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Policy Perspectives on Changing Intergenerational Relations

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The combination of population ageing, changing family structures and patterns of employment is having an increasing impact on intergenerational relations in Western societies. The 'generational contract' is being affected by women's growing labour market participation, especially among mothers with young children, the extension of the period spent in education and training and the curtailment of welfare expansion. Since women carry the main burden of care work, the organisation of social care is a key issue in understanding changing intergenerational relations. This article explores the perceptions that European families in different socio-political contexts have of changing intergenerational relations and their expectations of policy actors.

Introduction

Current demographic trends in the Western world imply that a new multigenerational kinship pattern is emerging: it is not unusual for three or more generations to coexist at any given point in time, while each generation has fewer members. Moreover, the patterning of intergenerational family roles has shifted as women delay childbirth, younger generations spend more years in education and training and, therefore, remain dependent for longer on their parents, and as life expectancy is extended for economically inactive older people. New kinship patterns have implications for individuals' self-conceptions, familial roles and social support systems (Bengtson, 1993). Divorce, for example, may affect loyalties and relationships between parents and children, grandparents and grandchildren (Salvage, 1995). It also means that spouses lose their partners, who are the most frequent carers in old age. The growing number of older people living alone influences perceptions of 'natural' care responsibilities (Daatland, 1996).

European statistics and national data clearly show that care for dependent children and adults is, nonetheless, still primarily a female responsibility (Fagan and Burchell, 2002) and will remain so, unless greater attention is paid to gender inequality and the gendered nature of the labour market in employment policies (Rubery *et al*., 1999). In conjunction with new kinship patterns, the growing number of older women and of mothers with young children in employment is changing the conditions under which childcare and eldercare are provided. More women and men can expect to experience the 'middle-generation squeeze', when they are required to care for both grandchildren and frail elderly parents (Bengtson, 1993).

Social policy and perceptions of family responsibilities

Different welfare state traditions and the political, social and cultural values underlying their historical formation impact on perceptions of family responsibilities and expectations

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of policy actors. A key issue in European societies is how to organise social care and how to divide responsibility for caring between the state, the market, the family and civil society (Daly and Lewis, 2000).

Five patterns of relationships are explored in this paper,[1] determined according to legal definitions of family responsibilities and obligations (Millar and Warman, 1996), the way social care is organised, the perceptions families have of their responsibility towards their members and of the role of the state in the care relationship. In the first group of countries, government intervention is minimal. In the second two groupings, responsibility is shared: in the first case, under clearly regulated conditions, and in the second through less formal controls. In the fourth grouping, the state assumes the main responsibility for care and, in the fifth, it has withdrawn its former support.

Strong family responsibilities

In southern Europe, family rights and obligations are written into the national constitution. In Greece, Italy and Spain, for example, parents have a lifelong obligation to support their children (Hantrais and Letablier, 1996). In Greece, the mutual obligation is reflected in the tax system, which allows the same exemptions for dependent parents as for dependent children. In Italy, the law obliges children to maintain family members up to the fourth degree of relationship. In Spain, the obligation of mutual support is differentiated according to the degree of relationship.

In general, public child and eldercare is underdeveloped, and state provision is only available if other sources of family support have been exhausted. The family is the main provider of care and economic support for older people as well as children. Older people are much less likely to be living alone in southern European countries than elsewhere in the Union, and the average age at which young people leave the family home is much higher (European Commission, 2002). Even though several generations less often live together than in the past, geographical proximity is common, which facilitates mutual help and support. Family solidarity remains very strong. Respondents interviewed in these three countries agree that they would first turn to their families for help and, only as a last resort and at the cost of considerable effort, to the complex system of public benefits and services. Although a frequent demand was for more public childcare, many working mothers preferred to entrust young children to a relative or a childminder.

When local support for domiciliary care is inadequate, and no family member is available to provide full-time care, some respondents in Italy described how they entrusted the care of an elderly relative to a living-in foreign worker. The scarcity of residential homes for older people, their high cost and low quality, and lack of public homecare services means that elderly relatives move in with a son or daughter when they are no longer able to manage by themselves. Greek respondents supported the idea that elderly parents should be able to live alone as long as possible but recognised that their families had a responsibility for care. One Greek respondent in her twenties, who had her mother-in-law living with her, explained:

> I believe that for as long as they are self-sufficient, they should live on their own. . . . Personally I would, under no circumstances, allow one of mine (father, mother, father-in-law, mother-in-law) to go to a home for the aged. . . . I believe that children have to make some sacrifices for their parents. A place has to be made in the home for the grandfather and the grandmother.

