Planning for later life: transnational and inter-generational care among Papua New Guineans in Australia

by

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Abstract

Drawing on qualitative research conducted among Papua New Guineans living in North Queensland, Australia, this paper explores how people imagine and plan for later life in transnational contexts. We present 'planning' for old age as a socially embedded practice with specific spatial and temporal properties that emerge in everyday interaction. At issue are representations of difference in the cultures of care found in Papua New Guinea (PNG) and Australia and the problem of intergenerational changes in care practices among Papua New Guineans resident in Australia. We argue that growing tensions in intergenerational relationships in Australia and PNG play a crucial role in changing the social relations of the transnational moral economy of care. These intergenerational problems are understood by PNG research participants, in their own critical analysis of their care relationships, as related to other concerns about estrangement from place, loss of culture and the difficulties of planning for later life. We conclude that transnational households are dynamically defined and transformed in terms of tensions central to their very operation.

Keywords: Transnational; Intergenerational; Aged care; Papua New Guinea; Australia; moral economy

1. Introduction

A dramatic increase in human life expectancy over the past century has led to complex moral dilemmas as people all over the world grapple with how to imagine, plan for, and deal

with later life. Awareness of this demographic trend has led to significant growth in the literature on aging and aged care, including among migrant populations (Ciobanu et al, 2017: 166). In particular, there has been a burgeoning interest in the topic of transnational families and aged care (eg. Baldassar, 2007; Baldassar et al, 2007; Zechner 2008; Baldassar and Merla, 2014; Buffel, 2015; Horn and Schweppe, 2016; Marcu, 2018). In this paper, we explore how Papua New Guinea (PNG) residents in North Queensland, Australia, approach the care of elderly kin in the context of the transnational dispersal of their families. Our emphasis on the transnational includes a specific focus on intergenerational commitments to the elderly since it is in intergenerational relationships that we can best observe transformations in the moral economy of care.

Baldassar and Merla (2014) conceptualise transnational aged care in terms of a 'circulation of care' to capture the reality that reciprocities are involved and that the transactions are not unidirectional. Other researchers, following Hochschild (2000), refer to 'global care chains' in their explorations of the dynamics of transnational care (Nadasen, 2017). Our focus on the intergenerational aspects of transnational care is based on our understanding that planning for care in later life is informed not only by spatial but also by temporal factors. As Gregory (2018: 6) notes,

> Householders everywhere measure time by generations: the past with reference to one's parents and grandparents, the future with reference to one's children and grandchildren, and the present with reference to oneself. Where householders live in kinship-intensive neighbourhoods, this familial way of talking about time informs thoughts and actions.

Such 'thoughts and actions' include planning for care in later life. However, PNG householders in North Queensland do not live in kinship-intensive neighbourhoods, but in kinship-extensive transnational space, where intergenerational relationships may no longer provide assurance of future care. Therefore it is important to explore how people respond to this uncertainty. Underlying our concern with this question of uncertainty of care is a broader

question regarding the salient features of the PNG moral economy of care within the transnational household.

Our approach to transnational care practices derives from ethnographic research by Sykes (2013, 2018) among PNG residents in the greater Cairns region of North Queensland. We argue that understanding how PNG people in Australia care for the elderly requires attention to the moral economy of the transnational Papua New Guinean household. This involves exploring how Papua New Guineans attempt to resolve tensions that arise in planning for later life care.

2. Contextualising Care in a Transnational Moral Economy: Concepts and Theories

Recent work in transnational caring has highlighted how moral and political decision making about the elderly defines communities of care and forms of belonging across distances, times and geo-political boundaries (Thelen and Coe, 2019: 279). Such an approach to transnationalism seeks to avoid 'methodological nationalism' (Glick Schiller and Salazar, 2013; Clifford, 1994) evident in past migration studies where nation states emerge primarily as passive and fixed containers of social interactions. In our view, derived from the social geographies that have been described in post-colonial PNG (eg. Lattas, 1998; Bashkow, 2006; Wood 2006), transnationalism involves the creation of multiple social spaces that move and transform within emergent dynamic transnational fields. Such geographies include social relations with the dead, who are understood to have the capacity to engage with the living across local and national boundaries by transcending geo-political space/time (Gammage, 1998; Dundon, 2011; Falck, 2019: 9). In addition, flows of power, such as sorcery, are not bound to place. Relations of care among Papua New Guineans are influenced by understandings that state borders are porous to such flows. The transnational mobility of Papua New Guineans, and the creation of new places and new geographies, is significantly enmeshed in moral and political projects of self-transformation into modernity.

