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Intergenerational linkages in the family: The organization of caring and financial responsibilities: Summary of results

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Abstract.

This report summarizes the main results achieved by the Work Package 7: “*Intergenerational linkages in the family: The organization of caring and financial responsibilities*”. The general objective of this work package was to investigate how policy contexts shape the organization of caring and financial responsibilities for young and old family members, and consequently family well-being. Caring pertains to practical help, personal care, and emotional assistance. Indicators of family well-being are the psychological and physical health, functioning, and financial well-being of its members. To achieve this general objective, we focused on five specific objectives. We studied: (1) conditions under which co-residence is a preferred or a defaults living arrangement; (2) transfers “up” and “down” family lines and their implications for family well-being; (3) norms of family obligation and actual giving and receipt of financial support and care; (4) implications of different policy arrangements for inequalities in and between families; and (5) the effect of recent economic crisis on intergenerational dependencies. The outlined research projects were executed comparing different European countries with special emphasis on Eastern European countries.

Keywords: intergenerational solidarity, co-residence, well-being, norms of filial obligation, gender, policies, economic crisis.

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1. General objective of Work Package 7

The general objective of Work Package 7 was to investigate how policy contexts shape the organization of caring and financial responsibilities for young and old family members, and consequently family well-being. Caring pertains to practical help, personal care, and emotional assistance. Indicators of family well-being are the psychological and physical health, functioning, and financial well-being of its members. We focused on five specific objectives to achieve this general objective.

The first specific objective pertained to intergenerational co-residence, and more particularly, conditions under which co-residence is a preferred or a defaults living arrangement. Van den Broek and Dykstra (2015) examined child-parent residential proximity in Germany, whereas Haragus (2015) focused on the determinants of co-residence in Bulgaria and Romania.

The second specific objective pertained to transfers “up” and “down” family lines and their implications for family well-being. Abramowska-Kmon, Kotowska and Latkowski (2015)

compared the situation of the so-called “sandwich generation” across various European countries, including Central and Eastern European countries.

The third specific objective pertained to norms of family obligation. Muresan and Haragus (2015) examined how such norms associate with actual giving and receipt of financial support. Van den Broek, Dykstra and Van der Veen (2015) complemented this study by looking at how care ideals (e.g., how the care for the elderly should be organised) have evolved in the Netherlands over time, and on residential care and care to community-dwelling parents (Van den Broek and Dykstra, 2015). Djundeva and colleagues looked at the relationship between receiving instrumental support in late parent-child relationships and parental depression (Djundeva, Mills, Wittek and Steverink, 2015).

The fourth specific objective pertained to policy arrangements. More specifically, Dykstra (2015) examined the implications of different policy arrangements for inequalities in and between families.

The fifth specific objective pertained to the economic crisis. Mari-Klose and Escapa Solanas (2016) studied whether financial setbacks and economic malaise have had an impact on intergenerational dependencies in families in Spain.

Below, for each specific objective, we summarise the results that were obtained over the course of the Families and Societies project. We also offer suggestions for further research.

2. General objective of Work Package 7

The first specific objective of the WP7 was to study the conditions under which intergenerational co-residence is the preferred living arrangement and those under which it is the living arrangement by default. The classic model on intergenerational family solidarity emphasizes the role of opportunity structure for exchanges of help and resources between parents and adult children (Bengtson & Roberts, 1991). This so-called ‘structural intergenerational’ solidarity is closely related to the geographic proximity of family members, and scholars have shown that exchanges between parents and adult children are negatively associated with the physical distance (e.g., Knijn & Liefbroer, 2005; Stuifbergen, Van Delden, & Dykstra, 2008). While geographic proximity facilitates exchanges, intergenerational co-residence can be seen as an ultimate form of structural intergenerational solidarity. Not surprisingly, research shows that exchanges of support between co-residing parents and children exceed the exchanges of parents and children who do not share a household (e.g., Campbell & Martin-Matthews, 2000; Hank & Buber, 2009), and

intergenerational co-residence has been seen as a strategy that can be adopted to organize support.

There are large variations across Europe in intergenerational co-residence, reflecting historical, cultural and socio-political differences. The occurrence of intergenerational co-residence is the lowest in Western Europe, while it is more prevalent in South-East European countries (Hank, 2007). Despite its prevalence in Eastern Europe, the issue of intergenerational co-residence has not received much scholarly attention. The two studies undertaken within the WP7 extend our understanding of residential choices in Western and Eastern Europe. While the first one focuses on the residential proximity of parents and children in Germany, the second examined co-residence in Bulgaria and Romania.

2.1. Child-parent residential proximity in Germany

Van den Broek and Dykstra (2015) explored the links between family composition - particularly the presence or absence of a sibling - and the constraints on residential choice. Following earlier studies, the authors assume that the geographic proximity between parents and children is negatively related to presence of siblings (e.g. Hank, 2007; Malmberg & Pettersson, 2007; Rainer & Siedler, 2009; Van den Broek, Dykstra, & Schenk, 2014). They use the *geography of the family* thesis (Konrad, Künemund, Lommerud, & Robledo, 2002), which posits that geographic proximity is more highly valued by older parents than by adult children, and when considering their parents' preferences children constrain their residential choice. However, if a sibling is present, a child may feel released from this responsibility because the sibling may choose to live close to the parent. The *geography of the family* thesis postulates that this effect will be especially strong for firstborn children. This birth order element is controversial, however, as other scholars have failed to replicate it (Rainer & Siedler, 2009; 2012).

The authors also consider the regional context and assess whether the regional factors also shape the difference between only children and children with siblings in the distance to their parents. The analysis focuses on the level of urbanization, regional economic performance and the availability of beds in residential care settings. Data from the German Ageing Survey were used, enriched with indicators at the district level (NUTS3).

The results show that the differences between only children and children with a sibling manifest themselves most clearly when parents are in need of a child in close proximity due to frailty. Children with siblings also live farther away from their parents than only children when parents live in a region with a low level of urbanization. Contrary to what the *geography of the family*

thesis suggests, the study does not provide support for the birth order hypothesis: children with a younger sibling do not appear to live farther from their parents than children with an older sibling. Given that Rainer and Siedler also did not find a birth order effect when they analysed data from Germany (2009) and from ten different European countries (2012), the birth order element of the *geography of the family* may be questioned. Gender composition does not appear to shape the sibling effect on parent child-distance either. While gendered free-riding patterns among siblings have been noted with regard to caregiving to older parents (Tolkacheva, Broese van Groenou, & Van Tilburg, 2010), children with a sister do not appear to live farther away from their parents than their counterparts with a brother. The analyses did not provide support for the hypothesis that the positive association between having a sibling and parent-child distance is weaker when parents live in regions with a better economic performance. Neither was evidence found for a weaker sibling effect on parent-child distance when parents lived in regions where beds in residential care settings were widely available.

The study allows the authors to conclude that family composition impacts children's residential choice and that the extent to which it does depends on parental characteristics and the regional context. The current analyses indicate that only children constrain their residential choice more strongly than children with a sibling, particularly when parents have severe health limitations and when the parental home is in a region with a low level of urbanization. As Rainer and Siedler (2009) have shown, these stronger constraints may very well result in sub-optimal occupational achievement. This makes the differences in the strength of constraints on residential choice across children a form of social inequality.

