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INTERGENERATIONAL FAMILY RELATIONSHIPS IN AGEING SOCIETIES

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PART I

KEY PREMISES



Debates on ageing societies predominantly focus on the circumstances of the elderly. A change of focus is needed, and one that starts from three key premises.

First, population ageing is not only about older persons: it affects people of all ages. In debates on ageing societies, there seems to be an implicit assumption that demographic ageing primarily affects older persons, their economic situation, health, mobility, social integration, family support and care. Of course, increasing longevity and decreasing birth rates have resulted in larger numbers of older persons both in absolute and relative terms. Nevertheless, with dramatic shifts in the balance between old and young, the worlds of younger age groups are profoundly changed. The young are growing up in societies where they are a numerical minority and where they have several generations of family members “above” them. These considerations suggest that attention should be given to people of all ages.

The new demographic circumstances in which family members of multiple generations share

several decades together compel us to recognize that individuals are embedded in a complex web of vertical and horizontal ties. Thus, a second key premise is that there are critical interdependencies between family generations and between men and women in families, which are built and reinforced by social policies. These interdependencies should not be taken for granted as is often done. Rather, it is important to address explicitly the ways in which legal and policy arrangements constitute differential opportunities and constraints for men and women and across generations in families.

A third key premise is that to understand interdependencies in families, a spectrum of levels and units must be distinguished and recognized: country, historical generation, family, dyad (partners, parent-child) and the individual. Countries have disparate political, religious and economic histories and different welfare-State arrangements. To understand the impact of demographic changes on people’s lives, it is not sufficient to consider cross-national differences only. Regional diversity, including urban-rural differences and social change over time must also

be considered — the rapid changes in Central and Eastern Europe being a case in point.

Under the auspices of the Population Activities Unit (PAU) of the United Nations Economic Commission for Europe (UNECE) in Geneva, a system of nationally comparative surveys and contextual databases has been developed, which aims at improving the knowledge base for policymaking. The Generations and Gender Programme (GGP) is a unique data-collection effort covering the entire adult age range that is being carried out in a wide range of countries, including non-Western nations (United Nations Economic Commission for Europe, 2007). The GGP is ideally suited to empirically address questions on intergenerational relationships in ageing societies — taking people of all ages into consideration, explicitly considering interdependencies between generations and between men and women in families and allowing cross-national and longitudinal comparisons.

This report details selected findings from MULTILINKS (<http://www.multilinks-project.eu/>), a research programme funded through the Seventh Framework of the European Commission in which GGP-data are analysed. This research programme examines:

- (a) Multiple linkages in families (e.g., transfers up and down family lineages, interdependencies between older and younger family members);
- (b) Multiple linkages across time (measures at different points in time, at different points in the individual and family life course); and
- (c) Multiple linkages between, on the one hand, national and regional contexts (e.g., policy regimes, economic circumstances, normative climate, religiosity) and, on the other hand, individual behaviour, well-being and values.

PART II

THE DEMOGRAPHY OF INTERGENERATIONAL FAMILY RELATIONSHIPS



A. Multiple family generations

The conventional portrayal of family change under the influence of demographic trends is that the extension of life and the drop in birth rates result in “beanpole” families with relatively many vertical ties and relatively few horizontal ties (Bengtson, 2001). Contrary to popular belief, vertically extended families with four or five generations alive at the same time are not the norm (see figure 1). The majority of adults are members of three-generation families. Increased longevity and postponed childbearing have opposing effects on

the generational structure of families (Matthews & Sun, 2006; Watkins, Menken & Bongaarts, 1987). The extended lifespan means, on the one hand, that older family members are living longer than they did in the past, which in turn suggests that three, four or even five generations of family members may be alive at the same time. Delayed childbearing means, on the other hand, that the age gap between generations is relatively large, which in turn reduces the likelihood that multiple generations are alive at the same time.

