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## THE ROLE OF INTERGENERATIONAL TRANSACTIONS, INTERACTIONS AND RELATIONS IN SHAPING WELLBEING IN LATER LIFE

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### ENHANCING WELLBEING IN AN AGEING SOCIETY (EWAS)

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## ABSTRACT

This research paper presents the rationale for a focus on the relationships between older persons and other generations of kin, and the role these play in influencing wellbeing in later life, when considering ways of *enhancing wellbeing in an ageing society*. The literature is reviewed on the causal relationships between older persons' wellbeing and social connectedness, intergenerational solidarity and social cohesion. The relevance of these findings to the New Zealand context is highlighted.

The review establishes that in the culturally diverse community of kin in New Zealand, considerable variation in the relationship between intergenerational transactions and wellbeing may be expected. Among some of the main research objectives that Objective 3 of the EWAS programme will address will be the investigation of the range of intergenerational transactions among New Zealand midlife and older people, the exploration of whether older persons are in fact as much the providers as the recipients of help, and establishing whether older parents and their adult children report differently on the amount of care given and received. These research objectives will be developed based on a methodological approach which links a sample of older persons with a sample of their mid-life children.

**Keywords:** ageing; wellbeing; intergenerational relations; solidarity; transactions; kin and non-kin; New Zealand

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## 1. Introduction

The primary objective of this working paper is to present the rationale for a research focus which takes as its locus of interest the relationships between older persons and other generations of kin, and the role these play in influencing wellbeing in later life. It is both the structure and content of the relationships – how, and with whom they are formed, and what they actually transmit - as opposed to wellbeing per se which provide the focus of the paper. Individuals do not live in isolation from each other, but are gregarious by nature, their actions forming part of a broader web of relations built up throughout life. Yet in contrast to this general observation, old age has often been associated with a period of progressive withdrawal from social interaction and from engagement in networks of social relations, leading to structural isolation, loneliness, feelings of loss of identity and role and the onset of a state of increasing dependency (Cumming and Henry, 1961; Cowgill and Holmes, 1972; Rosow, 1967). The theoretical perspectives which have contributed to this perception of old age have been challenged on several counts (Estes, Simon and Phillipson, 2003; Antonucci and Akiyama, 1991), not least because they ignore the vibrancy and variety of relations which may be maintained between older persons and other generations of kin – those with siblings, cousins or their own offspring for example, and descending further down the generational ladder, with grandchildren, and perhaps even great-grandchildren. To suggest that the quality of life of older persons will remain indifferent to this potentially complex set of relations therefore overlooks what could be some of its most significant determinants (Victor, 2005).

This working paper forms part of the literature review undertaken to address Objective Three of the *Foundation for Research, Science and Technology* programme, ‘Enhancing Wellbeing in an Ageing Society’. The Objective, entitled ‘Perspectives, experiences and transactions with kin and non-kin,’ has a two-fold aim: to generate new knowledge which will improve our understanding of how the perceptions and aspirations of the elderly, and their interactions and transactions with culturally diverse communities of kin, friends and neighbours contribute to their wellbeing; second, to generate new knowledge which will inform policy relating to the balance of government, community and familial support for older people.

Whilst recognising that relationships with friends and neighbours are central to the maintenance of the well being of older persons, the paper focuses in particular on the interactions and transactions that they maintain with *kin* – those individuals with whom older persons share a consanguineal, affinal or fictive kinship bond<sup>1</sup>. Underpinning the review will be reference to materials from the fields of sociology and social gerontology. The notion of intergenerational solidarity or cohesion will be given prominence as a theoretical and empirical paradigm which can contribute to the development of a knowledge base in the area of older person’s wellbeing and kin. Solidarity is defined as ‘feelings of mutual affinity within kin relationships and their expression through behaviour in the form of transactions (or exchanges of support) and interactions (contacts, communication) with others’<sup>2</sup>. It is therefore a construct which applies to the observation of bonds or ties between individuals at the micro-level.

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<sup>1</sup> *Consanguineal*: related through descent or ‘blood ties’; *affinal*: related through the process of marriage; *fictive*: a relationship that a particular cultural group may recognise as modelled on kinship (Parkin & Stone, 2004).

<sup>2</sup> Adapted from Dykstra et al, 1999.

New Zealand's population, founded on its indigenous peoples and supplemented since then by the settlement of migrants predominantly from Europe and more recently by those from the Pacific, Asia, and other non-European countries, is being increasingly recognised as a culturally diverse society. With this, also comes a recognition that whilst most people share a similar broad perception about the chronological meaning of 'being old', the actual experience of the ageing process and how it is perceived by older persons themselves and by their kin, will be subject to diverse interpretation. Population ageing as a macro-level phenomenon has been the subject of discussion and debate for several decades in most developed countries, New Zealand being no exception. What differentiates it as a subject of research in New Zealand however, is the very complex multicultural and social contexts in which it is occurring, and the importance that this implies in developing research which takes this diversity into account, both conceptually and methodologically. This paper therefore attempts to articulate international findings with existing research in New Zealand and to highlight the specifics therein

### *Social connectedness or social isolation in later life?*

A central postulate underpinning this Objective is that the wellbeing of older persons will in part, be reflected through the degree to which they are *socially connected* to the three communities of kin, friends and neighbours in terms of the *breadth* of relations (numbers of members), their relations of *functionality* (what they provide to, and receive from others) and *interactivity* (how they remain in contact with others and with what frequency). Social connectedness may therefore be described as the quantity, breadth, functionality and interactivity of social ties between older persons and other kin. Given the cultural diversity of New Zealand society, it may well be the case that the transactions and interactions in which older persons engage with others will be mediated by norms and values, and will vary depending upon factors such as ethnicity, age or gender.

The policy interest in social connectedness stems from the fact that it is seen as integral to wellbeing, symbolising wider social networks of relationships, roles and support resources, which in themselves provide the potential for achieving shared goals, and maintaining positive relations with kin and non-kin (Ministry of Social Development, 2004a:114). For older persons, the notion of social connectedness contributing to wellbeing can be linked to the broader principles underlying New Zealand's framework of *positive ageing* – more specifically perhaps, those which outline the importance of providing opportunities for participation in and contribution to family, whānau and community (Dalziel, 2001: 6). In other words, social connectedness in relation to later life reflects a principle of promoting wellbeing through ensuring social integration, and hence averting social isolation and marginalisation, an outcome congruent with a broader social policy strategy of reducing social exclusion as a means of achieving wellbeing (Ministry of Social Policy, 2001). At present, from the relatively limited measurements of social connectedness for which population-level data exist, there are indications that compared to other age groups, New Zealanders aged sixty-five or more are less likely to be 'technologically connected' by having access to internet, are participating less in family activities by inviting friends or family to share a meal, but are less likely than younger New Zealanders in their late teens and early twenties to report feelings of loneliness<sup>3</sup> (Ministry of Social Development, 2004a: 116, 118, 123; 2004b).

