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Parent care: the core component of intergenerational relationships in middle and late adulthood

Published online: 27 September 2005
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Intergenerational relationships essentially imply the exchange of resources between younger and older persons in the extended family and the society as a whole. From a *gerontological perspective*, giving help to elderly parents and grandparents, and receiving help from adult (grand)children, typify the central phenomenon of the intergenerational exchange in middle and late adulthood. From a comprehensive *life-span developmental perspective*, the younger as well as the older adults may be recipients, respectively, providers of intergenerational support. Exchange of support in adult-elderly parent dyads, or between younger and older generations in general, basically implies bi-directionality and reciprocity. This is nicely clarified by the five papers, in this special section, presenting the results of excellent sociological and psychological investigations of different aspects, societal contexts and determinants of the intergenerational *transfers, solidarity and support* in European families and countries.

Three studies are cross-national in nature. Two of them study intergenerational transfers and intergenerational solidarity, respectively (Attias-Donfut et al. 2005; Daatland and Lowenstein 2005). These articles contribute to the formation of a multifaceted view on parent care and elder care in a number of European countries. The third cross-national study focuses on grandparents as users of new communication technologies in the relationship with their grandchildren (Quadrello et al. 2005). The two other studies (from Switzerland and Germany) focus on the adult child-elderly parent care relationship, mainly (Schwarz and Trommsdorff 2005) or partially (Perrig-Chiello and Höpflinger 2005), from a developmental psychological perspective, using concepts as attachment and filial maturity.

This research questions the methods and instruments used, and the results obtained in these studies clearly

illustrate the comprehensiveness of the intergenerational exchange in middle adulthood and old age. Who gives help? Who receives help? What factors determine the kind and amount of help given and received? These questions are tackled on the societal level, the family level and in adult child-elderly parent dyads. Structural, institutional and cultural context features (Kohli 2004), intergenerational relationship and individual help-giver and help-receiver characteristics, are interacting determinants of care adult children give and aged parents receive.

In what follows, I reflect on three comprehensive sets of variables constituting, respectively, determining parent care in adult children, and care for the elderly in ageing societies: (1) what is given or received: transfers, assistance, help and care, (2) caregiver(s) and care-receiver(s) characteristics, and (3) context variables.

Intergenerational transfers: kinds and measures

Intergenerational transfers, solidarity and help (assistance/support) are the concepts used to indicate the flow of giving and receiving resources within the extended family and the society as a whole. Intergenerational transfer is the most generic term, generally used in economic and sociological research. Intergenerational solidarity is frequently used in sociological research and the terms help, support and assistance primarily figure in psychological research. Attias-Donfut et al. (2005) focus on *transfers*. They contrast time-related transfers outside the household with financial transfers inside or outside the household. This dichotomy proved to be useful in view of a better understanding of the determinants of the intergenerational transfers in relation to demographic variables in ten European countries. Daatland and Lowenstein (2005) focus on intergenerational family *solidarity* in urban populations of five countries with diverse family cultures (more individualistic versus more collectivistic)

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and different levels of welfare state provisions for the elderly (social and medical services and legal family obligations). In the psychological studies of Perrig-Chiello and Höpflinger (2005) and Schwarz and Trommsdorff (2005), the focus is on *help and support*, given to and received from adult children and aging parents.

Focusing on different dimensions and kinds of transfers, solidarity and help, and using different measures, the present studies, deliver enriching insights in the diversity of intergenerational relationships in general and parent care in particular. How this diversity emerges from the use of different concepts and instruments can be illustrated by the comparison between the operationalization of solidarity dimensions and support types in the Daatland and Lowenstein (2005) and Schwarz and Trommsdorff (2005) study, respectively. The concept and measure of intergenerational solidarity introduced by Bengtson and Roberts (1991) refer to different forms of relatedness within aging families, such as interactions, sentiments, attitudes, commitments and helping behaviors. Two of these measures used in the Daatland and Lowenstein (2005) study are not focused on help giving in the narrow sense of the word. The items of the affectual- and normative solidarity measures refer to intimacy and feelings of closeness, and feelings of filial responsibility, respectively (Table 2 in Daatland and Lowenstein 2005). The measure of instrumental solidarity focuses on the degree of (among others) emotional, instrumental, and financial support given and received by elderly parents. Schwarz and Trommsdorff (2005) measured instrumental support too. The scale they used refers to giving and receiving help related to household chores, official business and care in times of illness. The scope of this measure is clearly narrower than the one included in the intergenerational solidarity measure.