Figure 1
Adults aged 20–80, by number of family generations, GGP-countries

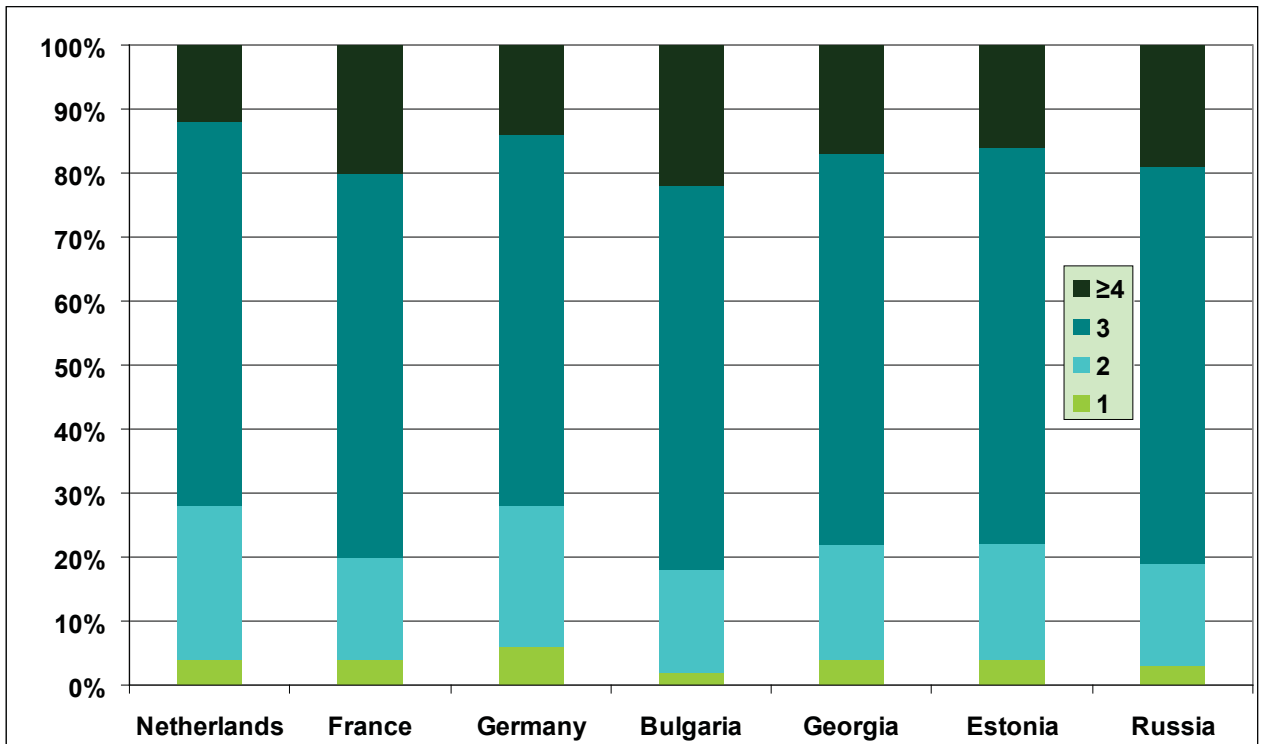


Figure 2
Mean number of descending family generations, GGP-countries

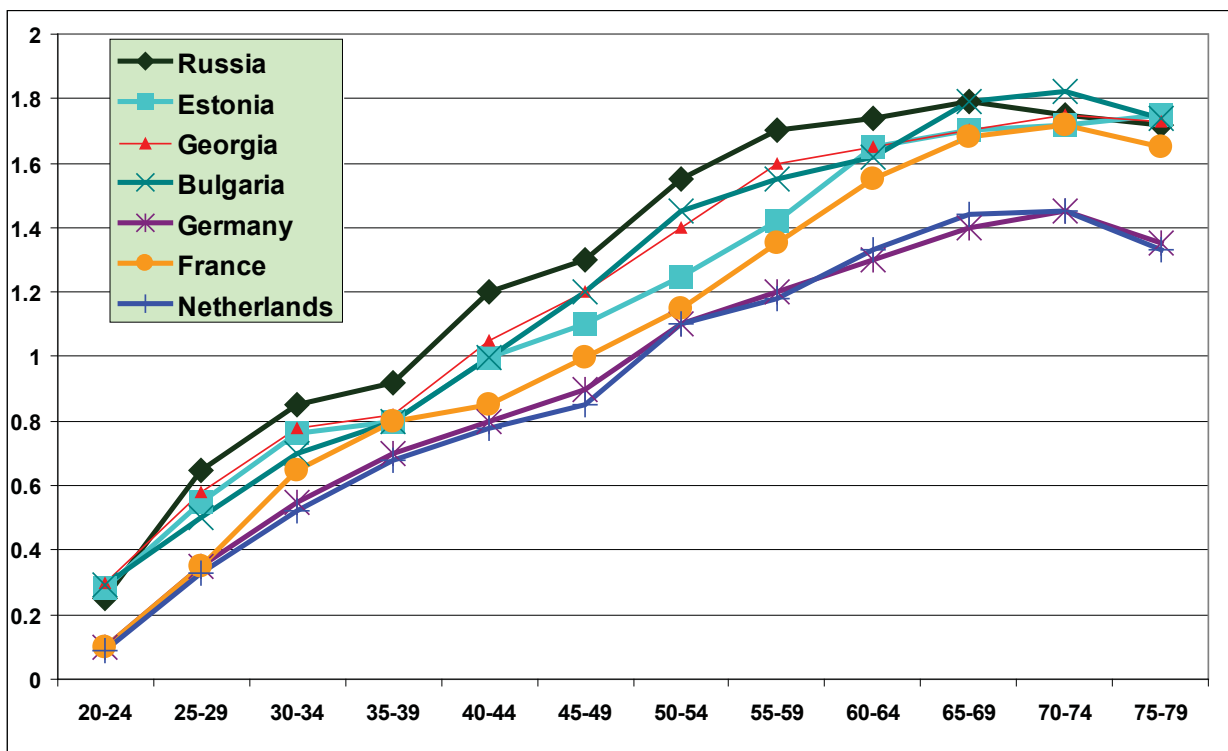
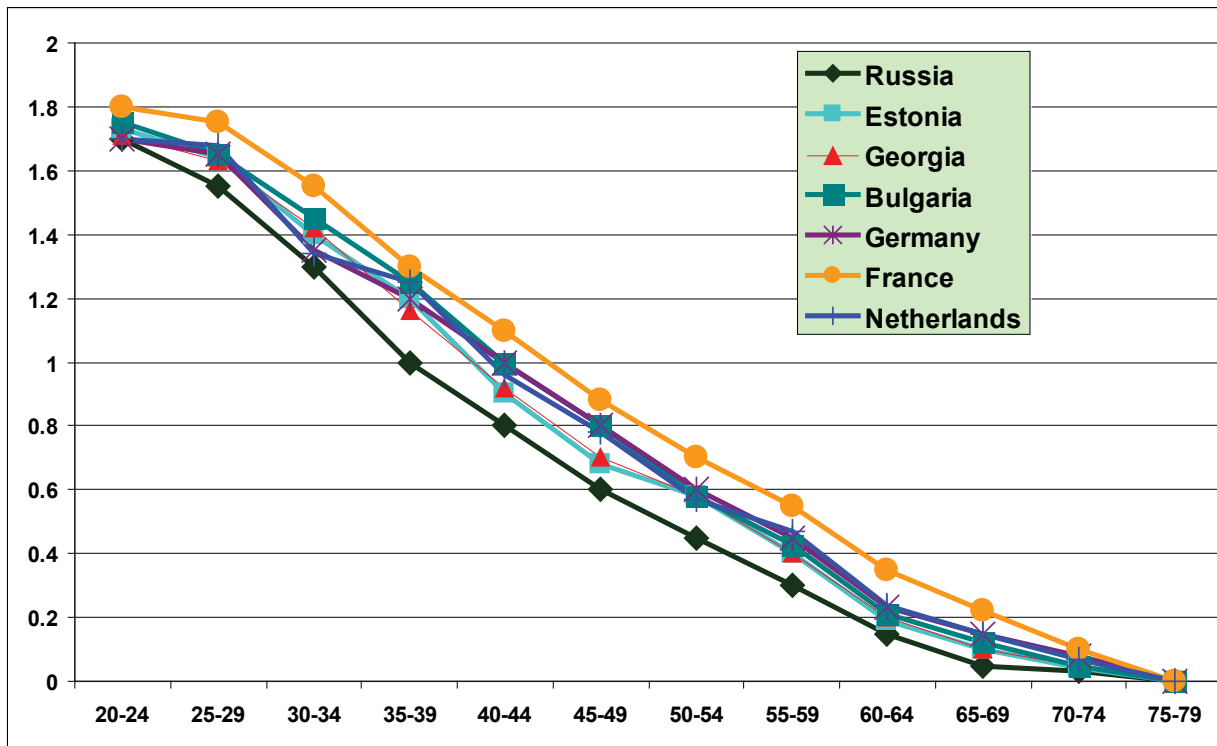


