



HARVESTING GOLD FROM NEIGHBORS' GOLDEN YEARS:
A CASE STUDY OF INTERNATIONAL RETIREMENT
MIGRATION IN TAGAYTAY CITY, PHILIPPINES

BY

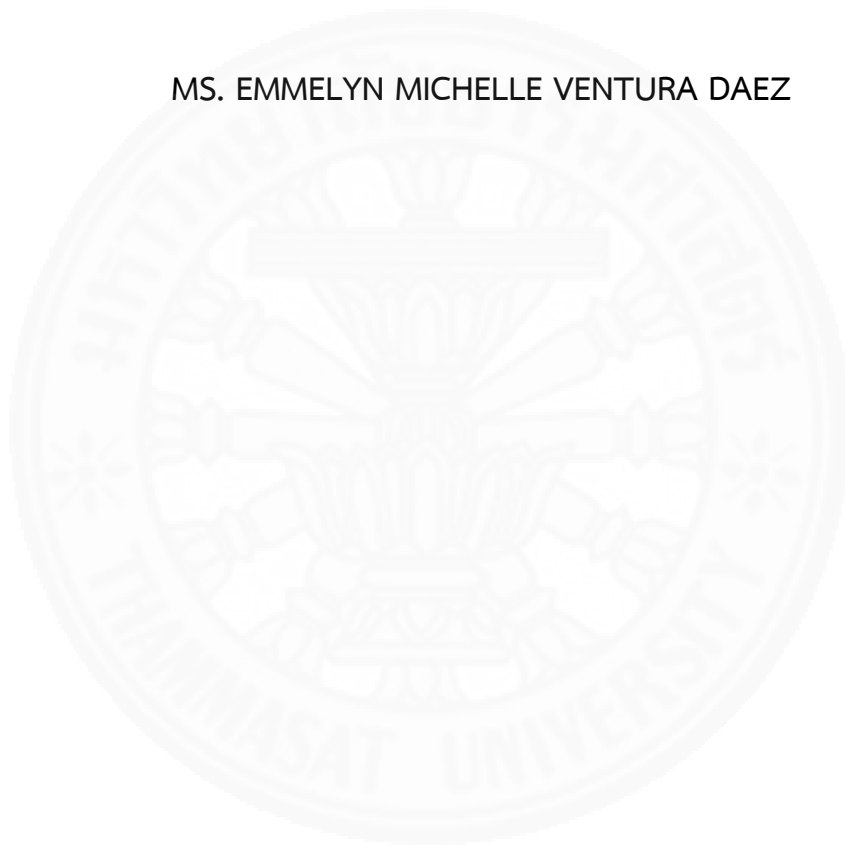
MS. EMMELYN MICHELLE VENTURA DAEZ

A THESIS SUBMITTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS
FOR THE DEGREE OF MASTER OF ARTS (ASIA-PACIFIC STUDIES)
THAMMASAT INSTITUTE OF AREA STUDIES
THAMMASAT UNIVERSITY
ACADEMIC YEAR 2019
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ENTITLED

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was approved as partial fulfillment of the requirements for
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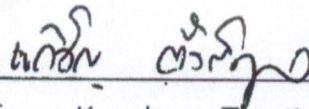
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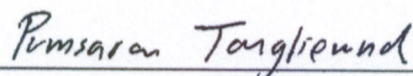
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ABSTRACT

This paper aims to explore how international retirement migration to the Philippines creates employment opportunities in the healthcare industry. The significance of this study lies on the fact that while the majority of Filipinos could not picture the country ever becoming a destination for foreign nationalities with unemployment, poverty, and poor infrastructure as some of the main drivers to emigrate, the same reasons could make good pull factors for a certain market. In particular, opportunities in international retirement migration could be explored--tapping retirees who want lower prices, cheaper healthcare, and abundant labor supply. With neighboring countries' rising cost of living and less children in the household to share the responsibility of looking after their elderly, this paper argues that the Philippines stands to benefit from the economic opportunity that may come from the ageing population of more developed economies.

Qualitative in nature, this paper looks at facilitators and actors at the structural and agency levels. Tagaytay City is purposely selected for this case study as it is one of the most popular tourist destinations in the country and is increasingly becoming known as a retirement destination. With foreign retirees instead of Filipino health care workers leaving the country to work abroad coming to the Philippines,

this could be a game changer for Filipino medical and allied field professionals considering the employment opportunities that may come about in the healthcare sector being a viable alternative that locals could turn to, to stay with their families in their homeland and still make a living.

Keywords: Ageing Population, International Retirement Migration, Employment Creation



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TABLE OF CONTENTS

	Page
ABSTRACT	(1)
ACKNOWLEDGEMENTS	(3)
TABLE OF CONTENTS	(4)
LIST OF TABLES	(8)
LIST OF FIGURES	(9)
LIST OF ABBREVIATIONS	(10)
CHAPTER 1 INTRODUCTION	1
1.1 Background of the Study	1
1.2 Research Objectives	3
1.3 Research Questions	3
1.4 Research Scope and Limitations	4
1.5 Thesis Statement	4
CHAPTER 2 REVIEW OF LITERATURE	6
2.1 Introduction	6
2.2 The Ageing Population: Challenges and Opportunities	6
2.3 The Rise of International Retirement Migration	8
2.4 The New Trend of International Retirement Migration	10
2.4.1 Moving from Developed to Less Developed Economies	10

2.4.1.1 International Retirement Migration in Southeast Asia	12
2.5 Concept and Theory	13
2.5.1 Demand and Supply: Learning from Medical Tourism	13
2.5.2 Human Capital Theory	15
2.6 Building the Philippines' Retirement Industry	17
2.6.1 Elderly Homes in the Philippines	17
2.6.2 The Influx of International Retirees to the Philippines	18
CHAPTER 3 RESEARCH METHODOLOGY	23
3.1 Introduction	23
3.2 Data Sources	23
3.2.1 Primary Data	23
3.2.2 Secondary Data	23
3.3 Scope and Limitations	23
3.4 Ethical Considerations	25
3.5 Data Analysis	25
3.6 Research Framework	25
CHAPTER 4 FINDINGS AND DISCUSSION	27
4.1 Structural Level	27
4.1.1 National Government Agency	27
4.1.1.1 The Philippine Retirement Industry Over the Years	27
4.1.1.2 Advancing the Special Resident Retiree Visa (SRRV)	28
4.1.2 Local Government Unit of Tagaytay City	32
4.1.2.1 The Retirement Industry in Tagaytay City	33
4.1.2.2 Benefits of Tagaytay City Locals	35
4.2 Agency Level	36
4.2.1 Retirees	36
4.2.1.1 Considerations	36

	(6)
4.2.1.2 Tagaytay City as Destination	38
4.2.1.3 Summary	39
4.2.2 Private Sector	39
4.2.2.1 Retirement Homes in Tagaytay City	40
4.2.3 Medical and Allied Care Professionals	42
4.2.3.1 Local-based Workers	42
(1) Costs and Benefits	43
(2) Training and Development	43
(3) Education and Advancement	44
(4) Local Experience as Springboard	45
4.2.3.2 Overseas-based Workers	45
(1) In Search of Better Employment Opportunities	45
(2) Opportunity Costs	45
(3) Direct Costs	46
(4) Training and Experience	47
(5) Education and Advancement	48
(6) Benefits and Challenges	48
(7) The Lure of Greener Pastures	49
4.3 Summary of Key Findings and Discussion	50
CHAPTER 5 CONCLUSION AND RECOMMENDATIONS	53
5.1 Conclusion	53
5.2 Recommendations	55
5.2.1 Structural Level	55
5.2.2 Agency Level	55
5.2.3 Recommendations for Future Research	57
REFERENCES	58

APPENDICES

APPENDIX A GUIDE QUESTIONS_NATIONAL GOVERNMENT AGENCY	63
APPENDIX B GUIDE QUESTIONS_LOCAL GOVERNMENT UNIT	64
APPENDIX C GUIDE QUESTIONS_RETIREES	65
APPENDIX D GUIDE QUESTIONS_LOCAL WORKERS	66
APPENDIX E GUIDE QUESTIONS_OVERSEAS WORKERS	67

BIOGRAPHY	68
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LIST OF TABLES

Tables	Page
4.1 Distribution of Active Retirees Per Region	32
4.2 Categories of Care Provisions	41



LIST OF FIGURES

Figures	Page
2.1 Medical Tourism Industry	15
2.2 Human Capital Theory	16
3.1 Research Framework	26
4.1 Remittance of PRA Dividends	28
4.2 SRRV Product Line	29
4.3 SRRV Revenue and Enrollment	31
4.4 The PRA RADAR Index	37
5.1 Findings: Structural Level	53
5.2 Findings: Agency Level	54
5.3 Recommendations on the Flow of Support and Resources	56

LIST OF ABBREVIATIONS

Symbols/Abbreviations	Terms
PRA	Philippine Retirement Authority
ASEAN	Association of Southeast Asian Nations
DOLE	Department of Labor and Employment
WWII	World War II
NCD	Non-Communicable Diseases
SRRV	Special Resident Retiree Visa
METJACK	Middle East, Europe, Taiwan, Japan, America, China, Korea
NGO	Non-Governmental Organization
DOT	Department of Tourism
MM2H	Malaysia My Second Home
BOI	Board of Investments
PhilHealth	Philippine Health Insurance Commission
CALABARZON	Cavite, Laguna, Batangas, Rizal, Quezon
SSS	Social Security System
GSIS	Government Service Insurance System
PDEA	Philippine Drug Enforcement Agency
DSWD	Department of Social Welfare and Development
CSWD	City Social Welfare and Development
PWD	Persons with Disabilities
ADL	Activities of Daily Living
COPD	Chronic Obstructive Pulmonary Disease
OFW	Overseas Filipino Workers
TESDA	Technical Education and Skills Development Authority
ICU	Intensive Care Unit
RCSI	Royal College of Surgeons in Ireland

CHAPTER 1

INTRODUCTION

1.1 Background of the Study

In a 2015 BBC article entitled *The Country Training its People to Leave*, Stephen Sackur attempts to paint a picture of the situation in the Philippines and its widespread culture of emigration where moving abroad is common, encouraged, and seen as an opportunity to live a better life. Accordingly, international labor migration has been a major feature of the development plan of the Philippines for the past decades and a sizeable number of Filipinos emigrated in the quest of temporary work or permanent settlement elsewhere.

Most Filipinos could not picture the country ever becoming a destination for other nationalities because of unemployment, poverty, political instability, security, and poor infrastructure as some of the main drivers for Filipinos to leave home. In this regard, Philippine studies, data, and policy thrusts have been fixated on emigration of Filipinos and employment overseas while on the other hand, there seems to be a dearth of literature and discussion on inward-bound international migration to the Philippines.

“We have no choice, said Evelyn, an elfin figure no more than 5 feet tall. I have a baby at home but no way to support him. The wages I earn in Kuwait will mean my mother can raise him.”

(Sackur, 2015, in *The Country Training People to Leave*)

In the recent years, however, opportunities in international retirement migration to the Philippines is something that is being explored and the government has since then been trying to tap retirees who have the means to migrate to a tropical destination coupled with relatively lower prices and cost of living--- enticing them with undemanding barriers in terms of visa deposits and age hurdles (Philippine Retirement Authority).

The Philippines' neighboring countries in the Association of Southeast Asian Nations (ASEAN) region are doing the same such as Thailand and Malaysia. With significantly higher pensions and greater bank balances demand, plus an age minimum set at around fifty though, the Philippines might have a chance at being more preferred over the others.

Though the numbers are still relatively small, Filipino authorities note that arrivals from China, Korea, Taiwan and Japan are the most numerous (Philippine Retirement Authority (PRA), 2015) —as they escape their more expensive economies that continue to gobble up their retirement savings and offer limited opportunities to further build and grow their pension (Morales, 2016). Topping these four is Japan, which has a notoriously high number of people aged sixty-five or older. Literature suggest that many of them have already chosen to pursue retirement overseas in order to benefit from cheaper health care and still experience a relatively better quality of life.

Morales (2016) noted that at current levels of foreigners enrolled into the Philippine retirement plan, these inward-bound international migrants is still minimal in a country of almost a hundred million. In fact, the Philippine Retirement Authority (PRA), which is employing more staff to expand, aims to double this count of international retirees in the Philippines to about a hundred thousand by 2020. According to the Philippine Retirement Authority (PRA), it is the ambulatory and fun-loving retirees that that is being targeted at present. In line with what the Philippine Retirement Authority (PRA) data illustrated, one third of these international retirees in the country belonged to the still active forty to forty-nine-year-old bracket (Morales, 2016).

It is known that the Philippines is not the haven of holistic elderly care, which is more likely to be found in the likes of New Zealand and Scandinavian countries. However, for the ageing population with their elderly having retirement savings that are insufficient and being subjected in environments with continuous rise in terms of cost of living, expensive housing, and less children in households to share the responsibility of looking after them, as is the case in most developed economies, the Philippines could be a retirement haven and this very same ageing phenomenon

could lead to new market opportunities for various sectors in the country. These could come in the form of economic opportunities in dedicated and specialist commodities for the elderly, construction opportunities building retirement homes and facilities, and most presumably, healthcare will be one of the sectors that would benefit in this inward-bound international migration since it is a general concern that comes with old age. Job opportunities in nursing homes and assisted living accommodations will likely follow. With all these in mind, could this indeed be a viable alternative for the likes of Evelyn who feel like they have no choice but to leave the country to earn a decent living and support their families?

1.2 Research Objectives

The overarching objective of this paper is to describe the employment opportunities created by international retirement migration to the Philippines, particularly for Filipino medical and allied field professionals in elderly care. Firstly, demographic developments and trends will be reviewed. Secondly, the prevalence of international retirement migration from developed to less developed economies will be examined, and finally, employment opportunities creation with regard to the aforementioned trend particularly in Tagaytay City, Philippines will be analyzed.

1.3 Research Questions

The core question that this study aims to answer is:

- How does international retirement migration impact the employment opportunities of Filipino medical and allied field professionals?

With which two sub-questions follow:

- How has international retirement migration developed over the years in Tagaytay City?
- How have local Filipino health care workers and firms adopted to this phenomenon?

1.4 Research Scope and Limitations

A case study approach for Tagaytay is purposely selected as it is one of the most popular tourist destinations in the Philippines and is increasingly becoming known as a retirement destination. Increasing presence of other nationalities can be observed in the City and many are known to have lived there for the past several years.

With time and resource constraints as major obstacles, the findings of this study may or may not be generalized as it may contain less conclusive data than those of other researchers who could spend time with the subjects and cover more ground and respondents for longer periods.

Tagaytay is one of the most popular tourist destinations in the Philippines and is increasingly becoming known as a retirement destination. In fact, increasing presence of other nationalities can be felt in the City and many are known to have lived there for the past several years.

The city is situated over a ridge that runs along the north side of Taal Lake and the Taal Volcano. Elevated at around 2,100 feet, the air is fresh and cool, coupled with a climate that is comfortable and mild. Known for having a temperature that is comfortable year-round, Tagaytay is one of the few places in the country that negates the necessity for both heat and air conditioning.

