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In the Trap of Intergenerational Solidarity: Family Care in Poland's Ageing Society*

Abstract: The main aim of this paper is to juxtapose the normative aspect of intergenerational solidarity with specific care practices against the backdrop of Poland's public debate on social expectations, costs and changes needed in the system of pensions and social benefits offered to elderly citizens (the systemic context of intergenerational solidarity). The paper presents grandparents' practices in offering care to their grandchildren and children's practices in supporting their elderly parents. Such practices originate not as much from the emotional aspect of intergenerational solidarity as from culture-defined expectations of specific age categories, reinforced by unavailability of public care institutions. The analysis, based on qualitative and quantitative data, finds that intergenerational solidarity in Poland is a source of multiple tensions (including gender-related ones).

Keywords: intergenerational solidarity; care; ageing; generational succession.

Introduction

Ageing as a phenomenon occurs in virtually all post-industrial societies, yet its dynamics varies from country to country. At present, children will live longer than their parents in most countries around the world and today's senior citizens would not have lived for so long in the past. In both developed and developing societies any young person may expect to live until the old age, a thing which was not so obvious in the past. For instance, a person born in 1570 in England lived, statistically speaking, for merely forty years (Timonen 2008).

In Poland, the ageing of the population is very dynamic. It will take Poland only 47 years (1966–2013) to increase its percentage of the 65+ population from 7% to 14%. As a comparison, France took as many as 115 years (1865–1980) and Sweden needed 85 years (1890–1975) to reach the same stage. Among developed societies, the fastest rate of population ageing was recorded in Japan (26 years). However, the dynamics of the ageing process is highest in developing countries. The percentage of citizens aged 65+ in Singapore will leap from 7% to 14% within merely 19 years (National Institute on Aging 2004). These demographics show that ageing is both

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a universal and a culturally diverse process. In various societies 'old age' is socially constructed and evaluated in different ways (Mucha and Krzyżowski 2010).

The ageing of societies entails changes in many spheres of individuals' lives. Likewise, intergenerational relations undergo dynamic transformations. This paper deals with two types of such relations: firstly, grandparents' care of their grandchildren and, secondly children's care of their parents.¹ Obviously, intergenerational relations comprise multiple socio-cultural practices, attitudes and emotions which go beyond the phenomenon described as 'the old taking care of the youngest and the young taking care of the old,' often discussed within the concept of intergenerational solidarity (Silverstein and Bengtson 1997). Nevertheless, this paper argues that there are multiple tensions between social expectations, declarations and individual practices within the sphere of caregiving. Analysis of tensions² seems particularly relevant in the context of ageing societies. More importantly, people do not only live longer but their lead increasingly 'healthier lives'. As a consequence, we see a growing percentage of the 'oldest old' (people aged over 85) who need support in various spheres of their lives. Meanwhile, the current situation and demographic forecasts indicate that potential caregivers will shrink in numbers. This situation might cause tensions within families which, given the absence of the public elderly care system, are the main providers of care in Poland. Social concerns relating to this sphere are expressed, among others, in numerous press articles published by major national dailies in Poland. Authors of those articles discuss, for instance, proposed amendments to legislation on statutory retirement age or economic activity undertaken by citizens who have reached that threshold. The majority of legislative proposals are unfavourable for citizens at the pre-retirement age (notably women) and those who have already retired. Public institutions explain that the opportunity of early exit from the labour market is provided in response to Poles' attachment to their families (emotional intergenerational solidarity) and their willingness to provide help, expressed particularly by Polish women (cf. Kostrzewski and Miączyński 2010, Kostrzewski and Miączyński 2010a). Incidentally, it is important to bear in mind that care provided for relatives is a resource of a concrete economic value (Bass and Caro 1996, Charkiewicz and Zachorowska-Mazurkiewicz 2009). In other words, availability of this 'free caregiving resource' allows younger generations to be active on the labour market and releases the government from the obligation to provide care for elderly citizens. Apart from emotional and economic foundations of intergenerational solidarity, the cultural aspect should also be brought to attention. The Polish society displays strong

¹ This means I am interested in relations between three generations: grandchildren, children and grandparents. I will continue to use these categories throughout this paper.

