

Happy grandparents? A longitudinal study on changes in the perception of quality of life of over-fifty grandparents, between “family revolution” and economic crisis.

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[Long Abstract](#)

Abstract

Objectives: To estimate variation in well-being of european grandparents over a period of 9 years (2004-2013) from longitudinal data and examine whether such variation is significantly different both between countries and from the non-grandparent population in the same time period.

Design: Longitudinal multilevel study. Data from the waves 1,2,4 and 5 of the Survey of Health, Ageing and Retirement in Europe. The Share survey is a cross-national panel database of micro data of approximately 110,000 individuals (73.000 grandparents) from 20 European countries aged 50 or older, and cover a period of 9 years (from wave 1 in 2004 to wave 5 in 2013).

Main outcome measure: casp12 scores of European grandparents, assessed four times over 9 years (Share waves 1,2,4,5)

Results: Italian and Spanish grandmothers present significant worse paths in the change of CASP12 score over the time with respect to women that are not grandmothers. Males present more nuanced situation between countries, but bigger variation between grandfathers and not.

Conclusions: European countries show very different paths in the longitudinal change of quality of life for elderly, and grandparents especially. The Italian grandmothers suffer more than others a negative effect on the longitudinal change of the quality of life, over the period 2004-2013. Further studies, focused on differences between European countries over time, are necessary to better understand the controversial relationship between quality of life and the new role of European grandparent.

Introduction

Over the past fifty years, western families experimented radical changes in their structures due to social and demographic factors that led to the strengthening of the so-called "vertical" kinship. With the decreasing of fertility rates and at the same time the stagnation of an unprecedented low mortality rate, the so-called “horizontal” kinship (uncles,/aunts, nephews/nieces) is vanishing (*Laslett, 1993*) instead of an increasing “vertical” kinship (granparents/grandchild). This process is also called as the “decline of kinship” (*Solinas, 2004*)

Grandparents have thus acquired a more central position in family relationships, especially with respect to the care of grandchildren, but also as financial support. Especially in Mediterranean countries with weak welfare-states, grandparents are becoming a family “services providers” (*Chamoix e Occhiai, 2009*). To this day, the effect of this unprecedented grandparents’ family centrality on their quality of life is not clear in literature, nor are clear the effects of mediating variables such as the facilities provided by the welfare state, the cultural background, the socioeconomic status, and finally, the severe economic crisis began in 2008.

There is empirical evidence that salient roles have greater impact on the mental health of individuals than less central ones. Drew and Silverstein (2004) investigated psychological well-being of family members, intergenerational role-identities and investment in family roles. They found evidence that both role hierarchy and finding meaning in role enactment were linked to positive well-being. Martire et al. (2000) found that greater centrality of four major social roles such as mother, wife, employee and parent, was associated with better psychological well-being. Krause (1994) found that stressors in salient roles affect well-being among older people much more than do stressors associated with subjectively less important roles.

On the other hand, this new centrality of the role of grandparents inside the “vertical” families could lead to a decrease in the levels of well-being and quality of life, due to the stress of new responsibilities, as reveals both some cross-sectional studies (*Jendrek, 1993; Minkler e Fuller-Thompson, 2005*) and longitudinal studies (*Blustein et al., 2004; Minkler et. Al, 1997*).

A number of studies report a significant association between frequency of contact with grandchildren and life satisfaction among grandparents as well as positive assessment of the grandparent role (*Peterson 1999*). Reitzes and Mutran (2004) found that the centrality of the grandparent role was positively related to frequency of contact for grandfathers but not for grandmothers. Nevertheless it was equally positively related to grandparents’ role satisfaction for both genders.

An additional study focuses on the population of grandparents that provide full time care for their grandchildren without the presence of the parents (*Hank and Buber 2009*). The study was based on the findings from the 2004 Survey of Health, Aging and Retirement in Europe (SHARE) and investigated cross-national variations of grandparents’ child care in ten European countries. In addition to questions about frequency of provided child care, the respondents were asked how much they agree with a statement that it is a grandparent’s duty to help grandchildren’s parents in looking after young grandchildren. The findings of the study reveal high compliance with the statement in Mediterranean countries as well as in Germany and France, and much weaker support in Denmark and Netherlands, even among grandparents who frequently cared for their grandchildren.