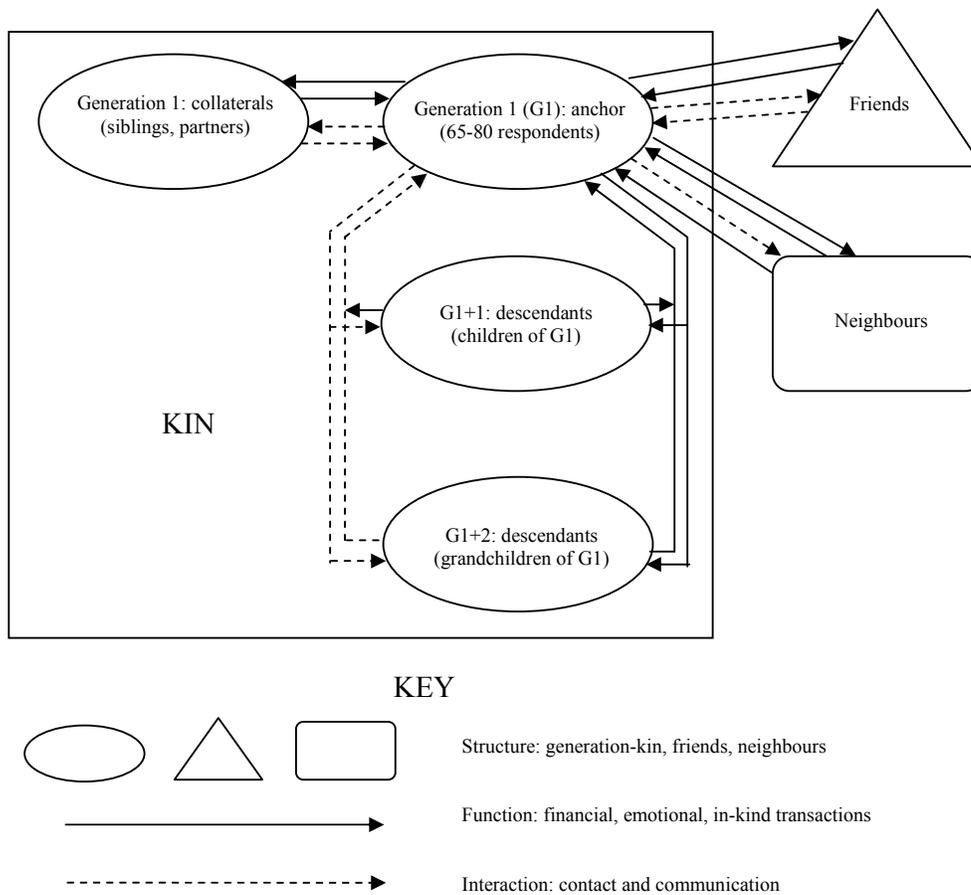
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<sup>3</sup> Two notes of caution are raised here with regard to this last finding: the sample size of the *Social Wellbeing Survey* was quite small (1,125) and the response rate was quite low (42.8 percent).

The notion of social connectedness in the New Zealand context may also be seen as integral to the concept of *social capital*, as defined by Spellerberg (2001): ‘[...] *social capital is the social resource that is embodied in the relations between people. It resides in and stems from contact, communication, sharing, co-operation and trust that are inherent in ongoing relationships*’ (104). Spellerberg also suggests that social capital can be viewed as “relationships among actors (individuals, groups, and/or organisations) that create a capacity to act for mutual benefit or a common purpose” (op. cit.: 9).

The communities of kin, friends and neighbours referred to in Objective Three are represented in the structures of such social relationships, as in Figure 1.

**Figure 1: Conceptual Model, Objective 3 – Social Relationships (Kin, Friends and Neighbours)**



The transactions represent the functions of these social relationships, or what purposes they serve in allowing older persons to be socially connected. A broad definition of transactions might reflect a two-way flow (out and/or in) of exchanges of support or assistance, such as material or in-kind help like housework or gardening, financial assistance such as money as

gifts or loans and affective or emotional support. These categories would also correspond to what Spellerberg calls the actions or events which reflect the nature of actual relationships. A broad definition of interactions of contact and communication might include the occurrence and frequency of face-to-face, email, written or telephone exchanges.

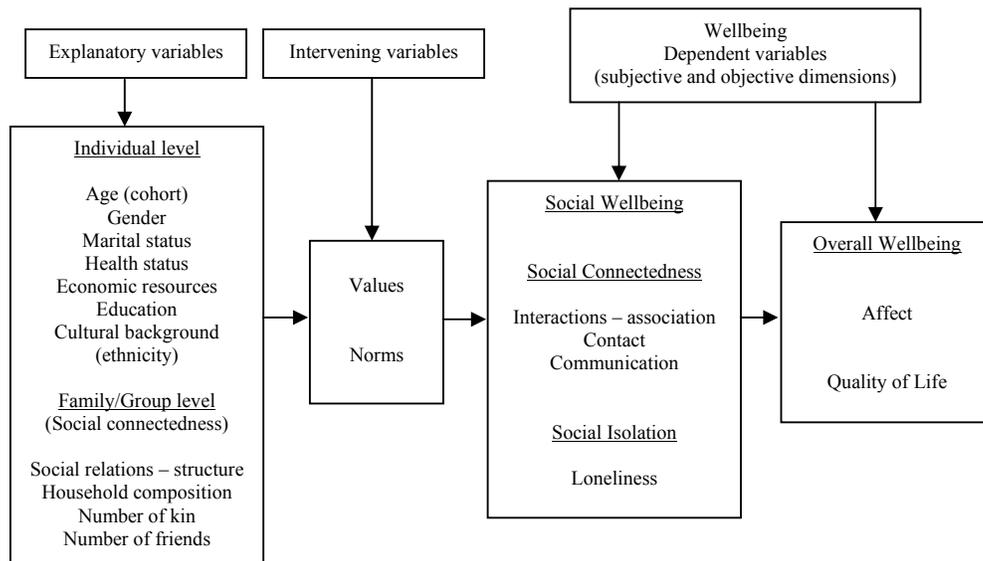
Similar to the notion of social connectedness, Laireiter and Baumann (1992) refer to the concept of social integration or *embeddedness* which they take to represent an individual's participation or involvement in social life within the community and wider society. Applying this concept to social relations also implies examining the resources or goods they represent, and the degree to which individuals have access to them, and perceive or experience them as sources of support. Similarly, de Jong Gierveld and colleagues (1997) refer to factors of *social cohesion* when evaluating wellbeing in terms of experiences of loneliness in later life. Social cohesion they note, can be measured in terms of such factors as household composition, the presence or absence of a partner, the size of a social network - '*all those people with whom one interacts regularly and with whom one has close ties*' (79) - and the exchange of support, an indicator of the functioning of the network. Defining the relative degree of an individual's social integration and the cohesiveness of their social relations could therefore be established by asking questions on the regularity of contact with kin, friends or neighbours, and perceptions about, or enactment of exchanges of help or assistance with them, including shared living arrangements.

Just as the notion of social connectedness may be taken as an indicator of wellbeing, a lack of social integration can be taken as an indicator of *social isolation* (Pillemer, Moen, Wethington, & Glasgow, 2000). The experience of loneliness in later life has frequently been taken as an indicator of this isolation (De Jong Gierveld, 1998) and can represent a subjective dimension of wellbeing (De Jong Gierveld, Tilburg and Lecchini, 1997). Living with a partner and larger social networks have been found to decrease feelings of loneliness (De Jong Gierveld, Tilburg and Lecchini, 1997: 92).

### *Wellbeing*

The concept of wellbeing and the terms with which it is associated – happiness, quality of life for example - have recently been the object of measurement and discussion in New Zealand (Colman, 2004; Duncan, 2005; Pratt & Love, 2004; Smith, 2004). For the purposes of Objective Three in the context of intergenerational kin relations, we have thus far given it two meanings, both of which correspond to the broader classification of the social dimension of wellbeing, or social wellbeing. Wellbeing is first conceptualised as the degree of *social connectedness* existing between older persons and their kin, measured through the objective dimensions of interaction and transaction (see Figure 2). Second, feelings or experiences of loneliness may be taken to indicate lack of social connectedness or *social isolation*, representing a subjective dimension of wellbeing. Both connectedness and isolation form part of the broader conceptualisation of wellbeing as social integration.

**Figure 2: Conceptual Model – Wellbeing across Generations – Explanatory and Dependent Variables**



In line with conventional approaches to the conceptualisation of wellbeing which distinguish its subjective (an individual’s own experiences and evaluations of their life circumstances) and objective dimensions (an individual’s material resources and life conditions) (Galloway, 2006; Kahn and Juster, 2002; Smith et al, 1999), data collection tools for Objective Three also cover the affective aspects of wellbeing which are measured using the *Positive affect, negative affect scale – PANAS* (Watson, Clark and Tellegen, 1988) and a more general quality-of-life measure the *WHOQOL-BREF* developed by the World Health Organisation. The latter is a multi-dimensional quality of life scale covering four domains: physical, psychological, social relationships and the environment, along with the overall quality of life (The WHOQOL Group, 1994). Data collected in Objective 3 should therefore enable the evaluation of relations of association and correlation between other explanatory socio-demographic factors and each of these dimensions of wellbeing – social connectedness, social isolation, affect and quality of life – which in fact serve as dependent variables of wellbeing.