² In this paper, I understand tensions as unarticulated, and often subconscious, clashes of interests and attitudes between generations. Those tensions may be both cultural and systemic. For instance, the social expectation (cultural aspect of tension) that grandparents will help their children to look after the grandchildren goes, in a way, against grandparents' interest to work for as long as possible (given the weaknesses of Poland's pension system). At the same time, the low statutory retirement age (notably for women), the possibility to retire early and the insufficiency of public care institutions (systemic aspect of tensions) mean that the fulfilment of culture-defined expectations is legally (systemically) justified and sanctioned, thus channelling intergenerational conflicts and tensions.

expectations of normative nature (normative intergenerational solidarity) whereby relatives rather than public institutions are expected to be the main sources of care for 'the old' (i.e. grandparents) and for 'the youngest' (i.e. grandchildren). Naturally, all aspects of intergenerational solidarity defined through care are interrelated. For instance, the economic value of informal (family-based) caregiving resources for grandchildren and grandparents is higher in countries which have poor infrastructure of care services, such as Poland (the systemic context of intergenerational solidarity).

The main aim of this paper is to juxtapose the normative and emotional aspect of intergenerational solidarity with specific care practices against the backdrop of the public debate on social expectations, costs and necessary changes in the system of pensions and social benefits offered to the elderly (the systemic context of intergenerational solidarity). With this aim in mind, I put forward two theses:

Thesis One: Culturally-defined (and institutionally supported) patterns of generational sequences in the family and on the labour market dominate in the Polish society. In the family, they are manifested through the social expectation that members of immediate family (especially women around retirement age) should take care of 'the old' and of 'the young'. At the workplace, the generational sequence is realised through social pressures on citizens who have reached retirement age to make room for younger cohorts.

Thesis Two: Emotional closeness in the Polish society represents an important, but not the most important, aspect of care relations in the family and, as such, cannot fully account for care provided for 'the young' or for 'the old'. In this model, alongside the intergenerational sequence mentioned in Thesis One, one should also take account of the intergenerational moral exchange which consists in instrumental management of affective affinity throughout the life course of individuals and families.

Based on these two theses, I will attempt to discuss intergenerational solidarity in the aspect of tensions rather than assent and consensus. My assumption is that intergenerational solidarity in Poland is a source of tensions (including gender-related ones), which are not incorporated in any way in legislative proposals concerning retirement age and their consequences.

This paper consists of five sections: methodology, concepts describing the systemic and cultural context of intergenerational relations in Poland, and three empirical chapters describing intergenerational caregiving relations, based on quantitative and qualitative data.

Methodology

Analysis of intergenerational solidarity was based on quantitative and qualitative data. The quantitative data originate from a representative study within a project

entitled “Survey of Health, Ageing and Retirement in Europe (SHARE).”³ A total of fourteen⁴ European countries, including Poland, took part in the second round of the survey. The respondents were at least fifty years old. The survey was conducted in Poland towards the end of 2006 and at the beginning of 2007, and produced a total of 1,594 standardised questionnaire-based interviews (with 688 male and 906 female respondents).

In order to supplement this statistical picture of intergenerational solidarity, the paper will present findings from qualitative fieldwork conducted in 2010, based on face-to-face in-depth interviews. The field work was done by a research team (Janusz Mucha, Łukasz Krzyżowski and graduate students) from Department of Sociology and Social Anthropology, AGH University of Science and Technology within the project “Kraków’s Senior Citizens. Relations with the Young Generations and Technological Challenges.” The population studied comprised urban dwellers, and the respondents were individuals who were at least fifty-five years old and received retirement benefits. A total of 51 interviews were conducted (29 with female and 22 with male respondents) in two stages. During the first stage, project participants conducted twenty interviews with freely selected individuals who met the age criterion. At the second stage, 31 in-depth interviews were conducted but the sample was purposive this time, based on demographic analysis of informants from the first stage in order to eliminate imbalance of female and male respondents, representatives of lower, medium and higher occupational categories, as well as younger and older pensioners.

Previous Research on Intergenerational Relations and Caregiving

Despite the widespread social concerns about progressing devaluation of the role of families, recent studies have shown that intergenerational relations continue to be very important in the lives of people from virtually all cultural systems (Hank 2007, Yi and Farrel 2006). Grandparents play a key role in the model of intergenerational solidarity, and grandparents’ care of their grandchildren is among the most important forms of intergenerational relations (Bengtson 2001), notably in countries with poor infrastructure of child care institutions (Igel et al. 2009). Never before did people live long enough to witness the adult lives of their grandchildren. For instance, one fifth of all children born in 1900 in the USA became orphans before turning eighteen. In contrast, two thirds of children born in 2000 will have seen all of their grandparents living when they reach the age of eighteen (Uhlenberg 1980).

