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## 31 Intergenerational support: the role of gender and social networks

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- ▶ Thirty five per cent of women aged 50 and over help their parents/parents-in-law
  - ▶ Women who help parents/parents-in-law present different social network types
  - ▶ European familialism regimes affect helpers' social network types
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### 31.1 Intergenerational support in Europe

Older people are at the centre of a complex exchange network within the family, giving and receiving many types of practical help and support. Everyday support provided by the family is an essential contribution to the sustainability of long-term care systems in all European countries. It is predicted that in the years to come we will witness a significant increase in the number and the average age of informal helpers (Hoffmann & Rodrigues 2010). A better understanding of the characteristics of these individuals becomes crucial, including the conditions under which they provide support. Care research has pointed systematically to the importance of the association between the provision of care to older adults and social variables such as kinship, gender, provision of formal support or even cultural norms. Also, the capacity of providing help and care can be constrained and facilitated by caregivers' social resources including those within their personal network (Carpentier & Ducharme 2003).

We argue that studying the characteristics of social networks of helpers is an important contribution to further the understanding of the conditions under which intergenerational support is provided. In this chapter we focus on the intergenerational support in the ascendant direction, that is, on the women that provide care to their parents (including parents-in-law) or help them with household tasks.

This chapter has two main goals. First, to identify types of social networks of women aged 50 and over, who provide support to their parents in different European settings. Second, to consider the association of specific network types and contextual characteristics (familialism regimes). The chapter proceeds with the presentation of the key ideas from the theoretical and empirical studies that ground our research in two domains related to intergenerational support: intergenerational relations and social networks.

## 31.2 Intergenerational relations and intergenerational support

Being older does not inevitably lead to being dependent. Nonetheless, there are a number of factors underlying the ageing process that involve a probable increase in the need for support in both health issues and carrying out daily activities. Family is still an essential source of informal care for older relatives (Hoffmann & Rodrigues 2010), a source of care in which gender plays an important role. Several studies confirm that women provide more intense and frequent care than men (Schmid et al. 2012). However, this gender inequality, as well as the importance of family in the provision of informal care to family members, can be mitigated or strengthened by the social context or the state (Leitner 2003, Schmid et al. 2012).

Several approaches have been proposed to account for the variability of the social functions of the family. Esping-Anderson (1999) distinguishes familialistic from de-familialistic regimes, describing the first as a regime where the public policy assumes that it is the responsibility of the household to ensure the welfare of their members, whereas in the second the policies are in place to reduce the individual's dependence on household and kinship. Leitner (2003) describes familialism types considering not only the policies to relieve families from providing care, but also the ones that actively promote family care. His clustering exercise is particularly relevant to our study, because it is based on a gender-sensitive theoretical concept of familialism and it is applied to the variety of policies on older population care in Europe.

Leitner (2003) identifies *explicit*, *implicit* and *optional familialism regimes* in the countries of Europe. *Explicit familialism regimes* assign the responsibility of care for older individuals to the family, to which benefits are paid, and they provide few formal support services, such as domiciliary care (Austria, Belgium, France and Germany). In *implicit familialism* welfare regimes, the state neither supports family care through cash payments nor provides generous public care services. In such settings, support between adult children and their parents is encouraged through a strong normative system that is based on filial and moral obligations (Greece, Italy, Portugal, Spain and the Netherlands). Finally, in the *optional type* of familialism regimes, generous professional and financial services are provided to dependent older people through cash-for-care programmes, relieving families of the responsibility of caring for their older members (Denmark, Finland and Sweden). Eastern European countries, which formerly were part of the socialist block, do not yet have a fully defined system. Consequently, in the research that is presented in this chapter they will be grouped separately, as proposed by other authors in similar realms of inquiry (Requena 2010).

## 31.3 Social networks and intergenerational support

According to the Convoy Model, social networks are constellations of social relations. They are comprised by people who are important for the individual, and who may provide support and protection over the life course. This constellation of social ties can be characterised by objective and subjective features. It also has a dynamic character, inasmuch as it responds to different phases, situations and roles experienced by the individual at different points in the life course ([Fiori et al. 2007](#)).