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Multigenerational living is also seen as being advantageous for the younger generation, since it enables grandparents to help with childcare. Family-based care for children and older people relies on women as carers, but a number of respondents felt that the burden of care could become too onerous and negatively affect older women's health. Multigenerational living as a way of managing family responsibilities is being called into question as more individualistic values are adopted. One older Spanish woman in full-time employment, with in-laws and a son aged 26 living in the same household, summarised a view expressed by several respondents:

> When I become a grandmother, I'd like to take care of my grandchildren at weekends once in a while, or during holidays. But not as an obligation; I think I would feel trapped. I'd like to be able to relax when I retire.

In southern European countries, the relatively low rates of female employment continue to perpetuate the asymmetric gender pattern in the family. When public support for child and eldercare is limited, and family care does not meet needs, families with the means to do so turn to the market to buy domestic services from other women. In a dual-earner Spanish couple, both with professional jobs, a living-in carer from another part of the world solved the problem:

> I have a girl from Colombia who lives with us and makes the meals and does the housework. She also looks after grandmother and keeps her company. I am now in the process of getting her papers. She has two children in Colombia and sends all her earnings back there, as her needs are covered here.

Regulated shared responsibilities

France and Germany afford examples of countries where civil law regulates the responsibility to maintain relatives. In France, the civil code sets out reciprocal obligations between husbands and wives, ascendants and descendants in direct line of descent, and immediate relatives including in-laws. The state has, nonetheless, played an important role in childcare provision since the late nineteenth century for demographic reasons and to guarantee social justice. Care for elderly dependants has, to a great extent, been regarded as a family issue, but the situation is becoming problematic since women are less often available as carers. The traditional role of the state was to provide a safety net for older people with insufficient resources and no family support (Rostgaard and Fridberg, 1998). Over the years, domestic services have progressively been extended for both child and eldercare, with the aim of combating unemployment and bringing caring into the formal protected economy.

French respondents felt that the community should take responsibility for eldercare, but that it should be shared with families in a complementary relationship. Voluntary organisations are expected to fill gaps in policy but as a supplement rather than a substitute for the state. The development of more individualistic values goes hand in hand with a diminishing sense of social responsibility. Younger respondents and those living in urban areas were less supportive of the traditional moral responsibility and obligation reported by older respondents. Nor could they imagine having their elderly parents living with them. They justified their standpoint by evoking inadequate housing conditions, lack of

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time and problems associated with communal living. In an increasingly complex society, the state is expected to assume greater responsibility, as argued by a female respondent in her mid-40s with three young children:

> It's not simply a question for the family. It would be sad if that was the case. People wouldn't know how to cope with different situations. It is a duty of society, of the whole of society, to look after its weaker members. The whole of society has to contribute and it should contribute.

German basic law enforces the principle of subsidiarity. Individuals with the means to do so have care and financial responsibilities for parents and for their unemployed and unmarried children until the age of 25, including any offspring who are lone-parent families (Hantrais and Letablier, 1996). However, only a minority of respondents claimed that the traditional family unit should form the basis of society. Child and eldercare was for a long time regarded primarily as an issue for families in West Germany. Today, as in France, it is seen as a concern for the whole of society. Most respondents felt that the state should bear the main responsibility for the welfare and quality of life of families. Many were critical of the fact that it was, to a large extent, delegated to charitable organisations. Public initiatives have been slow to develop, and policy has tended to reinforce care within families. Benefits in kind for domestic care have been introduced in parallel with cash benefits for family members (Rostgaard and Fridberg, 1998). The Long Term Care Insurance implemented in 1995 incorporates both principles. Care insurance together with the Child Care Act of 1996, which guarantees all three-year-olds a place in a kindergarten, imply a new welfare mix, involving a shift from informal to formal and from unpaid to paid care (Ostner, 1998). The care of very young children is still left to the family, while support for older children and eldercare are subsidised by the state, though often delivered through voluntary organisations.