Further differentiation of some of the help categories might be appropriate in future research, especially when it focuses on (the development of) concrete helping and care behaviors in the micro-setting of the family. For example, as the instrumental support component “help in times of illness” comprises help with physical self care, medical care, bathing, daily hygiene, getting dressed and undressed, it may be appropriate to consider these types of helping behavior separately because some of them include intimate bodily contact, which is not obvious in many adult child-elderly parent relations.

Moreover, what adult children transfer to their parents may be more than what counts as help in the narrow sense of the word. By being available for mere social exchange and communication, family celebrations and annual rituals, and through encouraging and facilitating warm grandchild-grandparent relationships, adult and middle-aged children enrich the life of their elderly parents. The study of these kinds of transfers and solidarity dimensions requires the development of new subtle concepts and appropriate measures.

Caregiver and care-receiver variables

Whether or not, and what kind of transfers will take place in aging families, depends on many interacting personal and contextual factors. In this section, we focus on personal characteristics of the caregivers and care-receivers and their positions in the intergenerational family network. In the next section, we reflect on contextual variables.

Attias-Donfut et al. (2005), who studied financial and time-related transfers, considered gender, age, marital (partnership) status, family generational structure, self-reported health, years of education and income of both caregivers and care-receivers. Daatland and Lowenstein (2005) related access to help from the family or/and the welfare state, in elderly parents, to their functional status, gender, age, social class and civil status, emotional closeness to their children, and preference for family help.

The impact of some of these variables on parent care is so obvious that it makes sense—especially in psychological research—to focus on specific categories of parent caregivers and care-receivers. Quite a lot of research has been done mainly with adult and middle-aged women providing care to their elderly parents (mothers) (Cicirelli 1993, 1995; Li and Seltzer 2003). Recently, care-taking adult sons are also coming to the fore (Stephens and Franks 1999). The awareness that the differentiation between care for the own parents and care for the parents-in-law may be important, especially in non-Western populations, is also growing (Datta et al. in press). Gender, consanguinity, marital status, level of education and income, on the care-receiver as well as the caregiver side, may typically shape parent care.

Variables considered as possible determinants of parent care are usually more personal when the caregiver-care-receiver dyad is the focus of the investigation. In Schwarz and Trommsdorff's (2005) study, which is restricted to the support exchange in middle-aged daughter-elderly mother dyads, the key variable is the generalized internal representation of attachment. Besides maternal age and the level of family obligation (interdependence) as control variables, other psychological variables included are the daughter's self-disclosure to her mother, and her feeling of being admired by the mother, and the aged mother's feeling of being admired by her daughter. Similar variables are included in Perrig-Chiello and Höpflinger's (2005) investigation focused on filial maturity, perceived quality of intra-familial contacts, and attachment to one's own children, in healthy middle-aged urban adults with ageing parents.

Some of the possible determinants of care given and care received in the family deserve a brief comment. First, there is the *functional status or health condition of the aged parent*. As illustrated by the impact of the age of the mother on instrumental support provided by the daughter in the study of Schwarz and Trommsdorff (2005), and the effect of self-reported health on receiving

time-related transfers in the study of Attias-Donfut et al. (2005), this factor is a precondition of the most tangible forms of parent care. Besides residential distance, which we discuss in the following section, the elderly parents' deteriorating health condition is the central eliciting factor of the provision of help by adult children. In research of the determinants of parent care, this variable has to be taken into account ever before the contribution of more psychological variables can be appropriately considered.

