

Structural Contexts and Life Course Processes in the Social Networks of Older Mexican Immigrants in the United States

Dana Miller-Martinez Steven P. Wallace

CCPR-060-06

December 2006

California Center for Population Research On-Line Working Paper Series

Structural Contexts and Life Course Processes in the Social Networks of Older Mexican

<u>Immigrants in the United States</u>

Dana Miller-Martinez, Steven P. Wallace

UCLA School of Public Health & California Center for Population Research, Los Angeles, California, USA

Forthcoming in Sara Carmel, Carol Morse, and Fernando Torres-Gil, eds. The Art of Ageing in a Global Context. New York: Baywood, 2007.

There is a rich and varied literature that describes the social networks of older persons. This literature sometimes looks at the structure of social networks as an outcome worthy of study in and of itself (Litwin 1995). More often, social networks are seen as the means to other individual-level ends including health (Seeman 2000) and service use (Cantor & Brennan 2000), as well as community-level outcomes such as pathways for the diffusion of knowledge (Levy-Storms & Wallace 2003) or as leading to social cohesion (Wallace 1992). Regardless of whether networks are seen as ends or means, there are two fundamental limitations to most of the research on social networks of older people. First, the study of networks tends to look at them as relatively fixed entities that are measured at a single point in time. This obscures the fact that social networks are built out of relationships that develop and change dynamically over time, creating a social network lifecourse. The second limitation of much work on social networks of older persons is that it tends to downplay the social structural conditions that shape those evolving networks. Most research focuses on the impact of cultural values and norms in promoting and shaping particular types of networks, but lends less attention to the institutions and social processes that shape peoples' lives.

A group that exemplifies the dynamic and structural aspects of social networks is older immigrants from Mexico in the United States. It is well documented that Mexican immigration at

all ages often relies on family networks to initiate the migration, assist with the initial settlement, and shape the final type of migration (Massey et al. 1990). As the largest immigrant group in the U.S., this migration is also the target of a variety of public laws and other contextual forces (Espenshade, Baraka, Huber 1997).

This chapter provides a brief overview of the way in which social networks are conceptualized, highlighting how that literature tends to frame networks in static and acontextual terms. We then describe the social networks of persons who were born in Mexico and migrated to the United States. We discuss the dynamic context of social networks that Latino elder migrations are embedded in to highlight the lifecourse aspects of elders' networks. We also examine the structural influences on their networks to show how contextual factors beyond culture may influence the ways in which networks develop over time, even in a population where family norms and values are often viewed as the primary determinants of social networks. The chapter concludes with a discussion of the implications for public policy and practice.

Social Networks as Means to Other Ends

Social networks are the structure of social relationships between individuals. Social networks have a number of different characteristics, including composition, size, multiplexity, density, and homogeneity. The implication of these different network characteristics is that they can influence the network's operation as a conduit for information, resources, meaning, social control, and social support. The health and aging literature focuses in particular on how the social support (information, material resources, physical assistance, and positive affective contact) that comes through networks affects various health and service use outcomes.

Many health related outcomes vary with social support, including depression, happiness, perceived quality of life, frequency of illness, mortality, and immunological functioning

(Antonucci 1990, Antonucci 2001, Kawachi & Berkman 2001, Kuo & Tsai 1986, Seeman 2000, Vega et al 1986). The connection between social networks, social support, and longevity is well established. Persons with larger social networks and who receive more social support live the longest. The relationship between social network size, per se, and other health outcomes such as disability, morbidity, and self assessed health is less clear, but the relationship between social support in general and those outcomes is well supported (Krause 2001).