³ This paper uses data from SHARE release 2.3.1, as of 29 July 2010. SHARE data collection in 2004–2007 was primarily funded by the European Commission through its 5th and 6th Framework Programmes (project numbers: QLK6-CT-2001-00360; RII-CT-2006-062193; CIT5-CT-2005-028857). Additional funding by the US National Institute on Aging (grant numbers: U01 AG09740-13S2; P01 AG005842; P01 AG08291; P30 AG12815; Y1-AG-4553-01; OGH A 04-064; R21 AG025169) as well as by various national sources is gratefully acknowledged (see <http://www.share-project.org> for a full list of funding institutions).

⁴ The analysis omits answers given by the respondents from Greece as they were not asked certain questions regarding intergenerational relations and care (questions which underlie discussion presented in this paper).

The ageing of societies changes the kinship structure. On the one hand, the number of living generations increases (intergenerational extension) but, on the other, the number of living members within each generation shrinks (intragenerational contraction) (Harper 2005). In industrial and post-industrial societies, families are multigenerational but 'narrow', taking the shape of a pea pod (so called *bean pole families*). Changes in family structure also affect intergenerational relations between grandparents and grandchildren. Currently, in the US, nearly 50% of grandparents who have grandchildren also have great-grandchildren (Roberto and Stroes 1992). On the one hand, grandparents accompany their grandchildren (and great-grandchildren) into their adult lives for longer but, on the other hand, the number of grandchildren is shrinking. Those two factors add momentum and individualise the relations between grandparents and grandchildren. The importance attributed to relations with grandparents depends largely on gender. Studies have shown that relations between grandchildren and grandparents (especially grandmothers) in the maternal line are usually more intensive than those in the paternal line (Dubas 2001). Grandparents also attribute varied importance to their relations with grandchildren, diversifying closer engagement and support between their children's children. The dynamics grandparent-grandchild relations changes in the course of life. As grandchildren grow up, their preferences for maintaining relations with grandparents usually dwindle. Changes are observed not only in the frequency of intergenerational interactions but also in patterns of those interactions (Geurts et al. 2009) and emotional support (Mills et al. 2001). The direction of transfers between people in intergenerational relations changes as well in their life course.

With regard to the second type of intergenerational relations which shape intergenerational solidarity, it is important to bear in mind that as societies age, an increasing number of people will need care yet the number of potential caregivers will shrink. The ever longer lives, the ageing of societies and low fertility rates may cause a gap between the demand for care and available resources to satisfy those demands. This gives rise to many tensions which boil down to the question on who may need care, who should provide it and how.

While the notion of 'care' is used in many contexts, its meaning is not clear-cut (Thomas 1993). This also refers to attempts to define elderly care. In a very general definition, care means support (physical and emotional) for a person who cannot manage by her/himself (Daly 2002). One reason why care is difficult to define is that it is a multidimensional notion. Additionally, in many countries (including Poland) care is provided mostly in the private sphere (exception: Scandinavian countries) and, as such, rarely mentioned in public statistics, causing difficulties for those who want to analyse this phenomenon in greater depth. Commitments such as provision and reception of care arise in kinship networks and usually cover the closest relatives. More importantly, those commitments usually define who should provide care for whom, how and to what extent (Rossi and Rossi 1990). Therefore, on the one hand we are dealing with a normatively and morally defined set of duties which can be referred to as 'filial duty' (Silverstein et al. 2006) and, on the other hand, those duties are not defined once and for all but, rather, developed and negotiated over time (Finch and Mason 1993).

An important defining dimension of care is the profile of caregivers, both individual and institutional. Firstly, a distinction should be made between institutionalised care (for instance, extended care facilities, hospices, long-term care establishments), usually provided against payment, and non-institutionalised home-based care (Qureshi 1996, Wiles 2005), usually based on women's unpaid work (Titko, Duch-Krzysztofek and Budrowska 2004). As observed by Carol Thomas (1993), care is usually provided by women through their social roles (wife, mother, daughter, housekeeper, nurse) and involves emotional states (caring *about* someone) as well as specific practices (caring *for* someone). Moreover, it is important to note that, statistically speaking, women live longer than men and, consequently, may require care for longer periods. This is particularly important in the context of analysing mutual care between partners or spouses. Studies have clearly demonstrated that in ageing heterosexual marriages and other relationships it is usually the woman who takes care of her partner. Such care usually entails negative psychological consequences for the care provider such as an increased risk of depression, anxiety and a sense of burden in comparison with individuals who do not take care of their partners or elderly parents (Pinquart and Sörensen 2003; Choi and Marks 2006).