Though the standard of living is a tad bit higher than in other Philippine cities and provinces, tourism is well-promoted in the area and the City enjoys prosperous economy as a consequence. With its remarkable scenery, comfortable climate, and proximity to the Metro Manila, the city makes an excellent choice for overseas living and could thus be ideal for this study.

1.5 Thesis Statement

The Philippines stands to benefit from the economic opportunity that comes from the ageing phenomenon in more developed economies. With foreign retirees instead of Filipino health care workers leaving the country to work abroad

coming to the Philippines, this could be a game changer for Filipino medical and allied field professionals with employment opportunities in the healthcare sector being a viable alternative that locals could turn to, to stay with their families in their homeland and still make a living.



CHAPTER 2

REVIEW OF LITERATURE

2.1 Introduction

The review of related literature is categorized into five themes: (1) the ageing population: challenges and opportunities; (2) the rise of international retirement migration; (3) the new trend of international retirement migration; (4) demand and supply: learning from theories and concepts on medical tourism and human capital; and (5) building the Philippines' retirement industry.

2.2 The Ageing Population: Challenges and Opportunities

The ageing population is one of the issues that is recognized throughout the world—with its increasing importance and important implications to healthcare and other social policy areas (Lloyd-Sherlock, 2000). The segment of the population aged sixty years old and above is projected to increase in practically every nation globally over the years leading to year 2080 (Marešová et al., 2015). The number of older people is projected to reach double the number of children in several developed countries even. According to the United Nations Department of Economic and Social Affairs, Population Division (2017), the global population reached 962 million aged 60 years or over in 2017. This number is more than double of the 382 million in 1980 and is projected to reach nearly 2.1 billion—which is more than twice as large again by the year 2050.

Moreover, this phenomenon will impact different facets including but not limited to health, housing, composition of families, labor markets, economic growth, and migration. Declining birth rates and increased life expectancy have likewise caused many to worry. Coupled with medical advances and information that enable and empower people to live lengthier lives and stay healthy, healthcare and health awareness have both improved over time. Another contributing factor relates to the number of the so-called baby boomers or those who were born after the World War

Two (WWII). This generation is causing the upsurge in numbers, as they are now in their age of retirement (European Commission, 2006).

As with all things, these age structure changes bring forth both undesirable impacts and new opportunities. Among frequently noted negative economic impacts relate to the transformations of the labor force, diseases that are associated with ageing, and the resulting higher dependency on care and support (Pettinger, 2013; Jowit, 2013; WHO, 2012 as cited in Marešová et al., 2015). Likewise, economic prosperity crucially depends on the workforce. As people reach their retirement age, their participation in the labor force is more likely to decrease. Furthermore, as the elderly increasingly and heavily depend on their savings to fund their continuous spending until they expire, their assets are also likely to decrease over time.

The same also signals the beginning of a tremendous feat, brought about by non-communicable diseases (NCDs). According to literature, NCDs range from a substantial to a prevailing cause of death and disability, regardless where in the world, in both high and low-income countries, and across all age groups, both old and non-old. These are the likes of cardiovascular ailments, cancer, diabetes, and chronic respiratory diseases. As cited in Marešová et al. (2015), Bloom, Boersch-Supan, McGee and Seike (2011) remarked that these all share four modifiable risk factors:

“...tobacco use, physical inactivity, unhealthy diets, and the harmful use of alcohol and one non-modifiable risk factor which is age.”

(Marešová et al., 2015)

In line with this, a large portion of government budgets gets soaked up by public expenditure on health. Literature suggest that the age group of over sixty-five accounts for forty to fifty per cent of spending in healthcare and their per capita healthcare costs account to up to five times higher than for those under sixty-five. The International Labor Organization (2009) acknowledges this and has noted that as ageing in the OECD countries accelerate, public expenditure could rise.

On the flipside, despite the challenges it brings about, population ageing could also open up and provide new market opportunities. As Marešová et al. (2015) put it, the prospective of healthcare investment lies in the opportunities to promote and increase the mobility of the ageing population. Without this increase in mobility, there could be less opportunities to work even if medical science enables people to live longer.

Meanwhile, if people live longer and likewise have the ability to remain active physically, the unfavorable repercussions will be less (Pettengell, 2008 as cited in Marešová et al., 2015). In their 60s, retirees remain to be active. In their 70s, they tend to slowdown. In their 80s, they eventually become more needy. In this regard, for every group age, marketing niches vehemently exist. Moreover, several opportunities open to different segments—from creation and sales of specialist products for the elderly; construction of real estate, retirement, and care homes; tourism; to job opportunities in elderly homes and accommodations offering assisted living (Geogonline, 2013 as cited in Marešová et al., 2015).

2.3 The Rise of International Retirement Migration

Over the years, advances in the information, communication, and transportation technologies have resulted to an increasingly interconnected and globalized and interconnected environment. This has drastically changed the world—impacting everyday life as people know it profoundly. People now have the capability to be in a lot of places at once through instantaneous virtual contact and acquire and share information in a flick of a finger, and a lot of other things that would have been unimaginable in the past.

Furthermore, infrastructures that enable and ease travel have improved and airline tickets that were unreachable to the majority in the past have become widely affordable to the general populace. Subsequently, travels and movement flows between countries are no longer as unusual and reserved to the elite. People all over the world are now capable to be present in different social locations concurrently. The elderly is not exempted from these developments and in this

regard, the same increasing trend in widespread mobility even in retirement and old age has been on the rise (Horn and Schweppe, 2017).

Coined as international retirement migration, this movement is prevalent in older people from what Horn and Schweppe (2017) refer to as the Global North to countries with sunshine, warmer climates, extensive leisure alternatives, relatively cheaper living costs and appealing landscapes. It was in the 1990s that research in the field emerged—primarily focusing on the so-called lifestyle migration that was particularly prevalent among retirees from Northern Europe, particularly to Spain. These studies highlight that international retirement migration is often not migration in the classical sense (Nokielski 2005 as cited in Horn and Schweppe, 2017) but rather,

“... older people do not relocate their residence permanently abroad, but rather, tend to move frequently between their countries of destination and origin, develop transnational lifestyles and identities, engage in transnational social, cultural and political activities, and maintain relationships with friends and family members in their earlier communities.”

(Gustafson, 2008; O'Reilly, 2000, as cited in Horn and Schweppe, 2017)

Eventually, numbers of elderly migrants or long-term tourists who temporarily or permanently move to another place of residence that better meets their needs or enables them to realize their desired lifestyle increased and has gotten growing attention. The influx of older people who are usually no longer economically active can significantly influence the economies and societies of the destination areas. Much like touristic activities, the immigration of older and generally relatively wealthy population groups is seen as an efficient form of foreign direct investment that makes an important contribution to the development of the destination country or region (Dixon et al. 2006 as cited in Husa et al., 2014).

Immigrants, for instance, rent or buy houses, consume goods and services, and thereby increase the interest of other foreign investors in the target region. However, there can also be negative impacts on the destination area such as

rising housing prices, a higher cost of living, and aggravated social tension between newcomers and natives in certain areas with booming retirement migration.

As Husa et al. (2014) pointed out, some of the traditional hotspots for migration of the elderly were migration flows in the United States and Canada from northern parts of the subcontinent to warmer climate areas of the South on the one hand; and north-south retirement migration within Europe from cold northern countries to the Mediterranean in the south of the continent on the other. At the global level, however, a new trend has developed in the recent years and that is—a significant increase in retirement migration from Western industrialized countries to less developed target nations. Two distinct regions can be discerned: the retirement migration from North America to the Caribbean and some countries of Central America and a growing influx of retirement migrants from Global North to some countries of Southeast Asia (Husa et al., 2014).

2.4 The New Trend of International Retirement Migration

In the recent years, variations in terms of international retiree destinations have emerged. In contrast to the former typology and flow of lifestyle migration, the core characteristic of the new mobility trends conveys the decision to move as the elderly's way to relieve themselves of pressures and problems—including financial limitations due to low pensions, diminishing retirement savings, social anxieties, and elderly care requirements. (Bender et al., 2014; Horn and Schweppe, 2017; Toyota and Xiang, 2012).

2.4.1 Moving from Developed to Less Developed Economies

As presented in the fore sections, research and literature on international retirement migration have been fixated on lifestyle migration in the context of amenity-seeking retirees. On the lookout for a better quality of life, retirees from more developed economies relocate to destinations that offer them comfortable climatic conditions, appealing sceneries, and a variety of recreational activities (Nokielski, 2005 as cited in Horn and Schweppe, 2017). Those who opt for

this typology of migration are often couples with incomes that are considered to be above-average, as suggested by Horn and Schweppe (2017). Benson and O'Reilly (2009) portrayed these retirees as comparatively wealthier individuals migrating in search of a better way of life.

Horn and Schweppe (2017), however, conjectures that over time, variations and divergence of destinations for international retirement migration have emerged. New trends and pivotal points as cited in their work can be observed such as those in Africa (Chege, 2014), Latin America (Hayes, 2015; Lardiés-Bosque et al., 2016) and Southeast Asia (Husa et al., 2014; Ono, 2008, 2014; Toyota, 2006; Wong and Musa, 2015).

Contrariwise to the prevalent lifestyle migration, the more recent migration behavior and mobility of older people characterizes and communicates the underlying issues and challenges they face. These, as may be expected, come in the form of financial problems due to limited and decreasing value of pensions, depleting savings, as well as social separation and eventual long-term care requirements (Bender et al., 2014; Horn and Schweppe, 2017; Toyota and Xiang, 2012).

In this regard, countries with less developed economies than their Global Northern counterparts increasingly became preferred or even ideal retirement destinations. On one hand, as this phenomenon gained prevalence in the region of Southeast Asia (Toyota and Xiang, 2012), the likes of Thailand, Malaysia, and the Philippines saw the opportunity and established government programs to foster and cater to retirement migration—these come in the form of price and tax benefits through residence or visa permits for the targeted retiree migrants.

On the other hand, in response to the demands and necessities that come with old age, establishment of facilities that cater to long-term care were likewise established. In particular, Bender et al. (2017) studied the socio-political context of this phenomenon, the care deficit in Austria, Germany and Switzerland, and how this led to the development of German speaking communities and facilities in Southeast Asia and Eastern European.

Furthermore, in analyzing the circumstances and practices that thrusted the development and formation of these long-term care facilities, Bender et al. (2017) highlight the focal role played by the operators of the facilities as transnational actors who acts as mediators between the countries of origin and destination and ultimately, between the different groups of actors such as the residents, patients, staff, relatives, and the rest of the neighborhood involved in the facilities' activities. Despite trans-border processes at the socio-structural level being important frameworks for the rise and development of such facilities, they are not sufficient to explain the specific configurations at the local level (Bender et al., 2017). With target groups coming from diverse and different markets from the destination's, facilities exhibit distinctive features and thoughtful ways of mediation and interconnection—both of which are found critical to successfully lure their target markets in.

2.4.1.1 International Retirement Migration in Southeast Asia

Within Southeast Asia, Thailand, Malaysia, the Philippines, Vietnam and Cambodia have become attractive destinations for long-stay tourists and retirees not only from affluent countries of the Global North but also from neighboring East Asian countries. As aforementioned, the economic importance of this flow is demonstrated by the fact that several governments in the region as well as economic developers have increasingly begun to promote their countries as ideal retirement destinations.

In Malaysia, for example, the country crafted a retiree program in 2002 called *Silver Hair* and eventually launched the so-called *Malaysia My Second Home* (MM2H) initiative in 2006. Thailand likewise established its foreign retiree program, enabling participants to obtain a one-year renewable visa. In the Philippines, a *Special Resident Retiree Visa or the SRRV Program* has also been made available to any foreigner older than thirty-five years. Moreover, the Philippine Retirement Authority (PRA) has introduced a global retiree recruitment initiative called *Plan METJACK*, an acronym for the main source countries or regions i.e. Middle East, Europe, Taiwan, Japan, America, China and Korea.

Vietnamese and Cambodian developers have likewise joined the bandwagon and begun to promote popular tourist destinations in their countries like Na Trang in Vietnam and Sihanoukville in Cambodia as retirement options. Gorvett (2010 as cited in Husa et al., 2014), however, noted that these countries are generally considered not to be completely ready yet to host larger numbers of foreign retirees since government programs for attracting foreign retirees are still quite lacking.

Zooming in within the Asian region, this retirement migration flow has become prevalent as triggered by the increasing longevity in East Asia (Kim & Thang, 2016). This situation raises the demand for the care of the elderly population, including healthcare workers, pensions, health insurance, and long-term medical care. In this regard, a number of studies focusing on the growing influx of retirement migrants, particularly in the area of Chiang Mai, Thailand (Shibuya, 2008), and to Malaysia (Ono, 2008) were explored.

One recent and significant research to this study is by Toyota and Thang (2017), where they considered how governments, especially those of the destination countries, still perceive retiree migrants in general as high-value consumer markets. Contrariwise, these modern-day international retirees perceive themselves as practical individuals that decide to move to maximize their limited resources and live more efficiently in less developed economies where living costs are lower (Toyota and Thang, 2017). This supports Bender et al. (2017)'s argument that as opposed to the contemporary lifestyle migration, recent international retirement migration developments are often driven by the elderly's problems and constraints, both socially and financially.

2.5 Concept and Theory

2.5.1 Demand and Supply: Learning from Medical Tourism

Just like in medical tourism, international retirement migrants most often than not come from more affluent backgrounds or more developed economies where medical care charges may be high but the means and capability to pay for alternatives is likewise high.

In 2014, Tucki and Cleave reviewed how Individuals have travelled across lands and seas in search of health care since ancient times. In Europe during the nineteenth century, for instance, spa towns were in fashion for the increasing middle-class. These people were willing to travel to these places, enticed by the belief that these waters have health-enhancing abilities. Moving on to the twentieth century, relatively affluent people who have the means to access better facilities and highly trained medical professionals in developed nations travelled all the way from less developed areas of the world. (Tucki and Cleave, 2014).

In retrospect, traveling in search of medical treatment and health care is not a new notion. Nonetheless, the global nature of the movement has evolved over the time with the traditional cross-border medical care industry introducing rapid developments since the late 1990s. Plentiful patients have started exploring and moving to countries such as Thailand, India, and Mexico, among others, in search of medical care that is usually regarded too costly, inadequate, or unobtainable from where they come from. Furthermore, rising globalization, increasing competition, and advancing technologies in information, communication, and transportation have also enabled the exceptional development of cross-border services in health care.

The key features of modern-day medical tourism demonstrate the shift towards patients from more affluent and more developed economies to their less developed counterparts to access health services. This movement of people who travel for treatment could be seen as largely driven by the availability of low-cost treatments and infrastructure, less expensive and affordable flights, and accessibility of readily available information over the internet.