Figure 3
Mean number of ascending family generations, GGP-countries



GGP-data make it possible to examine the opposing effects of increased longevity and postponed childbearing on the generational structure of families. For example, figure 1 shows that the proportions in one-, two-, three- and four-generation families are virtually identical in France and in Russia. The underlying demographic processes are quite different, however, as is illustrated in figures 2 and 3. In France, where people tend to live long lives, adults have relatively many ascending family generations. In Russia, where people tend to have children at a young age, adults have relatively many descending family generations.

B. The sandwich generation

Research gives little credence to the metaphor of the “sandwich generation”, the men and women caught between simultaneous responsibilities for their parents and children (Agree, Bissett & Rendall, 2003; Dykstra & Komter, 2006; Rosenthal, Martin-Matthews & Matthews, 1996). Adults typically occupy middle-generation positions between the ages of 30 and 60. This is not a period in life when both young children and elderly parents are likely to need care simultaneously. For those in the younger

part of the age-range (i.e., those with childcare responsibilities), parents are not at high risk of frailty. For those in the older part of the age range (i.e., those that might be caring for their parents), their children will generally be leading independent lives already. Though researchers have repeatedly demonstrated that the metaphor of a sandwich generation juggling care commitments towards parents and children is clearly a misconception of midlife, it continues to figure prominently in public and policy debates.

Whereas the literature on the middle generations typically considers transfers upwards to ageing parents and downwards to children and grandchildren, it tends to disregard transfers received from older and younger generations. Yet, older generations often serve as significant sources of support and help for young families, through financial transfers, caring for young children and provision of practical help (Albertini, Kohli, & Vogel 2007; Attias-Donfut, Ogg & Wolff, 2005). In addition, young adults should not be solely looked upon as dependants, but also as givers of support and care to their parents and grandparents.

C. Vertical deprivation

Little attention has been paid to middle generation individuals who are “vertically deprived” in the sense that they have no children or grandchildren, or no surviving parents or grandparents (Connidis, 2010; Dykstra & Hagestad, 2007). Moreover, whereas an examination of childbearing and mortality patterns

informs us about the existence of biological kin, an examination of divorce and separation provides insight into a different form of vertical deprivation, that is, having severed ties. Men are more likely to have broken family ties than women (Dykstra, 1997; Kalmijn, 2007; Kaufman & Uhlenberg, 1998; Lin, 2008).