2.2. Intergenerational co-residence in Romania and Bulgaria

The study by Haragus (2015) addresses the issue of intergenerational co-residence, and focuses on its determinants in two Eastern European countries—Romania and Bulgaria, two countries with high incidences of co-residence. In both countries, high levels of co-residence have been associated with a historical pattern of family formation, a high incidence of extended and multigenerational households, and the availability and affordability of housing. A recent European Commission report on youth showed that co-residence still prevails in both countries, and that the main reason for young people to remain longer in the parental home is linked to economic hardship and a lack of enough affordable housing available (Eurostat, 2012).

Haragus adopted the theoretical model proposed by Szydlik (2008) which posits that opportunity, needs and family structures of both the adult child and the parents condition intergenerational solidarity and also, co-residence. The author distinguishes different life

course trajectories that might have led to co-residential arrangements. Co-residence may occur in a parent's house (1) when the child has never left the parental home or (2) when the child has left the parental home and moved back. A residential transition can also take a different form, (3) when the parents move in with the child. These different trajectories into intergenerational co-residence plausibly have different determinants. The author expected the children's needs structure (e.g., unemployment, weak socioeconomic position) to be associated with co-residence in the parental house, and parents' needs (e.g., absence of the partner and health problems), as well as the children's opportunity structure (e.g., time availability and financial resources), to be associated with co-residence in the child's house.

The research question was studied using the first wave of the Gender and Generation survey. The descriptive results show that almost one quarter of Romanians in the sample and more than one third of Bulgarians share a dwelling with their parent(s). In both countries, the highest proportions of those co-residing are persons who had always been living with their parents. Comparing figures for adult children living in parents' household (co-residence as a form of support of the young) with figures for adult children whose parents moved in with them (co-residence as a form of support of the old), reveals that co-residence in the studied countries takes a form of downward solidarity.

The results of multivariate analyses show that lower education status of the child is related to a higher likelihood of co-residence in parents' house and never leaving parental home. At the same time, persons with the lowest education have the least chances of returning into parental home—these persons may not have parental resources to go back to. Contrary to the expectations, unemployment (e.g., an indicator of higher support needs) does not lead to higher odds of co-residence in neither of the two countries, while lower income increases the likelihood of having never left parental home only in Bulgaria. Parents' needs are less associated with intergenerational co-residence in Bulgaria: limited ability to perform everyday activities increase the odds of co-residence only when the mother is in this situation (and father alive). Contrary to the expectation that adult child's needs would show stronger effects on co-residence in the parents' house, analyses revealed that, in fact, the child's family situation is an important determinant of this living arrangement—in both countries acquiring an independent dwelling is strongly connected with marriage, whereas other relationship forms strongly increase the odds of co-residence, especially the case of those never married.

When co-residence in the adult child's home is considered, lower educated, unemployed and those with low income are least likely to take their parents into their home, stressing the importance of the opportunities. Time availability and financial resources of the parents (e.g.,

being retired) increase the odds of co-residence in child's house. As expected, parents' needs are also important when co-residence occurs in the child's home, but again, in Bulgaria only mother's needs matter. Having only one parent alive or with limited abilities to perform daily activities increase the likelihood of co-residence in child's home.

This study brings valuable insights on the issue of intergenerational co-residence in the two eastern European countries. By adopting adult child's perspective, the author investigated how adult children's and parents' needs and opportunities determine this living arrangement. Another valuable contribution is the approach of different co-residential situations (as the result of never having left, having returned or having taken parents into child's house) and the interplay of child's and parents' role in each situation.

2.3. Future research

Although the current studies shed more light on intergenerational co-residence in Eastern Europe, many questions remain unanswered. In their work, Van den Broek and Dykstra (2015) focused exclusively on Germany, a country where residential mobility is relatively low in comparison to other OECD countries (Caldera Sánchez & Andrews, 2011) and the majority of children leaving the parental home remain within 10 kilometres from their parents (Leopold, Geissler, & Pink, 2012). Future research is needed to assess whether the patterns found in this study also apply to countries where residential mobility is higher.

Moreover, future studies could assess whether having more than one sibling may impact parent-child distance under specific circumstances, for instance when the parental home is located in an area with a low level of urbanization or when the parent has severe health limitations. Due to the cross-sectional nature of the analyses, the Van den Broek and Dykstra study could not determine to what extent the differences between only children and children with siblings can be attributed to only children's inclination to remain close to the parental home or to a decision to move back to a location close to their parents. Plausibly, both mechanisms play a role. Longitudinal data would allow determine the exact mechanism at play. When proximity of family members is considered, migration of young generation needs to be taken into account. In the era of increasing migrations, mainly coming from Central and Eastern European countries, maintaining intergenerational ties across borders can be strenuous, challenging the traditional family models based on strong intergenerational solidarity and co-residence. How those migrants maintain the ties with their parents after they moved to another country, and whether they offer them support, is largely unknown.

3. Transfers “up” and “down” family lines and their implications for family well-being

Ageing of populations of across Europe has made care provision for the frail older persons one of the policy makers’ priorities. While relatively many studies discuss various aspects of intergenerational care in developed market economies, much less is known about Central and Eastern Europe. Abramowska-Kmon and colleagues (2015) included this region in a comparative analysis that offers new insights into care provision within the family and the possible impacts of different welfare regimes. In doing so, special attention was paid to the so called „sandwich generation”, i.e. persons offering care both up and down the family line. This focus is justified by the belief that the so-called “generational squeezes” will intensify in the future due to advancing population ageing (e.g. de Jong Gierveld & Dykstra, 2006; Grundy & Henretta, 2006; Saraceno, 2008). Abramowska-Kmon and colleagues evaluate how the sandwich generation (persons aged 45/50-69) cope with the double pressure of support responsibilities towards the young and the old. Moreover, the authors investigated how the subjective well-being of care givers is affected by providing care.

Data from the first wave of the Generations and Gender Surveys for seven countries (Bulgaria, France, Italy, Lithuania, Norway, Poland, Romania) were used. Although the selection of countries was driven by the data availability and comparability, the countries selected cover different regimes of intergenerational support according to the typology by Saraceno & Keck (2010). The focus was on micro level factors (needs for support, opportunity, and personal characteristics (Albertini, Kohli, & Vogel, 2007)) and on the impact of institutional settings. Several logistic regression models were estimated to describe care provision towards older (parents/ grandparents) and younger (grandchildren) generations. Moreover, support provided to older parents (mother and father separately) by adult children was modelled. The likelihood of being engaged in care was attributed not only to individual characteristics of the respondents aged 45-69, but also to characteristics of parents (health status) as well as the family network and quality of the relationship between adult children and older parents. Filial obligation and involvement in care provided to other adults in need was accounted for.

The results confirmed the previous findings that squeeze of the sandwich generation is misleading, as persons aged 45/50-69 only rarely involve in simultaneous care for the parents

and the grandchildren. Rather, they support either the younger or the older generation. Other results on offering instrumental support up and down generations for the studied countries are consistent with the findings described in the literature for other countries. Age, sex, education, employment status, and living arrangements affect significantly on the probability of giving support to either the young or older generations, however the direction of the effect differ for different forms of support. For example, higher age leads to a lower probability to provide childcare, while the opposite is found for the eldercare. As expected, women prove to be giving both types of care more often than men. Similarly, education turn out to have a significant impact on care supply both towards (grand)children and (grand)parents. Respondents with education beyond primary and vocational are more likely to be careproviders. Those living alone have a lower probability caring for grandchildren, while living with others is associated with the higher chances to provide care to older generations. Being in employment reduces the likelihood of caring for grandchildren, while it is insignificant for eldercare.

