ARAŞTIRMA MAKALESİ / RESEARCH ARTICLE

SOCIAL SUSTAINABILITY THROUGH AGE-FRIENDLY POLICIES IN EUROPE: TRANSNATIONAL AGEING, CIVIC ENGAGEMENT, AND QUALITY OF LIFE USING SHARE DATA

AVRUPA'DA YAŞ-DOSTU POLİTİKALARLA SOSYAL SÜRDÜRÜLEBİLİRLİĞİ TEŞVİK ETMEK: SHARE VERİSİ İLE ULUSÖTESİ YAŞLANMA, SİVİL KATILIM VE YAŞAM KALİTESİ

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ABSTRACT

The local environment plays a vital role in later life, influencing the inclusivity and responsiveness of communities to the challenges of ageing. This study examines civic engagement as a form of social capital that promotes social sustainability and enhancing quality of life among adults aged 50 and over. Using data from Wave 8 (2020) of the Survey of Health, Ageing, and Retirement in Europe (SHARE) across ten European countries (n = 19,445), the study focuses on the role of transnational ageing and age-friendly policy as a key dimension of the local environment. The findings reveal a positive relationship between civic engagement and quality of life, underscoring the importance of policy frameworks that support both social and environmental sustainability. Our results highlight the need for policy action and the creation of resilient, age-friendly communities. Our study makes a significant contribution to the literature on civic engagement of older population by using the Active Ageing Index (AAI) as structural context. The AAI offers a novel analytical tool by providing a multidimensional understanding of older people's contributions to society and the environmental conditions that facilitate active ageing. Future research should incorporate rural urban differences to ensure equal access to resources for all older adults.

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ÖZET

Yerel çevre, yaşlanmanın getirdiği zorluklarla başa çıkmada toplulukların kapsayıcılığını etkileyerek ileri yaşam döneminde önemli bir rol oynar. Bu çalışma sivil katılımı 50 yaş ve üzeri nüfusta; sosyal sürdürülebilirliği teşvik eden ve yaşam kalitesini artıran anahtar rolde bir sosyal sermaye biçimi olarak incelemektedir. Avrupa Sağlık, Yaşlanma ve Emeklilik Araştırması'nın (SHARE) 8. Dalga (2020) verileri kullanılarak on Avrupa ülkesinde (n=19445) ulusötesi yaşlanma ve yerel çevrenin anahtar bir boyutu olarak yaş-dostu politikanın rolü değerlendirilmektedir. Araştırma sonuçlarına göre sivil katılımla yaşam kalitesi arasında pozitif ilişki vardır ve bu bulgu sosyal ve çevresel sürdürülebilirliği destekleyen politikaların önemine işaret etmektedir. Bulgular, sürdürülebilir politikalara ve dirençli, yaş-dostu topluluklara olan ihtiyacı vurgulamaktadır. Çalışmamız, Aktif Yaşlanma İndeksi'ni (AAI) yapısal bağlam olarak kullanarak yaşlı nüfusun sivil katılımı literatürüne önemli bir katkı sağlamaktadır. AAI, yaşlı bireylerin topluma katkılarını ve aktif yaşlanmayı mümkün kılan çevresel koşulları çok boyutlu bir bakışla inceleyerek yenilikçi bir analitik perspektif sunmaktadır. Gelecek araştırmalar, tüm yaşlı bireyler için kaynaklara adil erişimi sağlamak amacıyla kırsal ve kentsel bağlamları dikkate almalıdır.

ANAHTAR KELİMELER: Yaşlı; sivil katılım, yaşam kalitesi, yaş-dostu politikalar, survey of health, ageing, and retirement in Europe.

INTRODUCTION

Migration, facilitated by advancements in transportation and communication technologies, allows individuals to exercise their residential rights, establish social networks, and access welfare across multiple countries (Castles, 2002; Ruspini, 2009). This phenomenon, referred to as "transnational living," significantly influences the experiences of getting old (Klok, Van Tilburg, Suanet, & Fokkema, 2017). Although the concept of transnationalism is central to understanding ageing outside one's place of birth, its application in ageing studies has been slow to develop (Horn & Schweppe, 2017).

The literature on transnational ageing enhances our understanding of older migrants' social and physical environmental experiences, introducing concepts such as "double absence," "double presence" (Bolzman, Kaeser, & Christe, 2016), "deterritorialization," and "translocality" (Buffel, 2017), which highlight the fragmentation of resources. Despite these theoretical advances,

empirical studies often fail to capture the complexities of transnational ageing. Older migrants in Europe represent a diverse group, distinguished by their motivations for migration, age at migration, integration into host societies, and countries of origin (Warnes & Williams, 2006). Evidence indicates that they are among the most vulnerable populations, frequently experiencing social exclusion and unique challenges beyond those typically associated with late life (Patzelt, 2016). For instance, cognitive decline may hinder second-language proficiency in advanced age, potentially leading to social exclusion or discrimination (George & Fitzgerald, 2012).

