

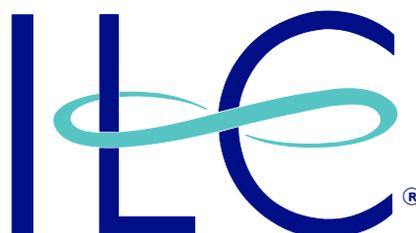


Global Perspectives on Intergenerational Households and Relations

An ILC Global Alliance Circular

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The International Longevity Centre Global Alliance (ILC Global Alliance) is a multinational consortium consisting of member organizations.

The mission of the ILC Global Alliance is to help societies to address longevity and population ageing in positive and productive ways, typically using a life course approach, highlighting older people's productivity and contributions to family and society as a whole. The Alliance partners carry out the mission through developing ideas, undertaking research and creating fora for debate and action, in which older people are key stakeholders.

The ILC Alliance currently includes centres in the United States of America, Japan, the United Kingdom, France, the Dominican Republic, India, South Africa, Argentina, The Netherlands, Israel, Singapore, Czech Republic, Brazil, and China. These centres work both autonomously and collaboratively to study how greater life expectancy and increased proportions of older people impact nations around the world, and seek offer solutions to effects of the impact.

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This report is the second in a planned series that aim to examine cross-cutting issues across the developed and developing world. The first, available at (http://www.ilc-alliance.org/index.php/reports/report_details/retirement_age), examined retirement age policies across eight countries. For this current report on intergenerational relations, ILC-India developed the theme of this report, while ILC-UK edited contributions from member countries. We welcome any feedback on this report. Please address any comments or feedback to longevetic@gmail.com (ILC-India) and info@ilcuk.org (ILC-UK).

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Foreword

TBC

Introduction

In this volume we introduce the state of intergenerational relations across countries that vary widely in terms of social attitudes, demographic structure, cultural traditions, and economic development (see Figure 1). Despite these differences, the theme of intergenerational relations was developed jointly by ILC-India and ILC-UK, signifying the pervasiveness of concerns about intergenerational relations across different societies, which are also reflected in the contributions throughout this volume.

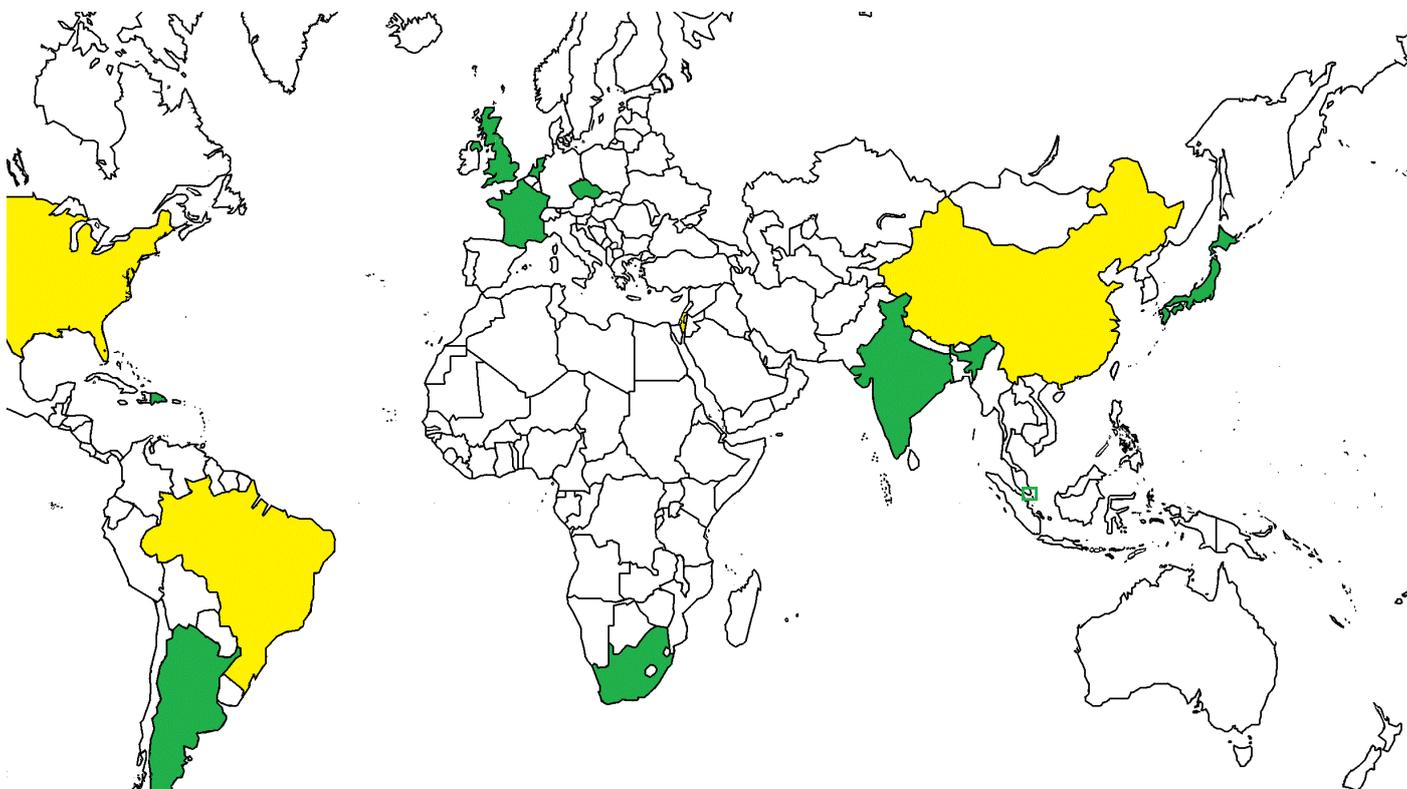


Figure 1: ILC Global Alliance. Countries included in this report are shaded in green (Argentina, Czech Republic, Dominican Republic, France, India, Japan, Netherlands, Singapore, South Africa, UK). Other ILC Global Alliance members are shaded in yellow (Brazil, China, Israel, USA).

For many of the countries included here, for example the Czech Republic, Netherlands, and the UK, the economic crisis has brought intergenerational issues to the fore, and has led to the critical examination of the relationships between younger and older people, both within families and beyond. However, other countries such as South Africa and Singapore have emerged relatively unscathed from the crisis, and in these contexts changes in social attitudes and economic developments of a different sort represent the drivers to examining changes in intergenerational relations. For some of the countries included in this volume, the impact of falling fertility rates has meant that their population has been ageing for some time, with the population of older people now close in number that of children. Other countries included here are only part way through this journey, with the child population remaining significantly higher than the older population, albeit with rapid growth in the numbers of older people.

However, despite the wide differences in demography, some common themes do emerge across several of the countries included here. Most prominent is a decline in the number of multigenerational households in recent years observed in most countries. Gender is another common theme, with the older population disproportionately composed of women, and the majority of older women being widowed and the majority of older men living as part of a couple. Gender is also important in dictating patterns of care provision, with women named as the primary carers for older people in several cases (for example Argentina, Dominican Republic, France, India, South Africa, Singapore, UK), and likely to be so across all the countries included here. Older women also occupy a pivotal role as care givers to grandchildren in large numbers across several countries (Dominican Republic, India, South Africa), although this role is not mentioned in several other countries, particularly those where the proportion of multigenerational households is relatively low.

Across all countries included in this volume, there exists a societal expectation that children will look after their parents in old age. However, in some, financial provision to help with a parent's care is enshrined in law (France, Netherlands), while in others, changes in pension rules will make it easier for children to provide for their parents if they wish (Czech Republic). In some countries the state takes a more indirect role in fostering intergenerational relations, through providing greater support through housing policies for children to live in close proximity to their parents, serving to disadvantage those who may wish to live relatively far away (Singapore). In yet others, while long-term care insurance rules make it easier for older people to afford a range of care options, cultural traditions still result in a higher than expected proportion of multigenerational households (Japan), suggesting that the majority of care here is still provided by the family.

Living arrangements and the prevalence of multigenerational households are found to vary across similar lines in several cases. The distinction between rural and urban areas is a named factor dictating the prevalence of multigenerational households in several countries (Czech Republic, Dominican Republic, France, India, Japan, South Africa), being connected with labour market and migration patterns (Dominican Republic, India, South Africa). Ethnicity was also a named key factor influencing family living arrangements in many societies (Argentina, Czech Republic, South Africa, UK). However, there are also some unexpected differences between countries that could be considered relatively similar; for example multigenerational households appear more prevalent in the UK than in the Netherlands.

In this report, the terms intergenerational and multigenerational are used interchangeably, although both terms are most often used to refer to familial relations, as opposed to non-familial relations. Each country's report is structured around the following questions:

- **How many older people currently live with their family in multigenerational households?**
- **How have the numbers of multigenerational households changed over the past 40-50 years?**

- **Which factors influence the prevalence of older people currently living in multigenerational households?**
- **Do families, and particularly younger family members, provide formal or informal care in other ways for older relatives who need care and/or support?**
- **How has the changing economic situation of older people changed the pattern of care giving within families?**

Argentina¹

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Background

In 2001, almost one-in-ten Argentinians were aged 65 and over². Unlike some European countries, where the ratio of children to older people is approximately equal, the population aged under fifteen years in Argentina was estimated to be three times higher as the population aged 65 and over. However, the Argentinian population of older people is growing, and the country has the second highest population of older people as proportion in Latin America (after Uruguay). Maintaining intergenerational harmony is one challenge of a growing population of older people. The provision of care is one area where a growing population of older people is likely to have an impact on younger generations. For example, while the proportion of people who have no private or public health insurance coverage is found to decline with age, an estimated one-in-five older people aged 65 and over still live beyond health insurance coverage. For this population, it could be expected that only familial (intergenerational) care relations could pick up the shortfall. These are issues examined in the text below.

How many older people currently live with their family in multigenerational households?

In the second half of 2010, according to the Permanent Household Survey (EPH)³ conducted in urban areas, 77 per cent of people 65 years and over living in private households did so with their families (either as a single parent or couple household with children/grandchildren or another form of configuration with a family member included). Twenty-three per cent of older people in urban areas across the country lived alone, and only a tiny proportion in non-family households. It is important to highlight that 92 per cent of the population aged over 65 years across the country live in urban areas, therefore the results of the EPH are representative of the vast majority of Argentinian older people.