Sara Arber and Jay Ginn describe an array of potential caregivers, distinguishing the following sources of care: a) paid in-home care, b) partner, c) another household member, usually an adult child, d) a relative living outside the household, usually an adult daughter (see also Hequembourg and Brallier 2005), e) local community: friends and neighbours, f) the government providing care for the elderly in their place of residence, g) the government providing care for the elderly in special establishments (Arber and Ginn 1991: 129). Therefore, care for an elderly person may be provided in various locations and by various caregivers. Virpi Timonen proposes a continuum which, at one end, features formal, professional, paid-for care and, at the other end, informal, usually unpaid care by family members of the elderly person. Looking between those two extremes, we can identify, e.g., care provided (usually without payment) by the neighbour community, friends or NGOs. Timonen observes: '...however, it is essential to note that the boundary between formal and informal is becoming increasingly fuzzy as governments make payments to facilitate and encourage informal care...' (Timonen 2008: 111). As mentioned earlier, the prevalent type of care in Poland (but also in many other European countries) is informal family care, which is the subject of analysis in this paper.

Patterns of intergenerational relations and care are frequently described with reference to the notions and patterns of intergenerational solidarity. One of the most academically sound models was described at length by Vern L. Bengtson and his team (Bengtson 2001, Silverstein and Bengtson 1997). This model describes emotions, behaviours and attitudes accompanying intergenerational relations in the family. Bengtson distinguishes six dimensions of intergenerational solidarity: a) affectual solidarity (emotional closeness), b) functional solidarity (instrumental and emotional support), c) structural solidarity (geographic proximity between family members, determining, e.g., the frequency and forms of intergenerational interactions), d) consensual solidarity (harmony of opinions and attitudes across generations), e) normative solidarity

(norms and expectations ascribed to different ‘elements’ of the intergenerational network), f) associational solidarity (frequency of contacts between members of different generations). At a later stage, attention was also drawn to negative aspects of intergenerational solidarity and intergenerational conflicts (cf. Giarrusso et al. 2005).

Although in this paper I am particularly concerned with normative solidarity, this aspect is largely shaped by the other dimensions of intergenerational solidarity. Importantly, intergenerational transfers have different directions at different stages of the life of a family. Intensity and directions of support depend largely on social expectations towards grandparents, children and grandchildren, as well as on the prevailing cultural systems and legal regulations.

Systemic and Cultural Context of Intergenerational Relations in the Family

The Polish society harbours high social expectations towards the elderly whereby grandparents should help their children to look after grandchildren (normative intergenerational solidarity). Those expectations are fulfilled in the void of institutional public support in the sphere of care services (systemic context of intergenerational solidarity). Poland is among countries with the lowest spending (expressed as a percentage of GDP) on care services for ‘the young’ and ‘the old’. For instance, Poland comes last in Europe⁵ in terms of public care for children aged 0–2. Only 2% of Polish babies and toddlers aged 0–2 benefit from institutional day care (Plantenga and Remery 2009).

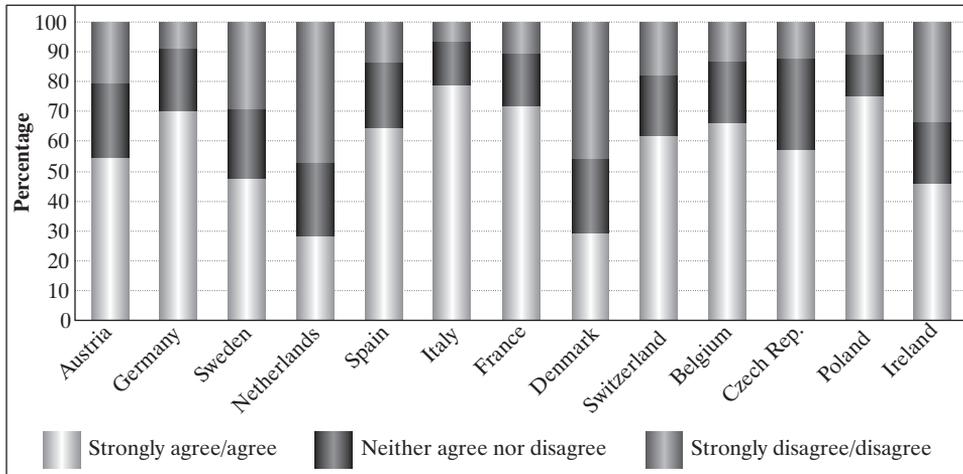
The normative dimension of intergenerational solidarity, defined as individuals’ assent to the social expectations towards elderly citizens as potential caregivers for their grandchildren, is heavily diversified culturally, as shown on the chart 1.