Such developments in the industry have enabled both the public and private sectors in developed and developing nations alike to promote and progress their medical tourism towards a lucrative source of foreign revenue and reserve. As such, Labonte et al. (2013), presented one view or structure of the medical tourism industry which consists of three primary actors:

“(1) patients seeking healthcare outside their country; (2) providers in destination countries willing to offer it; and (3) medical brokers and facilitators linking the first two”

(Labonte et al., 2013)

Moreover, secondary actors likewise play critical roles in the development of the industry. They come in the form of government agencies; marketing organizations in host or destination countries; and health insurers. These agents and actors see the industry as a lucrative revenue source and are often found offering generous subsidies as incentives. These effectively enable lowered costs and minimized complications on a patient's return. In turn, the tourism sectors increasingly partner with the medical providers in destination countries to come up with appealing package deals. Furthermore, information technology and industry conferences and fairs have likewise become significant marketing tools that let the actors and facilitators meet together.

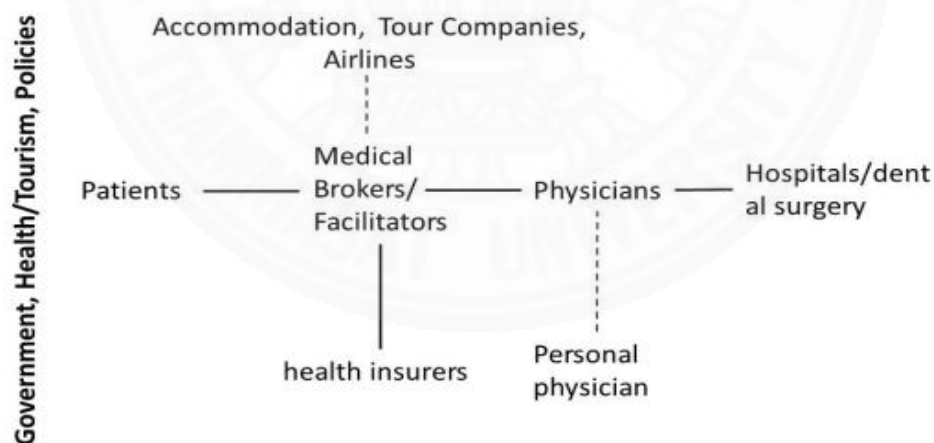


Figure 2.1 Medical Tourism Industry based on Labonte et al. (2013)

2.5.2 Human Capital Theory

Firstly, capital pertains to assets that are expected to generate future revenue or anticipated outcomes. Human capital is thus depicted as personal assets that workers hold or obtain—including both inherent skills and abilities and developed training and acquired education. In this regard, though the reward of

financial gains is hardly the sole motivator to pursue further education, financial concerns are a significant impediment to educational advancement. Graf (2006) examined this in the case of nurses pursuing their baccalaureate degrees in the context of human capital theory. As depicted in figure 2.2, Becker (1993) postulates that workers will pursue educational advancement if the benefits outweigh the costs of getting education.

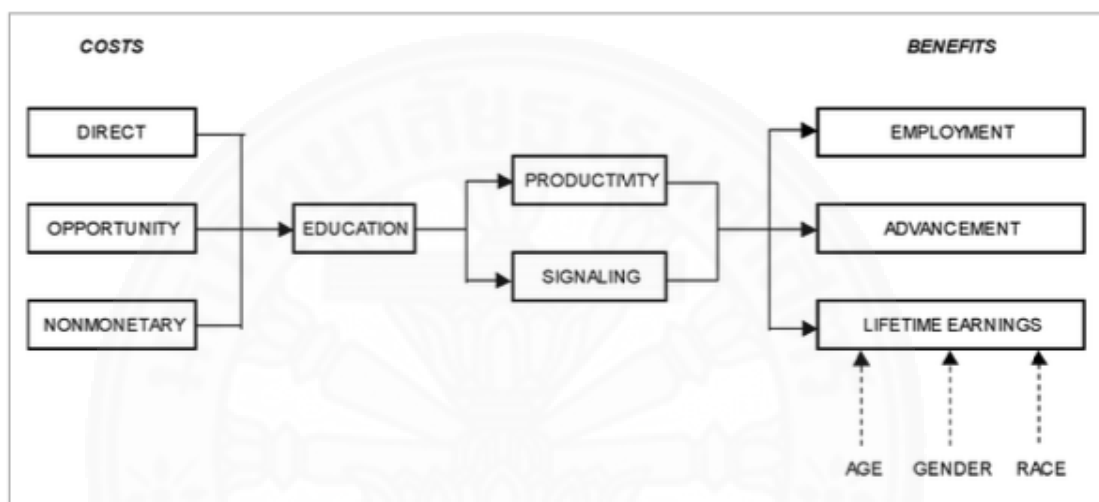


Figure 2.2 Human Capital Theory based on Graf (2006)

Secondly, in this regard, investments in education incur costs such as (1) direct costs in the form of books, tuition fees, and miscellaneous expenses; (2) opportunity costs in the form of reduced earnings from less working hours incurred during years of schooling loss of what could have been a monetary interest on the funds allocated to tuition fee payments; and (3) non-monetary costs that encompass the likes of loss of leisure time which cannot be measured financially but are of value to the worker.

Thirdly, as a return on their investment, acquisition of certain skills or credentials that improve their efficiency and/or simply indicate potential for productivity occur. These become invaluable to employers and customers and in turn, provide the workers with employment, advancement, and lifetime earnings benefits.

Finally, the extent of these benefits is somewhat influenced by personal characteristics such as gender, race, and, most significantly, age (Becker, 1993; Graf, 2006). Human capital theory thus proposes that workers who capitalize in education and trainings are expected to reap financial benefits in future earnings.

2.6 Building the Philippines' Retirement Industry

2.6.1 Elderly Homes in the Philippines

The Philippines is known for its closely-knit family ties with extended family occurrences very much prevalent up to present. In this regard, the thought of sending the elderly members of the family to institutional homes and facilities for long-term care such as nursing and retirement homes comes off as a sensitive topic and receives a negative perception. Giving back to parents and taking care of family members, especially the elderly, have always been imbibed in Filipinos-- believing that taking care of a family member, regardless of their age, is an inherent accountability and should not be outsourced to external institutions. Traditionally, nursing and retirement homes in the country are not usual. Of the established ones, mostly were run by both non-government organizations (NGOs) and government institutions to care for the abandoned and homeless elderly people instead.

The trend in nursing homes is gradually changing though, and this could be attributed to the shifting social dynamics that industrialization and globalization continually brings into the country. As Navallo (2013) observed, it has been rather recent that nursing homes run privately were established to care for the elderly. In addition, only those who have the capacity to pay for the professional geriatric care costs tend to patronize such institutions. For families who do not have the time to take care of their elderly, the idea of enrolling and getting professional care from nursing and retirement homes thus becomes a practical alternative.

Consequently, the Philippine government acknowledge the rising opportunity and has thus created the Philippine Retirement Authority (PRA). The Philippine Retirement Authority (PRA)'s mandate is to gain attraction and provide

assistance to foreign nationals to foster retirement and investment to the Philippines, particularly through land and real estate. Complementarily, the Philippine Retirement Authority (PRA) partners with government efforts via the Department of Tourism in line with promoting the country as a tourist and retirement haven.

In this regard, entry to the Philippines and retirement visa application processes have been made easier to make the country more amenable for prospective international retirees. Moreover, a surge in establishment of retirement institutions and care facilities have been evident in the provinces of Batangas, Cavite, Cebu, Laguna, Pampanga, and Subic-- catering to elderly patients of various nationalities: American, Canadian, Chinese, and Japanese among others (Navallo, 2013) for long-term care.

2.6.2 The Influx of International Retirees to the Philippines

With the inception of the Philippine Retirement Authority (PRA), the Philippines has made it clear that it wants to grow its retirement industry and has thus made it highly accessible for foreigners around the world. Permanent residency is relatively easy to obtain, and it comes with a multitude of incentives ranging from duty-free importation of household belongings to being able to work or own a business. However, during the Duterte administration, fears and apprehensions about the peace and order and the overall security conditions of the country have been raised and the image of the Philippines has been suffering bad press towards the international community. Despite this though, there is still increasing arrival of foreigners (Robles, 2018), mostly from East Asia, who still decide to come and/or visit, either on a permanent or temporary basis.

As expected, Metro Manila is the primarily favored destination considering the infinite business prospects the country center offers. The next ones in line are the areas of Cavite, Baguio, Pampanga and Rizal and this could be attributed to their close proximity to the business centers, comfortable weather conditions, and attractive and more less congested landscapes and setting.

Considering the widespread tight-knit and family-based social norms about care in the region, Asia's conventional practices with care provisions significantly differ from those of the West. The elderly was traditionally taken care of

by their children and this is somehow part of the traditional Asian values that can be observed. This remains to be particularly true in the case of the Philippines. Looking at the local market, while there are relatively more people who are inclined to turn to seek for professional care from nursing homes to look after their elderly, there is still resistance and hesitance owing to the tradition of Filipinos on close family ties that prevent most of them from pushing through and doing so.

A typical household setting in the Philippines looks is an extended one, where senior-aged parents, grandparents, and close relatives normally live with their children, either single or married, primarily for financial support and custody. Sending them to nursing homes and retirement facilities would mean defying the norm and could inflict negative emotions from other family members. Moreover, the affordability of these external services and facilities play a major factor in driving the local market away from such care homes and institutions.

In an interview with Mr. Marc Daubenbuechel, Executive Director of the Retirement and Healthcare Coalition, Abad (2016) quoted him saying:

“...what’s happening in developed countries is that senior citizens are brought usually in a hospital for acute care at a maximum of two weeks, and then they are transferred into a nursing home for long-term care. So, we still need to work on the relationship between the hospital and the nursing home... a nursing home is not a solution; it’s an option. And usually a nursing home is used when there’s no other option anymore.”

(Mr. Marc Daubenbuechel in Abad, 2016)

On another note, however, the case could be different in other parts of the region. Fast industrialization caused transformation of some Asian societies, particularly in the East, and this traditional family values and bond has been weakened. Thus, retirement migration started to appear in the mid 2000s (Kim and Thang, 2016).

In line with this, a noteworthy upsurge in retiree migrants from South Korea seemingly started when *Dong-A Ilbo*, a Korean newspaper, featured a

Korean couple moved to the country in 2005 for their retirement. The newspaper conveyed that the couple, who were in their early 60s, were enjoying a comfortable and satisfactory second life in the Philippines. They have further described their lives in the country as busy and pleasant and have claimed that they plan on staying until they die, going back to visit Korea a couple of times annually to see their kids. With a monthly allowance of two million won or approximately one hundred thousand Philippine pesos, at the time, the couple lived a comfortable life that appealed to many of their countrymen. Consequently, according to the Philippine Retirement Authority (PRA), the number of applications for the Special Resident Retiree Visa (SRRV) from South Korea increased eight-fold from the years 2005 to 2014-- from 1,000 to 8,000 in total, respectively.

The Special Resident Retiree Visa (SRRV), issued by the Philippines Bureau of Immigration, is under the retirement program of the Philippine Retirement Authority (PRA) which is an agency of the Philippines' Department of Tourism. The primary mission of the PRA is to:

"...attract foreign nationals and former Filipino citizens to invest, live, and retire in the country as a means of advancing the socio-economic development of the Philippines and increasing the country's foreign currency reserve".

(Philippine Retirement Authority)

The government means to do all these by offering retirees the best quality of life in an attractive retirement and investment package. Furthermore, the Philippines' Special Resident Retiree Visa (SRRV) is one of the easiest to get, with one of the lowest age requirements in the world at just thirty-five. Only Malaysia's *MM2H* or *Malaysia My Second Home* program, which is a quasi-retirement visa, could be considered easier to obtain since it does not require any age limit.

So far, the Special Resident Retiree Visa (SRRV) program has had great success in attracting new residents with the Philippine Retirement Authority (PRA) reporting to have issued 27,000 Special Resident Retiree Visa (SRRV) so far to

citizens of 107 countries. of those new residents, 38% were Chinese, 27% were Koreans, 10% were Japanese, and 6.5% were North Americans (Henderson, 2018). This increasing reputation of the Philippines as one of the preferred retirement destinations in the world bodes well for the creation of local opportunities that cater to the international market (Department of Labor and Employment (DOLE), 2016).

This huge potential in generating quality jobs and the need to fill up the demand for health and wellness industry occupations must be addressed and Secretary Baldoz of the Department of Labor and Employment (DOLE) acknowledged this-- urging that the Philippine educational system has to attune itself to the demands of the labor market by producing graduates equipped with the right skills and specialization such as geriatric health care.

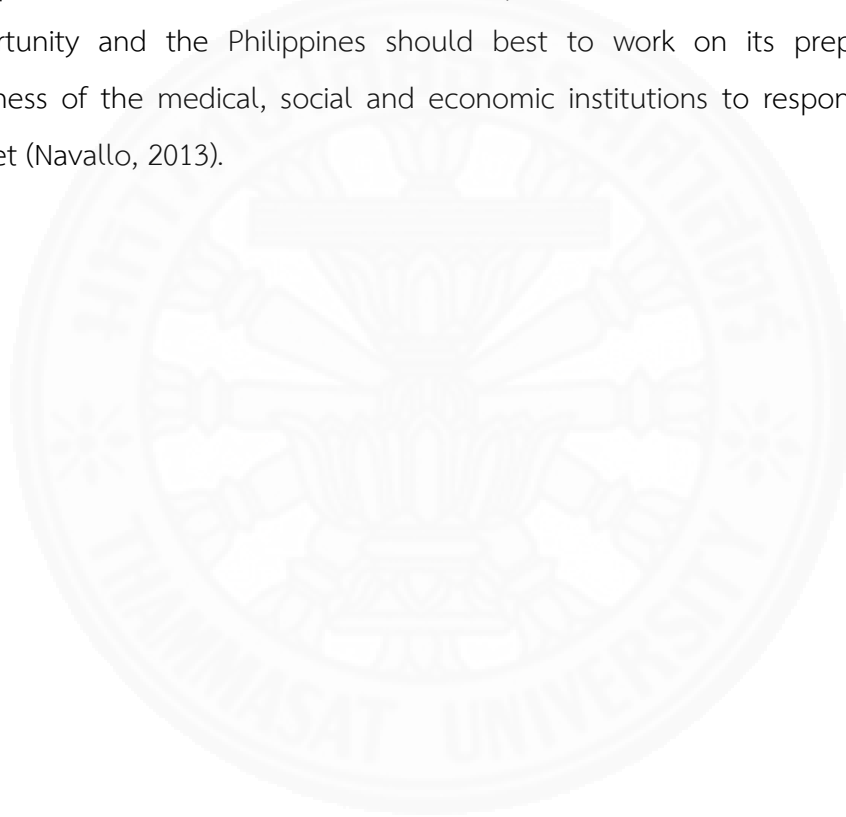
Leading to mutual recognition arrangements, the Department of Labor and Employment (DOLE) spearheads talks with the Japanese on technical cooperation programs have been launched, especially on education and training of Filipino nurses and caregivers using Japanese standards, especially on geriatric care. A similar technical cooperation program is being worked out by Department of Labor and Employment (DOLE) as well with Germany in support of the *Germany-Philippines Triple Win Project* under which Germany sources its healthcare worker needs from the Philippines.