Understood in terms of such social dynamics, a transnational focus provides insight into how PNG residents in north Queensland comprehend and experience their own histories of migration as practices of place-making. This travel to newly-defined overseas places means leaving 'behind' equally newly created places such as the remembered home village and PNG itself (Clifford, 1994: 322). Such place-making is associated with a poetics of memory and loss of care, related to simultaneous experiences of absence and co-presence, and various degrees of mobility and immobility (Glick Schiller and Salazar, 2013).

Others have argued that transnational care involves projects of political belonging through ethical self-making by caring groups, communities and social networks (Chattoo and Ahmad, 2008; Sykes, 2018). Such ethical self-making involves negotiating gendered differences in care work and inter-generational continuities and discontinuities in the performances of care (Levitt and Glick Schiller, 2004; Levitt and Jaworsky, 2007:144).

Transnational care has been increasingly discussed through the lens of 'moral economy' (Fassin, 2005, 2010; Chattoo and Ahmad, 2008; Wilkinson and Kleinman 2016; Dawson and Goodwin-Hawkins, 2018; Anderson *et al*, 2019). The concept of moral economy has had a productive history of defining many things (Götz 2015). It was re-activated in the 1960s and 70s by Thompson (1968, 1971, 1991) who related it to customary rights and non-market transactions involving forms of reciprocal obligation that were destroyed by the workings of a capitalist economy (Granovetter1985, Polanyi 1957, Scott 1976). The concept of economies based on reciprocal 'gift' exchange and their complex historical transformation into economies based on commodity transaction has been specifically explored and debated in relation to colonial and post-colonial PNG and the wider Pacific by Gregory (1982),Thomas (1991) and Carrier (1992,1995), among others.

The analytical use of the concept of moral economy today indicates a broad interest in moral issues in the social relations of both market and non-market transactions (Edelman

2005). Further broadening is reflected in Fassin's definition of moral economy as 'the production, distribution, circulation and use of moral sentiments, emotions and values, norms and obligations in social space' (cited in Siméant 2015: 169). More expansion of the term's meaning was facilitated by the emergence of morality as a specific sub-discipline in the social sciences (Mattingly and Throop, 2018) in ways that might have thinned out 'morality' to cover any rule based activity (Robbins, 2013; for a critique of this trend see Kapferer and Gold, 2018).

Our notion of moral economy among Papua New Guineans derives from the work of Sykes (2018), who explicitly builds on the work of Thompson and Polanyi. In her terms, a moral economy of the transnational household is not a given set of fixed customs (or pre-capitalist cultural logics). Rather, the transnational household is an entity with a set of historically specific social interactions and relationships that secure the moral, political and economic well-being of its members (Sykes, 2018: 118). Transnational households are often defined as engaging in socially productive, dynamic and transforming transactions of care (Buch, 2015) and by the forms of mutuality and belonging associated with such transactions (Levitt and Jaworsky, 2007; Thelen and Coe, 2019). However, we think accounts of mutuality and belonging in the caring transnational household may evoke an overly social understanding of caring relationships. In contrast, our approach brings this positive sociality of care into conjunction with processes of estrangement from place, others and culture (Simmel 1950, de Certeau 1984, Bashkow 2006, Stasch 2009). These tensions are a significant property of the PNG moral economy of caring and its transformation.

Sykes (2018) argues that PNG transnational households, while strongly enmeshed in a global economy, emerge in the context of loss of connection to local home places and clan land (Sykes, 2018: 124). Sending remittances to clanspeople in PNG as gifts responds to the threat of estrangement from place by 'creating a sense of solidarity through the work of

making exchanges' (Sykes, 2018: 131). For transnational households such transactions involve investments in memory work linked to places of origin and the possibilities of presence and absence, mobility and immobility (Tošić and Palmberger, 2016). The departed living, who may not always regularly return 'home,' and the departed dead, might be forgotten as could their claims of local belonging.