The country effects reflecting impacts of welfare/care regime show that in more familialistic countries (with strong commitments to family solidarity), with weak formal care provision (Bulgaria, Italy, Lithuania, Poland, Romania), the sandwich generation tends to assist the old more than countries with a high level of de-familialisation of care (France), which is consistent with authors' expectations. Hence, familialism by default imposes more involvement of the sandwich generation in supporting older generations. Contrary to expectations, care to grandchildren is more likely in France than in Bulgaria, Italy, Romania, Lithuania and Poland, i.e. countries with considerably less developed institutional childcare.

When focusing on care transfers (instrumental support) from the adult child aged 45-69 to their parents, additional factors are taken into account (e.g. parents' health, quality of relationships, etc.). Abramowska-Kmon and colleagues (2015) found that probability of support increases with parents' age, which is linked to deteriorating health of the parent. The positive effect of being a care giver found for women is stronger when caring for a mother than a father. Moreover, and in line with expectations, more religious people (e.g., more frequently attending religious services) and those who are satisfied with their relationship with the parent, are more likely to provide care. Care incidences coexist—those engaged in caring for children and other adults are also more likely to provide care to the parent, and especially for fathers. Stronger feeling of filial responsibility and living with the parent are also associated with a higher likelihood of providing support.

The country effects are more ambiguous: only Bulgaria, Lithuania, and Poland showed higher probabilities of providing care to a parent, while other countries are estimated to be close to

France, the reference country. Hence, the family-step-in hypothesis is partially confirmed: adult children in more familialistic countries and a weak formal care provision tend to support their parents more than children in countries with de-familialised care regime.

To investigate how the subjective well-being of the sandwich generation is influenced by involvement in support provided to the grandchildren, the parent and to both groups jointly, the data from the 4th wave Survey of Health, Ageing and Retirement in Europe (SHARE) for 16 countries were used (Austria, Belgium, the Czech Republic, Denmark, Estonia, France, Germany, Hungary, Italy, the Netherlands, Poland, Portugal, Spain, Sweden, Switzerland, and Slovenia). To evaluate positive and negative consequences of giving support for the subjective well-being the authors studied both well-being and depression. The well-being variable was based on the set of 12 items from the CASP questionnaire (Control, Autonomy, Self-realization, Pleasure). The evaluation of one's life satisfaction was assessed on the basis of the level of needs realization in main domains of life important for positive emotional states. The depression was measured by 12 questions related to presence of different depression symptoms such as: depression, pessimism, wishing death, guilt, sleep, interest, irritability, appetite, fatigue, concentration, enjoyment, and tearfulness. Two linear regression models were estimated with a set of variables which referred to the care provision, individual characteristics (age, sex, level of education, partnership status, health status, employment status), a financial situation and a country.

The results are in line with those described previously in the literature. Firstly, the divide in well-being between North-Western and South-Eastern Europe was confirmed—higher levels of well-being were observed in the former part of Europe, and the lower – in the latter. Secondly, for almost all analysed control variables the authors observe opposing effects on two dependent variables – well-being and depression—which gives a coherent picture. Sex has a significant, positive impact on depression, while for the well-being the estimate is insignificant. Moreover, well-being increases significantly with age and a higher level of education. On the other hand, people in frail health and those without a partner show a lower well-being than those having a relationship. A better financial situation improves well-being. Similar portrayal as for the CASP index has been obtained for the EURO-D index referring to depression.

The main focus was the impact of caregiving on wellbeing. The authors found that those offering support to adults reported lower levels of well-being in comparison to those not engaged in caregiving at all. Contrary to that, care for the grandchildren increased notably the well-being of care givers. It is worth mentioning, that the well-being of persons “squeezed” between generations was lower in comparison to non-carers, however, this result was not

significant. These results seem to confirm previous evidence of a negative impact of care for dependent adults (mainly the older generation) on mental and physical health, and life satisfaction of carers (e.g. Kaczmarek, Durda, Skrzypczak, & Szwed, 2010; Marks, Lambert, & Choi, 2002; Schulz & Sherwood, 2008), manifested by higher levels of stress, depression and loneliness among caregivers than among non-caregivers (Wagner & Brandt, 2015). Moreover, those outcomes are in line with findings of Uhlenberg & Mueller (2003) which show that caring for grandchildren can be viewed as rewarding and can be a source of improved well-being.

This research confirms that family networks remain an important source of care to the old, especially to the parents and this regardless the welfare regime. The expected acceleration of population ageing and shrinking of the labour supply, especially in the familialistic countries, will contribute to increasing care deficits in these countries, and will put extra pressure on the sandwich generation. In addition, the results showed, that employed members of the sandwich generation are more likely to be engaged in support to the elderly than those who do not in work. Contrary to that, employment of persons aged 45-69 reduces their care provision for grandchildren. In both cases increasing labour force participation of these people, especially of women, which is demanded to combat the negative effects of population ageing, will induce more tensions between paid work and care. Hence, the main burden to be faced by the sandwich generation will result from reconciling care (for either a grandchild or for an elderly parent), family duties and a job, rather than providing care simultaneously up and down the family line. The sandwich generation in countries with poor public provision of care will be exposed to growing pressures, which decrease subjective well-being of the carer and other family members.

3.1. Future research

Although the engagement of the sandwich generation in care provision, its determinants and influence on well-being is rather well documented in the literature, little is known about whether they are prioritizing the younger over the older generations. The study performed by Fingerman et al. (2011) revealed that middle-aged individuals usually support more their adult children than older parents, but not in all families.

Also, more attention should be paid to the elderly as a source of support to other people: the feeling of usefulness to others may have a positive impact on their health, disability and mortality (Gruenewald, Karlamangla, Greendale, Singer, & Seeman, 2007), thus indirectly on their life satisfaction and quality of life. The most studies focused rather on exchanges between

the two generations at a time (adult children–older parents, parents–younger children, or grandparents-grandchildren) than on three generations relations in which the oldest generation give support.

Moreover, the size and the structure of kinship network (thus the number of potential caregivers) impacts the amount and frequency of available support (Dykstra, 2015a). There is little evidence on how the exchange of care/ time between generations affects well-being of other participants. Fyrand's (2010) review, based on several papers on relation between social relations and mental health, revealed that reciprocal imbalance in a caregiver - an elderly person relationship may cause mental distress and higher level of loneliness, and older individuals who under-benefited reported less mental distress and fewer feelings of loneliness than those who over-benefited. It seems a promising avenue to explore how these exchanges affect the well-being of all participants.

One should also bear in mind that most of the studies on care provision offered by sandwich generation, ours included, are based on cross-sectional data. However, a life course perspective would shed more light on the issues and the use of the panel data would make possible to capture the onset of care giving, its duration, their impacts on health status, stress, depression or life satisfaction and a general well-being. Moreover, having a more detailed information not only on family members living in the same household, but also on other relatives who are close to an elderly person, i.e. on kinship networks, would remarkably extend our knowledge of interdependencies between different generations within kinship networks and the exchange of time and help. With a longitudinal dataset on caregiving linked to country level characteristics would offer a more comprehensive picture of care provided and carers' well-being.