Social networks affect health through direct (main) effects and/or indirect (buffering) effects. In a main effects model, social networks are immediately beneficial to health by increasing a person's sense of control, obtaining normative advice about health behaviors (e.g., healthy eating, not smoking), and strengthening immune responses (Aneshensel et al 1995, House et al 1988, Kawachi & Berkman 2001). In a buffering model, social ties are related to well-being only during times of stress (Kawachi & Berkman 2001) when social networks are mobilized to serve a protective function (Aneshensel et al 1995, House et al 1988). These effects may be further mediated through biological mechanisms (e.g., decreasing physiological reactivity), psychological means (decreasing the perception of threat), and/or behavioral changes (e.g., encouraging healthy behaviors; House et al 1988). Before social networks can have these salutatory effects, however, they have to form and be maintained. This formation and maintenance of networks is the focus of understanding social networks as outcomes.

Social Networks as Outcomes

Social relationships are dynamic as they move through time, allowing for both continuity and change. A life course perspective provides a comprehensive framework for studying the intersection of multiple life course trajectories (e.g., the ordered sequence of health events, marriage statuses, employment, history, etc.), showing how past experiences influence current

social networks. By treating the social network as the outcome of interest rather than only a means, it is possible to better understand the relationship between networks and health within particular structural contexts.

The "convoy of support" model provides a framework that applies the life course approach to networks. Age-related major life transitions, such as retirement and widowhood, lead to changes in the number, type, and closeness of social contacts. These transitions end the relations with some network members and provide opportunities to acquire new members (Kahn & Antonucci 1980). Members in specific roles may not remain in the convoy or may move from the close inner circle of the convoy to a more tenuous outer layer. The most stable memberships over time are those relations that remain active over distance and time because of their "compulsory" nature, in particular immediate kin (Kahn & Antonucci 1980). Increasing age does not necessarily mean smaller networks, but the composition of the inner circle of the convoy/network tends to shift to contain more close family members (Antonucci 2001). With increasing age, network members who are tied to a narrow role, such as co-worker or neighbor, are more likely to be lost due to retirement or relocation. While retirement may mark the end of casual ties with co-workers, it may also mark the beginning of new or strengthened relationships through increased involvement with family, church, or community organizations. If increasing age is accompanied with increasing needs or chronic illness, the burden placed on close network members may be too much for close friends, so care often falls to family members (Aneshensel et al 1995, Cantor & Brennan 2000).

In cohort analyses of the life course it is important to take into account the social worlds within which people age (Dannefer & Uhlenberg 1999). Research that only considers the impact of major social changes (e.g., the Depression) overlooks the role of social conditions during

times of stability. Life course research must also examine how human agency is constrained by by a wide range of social factors (e.g., socioeconomic status). This can be accomplished by considering the interaction of various life course trajectories (e.g., employment, health, residential locations, etc.) with societal structural factors (e.g. labor markets, access to health care, housing segregation patterns, etc.) over time (House et al 1988).

Migration Context Effects in Mexican Elderly Immigrants' Social Networks

The beginning of the 21st century finds immigrants comprising a growing segment of the U.S. population. In the 2000 census, 11.1% of all Americans reported being foreign-born, with the number of immigrants in the country increasing by 57% between 1990 and 2000. Almost one-third of the foreign-born population in the U.S. is from Mexico, accounting for 9.2 million people. Mexican immigrants make up about two-thirds of the foreign born population in Arizona, New Mexico and Texas. Over 25% of California's total population is foreign-born and Mexican immigrants account for over two-fifths of those 9 million immigrants. A total of 12 U.S. states are home to more than 100,000 Mexican immigrants each, including states not traditionally associated with Mexican immigration such as North Carolina and Georgia (U.S. Census 2000). The 2000-mile border shared by the U.S. and Mexico is the longest border in the world between an industrialized and developing country. Social networks and economic opportunity in the U.S. play a major role in migration decisions among Mexican immigrants. Previous research has focused on the migration decisions of younger labor migrants and has largely ignored the role of social networks in the migration of older family members. Here we focus on the factors affecting the movement of this older group of migrants.

There is longstanding literature that describes the larger family networks and higher levels of family support among older Latinos compared to nonLatino whites (Cantor & Brennan

2000, Kim & McKenry 1998, Wallace & Facio 1992). The analyses of these networks typically follow the common model of looking at networks at a single point in time and examining how the network size or type influence caregiving or service use (Cantor & Brennan 2000).