The moral economy of Papua New Guineans in North Queensland extends well beyond the domestic household as classically understood. The term 'household' is conceptualised among anthropologists as covering a much wider set of relationships than that of a group of co-residents under one roof (Hunter and Smith, 2000; Henry and Daly, 2001; Netting, Wilk and Arnould, 1984; Yanagisako 1979; Peterson and Taylor 2003). Plyushteva and Schwanen (2018: 132) define the household 'in terms of dynamic and intergenerational care relations and porous boundaries'. Papua New Guineans in Australia are connected into a moral economy that extends across national and international borders and is founded on multiple cross-cutting intergenerational ties among transnational players (Sykes, 2018).

We argue that care for the elderly can only be understood in terms of the actual ideas and practices of its participants. Any analysis of the moral economy among Papua New Guineans in Australia requires attention to the participants' transnational forms of sociality and kinship and their social relations of affinity, descent, friendship, and exchange (Sykes, 2018). This is not to reduce transnational care to kinship nor is it to assume such care only involves positive relationships. Caring also involves negotiating tensions that develop around ethnic, cultural and national differences, gender relations and intergenerational dynamics. Caring is not only embedded in, and creative of, a politics of solidarity, but also a politics of conflict and antagonism. Thus, we emphasize the dynamic morphology of the PNG transnational moral economy of care.

Intergenerational relations provides a crucial lens on the processes of creating and contesting the types of care undertaken by carers and care-related forms of belonging (Buch 2015: 283-285). Participants have variable moral and political commitments to the elderly according to the sense of responsibility they feel towards them. In our account, intergenerational conflicts are linked to failures to reproduce and enact memories of past practices of care, especially those attributed to PNG culture.

3. Research approach and methods

The participants in this research project are Papua New Guineans living in and around the cities of Townsville and Cairns, both of which are just a short flight from Port Moresby, the capital of PNG. As Sykes (2018) shows, it is impossible to accurately portray the PNG community in Australia merely on the basis of analysis of Australian census data. The community is extremely fluid and diverse, with much movement of individuals back and forth between Australia and PNG. Some of the participants in our study are Australian citizens who migrated at least 4 decades ago, around the time of PNG Independence in 1975. The majority are women who had met and married men of non-PNG descent (Australian, European, and Asian) during the pre-Independence period of Australian administration. Some are now widows who have spent years of their lives caring for aging husbands. Other participants in our study are more recent arrivals, who moved to Australia during the 21st century for work or educational opportunities (Sykes 2018: 121). Many reside in Australia on different categories of temporary visa while others have secured permanent residency or have qualified for Australian citizenship, such as by virtue of descent from a parent that was an Australian citizen at the time of their birth.

We first held a community consultation workshop and several focus group discussions in Cairns to identify key issues of aged care within the PNG community. One strong theme that

emerged, and that this paper addresses, is the changing nature of the moral economy of care as articulated by members of the community. It became clear that participants were expressing a complex view of transnational relationships of care that, for them, involved intense social ties and, simultaneously, powerful processes of alienation from both Australia and PNG.

We then met with community leaders who referred us to other potential participants. In addition to informal discussions, to date we have conducted semi-structured and open-ended interviews with thirty Papua New Guinea born people, who trace their heritage to at least 15 different provinces in PNG. Twenty-two of the participants interviewed were women. We chose to focus on the now elderly women who migrated to North Queensland around the time of PNG Independence. They are central to the care economy of the PNG transnational household in North Queensland. As Sykes (2018: 106) has noted, 'PNG women live at its centre, often having multiple residences in PNG and Australia'.

We have based our analysis in this paper on transcripts of interviews with participants as well as our associated ethnographic field notes. An ethnographic approach was facilitated by the fact that the members of the research team have all conducted lengthy periods of fieldwork in PNG and are immersed in long established relationships, including of kinship, with Papua New Guineans in North Queensland. This has proved invaluable in gaining insights regarding aged care planning and the dilemmas that research participants face in the context of a transforming domestic moral economy.

4. A moral economy of care

Caring is a contested concept among scholars (Bastia, 2015: 122; Dawson and Goodwin-Hawkins, 2018). In English speaking contexts, we tend to use the word care (as in health care, aged care) with little reflection about what it actually signifies at a deeper level.