Unregulated sharing of responsibilities

In the UK and Ireland, the legal attribution of care responsibility to families and the state is not clearly defined in formal rules and regulations. Children are not legally bound to provide financial support for the caring needs of adult dependants. Nor is the state's responsibility laid down in national regulations. Families largely make their own care arrangements, often with recourse to services bought from the market.

The National Childcare Strategy launched in 1998 by the Labour government announced increased state involvement. However, the UK government continues to ascribe a central role to families in looking after their members. Many respondents in the UK regarded the poor provision of public childcare as problematic, while nonetheless stressing the importance of freedom of choice, as exemplified by one male respondent:

> Childcare is a very big issue for us. There are times when my wife is just working to pay the childminder like during the school holidays. . . . Yes, the state and employers should have more involvement in providing good childcare. But no one should be forced to use it.

Middle-aged respondents reported how they felt responsible for the well-being of elderly parents, but many people believed the state should take care of vulnerable members of society. Whereas families generally expected to make their own care arrangements for their children, and care provision is reciprocated between the

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generations over time, the role of government was to provide support services to assist families in caring for older and disabled people.

State intervention in family life is also limited in Ireland, mainly as a result of historical factors, especially the role of the Church in Irish politics. Irish law does not impose obligations on children to support their parents; the obligation to maintain applies only for parents towards their children. The lack of public provision of childcare and the high cost create problems for employed mothers, who try to organise their working hours to avoid the need to resort to paid childminders. However, the issue is low on the government's agenda, and effort is directed more towards combating child poverty in large families.

While the majority of respondents felt that families should take responsibility for their own well-being, many of them, irrespective of gender and social background, could not envisage having their parents living with them, and predicted they would want to stay in their own homes. The assumption of government is, however, that family members will provide care, although the low marriage rate and a relatively large rural population mean that informal care is not always available, and a relatively high proportion of people over 65 are living in residential homes. In this case, the wider family is not expected to contribute to payment for care; only the means of the person requiring care are taken into account.

State responsibility for care

In Scandinavia, the state takes the main responsibility for care of children, older and disabled people. In Sweden, for example, since 1956, children cannot be forced to pay municipalities the cost of caring for their parents, despite the fact that the obligation on children to care for their parents was not removed from law until 1978. Childcare for children is provided by the state, and older people are given assistance in their own homes. None of the respondents in the study cared for grandchildren on a regular basis, but they helped to fill gaps between family and public childcare. The replacement of residential care by policies to support people in their own homes has led to an increase in informal care carried out by adult children as a complement to public home help (Szebehely, 1993). The family, therefore, continues to play an important and increasing role in times of economic restructuring. Many respondents described how they provided support for elderly relatives while, at the same time, expressing the view that the state or municipality should take the main responsibility. A well-qualified married man in his mid-30s offered the following view of care for his elderly parents

> With regard to my own parents, I hope I can be here to help them. And you should do as much as you can. Then it's of course very good to have public home-helps. My grandmother lived with my parents until I was 12. It was very good but it was also very tiresome for my dad. So you shouldn't romanticise the picture of having the older generation living in your home. On the other hand, if you live in the same town, then you can support them as much as you can. That's okay. That's something you want to do. Besides, some things are better done by professionals.

Withdrawal of state support

Changes in the division of formal responsibilities between the state, the market, the family and the community are most obvious in the candidate countries since political and economic transition. During the Soviet era, paid work was the key to access to

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housing, health and childcare, mediated through the enterprise. The family played an important informal role in family welfare due to the poor quality of social services. Since 1989, provision has been curtailed, with negative consequences, particularly for women. The conservative principle of subisidiarity has come to the fore, which means that the state only helps when the family fails to do so. Women in cash-poor families have to take greater responsibility for caring for disabled, young and older people (Gal and Kligman, 2000). It is not unusual for grandmothers who are not in paid work to fill the gap. Women are, therefore, more dependent on their families, and family networks are often maintained through economic necessity (Pascall and Manning, 2000). However, respondents were reluctant to accept that family responsibilities and obligations should be considered solely as a consequence of economic necessity.