4. Norms of family obligation and actual giving of financial support and care

The WP7's work also focused on the relationship between norms of family obligation and actual giving and receipt of financial support and care. To achieve this goal three studies were executed. The first study, by Muresan and Haragus (2015), described norms of filial obligations and the relationship between norms and support provided by adult children to their ageing parents. The study was executed in seven Central and Eastern European countries (Bulgaria, the Czech Republic, Georgia, Lithuania, Poland, Romania and Russia) and two Western European countries (France and Norway). The second study, by Van den Broek, Dykstra and

van der Veen (2015), evaluated the care ideals in the Netherlands over time, while the third study, by Van den Broek and Dykstra (2016), focused on residential care and care to community-dwelling parents in 12 European countries. Djundeva and colleagues looked at the consequences of instrumental care for parental depression (Djundeva, Mills, Wittek and Steverink, 2015).

4.1. Norms of filial obligation and giving of support

The objective of the study by Muresan and Haragus (2015) was to gain a better understanding of how norms of filial responsibility influence adult children to provide support to their ageing parents and in what context this relation manifest itself most strongly. Family support can be defined as social, emotional, instrumental, and economic exchanges (Treas & Cohen, 2007) between family members. The analysis is based on the theory of intergenerational solidarity (Bengtson & Roberts, 1991), to study the interrelationship of normative and functional solidarity while controlling for structural solidarity. The notion of filial norms reflects the "generalized expectation that children should support their elderly parents at times of need", and also "duties and obligations that define the social roles of adult children with respect to their aging parent" (Gans & Silverstein, 2006, p. 961). The relationship between intergenerational support and norms has been approached by a number of studies, and a common starting point was the idea that "a potentially important explanation of intergenerational support lies in norms" (De Vries, Kalmijn & Lifbroer, 2008, p. 188). Social norms that prescribe appropriate behaviour toward family members are important because they serve as "mental maps for decisions and behaviours" (Dykstra & Fokkema, 2012, p.97). Research has shown that norms of obligation toward family members have a predictive value for the actual exchange of care.

Comparative studies indicated that filial norms are supported in Europe, but the strength of support varies across countries (Daatland & Herlofson, 2003; Lowenstein & Daatland, 2006). It has been shown that in Southern and Central European countries care is perceived as a responsibility of the family, whereas in Northern European countries obligations to care by family members are weaker (Haberkern & Szydlik, 2010). Filial and parental obligations seem to be weaker in Western than in Eastern European countries (Van Bavel et al., 2010). The interplay between social and personal value orientation is important, as Jappens and Van Bavel (2012) shown that in explaining functional solidarity the normative climate has a significant impact while the individual attitudes do not.

The authors rely on the theoretical model of intergenerational solidarity described by Albertini, Kohli and Vogel (2007) that differentiates between a micro (individual and family factors) and a macro (anything of higher order) level and between three categories of conditions: structural, institutional and cultural. Hypotheses on filial norms and country context, filial support and country context and the connection between filial obligations and support behaviour were formulated. The Generations and Gender Surveys, Wave 1 data for seven CEE countries (Bulgaria, Czech Republic, Georgia, Lithuania, Poland, Romania, and Russia) and two WE countries (France and Norway) were used. The focus is on the actual support provided to parents, considering three types of help offered in the last 12 months: 1) instrumental help: personal care provided regularly at day-to-day activities such as eating, getting up, dressing, bathing, or using the toilet; 2) financial help: giving money, assets, or goods of substantive value to parents, and 3) emotional support: listening to the personal experience and feelings of the parent. The effect of filial obligations and other control factors on the support offered to parents in the CEE region was studied by separate models for each type of support (care, emotional and financial) by means of logistic regression with a pooled data set for seven CEE countries.

The analyses show lower level of norms of filial obligation in Western European as compared to Central and Eastern European countries. Moreover, as expected, norms of filial obligation are weakening from North-East to South-West. In countries with limited publicly founded services, people display stronger norms of filial responsibilities. The filial obligation gradient is more evident for respondents who do not live with their parents.

If any kind of support to parents is considered, an inverse gradient as in the case of filial obligation is visible: countries with lower mean score of filial obligation have higher proportion of adult-children who offer any kind of support to their parents, and vice versa—countries with higher mean score of filial obligation have lower proportion of people actually supporting their parents. However, emotional support is the most common form of help offered to parents and its occurrence shows larger variation across countries.

The main focus of this study was whether norms of filial obligation play an important role in offering support to parents. Muresan and Haragus (2015) found that stronger filial norms held by adult-children increase instrumental and financial support offered to ageing parents, especially in Eastern Europe, confirming the *family-steps-in hypothesis*. With regard to emotional support, no connection with the index of filial obligation was found. Instead, those who received any kind of support from parents in the last 12 months, display higher likelihood of offering emotional support to parents. This suggests that the *exchange mechanism* plays a role

here rather than the *no-choice* idea. The models (which control for a wide range of other predictors) show that parental needs (like widowhood, health limitations or disabilities) play an important role in activating support from children.

Next to filial obligations, the current study also examined other factors that can affect support behaviour. The need of the parent (the presence of disabilities that impair the daily activities), was found detrimental for providing instrumental help and this effect was also found regarding financial or emotional support (albeit the effect was lower). Not surprisingly, in all countries the authors find a strong positive association between co-residence (the "ultimate form of structural solidarity", Dykstra et al., 2013, p. 4) and providing instrumental support. At the same time, co-residence strongly decreases the likelihood of financial support, in all countries. Regarding emotional support, the results are mixed: while in some countries there is no effect, in others the effect is positive (Georgia and Russia) or negative (Czech Republic, Lithuania and Norway).

Personal characteristics of the respondent are vital to offering support and in line with authors' expectations. Care and emotional support are gendered in all countries (daughters are more likely to provide support), while financial support is not. Age is related to higher incidences of care and to lower odds of giving emotional support. Education of the respondent has been used as a proxy for social class. The positive effect of education on the likelihood of financial support in CEE countries was expected: having higher education (usually) means higher income and thus greater possibility of financial help for parents.

Respondent's health problems were expected to hamper support giving, but we still see positive effects on CEE countries and for all types of support. Being employed could lower the opportunities for offering care but positive effect in some cases was found (Bulgaria and Norway). Contrary to authors' expectations, presence of the partner does not decrease support. This calls for further analyses on the role of partner's gender (or an interaction between respondent gender and having a partner) as care is gendered work. Having children living with the respondent lowers the odds of offering every type of support.

Unsurprisingly, reciprocity (measured as responding to any type of support from the parents) is increasing the odds of returning any type of support, but the strongest effect was found on emotional support. This suggests that the exchanges between parents and adult children might be linked to a higher degree of affectional solidarity.

The results show that filial obligation is stronger in Central and Eastern Europe than in West European countries. The belief that it is important to give support to family members in need is reinforced by limited public support available, and the *familialism-by-default hypothesis*

seems to be confirmed in the analysis. Filial norms are stronger towards the East (and South) of the continent, so the *family-culture hypothesis* is also confirmed. Secondly, support behaviour is less likely in CEE countries than in Western Europe, if all kind of help are considered together.