Just as the various dimensions of social connectedness and social isolation (measured as loneliness) can be taken as dependent variables representing wellbeing, so too can they be used as explanatory factors likely to influence older persons’ perceived quality of life (see Figure 2 for example where the explanatory variables of social relations and structures could also be dependent variables, the main correlates of which would probably be current and life-course demographic factors relating to family formation, dissolution, etc.). Objective 3 therefore reflects the assumption that wellbeing cannot be conceptualised nor measured as a single item and that the various dimensions are inter-related in terms of association and causality.

### *Intergenerational perspectives*

The paper also establishes the importance of taking an intergenerational perspective when examining how the wellbeing of older persons may be influenced by their relationships of interaction and transaction with kin. The term *generation* is used primarily to denote the concept of kinship lineage. This refers to a person's lineage position within the succession of individuals who form part of a kinship unit because of birth, adoption, fostering or marriage (Harootyan and Bengtson, 1994). This said, our focus will be on individuals who in 2007 will belong to the age groups 65 to 84, the birth cohorts spanning the 1923-42 period. Some of them will have experienced New Zealand's Great Depression of the 1920s, all will have lived through the Second World War, surviving through the political reforms of the late 1990s, including the more recent introduction of a superannuation fund, legislation on retirement villages, removal of a statutory age of retirement, to name but a few of the significant policy and legislative changes occurring during their lifetime. For analytical purposes a generation may therefore also be equated with one or more age cohorts, individuals who share the same birth year(s), with the assumption that they will also share similar historical events across their lifetime (Becker and Hermkens, 1993).

## **2. Older Persons' Wellbeing in an Intergenerational Context**

### *The thesis of modernisation*

There is a general consensus in the sociological and social gerontology literature that a combination of demographic and social changes have contributed to an increasing interest in the way in which older persons' wellbeing will be influenced by their links with other kin members, and hence to a broader set of intergenerational relations (Jerrome, 1993; Mabry, Giarrusso & Bengtson, 2004; Silverstein, Bengtson & Litwak, 2003).

The broad rationale for situating older persons' wellbeing in the context of their relations with kin stems from the theoretical influence of modernisation theory (Cowgill 1974, 1986; Ogburn, 1938). With modernisation and industrialisation (new technologies, increasing urbanisation, etc.), it has been argued that the family would lose or delegate to other institutions (the education system for example) many of its functions, becoming a highly specialised, nuclear unit, structurally isolated from its larger extended networks of kin (Parsons & Bales, 1956). It was anticipated that this transformation would lead to a weakening of the normative dimensions of intergenerational kinship relations, such as sentiments of obligation and duty to care for others, coupled with a reduction in their functional capacities to provide support and nurture to dependent members beyond those of their own offspring (Ogburn, 1938; Sussman, 1991). Another dimension to the 'modernisation of the family' thesis was that individuals would become increasingly dependent upon institutions and organisations because of the fragmentation of traditional support structures provided by the family (Ogburn, 1938). Economic transformations would entail the shift from agricultural, home-based production to industrialised productivity, necessitating the migration of younger generations from rural to urban areas in search of work. Through this process older persons were to have become more isolated, and were to rely increasingly on the services provided by modern welfare state to meet their needs for material wellbeing (Goode, 1963). Translated into contemporary debate, this reasoning is echoed in the argument that the modern welfare state has had the effect of 'crowding out' the

family by usurping the place of kinship systems which might otherwise be the primary source of support for older persons today (Künemund & Rein, 1999).

In contrast to these interpretations, others have argued that processes of modernisation and their impact upon family ties are not uniform but vary depending upon socio-economic and cultural context, that families have the capacity to adapt to change and that intergenerational support is often maintained (Hashimoto, 1993; Kendig, Hashimoto, & Coppard, 1992). Several studies for example have demonstrated that adult children continue to be key providers of support and contact for their older parents in highly modernised cultures (D'Costa, 1985; Phillipson, Bernard, Phillips, & Ogg, 2001; Shanas, 1980). In-kind transactions and the maintenance of contact and emotional support have been found to exist between older persons and their offspring, despite geographic separation (Litwak, 1960; Litwak & Kulis, 1987; Sussman & Burchinal, 1962; Warnes, 1994). Others have also provided empirical analysis challenging the idea of the 'crowding out' hypothesis by suggesting that public transfers complement rather than 'crowd out' micro-level, private intergenerational transfers (Arber & Attias-Donfut, 2000; Attias-Donfut, 1995b).

### *Demographic change*

Analysis of demographic change indicates that with population ageing, resulting from improved life expectancies and decreasing fertility, comes increases in both the proportions and numbers of the elderly. In turn, family age structures are changing, shifting to what has become known as a 'beanpole', as opposed to 'horizontal' structure – that is, with increasing life expectancies comes the co-existence of more generations, but with decreasing fertility, fewer members in each generation (Bengtson, Rosenthal, & Burton, 1996; Bengtson & Achenbaum, 1993). At the micro-level, one implication of these structural changes is that as individuals will have longer years of shared lives with other family members, so too may they have more opportunities to experience the cohesiveness, or in contrast, the conflictual aspects of social relations with kin. With decreasing fertility comes the question of whether the number of children an older person has had – the 'kin supply' - will significantly influence their chances of receiving help and support in later life (Jackson & Pool, 1996; Kivett & Atkinson, 1984; McPherson, 1993). A further implication of this structural change is the increasing likelihood that grandparents can expect to see their grandchildren, or even great-grandchildren, become adults, a change that suggests hitherto rarely experienced adult intergenerational dynamics (Farkas & Hogan, 1995).

A more recent dimension to the macro-level impact of demographic change has been the concern that population ageing leads to problems of generational conflict as generations 'compete' for scarce resources. From a policy perspective, the concern then becomes one of a challenge to the informal 'social contract' between generations - the implicit agreement that adults will ensure the wellbeing of youth, who will in turn, provide for their ageing parents (Fussell, 2002). One contention advanced is that younger people will be adversely affected because of the shift of resources towards older persons (Esping-Andersen, Gallie, Hemerijck, & Myles, 2002; Preston, 1984). The argument that population ageing challenges intergenerational equity and in turn weakens intergenerational bonds at the micro-level of kin relations has however been challenged (Arber & Attias-Donfut, 2000; Phillipson, 2000).

### *Social change*

Finally, social change as exemplified through shifts in patterns of family formation and dissolution, coupled with transformations in the normative expectations of what 'family'

means, has led to the diversification of family structures, and hence to family roles. One of the more significant changes for the wellbeing of the elderly has been whether women will continue to provide the 'caring pool' of informal support that they have traditionally fulfilled, because of their increasing involvement in the paid economy (Wolf and Soldo, 1994; Sussman, 1991). Others have argued that as the foundations of western family life are progressively eroded, this gives way to rising individualism (Morgan, 2004; Popenoe, 1993) - a focus on self, on the couple as the nexus of interaction to the exclusion of other members of extended networks - norms which preclude consideration of the wellbeing of the elderly (Putnam, 2000). Compounding this has been the argument that processes of divorce, separation and remarriage will lead to more complex family forms and relations, weakening bonds of solidarity between kin and engendering intergenerational conflict, often to the detriment of older persons (Clarke, et al, 1999).

There is however ample evidence to counter this argument (Finch and Mason, 2000; Wenger, 1984). In addition, there is increasing recognition that the role of older persons as grandparents is changing. New Zealand evidence suggests in fact, that they are taking on new roles as 'second time around parents' when their own offspring encounter problems (Thompson, 1999; Armstrong, 2003, 2005), or continue to maintain a high level of whānau/family responsibility and involvement in kōhanga reo (Crothers, 2003). Drawing on identity theory, Drew & Silverstein (2004) provide evidence that as older persons become more involved in their role as grandparents, their self esteem is improved. Bengtson in countering the argument of family decline or demise, finds that older persons in their role as grandparents are providing 'the glue' which keeps generations together as they encounter family upheaval, in particular divorce (Bengtson, 2001). There is also some New Zealand evidence to suggest that depending upon ethnic group, strong social bonds still characterise relations between grandparents and their grandchildren (Giles et al., 2003). Other New Zealand researchers have challenged the perception of later life as one of presumed disability, illness or hardship by emphasising wellbeing in terms of the contributions and roles older persons continue to play in society (Waldon and Hauora, 2004: 3). In the *Oranga Kaumātua* study amongst older Maori, about three quarters of those interviewed were involved on a weekly basis with whānau matters, close to eight out of ten provided care for whānau members (for children, the sick, disabled and older persons) and whilst most also received care, this was generally not for long-term illnesses but for accommodation, transport or financial needs (Waldon and Hauora, 2004: 5). Others researchers have pointed out that, depending upon cultural context, receiving care in later life forms part of a reciprocal relationship, and does not necessarily imply loss of empowerment (Kiata and Kerse, 2005).