In Poland and Hungary, children have both moral and formal obligations to care for elderly parents, but parents are not obliged to care for their adult children. The family is the main provider of care for older and disabled people in Estonia. The role of the state is essentially to provide employment that guarantees a living wage and childcare so that parents are available for work. Multigenerational living is one way of managing care but, in Poland, respondents strongly supported intergenerational solidarity, irrespective of whether they lived together. It is a more common practice for elderly dependants in Poland and Hungary than in Estonia to live with relatives when they cannot manage by themselves. For some respondents, this is a 'natural' obligation, but multigenerational living is not easy, as one female respondent with teenage children reported in Hungary:

> I lived with my mother until I got married, because my parents got divorced in 1974, and my father went to live in our house in G. . . . My mother died, and we stayed here. My father is still alive, and in the winter, we'll have to bring him here. . . . We have no choice but to bring him here to live with us. We're not happy about it because our relationship is not like that. But what can you do? He has to come live with us because he can't take care of himself. . . . We divide these small rooms between us. He has the use of the small room and the three of us live in the big room. Unfortunately this is what life had in store for us.

Conclusions

The roles played by the state, the market, the family and civil society in family welfare vary across Europe. In the countries studied, widespread agreement was, however, found that the state should take responsibility for eldercare, primarily by providing support services to enable older people to remain in their own homes. Only when elderly parents cannot manage by themselves should other options be considered. The demand for state intervention is most strongly expressed in countries where public support is weak, whereas it is more or less taken for granted where it is more generous.

Family solidarity is being maintained, irrespective of formal obligations, but multigenerational living as a solution to eldercare and reliance on grandparents for childcare are being called into question in countries where public support is poor, and no other options exist. Although the expectation in most countries is that the state should provide, or at least regulate, childcare facilities, the preference in the Mediterranean states is for higher levels of benefit to enable parents to choose for themselves the most suitable form of provision. In Scandinavia, where the state has long taken responsibility for child and eldercare, support for public provision remains very strong. Here as elsewhere,

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families take on practical and emotional caring tasks for children and elderly parents, but essentially as a supplement to public services.

All the countries studied offer some public support for families to care for elderly dependants, either in the form of cash benefits or social services. Arrangements such as flexitime or reduced working hours to care for children rarely apply to eldercare (Daly, 2001). The general trend is away from the state as provider towards the family, voluntary sector and market (Daly and Lewis, 2000). Domestic services are developing, sometimes as a substitute for family care or state provision, and sometimes as a complement or supplement. In several cases, as in Germany, voluntary organisations play an important role in care provision and are generally welcomed as a supplement to public policy measures but not as a substitute for it.

The materials examined in this article confirm that care giving and care arrangements are, to a large extent, female work and that caring is becoming increasingly differentiated between groups of women. In countries with limited public support, well-educated women in stable employment and with high incomes have other options to deal with their family responsibilities, by buying care for children and elderly relatives from poorly educated and low-paid women in their home country or from other parts of the world (Hochschild, 2001). For families without the necessary economic means, the main source of help is female relatives, friends or neighbours.

Current socio-demographic trends and changes in family structures are leading to changes in the balance of care responsibilities between men and women. Women's increased labour market participation and changing family forms are resulting in greater involvement of men in care for children and elderly parents. More individualistic value systems mean, however, that the pivot generation is less likely to want to assume care responsibilities. The interviews with European families provide some evidence of this trend, but they also confirm that family solidarity continues to be strong.

Note

1 The empirical material referred to in this article is drawn from interviews conducted in 2001–02 by participants in a Framework Programme 5 project funded by the European Commission (HPSE-CT-1999-00031), entitled 'Improving Policy Responses and Outcomes to Socio-Economic Challenges: Changing Family Structures, Policy and Practice'. Following on from a larger survey, in-depth interviews were conducted with up to 50 men and women in each of the 11 countries in the study, covering different family living arrangements (married, unmarried cohabiting couples, with and without children, lone parents, reconstituted families) and specified age and socio-economic categories. See http://www.iprosec.org.uk, 5/Feb/03, for further details. The contents of this article do not necessarily reflect the opinion or position of the Commission or the other contributors.

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