Immigrants' social networks are more family-centered and less likely to contain friends or neighbors compared with native-born non-Hispanic Whites (Angel & Tienda 1982, Cantor & Brennan 2000). In general, with increasing age social networks tend to shift to include more family members in the inner circle of the social network. Unfortunately, studies of social networks among Latino immigrants often overlook the elderly in their samples because their focus is often on how the social networks of young adults influence labor migration decisions. Among Latinos who migrate later in life, the reason behind their migration, combined with limited social and financial resources, may *particularly* constrain their networks to family members compared with U.S. born non-Hispanic Whites.

Social networks constantly respond to changes of the individual, their immediate environment, and the broader social context. Differences in the underlying cause of migration yield different age and gender migration patterns. Younger migrants commonly relocate for labor purposes, whereas, older migrants often relocate to join family, or aid the family with childcare (Wallace 1992). As can be seen in Table 1, older Mexican immigrant men in the U.S. are more likely to have come to the U.S. during their prime working years, with 40% having immigrated between the ages of 16-35. Many older women also immigrated during prime work years, but are more likely than men to have immigrated after age 50. Overall, over one-quarter of all older Mexican American immigrants came to the U.S. at age 50 or older.

The family centered characteristic of Mexican immigrant networks is evident in the 2000 U.S. Census data. Table 3 shows that increasing age at migration from Mexico is associated with

a decreased rate of living alone in old age. Just over one-quarter of those who left Mexico as children and have aged in the U.S. live alone, while only one-tenth of Mexicans who came to the U.S. at age 65 or older live alone. In contrast, 70% of Mexican immigrants who migrated at age 65 or over live in the U.S. with their children. Older immigrants are also less likely to be currently married; only one-quarter of those who immigrated at the oldest ages are living with their spouse, compared to about half of those who immigrated at a young age (Table 3). Among older Mexican Americans who live with extended family, those migrating at age 50 or over mostly live in the homes of their children or other family while Mexican American elders born in the U.S. primarily have their extended family move in with them (80% versus 15%, Becerra 1994). Thus, elders who are Mexican immigrants have life courses that will result in family networks developing that are different than U.S. born elders.

Migration factors that also affect social networks include the type of migration (temporary, permanent, circular), the reason behind the migration (e.g, economic, caregiving, care needs), and where the relocation occurs (into an ethnic enclave or not). Litwin (1995) suggests that recent immigrants establish themselves in the host country among family intensive networks initially, and then if there is no illness or impairment they expand their networks over time to include more diverse ties. Immigrants with few or no family ties in the new country are more likely to return to their country of origin after a few years (Reyes 1997).

Given the motivation for migration later in life, it is not surprising that the social networks for older Latino immigrants tend to be family-centered. Older Latino migrants are often dependent on family and are likely to live with family, thus focusing their social interactions among family members (Angel et al 2000, Cantor & Brennan 2000). Further, older migrants are less likely to have private pensions or Social Security income, increasing their

financial dependence on family for support. A study of Mexican immigrants demonstrated that people who migrated at older ages (age 50 and over) were twice as likely to live with family than those who came during their youth (Angel et al 2000).

While the age of the migrant has an impact on how migration affects their life course and social networks, the type of migration is also an important factor. At any age, relocation can be permanent, temporary, or circular. The type of migration alters the expected length of time in the receiving country, which in turn affects the incentive to integrate into the surrounding community. Young labor migrants often come to the United States intending to return home once achieving specific financial goals (Jasso 2003), and over half of migrants from western Mexico are estimated to return (Reyes 1997). In temporary migrations, immigrants have an incentive to maintain ties in the country of origin, and may be less concerned with expanding ties in the host country. In older ages, a grandmother may travel to the U.S. for a few months to help out with a new grandchild, intending to return to Mexico. In contrast, a permanent migrant has a strong incentive to establish new kin and non-kin ties in the new country. Circular migration patterns, which entail repeated movement between the native and host country, create a need to maintain networks in both locations. This is true whether the individual is a migrant farmworker who enters the U.S. seasonally for work, or if the migrant is older and splits their time living with children on both sides of the border.