In short, the question of whether wellbeing will be achieved and maintained in later life seems to hang on two arguments. For some, demographic change creates the potential for the caring needs of older people to become increasingly compromised due to a shortage of an informal 'caring workforce' and a diminished 'kin supply'. Compounding these structural changes is the additional argument that kin members will increasingly wish to focus on their own needs, rather than needs of older persons, and that this situation will be exacerbated by the complexities of family networks which result from divorce, separation and re-partnering. The direction of this argument would therefore predicate the breakdown of micro-level solidarity and the deterioration of the wellbeing of older persons as one outcome. Countering this, are those who acknowledge the increasing diversity of the roles of older persons, and the ability of kin to maintain their commitments to them, despite the constraints of increasingly complex life course commitments and patterns. As a consequence, relations with kin will act to enhance wellbeing in later life, not only of themselves, but also of others, especially kin.

### *Intergenerational Studies of Older Persons' Wellbeing*

These theoretical perspectives have led to the development of numerous studies designed to provide empirical evidence on the debates surrounding the solidity and functionality of kin relations and their implications for the wellbeing of older persons. Probably the most well known of these has been the *Longitudinal Study of Generations* (LSOG) initially developed by Vern Bengtson in 1971 at the University of Southern California, Los Angeles, as a survey of intergenerational relations of 300 three-generation families comprising grandparents, middle-aged parents and grandchildren. The study's purpose was to investigate continuity and change in family intergenerational relations across time and to examine how such changes influence the wellbeing of individuals in the family. The study has since been extended to include a fourth generation of great-grandchildren, and six more surveys have been completed, the latest in 2001.

Other studies have been developed to reflect the importance of taking an intergenerational perspective to family relations and the needs of the elderly, including work in France by Attias-Donfut (1995a) where the age group 40-52 was taken as the 'pivot' group with two other generations – ascendants and descendants; Rossi and Rossi's study of parent-child relationships across the life course (Rossi & Rossi, 1990), and their more recent study on mid-life but focusing on a sample of individuals aged 25-74 (Rossi, 2001); the 1996 *German Aging Survey*, an interdisciplinary study of the subjective and objective dimensions to life conditions and issues of adulthood and aging amongst a sample of 40-85 years old (<http://www.fall-berlin.de/>), the cross-comparative project *Old Age and Autonomy: The Role of Service Systems and Intergenerational Family Solidarity* including Germany, Spain, England, Israel and Norway (Daatland & Herlofson, 2001) and the French survey *Proches et Parents* (Bonvalet et al., 1993, 1999). The 1996 Australian *Later Life Families Study* which involved individuals aged between 50 and 70 years was also designed to examine the place of family in people's lives as they approach older age, with a particular focus on intergenerational exchanges (Millward, 1998). *The Berlin Aging Survey*, although focusing only on the very old (70-100 years) offers an interdisciplinary perspective to issues of wellbeing, including the importance of social participation and social relationships (Mayer, Mass, & Wagner, 1999; Wagner, Schutze, & Lang, 1999).

### *Intergenerational perceptions of transactions – methodological considerations*

When studying exchange relationships between generations, studies have highlighted the importance of choice of informant when assessing how differences in respondent perceptions may influence the nature and levels of support reported or the degree to which these exchanges are considered reciprocal. Rossi and Rossi (Rossi & Rossi, 1990) in studying parent-adult child relations from a life-course perspective compared responses from parents and their adult children in terms of levels of help given and received (for example, mothers' reported help given to child and child's reports of help received). Their findings indicate a tendency for givers to report providing more help than recipients actually report receiving (1990: 422). Aquilino's (1999) comparison of patterns of agreement and disagreement on the quality of intergenerational relations as reported by parents and young adult children shows systematic differences between the two groups in terms of the nature and quality of the relationships reported. Similarly, studies examining variations between generations of adult child and elder parent in the self-assessment of support given and received suggest significant variations between the two groups, with a general tendency for descendants to report giving

more help than that reported received by ascendants (see (Bond & Harvey, 1991; Klein Ikkink, van Tilburg, & Knipscheer, 1999; Lowenstein et al., 2001).

### 3. Intergenerational Solidarity and Social Cohesion

#### *Existing Frameworks*

An existing framework in the area of social gerontology which has provided some background to the development of the research instruments for Objective 3 is the micro-level framework of intergenerational solidarity, designed to assess “the behavioural and emotional dimensions of interaction, cohesion, sentiment and support between intergenerational relationships over the course of the adult life-span’ (Bengtson, Giarrusso, Silverstein, & Wang, 2000; Silverstein, Bengtson and Litwak, 2003: 188). First developed by Bengtson and colleagues in response to western theories of modernisation which predicted the isolation of older persons from networks of kin and community, the framework has gained prominence in the analysis of links between older persons and their kin (Bengtson, Olander, & Haddad, 1976; Mangen, Bengtson, & Landry, 1988). Contributing to the wider goal of establishing a theory of family cohesion, it is informed by theories of social organisation, the social psychology of group dynamics, exchange theory and developmental perspectives in family theory (Roberts, Richards and Bengtson, 1991). As well as providing the basis for the *Longitudinal Study of Generations* in the USA, the solidarity paradigm has also been the foundation for several international comparative studies dealing with demographic and social change and their implications for kin relations and the needs of older persons (OASIS, 2006; Daatland & Herlofson, 2001; Dykstra et al., 1999). These studies have included the Netherlands, Israel, Norway, Spain, Germany, the UK and the USA.

The solidarity model originally comprised six elements representing the types of bonds existing between parents and their children, which can be divided into two general dimensions of intergenerational solidarity: (a) structural-behavioural including *functional* (help with daily tasks), *structural* (co-residence) and *associational* (contact) solidarity; (b) cognitive-affective including: *affectual* (feelings of emotional closeness), *consensual* (shared opinions) and *normative* (norms regarding responsibility for other generations) solidarity. Testing of the model has concluded that intergenerational solidarity is not a uni-dimensional construct, and that each element may be tested separately, or used to elaborate typologies of solidarity (Silverstein & Bengtson, 1997). More recently the framework has been expanded to include the notions of ambivalence<sup>4</sup> and conflict, a conceptual development designed to capture the contradictions and tensions in relations between parents and adult offspring arising in contexts of changing family relations (Bengtson, 2002; Lüscher, 2004; Lüscher & Pillemer, 1998).

Since its inception in 1971, research completed as part of the earlier mentioned LSOG has found consistently high levels of affectual solidarity between generations (enduring emotional bonds), but which nonetheless vary depending upon generational position. Parents are more likely over time to report higher levels of affect than their own children, as are grandparents compared to grandchildren. Explanations of these findings in terms of the

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<sup>4</sup> The concept of intergenerational ambivalence has been defined as occurring when: ‘[...]polarized simultaneous emotions, thoughts, volitions, actions, social relations and/or structures [that] are considered relevant for the constitution of individual or collective identities are (or can be) interpreted as temporarily or even permanently irreconcilable’ (Lüscher, 2004: 36).

'intergenerational stake' hypothesis suggest that with older age comes a stronger psychosocial investment in intergenerational relations (Giarrusso, Stallings & Bengtson, 1995). Despite the high levels of affectual solidarity found, the LSOG data also indicate that intergenerational relations display significant conflict or detachment (Clarke et al. 1999), factors which have the potential to reduce the likelihood of intergenerational transactions of support because of strain, particularly in care-giving contexts (Pruchno, Burant and Peters, 1987).