Multiple pathways through which social networks can influence individuals have been identified in social research – such as the provision of social support, the facilitation of resources and material goods, the sharing of information, norms and values (social influence) or even positive appraisals or the promotion of a sense of identity ([Gibney & McGovern 2011](#)). These pathways have been found to be relevant for caregivers (in terms of their own health and wellbeing), as well as for sustaining the caregiver role. There is evidence that social networks are related to the type of care provided and the support received by the caregivers and that they can be an important tool in coping with the demands of such a role. On the other hand, some features of social networks can have moderate negative health effects on care providers ([Carpentier & Ducharme 2003](#)).

To describe variations that may exist in individuals' social networks, it is important to consider the structure, the function and the quality of social relations that compose the convoy ([Fiori et al. 2007](#)). Structural aspects are related to variables such as the size of the network, physical proximity of social network members, frequency of contact or participation in social activities. Functional aspects include such dynamics as the exchange of support between members and the level of emotional closeness. Finally, the quality dimension of social networks concerns the way in which the relations are experienced by the individual and can be assessed by subjective evaluations ([Fiori et al. 2007](#)).

Berkman and collaborators (2000) draw attention to the relevance of macro-level factors in shaping and determining the form and functioning of social networks. For example, aspects such as gender, country or welfare regime have been linked to differences in the characteristics of social networks ([Litwin 2009](#), [Requena 2010](#)). Therefore, it is of particular relevance to consider this contextual dimension, already mentioned in the previous section, in a cross-national analysis of helpers' social networks. Recent research on the subject has made clear that in order to effectively account for the complex nature of social networks, it is necessary not to discard the multidimensionality of the concept. In addition, several authors have shown the benefits of following a pattern-centred approach

to analyse social networks in older sectors of the population, where the implications of network types in health, activity and other indicators of successful ageing were considered ([Fiori et al. 2007](#), [Litwin 2009](#), [Gibney & McGovern 2011](#)).

## 31.4 Defining social networks profiles

The current analysis addresses a sample of 2,235 female SHARE survey respondents, aged 50 or older ( $M = 58.40$ ,  $SD = 4.80$ ) who indicated that they provided help to their parents or parents-in-law outside the household in the previous twelve months. Data are from the fourth wave of the Survey of Health, Ageing and Retirement in Europe (2010–2011). We consider any kind of help because the probe in the SHARE questionnaire – Wave 4 asked: “In the last twelve months, have you personally given personal care or practical household help to a family member living outside your household, a friend or neighbour”. The survey instrument identifies to whom help was given, thus allowing us to focus on the help provided to parents or parents-in-law outside the household. In this chapter, the individuals who answered this question affirmatively will be called “helpers”. Since the survey does not have a uniform sampling design, calibrated individual weights were used in the sample descriptive analyses.

Based upon the consulted literature on social network types among older adults ([Fiori et al. 2007](#), [Litwin 2009](#), [Gibney & McGovern 2011](#)) and the quality of the data available, seven social network variables were employed in the current research to define social network profiles. These included: ‘Percentage of Family’ (in the social network), ‘Percentage of Friends’, ‘Percentage of Women’, ‘Emotional Closeness’ (average perceived emotional closeness provided by social network members), ‘Physical Proximity’ (proportion of social network members living at a distance less than five km), ‘Social Integration’ (number of social activities in which the respondent had been engaged in the previous month, from a list of seven activity areas, for example, voluntary work and going to a social club), and ‘Network Size’ (the number of named members in the personal social network). All the variables were introduced in the analysis in their standardised form. The identification of different social network types was conducted by cluster analysis, combining a hierarchical method (Ward’s Method) and a non-hierarchical method (k-means). The minimum number of clusters with the power to explain a relevant percentage of total variance of the seven variables was retained. Finally, a discriminate function analysis was performed to distinguish the different clusters (identified by the association between the social network variables and the more relevant discriminate functions in each cluster). The clusters were described taking into account the more discriminatory features.

