

# **FAMILY NETWORK AND WELLBEING OF PEOPLE AGED 50+ IN SELECTED EUROPEAN COUNTRIES**

## **Extended abstract**

**Anita Abramowska-Kmon<sup>1</sup>, Sylwia Timoszuk<sup>2</sup>**

*<sup>1</sup> Demography Unit, Institute of Statistics and Demography*

*<sup>2</sup> Institute of Social Economy*

*Warsaw School of Economics*

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## **Introduction**

Due to the observed changes in the population age structure and its socio-economic consequences over the last decades, we observe significant increase of scientific literature devoted to the population aged 50 years and more. The attention paid to this subpopulation is mostly related to its participation in the labour market, care giving to the elderly and other people in need as well as to the increase in demand for products and services connected to older people's needs. However, since 70. and 80. researchers have started to pay more attention to quality of life of this group of people (Susułowska, 1989). The investigation of wellbeing of people aged 50+ is a difficult task, as this population is highly heterogeneous, and many socio-demographic and economic characteristics may impact it<sup>1</sup>. Particularly, people aged 50+ may experience many demographic events (such as leaving parental home by adult

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<sup>1</sup> Interestingly, the inter-differences among adults and older people have been noticed by scientists already in the beginning of the XX century. In 1922 Hall pointed out that differences among adults and older people are bigger than between children, probably as the result of longer life (and therefore having more life experiences) (Hall, 1922 quoted after Susułowska, 1989, s. 11).

children, becoming widowed), deterioration of health status, retirement, job loss and as a result drop in income or becoming of a main carer of a dependent relative. All of these events may influence life satisfaction significantly.

One of the most important factors of wellbeing in old age is family and social network of an individual. Family situation, together with living arrangements, may differentiate life satisfaction of individuals. People living with partner are more satisfied with life than those living without a partner (even if they live in multi-person households) (Blanchflower & Oswald 2004; Böhnke & Kohler 2010; Chłoń-Domińczak et al. 2014; Easterlin 2003; Dear et al. 2002; Waite 2009; Stuart-Hamilton 2006). A partner is a source of emotional support, which significantly reduces the level of stress in daily life (Verbakel 2012). Divorce, separation or widowhood lower life satisfaction, even when controlling for worsening of the financial situation after the event. Similarly, people who can rely on support (emotional, instrumental) from family members or friends declare higher wellbeing than those without possibility of receiving any help (Heukamp & Ariño 2011; Lim & Putnam 2010; Böhnke & Kohler 2010; Uhlenberg & Mueller 2003). Also, Litwin & Shiovitz-Ezra (2006) indicate that wellbeing of the elderly is rather an effect of that who they spend time with and what they feel towards those people than what the elderly do. Therefore, often care of grandchildren can be viewed as rewarding and can be a source of better/higher wellbeing (Uhlenberg & Mueller 2003).

The main aim of the presentation is the investigation whether family situation of people aged 50 years and more has impact on their wellbeing in selected European countries. Moreover, we would like to verify whether the type of the country (weak and strong family ties) differentiates the wellbeing of its inhabitants aged 50+. In order to carry out the analyses of wellbeing of people aged 50 years and more in selected European countries the 4<sup>th</sup> wave of the Survey of Health, Ageing and Retirement in Europe (SHARE) was used. The variable of interest describing the wellbeing was created on the basis of the short version of the CASP questionnaire (CASP-12) used in the SHARE questionnaire.

## **Theoretical background**

Several research reported that being married in older age increases life satisfaction (Angelini et al. 2012; Tomaszewski 2013) and subjective wellbeing (George 2010), while at the

same time it decreases depression scores (Ploubidis & Grundy 2009; Hank & Wagner 2013). In comparison to married, divorced and single people tend to have lower happiness. Widowhood was as well associated with lower: happiness (Yang 2008; Tomaszewski 2013) and life satisfaction, particularly for men (Berg et al. 2009; Chipperfield & Havens 2001; Berg et al. 2006). Ory & Huijts (2015) reported also lower wellbeing among older widowed women (Ory & Huijts 2015). However, presence of a spouse in one's network may not necessarily be what is the most important for wellbeing in older life. Carr and colleagues (2014) analyzed the data for older married couples in the United States. They found substantial in magnitude association between marital quality and LS as well as momentary happiness in later life (Carr, V. A. Freedman, et al. 2014). Similar finding was reported in the study (based on data from two first waves of SHARE) of Hank and Wagner (2013): the mere presence of a spouse is not necessarily the protection against depression in later life. What is important is rather the quality of the relationship (Hank & Wagner 2013).