The technical cooperation program, to be worked out with labor, health, education authorities, and private sector hospitals and elderly care institutions, involves the development of policies on ladderized national training certification for caregivers and care workers; conduct of researches and studies on the German labor market; development of curriculum for geriatric care and elective German language training; and setting up of recognized German language centers in the Visayas and Mindanao.

These efforts have come through as in the recent years, the Philippines has seen a number of Japanese elderlies who were coming from Japan to be cared for in nursing homes in the country. In fact, this trend has caused several nursing homes to be established in areas like Cebu, Batangas, Laguna, Tagaytay, Pampanga and Subic by Japanese and Filipino businessmen alike. Because of cheap

medical care cost, availability of health professionals, and a conducive climate, the country is seeing the potential of attracting foreign elderly individuals to be cared for in nursing homes not only at the present, but also over the long run.

This phenomenon could be a game changer following a different perspective-- with foreign retirees instead of Filipino health care workers leaving the country to work abroad coming to the Philippines to avail of the Philippine tourism amenities and its distinct brand of healthcare provided by Filipino medical and allied field professionals and workers. The country stands to benefit from this economic opportunity and the Philippines should best to work on its preparedness and readiness of the medical, social and economic institutions to respond to this new market (Navallo, 2013).



CHAPTER 3

RESEARCH METHODOLOGY

3.1 Introduction

This paper is qualitative in nature and focuses on understanding the rationale, visions, motivations, experiences, and perspectives of the different facets that revolve around the creation of employment opportunities in the context of international retirement migration and elderly care in the Philippines.

3.2 Data Sources

3.2.1 Primary Data

The author conducted participant observation and key interviews of representatives of the Tagaytay City Government, retirement homes, retirees, and Filipino nurses and caregivers based locally and abroad. Informed consent from the retirement home management and interviewees was sought prior to the beginning of the interviews and participant observation. The retirement homes are situated within Tagaytay City, in private and secluded residential areas. Data collection were gathered in July 2019. The interviews were open-ended, and the questions asked were about their rationale, visions, motivations, challenges, experiences, and future plans.

3.2.2 Secondary Data

The secondary data were drawn from published and unpublished sources including Philippine Retirement Authority annual reports, government websites, survey results, press interviews, working papers, journals and articles.

3.3 Scope and Limitations

With the research objective to describe the employment opportunities created by international retirement migration to the Philippines, particularly for Filipino medical and allied field professionals in elderly care, the respondents of this

study include the local government unit represented by the Tagaytay City Government; the government agency represented by the Philippine Retirement Authority; care homes within Tagaytay City; nurses and caregivers in their mid-20s to early 30s working in care homes within the City; and Overseas Filipino Workers (OFWs) in their mid-20s to early 30s engaged in care professions.

With the research conducted being confined within Tagaytay City, the findings of this study may or may not be generalized to the whole of the Philippines and to other cities. Likewise, with the nurses and caregivers in their mid-20s to early 30s who are at the early stages of their professional careers, findings may not be generalized to all care professionals as different age cohorts and career levels could tell a different story and introduce variations in terms of motivations and decisions. Furthermore, with time and resource constraints as major obstacles, it may contain less conclusive data than those of other researchers who could spend time with the subjects and cover more ground and respondents for longer periods.

A case study approach for Tagaytay is purposely selected as it is one of the most popular tourist destinations in the Philippines and is increasingly becoming known as a retirement destination. Increasing presence of other nationalities can be observed in the City and many are known to have lived there for the past several years. Tagaytay is one of the most popular tourist destinations in the Philippines and is increasingly becoming known as a retirement destination. In fact, increasing presence of other nationalities can be felt in the City and many are known to have lived there for the past several years.

The city is situated over a ridge that runs along the north side of Taal Lake and the Taal Volcano. Elevated at around 2,100 feet, the air is fresh and cool, coupled with a climate that is comfortable and mild. Known for having a temperature that is comfortable year-round, Tagaytay is one of the few places in the country that negates the necessity for both heat and air conditioning. Though the standard of living is a tad bit higher than in other Philippine cities and provinces, tourism is well-promoted in the area and the City enjoys prosperous economy as a consequence. With its remarkable scenery, comfortable climate, and proximity to the Metro Manila, the city makes an excellent choice for overseas living and could thus be ideal for this study.

3.4 Ethical Considerations

For ethical considerations, the author obtained consent to record the interviews conducted to secure data from the participants. The author likewise clarified that should the respondents feel uncomfortable in any way being part of the study, they have the right to withdraw from the research participation. The interviews are highly confidential as no names are mentioned nor revealed in this study in order to protect the identities of the respondents. Before conducting the interview, the author provided explanation on the purpose and objective of the research.

3.5 Data Analysis

To understand the rationale, visions, motivations, experiences, and perspectives of the different facets that revolve around the creation of employment opportunities in the context of international retirement migration and elderly care in the Philippines, this research will analyze the findings into structural and agency levels.

At the structural level, the foundation, infrastructure, and guidance set up by the facilitators will be looked at. While at the agency level, investment, consumption, and trade exhibited by the actors will be reviewed. Through key findings, this research will be able to draw conclusions whether or not the key findings support the thesis statement.

3.6 Research Framework

With the aim to describe employment creation in the local healthcare industry in the context of the ageing population and international retirement migration to the Philippines, the research framework used in this study is based on the author's interpretation and combination of Labonte et al. (2013)'s work on medical tourism (figure 2.1) and Graf (2006)'s learnings from human capital theory (figure 2.2). Illustrating the flow of resources that facilitate employment creation and

revenue generation in the context of international migration and elderly care, this study follows a framework as shown in figure 3.1 captures insights from the review of related literature, narrowing down the variables to three primary actors: (1) retirees seeking healthcare outside their country; (2) providers in destination countries willing to offer the service; and (3) facilitators linking and enabling the first two—the public the private sectors.

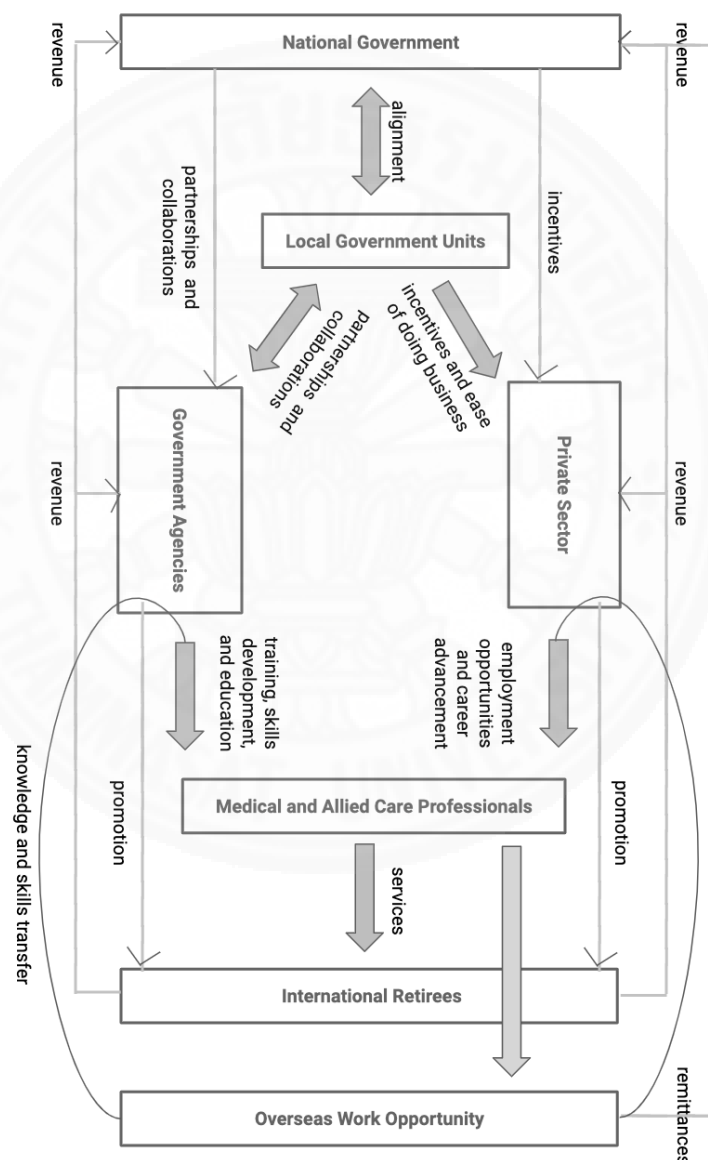


Figure 3.1 The author's interpretation and research framework on reviewing the flow of support and resources that facilitate employment creation and revenue generation in the context of international retirement migration and elderly care

CHAPTER 4

FINDINGS AND DISCUSSION

4.1 Structural Level

At the structural level, the foundation, infrastructure, and guidance set up by the facilitators are examined.

4.1.1 National Government Agency

4.1.1.1 The Philippine Retirement Industry Over the Years

In the 1940s to the 1980s, the Philippine economy once grew and became one of the tiger economies in Asia. Political volatility, however, eventually hampered the growth, loss of confidence of international financial institutions, foreign exchange depletion, and induced capital flight as the country faced high levels of borrowings budget deficits, borrowings, depreciated peso, and investment capital decline towards the end of the Marcos regime.

To cope with the situation, the Philippine government declared a debt moratorium and focused on establishing non-conventional programs to attract and encourage inflow of foreign investments into the country—one of which is through the inception of the Philippine Retirement Authority (PRA), signed by former President Ferdinand E. Marcos in July of 1985. It used to be a government owned and controlled corporation that was initially controlled and supervised the Office of the President. It was reassigned to the Board of Investments - Department of Trade in August 2001 and eventually in 2009, the Philippine Retirement Authority (PRA) had become an attached agency of the Department of Tourism under Republic Act No. 9593, otherwise known as Tourism Act of 2009. With the mission to increase foreign reserves and accelerate the socio-economic development of the country, attracting foreign nationals and former Filipino citizens to invest, reside, and retire in the Philippines has been the mandate of the Philippine Retirement Authority (PRA).

4.1.1.2 Advancing the Special Resident Retiree Visa (SRRV)

Since its inception in 1985, the Philippine Retirement Authority (PRA) had thrived, with consistent remittances of annual dividends to the national treasury. Initially, it started out with the Authority dealing with government and private entities that are deemed to add value to Philippine firms. Through its retirement visa, the Special Resident Retiree Visa (SRRV), the Philippine Retirement Authority (PRA) provides assistance in terms of receiving import duties exemptions and obtaining Alien Registration Permits (ARP) from the Department of Labor and Employment (DOLE). Following this, from 1985 to 2010, the Special Resident Retirees Visa (SRRV) was viewed as a visa product for vendors and services.

As illustrated in *figure 4.1*, the Philippine Retirement Authority (PRA) had been among the government agencies that constantly remitted yearly dividends to the national treasury. Through the years from 1985 to 2014, the Philippine Retirement Authority (PRA) remitted a cumulative dividend worth PHP 948 million. For fiscal year 2014, dividends remitted totaled PHP 144.5million which, based on the unaudited Financial Statements, is 19.12% higher than the previous year (PRA, 2015).

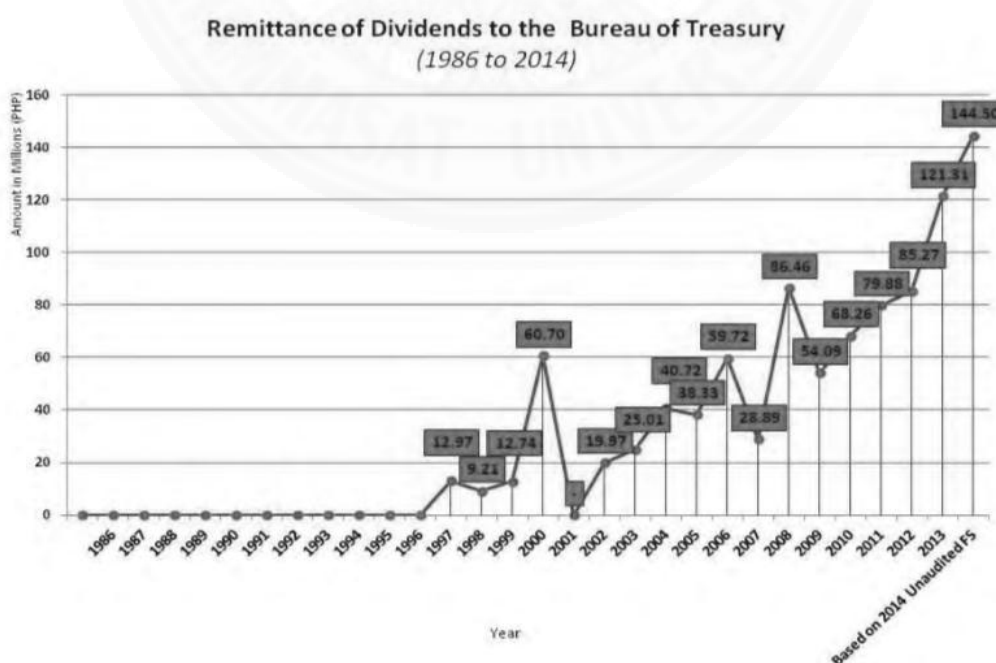


Figure 4.1 Remittance of PRA Dividends (Source: PRA, 2015)

With its considerably good performance, the Philippine Retirement Authority (PRA) eventually evolved and in October 2010, the Authority rationalized, expanded, and branded its retirement visa product line as follows as reflected in the Philippine Retirement Authority (PRA) website:

“(1) SRRV SMILE Option, where visa deposit is simply deposited for end of term obligations; (2) SRRV Classic Option, where visa deposit is convertible into property investments; (3) SRRV Courtesy, which caters to former Philippine-based diplomats and former Filipinos; and (4) SRRV Human Touch, which caters to ailing retiree- applicants. Since then, PRA has transformed from just a venue and avenue for vendors and services to a promoter of age-friendliness with a comprehensive global framework for total retirement planning.”