INTERDEPENDENCIES BETWEEN OLDER AND YOUNGER FAMILY MEMBERS



A. Opportunity structure

Geographic proximity facilitates face-to-face contact, which in turn increases the likelihood of exchanges of help in kind (Soldo & Hill, 1993). Frequent face-to-face contact not only reduces the costs of giving, but also helps to make support providers aware of recipients' needs. Exchanges of financial support are less affected by distance because they do not require interaction in person (Litwak & Kulis, 1987).

Intergenerational co-residence (i.e., adults living with their parents) is among the strategies that can be adopted to organize support, economic and otherwise.¹ There are large variations across Europe in the rate of intergenerational co-residence, reflecting historical, cultural and socio-political differences (Billari, 2004; Hank, 2007;

¹ The centrality of intergenerational co-residence was evident in the reports of the delegates reporting on intergenerational policies in Armenia and Kyrgyzstan.

Saraceno, 2008; Tomassini, Glaser, Wolf, Broese van Groenou, & Grundy, 2004). The prevalence of co-residence of older parents with their children is lowest in the Scandinavian countries and the Netherlands, highest in the Mediterranean and South-East European countries, while intermediate levels are reported for Central Europe. Co-residence patterns provide little insight into the question of who is supporting whom. Most adults in co-residential arrangements have always lived with their parents.

B. Normative obligations

Family obligations are generalized expectations about family members' responsibilities for each other (Finch & Mason, 1990). They are socially shared and have a normative component. Not only do they reflect the cultural climate in which people live, but also the individual circumstances in which they find themselves (Daatland & Herlofson, 2003; Finley, Roberts, & Banahan,

1988; Gans & Silverstein, 2006). Family obligations are of interest because they are predictive of support behaviour: they predispose people to behave in a certain way. Elderly American parents who strongly agreed with the view that family members should support each other were found to provide their children with more practical and financial help than parents who did not share this view (Lee, Netzer, & Coward, 1994). Another American study showed that young adults who felt highly responsible for the well-being of their parents gave their parents more practical support than young adults with a weaker sense of responsibility (Stein, Wemmerus, Ward, Gaines, Freeburg, & Jewell, 1998). Research in the Netherlands has shown that the more strongly older adults and their adult children felt that children and parents should support each other, the more instrumental support the parents received (Klein Ikkink, Van Tilburg, & Knipscheer, 1999).

Family obligations are also of interest because they serve as a source of information for policymakers (Van Bavel, Dykstra, Wijckmans, & Liefbroer, 2010). The answers to questions about people's wishes

for care and about the types of care people are prepared to give, provide insight into the extent to which policy measures are in keeping with public attitudes. They also offer tools for developing policy that enables or promotes the application of personal preferences.

Is there correspondence between public opinion and policies? Support for norms of family obligation tends to be lower in generous welfare States (Daatland & Herlofson, 2003).² This pattern is observed in figures 4 and 5, which show the strength of feelings of filial obligations among younger and older adults in different GGP-countries. Figure 4 measures responses to the statement, "Children should take responsibility for caring for their parents when their parents are in need". Inhabitants of East European countries are more likely to endorse that statement. A stronger east-west contrast emerges

² The delegate from the Czech Republic rightfully pointed out that cause and effect are difficult to unravel here. Have weak feelings of family obligation been the basis for developing public care services, or does the availability of public care services allow people to refrain from endorsing responsibility for dependent family members?

Figure 4

Agreement with the statement that "Children should take responsibility for caring for their parents when their parents are in need" (0, strongly disagree; 4, strongly agree), GGP-countries