In contrast, the probability of providing some kind of child care was highest among Danish, Dutch, French and Swedish grandparents and lowest among the Mediterranean grandparents. Yet, the frequency of child care among grandparents who supplied this form of family support was high among Mediterranean countries and low among grandparents from Nordic countries and France. The investigators present a few explanations for this phenomenon. First is the North/South divide in the interpretation of what it means to look after young grandchildren. Second is the high prevalence of multigenerational co-residence as a norm of transferring resources between generations in Southern Europe, as opposed to Northern Europe where family support rarely involves co-residence and, thus, is less intense. Finally, variations in public child care provision and in maternal labor force participation between the North and the South are also seen as partly responsible for the differences in grandparents’ support.

Healthy aging has become of the utmost importance in Europe, as a result of the aging processes. This process implicates new demographic and social challenges, both for the labor market, and for the welfare state. However, WHO define health no longer as merely the absence of disease, but as a global welfare (bio-psycho-social) of the individual, that is, the quality of life related to health (*WHO, 2008*). In spite of this, many studies focused almost exclusively on the “classic” health condition of grandparents, without taking into account the broader concept of quality of life. Therefore, the aim of this study is to provide a first overview of the change of grandparents’ quality of life over the last years in a longitudinal perspective, especially observing differences between the paths of European countries (that is between cultural and social backgrounds).

Data and methods

The analysis is based on the Survey of Health, Ageing and Retirement in Europe (SHARE). SHARE is a cross-national panel survey collecting micro-data on health, socioeconomic status, social and family networks of the non-institutionalized population aged 50 and older (*Boersch-Supan and Juerges, 2005*). Five waves were implemented so far: data were collected for the first time in 2004 in 12 countries and counts now approximately 110.000 individuals and 20 European countries. The target population consist of all sample members who were interviewed in any previous wave of SHARE and their current partners or spouses. Eligible respondents who already participated are traced and re-interviewed. It was done for wave 2 (2006) , 4 (2010) and 5 (2013). Conversely, wave 3 was built using different methods and objectives and is not used in the present study.

One of the innovations of SHARE is the inclusion of a measure of quality of life in old age. SHARE approach assumes that quality of life should be assessed as the degree to which human needs are satisfied. In old age control, autonomy, self-realization and pleasure are particularly relevant (*Hyde at al. 2005*). The operationalization of these concepts was performed in a measurement approach termed CASP (C=control, A=Autonomy, S= self-realization, P=pleasure) (*Hyde at al. 2005*).

The CASP-12 score measures quality of life and is based on four subscales on control, autonomy, pleasure and self-realization. The CASP score is the sum of these four subscales and ranges from 12 to 48, were higher scores indicating better quality of life.

Linear mixed models were used to estimate change in CASP-12 scores over the period 2004-2013. This method uses all available data over the SHARE panel, takes into account the fact that repeated measures on the same individual are correlated with each other, and can handle missing data. In these analysis both the intercept and the slope were fitted as random effects, allowing individuals to have different score in CASP-12 at baseline and different changes over time.

Because only 10 countries of the 20 included in SHARE, participated in all the 4 waves used in this study, multilevel longitudinal model will be estimated only on data from the following countries: Austria, Germany, Sweden, Netherlands, Spain, Italy, France, Denmark and Switzerland. Sample population counts, then, approximately 45.000 grandparents and 42.000 not-grandparent.

Results

In table 1 and 2 are reported the values of the coefficients for some explanatory variables, estimated by a multilevel longitudinal model with the CASP12 score as outcome.

With respect to only longitudinal “time” effect on change in CASP12 scores, regardless countries and age, there is no significant results, except a positive effect (0.5, $p=0.0006$) for male grandparents. Contrariwise, age is always significant and negative. It seems that there is not a clear “economic crisis” effect on the quality of life of old Europeans, at least, not for all, regardless other socio-economic variables.

