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Intergenerational proximity, residential relocations and the well-being of older people

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Chapter

Introduction

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1.1 Motivation for this study: population aging and intergenerational support exchange

Today, many societies are confronted with population ageing. The demand for personal and practical support for the older population will increase in the near future as a result of an increasing share of elderly, the feminization of old age and more variation in family structures (Grundy 1992, Yang et al. 2003). Decreasing fertility, changes in family formation processes, globalisation and urbanisation will make older persons more likely to live without a partner, to have few (grand)children, and possibly to live at a greater geographic distance from them. A combination of these processes makes it less likely for older persons to have a partner or children around who can assist them in various needs that go together with growing older. On the other hand, increased longevity and improved health conditions allow the lives of generations to overlap for a longer period of time which can lead to more intense relationships between (grand)parents and (grand)children, which may in turn facilitate the intergenerational exchange of informal support (Geurts et al. 2009).

Current economic global developments increasingly force Western governments to cut costs on various public expenditures. As a consequence these governments are increasingly moving towards policies that encourage “ageing in place” in order to postpone and decrease the use of expensive subsidized professional residential care facilities (Bonsang 2009, Davies and James 2011). As these policies assume that support received from the local social environment serves the needs of older people best, parts of their former care responsibilities are shifted to informal social networks, thereby putting more pressure on individual responsibilities and family and social networks. Although family structures have been changing, research shows that a substantial part of the exchange of goods and services occurs within the family (Komter and Vollebergh 2002) and that with the exception of a partner, an adult child is more likely than any other potential caregiver to provide personal and practical support to older persons (Komter and Vollebergh 2002, Spitze and Logan 1990), as the natural bond between parents and children is generally accompanied by feelings of responsibility and affection (Bengtson and Roberts 1991, Umberson 1992). As a consequence, researchers and policymakers often consider adult children as important (potential) providers of support to the older generation.

Yet, specific factors contribute to explaining whether adult children will provide support to their older parents or not; individual characteristics such as gender, age, marital, parental and occupational status determine daily responsibilities. In addition, travelling time to parents should allow adult children to provide support within the amount of time they have available, particularly when support is required on a more frequent basis. And although governments put more pressure on intergenerational support exchange, the well-known strong negative relation between geographic proximity and support exchange is not always considered.

Geographic proximity facilitates face-to-face interaction, the exchange of instrumental support and emotional intimacy, and increases the opportunities for sharing experiences (Lawton et al. 1994) and more frequent contact (Bordone 2009, Greenwell and Bengtson 1997, Hank 2007). Support exchange across generations is therefore very sensitive to geographic distance and geographic distance is the strongest predictor of support exchange among family members (Lawton et al. 1994, Van Tilburg et al. 1995, Greenwell and Bengtson 1997, Rogerson et al. 1997, Hank 2007, Bordone 2009, Hank and Buber 2009, Mulder and Van der Meer 2009).

In a cross-national European study, Suanet et al. (2012) found that informal care is more likely when children live within 25 kilometres distance from their parents. For the Netherlands, Knijn and Liefbroer (2006) show that a distance of over five, rather than under five kilometres makes a great difference for support exchange, whereas distances over 20 kilometres are associated with less support. In reference to the challenges that go along with population ageing, Pettersson and Malmberg (2009, p 343) mention that “living close to family members could be a way to facilitate intergenerational contact, support and care at times when the financing of public care institutions may be at risk”.

These insights imply that when governments expect adult children to provide (more) support to their older parents, they should have understanding of, and insight into the geographic characteristics of (potential) informal support networks. In this study the geographic characteristics of adult children as providers of support are assessed by exploring and predicting intergenerational proximity, by investigating the contribution of intergenerational proximity to well-being at older age, and by obtaining insight into its contribution to residential relocations of older people. The central question that is addressed in this research is:

What is the role of geographic proximity of children in older people’s well-being and residential relocation behaviour?

1.2 Intergenerational proximity: regional variation and contribution to well-being at older ages

The geographical distribution of family members is the outcome of complex relocation decisions and residential choices of individuals throughout their lives. Past residential mobility of both parents and their children shapes the geographic distance between elderly parents and their adult children at a certain moment in time (Mulder and Kalmijn 2006, Mulder and Cooke 2009, Chan and Ermisch 2015). This shows that intergenerational proximity is a dynamic phenomenon associated with various life course careers of both generations. Chapter two provides a description of intergenerational distances at different parental ages for the Dutch context. The following research question is answered in this chapter:

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1. What does intergenerational proximity between parents and their adult children look like in the Netherlands?

Besides providing an explorative overview of mean distances between parents and children living in the Netherlands, the descriptive analyses in this chapter contribute to existing insights (Dykstra and Knipscheer 1995, Malmberg and Pettersson 2007, Michielin and Mulder 2007) by including the regional variability in intergenerational proximity. This chapter considers the role of the regional context in the provision of opportunities for fulfilling needs in the education, work, housing and household careers, and in providing a cultural background that determines whether family solidarity and physical proximity to family are regarded as less or more important. In the investigation, we acknowledge that intergenerational proximity is not only dependent on individual background characteristics, but has an important regional component as well. Insight into regional disparities in intergenerational proximity is of importance in order to gain a more complete insight into (future) informal support networks in different regions. Chapter two addressed the following research question:

2. To what extent can regional characteristics explain the regional variation in intergenerational proximity in the Netherlands?