More than 60% of the respondents from thirteen surveyed countries agree or strongly agree that it is grandparents’ duty to take care of their grandchildren. However, the study reveals intercultural differences. In Denmark and the Netherlands most respondents claim that taking care of grandchildren is definitely not the grandparents’ duty. Slightly under 50% of agreement with the analysed statement was recorded in Sweden (48%) and Ireland (46%). Meanwhile, Italy (79%), Poland (75%) and France (72%) are three countries where the respondents were most likely to strongly agree or agree with this statement.

Absence of differences between declared responses provided by male and female respondents may be explained by the practice whereby women are much more likely than men to take care of their grandchildren. Women are also more aware of the effort involved in taking care of grandchildren. On the other hand, men tend to be more optimistic in this respect and declare readiness to look after their grandchildren, even though they hardly ever do it in reality, and even if they do, they tend spend much less time and money on such activities in comparison with women. This point will be discussed later in the paper.

⁵ Data from Bulgaria, Romania and Lithuania not available.

Chart 1

Sense of Family Duties I. Poland Compared Against Europe*Grandparents' duty is to help grandchildren's parents in looking after young grandchildren*

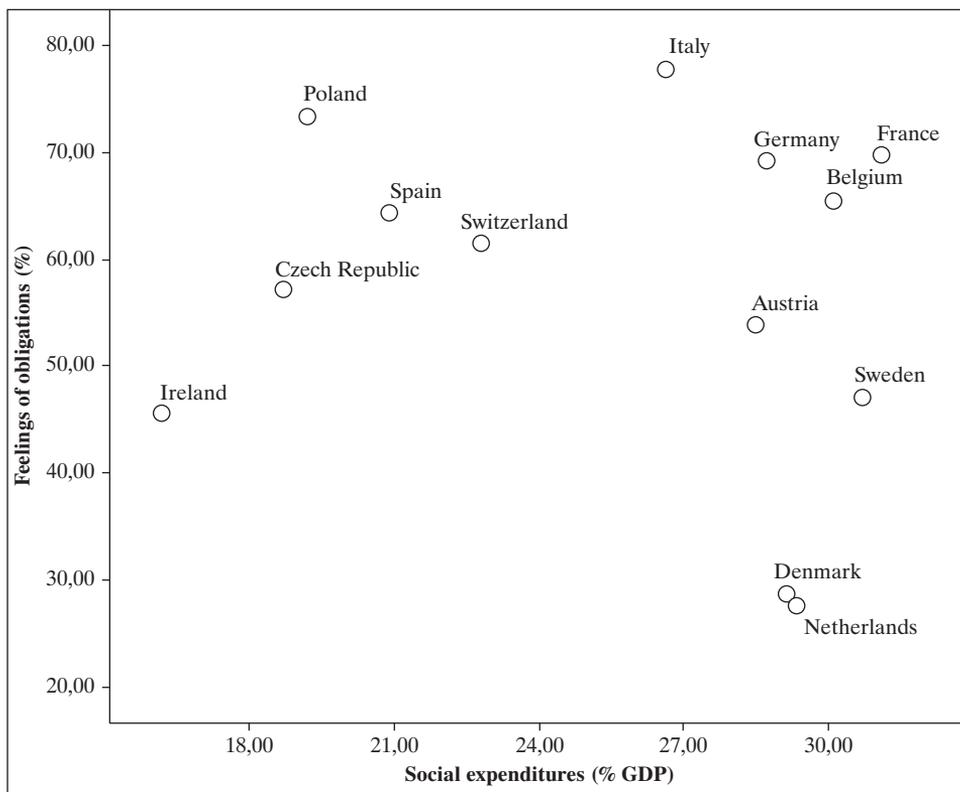
Source: Author's own analysis based on SHARE data, N = 8,500.

The distribution of responses changes if take only the answers from the respondents who have at least one grandchild.⁶ In the analysed thirteen countries, grandparents have, on average, nearly 4 grandchildren. Interestingly, the largest number of grandchildren was reported in Spain (average: 4.43), Switzerland (4.22) and Denmark (4.02), and the lowest by the respondents in Ireland (3.28). In Poland, grandparents have 3.6 grandchildren on average. If we filter out the respondents with no grandchildren (N = 5,197), analysis shows that in most countries where the respondents declare their willingness to take care of grandchildren, the filter slightly changes (by approx. 2–3 percentage points, e.g. a decline in Italy) or does not change (e.g. in Poland) the degree of agreement with the analysed statement. Interestingly, in countries which were relatively sceptical about grandparents' obligations vis-à-vis their grandchildren (Denmark, the Netherlands, Sweden and Ireland), the percentage of the respondents who strongly agree or agree with the norm expressed in the question either increases after this filtering (from 29% to 34% in Denmark) or remains unchanged (the Netherlands, Ireland and Sweden). Furthermore, application of the filter respondents' gender does not explicate their declarations as to providing care for grandchildren.