Taking as country reference Italy, the mean effect of country on the longitudinal change in quality of life is always significant for grandmothers (Always $p<0.0000$), with Central-Nordic Countries in much better position than South and Mediterranean countries. Italy presents the worst score, followed by Belgium (an exception), France and Spain. On the other hand, Netherlands, Denmark and Sweden are at top positions.

The situation is more blended for women are not grandmothers. Mean effect of countries is not always significant (France $p=0.3$) and the differences between countries are lower than for grandmothers.

Outcome: CASP12 Score Explanatory Variables	Females											
	Grandparent						Not Grandparent					
	Value	Std.Error	DF	t-value	p-value		Value	Std.Error	DF	t-value	p-value	
Intercept	32,76725	0,5496738	22506	59,61218	0		33,45901	0,6518144	14307	51,33211	0	
Wave (only effect of time, regardless countries)	0,20532	0,128432	17027	1,59864	0,1099		0,09685	0,146086	8019	0,66298	0,5074	
Age (only effect of age, regardless countries)	-0,054	0,0072469	17027	-7,45204	0		-0,06536	0,0090409	8019	-7,22907	0	
Mean Effect of Country, Reference: Italy												
Austria	3,18362	0,3262239	22506	9,75901	0		2,55201	0,4188276	14307	6,09323	0	
Germany	2,97745	0,3138226	22506	9,48768	0		2,61257	0,3690398	14307	7,07937	0	
Sweden	3,81002	0,2908699	22506	13,0987	0		3,11401	0,3926922	14307	7,92991	0	
Netherlands	4,39768	0,3021452	22506	14,55485	0		3,61134	0,3662474	14307	9,86038	0	
Spain	2,29082	0,309349	22506	7,40529	0		2,26818	0,3826093	14307	5,92819	0	
France	1,52929	0,3074849	22506	4,97354	0		0,40422	0,390639	14307	1,03478	0,3008	
Denmark	4,56103	0,3115268	22506	14,64089	0		2,94272	0,4115781	14307	7,14984	0	
Switzerland	4,98988	0,3907225	22506	12,77091	0		3,42469	0,4136263	14307	8,27967	0	
Belgium	1,93153	0,284354	22506	6,7927	0		1,13691	0,3613467	14307	3,14631	0,0017	
Mean Effect of Educational Level, Reference: None												
Primary	1,623	0,1504841	22506	10,78518	0		1,73346	0,2555616	14307	6,78293	0	
Lower secondary	2,03553	0,1612884	22506	12,62046	0		2,19887	0,2551387	14307	8,61831	0	
Upper secondary	2,40269	0,1614374	22506	14,88313	0		2,83186	0,2526476	14307	11,20872	0	
Post-Secondary	2,521	0,2630354	22506	9,58427	0		3,02845	0,3215864	14307	9,41724	0	
Tertiary First	2,65428	0,1707284	22506	15,54681	0		3,0133	0,2569136	14307	11,72883	0	
Tertiary Second	2,91041	0,5268513	22506	5,2416	0		3,40132	0,4652506	14307	7,31072	0	
Still in school	0,58161	1,776629	22506	0,32737	0,7434		-2,2176	2,404255	14307	-0,92237	0,3564	
Other	2,155	0,4531354	22506	4,75576	0		3,18185	0,5931194	14307	5,3646	0	
Mean Effect of Household ability to make ends meet, Reference: with great difficulty												
with some difficulty	2,07605	0,1016875	17027	20,41599	0		1,91854	0,1378616	8019	13,91642	0	
fairly easy	4,22177	0,1040786	17027	40,56333	0		4,10296	0,1385708	8019	29,60913	0	
easily	5,48672	0,1085262	17027	50,55659	0		5,68586	0,1434303	8019	39,64194	0	
Number of Chronic Diseases	-0,6014	0,0236646	17027	-25,41346	0		-0,67103	0,0366147	8019	-18,32665	0	
Age-Cohort effect (Interaction Age*Wave)	-0,00413	0,0017398	17027	-2,37159	0,0177		-0,00079	0,002194	8019	-0,35935	0,7193	
Longitudinal Interactions between Time(Wave) and Country, Reference: Italy												
Austria	0,36821	0,0776159	17027	4,74404	0		0,26515	0,1019034	8019	2,60195	0,0093	
Germany	0,25977	0,0739013	17027	3,51503	0,0004		0,0902	0,088674	8019	1,01722	0,3091	
Sweden	0,22329	0,0691591	17027	3,22863	0,0012		-0,05119	0,098154	8019	-0,52153	0,602	
Netherlands	0,31564	0,0722646	17027	4,36779	0		0,14519	0,091256	8019	1,59101	0,1116	
Spain	-0,04541	0,072705	17027	-0,6246	0,5322		-0,00525	0,092067	8019	-0,05705	0,9545	
France	0,48224	0,0734095	17027	6,56916	0		0,48	0,0976677	8019	4,91457	0	
Denmark	0,32157	0,0734646	17027	4,37718	0		0,2376	0,1001955	8019	2,37139	0,0177	
Switzerland	0,13583	0,092514	17027	1,46818	0,1421		0,13335	0,10007	8019	1,33255	0,1827	
Belgium	0,20764	0,0677961	17027	3,06268	0,0022		0,06253	0,088428	8019	0,70708	0,4795	