Civic engagement emerges as a critical tool for older people, facilitating their involvement and voice in society (Serrat, Warburton, Petriwskyj, & Villar, 2018). For older migrants, it serves as a bridge to greater social capital and plays a key role in promoting social sustainability. This engagement is tied to the notion of social capital, which contributes to social sustainability by intertwining concepts of social justice, infrastructure, and engaged governance (Cuthill, 2010). While social sustainability remains conceptually ambiguous, it is often associated with essential dimensions for creating resilient and inclusive communities, such as equity, participation, social cohesion, and sustainability awareness (Murphy, 2012). The civic engagement of older adults is a crucial aspect of active ageing, particularly as they increasingly represent a larger segment of the older population and face inequalities in accessing active ageing infrastructure, both social and physical environment bases (UNECE/European Commission, 2019).

LITERATURE REVIEW

Civic engagement and quality of life as a form of social capital and sustainability

Civic engagement gained scholars' attention for its potential to enhance joiners' well-being (Putnam, 2000), in addition to its effect on inclusive policies. Research indicates that understanding the relationship between civic engagement and quality of life (QoL) is vital for appreciating how active societal participation benefits older adults. Studies have shown a positive correlation between volunteering and life satisfaction (Haski-Leventhal, 2009), while diverse range of social network types are crucial for well-being (Litwin & Shiovitz-Ezra, 2011). Notably, recent studies have expanded the focus beyond Health-Related Quality of Life (HRQoL). The QoL scale employed in this study assesses older adults' well-being based on satisfaction related to control, autonomy, pleasure, and self-realization (Hyde, Wiggins, Higgs, & Blane, 2003).

The limited body of research on the QoL of migrants has tended to

focus on younger populations within the workforce (Sand, 2018). However, literature regarding older people suggests a critical need to analyse social relations (Kutubaeva, 2019), particularly in the European context (Hansen, Aartsen, Slagsvold, & Deindl, 2018). Factors such as race, ethnicity, national origin, and culture significantly influence older adults' QoL (Polacsek & Angus, 2016).

Civic engagement differs from mere social involvement by fostering civic virtues (Scrivens & Smith, 2013). Individuals engaged in community activities develop a sense of belonging and motivation to address local challenges (Liu & Besser, 2003). This aligns with Tocquevillian ideals, wherein participants exert influence on governing bodies rather than remaining isolated (de Tocqueville, 2016). Recent findings by Bui, Coyle, and Freeman (2020) have shown that encouraging advocacy and civic engagement among older people through age-friendly community programmes are needed to incorporate their voices in local policy.

Structured resources at the macro level have been shown to impact older migrants' QoL (Sand, 2018). Our study analyses the country of residence using the Active Ageing Index (AAI) 2018, which measures older people's well-being across four domains: employment, participation in society, independent and healthy living, and capacity for active ageing (UNECE, 2019). The AAI serves as a reference for policymakers, highlighting priorities and urgencies in current ageing policies (UNECE/EC, 2015). By emphasizing social participation, independent living, and an enabling environment for older adults, AAI is a tool ensuring that local policies foster equitable access to resources, support inclusive communities, and enhance the overall well-being of ageing populations through local infrastructure and services (UNECE, 2019). We serve that AAI's perspective aligns with "sustainable age-in-place" practices, particularly in terms of the built environment's effectiveness in facilitating active social engagement (Landorf, Brewer, & Sheppard, 2008).

Although research on retirement intentions and healthcare needs has been prevalent since the early 2000s (Patzelt, 2016), studies specifically addressing older migrants' civic engagement have gained increased scholarly attention recently (Torres & Serrat, 2019). Previous studies, such as those by Adler, Schwartz, and Kuskowski (2007), have explored older individuals' civic engagement through various definitions and generational comparisons in the USA. A comprehensive literature review by Serrat, Scharf, Villar, and Gómez (2020) identified significant gaps, particularly regarding the impact of socio-cultural differences on participation in civic society. Our study makes a significant contribution to the literature on civic engagement of older population by using the Active Ageing Index (AAI) as structural context. The AAI offers a novel analytical tool by providing a multidimensional

understanding of older people's contributions to society and the environmental conditions that facilitate active ageing (UNECE, 2019). In our literature review on Europe, a notable study by Serrat, Nyqvist, Torres, Dury, and Näsman (2023) analysed cross-national data and defined civic engagement as participation in voluntary/charitable work and involvement in political or community organizations. They categorized immigrant backgrounds into three groups: European foreign-born, non-European foreign-born, and native-born, utilizing data from the Survey of Health, Ageing, and Retirement in Europe (SHARE).

Supporting the social capital of older individuals from ethnic minorities and migrant backgrounds has been deemed essential (Cramm & Nieboer, 2015). Numerous studies have investigated older adults' social capital, primarily focusing on life satisfaction (Tomini, Tomini, & Groot, 2016) and health outcomes (Litwin & Stoeckel, 2015; Sirven, Berchet, & Litwin, 2015). Heikkinen and Lumme-Sandt (2013) studied the social networks of older migrants based on their transnational lives. A number of authors have recognised the civic engagement of older people. For example, Gray (2015) suggested that associational membership is not enough to assess older people's civic engagement by using the English Longitudinal Study of Ageing. An earlier study by Cramm, Van Dijk, and Niober (2012) investigated the civic engagement and well-being of older people in the Netherlands. Liu and Besser (2003) enhance our comprehension by scrutinizing the civic engagement of older individuals living in rural areas. Theurer and Wister (2010) address the need for further studies that take into account ethno-cultural differences.