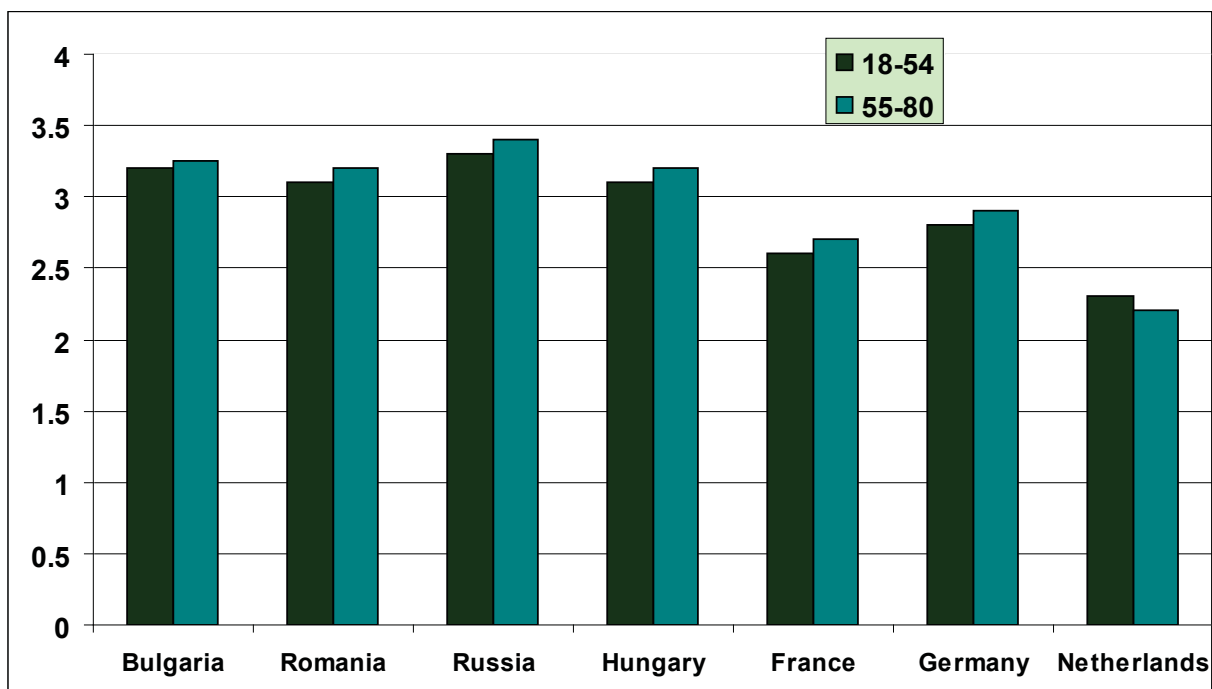
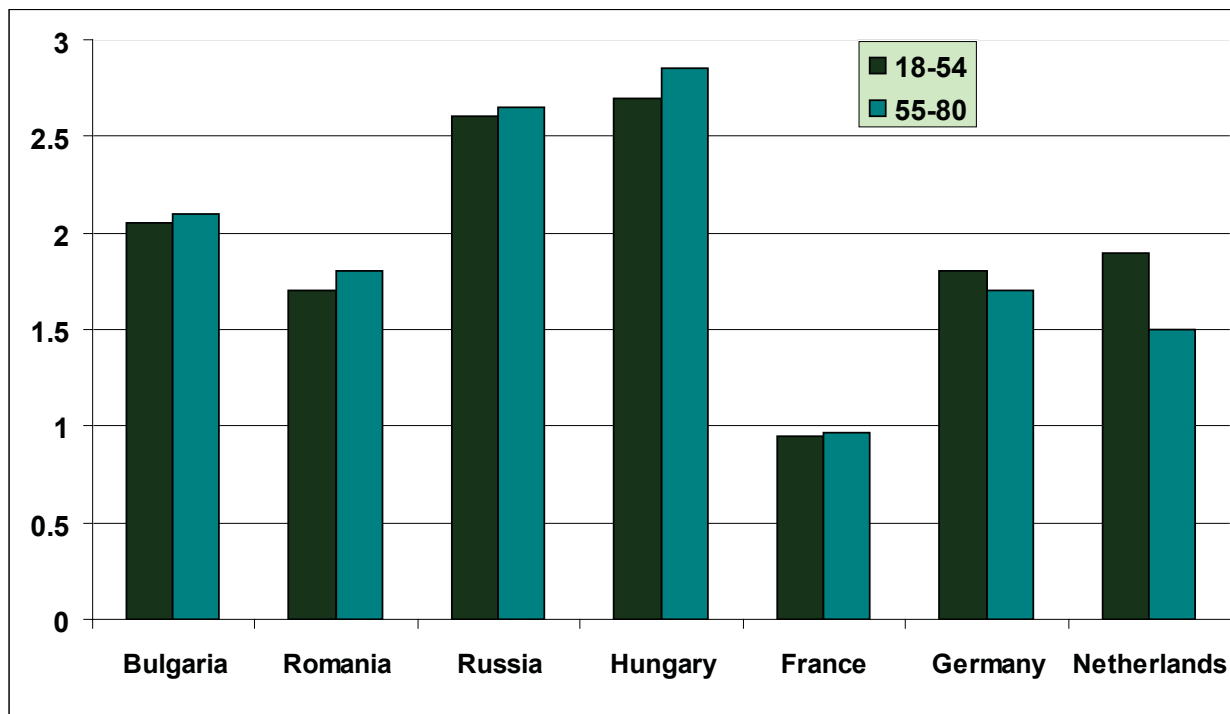


Figure 5

Agreement with the statement that “Children should adjust their working lives to the needs of their parents” (0, strongly disagree; 4, strongly agree), GGP-countries



in reaction to the assertion “Children should adjust their working lives to the needs of their parents” (figure 5). The latter alludes to greater commitment and sacrifice on the part of children. Given the more limited public welfare system in Eastern as opposed to Western European countries, it should not come as a surprise that Bulgarians, Russians, Romanians and Hungarians more strongly believe that it is important to provide help to family members in need than do the Dutch, Germans and French.

Intergenerational interdependencies are also formalized in family responsibility laws. Maintenance obligations both upwards and downwards are quite widespread in Europe and, depending on the country, involve differentiated sets of relatives and generational levels (Saraceno & Keck, 2008).

C. Actual exchanges

Patterns of exchange in families tend to be described in terms of a north-south gradient. Intergenerational transfers of time and money among non-co-resident family members tend to be less frequent in the Nordic than in the Southern European countries, with the Continental European countries being somewhere in the middle (Albertini, Kohli and Vogel, 2007;

Haber Kern & Szydlik, 2010; Ogg & Renaut, 2006). Earlier work has rarely included East European countries, where co-residence of generations is widespread.