Forty-three per cent of the population aged 65 and over live in multigenerational households, defined here as homes that included at least one person under the age of 65 years. Therefore, over half of the population aged 65 years and over of the country's urban areas live alone, or in households where all members are aged 65 and older.

How have the numbers of multigenerational households changed over the past 40-50 years?

The 1980 National Census found that 12 per cent of the population aged 65 years and over lived in single person households across the country as a whole. Meanwhile, the data for 2010 indicated that 23 per cent of older people in urban areas (who in turn represent over nine-in-

¹ An approximate Spanish translation of this text is included in the appendix

² Instituto Nacional de Estadística y Censos: <http://www.indec.gov.ar/indec/ingles/iu020205.xls>

³ For more information, see http://www.indec.gov.ar/principal.asp?id_tema=9556

ten older people) live in single person households, almost double the proportion in 1980. The increase in single-person households headed by an older person was also accompanied by growth in multi-person households in which all members are aged 65 and older. These trends corresponded with a reduction in the proportion of older people living in multigenerational households.

Which factors influence the prevalence of older people currently living in multigenerational households?

In Argentina, the multigenerational family is most prevalent in the Northwest region of the country, at the border with Bolivia. It is a region where the Andean population predominates, with their own cultural traits. Ethno-cultural factors are therefore attributed as the main factors determining the high prevalence of multi-generational families in this area.

Do families, and particularly younger family members, provide formal or informal care in other ways for older relatives who need care and/or support?

The primary caregiver of an older dependent tends to be the spouse, primarily a female wife, followed by a middle aged daughter or daughter-in-law. Argentinian informal caregivers are therefore mainly older and middle-aged females; over 70 per cent of family caregivers are women.

How has the changing economic situation of older people changed the pattern of care giving within families?

Overall, a low proportion of older people are cared for by paid staff, with just over 15 per cent of older people estimated to be receiving paid care. The vast majority of older people in receipt of care are supported by unpaid care provided by relatives, either resident or non-resident, or caring neighbours. Currently, although the proportion of people aged 80 and over is increasing, older people admitted to nursing and residential homes are almost exclusively those older people with moderate to severe care needs that do not have enough family support (human resources and money) to look after them. The Government is not yet providing enough financial subsidies to be able to keep older people independent in their own homes by means of well-trained caregivers; older people with care needs who possess private health insurance also don't receive the comprehensive domiciliary care they clearly need.

Czech Republic

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Background

In the Czech Republic the issue of intergenerational relations emerges from time to time in different contexts in public debate. Recently the debate has centred on economic intergenerational relations. The Czech government has approved the next phase of pension reform, which includes the possibility of diverting three per cent of the current premium from the PAYG (pay as you go) social insurance pillar of pension system to a privately administered scheme. In addition, reforms include the possibility that workers can transfer one per cent of their salary towards the pensionable income of their parents. This measure was presented by politicians as a means of supporting intergenerational solidarity.

Less visible in the public debate is the issue of intergenerational relations in the context of long-term care. It seems that informal and family carers are not organised well enough to take part in public and political debates. In the current long-term care debate, the focus remains mostly on formal care; nevertheless, the bill on long-term care, which is currently in preparation, should tackle the issue more comprehensively.

An ageist perspective in the context of intergenerational relations could be seen during the last parliamentary election campaign in 2010, when a ‘viral’ video was released on social networks appealing to young people to “persuade (talk around) granny” not to vote for the Left. The video was made by a well-known Czech director, and raised emotions and dissent among the public, and consequently provoked a discussion about the state of intergenerational relations and stereotypes against older people in Czech society. More generally, intergenerational relations are recognised as part of the social fabric, and there exists solidarity at the political (rhetoric) level. However, in the context of the economic crisis, Czech society seems to have become more polarized and divided though tensions that are manifested in the form of social unrest, the rise of right wing extremism, and racial and ethnic anti-Roma conflicts; this is especially prevalent in deprived areas of the Czech Republic with high unemployment rates.

The 2012 European Year of Active Ageing and Intergenerational Solidarity⁴ provides an opportunity to increase the visibility of aspects of intergenerational relations; although, should the current economic crisis deepen, strengthening the cohesion of Czech society will become even more challenging.

How many older people currently live with their family in multigenerational households?

In the Czech Republic, indicative evidence suggests that a minority of older people live with those of a different generation. Data from the household census carried out in 2001⁵ show that

⁴ For more information, see: <http://www.age-platform.eu/en/age-policy-work/solidarity-between-generations/latest-news/1231-2012-european-year-on-active-ageing-and-intergenerational-solidarity/>

⁵ Data from census 2011 were not available at the time of writing.

one quarter of all households was occupied by one person. More than a half of all single person households were headed by persons aged 60 years and older (52% in 2001). In terms of the marital status of those living in single person households, there is sharp difference between men and women. While most women living in single person households are widowed (60% women in comparison to 15% men), males living in single person households are much more likely to be unmarried (37% of men, compared to 16% in the case of women). This indicates that men have a tendency to live in single person households earlier in their life course than women (they transition out of the parental home directly to independent living more often than women), while women live in single person households at later stages of the life course, when the probability of needing care is higher.

Changes in the mortality rates of men and women have influenced the marital status of older people, and thus also the number of single person households. Between 1990 and 2010 male mortality rates improved faster than female mortality rates and the gender gap in life expectancy (excess male mortality) thus decreased from 7.8 to 6.2 years⁶. According to the 2001 household census, the number of single person households occupied by seniors decreased between 1991 and 2001 due to improved male mortality rate.

However, despite improvements in life expectancy, and particularly male life expectancy, other survey data shows that just over one per cent of households consist of three generations. Generally, young families or young couples prefer separate living from their parents. Nevertheless, separate living does not necessarily determine levels of intergenerational relations in terms of mutual financial and material support or social contact. Physical accessibility, for example living in the same neighbourhood and the availability of public transport, as well as other factors, play an important role in determining levels of visitation and the provision of practical help or care by younger generations (mostly women) to older frail relatives (also mostly women). Typically, short-term or temporary co-residence of adult children with a widowed parent may also occur in the situation of divorce. In the Czech Republic, approximately half of all marriages end in divorce, and most divorces happen during first six years of marriage.

How have the numbers of multigenerational households changed over the past 40-50 years?

The share of single person households increased from 15 per cent in 1970 to 25 per cent in 2001, while the share of the total population living in single households increased from eight per cent to nine per cent between 1991 and 2001. In terms of those aged 70 and older, only 18% of men lived in single person households compared to 53 per cent of women in 2001.

The financial accessibility of housing plays a greater role in determining patterns of transition to adulthood. It is becoming increasingly difficult for young people to establish their own family and independent households, especially for some social groups, which leads to prolonged co-residence of young people with their parents. The rising proportion of young people participating in tertiary education also means that economic independence from parents

⁶ Note: In 2010 life expectancy at birth for men amounted to 74.4 years and 80.6 years for women.

occurs later in life. During last 20 years the Czech Republic has been going through so called second demographic transition, which represents continued falling fertility rates and changes in the determinants of fertility⁷. Between 1990 and 2010, the mean age at first marriage increased by approximately 8 years for both sexes from 24.0 to 32.2 years for men and from 21.4 to 29.4 for women. The mean age of all mothers increased by approximately 5 years during the same period from 24.8 in 1990 to 29.6 in 2010, and from 22.5 to 27.6 in the case of first-time mothers. These changes are likely to further impact on the proportion of the population living in multigenerational households.

Which factors influence the prevalence of older people currently living in multigenerational households?

Differences exist in housing patterns between urban and rural areas. The largest share of single person households is in biggest cities and most urbanized areas of the Czech Republic. In those areas there is also higher proportion of tenancies (tenement dwelling) and a lower share of residence in one's own house (family home). In contrast, the lowest proportion of single person households is in the south western part of the Czech Republic (South Moravia). South Moravia has the largest proportion of home-owners (people living in family houses), which are on average larger than rented dwellings, thus allowing for intergenerational living, lower migration (the population is more stable and has stronger binds to the locality and region), stronger family ties, and higher levels of religiosity (with lower divorce rates and a lower proportion of single parent families). These factors contribute to the lower proportion of single person households in the area. According to the 2001 census, around 36 per cent of people lived in their own house, 11 per cent in their own flat, and approximately 29 per cent in a tenement dwelling; the remainder lived in dwellings belonging to a Housing Association or other type of landlord.

Ethnicity also plays a role in determining housing patterns; for example, Roma households are more often multigenerational in nature than households of other Czechs. This is determined by cultural, traditional, economic, social, and other factors, and differs with the level of integration and assimilation within, or exclusion by, concrete families or communities.

Do families, and particularly younger family members, provide formal or informal care in other ways for older relatives who need care and/or support?

In the Czech Republic, approximately four per cent of older people aged 65 and over receive formal care (residential and home social or health care). When more intensive long-term care is needed, the possibility of receiving this care from families and young people is more limited. One determining factor as to whether families provide care for older relatives is whether the family is able to provide this care in their own dwelling (house or flat) or the home of their older relative, or whether the family is able to move to another dwelling that can accommodate an older person's care needs. However, as the housing market is not very flexible, and Czech people are generally very stable and conservative with respect to migration, moving to another house or apartment it is not perceived as feasible in many cases.

⁷ For further information, see: Van De Kaa, D. (1997) Europe's Second Demographic Transition. *Population Bulletin*, 42:1-59

How has the changing economic situation of older people changed the pattern of care giving within families?

The economic and living situation of older people, younger people, and low income and single parent families make them particularly vulnerable to the effects of the economic crisis. This situation is unlikely to improve in the near future, given that the Government introduced an increase in VAT to partially finance a pensions' deficit. As part of cuts to public spending, the Government also decreased the care allowance for people with lowest degree of dependence on care, which is currently received mostly by older people. As a result, it is probable that people will rely more on intra-familial intergenerational solidarity and support, including financial support. However, there is no hard data to provide evidence on this hypothesis. Intergenerational housing can be a temporary solution for some (younger) people in case of financial inaccessibility of housing. Those who are unemployed and have bleak prospects in the labour market can take up a full-time caring role and receive a carer's allowance in the instance that they have relative with higher degree of need for care, although for some families only way to ensure the provision of adequate care may be residential care. Nevertheless such factors ("incentives and disincentives") are probably only secondary factors in the decision-making process on care, and there exists no survey data which could shed more light on this question at this moment.