Civic engagement serves as a vital mechanism for older individuals to establish connections beyond familial ties. Understanding the barriers older migrants face in accessing civic opportunities is crucial for promoting social justice, ensuring that all demographic groups can participate in active and inclusive community life. This study investigates how civic engagement, as a form of social capital, contributes to the quality of life of older adults in Europe, considering immigrant background and policy context through the Active Ageing Index (AAI). In doing so, the study draws attention to the role of inclusive, age-friendly approaches in supporting a sustainable ageing. Two research questions guide this study: (1) How do sociodemographic characteristics and immigrant background affect civic engagement? (2) To what extent does civic engagement influence older adults' quality of life, after controlling for other variables? To answer these questions, we use data from SHARE Wave 8 (n = 19,445) and apply Poisson and hierarchical multiple regression analyses. Countries are grouped based on their 2018 Active Ageing Index (AAI) scores, which provide a comparative framework for evaluating how policy environments relate to opportunities for participation, independent living, and well-being in later life.

DATA, MEASURES, AND METHODS

The quantitative data source used in this study is the Survey of Health, Ageing and Retirement in Europe (SHARE). SHARE is a large-scale social science panel study that provides longitudinal microdata on public health and socioeconomic living conditions, enabling international comparisons since 2014. The target population of SHARE consists of individuals aged 50 and over who are residents of the participating country at the time of sampling. The most commonly used sampling design in SHARE is a multi-stage stratified sampling method (Bergmann, Bethmann, & De Luca, 2019). This paper used data from the SHARE wave 8. The fieldwork started in October 2019 and finished in March 2020 which shows an interruption due to COVID outbreak at the very last phase of data collection process.

We considered distinctions in the migration histories of the SHARE Wave 8 European countries, given the role of immigrant status in this study. Following the classification by Hunkler, Kneip, Sand, and Schuth (2015), which groups SHARE countries based on their migration histories, we included only one category of countries in our analysis. Countries with a disproportionately high share of migrants (e.g., Luxembourg, where nearly 50% of the population are migrants) or those that gained national sovereignty in the 1990s following the dissolution of Czechoslovakia and experienced demographic restructuring during that period (e.g., Slovakia) were excluded. This selection was necessary to align with our theoretical framework on migration and ensured a sample with comparable immigration histories, regulatory environments, and nationality laws. In our sample, there were respondents over the age of 50 in 2020 from Austria, Germany, Sweden, the Netherlands, Spain, Italy, France, Denmark, Belgium, and Finland. We excluded respondents missing the migration and civic engagement indicator variables responses. The final data set comprised 19,445 older adults. The SPSS software (version 23; IBM corporation, Armonk, NY, USA) was used to analyse the data.

Dependent and independent variables

The primary theoretical and methodological benefit of our data source, SHARE, allows us to assess the civic engagement of the 50+ population through four distinct forms of civic participation over the past 12 months, as opposed to relying on indirect data like association membership records, which Putnam (2000) criticizes. In our study the activities used to measure civic engagement are those that "have the capacity to produce social capital" (Putnam, 2000, p. 95). In this sense, care-giving is not considered a form of civic engagement, unlike earlier studies on older adults ((Fischer, Mueller, & Cooper, 1991; Martinez, Crooks, Kim, & Tanner, 2011) because of its nature of imposing greater personal responsibility while offering limited social

awarding (Li & Ferraro, 2005). We measured respondents' civic engagement based on the total number of activities they have participated in over the past 12 months, utilising four distinct types: 1) Volunteering/charity work; 2) Community-related/political organisations; 3) Sport/cultural/other clubs; and 4) Educational/training clubs. The discreet score ranged from 0 (no participation) to 4 (participated in all four types). Different types of civic engagement provide a more comprehensive understanding (De Donder, De Witte, Buffel, Dury, & Verté, 2012). Discreet variables can take only certain values (usually whole numbers) on the scale. The actual values that the variable takes on are limited. They differ from continuous variables, which can be measured to any level of precision (Field, 2009). We used Poisson regression to examine the impact of independent variables on civic engagement when it was the dependent variable. Civic engagement was also treated as an independent variable in the analysis of its association with quality of life (QoL).

SHARE used a revised version of CASP-19 (Hyde et al., 2003), a measure of older people's quality of life, with 12 items (CASP-12). The CASP scale for assessing quality of life in older adults has made a significant contribution to the literature by moving beyond a disease- or health-focused approach. It challenges the common practice in ageing studies of using health status as a proxy for quality of life and instead promotes a broader understanding of well-being in later life. The theoretical foundation of the scale is based on the idea that old age is not a disconnection from earlier life stages, but rather a continuation shaped by previous experiences. Accordingly, quality of life in old age cannot be reduced to health status alone (Hyde et al., 2003). Following the first wave, CASP-12 was consistently included in the SHARE questionnaire due to its strong theoretical grounding and empirical robustness (Mehrbrodt, Gruber, & Wagner, 2019). Items were presented as questions or statements to respondents and are assessed on a four-point Likert scale ("often", "sometimes", "rarely", "never"). The resulting score was the sum of the 12 items, ranging from a minimum of 12 to a maximum of 48 (Mehrbrodt, Gruber, & Wagner, 2019). We used the QoL variable constructed by SHARE based on the CASP-12 items (mean=38.88 and standard deviation=5.73).