Table 1. CASP12 Scores over time: Coefficients from Longitudinal Multilevel Model for Females, Grandparents vs Not Grandparents.

Outcome: CASP12 Score Explanatory Variables	Males											
	Grandparent						Not Grandparent					
	Value	Std.Error	DF	t-value	p-value		Value	Std.Error	DF	t-value	p-value	
Intercept	33,43485	0,653621	17678	51,15328	0		32,82202	0,7792118	12946	42,12208	0	
Wave (only effect of time, regardless countries)	0,53208	0,154004	12750	3,45494	0,0006		0,2804	0,179766	7197	1,55983	0,1188	
Age (only effect of age, regardless countries)	-0,04175	0,008407	12750	-4,96564	0		-0,02735	0,0110868	7197	-2,46703	0,0136	
Mean Effect of Country, Reference: Italy												
Austria	2,51791	0,374161	17678	6,72948	0		1,27035	0,4459969	12946	2,84835	0,0044	
Germany	2,39551	0,335695	17678	7,13598	0		1,24999	0,3742666	12946	3,33985	0,0008	
Sweden	2,85399	0,310211	17678	9,20014	0		1,56908	0,397329	12946	3,94908	0,0001	
Netherlands	3,35801	0,323973	17678	10,36511	0		1,88628	0,3772766	12946	4,99973	0	
Spain	2,65775	0,343776	17678	7,73106	0		2,35456	0,400186	12946	5,88366	0	
France	1,08765	0,341432	17678	3,18556	0,0014		-0,36302	0,402401	12946	-0,90214	0,367	
Denmark	3,73151	0,340916	17678	10,94555	0		1,55979	0,4099582	12946	3,80476	0,0001	
Switzerland	4,13475	0,419192	17678	9,86362	0		2,65767	0,4354039	12946	6,10393	0	
Belgium	1,72978	0,305665	17678	5,65906	0		0,10765	0,366876	12946	0,29341	0,7692	
Mean Effect of Educational Level, Reference: None												
Primary	1,25499	0,182579	17678	6,87369	0		0,91731	0,2564835	12946	3,5765	0,0003	
Lower secondary	1,56518	0,194982	17678	8,02734	0		1,58036	0,254809	12946	6,20212	0	
Upper secondary	1,84662	0,190218	17678	9,70792	0		1,8785	0,2484341	12946	7,56138	0	
Post-Secondary	2,08671	0,272254	17678	7,66459	0		2,27213	0,3223203	12946	7,0493	0	
Tertiary First	2,24513	0,195113	17678	11,50685	0		2,32248	0,2524508	12946	9,19973	0	
Tertiary Second	2,22368	0,41806	17678	5,31903	0		2,62231	0,4108516	12946	6,38262	0	
Still in school	-0,49954	3,196786	17678	-0,15626	0,8758		-3,05467	2,935065	12946	-1,04075	0,298	
Other	1,82366	0,51092	17678	3,56936	0,0004		1,12548	0,620097	12946	1,81501	0,0695	
Mean Effect of Household ability to make ends meet, Reference: with great difficulty												
with some difficulty	2,01985	0,124381	12750	16,23927	0		2,46628	0,1490823	7197	16,54307	0	
fairly easy	4,07785	0,125939	12750	32,37948	0		4,75272	0,1486548	7197	31,97154	0	
easily	5,40041	0,129754	12750	41,62053	0		6,27518	0,1527313	7197	41,08638	0	
Number of Chronic Diseases	-0,63256	0,024969	12750	-25,3341	0		-0,70834	0,035247	7197	-20,09657	0	
Age-Cohort effect (Interaction Age*Wave)	-0,00783	0,002045	12750	-3,83019	0,0001		-0,00517	0,002704	7197	-1,91026	0,0561	
Longitudinal Interactions between Time(Wave) and Country, Reference: Italy												
Austria	0,43621	0,089144	12750	4,89328	0		0,33775	0,1096531	7197	3,08015	0,0021	
Germany	0,21252	0,079454	12750	2,67473	0,0075		0,20292	0,0907269	7197	2,23656	0,0253	
Sweden	0,1334	0,074594	12750	1,7884	0,0737		0,16074	0,100954	7197	1,59222	0,1114	
Netherlands	0,33373	0,0788	12750	4,2351	0		0,32364	0,0958501	7197	3,37649	0,0007	
Spain	-0,08721	0,080997	12750	-1,07669	0,2816		-0,08179	0,096258	7197	-0,84965	0,3955	
France	0,45903	0,082223	12750	5,58278	0		0,62342	0,1023019	7197	6,09394	0	
Denmark	0,21204	0,080492	12750	2,6343	0,0084		0,3388	0,1012213	7197	3,3471	0,0008	
Switzerland	0,12279	0,09994	12750	1,22861	0,2192		0,14958	0,106569	7197	1,40363	0,1605	
Belgium	0,10499	0,073661	12750	1,42532	0,1541		0,19039	0,0912436	7197	2,08666	0,037	