Two dimensions of regional culture (protestant conservatism and individualism) are considered in order to approximate the regional characteristics of attitudes, beliefs, values and practices that determine whether family solidarity and physical proximity to family are regarded as less or more important. Degree of urbanization reflects the provision of opportunities for fulfilling needs in the education, work, housing and household careers.

Besides the fact that intergenerational support exchange is very sensitive to geographic distance, feelings of safety, togetherness and belonging (Breheny and Stephens 2009, Dunér and Nordström 2007, Hjälms 2012, Kohli et al. 2005, Künemund and Rein 1999) are also associated with geographic proximity. As a consequence, one would think that individual well-being profits from intergenerational proximity, which inspires to investigate how and to what extent living close to adult children actually contributes to the well-being of older people. Chapter three is aimed to contribute to the discussion of how adult children affect the well-being of their older parents and addressed the following research question:

3. To what extent does the well-being of older residents of the Netherlands benefit from having adult children and living in close proximity to them?

By differentiating between having children at all and the geographic proximity of adult children, the chapter aims to contribute to a better understanding of the inconsistent

findings of previous studies on the relation between having children and well-being at older ages (Hansen et al. 2009, Margolis and Myrskylä 2011, Koropeckyj-Cox 1998, McLanahan and Adams 1987, Zhang and Hayward 2001). In the chapter we argue that the presence of children may partly substitute the lost resources that go together with ageing. Subsequently, we expect intergenerational proximity to strengthen the possible contribution of adult children to older people's well-being.

1.3 Residential relocations of older people

Considering the benefits of close intergenerational proximity, the question arises to what extent intergenerational proximity contributes to explain older people's changes of residence. At older ages, changing residence can be a strategy for gaining access to accessible housing or to care and support (Litwak and Longino 1987). When social relationships become more difficult to maintain, a residential relocation may meet the desire for contact with relatives (De Jong et al. 1995, Silverstein and Angelelli 1998). Silverstein (1995, p 29) mentions that "age related vulnerabilities may motivate older and younger family members either to converge geographically, or to remain in place in order to improve or preserve access to each other".

Based on these insights one would expect that older people are less likely to change residence when they have a child living close by, and more likely when children live at greater distance. Empirical studies have provided insight into the relationship between intergenerational proximity and residential relocations at older ages. Some older parents move in the direction of their children (Lovegreen et al. 2010, Pettersson and Malmberg 2009, Rogerson et al. 1997, Silverstein 1995, Smits 2010, Smits et al. 2010, Zhang et al. 2012), whereas having children living close by reduces the likelihood of changing residence (De Jong et al. 1995, Pettersson and Malmberg 2009). The latter also seems to hold for relocations to care institutes (Boaz and Muller 1994). Furthermore, greater intergenerational distance is associated with residential relocations that are motivated by the desire to live close to family (De Jong et al. 1995).

Because the conditions for and consequences of living in a residential care facility differ from those associated with independent living, it is of interest to understand the extent to which the contribution of intergenerational proximity differs between these two residential destinations. Chapter four answers the following research question:

4. *To what extent does intergenerational proximity influence the propensity of older people to move to care institutions and elsewhere?*

A major contribution of this chapter is the differentiation between residential relocations to care institutions and elsewhere, an approach which is possible owing to the possibility to combine various administrative data sources. Yet, a limitation of these data is the absence of health measurements. This is unfortunate since studies have provided clear evidence that health is an important predictor of residential moves of

older people (Longino et al. 1991, Bradsher et al. 1992, De Jong et al. 1995, Wilmoth 2010, Miller and Weissert 2000, Luppá et al. 2010) and that with increasing health restrictions the role of children as providers of care and support becomes more salient (Bengtson 2001, Komter and Vollebergh 2002, Steverink, 2002, Sundström et al. 2002, Van Tilburg 1995). Moreover, there is limited knowledge of the extent to which health has a different impact older people changing residence to care institutions and elsewhere (exceptions are Bloem et al. 2008 and Van der Pers et al. 2015).

With a similar approach as in chapter four, but with the additional use of survey data, chapter five is aimed to gain insight into the extent to which health predicts residential relocations of older people to care institutions and relocations elsewhere. By doing so, the following research question will be answered:

5. *To what extent does health influence the propensity of older people to move to care institutions and elsewhere?*

Because health is a multidimensional and dynamic concept there is not one commonly used measure of health in residential relocation research. The health measures 'limitations in activities of daily living', 'self-rated health', and 'the prevalence of chronic conditions' are commonly used in studies on older people's changes in residence. In order to understand whether and to what extent these health measures predict residential relocations differently, chapter five investigates the extent to which these three commonly used health measures predict both types of residential relocations. The following research question is answered:

6. *Which commonly used health measure predicts older people's moves to care institutions and elsewhere best?*

A major contribution of this exploration is that through record linkage of register data to survey data we were able to combine three measures of health, residential relocations to care institutions and elsewhere and intergenerational proximity. With this approach we have been able to overcome the limitations faced in similar studies (Bloem et al. 2008, Van der Pers et al. 2015) that made use of register data or survey data only.