The analysis included a comprehensive set of independent variables informed by previous research, with a particular emphasis on the role of local policies that facilitate civic engagement among older migrants. By categorizing countries based on their Active Ageing Index, this study highlights how different policy environments impact civic engagement and social inclusion, thus contributing to the overarching goals of social sustainability. The Active Ageing Index connects social inclusion with social sustainability by combining social participation, employment, independent and healthy living, and the national capacity to support active ageing. It offers a single, comparable

measure that enables cross-country analysis.

Binary indicators represented gender (0 "male" and 1 "female") and partnership (0 for married and in partnership, 1 for separated, widowed, divorced, or never married) (Sand, 2018). Education had three categories based on ISCED (0 "low" (0, 1, 2), 1 "medium" (3, 4), and 2 "high" (5, 6)) (Lanari & Bussini, 2012). It is classified as ISCED 0 "pre-primary education," ISCED 1 "primary education," ISCED 2 "lower secondary education," ISCED 3 "upper secondary education," ISCED 4 "post-secondary non-tertiary education," ISCED 5 "first stage of tertiary education," and ISCED 6 "second stage of tertiary education (UNESCO Institute for Statistics, 2006). We have included current self-perceived health (0 "very good/excellent" and 1 "less than very good"), economic status (0 "bad" and 1 "good"), and citizenship of the country of interview (0 "yes" and 1 "no"). The Active Ageing Index 2018 categorises Spain and Italy as "Group 1;" Austria, Belgium, and France as "Group 2;" Germany as "Group 3;" and Sweden, the Netherlands, Denmark, and Finland as "Group 4."

For immigrant status, we used three categories: 0 "natives" (participants themselves and both of their parents born in the survey country), 1 "second-generation migrants" (participants born in the survey country, whereas at least one of their parents was born outside of the survey country), and 2 "first-generation migrants" (participants born outside of the survey country). In case of Germany, we classified participants born in West and East Germany as natives instead of migrants. 1200 of the respondents were first-generation migrants (6%), 1318 were second-generation migrants (6.6%), and 17413 were natives (87.4%).

Table 1. Descriptive characteristics of the sample

		Native n %	First[1] n %	Second[2] n %	Chi Square Test	Effect Size
Gender (n=19445)	Male (n=8655 44.5%)	7601 44.8	496 42.4	558 43.3	$\chi2(2)=3.376$, $p = .19$	.19[3]
	Female (n=10790 55.5%)	9384 55.2	675 57.6	731 56.7		
Age Groups (n=19445)	50-64 (n=4749 24.4%)	4094 24.1	328 28.0	327 25.4	$\chi2(4)=12.566$, $p < .05$	.02[3]
	65-74 (n=7556 38.9%)	6605 38.9	431 36.8	520 40.3		
	75+ (n=7140 36.7%)	6286 37.0	412 35.2	442 34.3		

Educational Level (n=19362)	Low (n=6833 35.3%)	6165 36.4	296 25.8	372 28.9	$\chi2(4)=102.186$, $p < .001$	.05[3]
	Medium (n=6745 34.8%)	5828 34.4	398 34.6	519 40.4		
	High (n=5784 29.9%)	4934 29.1	455 39.6	395 30.7		
Economic Status (n=13420)	Bad (n=2942 21.9%)	2525 21.6	229 27.8	188 20.9	$\chi2(2)=17.709$, $p < .001$	.04[3]
	Good (n=10478 78.1%)	9171 78.4	596 72.2	711 79.1		
Health (n=19438)	Very good/ Excellent (n=5220 26.9%)	4626 27.2	282 24.1	312 24.2	$\chi2(2)=10.442$, $p < .05$	.02[3]
	Less than very good (n=14218 73.1%)	12353 72.8	889 75.9	976 75.8		
Partnership (n=19437)	Yes (n=13454 69.2%)	11848 69.8	769 65.7	837 65.1	$\chi2(2)=19.412$, $p < .001$	.03[3]
	No (n=5983 30.8%)	5133 30.2	402 34.3	448 34.9		
Citizenship (n=19438)	Yes (n=19079 98.2%)	16973 100.0	842 71.9	1264 98.1	$\chi2(2)=4760.109$, $p < .001$	.5[3]
	No (n=359 1.8%)	5 0.0	329 28.1	25 1.9		
AAI 2018 Country Categories (n=19445)	Category 1 (n=3933 20.2%)	3757 22.1	88 7.5	88 6.8	$\chi2(6)=648.170$, $p < .001$	.13[3]
	Category 2 (n=5534 28.5%)	4552 26.8	433 37.0	549 42.6		
	Category 3 (n=2817 14.5%)	2206 13.0	315 26.9	296 23.0		
	Category 4 (n=7161 36.8%)	6470 38.1	335 28.6	356 27.6		

[1] First Generation Migrant
[2] Second Generation Migrant
[3] Cramer's V. Effect sizes are interpreted as follows: small > 0.10; medium > 0.30; large > 0.50 (Cohen, 1988).
Note: χ^2 = Chi square.