Interestingly, and in contrast to the conceptualisation of late life as a period of increased dependency and intensified needs for support, the LSOG consistently finds an inverse relationship between normative solidarity measured through norms of filial obligation (the duty to provide support and show respect to older kin members) and age. It is the younger generations who are more inclined to adhere to this expectation, suggesting that older persons' normative expectations are driven by a desire for independence and autonomy, and a sense that they should be providing rather than receiving support (Logan and Spitz, 1995).

A further application of the solidarity paradigm has involved the development of typologies or classificatory approaches which identify types of family intergenerational relationships. Depending upon the co-existence of varying combinations of the original elements of the solidarity model (Burholt & Wenger, 1998; Silverstein & Bengtson, 1997), or on task-specific functions (Pyke & Bengtson, 1996; Silverstein & Litwak, 1993), explanations for differences in family relationships in terms of transfers of support between adult children and their parents have been identified (Berkman, Oxman, & Seeman, 1991). In the New Zealand context, Ng has also developed this type of work based on the notion of filial piety (Ng, Loong, Liu, & Weatherall, 2000). Silverstein and Bengtson's typology of family types identifies 'detached' relations which are qualified by a lack of engagement between adult child and parent on any of the solidarity elements (1997:444). Using a social network approach and longitudinal data on ageing spanning a 16 year period, Burholt and Wenger (1998) study changes occurring in relationships between older people (aged over 65) and their children and siblings. Using four dimensions of the solidarity paradigm – structure, association, affection and function – they find that relations can be of two types, *close knit* (where relations between older persons and a sibling or child display engagement on three dimensions of solidarity) and *loose knit* (relations are not likely to be engaged on any of the three dimensions). More importantly, these relationships are not stable over time but can change, displaying a decrease in closeness. Relations are however more likely to remain close knit for mothers and sisters than for fathers and brothers.

These findings highlight the importance of recognising that relations in later life follow their own developmental cycle, possibly independently from factors of increased frailty and dependency, that a life-span perspective to understanding family relations may be useful, and that caution is required in developing policy initiatives using research based on those in their early sixties to make predictions about those who are much older.

#### *New Zealand applications*

The solidarity paradigm has been applied in the New Zealand context to a limited extent, for the analysis of the structural-behavioural dimensions of solidarity between mid-life individuals and their kin of ascending and descending generations (Hillcoat-Nallétamby and Dharmalingam, 2006; 2006 (under review); 2005; 2003; 2002; Hillcoat-Nallétamby, Dharmalingam, & Baxendine (in press); Hillcoat-Nallétamby, Dharmalingam, & Koopman-

Boyden, 2002). Results generally concur with international findings: flows of support are biased towards the younger generations, ageing parents receive little financial assistance but specific types of in-kind help, transactions are structured in particular by gender with women more likely than men (or mothers than fathers) to maintain associational links with both ascending and descending groups. There is also some evidence that consanguineal as opposed to affinal bonds are more favourable to emotional transactions for the dyad of adult child and ageing parent, a finding which raises important questions regarding the effect of family change and its impact upon support from kin in later life. Some exploratory evidence has also suggested that differences in patterns of transactions between older persons and their adult children may be due to variations in 'family cultures', that is, the values that individuals place upon the role of family in their lives (Hillcoat-Nalletamby & Dharmalingam, 2005).

Taking a different conceptual perspective, the variables developed to measure the various elements of the solidarity paradigm can also be used to evaluate the role of *social relationships* in contributing to the wellbeing of older persons. Such relationships can be conceptualised in terms of the roles and the functions they represent. The conceptual framework underpinning Objective 3 represents social relationships as *role relationships* with kin and non-kin (refer to Figure 1). More specifically in the context of this paper, the nature of kin relationships includes the older person's (anchor) relationship to other kin generations based on collateral relations with partners or siblings, and through relationships of descent with their own children and grandchildren. By implication, these relations represent consanguineal or affinal bonds and may be further refined in terms of the frequency of contact between individuals and delineated by their functional aspects. The latter are generally again sub-divided into their affective or emotional and instrumental dimensions, and further distinguished in terms of financial and non-pecuniary characteristics (Wagner, 1999: 285).

Social relations can therefore be seen as measures of the social integration of older persons with other kin (itself a dimension of wellbeing) as well as representing the social resources to which the older person may or may not have access to (Tesch-Romer, et al. 2003). As Laireiter and Baumann (1992) distinguish when talking of social ties, social relations can be conceptualised as roles or kinds of relationships (e.g. friend, family, neighbour) but can also represent resources which potentially involve exchanges or transactions of help given and received (p. 33). In addition, they make the important distinction between perception and enaction with regard to the functional aspect of social relations. Sarason and colleagues (1990) define *enacted transactions* (the functional dimension) as real interactions between people who exchange support, distinguishing 'enacted support' as a flow of support from the provider, to 'received support' describing that of the recipient. The implications of these conceptual distinctions are important when trying to assess potential asymmetry in intergenerational transactions or when establishing the actual as opposed to the potential characteristics of social relations from a functional perspective (Antonucci and Jackson, 1990; Aquilino, 1999).

In New Zealand, Love and colleagues (Love & Pratt, 2004) have alluded to the notion of solidarity as a concept of possible relevance to Māori because it allows us to consider the older person as part of a *system* of relationships – incorporating family, friends, neighbours. In this sense, social wellbeing is seen as a group property, within which the individual is situated, the distinction between individual and social wellbeing therefore becoming less pertinent. In their analysis of the Oranga Kaumātua study on perceptions of health amongst older persons, Waldon and Hauora (2004:3) also note that older Māori are not considered as

living in isolation from other systems and developments. Similarly, Durie and colleagues in considering domains relevant to Maori, note the importance of recognising the link between community and personal wellbeing, the former potentially representing the ‘driver’ of the latter (Durie, et al 2003: 102).

At present, we have only partial elements for the measurement of intergenerational solidarity in the New Zealand context. The case study *Oranga Kaumatua* focusing on the perceptions of health amongst a sample of 429 older Māori (Hauora, et al. 1997; Waldon and Hauora, 2004) collected valuable information on their whānau roles and interactions, including whānau care received and given and the frequency of contact with whānau members. As the authors themselves note, the study’s statistical generalisability is probably limited because the sample was biased towards older Māori, who were the most likely to participate in customary society (Waldon and Hauora, 2004:3). The *2000 New Zealand Survey of Older Persons* provides some elements of the associational dimension of the solidarity framework by asking respondents how often they are in touch with close friends or family members with whom they do not live (frequencies ranging from daily to less than once a month).

However, these data are limited as a measure of social connectedness because they do not require individual respondents to report associations with specific individuals of friends or family, nor are they asked to distinguish the types of contact they have with them whether by phone, email or letter<sup>5</sup>. The survey also asks questions on family support (the functional aspect of the solidarity framework), but again, these are focused only on support received, with the exception of financial support, and respondents can report either for themselves, on behalf of their partner or on behalf of both. The indicators of social wellbeing established with the Social Report series produced by the Ministry of Social Development include a domain of social connectedness – telephone and internet access; regular contact with family/friends; trust in others; the proportion of the population experiencing loneliness and contact between young people and their parents (Ministry of Social Development, 2004: 115). However, these data do not enable identification of the particular individuals with whom respondents have maintained any contact or communication and provide no detailed description of the types of activities in which respondents’ participate with family(whanau)<sup>6</sup> (Jensen, Spittal, Crichton, Sathiyandra, & Krishnan, 2002: 189; Ministry of Social Development, 2004). Finally, the data collected from the census confines the analysis of generational structure to that defined in relation to the extended family, when families of one or more generations live together in a household (Statistics New Zealand, 2003). These data do not permit the analysis of intergenerational relations which span beyond the household.