The normative aspect of intergenerational solidarity is strongly related to the institutional support from the government as a provider of care services. I adopted

⁶ The use of this filter will improve the likelihood of capturing opinions based on current or past experience of looking after grandchildren. It is worth mentioning that slightly under 10% of the Polish respondents have no living children (and, consequently, no grandchildren), with no significant differences between the respondents aged 80+ and those aged 50–59 (cf. Kohli, Künemund and Vogel 2008).

Chart 2
Sense of Family Duties vs. Social Welfare Spending I



Source: Author’s own analysis based on SHARE and Eurostat data, 2006, N = 13.

the overall social expenditures as a percentage of GDP as an indicator of such support (chart 2).

The chart 2 shows that countries where the respondents strongly agreed that it is grandparents’ duty to take care of their grandchildren have a low level of social expenditure.

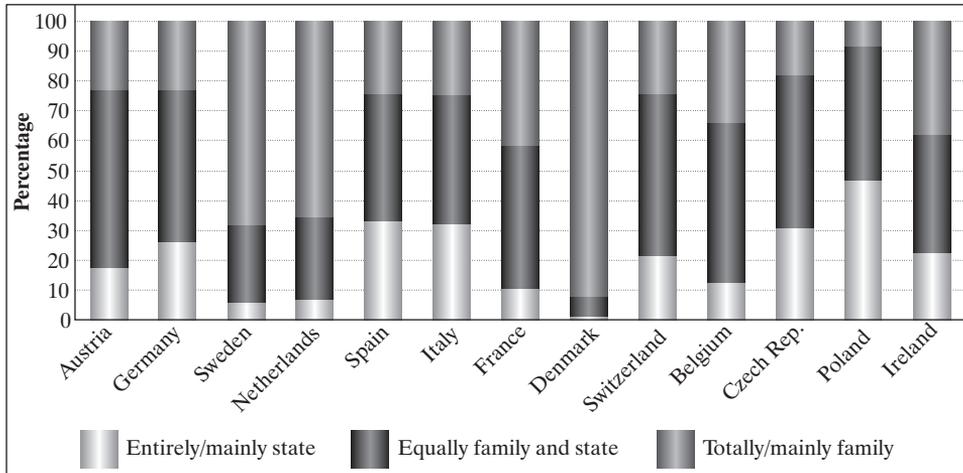
Let us now proceed to the analysis of the normative dimension of intergenerational solidarity in the context of personal care for the elderly (assistance in dressing, bathing, feeding, moving to and out of bed, toileting)—chart 3.

In 2007 a total of 27% of the respondents from all surveyed countries believed that personal care for an elderly person should be provided mostly or totally by members of their family. This opinion was most frequently accepted by the respondents in Poland (47%), Spain (33%) and Italy (32%). A different opinion was expressed by 30% of the respondents, who believed that it was mostly the state that should provide personal care for elderly people. This group included, above all, the respondents from Denmark (92%), Sweden (68%) and the Netherlands (65%). The largest proportion of the re-

Chart 3

Sense of Family Duties II. Poland Compared Against Europe

In your opinion, who—the family or the State—should bear the responsibility for personal care for elderly people who need, e.g. nursing or help with bathing or getting dressed?



Source: Author's own analysis based on SHARE data, N = 8,334.