Older migrants experience an interaction between aging networks and migration forces.

The motivation for migration at older ages is most commonly family-based and so the resulting social network is more likely to be family-centered. Relocation to be closer to family often stems from the family's need for assistance—either the older family member assists with childcare needs of the younger migrants, or older family members require assistance themselves

from younger family members. Among Mexican immigrants who are age 65 and over, the most recent immigrants report the lowest levels of physical difficulty. Physical difficulty rates for recent immigrants (past five years) who are relatively similar for the youngest old and the oldest old (Table 2). In contrast, those who have been in the U.S. the longest show the expected increase in physical difficulty between younger elders and the oldest old. This suggests that there is a selective migration in old age that works against those with high caregiving needs.

Since formal childcare is quite costly, grandparents may migrate to join the family so that both parents can earn wages (Wallace 1992). In this case, the elderly immigrant's social network may be constrained in ways similar to younger women—childcare requirements keep them tied to the home and limit opportunities for social interaction with non-family members resulting in a social network predominantly composed of family.

The place an elder settles also links migration to network development. Older immigrants are particularly vulnerable to social isolation because they do not usually attend school or join the workforce upon arrival in the new country, thus limiting their opportunities for social contact in the new society. But if they settle in an ethnic enclave they gain exposure to familiar people, markets, churches, and language (Wallace 1992), granting access to non-kin network members more so than would be possible if the older adults relocated to a less homogeneous community where social interactions would be restricted to the family.

While age at migration, its type, motivation, and destination affect the networks of older immigrants; there are other structural effects that also impact the interaction of the life course and migration to shape networks. Understanding the structural factors that create the conditions under which these networks form and persist over time is essential in analyzing the variability

within the Latino elderly population, as well as in projecting likely future patterns of social networks in this population.

Structural Influences on Networks

There are many structural factors that shape social networks throughout the life course. These structural forces can be conceptualized as institutionalized patterns of Mexican and U.S. societies that impinge on the life courses of older Mexican immigrants in the U.S. in ways that are often beyond the control or choice of any individual migrant. Key structural factors include education, income, gender, ethnicity/culture, family size, and urban versus rural residence. In addition, it is important to note the changing influences on immigrant networks in different historical periods, such as changes in technology and government policy.

Increasing education and income both strongly impact social networks by increasing the pool of potential network members an individual can access. More education yields larger and more diverse social networks, which allow individuals to be more selective in relying on kin (Antonucci 2001). The educational levels of Mexican American immigrant elderly has been increasing: in 1980, 44% had at least a primary school education, rising to 48% in 1990 and 54% in 2000 (U.S. Bureau of the Census 2004), reflecting increasing educational opportunities in Mexico. Individuals with higher incomes have a greater ability to take advantage of social opportunities, they have more non-kin members in their networks, and have the freedom to be more selective about the kin members in the network. Retirement can reduce the income of some older adults, reducing their ability to take advantage of earlier social opportunities. On the other hand, for low income persons -- such as the half of Mexican American immigrant elderly who have incomes under 200% of poverty (U.S. Bureau of the Census 2004) -- Social Security,

Medicare, and SSI (cash assistance for the aged) can initiate a period of increased financial stability and resources that improve their ability to develop and sustain social ties.

Gender is another structural factor affecting network development and composition.

Gender differences exist in just about all life course trajectories. Women tend to have larger networks than men that more often consist of intimate ties and greater involvement with kin (Kawachi & Berkman 2001). In contrast, men's place of work is a significant source of network ties. The differences in men and women's networks change according to circumstances at different times in the life course. Younger women with both family and work responsibilities have more constricted networks compared with younger men. However, among older men and women who have completed childrearing and work obligations, older women have more expansive networks compared with older men (Pugliesi & Shook 1998). It is likely that the strong gender-roles of traditional Mexican culture makes these general patterns even more pronounced.