What does it mean to care? While there is a tendency to assume that caring actions are naturally accompanied or motivated by caring feelings and vice versa, 'this particular moral understanding of the relationship between feeling and action' does not necessarily apply cross-culturally (Buch 2015: 278). However, among Papua New Guineans action and feeling are closely related in their understandings of caring. Such actions as contributing to medical expenses, costs of funerals and other economic activities, as well as the bodily care of the elderly, which is typically performed by women, are interpreted as expressing the moral value of caring. These activities, among others, constitute a transnational moral economy. For example, Papua New Guineans resident in Australia contribute to funeral expenses, and often return to PNG to participate in funeral rites and periods of mourning. This is reciprocated by their PNG based kin, who travel to Australia to attend funerals and assist their kin in the organisation of mourning rituals. One of our participants describes such activities in the following terms:

> *When our own situation occurred here …, we had Papua New Guineans contribute. And I've got a list of that and what happens is that, whatever happens to their families, we contribute; what they've given us, we double that…It is, reciprocal! And that's the customs and traditions…And by the same token, the Melanesian cultures, in the Pacific, have the same sort of traditions, and, so do the Torres Strait Islander…When there's like funeral…I still send money up. We just had one not too long ago, another guy that – from Wewak - family friend, closely related family friend that we know, so…I said, 'Ok!' You know, we contribute and stuff. So yeah, that kind of thing I still do on a regular basis.*

In addition, many Papua New Guineans routinely supplement the livelihoods of their elderly kin in PNG. For example, a 50 year old woman, to whom we have given the pseudonym Joyce, looks after her ailing mother in PNG. She has built her mother a house, provides household goods and has installed water supply and power to the house:

> *I thought I was the only one, but I'm talking to all the other people and I think…Papua New Guineans living in Cairns are experiencing the same…I've got a little house like this built for her. I've had it for, a couple of years now…You have extended family members there to help them…So you just have to, sort of, balance it*

> *out. You can have your good life here [in Australia] but also think of your own up there [PNG]…*

As well as financially caring for elders in PNG, Papua New Guineans in Australia often pay for airfares to bring their kin to Australia for holidays and for medical treatment.

While our respondents, individually and collectively, regularly invest some of their day-to-day income in producing and reproducing national and transnational kin relations, they also activate caring relationships with other Papua New Guineans, especially those deemed to be 'family friends'. Thus, transnational care is enacted by people who are not always related as kin. They are recruited, or recruit themselves, into practices of caring on the basis of a number of different criteria, including not only consanguineal and affinal relationships, but also shared membership in a clan of origin, PNG provincial and regional affiliation, friendship and sometimes a broader shared national identity as Papua New Guineans. Such wider networks are often referred to as *wantoks* (Tok Pisin) (Schram 2015).

As Jocelyn, aged 56, who has lived in the North Queensland region for more than 10 years explains, her network of care includes

> *…close family friends, you know, sort of those. You know that guy that passed away, we've known that family for a long time… I heard about it, saw it on Facebook and rang [Jenny] who said, 'Oh, we're already getting ready to find out where the haus krai [mourning ritual] is, so we're going as family' and I said, 'Well, put my contribution too'. And that we still do!*

Practices of care and compassion, including mortuary payments, give form and moral value to a domestic economy that extends well beyond the immediate family group. A participant, who moved from PNG only two years ago, thought that living in Australia brought with it a sense of duty to help a wider community of PNG people than when she was living in PNG. In PNG she tended to confine her care contributions to members of her own immediate clan

lineage. Another participant reflected on how an elderly PNG couple was cared for within the PNG diaspora, as follows:

> *And they have a good... friend of theirs who is from Kavieng…who comes and does their driving around for them… She makes cups of tea or whatever and cakes and takes them over to them…and then a couple of their friends live in Nambour and in Caloundra and Maroochydore. So, if they have to ask for help, they'll ring.*

4.1 Caring and Cultural Difference

In addition to highlighting extensive social networks of caring among Papua New Guineans, many of the research participants suggested that the support and care they enact is different to what they observe among Australians. They regularly deployed terms in their accounts, such as Melanesian 'culture', 'custom', and ways of doing things. Their ready use of such terms points to a self-conscious identification with a particular moral economy of care, one that they took to be distinctively Papua New Guinean.