The connection between filial obligation and actual support to ageing parents is more pronounced in CEE than in WE countries, especially when instrumental support is considered. When publicly funded care is not widely available, it is more critical to act upon beliefs on filial responsibilities and offer instrumental help to ageing parents in need. The *family-step-in hypothesis* is partially confirmed, however, only for instrumental help. Secondly, the connection between filial obligation norms and financial help to parents is twofold in CEE and is positive in WE countries. Thirdly, there is no connection between filial obligation and emotional support neither in CEE nor in WE. Rather the *exchange perspective* is confirmed: receiving and giving emotional support between ageing parents and their adult children is reciprocal.

4.2. Care ideals in the Netherlands

As noted earlier, Van den Broek, Dykstra and Van der Veen (2015), focused on care ideals in the Netherlands. Largely due to population aging, long term care (LTC) arrangements are being reconsidered, with policy makers in many developed countries increasingly seeking ways to activate and maintain family members as caregivers (Chappell, 1993; Österle & Rothgang, 2010; Pavolini & Ranci, 2008). The Netherlands is exemplary with regard to this development. The country has historically had generous LTC arrangements, but in the past two decades these arrangements have been reformed in order to contain costs. Concomitantly, Dutch policy makers have been encouraging family members to take on an active role in caring for dependent relatives. In this study, intended to gain insight into the moral plausibility of the ongoing developments in Dutch LTC policy.

The authors argue that a multifaceted approach is required to fully grasp normative care beliefs. Therefore, the first aim of the study was to distinguish care ideals that capture multiple dimensions of normative care beliefs simultaneously. Drawing on Hochschild (1995), Van den Broek and colleagues (2015) distinguish three key dimensions along which care ideals differ: that the state should take care for the elderly, family should take care for sick parents, and general perception of gender roles. The second aim was to assess how care ideals have shifted in the Netherlands in the early twenty-first century.

To distinguish care ideals among the Dutch population and to identify shifts over time in care ideals, the authors estimated latent class regression models with co-variables, using the first and third wave of the Netherlands Kinship Panel Study (NKPS). Latent class analysis (LCA) enables the empirical identification of a multidimensional discrete latent variable from a cross-classification of two or more observed (or “manifest”) categorical variables. Four care ideals were distinguished: warm-modern (family and state jointly responsible for caring, egalitarian gender roles), cold-modern (large state responsibility, restricted family responsibility, egalitarian gender roles), traditional (restricted state responsibility, large family responsibility, moderately traditional gender roles), and cold-traditional (large state responsibility, restricted family responsibility, traditional gender roles).

Between 2002 and 2011, there was a shift away from warm-modern care ideals and towards cold-modern care ideals. This is remarkable, because Dutch policy makers have increasingly encouraged family members to take on an active role in caring for dependent relatives. A possible explanation for this shift is that concerns among the population about the growing demands placed by the government on family members regarding the provision of care to relatives has led the Dutch to emphasize the value of state involvement in care provision more strongly, and to underline that there are limits to what can be demanded from family members.

This study described changes in roughly the first decade of the twenty-first century. Additional reforms in LTC policy were implemented after the studied period, and more reforms are on their way. Municipalities are now responsible for the organization of support to inhabitants coping with limitations while performing the activities of daily living. As a result, this form of care will no longer be a right to which those in need are entitled, but a social provision. Before taking on caring responsibilities, municipalities will first require individuals in need – provided that they have the financial means – to buy services on the market and to turn to family members and others in their personal networks for support. While results suggest a discrepancy between the Netherlands’ LTC policy and the normative care beliefs of the Dutch population, it is important to acknowledge that public opinion tends to support more individual responsibility when care for the deserving and needy is guaranteed. The state still tends to be held responsible for the protection of individuals in need (see also Mair, Quiñones, & Pasha, 2016), but those in need are increasingly expected to reciprocate and to organize the fulfilment of their care needs themselves

4.3. Residential care and care to community-dwelling parents

Van den Broek and Dykstra (2016) also examined residential care and care to community-dwelling parents. Population ageing and the associated greater need for long-term care imply a challenge for policy makers to balance safeguarding financial sustainability and providing adequate long-term care for those in need. In many countries, part of the solution to this puzzle is sought in caring for impaired elderly in the community rather than in residential care settings (Pavolini & Ranci 2008; Rostgaard 2002; Rostgaard 2011), and, related to this, in maintaining or activating informal caregiving resources (Le Bihan & Martin 2012; Österle & Rothgang 2010). Particularly family members are increasingly perceived as important potential caregivers (Grootegoed, Duyvendak, & Van Barneveld 2015; Österle & Rothgang 2010; Pavolini & Ranci 2008). In the current study, the relationship between the availability of beds in residential care settings and the provision of care by adult children to impaired community-dwelling parents is examined. The results of earlier studies suggest the negative relationship between the availability of residential care and the provision of care to community-dwelling older parents by their adult children. The mechanisms underlying this negative association have thus far not been explicated and tested, using data from the Survey of Health, Aging and Retirement in Europe for Austria, Belgium, Denmark, France, Germany, Greece, Israel, Italy, the Netherlands, Spain, Sweden and Switzerland, enriched with country level information from the MULTILINKS database of social policy indicators to answer this question.

To better understand the association between the availability of beds in residential care settings and adult children's provision of care to community-dwelling impaired parents, new theoretical mechanisms need to be developed and tested, as the previously developed models (e.g., substitution thesis and the models of complementarity), do not help to explain why family caregiving to community-dwelling older adults is less common when beds in residential care settings are more widely available. They formulate three hypotheses on care arrangement across countries. The out-selection hypothesis posits that the impairments of community-dwelling older parents with care needs tend to be less severe in countries where beds in residential care settings are more widely available, and consequently their adult children are less likely to provide care. The in-selection hypothesis suggests that adult children are less likely to share a household with impaired community-dwelling parents in countries where beds in residential care settings are more widely available, and consequently they are less likely to provide care. Finally, the diffusion of responsibility hypotheses proposes that adult children are less likely to provide care to impaired community-dwelling parents in countries where beds in residential care settings are more widely available, even when differences in the severity of care needs and the prevalence of parent-child co-residence are accounted for.

The authors find that adult children are less likely to provide care to community-dwelling parents in countries where beds in residential care settings are more widely available, because (1) the parents' care needs are less severe in such countries (out-selection hypothesis) and (2) adult children and impaired parents are less likely to share a household in such countries (in-selection hypothesis). Finally (3), after taking these two factors into account, adult children remain less likely to provide care in countries where beds in residential care settings are more widely available (diffusion of responsibility hypothesis). Plausibly, being able to rely on residential care undermines adult children's sense of urgency to step in and provide care to their parents. The results suggest that widely available beds in residential care settings directly and indirectly undermine the willingness of adult children to provide care to their impaired parents. It should be noted that adult children do not tend to stop providing support to impaired parents when the latter are admitted to residential care settings. Support to parents becomes more secondary after admission, however, and consists mainly of organizing, managing, and supervising care (Ross, Carswell, & Dalziel 2001).