Race and ethnicity have few effects on social network <u>size</u>, but cultural norms influence the <u>composition</u> of networks. Antonucci (2001) argues that while ethnicity per se does not influence social networks, group membership brings certain advantages, disadvantages, and expectations. Network formation among marginalized groups, such as ethnic minorities or immigrants, is especially shaped by practical need and social structures that limit wider interaction. Mexican American elderly may more often live with an extended family due to cultural norms concerning the care for older adults, or given the high poverty rate of older Mexican Americans, coresidence could be the result of financial need to pool household resources.

Antonucci (2001) found racial differences in the frequency of contact and proportion of kin in the networks, but these differences disappeared with age, suggesting with increased age and dependency, the shift to family focused networks is universal. Because few studies have collected data regarding norms, it is difficult to determine if the tendency for family-centered networks among ethnic minorities is due to cultural preferences or the result of structural factors that limit access to network members outside of the family. One indicator of preferences comes from data that showed no significant difference in the reported importance of family contact between U.S. born and immigrant Mexican American elderly (about 70% report it is very important); however, older Mexican Americans did differ from elderly U.S. born nonLatino whites (56% report very important; Becerra 1994). Since immigrant elders would be expected to have different levels of acculturation than U.S. born Mexican American elders, this data suggests that preferences for family contact is influenced not only by attachment to traditional Mexican values but also by structural influences.

Another culturally influenced factor that shapes social network structure is family size and function. Immigrant Latinos tend to have more children, and these children are more likely to live nearby compared with nonLatino White families (Cantor & Brennan 2000). Larger family sizes also provide older immigrants with more siblings, giving them a greater potential to develop strong ties within the family rather than needing to seek support outside the family. In a study of older Mexican Americans in Los Angeles County (Becerra 1994), nonLatino white elders reported an average of 1.9 living siblings, compared to 2.6 for Mexican immigrant elders and 3.2 for U.S. born Mexican American elders. Latino families, and especially immigrants, are also more likely to live below poverty, limiting their capacity for geographic dispersion and increasing their need for family assistance (Angel & Tienda 1982). Additionally, cultural norms

among Latino families emphasize the role of family in providing care to older frail family members. Although culture plays an important role in social network development, it is important not to overemphasize the norm of "familism." Other forces that provide incentives for family closeness include family economic survival strategies (Wallace & Facio 1992) and specific life-course needs (e.g. if starting a family versus being a single male migrant) (Blank & Torrecilha 1998).

Transportation is a practical barrier in both accessing current network members and in having opportunities for social interactions that would expose immigrants to potential new network members. Though younger persons may face transportation barriers as well, older adults are more likely to require public transportation due to various health problems that limit their ability to drive and due to financial constraints. Older Mexican immigrants in particular will face the liabilities of low-income, language barriers, and lack of familiarity with driving requirements in the U.S., but may benefit if they live settle in an ethnic enclave where Spanish-speaking services are all in walking distance.

In examining structural factors it is important to note intra-group variation in experiences, including those due to cohort and period effects. For instance, the changing job market has created a period effect between today's "young-old" and the "oldest old". Those who are currently 85 years of age or older were young persons during World War II, which led to high rates (temporarily) of female labor force participation. At the same time, the 1940's reversed the depression era barriers to Mexican labor and instituted the Bracero program of Mexican agricultural labor recruitment. Many of those workers, who were hired as temporary migrants, settled permanently in the U.S. So while the early wave of Mexican immigrants, who are now all elderly, often arrived in the U.S. with limited family or friend contacts, later migrants were more

likely to arrive through family and friend networks. In fact, in many communities in Mexico, migration became a normative part of the life course, resulting in the re-creation of the social networks of whole villages in immigrant U.S. communities (Massey et al 1990).