Table 2. CASP12 Scores over time: Coefficients from Longitudinal Multilevel Model for Males, Grandparents vs Not Grandparents.

For example, the difference between the mean effect of Denmark and Italy is 4.6 for grandmothers but is 2.9 for women are not grandmothers.

Same story for the longitudinal effect of the interaction between time and country. Slopes differences in change of CASP12 scores, respect to Italy, are almost always significant for grandmothers, except for Spain (a Mediterranean country such as Italy) and Switzerland. Contrariwise, women that are not grandmothers presents differences in slope that are not significant (except for Austria, France and Denmark)

Socioeconomic control variables are always significant and present expected values of the coefficients.

The situation for male is different. The longitudinal effect of the interactions between time and country are almost always not significant, both for grandparents and for men that are not. The mean effect of country on quality of life presents less distances between countries, especially from Italy that is the reference. For example, the mean effect of country of Denmark with respect to Italy is 4.6 for grandmothers but is 3.7 for grandfathers. On the other hand, the differences between the mean effect of country on grandparent quality of life and on men are not, is bigger than for women. For example, the difference between the mean effect of Denmark and Italy is 3.7 for grandfathers but is 1.5 for men are not grandfathers. In effect, the differences between the mean effects of the countries on men that are not grandfathers, are very low with respect to each other group.

Conclusion

European countries show very different paths in the longitudinal change of quality of life for elderly, and grandparents especially. This study has offered just an overview on how these patterns could be. The Italian and Spanish grandmothers suffer more than others a negative effect on the longitudinal change of the quality of life, over the period 2004-2013, while the North European seem to face much better the change.

Further studies, focused on differences between European countries over time, are necessary to better understand the controversial relationship between quality of life and the new role of European grandparent. According to the literature, the key of the story could be the different approach to grandparenting that Mediterranean countries have with respect to the others.

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