Whether stimulating family caregiving through reduction of beds in residential care settings is desirable depends on one's normative beliefs about how care ought to be provided. Hochschild (1995) argues that residential care is a manifestation of a so-called cold-modern care ideal. In a cold-modern care ideal women and men focus fully on a career in paid labor, with the state enabling this by taking full responsibility for the provision of care for those in need, making family caregiving unnecessary. A previously described study focusing on the Netherlands shows that the share of the Dutch population adhering to a cold-modern care ideal has increased, rather than decreased, in the first decade of the 21st century (Van den Broek, Dykstra & Van der Veen, 2015). This suggests that, at least in the Netherlands, the stimulation of family caregiving through the reduction of access to residential care may be increasingly at odds with normative beliefs of the general population

4.4. Receiving instrumental support in late parent–child relationships and parental depression

Djundeva, Mills, Wittek and Steverink (2015) looked at yet different aspect of support exchanges and studied association between instrumental support from adult children and parental depression. Previous findings that link depressive mood of older parents and receiving social support rely on several explanations. The most prominent explanation contends that parents hold expectations for receiving support from their children, and depressive mood might appear as a result of situations where the expectations of parents are not met by their adult

children. Other findings for the effects of family support exchange on depressive mood have included the interplay between physical, social, and economic resources of the parents. The current study focuses on the role of gender, functional limitations and social interaction in the association between instrumental support from adult children and parental depression. The focus on children is dictated by three considerations. First, next to spouses, adult children are the major source of instrumental support for older people in Europe, providing help in daily activities or more infrequently, in finances. Second, adult children provide the bulk of practical help, for example, household chores like home repairs, transportation, shopping, as well as help with financial and legal matters. Third, support from other sources might have different associations with mental health as the literature on intergenerational solidarity suggests that the receipt of instrumental support from children is tied to filial norms of solidarity. The authors apply self-determination theory to hypothesize about the role of physical needs and social resources on parental depression in a European context.

A sample of 6,268 parents over 65 that have non-resident children from the first wave of Survey of Health, Ageing and Retirement in Europe (2004) is analyzed. The authors estimate logistic regression models to test for the association between instrumental support and depression. Physical needs, gender, and social interaction are used as moderators. Net of core factors that contribute to depression, including previous history of depression, there is a U-shaped pattern between receiving instrumental support and depression that persists across country welfare regimes. For respondents with medium physical limitations, too little or too frequent support from children is associated with higher depression. For respondents with severe limitations, receiving at least some support is better than receiving none at all. The receipt of too frequent support from children increases the level of depression more for women than men. All interaction effects are comparable across country regimes.

The authors argue that heterogeneity in physical needs and resources of older individuals must be taken into account when assessing the effects of instrumental support on mental health. Compared to previous studies that use broader measures of social support, the findings confirm that instrumental support on its own not only could be “too much of a good thing” (Silverstein et al. 1996), but also that nothing is as detrimental as receiving no support at all when an individual is severely physically impaired. Similarly, the findings are consistent with previous research that instrumental support on its own (when it is not combined with other types of support) is negatively associated with mental health in Europe (Zunzunegui et al., 2001). However, in circumstances when there is a greater need for support (for people in bad health),

caution should be exercised when examining only the negative effects of instrumental support on mental health.

4.5. Future research

A number of interesting avenues for the future research emerge. Based on their analysis of support in later life, Muresan and Haragus (2015) suggest intensified attention to the issue of divorce in Eastern Europe. Although in Western European countries divorce has been a stable element of the family life, in Eastern Europe this phenomenon is rather recent. It is of interest in how much patterns found in elsewhere in Europe also apply to Eastern European countries, and to what extent does it influence the intergenerational support.

Based on their work on care ideals, Van den Broek and colleagues (2015) suggest that future studies should address the moral plausibility of the planned LTC reforms. Moreover, to gain proper insight, additional indicators on normative care ideals are needed. Assessing the moral plausibility of the planned policy reforms will only be possible when data sets become available that not only include measures of the extent to which family and state are deemed responsible for care provision but also measures of the extent to which individuals in need themselves are deemed responsible.

Van den Broek and Dykstra (2015) reveal associations between the availability of beds in residential care settings in general and adult children's provision of care to community-dwelling impaired parents. The authors suggest that future research is needed to provide insight in how various aspects of residential care may moderate the mechanisms underlying the negative association between the availability of beds in residential care settings and adult children's provision of care to community-dwelling impaired parents. Moreover, taking into account cash-for-care programs which vary greatly across countries on a range of important dimensions, such as entitlement criteria, benefit levels and how the benefits can be used the type of provision can affect the choice of professionally provided care and reduce the necessity of family members to provide care, or on the contrary, greater reliance in family caregiving.

5. Implications of different policy arrangements for inequalities in and between families

Another objective addressed within the WP7 is the implications of different policy arrangements for inequalities in and between families, and more particularly, inequalities between young and old, and between men and women (Dykstra, 2015b). In the last decade of the 20th century, there was extensive discussion of welfare regimes, especially debates triggered by Esping-Anderson's typology presented in 1990. A key point in the criticism was a neglect of women's unpaid work. Since then, a number of researchers have presented extensive classification of welfare regimes, many of them concentrating on care for the young and the old.

This study takes a different approach and is based in the concept of "intersectionality" –an analytical tool to elucidate the creation and reproduction of inequalities associated with salient social categories like gender, sexuality, race, age, and class (Crenshaw, 1989). Rather than examining these social categories as producing distinctive cleavages, the principle of intersectionality leads to scrutiny of how they mutually interact with one another. A critique of rights and legal institutions is key to the discovery of how power relations are framed (Cho, Crenshaw & McCall, 2013). Rather than focus on welfare regimes, Dykstra (2015b) examined how laws and policies create distinct patterns of interdependence in families, and family roles, on the basis of age/sex/gender. The family policies come in a variety of forms: leaves, financial compensation, and care services. Some aim at compensating the direct costs of caring (tax breaks, allowances), others aim at reducing the opportunity costs of cutting back on paid work hours to provide care to family members (leaves, personal budgets, services). The impact of those policies was evaluated for the EU-28 countries, Norway, Switzerland, the United States and Canada.

First, Dykstra considered generational interdependence in families: legal obligations to provide financial support or care to family members, policies aimed to support families in keeping up their financial and caring responsibilities (cash benefits, (paid) leaves, and care services), and "positive" generational policies aiming to reduce inequality by explicit intervention (e.g. daddy quotas).

Although providing a summary of very rich evidence amassed for this study is beyond the scope of this summary, a few examples illustrate how policy arrangements structure family ties. Bordone, Arpino and Aassve (2016) showed in their empirical work how policies shape generational interdependence across three generations. Combining data from the Survey of Health and Retirement in Europe (SHARE) with data from the Multilinks Database on Intergenerational Policy Indicators, they examined the likelihood that grandparents care for the children of an employed daughter on a daily basis. Findings show that grandparents are most

likely to be daily caregivers in countries where public childcare services and parental leaves are least generous (Italy, Greece, Spain, and Poland). They are least likely to care for grandchildren on a daily basis in countries that score the best in terms of childcare services (e.g., Belgium), parental leave (e.g., the Czech Republic), or both types of arrangements (e.g., Denmark). Tobío (2007) argues that grandparental care in Southern European countries is part of an effort to improve the life chances of the middle generation. Paradoxically, she notes, Spanish grandmothers assume an old-fashioned role to enable their daughters to adopt modern gender roles. Grandparental care in Southern Europe is a clear example of what Leisering (2004) would call “negative” life course policy shaping interdependence between family generations.