Two structural variables which are particularly influential in the development of social networks among immigrant elderly are the economic climate and the political context. For instance, immigration and welfare reform in the 1990's barred federal financing for most social and health programs during the first five years of an immigrant's residence. Under these conditions, sponsors (usually family) must often bear the financial costs of taking care of the health and financial needs of family members who join them (Espenshade et al 1997). Since younger Mexican immigrants are often employed in low-wage positions, some may be discouraged from bringing parents to the U.S. because of the potential costs, even if parents could assist with childcare (Menjivar 1994-1995). This scenario highlights the complexity of life course trajectories that contribute to social network structure: the interaction between the health and migration trajectory of the older individual with the financial and childbearing trajectory of their family, and the immigration policy and economic conditions of the nations. Looking solely at the association between any two of these trajectories without considering the contribution of the other trajectories would greatly alter the conclusions regarding social network structure.

An important period effect for immigrants and social networks is the development of communications technology and transportation. Technological advances in communications and transportation make it easier for immigrants to maintain ties to the sending country while developing new networks in the host country. The decreased costs of cell phones, international calling plans, access to the internet, and discounted airfares increase the ease with which immigrants can maintain active networks in two countries even though they reside in only one

location. The types of support provided by these networks would obviously differ due to geographic location (e.g., someone in Mexico could not regularly help a family member with grocery shopping in Los Angeles), but the importance of affective and financial ties over long distances can be significant (Wallace 1992).

In sum, the general trend with increasing age is a shift toward more family members in the inner circle of the social network. This trend is not greatly altered for older immigrants; however, the older the age at migration, the more focused the network is on family overall. Incorporating the effect of specific structural circumstances facing older migrants augments our understanding of why these network patterns exist. Understanding the contributing factors to network development of elderly immigrants brings to light circumstances that influence the context within which social networks develop.

Implications for Policy and Practice

Social networks facilitate the migration process and are affected by migration in turn.

Understanding the structural influences on the formation and maintenance of social networks by Mexican immigrant elderly within a life course context helps us better plan policies and programs that foster the health of this and other immigrant populations.

Older immigrant's networks can be important because of the social support they make possible. Mexicans who immigrate to the U.S. in older ages are less likely to be disabled than those who lived most of their lives in the U.S. This suggests that they are more likely to be a support resource than a support burden. Yet much of the rhetoric in immigration policy assumes that elder immigrants come to the U.S. primarily to take advantage of U.S. social welfare programs (Reyes 1997). Past policy has discouraged families from bringing older parents to the U.S., such as the Personal Responsibility and Work Opportunity Act (PRWORA) of 1996

(Espanshade 1997). When immigration and welfare policies discourage elderly parents from joining their families in the U.S., the size of Mexican American family networks will be smaller and have fewer potential caregivers.

Other policies, such high-visibility deportation initiatives that target immigrant communities (e.g., Chavez & Renaud 2004), weaken the effectiveness of Mexican immigrant networks. Fear of the immigration service leads many immigrants to shun government offices and other public agencies where they feel vulnerable, even if they have legal residency documents. In this context, the family networks of older Mexican immigrants ends up limiting the elder's outside resources, even if the elder has legal residence documents. This is because the elder is likely to fear that contact with "authorities" could imperil any member of their family network who does not have the needed documents.

Supporting or building networks for this population will have to involve family members, and are probably better conceptualized as family policy and programs rather than aging policy and programs given the nature of those networks. As a result, childcare, income support, and health care programs that assist Latino families will also assist the elders in those networks, directly or indirectly. The one area outside of the family where networks commonly exist for older Mexican immigrants is church. As an institution that is known and trusted by elderly Latino immigrants (Wallace 1992), it is likely that church networks can be used to both effectively disseminate information to immigrant elders as well as a base for programs that need to reach those elders (Levy-Storms & Wallace 2003).

In looking to the future, developing programs and policies that are responsive to the needs of Latino elders will have to take into account the structural circumstances that the population will face. The current generation of young Mexican immigrants are largely located in

the low-wage sector of the labor force and will become elderly with limited economic resources. If the U.S. continues to rely on Mexican immigration for low-waged labor, there will continue to be an incentive for immigrants to bring their parents over to help with the household, continuing a steady stream of immigrants who are elderly as well. In the near term, then, the family centered networks of older Mexican immigrants are likely to persist. But those networks are already under pressure due to linguistic isolation, low incomes, and high labor force participation, so public policy should not assume that Mexican American family networks will be capable of supplying sufficient support when their elders becomes critically ill or disabled. By building on the network strengths identified above, policy and programs can support and complement the family networks so that they can provide the social and material support needed by the elders in their families.