Compared to previous data-collection efforts, the GGP has the advantage that it includes East European countries and has information on exchanges with family members both in and outside the household. Figure 6 shows the proportion of adult men and women who answered “yes” to the question “Over the last 12 months, have you given [your mother and/or father] regular help with personal care such as eating, getting up, dressing, bathing, or using toilets?” Of the entire adult population, fewer than 5 per cent are involved in the provision of personal care to parents. The likelihood of providing personal care to parents is higher in East European than in West European countries, but the cross-national differences are not large. Figure 7 shows the proportion of adult men and women who answered “yes” to the question “Over the last 12 months, has [your mother and/or your father] talked to you about [his/her/their] personal experiences and feelings?”, which is an often-used measure of emotional support. Taking all countries together, approximately 11 per cent of adults emotionally

supported their parents in the past year. Clear east-west differences are not observed.

Figures 6 and 7 underscore the gendered nature of exchanges in families: daughters tend to be more heavily involved than sons in providing care, domestic assistance and emotional support to ageing parents. Gendered roles stressing daughters' kin-keeping and daughters' presumed expertise in carrying out, what their societies regard as typically feminine tasks related to care giving, are among the underlying mechanisms (Gerstel & Gallagher, 2001; Horowitz, 1985).³

The direction of intergenerational support flows is primarily downward. Parents become net beneficiaries of help only at an advanced age. The "substitution" hypothesis — the view that public transfers crowd out private transfers — has received little empirical support in studies of Western

welfare systems. More support has been found for the "complementarity" hypothesis, indicating that generous welfare States enable families to redistribute their resources and to provide the kind of care that they are best equipped to provide (Haber Kern & Syzdlík, 2010; Kohli, Kunemund, Motel, & Syzdlík, 2000; Lowenstein & Daatland, 2006; Motel-Klingebiel, Tesch-Roemer, & Von Kondratowitz, 2005).

³ The delegate from Sweden described measures that are being introduced by the national Ministry of Health and Social Affairs to get more men interested in pursuing careers in elderly care. The measures will of course not only benefit men, but also women working in care services and the health field. They include the introduction of minimum skill requirements, a nationally recognized job title and career specializations, such as in caring for patients suffering from dementia, palliative care, rehabilitation, and meals and nutrition.

Figure 6
Proportion of men and women aged 18–80 providing personal care to parents, GGP-countries