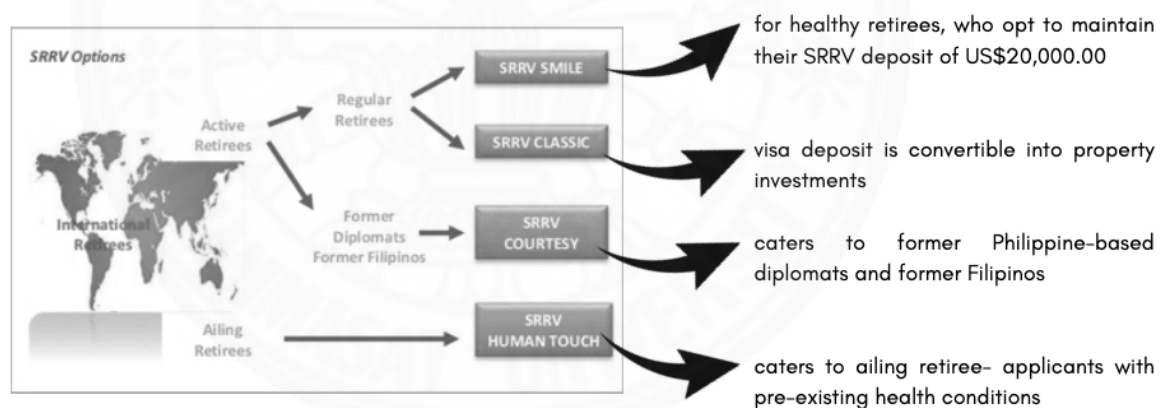


Figure 4.2 SRRV Product Line (Source: PRA, 2015)

Considering the many benefits that the Special Resident Retirees Visa (SRRV) offers, it has garnered its legacy and popularity as a special non-immigrant visa for foreign nationals who are looking to invest in and have interest in making the Philippines their second home. As reflected in the Philippine Retirement Authority (PRA) website, the privileges that come with the visa include indefinite stays with multiple-entry and exit and exemptions from:

“(1) the Philippine Bureau of Immigration ACR-I Card; (2) customs duties & taxes for one time importation of household goods & personal effects worth up to US\$7,000.00; (3) tax from pensions & annuities; (4) travel tax if retiree has not stayed in the Philippines for more than 1 year from last date of entry; and (5) student visa/study permits. In addition, SRRV holders likewise get access to the Greet & Assist Program at selected Philippine airports; free subscription to the PRA Newsletter; discount privileges from PRA accredited merchant partners; free assistance in transacting with other government agencies; and entitlement to the Philippine Health Insurance Corporation (PhilHealth) benefits & privileges (PRA).”

In line with pushing their mandate forward, the Philippine Retirement Authority (PRA) has been consistent in participating in exhibitions overseas to promote retirement migration to the country. Since 2005, there has been an unwarranted surge of Korean retirees to the Philippines. To grow this further, the Philippine Retirement Authority (PRA) touches base with interested investors from South Korea who look into migrating their assets via the Korea Emigration and Investment Fair in Korea.

In Japan, the Philippine Retirement Authority (PRA) annually participates at the Long Stay Fair, an event that focuses on attendees who are seeking a second home abroad. It is an avenue to capture the Japanese market who are genuinely interested in retiring, migrating to, and investing in the country.

In Taiwan, the Philippine Retirement Authority (PRA) promotes taps nationwide television networks and marketers to promote retirement migration and cooperation development to the Taiwanese market.

In China, the Department of Tourism Office in Shanghai supports the Philippine Retirement Authority (PRA)’s promotional campaigns to potential Chinese retirees. Comprising more than forty per cent of the Special Resident Retirees Visa (SRRV) enrollment are the Chinese from mainland China and with this, the PRA carries on its efforts to sustain this momentum in promoting

retirement and investment to the Philippines via the Special Resident Retirees Visa (SRRV) scheme.

With sustained efforts, the Special Resident Retirees Visa (SRRV) had furthered its success in attracting new residents. In terms of metrics, the Philippine Retirement Authority (PRA) had an annual gross enrollment of 5,861 new retirees, with a gross Special Resident Retiree Visa (SRRV) enrollment of 53,933 and a net enrollment of 41,123. The variance between the gross and net enrollments amounting to 12,810 enrollees accounts for the visa cancellations over the years.

These enrolments corresponded to a cumulative net visa deposit of PHP 6.3 billion or US\$ 124.7 million in the year 2017 (Philippine Retirement Authority, 2018). International retiree arrivals are comprised of 37% from People's Republic of China, 21% from South Korea, 7% from Taiwan, 5% from Hong Kong Special Administrative Region, and 3% from Japan. From these, the Philippine Retirement Authority (PRA) produced a net income after tax of PHP 3 billion. These retiree visa deposits, personal and business investments, and daily spending and consumption adding up to a significant multiplier effect on the economy of the Philippines.

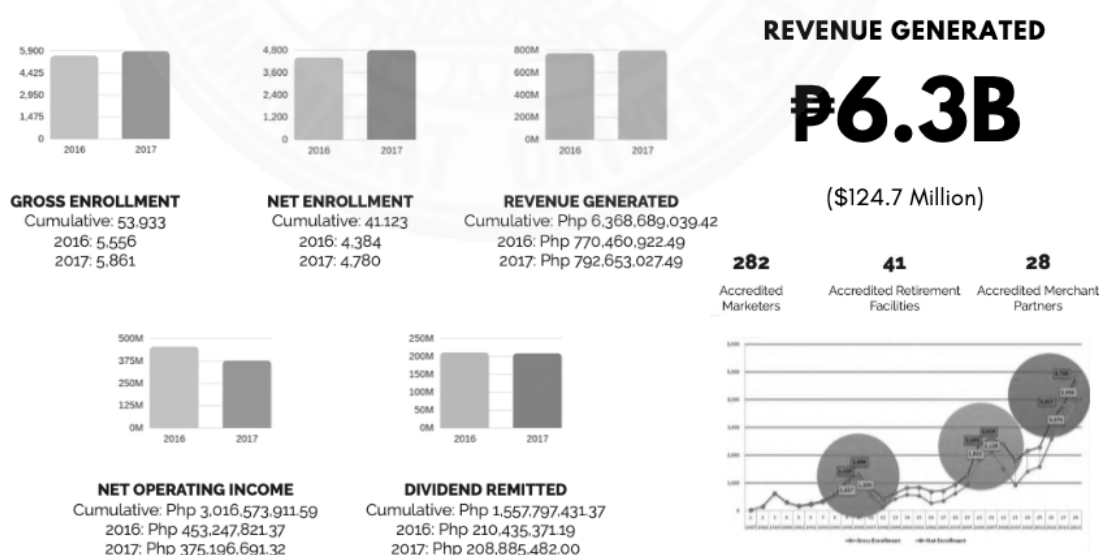


Figure 4.3 SRRV Revenue and Enrollment (Source : PRA, 2018)

4.1.2 Local Government Unit of Tagaytay City

Considering the business and investment opportunities that the capital and business districts can offer, the National Capital Region received the majority of the Special Resident Retirees Visa (SRRV) grants to the Philippines. Coming second to it is the Region IV-A or CALABARZON, comprising five provinces namely Cavite, Laguna, Batangas, Rizal, and Quezon. Within this region that garnered eight per cent of the total Special Resident Retirees Visa (SRRV) grantees, lies the small city of Tagaytay located in the province of Cavite.

Table 4.1

Distribution of Active Retirees per Region

REGION	COUNT	%
LUZON	33,600	81.71%
National Capital Region (NCR)	25,070	60.96%
Cordillera Administrative Region (CAR)	654	1.59%
Region 1 (Ilocos Region)	391	0.95%
Region 2 (Cagayan Valley)	310	0.75%
Region 3 (Central Luzon)	2,973	7.23%
Region 4A (CALABARZON)	3,461	8.42%
Region 4B (MIMAROPA)	394	0.96%
Region 5 (Bicol Region)	347	0.84%
VISAYAS	3,703	9.00%
Region 6 (Western Visayas)	790	1.92%
Region 7 (Central Visayas)	2,750	6.69%
Region 8 (Eastern Visayas)	163	0.40%
MINDANAO	2,231	5.43%
Region 9 (Zamboanga Peninsula)	138	0.34%
Region 10 (Northern Mindanao)	712	1.73%
Region 11 (Davao Region)	1,151	2.80%
Region 12 (SOCCSKSARGEN)	115	0.28%
Region 13 (Caraga)	92	0.22%
Autonomous Region in Muslim Mindanao (ARMM)	23	0.06%
OTHERS		
No Local Address	1,589	3.86%
TOTAL	41,123	100.00%

(Source: PRA, 2015)

In the early 2000s, Tagaytay City was identified as one of the best retirement places by the Europeans and Asians alike, together with Dumaguete City which is located further south of the country. In line with this, the Philippine Retirement Authority (PRA), had offered to provide assistance and funding with a budget of ten million Philippine pesos for construction-related activities of retirement facilities.

4.1.2.1 The Retirement Industry in Tagaytay City

According to the study's key informant representing the Tagaytay City's Planning and Development Office, however, the City turned said offer down mainly due to reasons being that the beneficiaries of the project, if implemented, will be the people from outside of Tagaytay City instead of its residents and that the staff to be employed will be from other cities instead of from Tagaytay City. A few years thereafter, a second attempt had been prompted with a purpose to review the talks on the assistance and funding provision to Tagaytay City in collaboration with the Philippine Retirement Authority (PRA). Still, however, the project did not materialize.

At present, it is evident from the observation that numerous subdivisions have sprouted in Tagaytay City over the years—catering to both Filipinos and expats alike. Initially, people tend to set foot in Tagaytay City simply for sightseeing, food tripping, and a quick weekend and holiday getaway. Eventually, visitors get enticed by the serenity and tranquility of the place in addition to its close proximity to Metro Manila and would end up buying properties for their rest houses and vacation homes. At present, more people are moving into Tagaytay City permanently.

Tagaytay City has a small area and a small population—in fact, it is the smallest in the City of Cavite. With both area and population as sole basis for government funds rationing, the City thus receives a small internal revenue allotment from the national government. Despite this, Tagaytay City does not fail to provide for and fulfill the needs of its citizens. The local government provides free education from pre-elementary to college for students, gives out Christmas incentives to senior citizens who are without pensions from the Social Security

System (SSS) and from the Government Service Insurance System (GSIS). Furthermore, the City's efforts do not go unnoticed.

Tagaytay has been acknowledged as child-friendly, awarded as the number one city in terms of peace and order with zero crime rates, and was the first city to be declared by the Philippine Drug Enforcement Agency (PDEA) as drug-free. These are of utmost importance when considering whether or not a place could be one's destination.

For the elderly retirees, more importantly, availability and proximity of a quality hospital is a necessity. Tagaytay City has in fact a private institution tertiary hospital with insurance providers of foreign citizens accredited. One challenge though is the hospital fees being steep. The Local Government addresses this by providing financial assistance to those who are in dire need and likewise by building a public hospital that offers the level that is expected of them with complete facilities such as dialysis machines, geriatric services, among others. Aforementioned public hospital is due to be completed and be up and running in one to two years from the date of the interview, July 2019.

Furthermore, in line with one of the considerations of retiree migrants, as part of the City's strategy to regulate height and aesthetic, standard permits, locational clearances, development levies are issued. Buildings cannot go beyond five stories and an impact fee is imposed if a building goes beyond aforementioned limit, computed per square meter. Likewise, when a tree is cut in the City, it is imperative to replace it by planting a hundred.

As for the retirement promotions and invitations to choose Tagaytay as destination, the City's direction and targets are geared more towards targeting Filipinos. Despite the national government encouraging the local government units to give out investor incentives, Tagaytay does not find the need to. On the contrary, higher taxes are imposed on investors to control their inflow. In actuality, Tagaytay does not promote nor give out incentives to encourage investments to the City since businesses and investors automatically come.

Despite this, however, trainings and investors are welcome. In fact, the most recent training related to retirement promotion to Tagaytay will be

held in October to November of 2019, spearheaded by the University of the Philippines Manila and the University of Tokyo. With a target implementation by 2020, the project aims to unify services for the elderly and promote language learning to bridge the language barrier and open opportunities in working with the Japanese's ageing population.

The paper's key informant for this section represents the City Government of Tagaytay's City Planning and Development Office. She moved to Tagaytay City in 1984 and has been serving in the government since 1996—totaling 23 years, under three different Mayors. With her husband, she herself aspires to retire in Tagaytay, free from the dreaded Metro Manila heat and traffic.

4.1.2.2 Benefits of Tagaytay City Locals

With regard to employment rate and opportunities in the City, percentage is positively high, and the government office effectively employs one hundred percent of their employees from the pool of Tagaytay residents only while for the businesses in the City, an ordinance is observed. While a business is under construction, sixty percent of its employed workers must be residents of Tagaytay. Once the establishment is on its operational stage, it must employ fifty percent of its employees from City as well. The City Government understands that not all skills may be found within Tagaytay. Thus, businesses are encouraged to only engage and import talent from outside the city should there be no available resident specialist who can fulfill a such a specialized role.

Since the beginning of 2013, all families in Tagaytay City have had what they call pink cards—one for every family and with the card being kept by the mothers. In the case that a pink card is named after a father, it only means that the family no longer has a mother present. Tagaytay City has a separate office that handles affairs of and for senior citizens. This is under the supervision Department of Social Welfare and Development (DSWD), Persons with Disabilities (PWD), and City Social Welfare and Development (CSWD). Should a resident pass away, the City Government offers free funeral service and cremation. If they are pink card holders, they get bereavement benefits worth twenty-five thousand Philippines pesos.

4.2 Agency Level

At the agency level, investment, consumption, and trade exhibited by the actors are studied.

4.2.1 Retirees

This section looks into the perspective of the retirees in Tagaytay City, including their rationale, motivations, challenges and experiences. Furthermore, this section limits its coverage to two out of the five Special Resident Retirees Visa (SRRV) options. Firstly, the SRRV CLASSIC for active and healthy retirees who opt to use their Special Resident Retirees Visa (SRRV) deposit into active investment such as the purchase of condominium unit or long term lease of house & lot and secondly, the SRRV HUMAN TOUCH for ailing retirees who are thirty-five years old and above and need or require medical and clinical care.

4.2.1.1 Considerations

Under the SRRV CLASSIC scheme, respondents chose to migrate to the Philippines and retire in the country after pursuing their respective careers in the academe and dedicating their years occupying a number of corporate positions in the private sector. They are now based in Tagaytay, choosing the City after careful consideration of preselected provinces and countries such as Siquijor in the Philippines, Quezon City in the Philippines, Hua Hin in Thailand, Phuket in Thailand, Costa Rica, and even Panama.

Topping the list of the factors they considered revolved around the English language—the ability of the locals to communicate in English and provision of drive and read signs in English. The location was equally important. They avoided low altitude, crowded, polluted and noisy areas. All of them did their research on temperature and humidity averages, higher elevations above sea level, natural forest and fauna availability, and proximity to major transportation, medical and food sources. Apart from the monetary and location considerations, they also highlighted their search for a destination's cleanliness, organized and efficient local government functions, and integrity in service providers.