The relationship between social context and social network type was studied with multinomial regression models. Social network types were regressed on familialism regime, controlling for socio-demographic variables (age, marital status, perceived economic difficulties – assessed by responses to the question ‘*Is the household able to make ends meet?*’). The model was replicated three times by changing the dependent variable reference category in order to compare the four network types with each other. The comparison between familialism regimes was based on the main effects of each category (explicit, implicit and Eastern Europe in reference to optional familialism) on social network type.

## 31.5 Social network types and social context

### 31.5.1 Social networks types of women who provide help to parents/parents-in-law

Thirty five per cent (34.9%) of women aged 50 or older, who reported having provided help or care to others outside the household in the last twelve-month period, gave such support to their parents or parents-in-law. These women tended to be under 65 years old (89.4%), married (71.4%) and employed (49.0%). They usually had upper secondary education level (39.5%) and lived in a household that was able to make ends meet “fairly easily” (36.3%) or “easily” (32.4%).

The cluster analysis identified four distinct groups that correspond to different social network types (Table 31.1). The first cluster, which accounted for 18.4 per cent of the study sample, was positively associated with the percentage of friends and female members, but negatively associated with the percentage of family members, social integration and emotional closeness. Consequently, we named this cluster the *unsupportive friends network*. The second cluster, which we called *the distant members network*, was the most frequent in the sample (34.5%). It was positively associated with the size of the network, but negatively associated with the physical proximity variable. To a smaller extent, this cluster was also positively associated with the percentage of family members (and negatively with the percentage of friends members). The third cluster, accounting for 18.5 per cent of the sample, was positively associated with the percentage of friends, social integration and emotional closeness, and negatively associated with the percentage of family members and of women in the network. It was termed as the *supportive friends network*. The fourth and final cluster (28.6% of the sample) was positively associated with the percentage of kin members and with physical proximity. In this group, which we named the *neighbouring family network*, there was also a negative association with the percentage of friends and the size of the network.

**Table 31.1:** Social network types as a function of their component variables

Social network types	Unsupportive friends		Distant members		Supportive friends		Neighbouring family	
	Mean	Standard deviation	Mean	Standard deviation	Mean	Standard deviation	Mean	Standard deviation
Percentage of friends	<b>0.57</b>	(0.66)	-0.31	(0.51)	<b>1.76</b>	(0.77)	-0.63	(0.36)
Percentage of family	-0.75	(0.62)	0.29	(0.57)	-1.59	(0.64)	<b>0.73</b>	(0.39)
Percentage of women	<b>0.43</b>	(0.79)	0.01	(0.73)	<b>0.51</b>	(0.74)	-0.70	(1.09)
Emotional closeness	<b>-0.53</b>	(0.96)	0.01	(0.84)	<b>-0.30</b>	(0.92)	<b>0.51</b>	(0.87)
Physical proximity	-0.49	(0.94)	<b>-0.49</b>	(0.80)	-0.40	(1.04)	<b>0.74</b>	(0.65)
Social integration	-0.57	(0.51)	0.58	(0.93)	<b>0.66</b>	(0.90)	-0.52	(0.79)
Network size	0.18	(0.86)	<b>0.61</b>	(0.92)	0.23	(1.03)	<b>-0.46</b>	(0.70)