Our research reveals that the views of Papua New Guineans in North Queensland about how the elderly should be cared for are informed by ideas concerning cultural practices of care and how the aged are valued 'back home' in PNG, understood to be a site of on-going relational kinship and care of the elderly. For example, John, aged in his seventies, who has lived in North Queensland for more than 20 years explained:

> *Of course, I think of my two sisters who are still alive and similarly with aunty … she thinks about her siblings back at home, especially [one of her brothers] because he is disabled. So she thinks of him all the time… A few dollars extra that you make you send it up there. You send it up for their upkeep… These are things that are in your mind all the time, because you grew up with it and it's not something that you come to Australia and bang it's finished. Australian lifestyle doesn't ... well to me it doesn't happen that way.*

In this account, PNG is marked by the persisting presence of relational care, whereas Australia is portrayed as potentially negating such care. Australia and PNG are positioned here as mutually estranging in the moral economy of this family.

Another participant, Paul, aged in his late sixties who has lived in Australia for about 30 years, noted that in PNG,

> *Everyone supports one another…Ah, the family, immediate family, extended family ... and that's because of how the culture, of how people perceive their relationships to one another; that it is not a finite thing. Those relationships, whether you're living in the village or in town, relationships are important and integral part of that. It continues [in Australia]. So the expectation is that you will still help, you still care; you will be called upon. That's why, in our [PNG] cultural systems we have that; we're supporting.*

Here, caring is assumed to be based on PNG cultural values inculcated from childhood. PNG is described here as a site of pure relational caring, in implicit opposition to Australian forms of caring. In this account, ethical of care is located in the place of origin, rather than the place of settlement. Australia emerges as a site where customary obligations to elderly kin can be forgotten and, to an extent, abandoned.

For many of respondents, the morality of their caring practices derives from the idea of a persisting PNG culture of support, compassion and solidarity among kin, friends and others. Caring, in their view, is fundamentally a *relational* process that requires a substantial investment of time, labour and, material resources, more easily met with support from a wider community of care.

4.2 Intergenerational debt

A key component of caring for the elderly is debt that persists across generations. It extends temporarily into the relationship between the living and the dead and generates subtle engagements with the presence and absence of people involved in that debt relationship. The following statement by one of our research participants, Maria, aged 57, provides an example of how such debt is understood among Papua New Guineans:

> *It's our custom. We always do good to our grandmother. Because of our grandmother our mother was born... It's through their breast milk we were fed and we grew up. So, we have to … pay our grandmother's milk.*

Care is presented as derived from intergenerational indebtedness conceptualised, in this account, as the shared substance of breast milk. In exchange for nurturance from grandmother and mother, the carer now feels obliged to feed and look after them. An intergenerational debt requires repayment based on a particular idea of how persons are made from the productive and reproductive labor of kin. There is also the inference that a person is obliged to care for grandparents and parents because carer and cared share in the same substance. In accounts of human life in PNG, relations among persons are predominantly constituted through 'nurture kinship', which is the idea that the relationship of kinship 'can be produced, reinforced or weakened through postnatal transactions, foremost of which are food exchanges' (Meigs 1989: 36; Henry 2013; Strathern 1988). Looking after the aged is seen as an intergenerational exchange for the labor of care that one's grandparents and parents invested in the younger generation during the course of their lives. For our participants, caring extends beyond an individual's life. After death, bodies and souls continue to need some form of care. Therefore, the intergenerational debt extends beyond the living, to the dead. Contributions to funerals and other demonstrations care and compassion for those in mourning feature strongly in the moral economy of transnational Papua New Guinea households.