Secondly, among the psychological variables especially worthy to be considered as determinants of parent care are the level of filial maturity of the adult children and the attachment of both, the adult children and the elderly parents. In two of the present papers, the construct of *attachment* is used. However, definitions, measures, respondents and targets are different. Schwarz and Trommsdorff (2005) focus on the generalized internal representation of attachment of mothers and daughters. They measure the construct with the Adult Attachment Scale of Collins and Read (1990), and relate the scores of the adult daughters on two dimensions (avoidance and preoccupation) to emotional and instrumental support received from parents and given to parents, and the analogous scores of the mothers to the support provided to the daughters. Perrig-Chiello and Höpflinger (2005) measure the attachment of middle-aged parents to their children by means of an interview procedure borrowed from Barnas et al. (1991), and relate the scores to the levels of help exchange with their aged parents. These two investigations side with other studies that use self-report measures (Bartholomew and Horowitz 1991; Hazan and Shaver 1987) and focus on the generalized internal working model of attachment or the attachment style of the caregiving adult children (Carpenter 2001; Crispi et al. 1997; Sörensen et al. 2002). These studies illustrate only some of the ways in which the construct of attachment can be made useful in the search for determinants of parent care in adult children. Indeed, recently, research on parent care in middle-aged adult children emerged in the classical attachment research tradition. This research focuses on the (coherence of the) internal representation of attachment rooted in the lifelong relationship with the parents and makes use of the Adult Attachment Interview (AAI) (Mahieu 2004; Pearson et al. 1993; Steele et al. 2004). In still other studies of parent care, attachment is conceptualized as the strength of the current (secure) attachment to the parents (mother or father), and measured with the Adult Attachment Scale introduced by Cicirelli (1983, 1991, 1993, 1995; Carpenter 2001; Datta et al. 2003; Mahieu 2004). This variety of approaches might help to find out what are the most fruitful conceptualizations and the most adequate measures of attachment, and whose attachment to whom is the most relevant in adult child-elderly parent caregiving research.

Given the continuous character of the parent-child relationship, one should expect research on parent care primarily to focus on the attachment patterns

(autonomous, dismissing, and preoccupied) in adult daughters and sons. Mahieu (2004) found several connections between attachment patterns (based on the AAI procedure) and aspects of parent care in a sample of 45 adult child caregivers. One of these findings is that autonomous adult children experience less parental incomprehension in the current care relationship than the insecurely attached caregivers, especially, the preoccupied. The latter experience more stress and burden in the caregiving relationship. Based on the analysis of a cluster of significant care characteristics three types of parent care related to the three AAI-attachment styles, could be distinguished.

Filial maturity is another concept now attracting some attention of parent care researchers (Cicirelli 1988; Marcoen 1995). Perrig-Chiello and Höpflinger (2005) found positive correlations between five filial maturity components (filial love, obligation, helpfulness and help, and parental consideration) and the degree of secure attachment of the respondents to their own younger children. The correlation of attachment with filial autonomy (actually a tendency to distancing) was negative. These results show how feeling oneself secure, supported and protected in the relationship with one's adult children, in middle adulthood, is connected with a positive relationship to parents who need support. One can imagine that the equally straightforwardly measured current attachment of adult children's to their parents would predict several aspects of their caregiving behaviors and experiences. I would expect strong relations between scores on this measure and scores on the parental consideration subscale and measures of parental maturity (Mahieu 1996; Mahieu and Marcoen 1999). The further elaboration of the concepts of filial and parental maturity in a developmental perspective (Braeckmans and Marcoen 1998; Mahieu and Marcoen 1999), and the development of in-depth interview procedures to detect the care attitudes subsistent in the comprehensive definitions of these concepts (e.g. vignette-instrument, in Mahieu 2004) may lead to insights that are highly relevant for theory building and practice in the domain of elder care.

Context variables

From the perspective of both, the support providing adult children (or younger adult generation) and the help receiving elderly parents (or older generation), different context variables can be considered in the search for determinants of the nature and the amount of parent care (care for the aged generation). These factors, situated in the microsystem of the (extended) family and the macrosystem of the society, may be studied separately or in combination, depending on whether the aim of the study is the characterization of the level of solidarity in a nation or the understanding of individuals involved in parent care. The same contextual variable (e.g. family structure) has different explanatory status in sociological

research on the prevalence of certain transfers to elderly citizens countrywide, respectively, developmental psychological research on the determinants of parent care in adult children.

The context variable most prominently linked to parent care is *residential distance* (Schwarz and Trommsdorff 2005) or geographical proximity of a child (parent) (Daatland and Lowenstein 2005). In the cross-national study of Daatland and Lowenstein (2005), having children close-by—just as the functional status of the aged parent in most countries—predict family help received by the elderly parents, in Norway, England, Germany, Spain, and Israel. In Schwarz and Trommsdorff's (2005) study, in Germany, residential distance affects the amount of instrumental support provided by adult daughters. Nearby living adult children are more likely to provide support to aging parents. The influence of geographic distance on the intergenerational exchange appears also in the cross-national study of Quadrello et al. (2005) in the UK, Spain, Finland, and Estonia. It is a strong negative predictor of face-to-face and spoken contacts between grandparents and their 10–15 years old grandchildren, and a positive predictor of the use of new written communication technologies, especially, e-mail. This kind of results confirms an important research imperative. Before considering the impact of more personal characteristics of adult children and elderly parents on parent caregiving (love, comprehension, empathy, and obligation) the mere geographical distance between the elderly and their offspring must be taken into account.