When life satisfaction was considered, more contact with a child was associated with higher life satisfaction, independent of age group (Litwin & Kimberly J Stoeckel 2013). Gierveld and colleagues (2012) found that the number of children serve as protection against loneliness in older age in the West European countries, regardless of living arrangements. The same protection role applies to East European countries, but only for older adults who live with their partner and adult children (Gierveld et al. 2012). In contrast, in the study of older people based on the British Household Panel Survey, Read and Grundy (2011) reported that having children per se does not raise the quality of life in old age and that childlessness does not necessarily lead to a poorer or better quality of life (Read & Grundy 2011). The findings of no association between children and wellbeing was also reported in several other studies (see the literature review in George 2010). In summary, studies of relation between children and wellbeing in older age present mixed findings.

Even more complex in interpretation and comparison are findings of relation between grandchildren and wellbeing in older life. While some empirical research suggest that being a grandparent increases one's quality of life, other report either opposite findings or the lack of the association between the two variables. These findings are sometimes reported even within one study. Litwin & Stoeckel (2013b) found that grandchildren increase life satisfaction of older Europeans aged 60–79, but decrease life satisfaction of those aged 80+. In study based

on SHARE, Muller & Litwin (2011) analyzed the association between grandparent role<sup>2</sup> and depression. They found positive (although weak) relation. Based on data from first and second wave of SHARE, Neuberger and Haberkern (2014) analyzed the relation between grandparenting and the CASP-12 index. They verified whether the possible link depends on the cultural context of the country measured by grandparent obligations (i.e. what are the expectations toward grandparent role). They found that the relation between providing grandchild care and quality of life is framed by social expectations about the grandparental role and obligations. Caring for a grandchild influences one's wellbeing only in countries with high grandparents obligations. If that is the case, fulfilling the grandparent obligations increases wellbeing, while the opposite has a negative effect on one's quality of life (Neuberger & Haberkern 2014). It seems that both state arrangements as well as cultural context play important role in analysis of relation between grandparenting and one's wellbeing (Igel & Szydlik 2011; Hank & Buber 2009).

Empirical research of association between wellbeing in older age and siblings or parents are far less common than research of relation between quality of life and partnership status, children and grandchildren. To some extent sibling and parent role was investigated by Litwin and Stoeckel (2013a). They distinguished several family networks. One of them was "other family" network which consisted mostly of family members other than spouse and children. Therefore, the network included, among the others family members, parents and siblings. This network type was positively associated with wellbeing in group of Europeans aged 65+ (fourth wave of SHARE) (Litwin & Kimberly J. Stoeckel 2013). In other paper, the research review on widowhood on later life, Martin-Matthews (2013) noted that sibling relations play a unique role in the support network of widowed person. The reason behind it is that ties with siblings have relatively longer duration and are more egalitarian of nature than other family relations (Martin-Matthews, 2011). In the longitudinal study of a single cohort of eighty-year-old persons living in Lund (Sweden) satisfaction with sibling contact has been found to correlate positively with level of life satisfaction (McCamish-Svensson, Samuelsson, Hagberg, Svensson, & Dehlin, 1999 cited in Berg et al. 2009)).

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<sup>2</sup> Variable "grandparent role" was created from three separate variable: the frequency of contact with grandchildren, beliefs and attitudes about grandparenting and grandparent-focused role occupancy (Muller & Litwin 2011).

As may be concluded from the literature review, interplay between life satisfaction and various family ties is a complex research. Nevertheless, over the last three decades several theories emerged that aim at explaining the possible association between quality of life and social relations. In our approach we incorporate two of them: the Convoy Model of Social Relations and Socioemotional Selectivity theory.

The convoy model offers a global theoretical framework for analyzing the process in which social relations influence wellbeing. The model posits that every individual is surrounded by the group of people – family, friends, etc. – who form the convoy of focal person. They are organized in layers which are presented as a set of three circles that surround the individual (Antonucci & Akiyama 1987; Antonucci et al. 2009). In addition, the model distinguishes types of social network (such as family, friends, neighbors). It also underlines the importance of both personal (e.g. person's age, gender) and situational characteristics (e.g. culture, government) that serve as the context for one's convoy and influence person's quality of life. (Antonucci et al. 2014; Antonucci & Ajrouch 2007; Antonucci et al. 2009). The model can be used as a multidimensional perspective in understanding the role and the nature of social relations in the quality of life of older people (Antonucci & Ajrouch 2007). While recognizing that social relationships contribute to person's psychological wellbeing (e.g. by providing love, reassurance of worth), it highlights that these relations may be both of positive and negative nature. Also, the model underlines the role of the family in the quality of life in late life. The reason for that is that the relation with family members is both the longest relationship and organizational membership to which most older people belong and because it fundamentally influences the history, past and current experiences, of each individual in late life (Antonucci & Ajrouch 2007). Antonucci and Ajrouch (2007) underline that large social network does not guarantee either happiness or a buffer from stress. The reason behind that is that the mere existence of the relationship is less important than its quality (Antonucci & Ajrouch 2007; Antonucci et al. 2014). This notion was confirmed by the number of research described earlier in the paper (Carr, V. a Freedman, et al. 2014; Hank & Wagner 2013; Birditt & Antonucci 2007; Netuveli et al. 2006; Berg et al. 2006).