In sum, the relevance of the solidarity framework in studying the wellbeing of older persons in terms of their relations with kin in an intergenerational context is that it enables the analysis of the relative cohesiveness or solidity of the ties that older people have with kin. As discussed previously, this cohesiveness can be taken as both a dimension of individual wellbeing as a dependent variable, or a set of explanatory variables of wellbeing for other subjective aspects of wellbeing. Because of its theoretical underpinnings, the framework also provides the basis for explaining the variations in solidarity across individuals and groups

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<sup>5</sup> The question from the *New Zealand Survey of Older People in 2000* is in the section *Family and social networks: How often are you (and/or your partner) in touch with close friends or family who don't live with you? Include visits, phone calls, letters and emails* (Question 39 of the questionnaire).

<sup>6</sup> The particular category used in the development of the ELSI scale and collected in the *Survey of Working-Age People in 2000* incorporated as a category of a showcard is: ‘participate in family (whanau) activities’.

(gender, ethnic, etc.) as well as establishing the consequences that weakened solidarity in terms of loneliness and conflict can have upon older persons' individual wellbeing.

Through its measures of structural solidarity, the framework offers a useful basis for assessing questions on the social connectedness of older persons in New Zealand in terms of their geographic proximity to others and their frequency and means of contact with them. It also provides standard and well tested measures of the content of transactions through the concept of functional solidarity; and as possible mediating factors, it enables the measurement of the social norms guiding these transactions through the assessment of the norms and sentiments of filial obligation. Finally, it offers some insight into the perceptions and aspirations of older persons with regard to intergenerational relationships through its measures of consensus, ambivalence and conflict.

The framework also provides a more limited approach to the study of social networks and, with the inclusion of questions which distinguish perceived from enacted transactions, adds an important dimension to evaluating the effect these social relations may have on the wellbeing of older persons.

#### **4. Intergenerational Solidarity and Relations with Respect to Older Persons' Wellbeing**

##### *New Zealand and International Findings*

With specific reference to the wellbeing of older persons, intergenerational solidarity is considered an important component of family relations, especially for the successful coping and social integration of the elderly (Dykstra, 1997; Lowenstein, Katz, Prilutzky, & Mehlhausen-Hassoan, 2001: 24).

The existence of intergenerational solidarity has been shown in some cases to have a positive impact upon the self-esteem and psychological wellbeing of older persons in quite contrasting cultural settings such as China and the USA (Chen & Silverstein, 2000; Rossi & Rossi, 1990) and has been found to contribute to coping in situations of widowhood and immigration (Silverstein & Bengtson, 1991).

Kim and Kim (2003) found that the quality of life (using an overall life satisfaction index) of older persons in South Korea was enhanced when exchanges of support were balanced between themselves and their children. This finding is in contradiction with the notion of filial piety which dictates that older persons should be cared for regardless of their ability to reciprocate.

Exploring the relationship between intergenerational social support and the psychological wellbeing of older Chinese parents, Chen and Silverstein (2000) found a positive correlation between parents providing instrumental support to their offspring and their own levels of wellbeing.

Focusing on the structural aspects of family (structural solidarity indicator) and using data from the OASIS project for Norway, UK, Germany, Spain and Israel, Motel-Klingebiel and colleagues (2003) analysed the relationship between family structures and subjective quality

of life<sup>7</sup> for individuals aged 75 or more. Results for all these countries indicate that overall, older persons who have children or grandchildren report on average higher levels of subjective quality of life. Quality of life is enhanced more through having experienced parenthood, than by the actual number of children itself, although regression analysis showed some variation by country<sup>8</sup>.

Antonucci and Akiyama (1991), using a social network technique studied social support patterns and their determinants amongst mature American adults aged between 50 and 95. They found that wellbeing, measured as satisfaction with interpersonal relationships was significantly influenced by family intactness – the number of generations respondents included as the first ten members in their networks. Respondents with neither a child nor grandchild for example, were the least satisfied with their interpersonal relationships. Interestingly, the relationship between physical wellbeing and family intactness varied significantly by gender – women with a child and/or grandchild in their network were more likely to report higher levels of physical wellbeing than men in the same position, but men appeared less affected physically by the absence of children or grandchildren than women.

Applying a social exchange perspective to intergenerational relations, it can be argued that an older person's ability to remain active participants in intergenerational exchanges is an important predictor of psychological wellbeing. Some studies have found for example that depression is less likely in later life when parents are able to continue to reciprocate by exchanging resources with others (Stoller, 1985).

In contrast, there is evidence to suggest that intergenerational solidarity, in particular, functional solidarity may detract from, rather than enhance older persons' wellbeing (particularly psychological wellbeing). Amongst low-income families it can represent financial constraints (Belle, 1986) or loss of feelings of individuality if intergenerational affinity becomes dominant (Beavers, 1982). Lee and colleagues' (1995) review on studies focusing on whether the psychological wellbeing of older parents is affected by resource exchanges between adult children and their parents points to a lack of conclusive evidence either way. Their own research finds for example, that those older parents who are the least depressed are only minimally involved in exchange transactions with their children. The authors suggest that one possible explanation of this finding is that by accepting assistance from children, older persons are indirectly acknowledging their dependence upon them and a reversal in life course roles, both of which may provoke feelings of depression.

In New Zealand, the *Oranga Kaumätua* study of the perceptions of health amongst older Māori recognised the interactions between older Māori and their whānau as an important determinant of wellbeing (Waldon and Hauora, 2004: 3). Although the study did not clearly identify any direction of causality, when compared with overall health scores, it was found that older Māori with poor health status were less likely to be currently involved in marae activities compared with their age peers who had high health status (Waldon and Hauora, 2004: 8).

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<sup>7</sup> Measured using the WHOQOL-BREF single-item indicator of subjective quality of life (Motel-Klingebiel, 2003: 337)

<sup>8</sup> For Norway, Germany and Israel, quality of life was more significantly affected by parenthood rather than number of children, but no clear effects of number of children was found for Spain or the UK (349).

From the evidence reviewed, there appears to be no conclusive evidence as to whether the wellbeing of older persons, when measured in terms of its subjective dimensions of quality of life or affect, will be positively enhanced by interactions and transactions with other generations of kin. What will perhaps govern the impact of these exchanges to some degree will be the normative or culturally determined expectations underpinning intergenerational reciprocity, and the ways in which specific groups 'socially construct' the experience of ageing as one in which receipt of support is viewed as either 'debilitating' to self-esteem or in contrast, symbolises a recognition of elderly status.

## **5. Intergenerational Transactions and Interactions – Explanatory Factors**

There has been extensive research to establish the factors most likely to influence the functional and associative dimensions of intergenerational relations. Evidence suggests that the flow of exchanges between older parent and adult child will vary by age and life-course stage, will be influenced by normative expectations about intergenerational obligations, as well as the quality of relations in earlier stages of the parent-child relationship. The different types of exchanges – affective/emotional, in-kind (instrumental) and financial – will be affected differently by socio-demographic variables such as age, gender, education, economic resources and marital status. They will also be mediated by structural factors such as household composition and geographic distance between generations.

### *Age and Life-course*

A significant amount of research on intergenerational flows of support or exchanges has focused on those between older parents and their adult children. Several studies have suggested that exchanges are governed by age and the respective life-course requirement of the two generations. Older parents have been found to give more help to mature offspring than they receive until they are very old (Soldo & Hill, 1993). Logan and Spitze (1996) find that older parents are more likely to give help to their children with practical needs such as childcare as well as financial assistance and advice, rather than receive such help. In New Zealand there is similarly some indication that help flows mainly from older to younger generations, with parents as net givers, and children net receivers (McPherson, 2000: 76-77). Rossi and Rossi in the USA have identified the effect of life course changes in influencing the flow of support provided across the parent-adult child dyad: for example, they find that an increasing number of adult children provide money to their mothers as the latter age (1990) or that daughters provide increasingly more help to mothers with domestic chores as their parents age (op. cit.). Help received from ageing parents seems to reach a peak when children are in their twenties (McPherson, 2000: 79; Cooney & Uhlenberg, 1992: 69, 79), starts to decline when they reach their thirties, and by the time they are in their forties, is reduced significantly (Eggebeen & Hogan, 1990: 222). In the same vein, French evidence suggests that help given by individuals in mid-life far outweighs the help they receive from their elderly parents (Attias-Donfut, 1993: 103).