Analytical strategy and research questions

We divided the analysis of this study into three stages. First, a univariate description of the sample was performed. The distribution of all variables was calculated by the native, first-, and second-generation groups (see Table

1). The analyses consisted of Chi-square tests with effect size by Cramer's V, which took into account the degrees of group differences across the three groups. According to the guidelines established by Cohen (1988), effect sizes are interpreted as follows: small > 0.10; medium > 0.30; large > 0.50. We used Analysis of Variance (ANOVA) to test differences in civic engagement and QoL means according to native, first-, and second-generation groups (see Table 2). For the ANOVA test, effect size is reported using eta-squared (η^2), where $\eta^2 = 0.01$ indicates a small effect, $\eta^2 = 0.06$ a medium effect, and $\eta^2 = 0.14$ a large effect (Cohen 1988).

Table 2. Differences between Civic Engagement and Quality of Life of Sample According to Immigrant Status

		M (SD)[1]	p[2]	F[3]	p[4]	Effect Size[5]
Civic Engagement (n= 19445)	Native (n = 16985)	0,84 (0,95)[a]	.79	9.38	< 0.001	0.00
	First-Generation Migrants (n = 1171)	0,73 (0,94)[b]				
	Second-Generation Migrants (n = 1289)	0,99 (0,98)[a]				
Quality of Life (n= 18632)	Native (n = 16291)	38.91 (5.72)	.55	2.126	.12	0.00
	First-Generation Migrants (n = 1109)	38.57 (5.81)				
	Second-Generation Migrants (n = 1232)	38.77 (5.74)				

[1] Different letter shows that groups being compared are significantly different.
[2] Levene statistics p value
[3] F value
[4] p value of F
[5] Eta Square value. $\eta^2 = 0.01$ indicates a small effect, $\eta^2 = 0.06$ a medium effect, and $\eta^2 = 0.14$ a large effect (Cohen 1988)

Second, using Poisson regression, we investigated the effect of sociodemographic differences and immigrant background on civic engagement among 50+ older adults in Europe. Poisson regression was applied due to the nature of our dependent variable (civic engagement indicated the number of activities from 0 to 4). The assumptions of Poisson regression were met (Orme & Combs-Orme, 2009).

Our first research question was: "What is the effect of sociodemographic factors (education, economic status, gender, partnership, age, citizenship, and self-rated health), country of residence (based on AAI 2018 categories), and immigrant background on civic engagement?"

Third, in order to test the predictions about quality of life, a hierarchical multiple regression was conducted with three blocks of variables. The first

block included age, gender (1 = male, 2 = female), partnership (0 = married, in partnership, 1 = separated, widowed, divorced, never married), education (0 = low, 1 = medium, 2 = high), economic status (0 = bad, 1 = good), self-rated health (0 = very good, excellent, 1 = less than very good), and countries based on AAI 2018 categories as the predictors, with QoL as the dependent variable. In block two, two variables for immigrant status (being a first- or second-generation migrant) were also included as the predictor variables, with QoL as the dependent variable. Finally, we included civic engagement in block three, ranging from 0 to 4, where 0 indicates no civic engagement and 4 indicates participation in all four types.

Our second research question was: "What is the effect of civic engagement on QoL after controlling for migration background, sociodemographic factors (age, gender, partnership, education, economic status, self-rated health), and the AAI 2018 country categories?"

RESULTS

Poisson regression was performed to predict the number of civic engagements in the last 12 months (Table 3), based on being a first- or second-generation migrant, having a high or medium level of education, having good economic status, being female, having no partner, age, bad health status, having no citizenship, and AAI 2018 country categories. The goodness of fit showed that the model fits the data well (Value/df of Pearson Chi-Square is 0.958 and more than 0.05). Omnibus test showed that the model is statistically significant p-value is less than 0.05 ($p < .001$). The mean of the model is 0.84 and the variance is 0.91, which is a ratio of 1.09. A Poisson distribution assumes a ratio of 1.

Table 3. Incidence rate ratios (IRR) and 95% confidence intervals (CIs) for the probability of civic engagement

Variables	B (IRR)	95% Confidence Intervals	
		Lower	Upper
Migration Status			
Second Generation	-0.01 (0.99)	0.92	1.07
First Generation	-0.16** (0.85)	0.77	0.93
Native (ref.)			
Level of Education			
High	0.53*** (1.70)	1.61	1.79
Medium	0.24*** (1.27)	1.21	1.34
Low (ref.)			
Economic Status			
Good	0.26*** (1.30)	1.23	1.38
Bad (ref.)			

Gender			
Female	0.00 (1.00)	0.97	1.04
Male (ref.)			
Partnership Status			
No Partner	-0.05* (0.95)	0.91	0.99
Having Partner (ref.)			
Age	-0.02*** (0.99)	0.98	0.99
Health Status			
Bad	-0.25*** (0.78)	0.75	0.81
Good (ref.)			
Citizenship			
No	-0.03 (0.98)	0.83	1.15
Yes (ref.)			
Countries based on AAI2018			
Category 4	0.81*** (2.24)	2.08	2.42
Category 3	0.54*** (1.72)	1.57	1.88
Category 2	0.64*** (1.89)	1.75	2.04
Category 1 (ref.)			