Characteristics of the *societal system* are included especially in economic and sociological investigations that focus on patterns of intergenerational transfers and its transformations over time in a particular country or region. By comparing the impact of caregiver and care-receiver characteristics, and the above-mentioned more proximal context variables on elder care in a number of (European) countries that differ from each other in several identifiable respects, societal factors are also taken into account in research in which the caregiver–care-receiver relationship is the focus of the research. There may be relevant demographic, institutional-policy and cultural differences between the countries (Kohli 2004) that at least to a certain degree account for variations in parent and elder care. Some of these context variables enhance or diminish the probability that parent care in one or another form, or intergenerational transfers in general, will take place or change over the years. The societal context is taken into consideration in Daatland and Lowenstein's (2005) cross-national investigation in terms of differences between countries, in welfare state regime and ranking on the societal dimension collectivism–individualism. These countries “represent different contexts and opportunity structures for family life and elder care” (DOI 10.1007/s10433-005-0001-1). Comparable differences are implied in the cross-national study of Attias-Donfut et al. (2005) with adults, aged 50 and above, in ten countries, “representing the northern,

continental and southern division of Europe” (DOI 10.1007/s10433-005-0008-7), and each having its own unique political and institutional settings which impact upon patterns of intergenerational transfers.

Taking into account the contextual factors in the search of psychological determinants of parent care, by comparing patterns of connections between variables in different countries, requires the use of structural equivalent self-report measures that typically assess psychological constructs that came into being in particular cultural and linguistic contexts (Van de Vijver and Leung 1997). In the cross-national (cross-cultural) study of Daatland and Lowenstein (2005), factor analysis was used to test the structural equivalence of the measures of the different dimensions of intergenerational solidarity in the five European countries. The growing internationalization of sociological and psychological research in a multicultural Europe will strengthen the need for excellent equivalent measures.

Final considerations

The papers in this special issue throw light on different aspects of the core phenomenon of intergenerational relationships in middle adulthood and old age: adult children provide help and support to elderly parents, and more in general, societies take care of older citizens.

Interacting societal, contextual, and personal factors play a role in making adult children more or less concerned about, and willing to take care of their aging parents. Several of these factors are studied in the present investigations. It clearly emerges that parent care and family care, in general, in which elderly persons are the care-recipients, are changing in changing societies. However, there are apparent indications that parent care remains in new forms resulting from intergenerational negotiations between autonomous individuals striving for enduring independency in the context of continuing intrafamilial involvement. In many European countries, new family-welfare state balances are established. Modern welfare states seem not to erode family solidarity and intergenerational exchange. There is no support for the so-called crowding-out hypothesis (Daatland and Lowenstein 2005).

The plasticity of the parent care phenomenon is rooted in complex patterns of societal and personal factors impinging on autonomous adult daughters and sons facing the specific needs of their just as autonomous fathers and mothers. These factors create a broad space for the emergence and development of societal and psychological processes inducing parent care, and elderly care in general. Through providing several accessible medical and social services, and whatever other legal and practical measures, welfare states create frameworks and opportunities for the reorganization and reorientation of intergenerational exchange of support between adult children and their elderly parents. Equally important in shaping and reshaping adult chil-

dren's parent care behaviors and experiences are psychological factors such as the level of maturity caregivers and care-receivers achieved in different social roles. Among the different psychological disciplines that may contribute to the elucidation of parent care in adult children today developmental psychology is probably the most promising. It provides the conceptual tools of the attachment theory to put parent care and its socio-emotional origins in a life-span perspective.

The majority of the adult children are inclined to help or support their parents in one or another way when they need help. However, not all adult children are—in the position, or, able to be—concerned for their parents or taking care of them. At the extreme some adults do not display concern and care for their parents at all. The reasons for this absolute lack of apprehension or effective support are as worthy to be studied as the reasons why some adults, mainly daughters, engage themselves in complete self-denying and self-destructive parent care. The psychological determinants of the nature and amount of parent care, and the gains and losses it generates (satisfaction and burden), against the background of the spirit of the age and the changing socio-demographic characteristics of the society, remain to be a central topic of gerontological research today.

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