1.4 Research approach

The study employs a quantitative approach for which various data from the System of Social Statistical Datasets (SSD)¹ have been used. The SSD is a database compiled by Statistics Netherlands and combines data from administrative registers and large

¹ In chapters 2, 3 and 4 the System of Social Statistical Datasets is denoted as Social Statistical Database and abbreviated as SSD or SSB.

nationally representative surveys. Among these, data from the municipal population register, *Gemeentelijke Basisadministratie (GBA)*, and the annual cross-sectional nationally representative health survey, *Periodiek Onderzoek Leefsituatie (POLS)* serve as the basis for this research. The methods used were logistic regression analyses (chapter 2), linear regression analyses (chapter 3) and multinomial logistic regression analyses (chapters 4 and 5).

The population register and other administrative registers

The data from municipal population registers and other administrative registers include data on the entire population as registered as living in The Netherlands. The data are available from 1995 and are updated annually. The municipal population register (dataset: *Gemeentelijke Basisadministratie* (Statistics Netherlands 2010a)) stores information on each officially registered inhabitant of the Netherlands on a daily basis and includes demographic events such as birth, death and changes in partnership status and residence. The SSD also contains administrative data about admissions to subsidised residential care facilities (dataset: *Centraal Administratie Kantoor-Zorg met Verblijf* (Statistics Netherlands 2012a)), household income and home ownership (in dataset: *Integraal Huishoudens Inkomen* (Statistics Netherlands 2012b)).

These administrative data are particularly suitable for investigating intergenerational proximity and residential relocations at older age for a number of reasons. First of all, on the basis of a personal identification number family networks can be reconstructed (Statistics Netherlands 2010b). By linking the geographic coordinates to the residential neighbourhoods of parents and their children, intergenerational proximity can be defined. Second, registration of (changes in) place of residence allows to reconstruct residential histories of each registered inhabitant, including relocations to subsidized residential care facilities. The large sample size of administrative data is a great benefit for this study because residential relocations at older age are relatively rare events. Even large-scale surveys are often too small to capture a reasonable number of cases and variation in explanatory variables to perform analyses in an adequate manner. Furthermore, administrative data provides access to the very old and institutionalized people, who are often not included in survey data or who are present only in small numbers (Börsch-Supan and Jürges 2005, Dykstra et al. 2005). The examination of residential relocations at older ages (research question 4 - chapter 4) could therefore only be achieved with a dataset containing millions of cases, rather than thousands. In a similar manner these data allow us to describe intergenerational proximity of all older parents living in the Netherlands and to examine the regional variation in this phenomenon (research questions 1 and 2, chapter 2).

The POLS survey

In the Netherlands, measures of well-being and health are not included in administrative data. We therefore derived data on life satisfaction and health from the annual cross-

sectional nationally representative Dutch health survey 'POLS' (in Dutch: *Periodiek Onderzoek Leefsituatie* (Statistics Netherlands 2013)) which represents a random sample of the non-institutionalized population, with an annual sample size of about 10.000 persons. For the analyses multiple editions of this survey were merged².

This survey data is particularly suitable for this study because through the unique personal identification numbers individual records can be matched to records of the administrative data. With a similar procedure, intergenerational geographic proximity and residential relocations (to care institutions and elsewhere) could be measured for each selected respondent of the POLS survey. By linking these data sources we obtained information that would not be available when using survey data only but which is necessary in order to gain more insight into the relation between intergenerational geographic proximity and the well-being of older people (research question 3 – chapter 3) and to improve understanding of how and which health measures contribute to predict residential relocations at older ages (research questions 5 and 6 – chapter 5).

1.5 Societal relevance of the study

The findings of this study can be a useful contribution to adequate design and implementation of social and health policies in order to deal with the consequences of population ageing.

First of all, policymakers that aim to increase the involvement of informal social networks for elderly care should be aware that partners and children are the most important resources of support, and that geography matters. Geography matters because distance between family members does not allow everyone to provide support to the other on a regular (daily) basis. Beyond the well-known determinants of intergenerational proximity, insight into the spatial distribution of geographic distance between parents and children can be very useful in the overall understanding of the actual possibilities of generations to support each other. Understanding spatial variation in distance between parents and children could be helpful when local governments become more responsible for implementing policies on support for older people.

Furthermore, when policy developments will lead to a greater responsibility of adult children to provide informal support to their parents, the (un)availability of proximate children may affect residential choices of older people. These choices may have implications for the regional housing markets and for the use of (subsidized) residential care facilities. An understanding of the extent to which intergenerational proximity and health problems contributes to explain older people's moves to different destinations and could help to predict future housing needs.

² Chapter 2 - 2003-2006, chapter 5 - 2003-2008

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