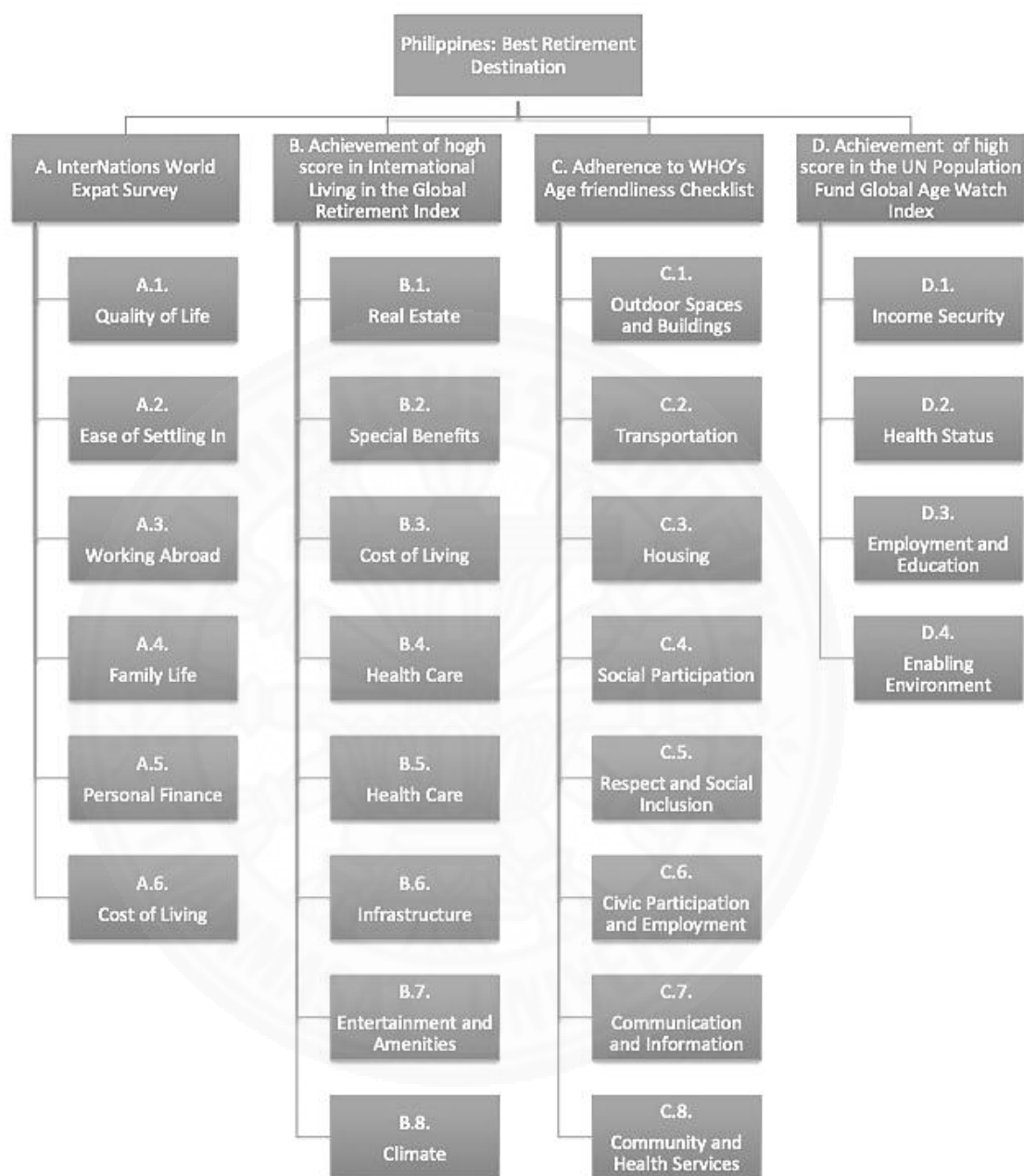


Figure 4.4 The PRA RADAR Index (Source: PRA, 2015)

4.2.1.2 Tagaytay City as Destination

With all these put into consideration, all of their requirements translated into Tagaytay City as the best choice since it is about 700 meters above the ocean which meant no flooding, has cool fresh air, nightly temperatures that allowed sleeping without the need of air-conditioning, lush greenery not destroyed by tons of concrete and two S&R stores within the vicinity.

The respondents note that there is a trade-off though regarding higher housing prices in Tagaytay City compared to those in other provinces in the Philippines, even in Metro Manila. But based on their calculations and considerations, the pros outweigh the cons. Tagaytay City likewise offers a full range of available accommodations. Though, transient spaces can exceed seven thousand Philippine pesos a night and monthly rental home can go over forty-five thousand Philippine pesos a month, decent living locations can likewise be found for eight to fifteen thousand a month. Properties such as condominium units, house and lots, and townhouses, among others, can likewise be purchased.

For the respondents, some of them purchased their lot and built their home in residential villages while the others got what they consider a good deal from rental homes. In terms of their lifestyle in the City, they feel as if people are taking it one day at a time. Most of the locals do not appear to have long-term plans and work hard for day-to-day. Those who are local homeowners are seldom seen as most of the homes in Tagaytay are vacation houses, most often than not ending up looking like they are abandoned. This is true in the case of many partially developed subdivisions in the City. From their perspective, they find the locals' lifestyles more laid back, without much security and optimism for the future.

The cost of living in Tagaytay compared to many other locations is well above the norm for locals. Comparing Tagaytay to other cities and provinces in the country, they find that it is almost three to four times more expensive with Tagaytay land prices being ten or even fifteen times more expensive than their counterparts. According to the retirees, it is quite easy for most who have the minimum budget of eight hundred US dollars per month to live in the Philippines,

but to live in Tagaytay, one should have at least fifty percent more disposable income.

Their daily lives in are more relaxed and with less stress than many locals—gardening, playing golf, doing freelance remote work, among others. They can be busy or do nothing without worries of their retirement savings getting depleted easily. Despite the pleasant experiences, however, these retirees also face challenges in their day to day lives as international retiree migrants to the Philippines. Most of these include the way locals deal with expats and foreigners in general. They feel that they are perceived by the locals as rich foreigners and can well afford inflated prices that some people try to apply to them.

4.2.1.3 Summary

Findings from this study validate what retirees look for in a place of destination— (1) compatibility and availability of a familiar language whether that be for communication with locals or for drive and read signs; an (2) ideal location that has high elevation away from flood-prone areas, is (3) neither polluted nor noisy; (4) offers comfortable levels of temperature and humidity; the location's (5) proximity to major transportation, medical, and food sources; (6) good local accommodation and (7) reasonable cost of living that is ideal and workable depending on one's financial capacity; the area's (8) cleanliness and availability of natural forest and fauna; (9) organized and efficient local government functions; and (10) integrity of service providers. On the basis of the case study done, Tagaytay City notably ticks off all these requirements that retirees look for in a place of destination for retirement.

4.2.2 Private Sector

Looking at the business side, this study finds that international retirement migration's development over the years in Tagaytay City has not yet proved itself to be as enticing and as lucrative a business venture as it is thought out to be. Retirement homes that cater to the ageing population and international retirees, at least those in Tagaytay, are not yet abundant as it seems to be more of an endeavor for a noble cause. Nevertheless, they serve as training ground for medical and allied care professionals.

4.2.2.1 Retirement Homes in Tagaytay City

Assisted living, degenerative and neurologic care, nursing and rehabilitative care, short-term care, and senior care are among the many services that the facilities offer. To paint a picture, the facilities' assisted living services include bathing and hygiene, walking the resident around, getting in and out of bed, feeding three meals and two snacks daily, board and lodging provision, activities to exercise the mental and physical condition of the elderly, housekeeping and laundry, local outings and events, 24/7 security and assistance from well-trained nurses and caregivers, medication reminders and administration, blood pressure monitoring, vital signs monitoring, physical assessment, daily routine, behavior, and attitude recording, and alleviation of pain and suffering, among many others.

As of the date of the interviews, July 2019, the homes house residents with an age range of 66 to 87 years old. In the past years, the homes even had retirees as early as 40 to 55 years old. Their patients come from a wide range of background and origin but most of them come straight out of the hospitals—unable to walk and thus go into the home to receive physical therapy. The homes accommodate a maximum of 15 patients at a time. The longest patient they have had so far was for eight years from 2010 to 2018. They also accept short-term patients and residents for those families who leave their elders in the home during vacation times, especially in the months from September to December. According to the respondents, the homes welcome anyone and everyone who needs the care of a nursing home—regardless of capacity nationality and capacity to pay.

On the business side, there have been numerous cases of patients having been discharged with outstanding balances. With the homes covering daily needs of the retirees such as diapers, food, and other supplies—they continue to do the business for noble causes as it appears, the business is not at all as lucrative as it is thought to be. The facilities, like most others, have high turnover rates of medical and allied care professionals but there will always be medical and allied field professionals willing to take on the freed-up slots.

Table 4.2

Categories of Care Provisions

CATEGORY	CARE PROVISIONS
Minimal Care (Category 1) Activities of Daily Living score of 0-6	- self-care or minimal care - awaiting diagnostic studies - recovering and requiring therapy - requiring assistance on medication reminders and monitoring - less frequent observation RATES: Php 25,000 for sharing; Php 30,000 for private
Moderate Care (Category 2) Activities of Daily Living score of 7-12	- moderately ill and recovering from serious illness or operation - requires nursing and caregiver supervision - needs medication reminders and administration - clients with Alzheimer's, Parkinson's, and other neurological and cognitive impairments - stroke clients in recovery and need rehabilitation RATES: Php 35,000 for sharing; Php 45,000 for private
Maximum Care (Category 3)	- total or intensive care - patient needs close attention and complete care - patients with stable to unstable vital signs - patients with cancer and with low immune system - patients with isolation precaution / Chronic Obstructive Pulmonary Disease (COPD) - patients that need assistance with most activities - patients requiring frequent and complex monitoring of vital signs, treatment, and medication - patients with different contraptions needed to be monitored - patients that require one health care provider per 12 hours shift RATES: Php 50,000 for private
Critical Care (Category 4) Activities of Daily Living score of 19-24	- highly specialized critical care - unstable and acutely ill - patients with high level of dependence requiring frequent evaluation and therapy assistance - patients needed to be transferred to a complete facility or hospital RATES: varies; subject to assessment

4.2.3 Medical and Allied Care Professionals

With regard to considering the impact to employment creation, the ageing population and international retirement migration do open up opportunities for the locals-- whether one is a medical and allied health professional or a job seeker who is literate but under-educated, retirement businesses offer employment in a number of ways. These come in the form of organizing the activities and opportunities around the retirees' needs from the basic ones such as driving, gardening, massage therapy, laundry, and housekeeping, to complex tasks that require professional administration. As for how the local Filipino health care workers adopted to this phenomenon in their community, this study finds that they use it as a springboard to advance their personal and professional growth. With medical and allied care professionals staying only in the Philippines to bank on experience, their ultimate goal is still to move and work overseas.

From what this study gathered, medical and allied health professionals in the Philippines accept either an insufficient amount for compensation or a minimum daily allowance to start with. Furthermore, circumstances where the workers pay their employers occur, just so they can work and gain experience. If the Philippine public and private sectors value the nurses' and caregivers' work as they do at present, given a choice to pursue opportunities elsewhere, these professionals will continue to choose to leave home to better their chances for survival and a better life.

4.2.3.1 Local-based Workers

This study's respondents include Filipino nurses and caregivers who underwent trainings in Nueva Ecija, located north of Tagaytay City. Though most of them hail from Tagaytay City, half of the respondents come from adjacent cities within the area of Cavite. Some of them used to be overseas Filipino workers (OFWs) in Malaysia and revealed that they definitely have plans to go overseas and work abroad. Some of the respondents did private caregiving services and likewise worked in hospitals. Currently, each of them works a twelve-hour shift at the retirement homes.

(1) Costs and Benefits

When asked, the respondents expressed hesitation to discuss their salaries. But as the interviews went on, it seemed that some of them have the sentiment that as long as they are making good with what they earn, they are contented with what they are receiving. While the Department of Labor and Employment (DOLE) pegs the average monthly basic salary of an entry-level caregiver at ten to twelve thousand Philippine pesos, this range appear to be relatively higher compared to the salary of entry-level nurses working in private and public hospitals. The level also varies depending on the location, with provincial rates lower than those in Metro Manila.

In the case of the nurses and caregivers in the nursing homes, some of them entered as volunteers paid with a daily allowance of a hundred Philippine pesos per day. This somewhat exemplifies the low economic value assigned to caregiving work in the Philippines. Due to a significant lack of available hospital work opportunities for newly- passed nurses and caregivers, most of them strive to work as volunteers in the nursing home despite the meager allowance. Some of them have very noble mindsets, thinking that as long as they have enough to get by, that is okay with them. Receiving a minimum allowance is better than nothing, after all, as when they were starting, some of them took more than a year to find work.

(2) Training and Development

The elderly migrants in the home care tend to stay for years, as some are to be cared for until their death. Hence, the caregivers spend a long time with them, and with the daily interaction with the elderly, it is inevitable to develop some degree of close bonds with them. One respondent relates how she has come to treat some patients as her grandparents and gives them the kind of concern and care she would normally give to her family members. However, she emphasizes that she remains conscious of her role as a nurse, and although she becomes attached in some degree to her patient, she is able to perform her duties.

All the respondents agree that the nature of their work involves providing holistic care to the elderly migrants—care ranging from assistance

to daily living, providing companionship, listening to personal stories, relating to the demands of the family, ensuring provision of medical care and needs. They emphasize the value of communication as part of their work. Communication is important in maintaining the caregiver-patient relationship. The respondents share that initially, language is a barrier. Some of the patients can no longer respond verbally with coherence, and they have to resort to nonverbal communication to assess how the patient feels.

In the case of international retirees, one of the caregivers speak Nihongo and she was assigned to care for a Japanese patient. When she is not on shift, the other caregivers communicate by using pen and board, hand gestures and other nonverbal signs, and by learning a few basic Nihongo words for body parts. Because some of the patients cannot verbally express themselves, or have differences in language, the caregivers had to adapt by knowing their patients' nonverbal expressions and cues. Touching and other nonverbal cues become a way of expressing care to the elderly despite the differences in language to overcome the barriers of communication.

(3) Education and Advancement

From time to time, the Department of Health gives out trainings and seminars particularly for geriatric care, conducted in the Barangays. The Homes get to send one representative each and that representative in turn shares his or her learnings to the rest of his or her colleagues. Medical and allied care professionals like them can also avail of trainings and language courses conducted by the Technical Education and Skills Development Authority (TESDA). Their core training though, took them about six months to complete, with an additional month allotted for review. According to the respondents, this entailed a lot of money and is quite expensive. More often than not, nurses in the Philippines even have to pay their employer to let them work and gain experience.

For some respondents, they view their work in the retirement homes and eldercare as a valuable training ground and experience needed for work abroad. Most of them have plans to work abroad, but according to them, they need at least three years of hospital or caregiving experience in order to

qualify, hence, they think that being in eldercare is better than not acquiring any work experience at all.

(4) Local Experience as Springboard

According to the respondents, most of the nurses and caregivers they know, just like them, simply get experience in the Philippines to propel their careers and eventually be able to go to Japan or New Zealand. The respondents collectively noted that they target Japan due to the huge wage differential. But getting there has its challenges. Topping those hurdles include the language barrier between Filipinos and Japanese—aspiring nurses and caregivers have to study the Japanese language for three months or more and obtain an NC4 level before getting a chance to be sent to Japan.

4.2.3.2 Overseas-based Workers

After pursuing their bachelor's degree in nursing for four years in the Philippines, this paper collects data on the experiences, challenges, motivations, and future plans Filipino medical and allied field professionals who are based overseas. Their experiences vary from working in Philippines hospitals for two and a half years, to a four-year stint as Intensive Care Unit (ICU) nurses in Saudi Arabia and to moving to Europe to work as ICU nurses in tertiary hospitals in Limerick—the third largest city in the Republic of Ireland.