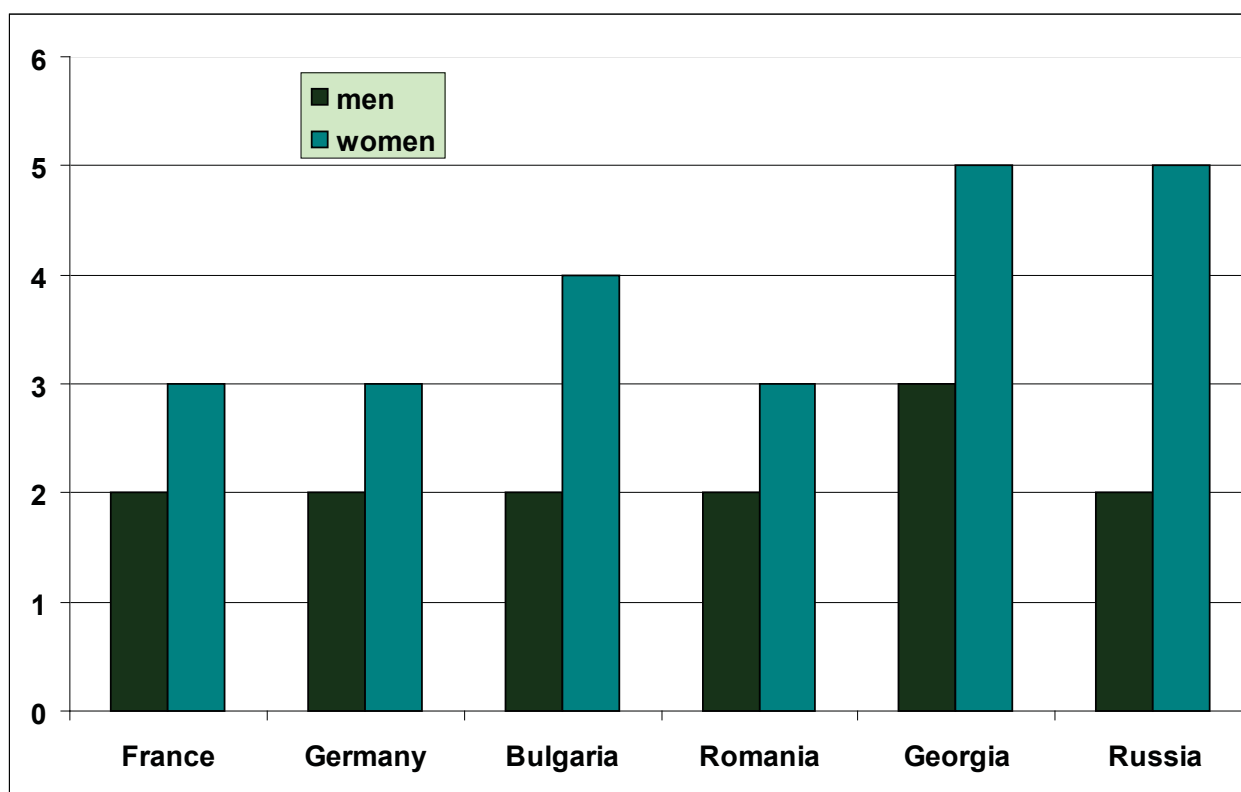
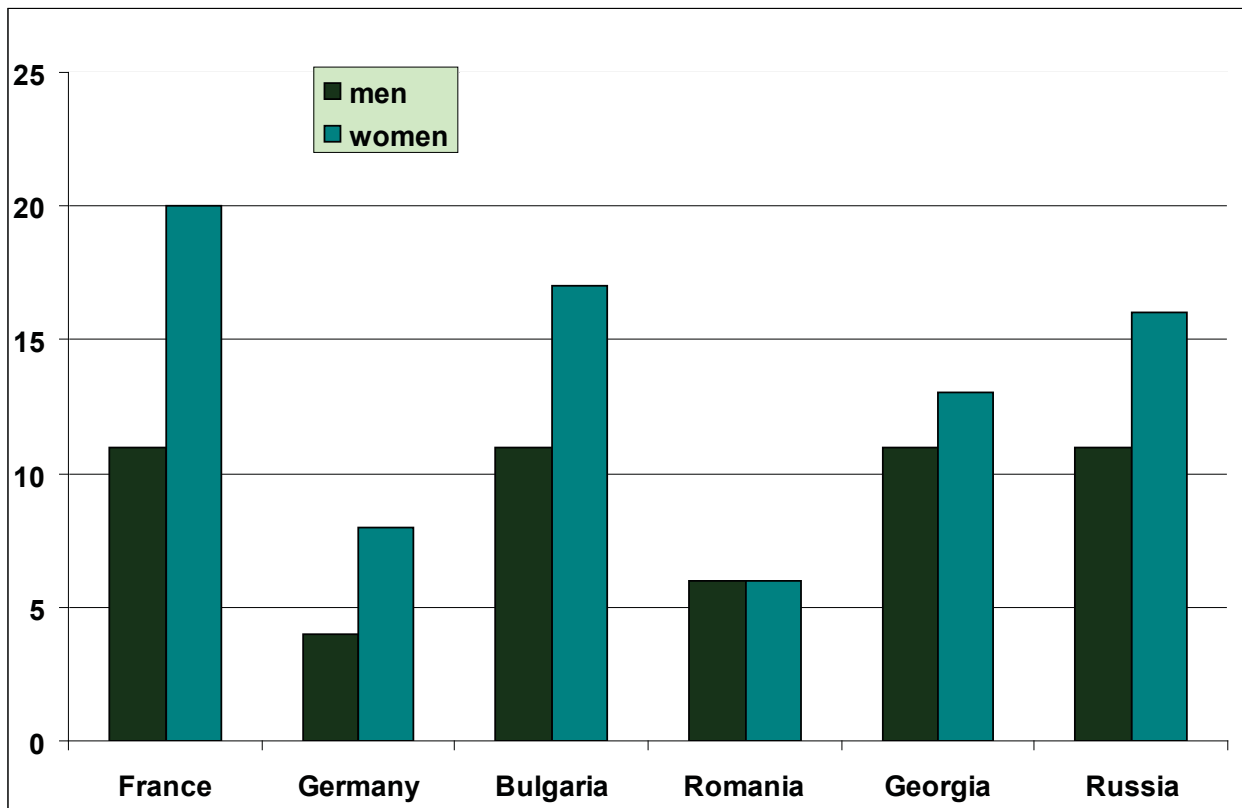


Figure 7

Proportion of men and women aged 18–80 providing emotional support to parents, GGP-countries



GENDERED INTERGENERATIONAL REGIMES



A. Three patterns in legal and policy arrangements

To understand to what degree country-specific institutional frameworks support the desire to be responsible towards one's children and frail old parents and/or support individual autonomy,⁴ thereby partially lightening intergenerational dependencies and the gender division of labour, three patterns in legal and policy frameworks have recently been distinguished (Saraceno, 2010):

(a) Familialism by default: no publicly provided alternatives to family care and financial support;

⁴ The Portuguese delegate emphasized that caring for children and caring for frail elderly persons should not be treated as separate policy issues. The split between policy communities addressing the young and their families and those focusing on the old, have led to a neglect of similarities and interdependencies between young and old. In pursuing careers in elderly care. The measures will of course

(b) Supported familialism: policies, usually through financial transfers, support families in keeping up their financial and care responsibilities;

(c) Defamilialization: needs are partly answered through public provision (services, basic income).