Notes: ref.= reference category, B= beta values, IRR= incidence rate ratios.
Significance levels: * p<0.05, ** p<0.01, *** p<0.001

In order to test the predictions, a hierarchical multiple regression was conducted, with three blocks of variables. There is no collinearity within our data, VIF values are below 10 and the tolerance statistics above 0.2 (Field, 2009). Durbin-Watson statistics is 1.947 which is close to 2 that the assumption of independent errors is almost certainly met (Field, 2009). Table 4 shows that the first model was significant and explained approximately 25% of the variance in QoL, ($F(10, 12876) = 434.31$, $p < .001$). According to the change statistics, adding new predictors which are the first- and second-generation migrant to model 2 made no statistically significant difference, ($F(12, 12874) = 362.431$, $p = .001$). The third model ($F(13, 12873) = 358.179$, $p < .001$) which included civic engagement ($\beta = 0.13$, $p < .001$) showed improvement and explained 27% of the variance in QoL ($\Delta F(1, 12873) = 229.843$, $p < .001$, $\Delta R2 = .013$).

Table 4. Hierarchical multiple regression

Variable	**B**	**95% CI for B**		**SE B**	β	**R^2**	**ΔR^2**
		LL	**UL**				
Step 1						.252	.252
Constant	41.509	40.695	42.324	.415			
Gender	-.200	-.376	-.025	.089	-.017*		

Economic Status	4.060	3.839	4.282	.113	.293***		
Partnership	-.681	-.874	-.488	.098	-.055***		
Self-rated Health	-3.135	-3.338	-2.932	.103	-.243***		
Age	-.064	-.074	-.054	.005	-.102***		
Medium Education	.548	.320	.775	.116	.046***		
High Education	.666	.427	.905	.122	.053***		
AAI2018 Category 2	.700	.566	.833	.068	.110***		
AAI2018 Category 3	.467	.358	.576	.056	.086***		
AAI2018 Category 4	.414	.349	.479	.033	.139***		
Step 2						.253	.000
Constant	41.537	40.723	42.352	.416			
Gender	-.199	-.374	-.024	.089	-.017*		
Economic Status	4.049	3.827	4.271	.113	.292***		
Partnership	-.678	-.871	-.485	.098	-.055***		
Self-rated Health	-3.131	-3.333	-2.928	.103	-.242***		
Age	-.064	-.074	-.054	.005	-.102***		
Medium Education	.547	.319	.774	.116	.045***		
High Education	.672	.433	.911	.122	.054***		
AAI2018 Category 2	.720	.586	.855	.069	.113***		
AAI2018 Category 3	.484	.374	.595	.056	.089***		
AAI2018 Category 4	.418	.353	.484	.033	.141***		
First Generation Migrant	-.270	-.635	.095	.186	-.011		
Second Generation Migrant	-.326	-.674	.023	.178	-.014		

Step 3						.266	.013
Constant	40.617	39.801	41.433	.416			
Gender	-.213	-.387	-.040	.089	-.018*		
Economic Status	3.930	3.710	4.151	.113	.284***		
Partnership	-.642	-.834	-.451	.098	-.052***		
Self-rated Health	-2.956	-3.159	-2.754	.103	-.229***		
Age	-.055	-.065	-.045	.005	-.088***		
Medium Education	.435	.209	.661	.115	.036***		
High Education	.320	.078	.561	.123	.026**		
AAI2018 Category 2	.598	.464	.733	.069	.094***		
AAI2018 Category 3	.420	.311	.530	.056	.077***		
AAI2018 Category 4	.320	.254	.386	.034	.108***		
First Generation Migrant	-.140	-.502	.222	.185	-.006		
Second Generation Migrant	-.330	-.675	.016	.176	-.014		
Civic Engagement	.758	.660	.856	.050	.126***		

B = Unstandardised coefficient, CI= Confidence interval, LL=Lower Bound, UL= Upper Bound, SE= Standart Error, β= Standartised coefficient, R^2= R square, Δ R^2= R Square Change.
* p<0.05 ** p<0.01 *** p<0.001

These findings suggest that civic engagement is shaped by both individual-level characteristics (such as education, health, and economic status) and broader structural factors, such as the country's active ageing policy framework. First-generation migrants showed significantly lower levels of civic engagement compared to natives, while second-generation migrants did not differ significantly. This points to the importance of long-term integration processes. In the hierarchical regression, civic engagement emerged as a significant predictor of quality of life ($\beta = .13$, $p < .001$). Although its effect size is smaller compared to economic status ($\beta = .28$) or health ($\beta = –.23$), it still accounts for a meaningful increase in explained variance ($\Delta R^2 = .013$), highlighting the independent contribution of social participation to well-being in later life.

DISCUSSION

Civic engagement: Generational differences between migrants

Our analysis demonstrates that countries categorized by Active Ageing Index 2018 have a profound impact on civic engagement, with significant implications for social sustainability. Age-friendly policies not only enhance well-being of older adults but also contribute to sustainable community development. The findings highlight the importance of implementing inclusive policies that address unique needs of older people, ensuring equitable access to resources and opportunities for all community members.