(1) In Search of Better Employment Opportunities

Working in Saudi Arabia, burn out, exhaustion, and underpayment are some of the challenges faced by nurses. As such, they are always on the lookout for better opportunities. Coincidentally, Ireland boosted its hiring for nurses and a number of professionals, including this paper's respondents, were able to move to Ireland or to the United Kingdom (UK). Prior their decision to move, friends encouraged them to do so as according to them, Ireland offered (1) better living conditions, (2) lighter workloads, and (3) higher compensation.

(2) Opportunity Costs

Deciding to heed their friends' advice, they had to go back to the Philippines first after resigning from their posts in Saudi Arabia. It took them a while to prepare for their next move. Two agencies representing the Irish hospitals

conducted their hiring in Ortigas City and Makati City, which are both located in the Metro Manila area. All of them coming from the province, it took effort to submit their applications, attend personal interviews, and they all had to wait for a couple of months until their respective employers from Ireland arrive to conduct the final and face to face interviews. Simultaneously, they had to complete requirements such as passing the IELTS English test. They eventually got accepted and received their job offers. Overall, it took them about six to nine months of waiting time before they could apply for a proper work visa.

Furthermore, documents had to be completed for the nursing board and when they finally got to Ireland, they had to either undergo an adaptation period or take the Royal College of Surgeons in Ireland (RCSI) exam. The adaptation period required them to work under observation, assessment, pass competencies, evaluations, and exams within six weeks to get a recommendation and to be awarded their slots and pins that signify their passing of the nursing board. Taking the RCSI exam on the other hand entailed taking a written and practical exam to practice nursing in Ireland. All of them took the adaptation track.

(3) Direct Costs

For their pre-departure preparations, they revealed that they consider themselves lucky being part of the 2017 batch as the employer shouldered most of the expenses including their nursing registration and their plane tickets, among others. They only had to pay for their visa application, any amount in excess on the plane ticket budget of 800 euros, and the courier-related fees to send documents to and from Ireland and the Philippines. Overall, they calculate that they invested almost a hundred thousand Philippine pesos, which is relatively a small amount compared to what applicants are paying at present.

Currently, aspiring nurses to Ireland have to initially pay and take out around three hundred thousand Philippine pesos before they get to go out of the country and work abroad. That is three times what they had to shell out. Though they had their savings from their work in Saudi Arabia, some of them also had to borrow monetary capital from their relatives to augment the deficit and to push through with their planned endeavor. Those who borrowed money were able to pay everything they owed six months after they started working in Ireland.

(4) Training and Experience

Asked about a typical day in the life of ICU nurses in Ireland, the respondents describe theirs as very stressful. Compared to the Philippines and Saudi Arabia, they are expected to perform all tasks of an ICU nurse, including those that are supposedly handled by other professionals such as respiratory therapists, laboratory specialists, among others. Unlike in Saudi Arabia where these other tasks are carried out and taken care of by the other teams specialized in that area, the ICU nurses in Ireland do everything. They typically spend thirteen hours in a day and work thirty-nine hours a week—totaling three days a week worth of workload. Outside work, their stressors come from feelings of homesickness being far away from their families and friends. Despite this though, they collectively find and agree that Ireland offers them relatively more peaceful, chill, and laidback lifestyles—with calmer and stress-less lives compared to their former lifestyles in the Philippines and in Saudi Arabia.

The workload in Ireland for them is better, with the ICU having a 1:1 patient-nurse ratio. ICU nurses are responsible for all procedures—yes, but they get to focus on one patient each, all throughout a patient's recovery. Compare this to their experience in Saudi Arabia where 3:1 is the patient-nurse ratio and in the Philippines' 4:1, they noted how very unsafe these are and how in Ireland, they focus more on safety. With this favorably safer practice in Ireland however, it can get stressful as hospitals in Ireland are bigger than their Saudi Arabia and Philippine counterparts—offering a lot of services. Consequently, one nurse has to manage tasks and operate all machines related to one's patient's needs. It was a struggle at first for them as they did not experience such demand prior to working in Ireland and even when they were still students, despite being rotated in different areas of hospitals they trained in, they were not taught how to use and troubleshoot machines. When they got to Ireland, however, they were expected to and had to operate and connect the patients themselves.

Fortunately, their organizations provide one-day courses to learn these ropes and competencies. During their adaptation period, they started their first six weeks in the high dependency unit where there were no complicated

machines. This way, they get to familiarize the nurses with the critical care kind of environment. After six weeks of training and after passing the adaptation period, they always had a senior nurse looking over them and teaching them everything they need to know within that two-month timeframe.

(5) Education and Advancement

In terms of career growth, some of them have been offered to enroll in Cork University, fully funded, to study ICU foundation courses for six months. With this, they can definitely say that there is growth as Ireland and their hospitals continuously give out opportunities to study further. The next step for them is to take post graduate courses in preparation for a probable master's degree. All courses are offered for free and are handled and funded by the government of Ireland. Pursuing a master's degree in their field would open opportunities to go for managerial positions—moving up from staff nurses to specialized and/or managerial positions.

This is where they pinpoint and felt the gap is as in Saudi Arabia and in the Philippines, nurses like them just work without career growth tracks. In Ireland, they are aware that they have a lot of opportunities to learn-- from basic trainings on how to resolve issues with angry patients and relatives to the likes of handling harassment, they offer these for staff nurses to improve their selves and prepare them for unforeseeable crisis. In addition, proper guidance is ensured with every shift being covered and overseen by a clinical nurse manager that staff nurses like this study's respondents can consult should they have doubts on how to handle certain situations.

(6) Benefits and Challenges

Asked to rate their stress levels in Ireland, the respondents collectively give it a 10 out of 10. They say that they have to give their best, manage procedures properly, and contribute to the improvement of their patients' health while in Saudi Arabia, once they finish their jobs at the end of the day, they are done for the day. In Ireland, they feel that they are not only doing nursing care but also develop critical thinking. Furthermore, in Saudi Arabia, they note that only the doctors get to talk to doctor consultants. In Ireland, on the other hand, consultants

also talk to nurses. This in a way gives the nurses a sense of empowerment as they are being approached and consulted, and most importantly, they are encouraged to speak up to the doctors and that in turn makes the experience of the nurses very fulfilling.

Despite all the positive experiences in Ireland, however, they mention that Ireland experiences a shortage of nurses and medical professionals, still. This shortage in staff nurses in turn lead to overworking, especially in wards and other units. Nurses are exhausted, understaffed, and underpaid. The same is the case in the Philippines and Saudi Arabia—in their words, these are the same sentiments for all nurses all over the world except for Australia where it is perceived that nurses are well-taken care of. In the Philippines, their salaries were less than eight thousand per month, working 40 hours a week. In this regard, given a choice to work abroad, they definitely will keep on choosing to move overseas. With the promise of a more comfortable life in Ireland, they are able to help out their families and save more. As in the case in the Philippines, the salary is barely enough to eat, and not even live a comfortable life for a single, unmarried person without dependents.

(7) The Lure of Greener Pastures

If retirement homes will be developed and promoted in the Philippines, the respondents say that they would still not want to come back because of the type of job the industry entails. Most of them prefer to work in acute hospital settings because there, they get to be trained and sharpened more than in retirement homes where tasks and patients are only limited— hindering further professional growth. As young professionals who seek career advancement, they see work in retirement homes as too robotic that will lead to stagnant skills development.

As for their plans for the future, all of them aspire to be residents and/or citizens of Ireland. In order to be residents and/or citizens, they need to complete five years of their stay there. Though eventually, some of them either aim to settle down and/or petition and bring their families to Ireland, they will most likely leave their current hospitals to pursue other opportunities where they can grow—some of them possibly exploring the field of research. To do that, they

would need to study further. Next year in fact, they plan to pursue their postgraduate course for nine months, fully funded by the Irish government.

4.3 Summary of Key Findings and Discussion

This study's findings and observation validate what retirees look for in a place of destination— (1) compatibility and availability of a familiar language whether that be for communication with locals or for drive and read signs; (2) an ideal location that has high elevation away from flood-prone areas, (3) is neither polluted nor noisy, and (4) offers comfortable levels of temperature and humidity; the location's (5) proximity to major transportation, medical, and food sources; (6) good local accommodation and (7) reasonable cost of living that is ideal and workable depending on one's financial capacity; the area's (8) cleanliness and availability of natural forest and fauna; (9) organized and efficient local government functions; and (10) integrity of service providers. On the basis of the case study done, Tagaytay City notably ticks all these requirements that retirees look for in a place of destination for retirement.

Looking at the business side, it appears that international retirement migration's development over the years in Tagaytay City has not yet proved itself to be as enticing and as lucrative a business venture as it is thought out to be. Retirement homes that cater to the ageing population and international retirees, at least those in Tagaytay, are not yet abundant in number as it seems to be more of an endeavor for a noble cause. Nevertheless, they serve as training ground for medical and allied care professionals.

In terms of international retirement migration's impact to employment creation, the ageing population and international retirement migration do open up opportunities for the locals-- whether one is a medical and allied health professional or a job seeker who is literate but under-educated, retirement businesses can offer employment in a number of ways. These come in the form of organizing the activities and opportunities around the retirees' needs from the basic ones such as

driving, gardening, massage therapy, laundry, and housekeeping, to complex tasks that require professional administration.

As for how the local Filipino health care workers adopted to this phenomenon in their community, it appears that they use it as a springboard to advance their personal and professional growth. As Sackur (2015) put it, the image that the Philippines is a country training its people to leave proves to be valid, backed by the findings and observation of this paper. With medical and allied care professionals staying only in the Philippines to bank on experience, their ultimate goal is still to move and work overseas.

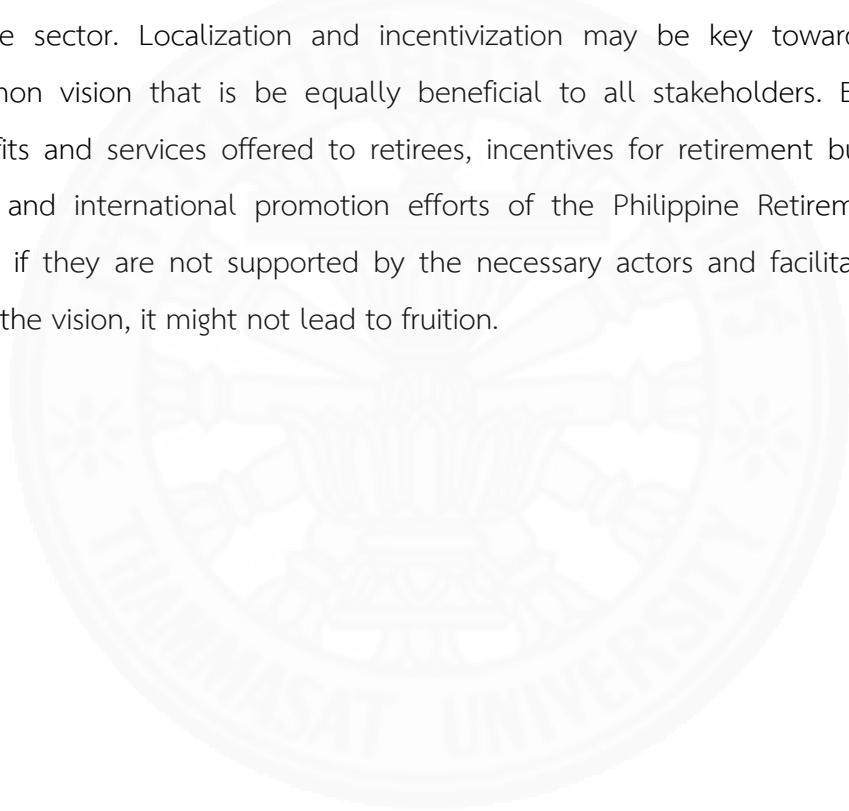
There is this notion that the grass is always greener on the other side. Somehow, basing off on human capital theory, we already have an idea on how the grass can be made green enough to make them consider stay to grow the industry. The incremental benefits must outweigh the costs. After all, workers, regardless of the field, value skills development that translates to higher valuation, compensation, and higher quality of life.

From what this study gathered though, the costs still greatly outweigh the benefits for medical and allied health professionals in the Philippines who even have to pay to work. Where else in the world does a worker have to pay his or her company to work? After all the monetary investments in education and experience, one earns a salary that is around eight to ten thousand Philippine pesos per month, working for forty hours a week. Such level of salary is barely enough to live comfortably, let alone buy a month's worth of food to support a family in the country. If the Philippine public and private sectors value their work as they do at present, there is no doubt that given a choice to pursue opportunities elsewhere, these professionals will choose to leave to better their chances for survival and in pursuit of a better quality of life.

Peoples of the world may have different cultures and values but most often than not, at least in most Asian countries, families are still hesitant in putting their elderly parents in homes—thinking that sending them away could mean isolating them or casting them away, especially if it is in another country. The principal reason why families choose to put their elderly in retirement homes is to

have someone who is better equipped and skilled to take care of them, and not at all to throw them away to a place that is far away. After all, families would rather have their loved ones close to them, that is, within the vicinity where they can still visit them from time to time. This may be of important consideration that facilitators, both the public and private sectors, can look at when developing their strategies and roadmap towards the vision of building the Philippines as a retirement haven.

Though there is a national level vision and roadmap, there seems to be a dearth of aligning them with and trickling them down to the local level and the private sector. Localization and incentivization may be key towards reaching a common vision that is be equally beneficial to all stakeholders. Even with the benefits and services offered to retirees, incentives for retirement businesses, and local and international promotion efforts of the Philippine Retirement Authority (PRA), if they are not supported by the necessary actors and facilitators, however great the vision, it might not lead to fruition.



CHAPTER 5

CONCLUSION AND RECOMMENDATIONS

5.1 Conclusion

The facilitators—national government, local government, government agency, and private sector, appear to not have a systematic and unified vision and mandate towards promoting the Philippines as a retirement destination to international retirees. Though the Philippine Retirement Agency (PRA) has its roadmap, this study finds that it is not supported by the local government which in turn, does not create a local business climate that incentivizes the private sector to invest in the industry.

