

EUROPEAN

POLICYBRIEF



INFORMAL SUPPORT IN AGEING: THE DEMOGRAPHY OF FAMILY CARE

21/12/2018

Introduction

Families occupy a central position in providing informal care for elderly people, even where welfare states offer generous provisions. The project CARING explores how early family formation decisions relate to the emotional and practical support people give and receive in older ages. There are large differences across Europe in the population profile, the economies and the institutional contexts.

Family formation in the early phase of the life course can directly impact the availability of kin in later ages by establishing ties with spouses, children and in-laws. It may also affect the opportunity to ground and establish long-term relationships and networks that may substitute for kin in old age. Whereas family disruption, especially for men, seems to reduce support in old age, little is known about the role played by re-partnering. And although it can be expected that childless or single individuals may adapt early and substitute kin ties with nonfamily ties, literature has not reached a clear consensus yet on the effects of childlessness on support in older ages (Albertini & Mencarini 2012, Klaus & Schnettler 2016).

Even when a minimum income in old age is guaranteed through pensions, informal care provision is a strategic complement and/or a substitute for services offered by the welfare state and often too expensive for most people to purchase on the market (OECD 2017). Following sustained gains in increased life expectancy (not necessarily all in good health) recent pension reforms have made the financing of retirement pensions depend on progressively longer contributions from employment. In this framework long-term caring might become more difficult to sustain in the future, with fewer children – especially daughters- responding to the demands of ever older parents. In light of increasing complexity of family constellations, little is known about the effects of family reformation and the complex set of relations that this generates.

EVIDENCE AND ANALYSIS

Nine common patterns of family trajectories

With SHARE survey data for five countries, this project detected typical family trajectories in early adulthood and investigated whether they have a bearing on social support given and received in later life. The sequence and cluster analysis of the initial 31 years of family trajectories, from 16 to 45 years of age, revealed a pattern of 9 ideal-typical paths for the birth cohorts 1927-58: long-term singles and long-term childless individuals (between 4% in Czech Republic and 9% in West Germany and Italy); stable childless couples (between 3% in Czech Republic and East Germany and around 7,5% in Denmark and West Germany); stable couples with a single child (short of 10% in Denmark and up to 17% in both German parts and Czech Republic); stable couples with two children whose childbirth onset was early (between 12% in West Germany and 26% in Czech Republic) or late (short of 13% in East Germany up to 26% in Italy) respectively; stable couples with a higher parity of 3 or more children with an early (12% in Czech republic up to 22% in France) or late (4% in East Germany and Czech Republic up to 11% in Italy) childbirth onset; trajectories characterised by union disruption or single parenthood with little or no re-partnering (between 3% in Italy and around 12% in Czech Republic, Denmark and East Germany); trajectories characterised by union disruption followed by new family formation (in the range of 1% in Italy to almost 11% in Denmark). The demographic profile of early family building differs by country.

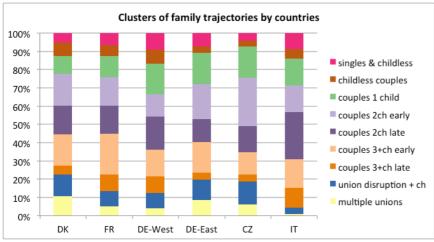


Figure 1: Author's analysis on SHARE data, wave 3 (weighted)

Family formation matters: early trajectories contribute to the size of social networks