An example of what Leisering would label “positive” life course policy, aiming to shape the life course by explicit intervention, can be found in parental leave policies, especially leaves for fathers. Here, the Nordic countries were pioneers. Iceland, Norway, and Sweden and, most recently, Germany and Portugal (Moss, 2014) have introduced a “daddy quota”: weeks of parental leave exclusively reserved for fathers. Leira (2000) highlighted the importance of non-transferable (“use or lose”) leave entitlements for men, describing them as “fatherhood by gentle force”. The expanding literature on the gendered consequences of leave designs shows increases in men’s use of parental leave with the introduction of such non-transferable “daddy days” (Hegewisch & Gornick, 2011).

Kotsadam and Finseraas (2011) evaluated whether those policy changes made men more caring. They treated the implementation of the daddy quota in Norway as a natural experiment, and compared parents with children born just after the reform to parents with children born just before the reform. Parents in the “treatment” group were less likely to have conflicts over the division of household tasks, and more likely to share them. In their study of leave policies in Sweden, Norway, the Netherlands, Canada, Germany, the United Kingdom, Finland and Italy, Boll and colleagues (2014) found increased levels of child involvement by the father after the introduction of daddy quota, particularly for highly educated men. Herlofson and Ugreninov (2014) report that Norwegian men are more involved in childcare after the introduction of the “daddy quota”, but not more involved in care for frail parents. Apparently, the policy reform does not make men generally more caring. Looking after children seems to result in such a depletion of men’s care resources that little is left for the older generation. Based on this and many other cross-national comparisons, the author concludes, that the type of public provision offered has consequences for gender and socio-economic inequality. Cash for care payments

strengthen a gendered division of tasks more often than care services (e.g., home help, day care).

Second, Dykstra (2015b) evaluated what happens to the lives of individuals who do not fit the picture presented above—those with no or limited vertical family ties considered those with no or limited family ties: childless older adults. An issue that is of particular current interest is rising childlessness rates among men. The current scientific debate has centred on the role which kin (defined by biological or legal ties) plays in the provision of care and support for aging adults. The prolific literature has examined the flow of intergenerational exchanges between adult children and their parents (Cooney & Dykstra, 2013; Kalmijn, 2014). However, older adults can turn to different sources of support when in need, including non-kin (neighbours, friends) and professionals. Yet, the primacy of family members (and immediate family members in particular) as “self-evident” sources of support, is strongly reflected in legal provisions across national contexts. She showed the primacy of family members in legal arrangements (e.g., medical decisions, care, inheritance, taxation) blocks interdependence between the childless and their network members.

Yet, positive signs of change can be observed across national contexts. For example, a number of US states include a “close friend” in the list of potential medical proxies in the absence of an advance health care directive (e.g., Colorado, New York, Tennessee). In the Netherlands, as of July 2015, individuals are entitled to a sick leave in order to provide care for a non-relative (yet, the taxation of inheritance left to non-kin has remained the same—substantially higher than when inherited by kin). These are important steps in recognizing that the definition of “the” family, as well as, how people construct their life trajectories, have changed dramatically in the past decades. It is crucial to consider to what extent the current legal arrangements are based on a somewhat outdated perception of what “the” family is.

Third, Dykstra (2015b) considered inequalities between men and women in family roles: roles limited to one gender (e.g., care leaves), gender differences in age borders (e.g., pensionable age), and gender differences in credits for family role engagement (e.g., survivor’s benefits). We limit this summary to one example which is at the very core of the WP7, namely care. Since it has been documented that women, across societies, are more likely to provide unpaid care than men, whereas men are more often gainfully employed, it is important to ask whether rights to care leaves are differentiated by gender. Among the OECD countries, Switzerland is the only one with a statutory maternity leave, but no leave for fathers (OECD Family Database, 2014). The US is the only OECD member that has no statutory entitlement to any kind of parental leave. Several countries (e.g., Austria, Croatia, Finland, France, Germany, Iceland,

Italy, Norway, Portugal, Sweden) have introduced a “daddy quota” (a period of leave that is for the exclusive use by fathers on a use-it-or-lose-it basis), or a “father bonus” (a payment, tax break or additional time away from work) to encourage fathers to take parental leave (Moss, 2014). It is important to note that the design of leave policies differs considerably across countries in terms of length, level of wage replacement, the flexibility for taking leave, and rules governing fathers’ access to leave and/or the distribution of leave between parents (Ray, Gornick, & Schmitt, 2010). In Iceland, Norway and Sweden, uptake of paternal leave is mandatory if the full paid parental leave is to be granted.

An expanding number of developed countries offer leave entitlements to care for a wider range of family members (Moss, 2014). Conditions for taking leave vary from relatively common sickness to critical illness or severe disability. Length, payment and other dimensions of leave also vary considerably. However, even though descriptions of the policies are gender neutral, using terms such as “employees” and “family members”, men are far less likely to make use of such leaves than are women, particularly if the leaves are unpaid (Moss, 2014).

Taking the described laws and policies together, Dykstra (2015b) concludes is that there is a convergence between her and his age boundaries, rights and duties. Political pressure, leading to the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), has undoubtedly fuelled this development. Yet, one issue still requiring attention is gender-bias in the implementation of policies. For example, a recent Dutch study revealed that frail older women living with a partner were more likely to receive publicly funded home help than frail older men living with a partner—even though their circumstances were quite comparable (Schenk, Dykstra, Maas, & Van Gaalen, 2014). The authors suggest that the public servants processing the home help requests perceive older men as less able to provide care to their spouses. Another explanation is that the men more strongly feel they are entitled to public support because they perceive themselves as lacking the necessary caring skills. The gap between *de jure* and *de facto* practices represents a major challenge for social scientists with an interest in societal structuring of her and his family roles.

In her conclusion, Dykstra (2015b) points out it is very clear that if we want to understand contemporary structuring of men’s and women’s family lives, we need to build on both macro- and micro perspectives. Silverstein and Giarusso (2011) sum it up: “Micro-interactions in the family may be shaped by the political economies and cultures within which those interactions are embedded, specifically the way in which welfare production is allocated among state, market and family” (p. 39).

5.1. Future research

In her work, Dykstra (2015) sets out the research agenda to better understand contemporary structuring of men's and women's family lives. She suggests that we need to build on both macro- and micro perspectives. Moreover, to adequately address gendered family roles and interdependence among lives in families and identify underlying mechanisms, one needs dialogue and collaboration between research communities on two continents—one emphasizing culture and shared meanings on a meso-level; the other stressing macro-level structural conditions. One also needs to overcome another “continental divide”—the chasm between qualitative and quantitative methodologies. As Levy (2013) comments, the difference between a “subjectivist biographical” and a “factual life history” is often translated into a radical divide. A combination of methodological approaches is the route to follow. Mixed-methods are often espoused, but not often practiced in life course research, as is the case in much of the social sciences. It is unusual to find publications that demonstrate the complementarity of the two approaches. The ideal next step is to have a community of researchers who work on recorded and observed life histories, with comparisons across time and societies.