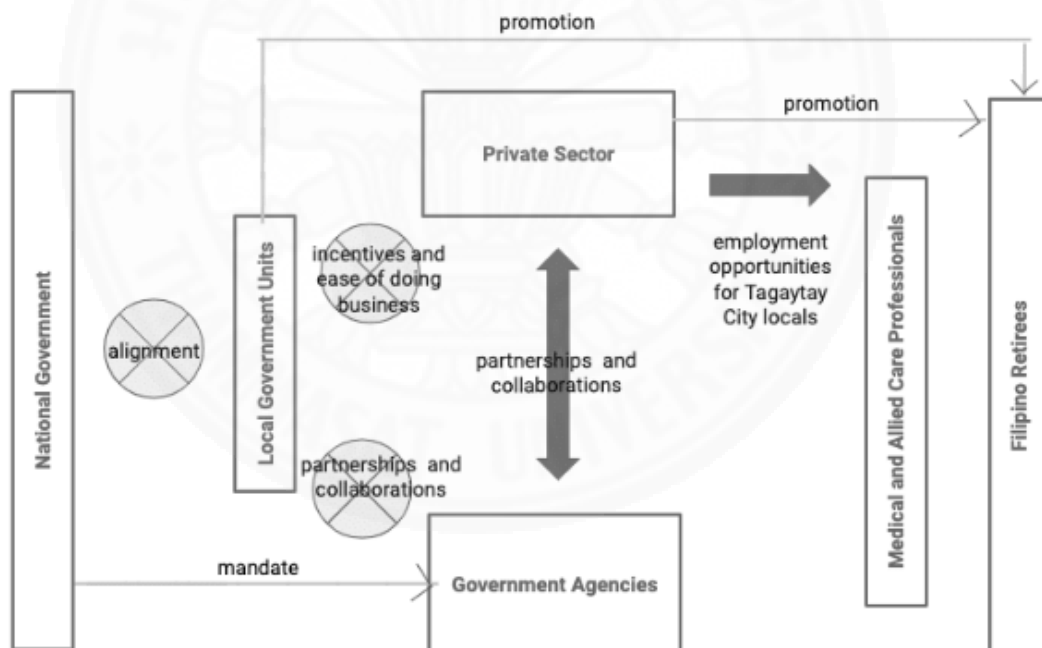


Figure 5.1 Findings: Structural Level

Accordingly, despite Tagaytay City notably ticking off all the requirements that retirees look for in a place of destination, the industry's development over the years in the vicinity has not yet proved itself to be as enticing and as lucrative a business venture as it is thought out to be. Retirement homes that cater to the

ageing population and international retirees, at least those in Tagaytay, are not yet abundant as it seems to be more of an endeavor for a noble cause. Nevertheless, they serve as training ground for medical and allied care professionals.

This addresses the objective of this paper to describe the employment and opportunities creation for Filipino medical and allied field professionals in the context of the ageing population and international retirement migration. The phenomenon does open up opportunities for the locals. However, it appears that, at least in the case of nurses and caregivers, they only use the opportunity as a springboard to advance their personal and professional growth. From what this study gathered, these professionals in the Philippines even pay their employers to give them work instead of the other way around. With medical and allied care professionals staying only in the country to bank on experience, their ultimate goal is still to move and work overseas.

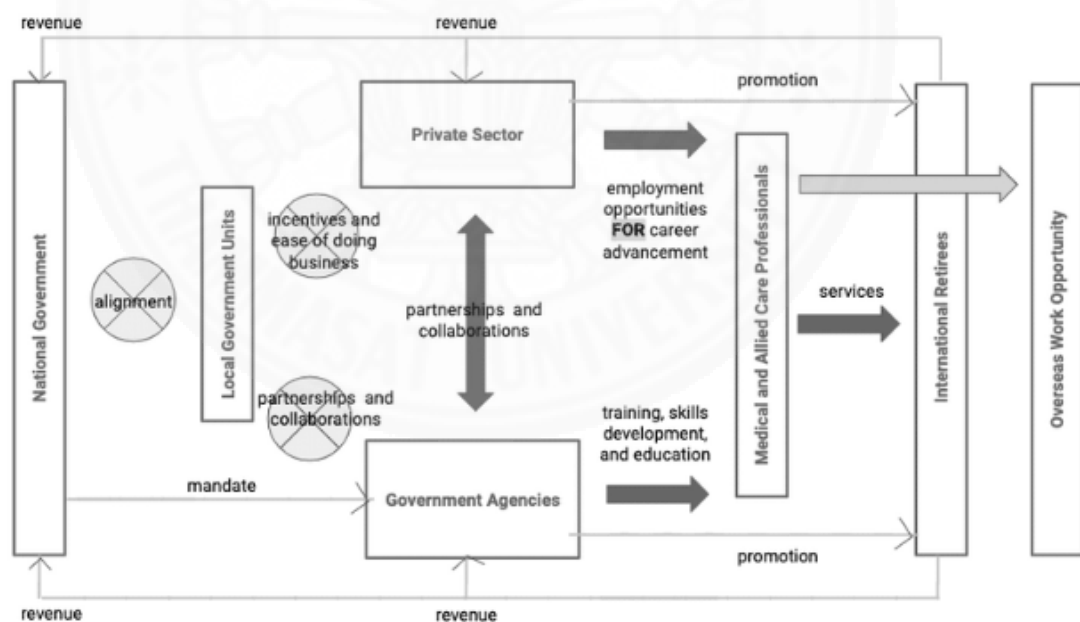


Figure 5.2 Findings: Agency Level

5.2 Recommendations

5.2.1 Structural Level

The findings of this study reveal that though there is a national level vision and roadmap, there seems to be a dearth of effort in terms of aligning them with and trickling them down to the local level public and the private sector.

At the national and government agency level, the outlook is positive with the vision and mechanism in place. With what growing the SRRV holders could do, the PRA expects to reap rewards in the coming years and is optimistic that the Authority will be one of the government agencies that will generate significant revenue to drive the economy of the country. With the continuous growth of the ageing population, the potential of the retirement industry is huge. This direction of the PRA makes sense and is recommended to be further pursued, as capturing a significant percentage from the world market will have its economic contribution.

With the rise and development of international retirement migration in the country signaling the shift in the predominant trend where the movement flow comes from developing countries to developed countries, there is a need to establish alignment and coordination among facilitators and institutions in setting up the roadmap and strategy in developing the retirement and elderly care industry if this is something that will be pursued in the long run.

5.2.2 Agency Level

While the outlook is positive on the national and government agency level, the same cannot be said for its local level and private sector counterparts just yet. Reasons could include the phenomenon still being relatively new in the country and much can be done to build a case on it. At the onset, it is already presenting economic opportunities for retirement and nursing homes-- generating jobs for local nurses and caregivers.

One key finding though is that because of the inherently low pay scale given to nurses and caregivers in the field, they end up using the opportunity as their springboard instead-- to gain experience and expose themselves caring for people in different walks of life and in a multicultural setting and to buy time before

they transition to still work abroad. Reevaluation of salary levels for related jobs may be considered.

Moreover, policymakers can consider this opportunity to complement labor migration and employment creation efforts. Since this study finds that the lure of perceived better economic prospects abroad still continues to be a promising factor for Filipino medical and allied care professionals, the government could encourage and entice them to periodically return home and conduct knowledge transfer—with the skills and know-hows they get to acquire through their experience working in more developed health systems abroad.

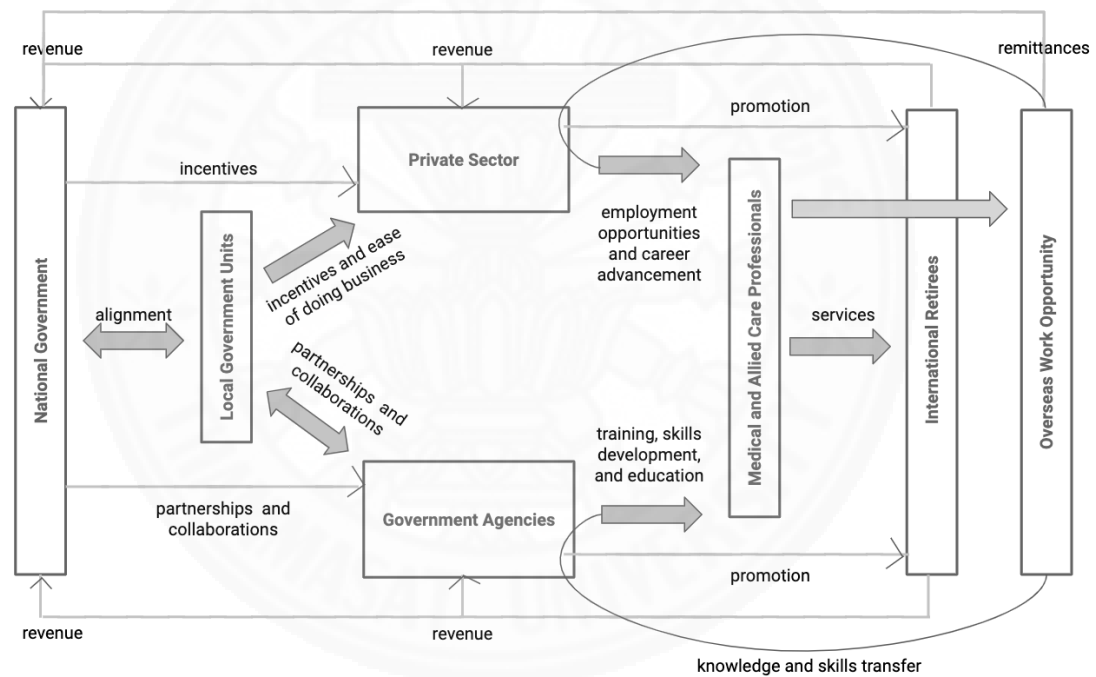


Figure 5.3 Recommendations on the flow of support and resources that facilitate employment creation and revenue generation in the context of international retirement migration and elderly care

5.2.3 Recommendations for Future Research

With this case study being confined within Tagaytay City, the findings of this research may or may not be generalized to the whole of the Philippines and to other cities. Duplicating the study to other retirement destinations may be considered.

Likewise, with this study's respondents who are nurses and caregivers in their mid-20s to early 30s and are at the early stages of their professional careers, the findings of this study may not be generalized as different age cohorts and career levels could tell a different story and present variations in terms of motivations and decisions. As this paper focused on Filipino medical and allied field professionals in elderly care, future research could expand their scope to other age cohorts. Moreover, future research can expand to other industries related to the international retirement industry such as opportunities in real estate, construction, specialist products for the elderly, and other related services.



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The seal of Thammasat University is a circular emblem. It features a central five-tiered umbrella (parasol) with a lotus flower at its base. The lotus is surrounded by a circular band containing the university's name in Thai script at the top and "THAMMASAT UNIVERSITY" in English at the bottom. The entire seal is rendered in a light gray, semi-transparent style.

APPENDICES

APPENDIX A
GUIDE QUESTIONS_NATIONAL GOVERNMENT AGENCY

1. What is the vision, strategy, and programs of the PRA and how do people know about them?
2. How are government agencies and local government units supporting the mandate of the PRA?
3. What does a retirement haven/retirement paradise mean for the PRA?
4. Why does the PRA think it is better to retire in the Philippines than anywhere else?
5. What are the PRA's targets, and has it been successful in achieving them?
6. Can you describe the progress that the agency has made over the years in terms of numbers (e.g. foreign retirees, top nationalities, etc.)?
7. What are the challenges PRA faces?
8. What is the rationale behind the SRRV, its usage rate, and challenges?
9. What are the incentives provided for the following:
 - a. businesses promoting and catering to international retirement migration
 - b. local workers working or who would like to get into such businesses
 - c. foreign retirees to choose the Philippines as their retirement place
 - d. national government to promote international retirement migration
 - e. local government to promote international retirement migration
10. What is your ideal retirement scenario, and do you think the Philippines is the place? Where exactly in the Philippines and why?

APPENDIX B

GUIDE QUESTIONS_LOCAL GOVERNMENT UNIT

1. What is the vision, strategy, and programs of the City Government?
2. How is the City Government supporting the mandate of the PRA?
3. What does a retirement haven/retirement paradise mean for the City Government?
4. Why does Tagaytay think it is a good place to retire to?
5. What is the City Government's targets and has it been successful in achieving them?
6. Can you describe the progress that the LGU has made over the years in terms of numbers (e.g. foreign retirees, top nationalities, etc.)?
7. What are the challenges the LGU faces?
8. What are the incentives provided for
 - a. businesses promoting international retirement migration
 - b. local workers working or who would like to get into such businesses
 - c. foreign retirees to choose the Philippines as their retirement place
 - d. national government to promote international retirement migration
 - e. local government to promote international retirement migration
9. What is your ideal retirement scenario, and do you think the Philippines is the place? Where exactly in the Philippines and why?
10. What could the following do to make the retirement experience better?
 - a. national government
 - b. retirement home
 - c. healthcare service providers
 - d. retirees

APPENDIX C

GUIDE QUESTIONS_RETIREES

1. Where are you from and what are you doing nowadays?
2. When and why did you choose to move to the Philippines?
3. What has attracted you to Tagaytay?
4. How many times have you visited Tagaytay prior to your decision to move?
5. What procedures did you have to follow to move in the Philippines?
6. Was it difficult to find accommodation in Tagaytay?
7. What types of accommodation are available in Tagaytay?
8. How do you find the Philippine lifestyle?
9. Have you been able to adapt to the country and to its society?
10. What does your everyday life in Tagaytay look like?
11. Any particular experience in the country you would like to share with us?
12. What is your opinion on the cost of living in Tagaytay?
13. Is it easy for an expat or retiree to live there?
14. How do you spend your leisure time?
15. What do you like most about the country?
16. What do you miss the most about your home country?
17. Would you like to give any advice to soon-to-be retirees in the Philippines?
18. How would you rate your overall experience?
19. What could the following do to make the retirement experience better?
 - a. national government
 - b. local government
 - c. retirement home
 - d. healthcare service providers
20. What are your plans for the future?

APPENDIX D
GUIDE QUESTIONS_LOCAL WORKERS

1. Where are you from and what are you doing nowadays?
2. What were you doing prior to joining the organization?
3. When and why did you choose to work for the organization?
4. How did you find out about the opportunity and what procedures and preparations did you take to proceed with your current work?
5. What does your everyday life in Tagaytay look like?
6. Do you believe that there is an opportunity for individual career growth and development within the company? Please describe or elaborate.
7. Do you experience personal growth such as upgrading your skills and learning other tasks apart from your regular to-dos?
8. Do you think you have had enough training to solve customer issues?
9. If something unusual comes up, who do you go to for a solution?
10. Do you think your job makes a positive difference in others' lives?
11. Does your job cause an unreasonable amount of stress to you?
12. How would you rate your overall experience?
13. What could the following do to make your job better?
 - a. national government
 - b. local government
 - c. retirement home
 - d. healthcare service providers
 - e. retirees
14. Would you rather work in the Philippines or work abroad? Why?
15. What are your plans for the future?

APPENDIX E
GUIDE QUESTIONS_OVERSEAS WORKERS

1. Where are you from and where are you now?
2. What is your background and nature of present work?
3. What were you doing prior to joining your organization?
4. When and why did you choose to work your organization?
5. How did you find out about the opportunity and what procedures and preparations did you take to proceed with your current work?
6. What does your everyday life as an OFW look like?
7. Do you believe that there is an opportunity for individual career growth and development within the company? Please describe or elaborate.
8. Do you experience personal growth such as upgrading your skills and learning other tasks apart from your regular to-dos?
9. Do you think you have had enough training to solve customer issues?
10. If something unusual comes up, who do you go to for a solution?
11. Do you think your job makes a positive difference in others' lives?
12. Does your job cause an unreasonable amount of stress to you?
13. How would you rate your overall experience?
14. What could the following do to make your job better?
 - a. national government
 - b. local government
 - c. retirement home
 - d. healthcare service providers
 - e. retirees
15. Would you rather work in the Philippines or work abroad? Why?
16. Given a chance to work in retirement homes in the Philippines, what will be your expectations?
17. What do you think are the skills you need and how would you meet them?
18. What are your plans for the future?

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