Dominican Republic

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Background

In the Dominican Republic traditional family structures were built around the nuclear family, where women in particular took care of their elders, and the younger generations showed great respect for them. There was a mixture of fear and deep respect for the older generation, manifested by the fact that the parents did not even have to talk to transmit an order, they gave a look and that was enough. However, during the past 30 years, this pattern has been changing, and with the promulgation of the Law of Protection of Children and Adolescents, the attitudes and treatment of the younger generation has perceptibly changed. Currently, there is great societal concern about the issue of intergenerational relations, and there have been initiatives through schools and colleges to try to counteract the decline. These initiatives not only involve the children but also the parents and grandparents, because the issue of weakening intergenerational relations is considered to be a problem that should be approached from different perspectives. Despite these emerging challenges, the great majority of elders in the Dominican Republic live in multigenerational households.

How many older people currently live with their family in multigenerational households?

According to a study conducted by CEPAL⁸ in 2004, 51 per cent of the older population in the Dominican Republic live in multigenerational households. This number is noticeably declining because greater numbers of older people are moving to public or private residential care.

How have the numbers of multigenerational households changed over the past 40-50 years?

The unwavering trend of migration from rural to urban areas in search of a better life has meant that the population has become rapidly more urbanised, and has resulted in profound societal changes. In the past, the role of a young female, usually the youngest female in the family, was to stay at home looking after an older parent. In more recent times however, we observe the displacement of older women, who migrate to urban areas to help their children with maintaining the household while their children work, or alternatively, older women remain in rural areas but assume caring responsibilities of their grandchildren because the parents have migrated. In both scenarios, the flow of care has reversed from older people becoming recipients of care to increasingly older people assuming caring responsibilities.

Which factors influence the prevalence of older people currently living in multigenerational households?

Social and economic factors more than cultural ones are mostly responsible for the changes described above. In the Dominican Republic, the living arrangements of older people vary

⁸ See <http://www.eclac.cl/>

according to the place of residence. Multigenerational households are more commonly seen in urban areas because of the need of the family to have someone looking after the children while they go out to work.

Do families, and particularly younger family members, provide formal or informal care in other ways for older relatives who need care and/or support?

Despite the changes outlined above, a strong sense of loyalty to the family prevails in the Dominican Republic, which is expressed through the majority of the population engaging in the provision of care for older relatives where possible. However, there is also the belief that this situation is unfortunately changing, and is a factor in explaining why there is an increasing demand for placements in public residential care.

How has the changing economic situation of older people changed the pattern of care giving within families?

We can describe the economic and care situation of older Dominicans living in multigenerational households through two commonly occurring scenarios. The first scenario is that of a couple with children, where one or both partners have lost their job, or the family can no longer afford housing costs (especially in major cities), and they have to return to their parent's home. This arrangement is adequate in the majority of cases. However, a second commonly occurring scenario is that where it is the older parent who has limited means and has to move in with their children, who may themselves be in a difficult economic situation. This latter scenario can become undesirable because of the rejection that the older person may feel on occasion. Fortunately, the Dominican government has created a subsidy for those families that have an older person living with them, and though is not much, it is nevertheless viewed as an important contribution. This is especially the case when we take into account that more than 80 per cent of the older population, particularly those aged 70 and over, don't have a pension.

France

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Background

In France, the family and intergenerational ties are of major importance. In the context of an ageing society, intergenerational relations play a more prominent part in French family life, particularly when there is geographical proximity between family members, and families of four living generations are a more frequent occurrence. Due to the preferences of older people, families don't all necessarily live under the same roof, but intergenerational ties appear to be strengthening nevertheless. Thanks to the increase in life expectancy in good health, there is a new large generation of 'young' elderly aged between 60 and 70 years who are termed 'the active grand-parents'. They occupy a pivotal role in family life through contributing to the care of their grand-children. In times of difficult economic circumstance (for example unemployment) or personal crisis (for example divorce), the elderly try to help their children to face those difficulties. Fifty per cent of grandparents report providing moral and financial support. On the other hand, there are indications that these relationships are mutual, as 50 per cent of the elderly also receive some help from their children, with this support becoming more important as they age and when they become more dependent.

How many older people currently live with their family in multigenerational households?

The great majority of the elderly live by themselves in France, this being largely reflective of personal choice. They often own their home, and don't want to leave it through fear of losing their autonomy. The INSEE census report⁹ shows that:

- 80 per cent of the elderly (> 65 years old) live in their own home, either as part of a couple or alone. Due to differences in life expectancy, with women having a higher life expectancy, women live alone in 40 per cent of these cases and men in 16 per cent.
- Almost six per cent of the elderly live in a retirement home.
- Only three per cent of the elderly live with their children.

How have the numbers of multigenerational households changed over the past 40-50 years?

France continues to witness a trend of a decreasing number of elderly living with their children. Eight per cent of those aged 70-80 years old and 19 per cent of those than 80 lived with their children in the 80's, although as described above, these proportions have decreased in recent years. This evolution in housing circumstances can be partially explained by the changing conditions experienced by the younger generations who are more likely to stay at home longer, and those that do move are likely to move to smaller apartments. The traditional

⁹ Source : INSEE, recensements de la population

expectation of providing support to older family members has diminished, while at the same time, older people are more likely to express a preference to staying in their own home, as opposed to moving in with kin.

Which factors influence the prevalence of older people currently living in multigenerational households?

The major factor influencing the prevalence of older people in multigenerational households is age. Among older people under the age of 85 years, 90 per cent live in their home, while 65 per cent do so who are aged 90 years or older; the remainder live in retirement homes or other institutional accommodation.

Gender has also an influence on living arrangements. Older men live with their children more frequently than women (4.5% compared to 1.2% respectively), and one explanation is likely to include widowhood, with men more likely to experience difficulties in living alone after the death of a spouse.

Patterns of multigenerational households also differ by geographical area of residence. The implications of living arrangements may be more critical in rural areas, where the elderly often live in isolated areas. Older people in rural areas are at particular risk of isolation and unmet social care needs if their family live far away.

Do families, and particularly younger family members, provide formal or informal care in other ways for older relatives who need care and/or support?

The support of children and grand children to their parents is critical¹⁰ when older people begin to lose autonomy. In the first instance, this support can be mainly psychological (for example providing social contact through telephone calls, visits, and other means). This can then progress with children and grandchildren adopting the role of caregivers, giving support in domestic activities (for example shopping, cleaning, laundry, administrative tasks). In instances where the dependency increases, children and grandchildren will help in disease management (for example drug administration) and in personal care (for example giving help in bathing and using the toilet), in association with care professionals.

Children are also expected to give financial support, this becoming especially important when the elderly person needs to be institutionalised. For dependent older people, the informal care provided by the family represents an estimated 80 per cent of the total care received. This informal care is mainly provided by daughters.

How has the changing economic situation of older people changed the pattern of care giving within families?

The economic situation of older people differs by the financial situation and age of the older person in question. Many widowed older women have very limited financial means, and as most did not engage in paid labour they have very small pensions, with the cost of providing institutional accommodation often much higher than the value of their pensions. However,

¹⁰ Approche du coût de la dépendance des personnes âgées à domicile, CRÉDOC– Décembre 2005- 29

children also need to provide financial support according to the French law. The cost of providing institutional care for older people also represents a substantial financial burden for the healthcare system. However, despite the high cost of staying in institutional accommodation on both individual families and the healthcare system, intergenerational households are not considered today as an option for many families.

There exists significant innovation in the different forms of support available to help older people maintain their independence in their own home, including specialist equipment within the home, social assistance, assistive technologies, meals on the wheel and nursing care. Nevertheless, family members still shoulder a large burden of care in many cases, although some respite care can be provided to the care giver. In contrast to the oldest old, the youngest elderly have higher incomes, and are often in a situation to support their children financially.

India

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Background

Indian society has traditionally been one where the family was the core focus of life. Strong values of love, care and mutual respect, bound family members together. In the past, the traditional Indian family followed a patriarchal system, where the senior 'pater' (father) was a venerated and feared head of household whose opinions and decisions were final. No dissent was permitted, and no discussions were held about important decisions with the other family members, least of female family members. Only the adult older son would be consulted by the head of the family on family issues, but the final decision rested with the patriarch.

Communication between the adult children and the parents, especially the father was limited. Fearful respect and awe marked the intergenerational bonding between the father and son. Daughters were always in the background, rarely to be seen or heard, and were to be married off as early as possible.

The sons of the patriarch would live together with their own families, with male members dominating the household. Young children respected older kin including grandparents, great-grandparents, parents, uncles, aunts, and others, and would often live with extended family in what is today termed as a multigenerational household. Rarely were there any cases of disrespect or disobedience by younger family members towards older family members. But the advantage of such a multi-generational household, which is also known as a 'joint family' in India, is that families were the best safety net in times of stress or need. Caregiving of family members requiring medical care, emotional support, and financial assistance was always the duty and responsibility of the entire family. Widowers, single unmarried women, disabled individuals, both young and old were well taken care of by their families. Older family members commanded respect and were well taken care of by the rest of the family members.

This scenario has been gradually changing over recent years. Changes in attitudes, rapid industrialisation, and migration patterns, among other factors, have all paved the way for a change in the profile, structure and fabric of the traditional Indian family. The size of the multigenerational household has decreased considerably since the late 1960s, with the advent of the nuclear family set up. Instead, a husband and wife along with their young children is what have emerged as a typical modern family household.

How many older people currently live with their family in multigenerational households?

Being a predominantly agrarian country, there remains a strong distinction in Indian society between rural and urban areas, and the changes outlined above have not been uniform between these. Approximately, 30 per cent of Indian families in urban areas live in multigenerational households, compared to more than 60 per cent living in the joint family system in rural areas.

How have the numbers of multigenerational households changed over the past 40-50 years?

These patterns have visibly changed over the last half century in India. Modernisation, the impact of adopting western lifestyles, and the exodus of many highly educated individuals to western countries have all impacted the traditional family structure of India. Especially in urban areas, these factors have been responsible for younger generations to move out of the cocooned joint family system into smaller sized households, often leaving elderly relatives to live by themselves.

Which factors influence the prevalence of older people currently living in multigenerational households?