6. Effects of economic crisis on intergenerational dependencies in families in Europe

The length and severity of the economic crisis in Southern Europe raises interest in understanding the mechanisms that cushion the impact of the economic impoverishment of large segments of the population. In a context of growing material privation, institutional mechanisms have often not reached all those in need, or did so inefficiently. Benefit coverage is limited and leaves people behind, the detection of new needs and the implementation of new policies is slow, the information does not reach those most in need, or even some of those eligible for aid may forego benefits in order to avoid the stigma associated to this condition.

In these circumstances families have functioned as “shock absorbers”. In Southern Europe, resource-pooling and intergenerational solidarity expectations have been prominent traits of a welfare regime that has been labeled as “familistic”. Within the familistic ethos, the individual problems of the members of the family network tend to be defined and handled as “family issues” that call for the mobilization of all the collective resources available. In the context of a profound crisis such as the one experienced by Mediterranean countries in the 2008-2014

period, it has often been argued in media accounts that family assistance may even have deactivated potentially explosive outbreaks of social unrest. However, from another point of view, it has also been suggested that the strong emphasis in the role of the family has served to legitimize the provision of meager social services, as well as to overtly justify political inaction in welfare policies (Saraceno 1994).

Marí-Klose and Escapa Solanas (2016) analyzed the nature and extent of the aid received by adult children from their parents in a context of economic crisis in Spain, drawing comparison with other European countries. Although the interest is focused on downward solidarity, from parents to children, the author also included information on transfers that take place the other way around, from children to parents. In studying the strategies of intergenerational solidarity, he examined what is the nature and magnitude of these exchanges, and analyzed the sociodemographic profiles of the households that give and are supported by their relatives in the period before the onset of the crisis and during it. Marí-Klose and Escapa Solanas (2016) is particularly interested in how the crisis affected patterns of family support across households.

6.1. The impact of the economic crisis in Spain on intergenerational relations

The deterioration of the economic situation during the 2008-2014 has had a significant impact on the living standards of many Spanish households. Over the period 2008-2014, Spain experienced a large decline in GDP per capita. Spanish growth rates started to decline in 2008 and reached negative digits in 2009. After a short (but weak) recovery in 2010 and 2011, growth rates went again into negative values in the second semester of 2011 and only became positive again in early 2014. As a result, unemployment rates have skyrocketed, particularly those affecting younger workers. Between the third quarter of 2008 and the second quarter of 2013, the number of employees decreased by 3,7 million. Such a decrease concentrated among young people. Of young under 25, who usually held fixed-term contracts, about 60% lost their jobs. Meanwhile, older workers maintained their employment levels.

In this context, poverty rates increased, but not across the board. The crisis hit particularly hard young people and those with children. Unemployment among younger parents are responsible for a substantial increase in child poverty, which in Spain has risen from 25.5% in 2007 to 30.1% of people under 16 in 2014 (Eurostat, 2014). Existing programs of social protection for children have shown to have little effect on alleviating poverty levels. Young people and children were also hardly hit by welfare cutbacks. From 2009 to 2011 expenditures devoted to the Family/Children function decreased from 1,52 percent of the GDP to 1,38 percent after years of slow but continuous growth (Eurostat, 2014).

In the face of mounting budgetary pressures, the Spanish government opted to put their efforts at saving the core of welfare provision, subjecting the newly created policies targeting the needs of families, young people and children to major cutbacks. In 2010, the central government eliminated a birth grant (2,500€ for families of newborns and newly adopted children) created only 2 years before, and curtailed assistance to young people moving out of parental home. Beginning in 2012, the main strategy of the Conservative Government to adjust the budget has been to deprive regional governments (the so-called Autonomous Communities) of revenues, compromising their spending capacity in several areas in welfare policy for which they are responsible. Under budget pressure, the Autonomous Communities introduced severe cuts in family friendly policies, such as childcare services and family allowances for households with children.

Both the economic conditions and the austerity measures have profoundly impacted on behaviors and shaped debates on intergenerational relations in the country. Youth were at the center stage of changes and public discussion about the consequences of the crisis. The economic crisis had immediate consequences on the rates at which young people left parental home, form new families and have children. Beginning in 2010, the trend towards an increase in the proportion of young people under 35 who lived autonomously (which had been underway for more than a decade) came to a halt and decreased in subsequent years. An increasing number of young people faced insurmountable difficulties to access independent housing. Marriage rates declined dramatically, especially in provinces where the employment crisis were hitting hardest. Fertility rates also dropped, especially in these areas.

Conversely, poverty rates among people over 65 decreased. The elders have remained protected from the adverse effects of the economic crisis because governments have opted to guarantee their income levels through pension policies in a context in which other social groups were suffering from unemployment and risk of impoverishment. Hence, in the case of pensions, adjustments have been proposed, but postponed to the future. Governments have been very careful not to antagonize older voters. In a context of fifteen years of uninterrupted economic expansion prior to the crisis, the salaries of older workers had often been high, which in practical terms, ended up working as an entitlement for a generous pension allowance as they retired. As a result, large segments of new cohorts of pensioners received high public transfers for their pension entitlement, which maintained them well protected against poverty in the face of a crisis that primarily affected those participating in the labour market and their dependents.

6.2. Family solidarity in times of crisis

According to a wide consensus in the scholarly literature, Mediterranean welfare regimes tend to activate family solidarity in times of crisis. This is also a widespread understanding of what has occurred in the 2008-2014 crisis in Spain, shared by both the media and most scholars. However, comparative SHARE data on help and money exchanges between generations seem to cast some shadows on the narrative about the strength of familialism in Spain during the crisis. The analyses of SHARE surveys in 2006 and 2013 suggest that there has been a general increase in economic transfers to younger generations across Europe. But the increase was not particularly noticeable in Spain (or Italy) when compared to other European countries. In fact, in 2013 only 10% of Spanish people over 50 helped their non-coresiding children with significant sums of money (over 250 euros). This is the lowest percentage found among the European countries participating in the survey, and amounts to only a slight increase with respect to the percentage that indicated they were helping their children in 2006 (7%).

Beyond this finding, the results of Marí-Klose and Escapa Solanas's analysis suggest that parents tend to help children in need. The likelihood of financial help increases when non-coresiding children are unemployed and face episodes of family breakdown (divorce or separation). But it should also be noted that help is much more likely when parents are well off. Parents in the lowest income quartile are very unlikely to help. As a result, the impact of the transfers in alleviating poverty of their non-coresident children and grandchildren is likely to be low.

This evidence does not necessarily rule out the possibility that family assistance functioned somehow as a shock absorber. Hence, the young benefited clearly from the opportunity to remain with their parents when they were unable to find affordable home for their own, and some of them had a chance to return to parental home when their project to live autonomously failed. The analysis of Spanish EU-SILC microdata as reported by Marí-Klose and Escapa Solanas (2016), indicates that the number of three-generation households, where grandparents live with their grandchildren, tripled between 2009 and 2011.

Co-residence with the elderly is likely to foster resource-pooling across generations, which given the favorable economic situation of the pensioners during the crisis, might have enhanced the economic status of younger members of the household. To test the impact of pensions on the economic well-being of households with children, we simulated the risk of child poverty rates in a scenario where the rest of household members could not rely on the income sources of the elderly co-residing with them. The results of this exercise suggest that income provided by pensioners was not a key factor in alleviating child poverty. Should such income flow not have existed, the risk of child poverty would have only increased 0.4 per cent points.

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