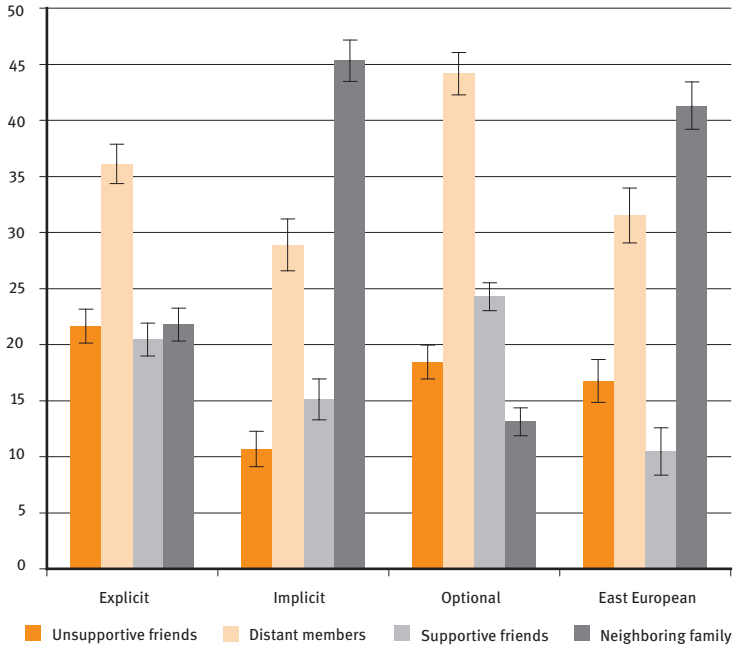
Notes: All variables are presented in the standardised form.

Source: SHARE Wave 4 release 1, unweighted data, N= 2,147

### 31.5.2 Social networks types and familialism regimes

The analysis revealed that social network type varied in relation to familialism regime ( $\chi^2_{(9)}=179.458$ ;  $p=0.000$ ). By observing the graphical representation of this relationship, it is possible to identify the main differences (Figure 31.1). Within the explicit regimes, the *distant members* network was the most frequent profile found, whereas all the other types had less prevalence. The same pattern was observed in the optional regimes sample, but in this context the *supportive friends* network type was somewhat more frequent than the *unsupportive friends* or *neighbouring family* types. In implicit and Eastern European regimes, the *neighbouring family* stood out as the most frequently observed network type, followed by the *distant members* network. Friends networks were much less common in both of those settings.

To study the accuracy of these differences, the odds ratio of having a given social network type was calculated in relation to welfare regimes, controlling for marital status and perceived economic status (age was removed from the analysis because it did not reach significance). The adjusted model attained statistical significance ( $G^2_{(29)}=353.684$ ;  $p=0.000$ ) and all the variables considered showed significant effects on social network type odds ( $p<0.001$ ). There were significant differences between familialism regimes concerning the probabilities of having given network types. For a more parsimonious presentation of the results, only the estimates calculated for the different familialism regimes are shown. For this same reason, we show only once the odds ratios for the comparison of two given network types.



**Figure 31.1:** Social network types by familism regimes

Source: SHARE Wave 4 release 1, unweighted data, N= 2,147

The results presented in Table 31.2 show that, in general, respondents from explicit and optional regimes did not differ much in the probability of having a specific social network type, except in the case of *neighbouring family networks* which were more frequent in explicit regimes compared to *distant members* and *supportive friends* networks. Being from an optional regime was related to fewer probabilities of having *neighbouring family networks* and with higher probabilities of having *supportive friends* networks, when compared with *distant members* or *unsupportive friends* networks. Living in an implicit familism regime was associated with the highest probability of having a *neighbouring family network* in comparison to all the other network types, except in comparison with *supportive friends* where Eastern European women had the highest likelihood of having *neighbouring family networks*. Living in an Eastern European regime was associated with increased chances of having *neighbouring family networks* and also with a decreased chance of having *supportive friends* networks, compared with *distant members* and *unsupportive friends* network types.