Residents of Category 4 (Denmark, Finland, Netherlands, Sweden), Category 3 (Germany), and Category 2 (Austria, France, Belgium) were participating more types of civic engagement than those who were living in Category 1 (Spain and Italy) countries. Prior research suggests that welfare regime and civic culture of country of residence are crucial factors shaping civic engagement opportunity structures (Hank & Erlinghagen, 2010). The literature review shows that AAI 2018 classifications is similar to Erlinghagen and Hank's (2006) results for 50+ population's volunteering and giving informal care scheme: upper engagement (Denmark, Netherlands, Sweden), middle engagement (Germany, France, Switzerland, Austria), and lower engagement (Italy, Spain, Greece). According to Haski-Leventhal's (2009) results, volunteering among European older adults is higher in northern countries than southern ones. Our research shows that living in a country that prioritises and encourages active ageing is even more significant than factors such as health, education, and economic position. This insight highlights the significance of policy-making process and how policies can uphold the expression of needs of older adults and their contributions to society. In addition to welfare models, migration policies may also shape the diversity of civic engagement through mechanisms such as language barriers (Johnson & Lee, 2015) and integration processes (Berchet & Sirven, 2014). This suggests that cross-national differences should be understood not only in terms of welfare but also in relation to broader socio-political conditions affecting migrants' access to social life.

Higher levels of education, better economic status, and health were all associated with participating in more types of civic engagement. Current literature on relationship between education and social participation aligns with our work (Erlinghagen & Hank, 2006; Yamashita, Keene, Lu, & Carr, 2017). Poor health's negative effect on civic engagement is also supported by studies on volunteering (Scharn et al., 2019). It is important to emphasise that our results illustrate the effect, but not causality, which is a significant limitation. Lastly, our result with negative effect of bad economic status on civic engagement supports Putnam (1995), however, Handy and Greenspan's

(2008) work on immigrant volunteering showed there was no difference of economic status in between those who volunteer and those who do not. Implementing policies that provide support for initiatives such as third age universities, which offer extensive programmes encompassing financial, health, and digital literacy, can significantly enhance overall well-being and civic engagement of older population.

In reference to natives, being a first-generation migrant is associated with less civic engagement. However, being a second-generation migrant had no significant effect, in comparison to their native peers. In other words, older migrants who were born in the host country with at least one foreign-born parent showed similar results as natives. This suggests that transnational ageing experience impacts different generations in distinct ways. Level of adaptation to the formal (administration, law, and system) and informal (norms and values) institutions of host country (Berchet & Sirven, 2014) can explain this phenomenon. Language barrier and being not familiar with host country's civic culture can suppress first-generation's participation in public life (Johnson & Lee, 2015).

It's crucial to emphasise that SHARE is applied to formal language of survey countries. Thus, our sample consists of first-generation migrants who are proficient enough in host country's language to participate in the survey. The fact that even first-generation migrants with higher educational levels than natives and second-generation migrants have lower civic engagement is a significant finding, considering that this group generally has lower levels of education within the population. Our finding with generational differences, aligns with Serrat et al. (2023) which, concludes that foreign-born older adults who migrated before age of 18 were more likely to engage in volunteering, which is interpreted by level of integration. Local governmental initiatives that promote inclusion of first-generation migrants can serve as a beneficial mechanism to facilitate integration and social just.

The associations between civic engagement and age and having a partner were statistically significant yet negligible. Current literature shows a decrease in volunteering in later years of life (Erlinghagen & Hank, 2006) which is explained by deterioration in health (Rudnik, Patskanick, Miller, D'Ambrosio, & Coughlin, 2020). We see that Berchet and Sirven (2014) found a negative effect of having a partner on volunteering of 50+ adults.

Gender was not a significant variable in our analysis. Johnson and Lee (2015) compared whites and ethnic minorities in the US and found that gender was a significant factor in the case of Asians, while it was not significant in case of Blacks and Hispanics. They explain this result by focusing on differences in access to resources and work-life balance. Fortuijn and Van Der Meer (2006) and Martinez et. al (2011) show differences in the 50+

population in Europe, while women preferred informal volunteering and men preferred formal ones. In future research, it may be meaningful to include countries of origin in the analysis, alongside intergenerational differences (such as first- and second-generation migrants), in order to explore gender differences more thoroughly.

Another limitation of this paper is that the SHARE data set does not include how active or passive the individual's civic engagement is, for example, if they are only members of associations or actively attend meetings. In this sense, the European Social Survey provides a better data source for social capital studies. This study's emphasis on structural and policy factors highlights importance of prioritizing voices and needs of older migrants in policy-making processes to advance social sustainability.

Quality of life: Positive relationship with civic engagement

Civic engagement was the third strongest determinant of QoL after economic status and health, consistent with social capital theory with a limitation of cross-sectional data. This result leads to a similar conclusion where Hansen et. al (2018) showed that 50+ older adults who were not volunteering had lower life satisfaction than their peers who were volunteers. This finding can be explained by feeling of increased social value from contributing to society while being a vital member of it (Hinterlong & Williamson, 2007; Keyes, 1998).