4.3 Planning care

The concept of intergenerational debt, as a specifically PNG mode of caring for elders, raises issues about planning for old age in Australia. Many of our participants categorically rejected the idea that 'planning' is a key component of a PNG approach to care and contrasted planning with caring. They understood planning to involve end of life decisions and talk concerning death, whereas PNG caring was about life. Planning talk, if too

explicit, could actually *create* the conditions, such as illness and death, which it was supposed to address. Such talk was marked as profoundly dangerous in that it could involve a kind of self-'cursing'. 'Papua New Guinea culture' or 'custom' is understood to require the suppression of talk about planning for end of life and is thought to Papua New Guineans in Australia from engaging in planning. As Anne, aged in her sixties, with children in both North Queensland and PNG, explained:

> *In most of the Melanesian or PNG customs and traditions and cultures, generally it is taboo to talk about planning for your future, especially your later life… Ageing is part of the process [of life]; it's an accepted process in the Melanesian culture... and automatically, the immediate family is <u>expected</u> to support their ageing parents, or ageing relatives... But generally, you don't talk about it... because it's not the done thing to say, or to talk about; because the moment you start talking about those things, people will say, "Oh, well are you planning to leave us now…?" "Are you going to die soon?" or that sort of thing. So, you're literally putting a curse on yourself … you're advancing your own passing ... that's the belief that's shared by PNG's who live here in Australia...; they don't plan for anything.*
> *But, on the other hand, in terms of caring for the aged, that's an accepted practice! …And the perceptions are very different because, whether you're working in the city or town, or whether you're in the village, helping and caring is an integral part of an on-going process.*

In this account, talk about care arrangements is not marked in the same way as talk about plans for end of life, which is avoided. Helping and caring are a taken-for-granted 'integral part of an on-going process' embedded in daily practice. Participants contrasted their avoidance of talk about future illness and death, with Western models of planning for old age, which often involves considerable open discussion about medical, funerary and burial arrangements. This avoidance of talk about planning enabled some participants to position PNG approaches to care as being more explicitly life enhancing than Western approaches. Practices of linguistic avoidance tend to mark relationships as special or other and likely to result in misfortune, in this case death itself (Stasch 2009). Similarly, avoidance of talk about planning for aging and death among Papua New Guineans contrastively positions Australia as

a place of otherness. This further indicates how the PNG transnational moral economy of care is often constituted in conjunction with images of Australian alterity.

However, the avoidance of talk about planning by Papua New Guineans does not mean that planning does not take place in practice. Plans for later life, we argue, are intrinsic to the life-cycle transactions in which members of transnational households actively engage. Contributing to the transnational moral economy helps secure one's own care in later life and one's ongoing care after death through mortuary rituals. Strategic planning is discoverable in the social actions, exchanges and social relationships of indebtedness that a person develops over their life course. Tensions emerge where these relations of debt and obligation break down.

4.4 Transnational care: intergenerational tensions

The positive value of 'custom' in fostering a domestic moral economy care is expressed by the expectation that kin will provide caring services for the elderly in both Papua New Guinea and Australia. In this moral economy, carers provided by the Australian state and its agencies are often considered 'strangers', who are not ideal carers. Our interviewees position Australian care as inadequate and foreign, or other, when compared to caring in PNG.

Several interviewees expressed concern about the intrusive nature of aged care services in Australia and fear of 'home visits' from 'strangers', such as nurses, occupational therapists or physiotherapists. Some Papua New Guineans, therefore, seek to bring younger kin from PNG to Australia to assist with aged care.

> *So, my Aunty has been down and has been looking after my grandmother – um from Moresby – and my cousin-sister, she came down for a week, and it was almost like a holiday for her. She was at the same time looking after grandma. … There's a lot more of that happening! Because I think, people are a bit scared of – I mean you have everything provided here, but it's not the same! …The cultural aspect.*

Others expressed concern about potential confinement in aged care facilities:

I'd prefer my own children look after me. I wouldn't want to be in a home. I think I would feel more comfortable, and I know they would do a good job, because they're all prepared for it. And we do that naturally; it just happens, you know. They'd be really upset if I decide that I want to go to a home.

In relation to her plans for aged care, Anne, aged in her late sixties, stated that as her Australian-born grandchildren were unlikely to care for her, given their 'Australian ways', she was hoping to be able to get an Australian visa for a niece, who had grown up in a village in PNG, to come to Cairns to care for her. Other participants hoped they could return in their old age to Papua New Guinea, where they felt confident someone would look after them. They seek to return 'home' to a moral economy of care that they fear will be increasingly hard to find Australia. As Francis, a successful businessmen, aged in his late forties reflected:

For me it would be best to be back in the village. Cause that's where I was brought up and that's home for me. So, it's the comfort you will enjoy staying with your relatives and extended family...You'd feel like a foreigner to be in a care home in Australia; you don't belong to Australia...Maybe the next generation, yeah them, but not in our time. It's too early for us. We still feel that attachment and connection to our village way of life because that's where we are brought up…Yeah, our plan is to retire and go back to the village; so, our retirement home is in the village because that's where we belong.