This categorization goes beyond the public/private responsibilities dichotomy, showing that public support may both be an incentive for and lighten private, family responsibilities (Saraceno, Keck, & Dykstra, 2009). Generous parental leaves support parental care and, in the case of the presence of a father's quota, support the caring role of fathers, thus de-gendering family care while supporting the "familialization" of fathers (Brandth & Kvande, 2009). Childcare services instead lighten — without fully substituting — parental care and education responsibilities. At-home care, day care or institutional services

for the frail elderly partly substitute for family care. The same occurs when payments for care for the frail elderly partly substitute for family care. The same occurs when payments for care can only be used to hire someone in a formal way. Non-earmarked payments for care support informal family care but also encourage recourse to the informal sector for paid caregivers, as is happening in some Southern European countries (Ayalon, 2009).⁵

B. Legal and policy arrangements are not neutral

The packaging of gendered intergenerational obligations varies greatly across countries, as it has varied across time, shaping different contexts in which intergenerational family relationships are played out. Legal norms and social policies are not neutral. They impose dependencies that limit the autonomy of men and women, or on the contrary, support the choice to assume intergenerational obligations (Leira, 2002; Saraceno, 2010). For instance, long parental leaves might strengthen the gendered nature of family care, given the prevalent gender division of care tasks and the differential wages of men and women. They might also further polarize women of different social classes and income resources because women who opt for extensive leaves tend to have poorer prospects

⁵ *The Italian delegate described several policy measures aimed at improving the situation of migrants providing care in private households.*

on the labour market. However, generously paid leaves, with a reserved father's quota, support the desire to provide care to family members and at the same time can help de-gender it (Brandt & Kvande, 2009). The issue therefore is not long leaves versus services, but rather the balance between the two, together with flexibility in the use of leaves.

As another example, childcare services are not only a conciliation measure helping parents (mothers) to remain in the labour market. Good quality services are also a resource for children themselves, helping them to widen their relationship with other children and other adults in an ageing society and to overcome the impact of social inequalities on cognitive development (McLanahan, 2004).

With regard to elder care, over-reliance on the family via either supported familialism or familialism by default crystallizes the gender division of labour also in the third age (Saraceno, 2010). It may prove inefficient in the middle and long term, since population ageing — combined with women's labour market participation, marriage instability, low fertility and childlessness — is creating a caring deficit within families. Furthermore, exclusive or primary reliance on family care is in contrast with the goals of higher women's labour force participation and longer working lives for both men and women (Esping-Andersen, 2009).

PART V

POLICY IMPLICATIONS



A number of messages for policymakers emerge from the previous overview. The first is that there is little evidence of “moral hazard” (Wolfe, 1989), the notion that people are less inclined to care for family members if public provisions are available. Empirical studies have repeatedly failed to find that provisions of the welfare State crowd out family care. With regard to elder care, specialization emerges, with professional providers taking over the medically demanding and regular physical care and family providing the less demanding, spontaneous help (Brandt, Haberkern, & Szydlik, 2009). With regard to “downward” family support, monetary welfare provisions enable family members to respond to those with the greatest financial needs (Schenk, Dykstra, & Maas, forthcoming).

A second message is that interdependencies between generations and between men and women in families are built and reinforced by the legal and policy arrangements in a particular country.

Laws define the relationships of dependence and interdependence between generations and gender, whereas policies reward or provide disincentives for particular family patterns. A consideration of legal norms and public policies draws attention to cultural specificity. Countries differ in their understanding of “proper” intergenerational family relations (Saraceno, Keck, & Dykstra, 2009). Policymakers should critically examine the ways in which caring responsibilities for the young and the old have been allocated between the family and the collectivity. To what extent do country-specific institutional frameworks impose dependencies which limit the autonomy of individuals? To what extent do they support the choice to assume intergenerational obligations? Such a critical examination calls for a “holistic” approach to policymaking: a serious consideration of the ways in which public family provisions (or the lack thereof) create differential opportunities for individual autonomy for young and old, men and women.

A third message is that national policies should seek to support intergenerational care regimes without reinforcing social class inequalities and gender inequalities. One of the issues is whether policies should involve payments for care, (paid) leaves, or the provision of care services. The policy measures have different implications that need to be considered carefully. For example, when public support is offered in money rather than in kind, trade-offs between using it to buy services or to keeping it for the family budget while providing care directly are different for families in different socio-economic circumstances (Saraceno, 2010). The strategy of staying at home to provide care is more likely to be adopted by members of the working class (in practice, working class women), reducing their ability to remain in the labour market and hence creating the conditions of old-age poverty for themselves. Another example pertains to a father quota in paid leave schemes. A “use it or lose it” criterion promotes equal sharing of parenting responsibilities between men and

women (Organisation for Economic Co-Operation and Development, 2007).

The fourth message is that women’s integration in the labour force has taken place without fundamental changes to the formal and informal rules associated with the breadwinner model, which served as the basis for the organization of the labour market and the welfare State (Esping-Andersen, 2009). The structural discrepancy between the role of the breadwinner model in the organization of paid work and unpaid care, on the one hand, and the increased labour force participation of women, on the other hand, is the source of tensions and stress, as witnessed in dropping fertility rates, marital instability, intrafamily conflict and even emotional burn out. To help resolve this discrepancy, policies should consider how to get men more involved with caring. Men should not be discouraged from taking care leaves, and men should come to realize that intergenerational responsibilities throughout their working life are the norm, not the exception.

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