Table 1: Age at Migration, U.S. Residents Age 65 and Over Born in Mexico, United States, 2000

Age at immigration	Total Number	Male	Female
		(161,000)	(216,000)
0-17	50,000	12.1%	12.6%
18-35	133,000	39.2	32.2
36-49	85,000	21.7	23.3
50-64	70,000	16.6	20.5
65 and over	41,000	10.4	11.1
Total†	378,000	100%	100%

[†] Individual numbers shown do not equal the total due to rounding

Data Source: (U.S. Bureau of the Census 2004)

Table 2: Physical difficulty Among U.S. Residents Age 65 and Over Born in Mexico, by Years in the United States and Age, Year 2000

Years in the U.S.	0-4 years	5-14 years	15-29 years	30 or more
Age				
65-74	20.3%	26.4%	26.8%	24.1%
75-84	23.3%	28.0%	40.1%	37.8%
85 and over	26.8%	56.8%	60.9%	64.6%

Data Source: (U.S. Bureau of the Census 2004)

Table 3: Family Composition by Age at Migration, U.S. Residents Age 65 and Over, United States, 2000

Age at immigration	Percent	Percent	Percent
	Living	with own	Married,
	Alone	Children in	Living with
		household	Spouse
US Born, nonLatino	37.3%	12.7%	53.2%
white			
US Born, Latino of	27.0	32.8	50.5
Mexican Origin			
Mexican born,	26.4	38.0	45.7
immigrated age 0-17			
Mexican born,	19.9	45.7	54.1
immigrated age 18-35			
Mexican born,	17.1	55.1	45.7
immigrated age 36-49			
Mexican born,	13.4	66.1	37.9
immigrated age 50-64			
Mexican born,	11.8	70.0	25.0
immigrated age 65			
and over			

Data Source: (U.S. Bureau of the Census 2004)

References Cited (32)

- Aneshensel CS, Pearlin LI, Mullan JT, Zarit SH, Whitlach CJ. 1995. *Profiles in Caregiving: The Unexpected Career*. San Diego: Academic Press
- Angel JL, Angel RJ, Markides KS. 2000. Late-Life Immigration, Changes in Living Arrangements, and Headship Status among Older Mexican-Origin Individuals. *Social Science Quarterly* 81: 389
- Angel RJ, Tienda M. 1982. Determinants of extended household structure: Cultural patterns or economic need? *The American Journal of Sociology* 87: 1360-83
- Antonucci TC. 1990. Social supports and social relationships. In *Handbook of Aging and the Social Sciences*, ed. RH Binstock, LH George, pp. 205-27. New York: Academic Press
- Antonucci TC. 2001. Social relations: An examination of social networks, social support, and sense of control. In *Handbook of The Psychology of Aging*, ed. JE Birren, W Schaie. San Diego: Academic Press
- Becerra RM. 1994. Older Mexican Americans Social Support & Health Care, NIA R01AG010936, 1992-96. Los Angeles, CA: UCLA Department of Social Welfare
- Blank S, Torrecilha RS. 1998. Understanding the Living Arrangements of Latino Immigrants: A Life Course Approach. *International Migration Review* 32: 3-19
- Cantor MH, Brennan M. 2000. Social Care of the Elderly: The Effects of Ethnicity, Class. New York: Springer
- Chavez S, Renaud JP. 2004. Reports Spark Fear in Neighborhoods; Latino residents avoid stores, schools to avoid rumored roundups of illegal immigrants. In *Los Angeles Times*, pp. B1. Los Angeles
- Dannefer D, Uhlenberg P. 1999. Paths of the Life Course: A Typology. In *Handbook of Theories of Aging*, ed. VL Bengston, KW Schaie, pp. 306-26. New York: Springer Publishing Company
- Espenshade TJ, Baraka JL, Huber GA. 1997. Implications of the 1996 Welfare and Immigration Reform Acts for U.S. immigration. *Population and Development Review* 23: 769-801
- House JS, Umberson D, Landis KR. 1988. Structures and processes of social support. *Annual Review of Sociology* 14: 293-318
- Jasso G. 2003. Migration, human development, and the life course. In *Handbook of the Life Course*, ed. JT Mortimer, MJ Shanahan, pp. 331-64. New York: Kluwer Academic/Plenum Publishers
- Kahn RL, Antonucci T. 1980. Convoys over the life course: Attachment, roles and social support. In *Life-Span Development and Behavior*, ed. PB Baltes, J Orville G. Brim, pp. 253-86. New York: Academy Press
- Kawachi I, Berkman L. 2001. Social ties and mental health. *Journal of Urban Health* 78: 458-67 Kim HK, McKenry PC. 1998. Social networks and support: A comparison of African Americans, Asian Americans, Caucasians, and Hispanics. *Journal of Comparative Family Studies* 29: 313-34
- Krause N. 2001. Social support. In *Handbook of Aging and the Social Sciences*, ed. RH Binstock, LK George, pp. 272-94. San Diego: Academic Press
- Kuo WH, Tsai Y-m. 1986. Social networking, hardiness and immigrant's mental health. *Journal of Health & Social Behavior* 27: 133-49