Our results demonstrated that better economic status and self-perceived health were the strongest predictors of QoL in the 50+ European population. This result ties well with previous studies wherein Pinquart and Sörensen (2000), Hao and Johnson (2000), and Cramm et. al (2012) found a strong relationship between economic status and QoL of older adults. Theurer and Wister (2010) supported our results on health in their study with 65+ Canadians.

In our analysis, immigrant status did not bear any statistically significant association in QoL, which is not consistent with previous studies. Sand and Gruber (2018) demonstrated a difference between the QoL of migrants and natives in EU countries. Their results revealed gap was higher in the Netherlands and Denmark, which is explained by the countries' migration policies. Kirmanoğlu and Başlevent (2014) provided evidence for how discrimination by ethnicity decreases first- and second- generation migrants' QoL. On the other hand, Morrow-Howell, Hinterlong, Rozario, and Tang (2003) showed how volunteering enhanced life satisfaction of 60+ population in the US, without a difference between races and suggested a universal effect. Given the high level of education among migrants in our sample, our results should be considered carefully: Higher levels of education in older immigrants show a

difference between social realm and SHARE sample. Policies should promote and implement multi-cultural and multi-lingual programmes to enhance the inclusivity for groups facing cumulative disadvantage. As a limitation on this matter, despite differences in opportunity structures among migrant groups even within each country, as demonstrated by Vermeulen (2005), we were unable to assess this issue due to limited representation of sub-migrant groups in the SHARE sample, a general limitation in the literature (see also Arsenijevic & Groot, 2017; Bordone & De Valk, 2016; Lanari, Bussini, & Minelli, 2018; Sand & Gruber, 2018).

Our findings shed light on effect of ageing on lower levels of QoL. A similar conclusion was reached by Litwin and Stoeckel (2015) for 75+ population. In Sand's study (2018), negative effect of health on QoL was found to lose statistical significance after the age of 78. In our analysis, partnership and education level were significant yet weak determinants of QoL. Superior results are seen in the work of Hao and Johnson (2000); they found that having a partner is especially important for migrants' well-being compared to natives.

In our sample, women had lower levels of QoL, with a weak effect. In recent studies, there have been different results on gender's effect on older people's QoL. Meanwhile, Theurer and Wister's study (2010) supports our findings and interprets this as women's more deteriorated health, Litwin and Stoeckel (2015) found the opposite result, women's QoL was higher than men. Morrow-Howell, Hinterlong, Rozario, and Tang (2003) found no difference between genders.

As a structural determinant, the effect of countries' AAI scores on QoL was confirmed, even though its effect was not as strong as it was found to be on civic engagement. Along with our overall results and current literature, to increase the civic engagement and QoL of older population, accessibility of urban spaces (Ciobanu, Fokkema, & Nedelcu, 2017; Palmberger, 2016) should be planned by policymakers.

CONCLUSION AND FUTURE RESEARCH

This study highlights generational differences in civic engagement among older migrants, underscoring importance of age-friendly policies and sustainable local environments. Our findings demonstrate that age-friendly communities are crucial for promoting social inclusion and well-being among older people, particularly through civic engagement. By promoting policies that support social capital and social infrastructure, local governments can foster sustainability and equitable access to resources.

The aim of age-friendly communities is to promote older people's well-

being (Scharlach, 2017). Age-friendly communities refer to social inclusion by synthesising social capital theory in terms of social integration, social support, and access to resources (Scharlach & Lehning, 2013). These three central characteristics are associated with AAI domains and civic engagement, as they indicate physical and social infrastructure.

Social capital tends to regress in later years of life (Bishop, Martin, & Poon, 2007). In this sense, civic engagement promotes adaptation to loss by enabling the establishment of social networks beyond family ties (Onyx & Warburton, 2003). Studies also demonstrated that membership in multiple social groups during ageing increases the likelihood that at least one of them will continue over time, providing "continuity in social capital" (Ysseldyk, Haslam, & Haslam, 2013). This paper highlights the importance of promoting diversity in civic engagement by proving positive relationship of having more than one type of civic engagement with QoL.

Creating age-friendly communities requires more than promoting the well-being of older adults; it also demands a strong commitment to social sustainability. Local policy-making processes must incorporate participatory mechanisms that reflect the voices and lived experiences of older migrants. Additionally, more inclusive data practices are essential. Current surveys, such as SHARE, do not allow for analysis by country of origin and often underrepresent migrants with lower socioeconomic status. Improving the representativeness of these groups is crucial for advancing equitable and evidence-based policies.

This study has several limitations. First, the use of cross-sectional data limits our ability to draw causal inferences; the results illustrate associations rather than causality. Second, the SHARE survey is conducted in the official language(s) of each participating country, which means that our sample includes only first-generation migrants with sufficient language proficiency to participate. This may result in the underrepresentation of more vulnerable groups. Third, the SHARE dataset does not capture the degree of civic engagement—whether individuals are actively involved or merely affiliated with organisations—which constrains the depth of our analysis. In this regard, alternative data sources such as the European Social Survey may offer more nuanced insights into social capital.

Future studies examining immigrants' countries of origin and rural–urban differences may offer insights that go beyond the limitations of this paper. Including country of origin could also help clarify gender-related patterns. Another demographic group that deserves attention is older adults living alone, as one-person households represent a growing and distinct segment of the ageing population.

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