Some of the 9 family trajectories identified are associated with the size of elderly's emotional support networks in later ages. These are networks of individuals that elderly consider confidants, people with whom they most often discuss important things, who could live both within or outside the household (e.g. relatives, neighbours or friends). They often include partners (for 80% of those who have one) and one or more children (around half of the respondents who had children mentioned at least one in their core discussion network). Their availability provides close and supportive relations and care when needed. What is the relationship between family trajectories and the size of networks? Results show that childless individuals and couples who had one single child tend to report smaller networks, even after taking into account differences in number of living children and current partnership status. Further, some trajectories matter only in some countries: in Czech Republic and Italy, where union disruption was less widespread, its occurrence resulted in smaller networks. But re-establishing a family can make up for the lost network: multiple unions, where union dissolution was followed by stable repartnering, did not result in different network size instead, except for a smaller size in Czech Republic. Are family trajectories related to the distance from network members? Interestingly, results also indicate that some family trajectories are associated with a higher distance from network members: all

else equal, individuals who experienced union dissolution, regardless of being followed by re-partnering (multiple unions), report living further away from their network members.

Current circumstances matter too: family shapes the exchange of help and support

What happens beyond relational networks? Who provides help to whom? Although family trajectories may shape the size of emotional support networks, results show they do not change instead the probability of either receiving or giving practical help or personal care from outside one's household. Help and support comprise both practical help (e.g. home repairs, gardening, transportation, shopping, household chores or help with paperwork) and personal care provision (e.g. dressing, bathing or showering, eating, getting in or out of bed, using the toilet). It is the number of living children and the presence of a partner that strongly predicts exchanges of support. However, past family trajectories may still play an indirect role in that having larger networks is associated with a higher likelihood of both receiving and giving help. Further, results indicate that a higher physical distance to the network members reduces the probability of receiving or providing help. Exchanges of practical support and personal care seem to require a certain degree of proximity to take place (more often or regularly), because they entail face-to-face interactions.

Educational level plays an important role. On the one hand, higher educated individuals reported higher distance from their network members. On the other hand, they tended to report larger networks and were more likely to receive help overall.

The vulnerability of a smaller family

Overall, results show that what people do early in life in terms of family building is a predictor of the size and the composition of the emotional support networks they have later in life, but only indirectly in terms care exchanges. Partners, when present and able, are typically the first care-providers within households, and thus decrease the probability of receiving care from outside the household. Outside the household, children, who are in large part not mentioned within emotional support networks, are the most frequent care-providers when needs arise (and recipients of help, only second to parents). Emotional support networks still provide an important complementary source of practical support and personal care, with some overlap to the overall network of exchanges of help between caregivers and receivers across households, but it is the structure of the family constellation that best predicts exchanges in terms of practical help.

Although technology contributes to maintaining high degrees of emotional closeness and support like never before, care provision in terms of practical help and personal care requires proximity. It follows that living without a partner or having no children or only one child who lives at a distance are associated to a higher risk of care deficit. Given rising life expectancy and falling fertility, the risk might be expected to grow in the future.

The risk of care deficit might also be expected to increase due to higher geographical mobility and spatial segregation, following increased educational investments, housing dynamics, migrations from rural areas and urban development. Availability of kin and a support network in the vicinity, as well as spatial variations in service availability, have major implications for differences in elderly people's quality of life and for their well-being.

POLICY IMPLICATIONS AND RECOMMENDATIONS

A growing tension between care needs and caregiving potential

Current trends suggest that in the near future we can expect a growing mismatch between care demands and our capacity to respond with informal provision by families and close support networks. What could help bridge this gap? First, we ought to understand that the care deficit would be a reflection of population ageing and lower fertility: we live longer and in large part healthy lives, with fewer descendants and kin. This requires thinking of ways to activate care-providers and decrease

competing demands on their time either formally or informally, explicitly acknowledging the work invested in caring tasks. Adequate social protection is needed to achieve a sustainable and inclusive equilibrium, as well as to avoid deepening the already existing gender disparity in caring provision. Given prevailing gender norms and a higher life expectancy it is most often women who provide informal family care (Haberkern et al 2015).