In New Zealand we can therefore anticipate that intergenerational exchanges of resources will display a diverse range of patterns based on age- and life-course stages which reflect the specific needs of the respective generations concerned. There may also be a downward pattern or asymmetry to these transfers – from old to young.

### *Cohesiveness of past parent-child relations*

In line with the flow of support across the parent-adult child dyad, the cohesiveness of past parent-child relations in terms of their affective dimension has also been found to influence exchange patterns in later life (Treas & Bengtson, 1987). The emotional intensity of relations has been found to vary across the life-cycle, declining during youth-hood, increasing during mid-age, peaking in old age (Rossi and Rossi, 1990), and is stronger across the daughter-mother dyad. Parrott and Bengtson (1999) also found that older parents were more likely to provide support to their adult children if their past relationship had been characterised by a high degree of affect. As mentioned previously, conflict may prove inhibitive to wellbeing in later life, but findings thus far remain inconclusive (Bengtson et al., 2000; Clarke et al., 1999).

### *The importance of obligation*

Central to much of the literature concerning intergenerational exchanges between kin members is the notion of obligation, a dimension captured in the solidarity paradigm by the variable of normative solidarity. In New Zealand, part of McPherson's (2003) pilot study on the role played by the extended family in providing support to its members focused on the normative attitudes towards family obligation to help others. She found that whilst there was general agreement that family members should help each other, a significant proportion reported that these actions should not be founded upon a sentiment of obligation nor coercion but of free choice. Similarly, with regard to caring for elderly family members, about 60% of McPherson's sample agreed that certain circumstances could preclude providing help to a sick or elderly relative (2003: 124).

Given New Zealand's context of multiculturalism, some work on the importance of filial piety and obligation across cultural groups has also been carried out. The inter-cultural group comparisons thus far completed do show differences depending upon cultural group in terms of the sentiments of obligation or responsibility that younger generations should show towards older persons (Ng et al., 2000). Hung and colleagues' research on notions of obligation felt by younger European and Chinese family members to family elders, identified family types through the combination of responses regarding feelings of filial obligation (financial support, respect, obedience, maintaining contact, etc.). They find that divergence with regard to filial obligations is characteristic of parent-child bonds for European families, but that convergence is the norm for the Chinese dyads observed (Ng et al, 2000).

### *Structural factors - geographic distance, household composition and 'kin supply'*

Studies establishing the effect of residential proximity in regulating the exchange of resources are consistent in showing that living a long distance from a parent or adult child will reduce the chances for exchange of help, although primarily when they require close physical contact, as is the case for in-kind help (Cooney and Uhlenberg 1992: 72; Eggebeen and Hogan, 1990: 226; Hogan, et al, 1993: 1448; Arrondel & Masson, 2001; Hoyert, 1991: 217). With increasing family size and consequently larger numbers of potentially rival siblings, the support that ageing parents are able to give to adult children appears to be compromised, particularly with regard to financial and household help (Cooney & Uhlenberg, 1992). The presence of grandchildren however, seems to increase the chances of older parents providing in-kind help to their adult children (Eggebeen & Hogan, 1990). Just how often people keep in touch with each other has also proved to be an important predictor of whether support will be

exchanged (McPherson, 2000: 80; Hogan et al., 1993: 1448). Generally speaking, with higher frequency of contact comes more frequent exchanges of resources.

*Gender, health and marital status, education and economic resources*

There is a large and consistent body of evidence pointing to the fact that women are ‘kin keepers’ (Finch and Mason, 2000). Older persons are more frequently helped by daughters than sons and are more likely to receive help if they have a daughter (Spitze & Logan, 1990). Communication and contact are generally higher between females (Rossi & Rossi, 1990; Coward & Dwyer, 1990; Eggebeen and Hogan, 1990; Brody, 1990; Hogan, Eggebeen, & Clogg, 1993; McPherson, 2000; Victor, 2005). Gender also influences the types of support exchanged. Lawton and colleagues (1994) show that mothers are the most likely to provide ‘hands on’ or service-type assistance to children, Cooney and Uhlenberg (1992) finding that sons are the least likely to receive advice, childcare and service-help from parents.

With regard to health status in later life, Carrière & Martel (2003) find that older persons with health problems linked to cognition or mobility are significantly more likely to receive help from their children than those without such problems. Rossi and Rossi (1990) find a significant increase in the proportion of adult children helping a parent during a period of illness, and Lowenstein and colleagues (2003) find that parents aged 75 or more are more likely to receive in-kind help if they perceive their health and functional capacity to be good. Other researchers however are less conclusive in their research with regard to the influence that poor health status will have on exchanges of support (Hirde & Strain, 1995; Hogan et al., 1993).

Marital status represents the structural component or potential opportunity structure for social relations in later life. There is evidence to suggest that the marital histories of both adult child and parent generations will affect the propensity to exchange resources, and that consanguinal as opposed to affinal kinship bonds are stronger predictors of intergenerational support (Carrière & Martel, 2003; Lee et al., 2003; Shuey & Hardy, 2003). Evidence from Canada indicates that regardless of their marital status (widowed, divorced or separated) older women can count on their children for support and that there are no significant differences between widows and widowers in the likelihood of being helped. However, separated or divorced men in later life are much less likely than their female counterparts to receive help from their children (Carrière & Martel, 2003). Rossi and Rossi (1990) find that adult children who have never married or are separated or divorced are more likely than those married to benefit from a wider range of exchanges of support from their ageing parents, but Eggebeen (1992) finds that the marital status of adult children is not associated with the likelihood of giving support to a parent.

For New Zealand, Hillcoat-Nallemby & Dharmalingam (2005) find that when an adult child in mid-life has no partner (whether through being single, divorced or separated), their ability or willingness to engage in assisting their parent with either emotional or in-kind help is certainly reduced, suggesting that their inaction reflects some constraint, such as time. Their results concur with some international findings on the effect of adult children’s marital status in influencing intergenerational bonds of contact or provision of support with parents (Attias-Donfut, 1995a; Cicirelli, 1983, 1984; Hoyert, 1991). Some evidence suggests that the experience of divorce or widowhood compromises the help parents can give, or weakens parent-child relations because of infrequent communication (Silverstein & Bengtson, 1997; Uhlenberg, Cooney, & Boyd, 1990; Pillemer 2000).

There is some New Zealand evidence to suggest that the more successful an adult child has been in pursuing educational qualifications, the more an ageing parent can expect to receive emotional support from them. One possible explanation for this could be that if higher socio-economic status contributes to increased geographic mobility, then adult children may be more likely to substitute in-kind help which requires their physical presence, with emotional help which is not necessarily mediated by proximity. Some support for this interpretation comes from findings on the influence of social class (and income) and its association with geographic mobility. Rossi & Rossi (1990) have found that upward mobile adult children (low-income parents and high income children) engage less in exchanges of help than downwardly mobile children (high-income parents, low-income children). In particular, low-income children provide more in-kind help (chores) than high-income children (op. cit: 434). Silverstein and Bengtson (1997) find that higher income is associated with adult children being more likely to have ‘intimate but distant’ relations with fathers (strong emotional closeness but not geographic proximity, contact, providing help or receiving help), and this is consistent with the greater geographic dispersion and a lower affiliation to family found amongst higher social classes (op. cit: 450). From the ageing parent’s perspective, those who have achieved high levels of educational qualifications are probably more likely to offer support to children, particularly financial help (Hogan et al., 1993; Cooney and Uhlenberg, 1992; Eggebeen and Hogan, 1990).

In sum, some of the possible predictors of functional and associational solidarity - dimensions of wellbeing representing a degree of social connectedness with others – include age and life-course factors (marital histories and educational achievements for example), the normative and affective dimensions to these relations, individual health status and gender and the structural resources such as number of children, household composition and the presence or absence of a partner, as well as the geographic distance separating the various generations.

## **6. Intergenerational Solidarity, Social Connectedness and Cohesion – Concepts and Measures**

Based on the literature review above, the conceptualisation and measurement of the construct of intergenerational solidarity and the concepts of social connectedness or cohesion have been established, and where possible (considering length and time constraints), are reflected in the design of the research instruments for Objective 3. Table 1: Social Relations (Appendix One) provides details of the measures retained in one of these instruments, the questionnaire, which have been drawn from existing studies and therefore validated for their accuracy (Bengtson and Schraeder, 1982; Mangen, Bengtson and Landry, 1988; Bengtson and Roberts, 1991; Lowenstein et al, 2001; Attias-Donfut, 1995b; De Jong Gierveld and Kamphuis, 1985).