One of the theories that offers an explanation of the relation between quantity and quality of social relations in older age is the theory of socioemotional selectivity (George 2010). It suggests that social contacts are motivated by a variety of goals and their importance change with age. The regulation of emotion becomes increasingly salient in old age due to

one's perception of time – the more future is perceived as limited, the bigger importance is given to emotional states. Consequently, an individual may reduce the size of social network with ageing while focusing on emotionally rewarding relations (Carstensen 1995).

In studies of wellbeing in older life it is also important to account for country context. Country differences in wellbeing of older people were reported by the number of researchers (Litwin 2009; Adena & Myck 2013; Ploubidis & Grundy 2009; Angelini et al. 2012; Litwin & Kimberly J. Stoeckel 2013; Muller & Litwin 2011; Angelini et al. 2014). In general the results show a division between North-Western and South-Central Europe with respect to life satisfaction of people. For instance, the inhabitants of Sweden, the Netherlands, Denmark or Switzerland tend to have higher wellbeing than persons living in Italy, Spain, the Czech Republic. It is worth noting that Ory & Huijts (2015) found differences even on regional level of wellbeing among older widows in Europe.

## Data and methods

*DATA.* In our analyses we used the 4th wave of the Survey of Health, Ageing and Retirement in Europe (SHARE). Data comes from 16 countries: Austria, Germany, Sweden, the Netherlands, Spain, Italy, France, Denmark, Switzerland, Belgium, the Czech Republic, Poland, Hungary, Portugal, Slovenia, Estonia.

*DEPENDENT VARIABLE.* The CASP-12 index (Control, Autonomy, Self-realization, Pleasure), which is a short version of the original CASP-19 questionnaire (von dem Knesebeck et al. 2005).

*INDEPENDENT VARIABLES.* The basic socio-demographic variables (such as sex, age, health status<sup>3</sup>, education level<sup>4</sup>) and economic variables (subjective financial situation<sup>5</sup>) and employment status were incorporated into the model. Moreover, due to the aim of the

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<sup>3</sup> Expressed by disability.

<sup>4</sup> Three categories of educational level were created: low level corresponding to the following values of the ISCED-97 codes 0, 1 and 2, mid level– for the ISCED-97 code 3, and high level related to the 4, 5, and 6 codes of the ISCED-97 scale.

<sup>5</sup> In the SHARE the information on a household income was gathered. However, due to the fact that this variable is characterized by high response rate we decided to use a variable describing a subjective financial situation, which was based on the following question: “Thinking of your household's total monthly income, would you say that your household is able to make ends meet...” with possible answers: 1. 1. With great difficulty, 2. With some difficulty, 3. Fairly easily, 4. Easily. To sum up, the higher value of this variable, the better financial situation of respondent's household.

analysis a set of binary variables describing family situation was created. In particular there were: partnership status<sup>6</sup>, having at least one parent alive, having at least one brother or sister alive, having children, having grandchildren. Also, a variable describing a country was incorporated into the model. The categorical variables were coded as binary ones. Only two variables (age and subjective financial situation) were included into the model as string variables / string ones.

*METHOD.* Due to the fact that the created dependent variable may be treated as continuous in order to perform our analysis we employed the linear regression model.

## **Main results**

The obtained results are mostly in line with the finding presented in the literature on determinants of broadly defined quality of life (wellbeing, life satisfaction, happiness and depression). The received results show that women aged 50+ have significantly lower wellbeing than men do. Also, with age the level of wellbeing decreases, which is in contradiction to the previous findings saying that after age of 40 wellbeing increases (Blanchflower & Oswald 2008; Blanchflower & Oswald 2004; Böhnke & Kohler 2010; Clark 2007; Gerdtham & Johannesson 2001; Helliwell 2003). People with mid and high level of education (in comparison to those with low categories of education) had significantly better/higher wellbeing. As it could be expected people with limitation in activities reported notably lower quality of life (wellbeing) than those without disability. The better subjective financial situation contributes to the higher wellbeing.

As for the relationship between family situation and wellbeing, the estimates were significant only for three variables: 1) People living with a partner/ a spouse in the same household were more satisfied with life than those living without a partner/ a spouse; 2) Having parents alive lowered the wellbeings; 3) The wellbeing of persons with grandchildren was significantly higher than people without grandchildren.

With regard to differences between countries in wellbeing the estimates were not significant in only three cases (Sweden, Hungary and Slovenia). The estimates for the following countries: Austria, Germany, the Netherlands, Denmark and Switzerland indicated a

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<sup>6</sup> Living or not with a partner/ a spouse in the same household.

significantly higher wellbeing of people aged 50+ than in France. On the other hand, in Spain, Italy, Belgium, the Czech Republic, Poland, Portugal and in Estonia life satisfaction was significantly lower than in France. In other words, our results confirm the previous findings showing North-West and South-East division in wellbeing across European continent.

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