As described above, multi-generational households are more prevalent in rural areas than in urban areas. In rural areas, the traditional Indian family system is still operational, albeit with a few changes. Migration by the younger generations from rural to urban areas in search of employment opportunities has left behind many of the elders in the family. The wives and children of these young men who migrate to cities in search of work often remain in the villages to look after the elders in the family, assisted by other members of the family where possible.

In urban areas, household configurations vary more than in rural areas, and elderly people may reside with their children or grandchildren in small apartments, or may live alone. In the larger metropolitan cities such as Mumbai, Delhi, and Bangalore, retirement complexes for senior citizens have been developed, although these often cater exclusively to the affluent classes, with many of the residents having children who live abroad (who help fund their stay through remittance payments). A limited housing supply and smaller sized apartments are two factors partially responsible for the slow withering away of the joint family system in urban areas.

Do families, and particularly younger family members, provide formal or informal care in other ways for older relatives who need care and/or support?

Fortunately in India, in both urban and rural areas, emotional ties between parents and their children remain strong in the majority of families. Despite family members increasingly living far away from each other or separately, children do often continue to care for their parents. This form of care includes actual physical care in times of ill-health, and assistance with daily chores, particularly those requiring physical functionality (this is also true in cases where the parents live with their children). Even in cases where children live far away from their parents and formal caregiving is not possible, children offer other forms of informal care, particularly in the form of social contact, keeping this filial bond intact.

How has the changing economic situation of older people changed the pattern of care giving within families?

In some urban areas, especially in metropolitan cities, senior citizens who are economically independent can hire professional caregivers to look after them to meet their care needs.

Affluent children can also hire caregivers to look after their parents where, due to work pressures, they are unable to do so themselves.

In rural areas, the economic situation among ordinary families has not perceptibly changed despite the tendency of adult children to work in urban areas for better income opportunities. Caregiving therefore remains primarily the duty of the daughter or daughter-in-law, with most rural families being unable to afford to pay for care. One important change for rural families is that the size of the household has reduced, with extended family members more likely to reside in their own individual family units. Nevertheless today, in a typical rural family, three or four generations may live under one roof; although in days gone by this would involve co-residence of several branches of a family.

Japan

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Background

One of the biggest issues arising among the Japanese elderly population is the growing number who live alone, which may lead to social isolation and loneliness among older people. Another big issue is the difficulties that can follow from “Rou-Rou Kaigo” (meaning elder-to-elder caregiving), due to the increasing number of households that consist only of an older couple. Since the East Japan Great Earthquake in March 2011, the importance of family and community ties has been stressed widely once again. In the field of elder care specifically, “Comprehensive Community Care System” has been under development so that older people themselves, family members, and the whole community, can play a more active caring role, thereby encouraging the participation of every generation in providing care.

How many older people currently live with their family in multigenerational households?

According to the 2010 census, 37 per cent of Japanese households include member(s) aged 65 or over. A different study of older people aged 65 or over in 2010 shows that single-person households account for 17 per cent of households, households of married couples comprise 37 per cent, households with children comprise 42 per cent (17.5% are households with children’s family (multigenerational), and 25% are households with unmarried children), and other households (for example with friends or other relatives) account for 4 per cent (Comprehensive Survey of Living Conditions of the People on Health and Welfare, 2010¹¹).

How have the numbers of multigenerational households changed over the past 40-50 years?

The proportion of households with an elderly member(s) (aged 65 years and over) increased substantially from 29 per cent in 1995 to 37 per cent in 2010, meaning that over a third of Japanese households now include an elderly member, reflecting an increase in the number of older people in Japan.

Regarding the living arrangements of older people (see table 1), the proportion older people living in households consisting of married couples or single-person households grew dramatically from 22 per cent and 10 per cent respectively in 1986, to 37 per cent and 17 per cent in 2010. Conversely, the proportion of households containing older people with children declined from 64 per cent to 42 per cent. However, while the proportion of households where an older person lived with their (partnered) children’s family decreased significantly from 47 per cent to 17.5 per cent, the proportion of older people living with their unmarried children increased from 18 per cent to 25 per cent reflecting decreased marriage rates.

¹¹For more information about this survey, see: www.mhlw.go.jp/english/database/db-hss/cslc.html

Table 1: Living arrangements of older people aged 65 and older

	1986	2010
Households of married couple	22.0%	37.2%
Single-person households	10.1%	16.9%
Households with children	64.3%	42.2%
<i>(with Children's family)</i>	<i>(46.7%)</i>	<i>(17.5%)</i>
<i>(with unmarried children)</i>	<i>(17.6%)</i>	<i>(24.8%)</i>
Other households (e.g. with relatives)	3.3%	3.7%

Source: Comprehensive Survey of Living Conditions of the People on Health and Welfare, 2010

These data show important changes that affect the caregiving capacity of households. They also show that isolation among older people and elder-to-elder caregiving have become pressing challenges in Japan. Nevertheless, the proportion of older people who live with children is still higher than those in Western countries.

Which factors influence the prevalence of older people currently living in multigenerational households?

Living arrangements differ between urban and rural areas. Among households with member(s) aged 65 or over, although the proportion of single-person households is 24 per cent nationwide, it is substantially higher at 31 per cent in 20 metropolitan cities (referred to as urban areas). While the proportion of couple households with no children is similar between urban and rural areas (30% and 32% respectively), the proportion of three-generation households differs markedly at 16 per cent and 9 per cent nationwide and in urban areas respectively. Hence, one can observe that older people are more likely to live alone in urban areas (Comprehensive Survey of Living Conditions of the People on Health and Welfare, 2010).

However, there are circumstances in the living arrangements of families with multiple generations that these data do not fully represent. While the proportion of older people living with children are shown above, 19 per cent of the elderly households (with those aged 65 or over) have a separate household of children in close proximity within 15 minutes' walk (Housing and Land Survey, 2003).

It should also be noted that perceptions of social relationships among older people are also changing. According to a survey of attitudes of people aged 65 or over, when asked about the ideal relationships with children and grandchildren in old age, 59 per cent of the respondents chose 'living with them' and 30 per cent chose 'meeting with them once in a while' in 1980. However by 2010, these figures changed substantially so that 33 per cent of older people perceived 'living with them' as the ideal situation, and 47 per cent perceived 'meeting with

them once in a while' (International Survey on Living and Consciousness of Senior Citizens, 1980-2010).

Do families, and particularly younger family members, provide formal or informal care in other ways for older relatives who need care and/or support?

In Japan, approximately four per cent of older people aged 65 or over are institutionalised. Other older people who need care live at home, receiving care and services from a combination of family members and formal care providers (e.g. home care, day care centre), through provisions under national long-term care insurance (Survey of Institutions and Establishments for Long-term Care, 2009). In other words, care not covered by the national long-term care insurance is expected to be provided by family caregivers.

Twenty-six per cent of primary carers for older people with care needs are spouses, 21 per cent are children, 15 per cent are children's spouses (mainly sons' spouses), 10 per cent are family members not living with the older person, and 13 per cent are formal care providers (Comprehensive Survey of Living Conditions of the People on Health and Welfare, 2010).

Informal care is also provided in other ways, particularly through social contact. According to a study of people aged 75 or over, while the frequency of visiting children who do not live with them decreases with age, communication by phone increases with age (International Longevity Centre Japan, Longitudinal Study on a Daily Life of Older People, 2008).

How has the changing economic situation of older people changed the pattern of care giving within families?

The average annual income per capita of households containing only elderly person(s) (aged 65 or over) has been quite stable in recent years, estimated as ¥1,908,000 in 2004 and ¥1,929,000 in 2008, a likely reflection of stability in pension benefits (Comprehensive Survey of Living Conditions of the People on Health and Welfare, 2004 & 2008). However, the average annual income of any household containing a member(s) aged 65 or over (many include older people with lower pension benefits, such as widows) decreased from ¥5.37 million yen in 2004 to ¥4.84 million yen in 2008. Therefore, the changing economic situation of recent years appears to have had a greater impact on younger generations than directly on older people (Comprehensive Survey of Living Conditions of the People on Health and Welfare, 2010). Nevertheless, these changes are also likely to impact on the economic circumstances of older people, particularly given that over two-fifths live with another generation.

Long-term care costs are basically covered by the national long-term care insurance. In 2004, 89 per cent of the households paid the costs of care directly from the income of people needing care or their spouse, 5 per cent paid by withdrawing the savings of the older person or their spouse, and 7 per cent relied on income sources that did not involve the older person or their spouse (excluding the unknown responses). By 2010, these figures changed to 74 per cent, 9 per cent and 10 per cent respectively (Comprehensive Survey of Living Conditions of the People on Health and Welfare, 2004 & 2008). Hence, while the caregiving burden on family members seems to have decreased dramatically in Japan since the long-term care

insurance system started in 2000, there are signs that imply the gradual increase in family burden due to the changing economic situation surrounding older people. This situation may compound the difficulties faced by the younger generation and may place strain on intergenerational relations, given the statistics presented above suggesting that families may be less able to afford social care costs.

Netherlands

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Background

Dutch statistics from 2009 show that the population of older people (aged 65 and above) is comparable in size to the child population (aged under 16), with both groups accounting for 15 per cent and 19 per cent of the population respectively¹². Recent demographic changes in the Netherlands have been emblematic of the second demographic transition, which includes changes to household structures and living arrangements¹³. These have also included changes to familial financial and caring arrangements, and the country is said to be undergoing a pattern characterised as 'de-familialisation', where the strong role of the state lessens the (financial) role of individual families; this is speculated to be more widespread in the Netherlands than among other European countries through the relatively generous state support for a minimum pension for older people, and widespread grants and loans for students¹⁴. As is the case in many Western European economies in recent years, the economic crisis has added strain to state support in a time of austerity, and resulted in a sense of disenfranchisement among younger generations.

Unlike in many other European contexts where intergenerational relations have been increasingly characterised in a negative light, with the 'baby boomer' generation perceived as having received more than their 'fair' share, some corners of the Dutch popular press have sought to paint a more positive picture. Some regard the 'baby boomer' generation as representing something of a demographic window, and through their impending retirement will be 'saving the jobs market for younger people'¹⁵. Even if this does come to fruition (particularly against a context of deferred retirement), a challenging economic backdrop is likely to continue across Europe for some time, which will place continued pressure on the social care and housing arrangements of families.