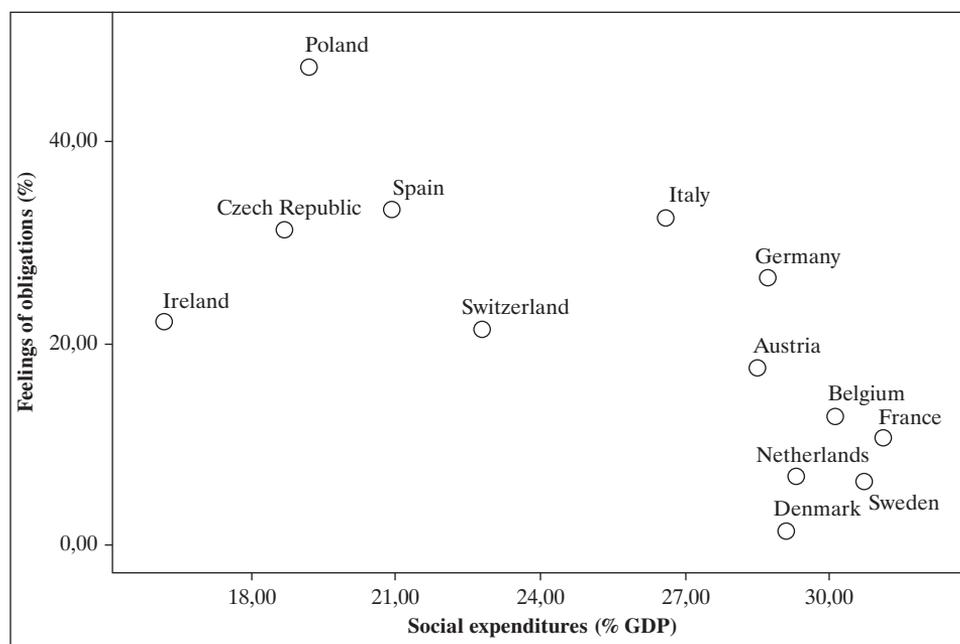
spondents (44%) believed, however, that personal care for an elderly person should be provided equally by the state and by family members. The most conservative opinions were expressed by the respondents from Austria (60%), Switzerland (55%), Belgium (53%) and Germany (51%). It seems, therefore, that the idea of a new intergenerational contract (cf. Walker 1996), which assumes that social welfare will be provided through co-operation between individuals and the state, has been gaining popularity, especially among Western countries, in contrast with the North or the South.

As in the case of expectations related to grandchildren care, the distribution of answers to the question on personal care for the elderly changes if we filter out the respondents who do not provide care for anyone. Interestingly, after this procedure all countries show a declining percentage of answers favouring family-based solutions. The strongest declines were observed for Belgium (from 13% to 6%), Austria (from 17% to 12%) and Italy (from 32% to 28%). Only three countries saw an increase in the percentage of those who favour family-based care for the elderly. Countries which stand out in this group include Poland (an increase from 47% to 51%) and, to a lesser extent, Switzerland (from 21% to 23%) and Denmark, where the percentage of respondents who are in favour of family-based solutions in personal care for the elderly grew only slightly (from 1.4% to 2%). It might seem that experience of working with 'dirty bodies' (cf. Cline 1996) will increase the popularity of solutions offered by welfare states. However, this is not the case. The shrinking support of family-based care occurs gives way to shared responsibility and collaboration between the state and the family. In the majority of surveyed countries men were slightly more likely than women to believe that it is the family that should take care of the elderly. Younger

respondents (50–59 y.o.) were more likely than older respondents (70–79 and 80+) to favour this solution. This may be explained by referring to the experience of care, low self-esteem of the elderly and the reluctance about burdening one’s children with this unpleasant duty. The latter aspect was mentioned particularly frequently in qualitative interviews.

As in the case of grandchildren care, also the context of elderly care reveals a correlation between the sense of family duties in the latter sphere and social expenditures (see chart 4).

Chart 4
Sense of Family Duty vs. Social Expenditures II



Source: Author’s own analysis based on SHARE and Eurostat data, 2006, N = 13.

Claimed willingness to provide personal care for elderly people is more common in countries where normative expectations are relatively low and care for the elderly is seen as a duty of the government, not members of immediate family. Poland stands out among other European countries in this respect. In countries where the family-based model of elderly care prevails, the percentage of social expenditures, incl. public care services, is relatively low. In consequence, analysis of intergenerational relations should consider individual and family-related factors as well as those related to culture and systems (cf. Igel et al. 2009).

Further on in this paper, statistical analysis will be based on SHARE data from Poland, focused on those respondents who have at least one grandchild.

Intergenerational Solidarity I: Caring for Grandchildren

Elderly people do not only need care, regardless of its sources (formal or informal) or expectations ('filial duty' or the legal system) (cf. Timonen 2008, Silverstein et al. 2006) but they also are a source of intergenerational solidarity themselves, for instance by taking care of their children's children. Demographic changes, notably the increasing life expectancy (combined with good health), mean that elderly people are in a position to help younger generations in a variety of ways, such as providing care for their grandchildren, which is often the case in Poland. Parents and children help each other with varying intensity at different stages of their life course.