- Levy-Storms L, Wallace SP. 2003. "Use of mammography screening among older Samoan women in Los Angeles county: a diffusion network approach. *Social Science and Medicine* 57: 987-1000
- Litwin H. 1995. The social networks of elderly immigrants: An analytic typology. *Journal of Aging Studies* 9: 155-74
- Massey DS, Alarcon R, Durand J, Gonzalez H. 1990. Return to Aztlan: The Social Process of International Migration from Western Mexico. Berkeley, CA: University of California Press
- Menjivar C. 1994-1995. Immigrant social networks: Implications and lessons for policy. *Harvard Journal of Hispanic Policy* 8: 35-59
- Pugliesi K, Shook SL. 1998. Gender, ethnicity, and network characteristics: Variation in social support resources. *Sex Roles* 38: 215-38
- Reyes BI. 1997. Dynamics of Immigration: Return Migration to Western Mexico, Public Policy Institute of California, San Francisco
- Rowe JW, Kahn RL. 1998. Successful Aging. New York: Pantheon Books
- Seeman TE. 2000. Health promoting effects of friends and family on health outcomes in older adults. *Am J Health Promot* 14: 362-70
- U.S. Bureau of the Census. (2003, Dec.). The Foreign-Born Population: 2000. Retrieved November 19, 2004 from http://www.census.gov/prod/2003pubs/c2kbr-34.pdf.
- U.S. Bureau of the Census. 2004. U.S. Census of Population and Housing 2000, 1% PUMS, provided by Steven Ruggles, Matthew Sobek, Trent Alexander, Catherine A. Fitch, Ronald Goeken, Patricia Kelly Hall, Miriam King, and Chad Ronnander. Integrated Public Use Microdata Series: Version 3.0 [Machine-readable database]. Minneapolis, MN: Minnesota Population Center
- Vega WA, Kolody B, Valle JR. 1986. The relationship of marital status, confidante support, and depression among Mexican immigrant women. *Journal of Marriage and the Family* 48: 597-605
- Wallace SP. 1992. Community formation as an activity of daily living: The case of Nicaraguan immigrant elderly. *Journal of Aging Studies* 6: 365-83
- Wallace SP, Facio EL. 1992. Moving beyond familism: Potential contributions of gerontological theory to studies of Chicano/Latino aging. In *Aging, Self, and Community: A Collection of Readings*, ed. JF Gubrium, K Charmaz, pp. 207-24. Greenwich: Jai Press Inc.