How many older people currently live with their family in multigenerational households?

In a study by Van der Pas et al. (2006)¹⁶ two cohorts were asked several questions about individual and relational characteristics. A part of the first cohort received a follow-up 10 years later. Table 1 shows the age of the respondents and the percentage of respondents that co-resided with one of their children.

¹² See Centraal Bureau voor de Statistiek <http://statline.cbs.nl/>

¹³ For further information, see: Van De Kaa, D. (1997) Europe's Second Demographic Transition. *Population Bulletin*, 42:1-59

¹⁴ Saraceno, C. & Keck, W. (2010) Can we identify intergenerational policy regimes in Europe? *European Societies*. DOI: 10.1080/14616696.2010.483006

¹⁵ <http://www.rnw.nl/english/article/dutch-press-review-tuesday-20-december-2011>

¹⁶ van der Pas, S. van Tilburg, T. & Knipscheer, K. (2006) Changes in contact and support within intergenerational relationships in the Netherlands: A cohort and time-sequential perspective. *Interpersonal Relations Across the Life Course*, 12, 243-274.

Table 1: Percentage of two cohorts living with one or more of their child(ren)

Cohort	1928-1937(1)	1938-1947	1928-1937(2)	
Year of survey	1992	2002	1992	2002
Age during survey	55-64	55-64	55-64	65-74
% co-residence	15%	10%	16%	2%

Another Dutch study showed that three per cent of households offer co-residence to those aged 50 years and above in 2003¹⁷. In a comparative study it was found that approximately five per cent of older Dutch women (65+) and slightly more (around 7%) of older Dutch men lived with their offspring in 2000¹⁸. A slightly higher estimate was also given in a more recent study where they found that the percentage of adults living with their parents is estimated to be around 5 per cent in 2005¹⁹. Table 2a and b show the percentages of older Dutch citizens that live together with at least one of their children²⁰.

Table 2a: Percentage of individuals living in one household with one or more of their children, per year (1995-2002) and 5-year age category.

Age	1995	1996	1997	1998	1999	2000	2001	2002
65-69	11.7	11.4	10.9	10.4	9.8	9.5	9.1	8.8
70-74	7.6	7.4	7.3	7.1	6.9	6.7	6.6	6.5
75-79	5.7	5.7	5.6	5.5	5.4	5.3	5.2	5.2
80-84	4.7	4.7	4.6	4.5	4.5	4.4	4.4	4.3
85-89	4.1	4.1	4.0	4.0	3.9	3.8	3.7	3.6
90-94	3.8	3.7	3.7	3.5	3.5	3.4	3.5	3.3
95+	3.8	3.8	3.7	3.6	3.5	3.5	3.3	3.2
Total	7.7	7.6	7.3	7.1	6.8	6.6	6.5	6.3

Table 2b: Percentage of individuals living in one household with one or more of their children, per year (2003-2010) and 5-year age category.

Age	2003	2004	2005	2006	2007	2008	2009	2010
65-69	8.5	8.3	8.0	7.8	7.6	7.4	7.2	7.1
70-74	6.3	6.1	6.0	5.8	5.6	5.4	5.2	5.1
75-79	5.0	5.0	4.9	4.8	4.7	4.6	4.4	4.4
80-84	4.2	4.2	4.1	4.1	4.0	3.9	3.8	3.8
85-89	3.6	3.6	3.6	3.5	3.4	3.4	3.4	3.3
90-94	3.3	3.2	3.2	3.0	3.0	3.0	2.9	2.9
95+	3.1	3.0	3.0	3.2	3.1	3.0	2.9	2.7
Total	6.1	6.0	5.8	5.7	5.5	5.4	5.3	5.2

¹⁷ Alders, M. (2004). Demografie van gezinnen. Bevolkingstrends, 4, 31-34. Den Haag: Centraal Bureau voor de Statistiek.

¹⁸ Tomassini C., Kalogirou S., Grundy E., Fokkema T., Martikainen P., Broese Van Groenou M. & A. Karisto (2004). Contacts between Elderly Parents and their Children in four European Countries: Current Patterns and Future Prospects. European Journal of Ageing, 1(1), 54-63.

¹⁹ Smits, van Gaalen & Mulder (2010) Parent-Child Coresidence: Who moves in With Whom and for Whose Needs? Journal of Marriage and Family 72(4):1022-1033

²⁰ These data are from the Central Bureau of Statistics in the Netherlands.

As is clear from the studies above, the percentage of older people living with their family or in multigenerational households has been decreasing steadily. Illustrative of this is the average number of persons per household in the Netherlands that has dropped to 2.2 persons on average per household²¹, from about 4.7-4.9 persons during the nineteenth century²².

How have the numbers of multigenerational households changed over the past 40-50 years?

As is clear from the studies above, the percentage of older people living with their family or in multigenerational households has been decreasing steadily. For as far as there is official data available, from 1995 onwards, there is a pattern of decrease. Earlier data on a cohort of older people born 1928-1937 found that 15 per cent lived with their children in 1992, indicating that the trend of a decrease was in place earlier than 1995. In fact, a decrease in multigenerational households was already visible after industrialization started in the Netherlands from the 1850s onwards²³. Earlier evidence, however, shows that until the 1860s the number of children (at birth) that lived with a grandparent was on the rise, although they nevertheless conclude that “multigenerational households were the exception”²⁴.

It is noted also that despite the modest size of the Netherlands, there have been regional differences in co-residence. The northern and western part of the Netherlands always held a relatively low percentage of multi-generational households. Historical overviews show that in other parts, such as the rural east of the Netherlands, the percentage of co-residence could be as high as 50 per cent²⁵. This was influenced by what was considered ‘more individualization’ in the northern and western part, but also differences in inheritance patterns and differing rates in processes of urbanization²⁶.

Which factors influence the prevalence of older people currently living in multigenerational households?

The health status of older people is one factor that influences the occurrence of multigenerational households in the Netherlands, although greater numbers of older people are living alone, or as a couple, for two hypothesised reasons. Firstly, greater numbers of older people express a preference or adherence towards living independently, as demonstrated in the Eurobarometer and SHARE studies²⁷. Secondly, the Netherlands has witnessed a clear decrease in the percentage of older persons living in institutionalised care. According to the Central Bureau of Statistics, 89 per cent of the population 65 years and older lived alone or as a couple. We can also deduce from tables 1 and 2 that the prevalence of co-

²¹ Ibid

²² Kok, J. & K. Mandemakers (2010) A life-course approach to co-residence in the Netherlands, 1850–1940. *Continuity & Change*, 25(2), 285-312.

²³ van Hooren. F. & U. Becker (2011). One Welfare State, Two Care Regimes: Understanding Developments in Child and Elderly Care Policies in the Netherlands. *Social Policy & Administration*, online first.

²⁴ van Gaalen, R. & van Poppel, F. (2005). Living with kin in the Netherlands: Long-term trends, variability and effects on longevity. Paper presented at the Symposium on ‘Kinship and Demographic Behavior’, organized by the International Union for the Scientific Study of Population and the University of Utah, Salt Lake City, USA 31 October- 1 November 2005., p25

²⁵ van der Woude, A.M. (1973) *Het Noorderkwartier : een regionaal-historisch onderzoek in de demografische en economische geschiedenis van westelijk Nederland van de late middeleeuwen tot het begin van de negentiende eeuw*. H&S: Wageningen.;

Kooy, G.A. (1959). *De oude samenwoning op het nieuwe platteland: een studie over de familiehuishouding in de agrarische Achterhoek*. Van Gorcum: Assen.

²⁶ Kok, J. & K. Mandemakers (2010)

²⁷ Tomassini C., Kalogirou S., Grundy E., Fokkema T., Martikainen P., Broese Van Groenou M. & A. Karisto (2004).

residence depends on age. Table 1 shows that the percentage of co-residence among one cohort drops from 16 per cent to 2 per cent in 10 years. One reason could be that the older a person becomes, the more intensive their care needs will be.

Perceptions of filial obligation are an important factor in the prevalence of older people living in multigenerational households. It is rather uncommon to perceive the provision of co-residence for older people as an obligation, and the norm is rather to strive for living independently. These are among the socio-cultural influences on multi-generational households, especially among non-migrated Dutch older people²⁸. People with higher education qualifications are also found to adhere to an even less demanding approach towards co-residence²⁹. The general trend among the Dutch population towards higher education may also be an explanatory factor in the decrease in multi-generational households.

Do families, and particularly younger family members, provide formal or informal care in other ways for older relatives who need care and/or support?

Numerous studies, among them the European based SHARE and the LASA study in Amsterdam, show that children provide both instrumental and emotional support to older relatives³⁰. The instrumental support is influenced by factors such as geographical proximity. It is also known that financial transfers are relatively low in the Netherlands and rather uncommon. Until recently particularly younger family members could apply for care budgets that could cover their position as an informal caregiver in a formal way (known as mantelzorger).

How has the changing economic situation of older people changed the pattern of care giving within families?

Table 3 shows that the income of older people is steadily increasing from 2000 onwards, implying that older people are becoming more and more financially independent. Similarly, the Social & Cultural Planning Agency (SCP) analyses show that the number of older people who live below the poverty threshold is declining, as can be seen in table 4.

²⁸ Valk, H.G. & Schans, D. (2008). 'They ought to do this for their parents': Perceptions of filial obligations among immigrant and Dutch older people. *Ageing & Society*, 28(2), 49-66.

Von Faber, M. (2002) *De maten van succes bij ouderen*. Optima: Rotterdam.

²⁹ Valk, H.G. & Schans, D. (2008).

³⁰ Albertini, M., Kohli, M. & C. Vogel (2007). Intergenerational transfers of time and money in European families: common patterns – different regimes? *Journal of European Social Policy*, 17, 319-334.

de Boer, A., Broese van Groenou, M. & Timmermans, J. (2009). *Mantelzorg. Een overzicht van de steun van en aan mantelzorgers in 2007*. Den Haag: SCP.

Brouwer, W.B.F. (2002). *Informal care in the Netherlands: A situational sketch of informal carer-providers reached by Informal Care Centres*. iMTA report no. 02.58b. Rotterdam: Erasmus MC.

de Jong Gierveld, J. & Dykstra, P.A. (2008). Virtue is its own reward? Support-giving in the family and loneliness in middle and old age. *Ageing & Society*, 28(2), pp. 271-287.