Describing how she would be cared for back home in the village in comparison to confinement in an aged care home in Australia, another participant, Matilda, also aged in her forties, commented:

I'd rather be back in the village because…it's not free here. You've got rules and regulations to do this and to do that here, whereas in the village I can do what I want till I fall dead (chuckles)… the main thing, you have someone around all the time and it's free. Here you have to pay for the looking after…And I think the other thing is that in the village its more open…whereas here you are going to be enclosed in an area where in a day you have programs going and coming and … you are in that little place all the time.

These concerns about the cultural inappropriateness of care they might receive in the Australian aged care system are amplified by anxieties among some of our participants over the apparent lack of commitment of the younger generation to appropriately care for their

elders. Caring for the elderly competes with priorities and responsibilities of living in contemporary Australia. Wayne, who was concerned about his elderly uncle, commented:

> *Yeah, well, he is kind of a distant uncle of mine, you know. His son-in-law brought him to Australia. The son-in-law passed away, now he lives with his daughters and grandchildren… Even from his own, what's the name, pension, he can manage well… he's probably saved little bit of money too. And I think what I've seen is, family members are more interested now to sort of benefit from him, more than anything else … now the grandchildren are totally Australian! They got no culture, no nothing, no mindset! He is just another guy around there; a neighbour more or less you know. They might call him names [father, grandfather], but that's just names. He is not anybody with a Papua New Guinean feeling to them.*
> *Interviewer: Can you explain what you mean by Papua New Guinean feeling? Like, the Papua New Guineans are relative to a certain degree. The Papua New Guineans got a feeling of a relative, comes with obligations, responsibilities. When we call – identify a person as a relative, you know, while there are certain things you can expect, a relative can provide for another, can provide security, safety. For Australian mindset, it's just a name! If the relative is "John", he's just "John", there is nothing else to it. That's what I mean…*

This participant points to the collapse of kinship-based relationality among the younger generation. He does so by commenting on what it means to be kin or, as he puts it a 'relative'. He argues that in Australia, being a relative does not bring with it all the obligations and responsibilities that being a relative in PNG brings. In Australia, relational terms (such as father) may be used but they are just names and fundamentally don't signify responsibilities. Australia is positioned here as creating non-relational individuals and, as a result, causing PNG values and practices to disintegrate. This participant palpably expresses exasperation with the younger generation, who he claims has become 'totally Australian!'

Several other participants similarly claimed that the younger generation of Papua New Guineans rely less on kinship, reciprocity and custom than their parents and that they strongly assert an individualistic orientation. The world of the younger generation was seen to be defined by their ambitions for improved economic status, which results in the establishment of 'an inwardly focused household and the more individualistic orientation associated with it' (Petersen and Taylor 2006:107). Like Indigenous Australians, some Papua New Guineans see

this individualistic orientation 'as a threat, not just to family commitments, but to distinctive ways of life' (Petersen and Taylor 2006: 107). Thus, families can appear divided. As a respondent Justin, currently applying for his Australian citizenship, aged 50, noted, 'There are two different worlds that exist in the same house'.

In contrast, because of their experience of living in Australia, other participants appear to have abandoned representations of PNG caring as intrinsically linked to intergenerational debt. They expressed a desire not to burden their children, particularly their daughters, with care responsibilities. The gendered nature of care work means that everyday bodily care for elders is usually undertaken by women. Opportunities in Australia for employment outside of the domestic realm make it difficult for women to provide such care. While the state subsidy of aged care in Australia potentially frees the younger generation, at least partially, from these responsibilities, the idea of being cared for by 'strangers' causes anxiety for both them and their elders.