Support for carers to increase sustainability and decrease gender disparities

Adequate social protection and support for carers are pivotal in addressing gender disparities for care providers. Literature suggests that services are more relevant than cash transfers in decreasing the gender gap of informal care provision (Haberkern, Schmid, and Szydlik 2015). Given the sudden nature of elderly care needs when they emerge, policies should aim at affording flexible arrangements to coordinate caring with employment responsibilities, such as leave on short-notice. They should also focus on relieving pressure from carers, such as respite, in the case of long-term care. These interventions will become increasingly salient in the future when fewer family members may be expected to share the provision of care for longer periods of time. Particular attention should be devoted to emerging vulnerable groups, such as individuals living alone and lower educated, both among caregivers and care recipients.

Proximity matters for caregiving

Results indicate that early family trajectories are associated with the size of social networks and that distance is pivotal to care-provision (in either direction). If prolonged investments in education and the distribution of employment opportunities require increasing geographical mobility, next to the greater mobility brought about by family disruption and reformation, policies should be aware of the risks entailed for later care-provision. These recent dynamics may have unintended consequences for the availability of close and supportive relationships in old age by increasing geographical distance between family members and generations.

Proximity seems key to care-receiving and care-giving, which suggests the need to maintain, and possibly increase, the variety of relations developed along the life course. A possible tool could be through promoting new forms of local involvement in activities at later age, to avoid isolation and promote establishing or growing social networks. Securing an efficient network of public transports would be also important, as well as careful attention to the reach of services for people living in non-urban areas.

The sandwich generation: service provision and flexible work arrangements

More adult children (who are increasingly themselves aged) may have to look after their old parents while still in employment and caring for their own (grand)children. This requires developing and offering more flexible working arrangements for employees with a dependent family member. Given the large unpredictability in long term care needs and caregiving situations, those leaves should be granted within a short notice period. Some form of coverage should ideally be made available to all workers and not restricted to some sectors or to public employees only. To this end, affordability of caregiving policies should be carefully crafted and planned, also in order to allow companies to secure their practical implementation. This could imply involving all layers of management and attention to discrimination, especially against older employees, who face higher hurdles to employment re-entry upon employment loss.

The variety of circumstances that elderly experience is expected to increase in the future due to growing complexity of family trajectories, (re)shaping kinship and emotional bonding. Also income security in old age might increasingly diversify as a result of different contributions and saving capacity due to diverging employment careers (O'Reilly et al. 2019, OECD 2017). Further, pressure on (fewer) caregivers is expected to increase. An increasing proportion of elderly adults, especially women, will be in the position to provide care to both elderly parents and grandchildren at the same time, during longer employment careers. Informal care provision, grand parenting as well as elderly care, will be especially crucial for women's employment careers in those countries where service provision is lower. This suggests both strengthening service provision and affording leave schemes for caregivers, in order to prevent the growing of already existing gender disparities and provide adequate care to the elderly.

RESEARCH PARAMETERS

The project analysed the role played by early life course family formation trajectories (16-46 years) in shaping emotional support networks and care provision to elderly people in Europe (50+ years, on average around 67) for the birth cohorts 1927-58. A first set of analyses explored the size of elderly's core discussion networks, the distance to the network members and the likelihood to report help received and/or given through the network and beyond it. Analyses were based on secondary data analysis of retrospectively collected information from wave 3 and cross-sectional data from wave 4 of the data from the Survey of Health, Ageing and Retirement in Europe (SHARE) for five countries: Italy, East and West Germany, France, Denmark and Czech Republic.

PROJECT IDENTITY

PROJECT NAME

CARe in an INterGenerational context. How do changes in family formation trajectories reflect in later intergenerational relations? A three-generations perspective (CARING)

COORDINATOR

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CONSORTIUM WZB Berlin Social Science Center & Population Europe, Berlin, Germany.

FUNDING SCHEME H2020-EU.1.3.2. - Nurturing excellence by means of cross-border and cross-sector mobility (Marie Skłodowska-Curie grant agreement CARING No 749443)

DURATION September 2017 – August 2019 (24 months).

BUDGET EU contribution: 171 460,80 €.

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FURTHER READING

INFORMATION

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