Ouddijk, D., de Boer, A., Woittiez, I., Timmermans, J. & de Klerk, M. (2010). *Mantelzorg uit de doeken*. Den Haag: SCP.

Sadiraj, K., Timmermans, J., Bas, M. & de Boer, A. (2009). *De toekomst van de mantelzorg*. Den Haag: SCP.

Table 3: The income status of older people (2000-2020).

Year	Income of 65+ against social minimum	Income of 65+ against 65-	Income of 65+ against active
2000	1.73	0.68	0.63
2005	1.85	0.75	0.69
2010	2.00	0.81	0.72
2015	2.19	0.88	0.77
2020	2.34	0.93	0.81

Source: Thio (2002), *De inkomenspositie van ouderen*, SZW werkdocument.

Table 4: Households under the poverty threshold by age of the wage-earner (1994-2003)

Age	1994	1998	2000	2001	2003
All ≥ 35	15.5	12.8	9.0	8.9	9.1
35-64 years	12.1	11.0	7.6	8.5	9.8
55-64 years	14.2	13.5	9.7	10.5	10.4
65-74 years	17.3	11.7	8.9	7.2	7.0
≥ 75 years	30.2	21.1	15.9	10.3	7.0

Higher socioeconomic groups made less use of formal care in 2009 and 2010, than lower socioeconomic groups (table 5). A possible reason for this association is that people from higher socioeconomic classes generally live longer (in good health). One could argue that as older people are becoming more emancipated, financially independent, and can benefit more from legal arrangements such as the Exceptional Medical Expenses Act (AWBZ, which offers personal budgets) and the Social Support Act (WMO), the number of elderly that live with their children could decrease even further. Figures demonstrating this trend in a clear and unambiguous fashion do not exist for the Netherlands at this time however.

Table 5: People using AWBZ/WMO care without residence by income group

Age	Income group	% of persons using AWBZ/WMO care without residence		Average number of hours of received AWBZ/WMO care without residence	
		2009	2010	2009	2010
65-80	1 st 20% (low)	19%	19%	157	159
	2 nd 20%	15%	15%	144	147
	3 rd 20%	9%	9%	126	127
	4 th 20%	7%	6%	110	110
	5 th 20% (high)	4%	4%	104	102
	Total	11%	11%	140	141
80+	1 st 20% (low)	42%	40%	209	212
	2 nd 20%	47%	47%	195	198
	3 rd 20%	37%	37%	174	177
	4 th 20%	32%	32%	169	168
	5 th 20% (high)	28%	27%	173	172
	Total	40%	40%	192	194

The expectation is that new cohorts of older people will be those used to a more independent lifestyle, and as a result will be more likely to adhere to this kind of lifestyle in later life. This might result in a higher reliance on formal domiciliary care and a larger focus on independence, continuing the current observed trends towards lower levels of multigenerational households and lower levels of institutional care³¹.

³¹ Liefbroer, A.C. & P.A. Dykstra (2000). *Levenslopen in verandering*. Sdu Uitgevers: Den Haag.

Singapore

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Background

As a country with strong emphasis on the family as the basic building block of society and the family as the first line of care and support for its members, families in Singapore remain strong. However, Singapore faces the twin demographic challenges of longer life expectancy and low fertility rates. While traditionally families have lived in larger multi-generational households, household size is decreasing over time. People are marrying later, having children later or having no children; or choosing to remain single. While there are still a high proportion of two generation households, there are now a smaller proportion of three generations households. Also through public housing ownership, children starting their own households have preferential access to owning a home in close proximity to their parents. Family members, while not necessarily co-residing, can still remain in close contact and maintain ties.

Amidst these demographic changes and household changes, there is the sandwich generation in Singapore. This is the economically squeezed generation providing financial support and care to both their aged parents and young children. The pressures that the sandwich generation faces suggest that they work harder for more years and save less in order to provide for the older generation, the younger generation and themselves. While Singaporeans fully acknowledge their obligation of filial piety to their parents, the pressures faced are affecting intergenerational relations. State support to meet the social security and care needs of older Singaporeans has become more pressing.

How many older people currently live with their family in multigenerational households?

Based on the nationally representative Singapore Social Isolation, Health and Lifestyles Survey (SIHLS) 2009 of 5,000 respondents aged 60+, a large majority of older people live with their family. Over 94 per cent of older Singaporeans live in either two generation or three generation households. Average household size is 3.58 with a standard deviation of 1.77, and this is after accounting for different age groups, gender and ethnicity.

Sixty-seven per cent of older Singaporeans live with their children while 27 per cent live with their children and grandchildren. This may reflect a trend for their (adult) children to have fewer babies, or alternatively, that they may have grandchildren who have moved out to start their own households. Six per cent of older Singaporeans are alone either because they were never married or they have suffered from spousal loss. There is concern that the percentage of the elderly living alone without any family care will rise in the future.

How have the numbers of multigenerational households changed over the past 40-50 years?

Given the availability of data, patterns on living arrangements can only be studied for the past ten years using census data. Using census data from 2000, there were 231,334 older persons aged 65+. Fourteen per cent lived with their spouses only; 36 per cent lived with their spouses and children; and 37 per cent lived with their children only. Twelve per cent were not living with their spouses or children, either living alone or in a shared home with another older person.

In 2010, the number of older persons aged 65+ increased to 339,453. Nineteen per cent lived with their spouses only and 36 per cent lived with their spouses and children. Thirty-one per cent lived with their children only. The percentage of older persons not living with their spouses or children has increased to 14 per cent which is also an increase in absolute terms. This may mean that they have either suffered from spousal loss, or that they were never married and were without children.

In comparing the census data from 2000 and 2010, the household size of older people is shrinking and also fewer older people now live with their children only. While older Singaporeans still do live with their children, there has been a drop in the number of two generation households in the past decade. However, this does not necessarily mean that the close family ties have been weakened. Because of high density living in the island state, where people of all ages tend to live in small public apartments in high-rise buildings, younger people starting out may prefer to live in their own apartments. Public housing makes up over 80 per cent of the total housing stock in the country. Young married couples applying for their first public apartment will receive preferential treatment in being allocated to an apartment building that is in close proximity to their parents' apartment.

Which factors influence the prevalence of older people currently living in multigenerational households?

Factors that influence the prevalence of older people currently living in multigenerational households are primarily demographic in nature and to a lesser extent institutional. The younger generation of childbearing age is less likely to have children, as can be seen by the low fertility rates in the country. As such, there are fewer three generation households. The two generation household is still robust as Singaporeans strongly believe in filial piety. By living together, Singaporeans are able to provide daily care and support to their aged parents. However from an structural perspective reflecting housing stock and tenure patterns, children may choose not to live under the same roof as their parents, but they can still provide old age support.

Do families, and particularly younger family members, provide formal or informal care in other ways for older relatives who need care and/or support?

Given the emphasis on the family in Singaporean society, younger family members are expected to provide care for their older relatives who are in need. Younger family members pool resources to provide informal care and financial support. In higher income households, younger family members can hire foreign domestic workers as live-in maids to provide

informal care. However in low income households, younger family members struggle to juggle the demands of holding down a job and providing both time and money for their older relatives. Also in three generation households, both rich and poor, younger members are economically squeezed in between their parents and their own children. This is the sandwich generation that has to provide care and support to both the older generation and younger generation.

How has the changing economic situation of older people changed the pattern of care giving within families?

Despite the openness of the economy, due to a high level of reserves and the existence of sovereign funds, Singapore has managed to avoid a long drawn out fallout from the global financial crisis. However within the local economy, the cost of living is escalating and households are finding it increasingly difficult to manage given wage compression in the labor market. Additionally, there exists vast income inequality in Singaporean society where the rich keep getting richer and little is in sight for lower income households, no matter how hard they work.

The cost of care is dominated by private out-of-pocket spending in a country where healthcare is viewed as a matter of personal responsibility. As such, care for older people in low income households has become more challenging. Younger family members caring for older relatives are increasingly dependent on voluntary welfare organizations (VWOs) to help to provide care. By using services provided by VWOs and the community to help with care, younger family members can go to work full-time; although, this still does not change the situation for younger members who are a part of the sandwich generation, where there remains a pressure to provide child care and care for the elderly.

South Africa

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Background

Intergenerational relations is a broad area, encompassing interpersonal and intergenerational family relationships, at micro and meso levels at one end; and generational political and power dynamics, in terms of different generations' access to resources and power, at the macro level, at the other end. The area may be approached from several sociological perspectives. ILC India and ILC UK have delineated the topic for the purpose of an ILC Global Alliance dialogue as "Familial intergenerational relations, households and care." Three of the five guiding questions provided pertain to older persons' living arrangements (and demographic, social and economic factors that drive changes in patterns of such arrangements); the remaining questions pertain to patterns of familial (informal) care and support of older relatives (in multi-generational households). We respond to the five questions separately below.

First, it is pertinent to point out that South Africa has a multi-ethnic, multi-cultural society comprising four main groupings: black Africans, coloureds (people of mixed ancestry), Indians and whites³². Considerable cultural and socio-economic diversity exists between the groups; families' attitudes and approaches to care and support of older relatives, and older persons' expectations of same vary similarly across the different groups. The majority of black Africans, coloureds and Indians, designated as "previously disadvantaged" (i.e. they were disadvantaged by apartheid), have been poor historically, compared to the relative affluence of whites, designated "previously advantaged". Notable changes are evident, however, in the socio-economic, or wealth status of people of different ethnicity since the advent of full democracy in the country in 1994. In particular, an elite black group (with considerable wealth) has emerged, while numerous white people have experienced discrimination in access to the means of wealth and are impoverished.

Historically, black Africans, coloureds and Indians enjoyed a strong extended kin system and people resided in multi-generational households. Whites on the other hand, who had the financial means, have tended to live independently of younger family members. When frail and in need of care, they may have relocated to a retirement home or other residential care facility to receive professional care. Where financially indigent and in receipt of a social pension, they may relocate to a government subsidised old age home. However, a confluence of demographic, social, economic and health trends, not least being longevity, has reshaped earlier living and care arrangements of older people across all ethnic groups, although variably, and we consider some of these trends below.

³² The majority of South Africa's population is black African, approximately 80 %, followed by whites at approximately 9 per cent, coloureds at 8 per cent and Indians at 3 per cent.

How many older people currently live with their family in multigenerational households?

