gustó?
6.	What did you not like? ¿Qué no le gustó?

7. When you lived there, how much did you feel part of your local area? On a scale of 1 to 5, how much did you feel you belonged? 1 meaning "I felt that I didn't belong," 5 meaning "I really felt part of the community." Cuando vivía alla, se sentía parte de la comunidad? En una escala de 1 a 5, cuán se sentía que pertenecía? 1 significa = Me sentía que no pertenecía. 5 significa = Me sentía mucho que era parte de la comunidad.

Migration Event #3

6. What did you not like? ¿Qué no le gustó?

1.	Where did you move? ¿A dónde se mudó?
2.	Why did you decide to leave? ¿Por qué decidió salir de?
3.	Why did you choose your destination specifically? ¿Por qué eligióespecificamente?
4.	After moving to, was it how you expected it to be? Did it meet your expectations? Despues de mudarse a, ¿fue cómo lo que pensó sería? Cumpló con sus expectativas?
5.	What did you like? ¿Qué le gustó?

7. When you lived there, how much did you feel part of your local area? On a scale of 1 to 5, how much did you feel you belonged? 1 meaning "I felt that I didn't belong," 5 meaning "I really felt part of the community." Cuando vivía alla, se sentía parte de la comunidad? En una escala de 1 a 5, cuán se sentía que pertenecía? 1 significa = Me sentía que no pertenecía. 5 significa = Me sentía mucho que era parte de la comunidad.

Staff Semi-Structured Interview Guide

START RECORDING

I am here today [interview date] with participant [study_id] from [organization].

First, I have a few demographic questions:

- 1. Age:
- 2. Race/Ethnicity:
- 3. Gender:
- 4. What language do you speak at home?
- 5. How long have you lived in Cuyahoga County, Ohio?

Next, I would like to learn more about the work that you do.

- 6. What is your job?
- 7. How long have you worked there?
- 8. What is a typical day of work like for you? Activities?
- 9. How would you describe the population that you serve? (class, family situation, health)
- 10. What made you interested in working with this population? Do you have a connection to this population?

Next, I would like to learn about your perspective on aging.

- 11. What does it mean to live a good life in old age to you?
 - a. Probe: What type of care is best for older adults? Where is the best place to live?
- 12. Who has the responsibility to care for older adults?
- 13. What should the role of family be in older adults' lives?
- 14. What should the role of older adults be in their families' lives?
- 15. What should someone do in order live a good life in old age?

- 16. What do you think is most important to the older people you serve, in terms of how they conceptualize a good life in old age?
- 17. Based on what you have observed, what is it like to be an older Puerto Rican adult in CC, Ohio?
- 18. What challenges do older adults (especially Puerto Rican older adults) face in CC, Ohio?
- 19. What services are available to older adults?
- 20. Do you think being an older person in CC, Ohio is different from being an older person in Puerto Rico? Why or why not?

Now I have some questions about aging and migration.

- 21. In my research, it seems that it is fairly common for people to move back and forth between Puerto Rico and the US mainland, including in old age. Do you know many older people who migrate?
- 22. Why do you think older people migrate to the US mainland?
- 23. Why do they return to Puerto Rico?
- 24. Why do some people never leave Puerto Rico?
- 25. What factors do you think are involved in older adults' decision-making regarding moving?
- 26. Have you noticed changes in migration patterns over time?

Lastly, I have a few questions about the COVID-19 pandemic.

- 27. How has COVID-19 affected the older adults you work with?
- 28. How has COVID-19 affected Puerto Rican families?
- 29. Has COVID-19 impacted migration between Puerto Rico and the US mainland? If so, how?
- 30. How have travel restrictions impacted Puerto Rican elders and families?
- 31. Is there anything else you would like to tell me that I did not ask you about?

STOP RECORDING

Family Member Semi-Structured Interview Guide

START RECORDING

I am here today [interview date] with participant [study_id] from [city/neighborhood].

First, I have a few demographic questions: *Primero, tengo algunas preguntas demográficas para usted.*

- 1. Age ¿Cuántos años tiene?
- 2. Race/Ethnicity ¿Cuál es su raza e etnicidad?
- 3. Gender ¿Cuál es su género?
- 4. What language do you speak at home? ¿Cuál idioma habla en casa?
- 5. Marital Status ¿Qué es su estado civil?
- 6. Children ¿Cuántos hijos tiene?
- 7. Are you a religious person? If so, which religion? ¿Usted es una persona religiosa? Cuál religión?
- 8. Where were you born? ¿Dónde nació?
- 9. What city and neighborhood do you live in? ¿Dónde vive ahora? En cuál ciudad vive? En cuál barrio?
- 10. How many people live with you? ¿Cuántas personas viven con usted?
- 11. Do you work? Where? ¿Trabaja? ¿Dónde trabaja?