Some participants felt that young Papua New Guineans who appeared disinterested in taking up care responsibilities, cannot be held accountable for this as they were brought up outside PNG. Other participants did not wish to see the next generation burdened with moral responsibilities for care that are not easily enacted, given the circumstances of daily life in Australia. For example, Perry, who has lived in Cairns for more than 15 years, commented:

> *Ah well the situation in Australia is a little bit different, well to me, mainly because I can't (expect them to) think the same way as I thought towards my father and mother. The situation here is completely different…I mean we are on social security so you are not going to be looking forward to being looked after by your sons; maybe the odd thing here or there but that's as far as it goes…We never expect our kids to think, you know, the way we did when we grew up - like oh we have to look after…mum and dad because they looked after us. That is not the case because here in Australia you've got to live and it's expensive. You have your own life to live… so our expectations for the kids is not like what we used to think when we were back home.*

In spite of his own continuing immersion in life in PNG and his ready acceptance of responsibilities there, this participant felt that he should protect his children in Australia from these cultural expectations. He had thought about what his children should do after he passed away and, rather than avoiding the topic, he had decided to share his plans with them:

> *Although there would be huge pressure from home for my body to be taken back…I have told the kids that if anything does happen, I will just get buried here, because there is a lot of pressure back home…that the kids will face if I was to be taken back and buried there.*

Another participant Elizabeth, aged 48, who works professionally in both PNG and Australia responded similarly. She understood that her children might not be able to assume the caring role expected of them, but still hoped that they would do so. She explained:

> *We have given them the opportunity to see our traditional way of doing things, our assumed responsibility and we have also given them the opportunity to see the Western side so…we leave it to them to decide…It's not an expectation; well I guess we would like them to do so. It is up to them. So yes, there is an expectation but it is not like if you were back in the village style, then it's more, it's more expected that the children will look after their parents. It's not as strong expectation with our kids.*

Nevertheless, our interviews indicate that people do continue actively to try to instil what they see as PNG cultural values in their Australian-born children and if their own children do not live up to expectations, then they hope that there will be others in the transnational PNG community, who will help with their aged care. As one participant observed, 'I expect my son to help me, or, you know, perhaps, my close friends, their children might help me…one way or another'.

A consequence of participants explicitly excusing their offspring from obligations to enact PNG care practices is that they seek to ensure their future care by transacting more heavily in the transnational moral economy. One of our participants, Charlene, is a widow with five adult children. She felt she could not rely on her children to care for her, given their obligations to their careers and families in Australia. In response, she invests regularly in the

transnational economy by sending cash contributions to her kin in PNG, in particular her siblings. She expects that one of her nieces will come to Australia and care for her. This example suggests that transnational households may be increasingly important to the provision of care in contexts where the younger generation is no longer able to provide such care.

5. Conclusions: Caring across Time and Place

This study, focusing on PNG households in north Australia, has explored some of the temporal and spatial dynamics that inform the PNG community's representations and practices of care. Our approach has built on Sykes' (2018) account of PNG households in Cairns. She argues that PNG transnational households emerge in the context of the threat of estrangement from traditional clan land. While estrangement from land is an important consideration, we have emphasised the crucial role that a moral economy of care plays in the constitution of the transnational household. Many first generation members of such households are strongly committed to PNG ways of relational caring for the elderly. Having to rely on aged care services provided by 'strangers', whether by state or non-state agents, and potential confinement in an aged care facility, is something that many participants hoped to avoid through their lifetime contributions to the creation of transnational households.

Intergenerational relations are key to the continuity of the flourishing transnational economy of care involving these households. They are also a key driver of the transformation of social relations of care. Explanations of these changes by most participants relied on radical contrasts between Australian and PNG values and practices. The moral virtue of caring is structured by these contrasts making it difficult to construe care as simply the presence of positive sociality involving practices of reciprocity, mutuality and solidarity. In these debates, the sociality of caring is combined with acute senses of estrangement from both PNG and Australia.

The complex memories and shifting expectations of participants in our study concerning their past and future obligations to look after the elderly were framed in terms of a broader narrative of the tension between the fragmentation and coherence of the transnational moral economy of care. Our focus on this tension has enabled us to understand the transnational household as a historically contingent formation that emerges in specific response to the uncertainty of future care. Transnational households are dynamically defined and transformed in terms of tensions central to their very operation.

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