Earlier survey data from 1990³³ showed that with the exception of whites, more than half of older persons (60+ years) in South Africa lived in households with three or more co-resident generations. Another 30 per cent lived in two-generation households, while fewer than 5 per cent lived alone. Among older whites, 39 per cent lived alone, 41 per cent resided with a spouse in a two-person household and fewer than 20 per cent lived in a multi-generational household. Seven in ten whites aged 85 years and over lived alone. More recent data from 2009³⁴, although compacted, indicates that only 8 per cent of all South Africans, both men and women, live alone. As 78 per cent of all older men and 47 per cent of all older women are married, these percentages presumably live with a spouse and possibly adult children and grandchildren, as may a large proportion of the remainder.

The data cited are somewhat dated and a population census is under way. However, there is little evidence or reason to suspect that the present pattern of living arrangements across the ethnic groups has changed very much over the past two decades. Nonetheless, any true statistical representation of living arrangements and multi-generational co-residence may be blurred by a strong internal migration trend (rural/urban and urban/rural). African older people tend to migrate circularly between an urban dwelling (where they typically co-reside with migrant adult children and grandchildren) and a rural ancestral homestead which they continue to maintain. A large number of urban dwellers return to their rural home regularly to sow and harvest crops, tend livestock and carry out repairs; they may be joined by urban kin, especially at Christmas time. Configurations of generational co-residence, in urban areas and rural areas, may therefore be fluid.

How have the numbers of multigenerational households changed over the past 40-50 years?

The patterns and place of residence of some older people in South Africa are likely to have changed following lifting of the apartheid era Group Areas Act, in 1988. The legislation prescribed where people from different ethnic groups were allowed to live and it curtailed black Africans' migration. Historically, males in the numerical majority black African ethnic group were allowed to migrate from a rural area to an urban area for work opportunities (for example to work in mines), but were not permitted to take their family with them. The males lived in single-sex hostels in a city or on a mine, while the women and children remained in the rural homestead. When an urban worker retired, he was compelled to return to his rural place of origin. Hence, the majority of older African men and women resided in a rural area with extended family, and engaged in subsistence agriculture. Older coloured men and women were not as restricted as black Africans as to where they could live, as long as it was not in an area reserved for whites; the majority co-resided with kin, in designated areas in a city or a town, or on a farm where they worked. Indian people traditionally lived with kin all their life. White older people either lived independently, or if they lacked sufficient means, lived with a

³³ US Bureau of the Census, 1990, International Programs Center, International Database

³⁴ UN Population Division, 2009

son or daughter and possibly their family. However, a relatively high proportion, up to 11 per cent, who were in need of care and/or socially indigent, lived in a home for the aged. These homes, which were racially segregated, primarily served the white population; to a lesser extent, homes were provided for coloured older people, but none for blacks.

Forty to 50 years on, co-residence of extended family members, black Africans in particular, is far more fluid. In rural areas, adult children, both males and females, tend to migrate to urban areas for work and education opportunities, while their ageing parents remain behind in the rural area. Grandchildren born in an urban area will typically be sent to a daughter's parents in a rural area to be raised by them, often until the children reach school age, whereupon they will return to their parents in the urban area for better schooling opportunities. Many elderly parents therefore reside in a 'skip generation' household, with grandchildren, while their adult children live and work (if they have a job) in a town or city. A trend over the past ten to 20 years, however, has been for older persons who reside in rural areas and are no longer able to cope for various reasons (for example declining physical ability to engage in subsistence agriculture) to migrate to a city where they join urban kin.

In 1994 all government institutions were racially desegregated and, theoretically, all homes for the aged are now open to people of all ethnic groups. A trend is noted for black older individuals who are vulnerable and without family to relocate to a home, often by choice. However, this is on condition that a place at a home is available, which is fairly unlikely in most rural areas. Racial integration of these facilities has been shown, moreover, to be fraught with challenges due to language differences, widely varying dietary preferences, and social, religious and cultural practices of the residents. In numerous homes, the management often observes that black older people are left there ("dumped") by their children and seldom if ever visited. Often the homes are unable to locate family members when a resident dies.

AIDS and its consequences also contribute to patterns of co-residence in the country. Typically, in the recent past, middle generation individuals who contracted AIDS would succumb to the disease and grandparents were left to raise the orphaned grandchildren; or, if urban based, the sick adult children would return to their rural home to be cared for by an elderly mother until they died. With increased availability of anti-retroviral therapy, and HIV infected people surviving far longer than previously, this pattern may be changing. Ultimately, nonetheless, numerous grandmothers are left to care for vulnerable and orphaned children. Skip generation households are common in the black population, for a variety of reasons, one being AIDS related morbidity and mortality. AIDS related deaths are also contributing to the growing number of child-headed, and therefore single generation, households, in which children grow up bereft of both parents and grandparents. Increasingly, only grandchildren are available to care for elderly grandparents when they need care.

Coloured older people continue to follow a trend of living with adult children and grandchildren, with the older person likely to be the household head, but increasingly couples are living independently in an assisted living setting. Indian older people tend to live with an adult son and his family. No specific change in living arrangements of white older people is discernible – except an increasing trend for some, where they have sufficient means, to relocate to a

retirement village or complex in order to enjoy a congenial lifestyle and to be assured of professional care when needed. A similar trend is being noted among some affluent coloured and Indian people.

Which factors influence the prevalence of older people currently living in multigenerational households?

Multi-generational co-residence has been a culturally entrenched norm historically for nine-tenths of South African society. However, a continuation of this norm and of older individuals' expectation of co-residence with family may no longer be realistic. Several factors are intervening to change patterns of multi-generational co-residence, some referred to above. Essentially, new family forms are emerging in response to intervening factors driving change. A trend is noted towards a proliferation of nuclear family households in urban areas, with parents and immediate children residing in a two-generation household, without co-resident older relatives. Nonetheless, the concept of the extended family and conjoint kin support system appears to remain intact, even though co-residence of most family members may no longer pertain.

In short, co-residence with family remains a norm and a widely preferred option for the majority of South Africa's population, but change is under way. Where different living arrangements pertain, temporarily or longer term, older people show resilience and flexibility to the change. However, intergenerational relations become fractious when young adult household members abuse drugs and/or alcohol, and do not seek or hold down a job; in such cases, elderly parents will encourage the children to leave the dwelling, or they themselves may opt to relocate to a residential care facility "for peace and quiet." However, once living there, they may fret about the well-being of their grandchildren no longer in their care. Older people, older women in particular, who care for family members infected with or affected by AIDS are certainly in need of support, familial or non-familial. Support is often not forthcoming from the government, with only limited support available from NGOs, although these individuals may increasingly need formal care themselves.

Do families, and particularly younger family members, provide formal or informal care in other ways for older relatives who need care and/or support?

Adult children in South Africa indeed provide care and support to older relatives in need, particularly black African adult children. However, the children's capacity to do so may be compromised, and a desire to honour their filial responsibility thwarted. The South African government does provide a virtually universal, although means tested, social pension; the majority of older blacks, a fairly high percentage of older coloureds, and a lower percentage of older Indians benefit from the monthly grant of \$155 a month. Only a small number of white older people are eligible to receive the grant. In black African households, in a context of chronic poverty, female beneficiaries commonly share pension income with other household members; in particular, they pay for their grandchildren's schooling. Coloured and Indian beneficiaries have greater discretionary use of their pension income. White pension beneficiaries on the other hand, many of whom live alone or with a spouse only, and pay

rental and utility bills, find they are unable to manage on the income. All pension beneficiaries are entitled to free health care at public facilities, and are eligible for residential care in a government subsidised facility (offset from their pension income) if they meet frailty or social indigence criteria. Black people have historically been averse to institutionalisation; an expectation that they will be cared for by family in old age remains strong. Female adults in all ethnic groups are increasingly entering the work force and have limited time to care for an older relative. A trend is emerging where black adult children with financial means, typically where both spouses are income earners, purchase a unit in a retirement village for their elderly parents so that they may be cared for professionally.

How has the changing economic situation of older people changed the pattern of care giving within families?

South Africa has not experienced the brunt of the global economic recession in the same way that Western countries have. The financial well-being of the country's older people, the majority of whom receive a social pension, has not been compromised by the recession as such, except perhaps in the case of relatively affluent white people who rely on investment income. Patterns of care of older family members may well be impacted marginally by the recession. While South Africa has a high unemployment rate (between 25 and 35 per cent, and up to 40–80 per cent in some areas), the global economic downturn has only partly contributed to this. Nevertheless, economic conditions are changing, and the cost of living in the country has escalated fairly alarmingly, especially the cost of foodstuffs; this is mainly due to runaway increases in the cost of fuel driven by the global economic crisis. It may be stated moreover, fairly confidently, that adult children who have migrated to urban areas are less able than previously to send remittances to elderly parents in rural areas, due to unemployment. This, in turn, impacts the parents' financial well-being, particularly if they are raising grandchildren. Conversely, unemployed adult children tend to regroup with their children in a pension beneficiary's household to share that income which is often the household's sole source of income.

The economic situation of the majority of older individuals may be expected to change when they become old. In South Africa, the majority receive a social pension and, in the case of black Africans, the monthly amount of the income is greater than what many enjoyed over the life course. When coloured and Indian beneficiaries co-reside with family, they are likely to have more discretionary use of their pension income than blacks, simply in that the household's has higher socio-economic well-being. However, considerable evidence exists, over two or more decades, of gross financial exploitation of social pensioners by younger family members, which amounts to elder abuse.

Overall, demographic trends in South Africa are reshaping earlier patterns in living arrangements of a large number of older people in different ethnic groups, but variably. It is not possible, based on speculative changes in living arrangements, to make definitive pronouncements on changes in intergenerational relations over half a century. Such pronouncements require purposeful, nuanced and sensitive inquiry to provide evidence, which is beyond the scope of this note. Several studies have nonetheless demonstrated changes in

specific contexts and settings. We choose however to leave articulation of such evidence and views to specialists in this field.