Next, I would like to learn about your relationship with your parent. Quisiera aprender sobre la relación que tiene con su madre/padre.

- 12. Tell me about your relationship with your parent(s). What is it like? *Cuéntame sobre sus padres. ¿Cómo es su relación con ellos?*
- 13. How often do you see your parent(s)? Very often, somewhat often, not often. ¿Con que frecuencia ve a sus padres? Muy frecuentemente, a veces, o no frecuentemente.
- 14. What would you say is the role of your parent in your family? What does that look like on a day-to-day basis? ¿Qué es el papel de su padre/madre en su familia? Día por día?

- 15. What would you say is your role in the life of your parent? What is the role of your other family members (e.g. siblings)? ¿Qué diría es su papel en la vida de su madre/padre?
 - a. Probe for why each person has their specific role
- 16. Do you have any caregiving duties for your parent? ¿Tiene algunas oblicaciones del cuidado?
- 17. As your parent grows older, what do you worry about? What do you hope for? Como su madre/padre se envejece, ¿que le preocupa? ¿Que desea?
- 18. How do you and your parents make decisions about care? ¿En su familia, como toman decisiones con respecto al cuidado de su madre/padre?

Now I have some questions about your personal beliefs about aging. Ahora tengo algunas preguntas sobre su perspective en el envejecimiento.

- 19. What does it mean to live a good life in old age to you? ¿En su opinion, qué significa vivir una Buena vida en la vejez?
- 20. What type of care is best for older adults? ¿Qué tipo de cuidado es el mejor para personas mayores?
- 21. What type of residence is best for older adults? (E.g. own home, with children, retirement community, nursing home, etc.) ¿Cuál tipo de residencia es el mejor para personas mayores? (Propia casa, vivir con hijos, una égida, hogar)
- 22. What do you think is most important to your parents, in terms of how they conceptualize a good life in old age? Cuando piensa en como sus padres conceptualizan o definen una Buena vida en la vejez, cual sería lo mas importante desde su persepctiva?
- 23. What steps should someone take in order to live a good life in old age? ¿Cuáles medidas debe tomar para vivir una Buena vida en la vejez?
- 24. Who has the responsibility to care for older adults? ¿Quién tiene la responsabilidad para cuidar de las personas mayores?
- 25. Do you think that most older adults you know get to live a "good" life in old age? Why or why not? ¿Piensa que la mayoría de las personas mayores que usted conoce viven una Buena vida en la vejez? Por qué?
- 26. What are the important worries and concerns that older Puerto Rican adults in your community face? What do you think is the most important issue? *Cuáles son los problemas e inquietudes grandes en las vidas de los ancianos puertorriquenos en su communidad?*

Puerto Rico and Migration

- 27. I know that at least one of your parents is from Puerto Rico. Have you spent much time on the island? Yo sé que al menos uno de sus padres es de Puerto Rico. Ha pasado mucho tiempo en la isla?
- 28. Do you have family on the island? How do you maintain contact with them? *Tiene familia en la isla? Cómo mantiene contacto con ellos?*
- 29. In my research, it seems common for Puerto Ricans to move back and forth between Puerto Rico and the US mainland throughout the life course. Do you know many people who do this? En mi estudio, parece bastante común que los Puertorriquenos se mudan entre los estados y PR varias veces durante la vida. Conoce personas que hagan esto?
- 30. Do you think COVID has impacted migration to and from Puerto Rico? How? *Piensa que la pandemia ha afectado la migración entre Puerto Rico y los EEUU?*
- 31. Have you or members of your household been unable to travel to Puerto Rico because of COVID-19? What about to other places? *Usted o otra persona en su familia ha tenido que cancelar un viaje a PR debido a Covid?*
- 32. Based on what you've observed, do you think there is a difference between being an older person in Puerto Rico and being an older person in Cuyahoga County? Basado en sus experiencias, ¿piensa que ser una persona mayor en los EEUU es diferente de ser una persona mayor en PR? ¿Por qué? ¿Cómo?

In this final section, I have some questions about the impact of the coronavirus pandemic. En esta sección final, tengo preguntas sobre el impacto del coronavirus.

- 33. How has COVID affected your relationships and interactions with family members? Cómo ha afectado el coronavirus sus relaciones e interacciones con los miembros de su familia?
- 34. What other anxieties and stresses have you experienced as a result of COVID? Cuáles Preocupaciones o estresses ha experimentado debido a covid?
- 35. Aside from COVID, what is the most important issue you and your family face? *Cuál es el problema mas grande en su vida?*
- 36. Is there anything else you would like to share that I did not ask you about? Hay algo más que a usted le gustaría compartir de que no le pregunté?

STOP RECORDING. Pausaré la grabación ahora.

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