Taking the micro-level paradigm of intergenerational solidarity, the degree of cohesion characterising the relationships between anchor and others is measured in terms of: (a) structural-behavioural dimensions: number of household residents, presence/absence of a partner, number of collateral, ascending and descending kin and friends (structure); the types and frequency of support provided (function) and the frequency of contact between anchor and others (association); and its (b) cognitive-affective including: (feelings of emotional closeness (affect), shared opinions (consensus) and norms regarding responsibility for other generations (normative). A question on the potential conflict of kin relations is also included in the questionnaire (Lowenstein, et al., 2001).

The structural-behavioural dimensions can also be conceptualised as representing the older person's (anchor's) social network, although with some limitations in the context of this study. Various approaches to identifying types of social networks have been developed which generally require respondents to identify their relations with others based on exchanges, roles or subjective feelings of emotional closeness (Kahn and Antonucci, 1980).

The design of the EWAS project has not taken a comprehensive social network approach to identifying respondents and their social relations with other kin and non-kin. Instead, data are collected on a selected number of pre-determined relations, identified in terms of kinship or friendship. In this sense, measurement of the older person's social network is necessarily constrained by the study design. This said, the questionnaire does provide exhaustive data on the presence or absence of a partner (living in the same household or elsewhere), the number of household residents, the total number of anchor's surviving ascendants (their own offspring), collaterals (siblings) and ascendants (grandchildren). In addition, it requires anchor to provide data on the number of non-family relationships (those who anchor does not consider as family members) with which anchor maintains an affective (feeling close to) and associative (contact at least once a month) bond (see Non-Family Relationships, Q1).

As mentioned earlier, perceptions of loneliness as a measure of wellbeing (Wagner et al., 1999) can also be considered as an indication of lack of social connectedness and reflective of the weak social cohesion of intergenerational relations which constitute the older person's social relations. Loneliness is measured in Objective 3 as a subjective dimension of wellbeing, using the scale developed by De Jong Gierveld and Kamphuis (1985). The scale comprises eleven items, six formulated negatively (e.g. "I miss the pleasure of the company of others") and five positively (e.g. "I can call on my friends whenever I need them") with the items preceded by an introductory phrase asking respondents to indicate the extent to which each statement applies to their current situation. The questionnaire is likely to be administered by computer assisted telephone interviews, so three possible response categories are recommended: 'yes', 'more or less' and 'no' (de Jong Gierveld and van Tilburg, 2006). The reliability and robustness of the scale have been ascertained (van Tilburg & de Leeuw, 1991; de Jong Gierveld, 2004).

## **7. Research Questions – Wellbeing in Later Life**

From this review of literature which has outlined the parameters of existing knowledge on wellbeing in later life in relation to intergenerational kin relations, several research questions addressing both theoretical and empirical concerns can be identified for exploration in the New Zealand context.

The first of these is obviously whether wellbeing in later life is enhanced by the presence or absence of other kin members. Overseas research is affirmative, but this may not be the case in New Zealand. Second, what are the correlates of wellbeing when considered in terms of its dimensions of social connectedness?

Are women more likely to be 'socially connected' in later life by maintaining active links of communication and exchange with other kin, more so than their male counterparts as the international literature would suggest? Even if they are, does this mean that loneliness is reduced – or can both co-exist?

Will we find evidence to suggest that engagement in transactions in later life proves counterproductive to people's perceptions of their wellbeing? Some of the research reviewed suggests that engaging in exchanges of support with other generations in later life can be beneficial, but also detrimental to wellbeing, depending upon health status, economic resources or perceptions of conflict between older persons and others for example. A multivariate approach will be essential in the development of New Zealand research in order to provide insights into the influence of these factors on wellbeing.

Given New Zealand's cultural diversity and depending upon broader normative or more culturally-specific expectations governing intergenerational relations, we can expect some cultural variation in the relationship between wellbeing and intergenerational transactions.

Will we find age- and life-course specific patterns to the exchange of resources occurring between kin members, and if so, how might these findings be linked to policies which encourage ageing in place? Will the intensity of the cohesiveness of relations between older persons and other kin vary depending upon age and life-course stage, as the international literature suggests?

The EWAS survey will provide the opportunity to explore whether older persons in New Zealand are in fact just as much the providers as the recipients of help – a contribution to the way in which a positive ageing experience can be viewed. It will also provide some insights into whether family changes such as divorce, separation or remarriage are associated with relations of intergenerational conflict and whether in turn this has repercussions upon the likelihood of older persons remaining socially connected with their kin.

The review has pointed to the difficulties in assessing the amount of help and support exchanged between older parent and adult child when only one member of this dyad is interviewed. This problem, which is of methodological origin<sup>9</sup>, often stems from the tendency for surveys to rely on proxy reporting – an ageing parent will report what their adult children provide for them for example, but the adult child will not be interviewed themselves. Evidence suggests that depending on their position in the hierarchy of generations, older parents and their adult children will report differently on the amount of care given and received. The EWAS programme will be able to shed some light on this problem – from both methodological and theoretical perspectives – because there will be a set of core questions on exchanges of support which will be asked of both the 45-64 and the 65-84 survey participants. Thus the research will not only provide findings on the possible uniqueness of the New Zealand situation, but will also be able to provide data for two generations on the amount of care given and received.

In sum, whether wellbeing is taken as meaning degrees of social connectedness with kin or as relating to the more subjective aspects of quality of life and affect, part of the purpose of Objective 3 will be to contribute to knowledge building by providing insights into the patterns and correlates of the various dimensions of social connectedness – structure, function and interaction – as they exist in New Zealand, amongst the culturally diverse community of kin. This knowledge should be helpful in informing policy relating to the contributions that familial relations across generations play in enhancing wellbeing in later life.

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<sup>9</sup> But which has also been the object of theoretical interpretation by Giarrusso and colleagues (1995) as the 'generational stake hypothesis'.

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**Table 1: Social Relations**

	Concepts relating to Intergenerational Solidarity - Social Connectedness, Social Isolation and Overall Wellbeing	Empirical Indicators or Measures
Role relations	Collaterals: partner; siblings	
	Descendants: children; grandchildren; friends	
Functional dimensions	<b>Functional solidarity (social connectedness as wellbeing):</b> transactions as types of support provided/received (emotional, financial, in-kind)	Frequency of exchanges of assistance by type of support (perceived/enacted)
	<b>Affectual solidarity:</b> degree of positive feelings of closeness	Ratings of affection/ closeness for other family members
	<b>Structural solidarity (social connectedness as wellbeing):</b> opportunity structure for social relations based on number, type and geographic proximity of kin (and friends)	Household composition Residential propinquity of kin (including co-residence) Number of kin members (e.g children) Health of kin members Number of non-kin members
	<b>Associational solidarity (social connectedness as wellbeing):</b> interactions of contact and communication between anchor and kin	Frequency of interaction Type of interaction (phone, email, face-to-face, letter) Activities shared (meals, leisure, sport)
	<b>Normative solidarity:</b> degree of commitment to performing roles and accepting obligations (e.g. filial obligation)	Ratings on importance of kin roles Ratings on strength of family obligations
	<b>Consensual solidarity:</b> agreement on attitudes, values and beliefs	Ratings of perceptions of shared values, etc. with kin
	<b>Conflict:</b> perceptions of conflict	Ratings of frequency of conflict with kin
	<b>Loneliness (Social isolation – degree of wellbeing)</b> situation with unacceptable discrepancy between number/quality of realized and desired social relationships	Feelings of loneliness: De Jong Gierveld scale
	<b>Quality of Life (overall wellbeing):</b> multi-dimensional construct encompassing evaluation of physical health, psychological wellbeing, social relationships and physical environment	Life satisfaction - WHOQOL-BREF measure
	<b>Affect (overall wellbeing):</b> perceptions of a range of feelings/emotions	Positive and negative affect scale - PANAS