**Table 31.2:** Social network types as a function of familialism regimes: Multinomial regression models

Network types	Familialism regimes	Coefficients	Standard Error	Exp(B)	C.I.95 % Exp(B)	
					Low	High
<b>Model 1</b>						
Distant family	Explicit	-0.200	(0.175)	0.818	0.580	1.154
	Implicit	0.117	(0.235)	1.124	0.709	1.782
	East-Europe	0.050	(0.200)	1.051	0.710	1.556
Supportive friends	Explicit	-0.261	(0.195)	0.770	0.526	1.127
	Implicit	0.172	(0.261)	1.187	0.712	1.981
	East-Europe	-0.614***	(0.237)	0.541	0.341	0.861
Neighbouring family	Explicit	0.376*	(0.216)	1.456	0.954	2.224
	Implicit	1.559***	(0.256)	4.755	2.881	7.846
	East-Europe	1.223***	(0.230)	3.399	2.167	5.332
<b>Model 2</b>						
Supportive friends	Explicit	-0.061	(0.168)	0.941	0.677	1.307
	Implicit	0.055	(0.213)	1.056	0.696	1.602
	East-Europe	-0.664***	(0.209)	0.515	0.342	0.775
Neighbouring family	Explicit	0.576***	(0.187)	1.779	1.232	2.569
	Implicit	1.442***	(0.201)	4.229	2.851	6.272
	East-Europe	1.173***	(0.194)	3.233	2.212	4.726
<b>Model 3</b>						
Neighbouring family	Explicit	0.637***	(0.211)	1.891	1.251	2.859
	Implicit	1.387***	(0.236)	4.004	2.522	6.358
	East-Europe	1.837***	(0.238)	6.278	3.941	10.002

Significance: \*\*\* = 1%; \*\* = 5%; \* = 10%

Notes: All models controlled for marital status, and perceived economic status. The reference category for familialism regimes variable is "Optional familialism" in all models. Social network type reference categories: Unsupportive friends (Model 1), Distant members (Model 2) Supportive friends (Model 3).

Source: SHARE Wave 4 release 1, unweighted data, N= 2,147

## 31.6 Individual and contextual variation in social networks types

The present chapter focuses on the women, aged 50 years and older, who provide help for their parents or parents-in-law. A typology of social networks was developed and the probabilities of having a specific network type was compared in



different European settings. Four types of social networks were identified: unsupportive friends, distant family, supportive friends, and neighbouring family. Although focused on a very specific sample, the identified network types can be considered to be similar to previous studies on social networks of European older adults. To some extent, they appear to correspond to a combination of four relatively robust network types: family/friends and diverse/restricted type (Fiori et al. 2007).

The multidimensional approach that was employed in the current study allowed important differences to be identified in terms of the derivation of social network types, as well as in terms of contextual variation. In particular, we found, that helpers from an optional familialism regime have a lesser likelihood of having a *neighbouring familiar* network. Analysing the results in more detail, we note that explicit and optional familialism regimes appear to be close in terms of the network type distribution, except in the prevalence of *neighbouring family* networks (more probable in the explicit regimes). These similarities can be related to the characteristics of these settings, which are close in terms of the provision of care services allowing less family dependent social networks of parents' helpers.

The Eastern European and implicit familialism regimes also share some resemblances. *Neighbouring family* network type is the most frequent in both settings and is much more prevalent than in optional regimes when controlling for socio-demographic factors. The Eastern European familialism regime is also associated with a lower likelihood of having *supportive friends networks*. It is plausible to assume that the similarities between implicit and Eastern European regimes can be related to the scarce provision of care services in both settings, while the distinction can be related to the difference in their cultural norms and family values. This explanation should be investigated further in future research.

Some limitations of the current study need to be considered. The data available did not allow distinguishing between those who gave personal care, such as help in bathing and dressing, and those who provided practical household help to their parents and parents-in-law. It was similarly impossible to differentiate between instrumental care and emotional support. Another limitation was that the dimensions considered for the derivation of the network types were constricted by data availability. Although the SHARE survey instrument includes a very complete social network module, high levels of missing values in the sample of helpers prevented the use of some theoretically relevant variables.

Future research should complement these findings with consideration of the implications of helpers' social networks on the care that they provide. Another important area of interest is the association between helpers' social networks and the quality of life of both helpers and dependent adults. It would also be of inter-

est to consider a male sample using this same analytical approach, in order to better understand how men who act as caregivers differ in respect to their social networks.

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