United Kingdom

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Background

In the UK, there has been mounting concern about the lack of understanding between younger and older people. This concern was heightened after the riots that occurred across major cities in England in August 2011³⁵. Much of the anger of the young people involved was believed to stem from a breakdown in intergenerational relations, familial and non-familial, symptomatic of a lack of understanding between younger and older people. Younger generations were said to perceive a lack of economic opportunity that was not experienced by earlier cohorts. Young people are also more likely to believe that austerity measures resulting from the economic crisis have unfairly targeted their interests compared to older generations³⁶. This also extends to housing arrangements, and older people have recently been characterised as 'bedroom blockers' who 'hoard housing' in some quarters³⁷. Such statements clearly do very little to improve intergenerational relations in the UK; they also neglect social and economic changes occurring that mean that the number of 'younger' older people (between 55-70 years) living with kin (and thereby not 'bedroom blocking') may actually grow through changes in fertility and marital patterns, living arrangements, and general postponement of transitions to adulthood.

With the number of older people (aged 65 and over) now close to the number of younger people (aged 15 and under), representing 19 per cent and 17 per cent of the total population³⁸ respectively, the challenge of maintaining intergenerational harmony is unlikely to diminish in importance in the near future. However, despite the apparent importance of intergenerational relations and contact for both younger and older people, there has been comparatively little UK research that quantifies the benefit of living with, or regular contact with, people of a different generation. Here, we present a short overview of intergenerational and multigenerational relationships in the UK, through presenting summary statistics based on ILC-UK analysis.

How many older people currently live with their family in multigenerational households?

In the UK, indicative evidence suggests that only a minority of older people live with those of a different generation. Data from the English Longitudinal Study of Ageing (ELSA)³⁹ collected in 2008/9 suggests that just over two per cent of older people aged 50 and above live with a grandchild. Twenty-seven per cent of people aged 50 and above (11% aged 65 and above)

³⁵ For more information see: <http://www.bbc.co.uk/news/uk-14452097>

³⁶ Kneale, D., Berry, C., Sinclair, D. (2010) *The Spending Review 2010: Intergenerational perceptions of fairness, cuts and economic recovery*. London: International Longevity Centre.

³⁷ Griffith, M.. (2011) *Hoarding of Housing: The intergenerational crisis in the housing market*. London: Intergenerational Foundation.

³⁸ See Office for National Statistics: <http://www.ons.gov.uk/ons/publications/re-reference-tables.html?edition=tcn%3A77-231847>

³⁹ For more information see: <https://www.ifs.org.uk/elsa>

live with one of their children. This is indicative evidence only as it does not reveal the picture for the other UK constituent countries (Wales, Scotland and Northern Ireland)⁴⁰.

The proportion of older people in the ELSA study living with grandchildren does not vary statistically significantly by age group, so that similar proportions of those aged 50-54 years for example live with their grandchildren as do those aged 85 years and over (around 2%). However, the proportion of older people living with children did vary significantly by age group. Almost three-fifths of older people aged 50-54 live with their children (59%). Conversely, less than ten per cent of older people aged 70 and above live with their children (this does not vary significantly by age after age 70).

How have the numbers of multigenerational households changed over the past 40-50 years?

In the UK, postponement of parenthood and postponement of permanently leaving the parental home over the past 40-50 years will have impacted on the composition of households. Successive cohorts of women in the UK have postponed first motherhood. For example, 84 per cent of women born in 1945 would have given birth by their 30th birthday; for women born in 1955 this reduced to 73 per cent and for women born in 1965, to 62 per cent⁴¹.

Meanwhile, the age of first leaving the parental home has changed very little in recent years although the motive for doing so has. However, there are now more instances of 'boomeranging', with children returning to the parental home after leaving, sometimes many times, before leaving the parental home permanently. This trend is attributed to the increased levels of participation in higher education and partnership dissolution among younger cohorts of people.

Therefore, the combination of older instances of first parenthood and the increasingly protracted nature of exits from the parental home has led to an increase in the proportion of 'younger older' people (those aged 50-70 years for example) living with their children. There are also slightly more frequent instances of older people living with grandchildren in more recent cohorts of older people. This is reflective of not only changes in family building patterns and changes in caring duties, but also more recent changes in housing and labour markets.

Which factors influence the prevalence of older people currently living in multigenerational households?

Some of the socioeconomic factors that could be expected to influence living in a multi/intergenerational household actually don't when we examine data from the English Longitudinal Study of Ageing. For example housing tenure, a good proxy indicator of socioeconomic circumstance, does not predict older people's propensity to live in a multi/intergenerational household. Health does predict living in a multi/intergenerational household to a certain extent. Older people aged 65 and above who rated their health as poor were twice as likely to be living with grandchildren (4%) as those with good health (2%).

⁴⁰ Data from another survey (Understanding Society) indicates that older people aged 65+ in England and Northern Ireland are slightly more likely to be living in homes with a child aged 16 and under than older people in Wales and Scotland.

⁴¹ See Office for National Statistics FM1 Fertility statistics

Similarly ten per cent of those with good health lived with children compared with 13 per cent of those with poor health.

Cultural factors appear to be particularly strong predictors of who lives in a multi/intergenerational household in the ELSA study. Non-white older people aged 65 years and above are much more likely than white older people to be living with children (30% versus 11%) and much more likely to be living with grandchildren (11% versus 2%). Other data from the Understanding Society survey, representative of the UK as a whole, suggest that older people who are of Indian, Bangladeshi or Chinese ethnicity are particularly likely to be living with children under the age of 16 years, compared to White British older people.

Do families, and particularly younger family members, provide formal or informal care in other ways for older relatives who need care and/or support?

Around three per cent of older people aged 65 years and above live in residential care in the UK⁴². This form of accommodation generally precludes the need for families to provide formal or informal social care, although they may continue to do so and may be involved in funding stays in residential care. A further nine per cent live in specialist retirement housing, which does not generally involve living with children or grandchildren, although families may help with formal or informal social care duties. Those living in general purpose and specialist retirement housing may receive domiciliary care provided by the state, which may be supplemented by help received from families or privately funded arrangements.

Further data from the ELSA study shows that among those living in non-institutional accommodation who report that they need help in carrying out the activities of daily living⁴³ and who do not live with children or grandchildren, just under two-fifths report that they receive help carrying out these tasks from non-resident children or grandchildren. Older people are more likely to receive this assistance from daughters than they are from sons. Families are also likely to support older people in many other ways, and are likely to respond in times of crisis.

How has the changing economic situation of older people changed the pattern of care giving within families?

In the UK, the government announced a series of cuts to public spending at the end of 2010 as part of the comprehensive Spending Review. Adult social care was not immune to these through cuts to Local Authority funding, despite government reassurances at the time to the contrary. Recent cuts in Local Authority spending in 2011 have seen services such as day centres for older people and meals-on-wheels services (where meals were delivered to vulnerable older people) being scrapped. Similarly, initiatives aimed at keeping older people independent in their homes and communities appear to have fallen by the policy wayside in recent months. While it is too early to tell how older people will adapt, it is clear that older people

⁴² See Sutherland, J. (2011) Viewpoint on downsizing for older people into specialist accommodation. London: Housing Learning and Improvement Network.

⁴³ These include moving around the house, washing or dressing, preparing a meal, shopping, using a phone or managing money, taking medication or other tasks.

will find it increasingly difficult to receive the services they may need within their own homes; the provision of care from families may have to pick up some of this expected shortfall.

However, it may not be the economic situation of older people and cuts in services that ultimately that dictates the living arrangements in the future, but that of younger people as well. Increasingly it is being asserted that older people are living in homes that are too large and no longer meet their needs. Similarly younger people are finding it increasingly difficult to access decent housing. Calls have been made to encourage older people to move into specialist retirement housing, although there exists a shortfall in the provision of such housing. In the UK, intergenerational households may provide one option to addressing the housing needs of both younger and older people. This could also extend to involve non-familial intergenerational housing arrangements, such as homeshare. However, while we have witnessed a small growth in the numbers of older people living with children and grandchildren, which is a likely reflection of both changes to family building patterns and the state of the housing and labour markets, it is unclear whether such a growth will be sustained once the UK emerges out of the long recession.

Appendix

Spanish translation of ILC-Argentina report on intergenerational relations

1.- En el Segundo semestre del año 2010, según datos de la Encuesta Permanente de Hogares (EPH) que se realiza en aglomerados urbanos, el 76,5% de las personas de 65 años y más que vivía en hogares particulares lo hacía con sus familias (en pareja sola, pareja o sola con hijos, o con hijos, nietos, y otros familiares y no familiares). El 22,9% de los mayores de esa edad de las áreas urbanas de todo el país vivía solo y una pequeñísima proporción en hogares no familiares. Es importante destacar que el 91,5% de la población de 65 años y más de todo el país vive en áreas urbanas. El 42,6 % de la población de 65 años y más vivía en hogares multigeneracionales, es decir, en hogares en los que al menos vivía una persona menor de 65 años. En síntesis, más de la mitad de la población de 65 años y más de las áreas urbanas del país vive sola o en hogares en los que todos sus integrantes son personas de 65 años y más.

2. En el Censo Nacional de 1980 se registró que el 11,9% de la población de 65 años y más de todo el país vivía en hogares unipersonales. Los datos para el año 2010 señalan que el 22,9% vive en hogares unipersonales, es decir, prácticamente se duplicó la proporción de personas mayores viviendo solas. La tendencia fue el aumento progresivo de los hogares unipersonales y multipersonales en los que todos los integrantes son personas de 65 años y más. En cambio se redujo la proporción de personas mayores viviendo en hogares multigeneracionales, con nietos y otros familiares y no familiares menores

3. En la Argentina, la familia multigeneracional es prevalente en la región Noroeste del país, que limita con Bolivia. Es una región en la que predomina población andina, con características culturales propias. Es un factor étnico-cultural el que determina la prevalencia de este tipo de familia.

4. El principal cuidador familiar de las personas mayores dependientes es el/la cónyuge, fundamentalmente la esposa mujer, en segundo lugar aparece la hija o nuera de edad madura. Es decir, los cuidadores informales son principalmente también otras personas mayores o mujeres de edad madura. Más del 70% de los cuidadores familiares son mujeres.

5. En general, es muy baja la proporción de personas dependientes cuidados por personal contratado, algo más del 15 %. La inmensa mayoría de las personas dependientes son apoyadas por familiares convivientes y no convivientes o vecinos. En la actualidad, a medida que aumenta la proporción de personas de 80 años y más está aumentando la tasa de internación en instituciones geriátricas que es la casi exclusiva prestación de apoyo para las personas dependientes que no tienen apoyo familiar suficiente.