What is the picture of grandchildren care provided by Polish grandparents? Above all, it is important to point out that the Polish respondents with at least one grandchild had an average of 3.6 grandchildren, the most common number being two. 45% of grandparents had looked after their grandchildren during the twelve months preceding the study, in the absence of the grandchildren's parents. In most cases, grandparents took care of one grandchild (33%) and 10% of the grandparents took care of two grandchildren. The majority of grandparents from the analysed group look after their their grandchildren at least once a week (43%) and 13% do so nearly every day. Those who provide care every day, spend an average of six hours on this activity. On this basis, we can conclude that those grandparents regularly provide care when the grandchildren's parents are out working. In the case of once-a-week care, the average total expended time is sixteen hours, whereas care provided nearly once a month comprises twenty-five hours. Those who take care of their grandchildren less often (i.e. a few times in a year) spend, on average, seventy-seven hours.

Grandparents most commonly look after the child of their eldest son or eldest daughter.⁷ There is no significant correlation between the gender of the oldest child and the frequency of looking after grandchildren. The difference between the quantity of care provided for grandchildren born to the first and the second child is visible from the average number of hours spent on grandchildren care. A grandchild born to the first child receives more care than a grandchild born to the second child or subsequent children. A grandchild born to the eldest son or the eldest daughter receives, on average, two more hours of daily care than the grandchild born to the second son or second daughter. Those grandparents who take care of their grandchildren nearly every week spend twice as much time with the children of their eldest children than with those of their younger children. As mentioned earlier, grandfathers take care of their grandchildren less frequently than grandmothers do. Among 45% of all grandparents who look after their grandchildren, 64% are women (grandmothers). This picture becomes even more disproportionate as respondents' age increases. The phenomenon may be interpreted both from the gender perspective (women's unpaid work), as well as from demographic and health-related perspectives. While

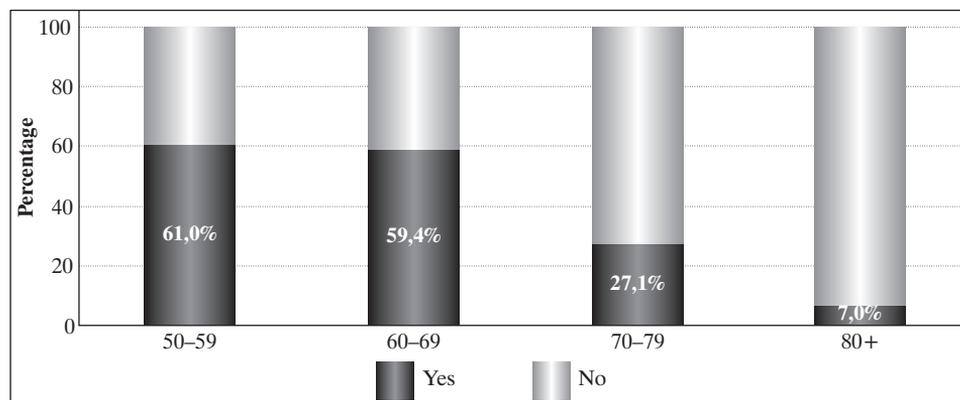
⁷ This follows, firstly, from demographic trends. Polish women have children at an ever-later age, which means that grandparents usually take care of the first and the second grandchild only. Secondly, this stems from the SHARE sample design. The respondents were aged 50 or older. The average age of respondents from Poland was 66.

women in Poland more commonly perform household chores and provide care, which may be analysed in the light of women's unpaid work (cf. Titkow, Duch-Krzysztofek and Budrowska 2004), it is worth remembering that men's health deteriorates more quickly and, in consequence, they die at a younger age.⁸

Nowadays households with three generations living together are rarely found. In 2000 as many as 20% of the surveyed Poles claimed they would like to share the house with children, grandchildren or relatives when they reach old age. In 2009 the respective percentage dropped to 12% (CBOS 2009). According to SHARE data, children usually live at the distance of 5 to 25 kilometres from the grandparents' household. Only 4% of children live in the same household with grandparents. Moreover, geographic proximity represents an important, although not crucial, characteristic which determines the practice of grandchildren care. Grandparents usually care for the grandchildren born to their oldest child if the latter lives within 1 to 25 kilometres. As regards grandchildren born to the second child, grandparents usually take care of such grandchild if she/he lives within the radius of one kilometre (or in the same household).

Grandparents' age is an important aspect which differentiates their care provided to grandchildren (see chart 5).

Chart 5
Care for Grandchildren vs. Grandparents' Age



Source: Author's own analysis based on SHARE data, N = 973.

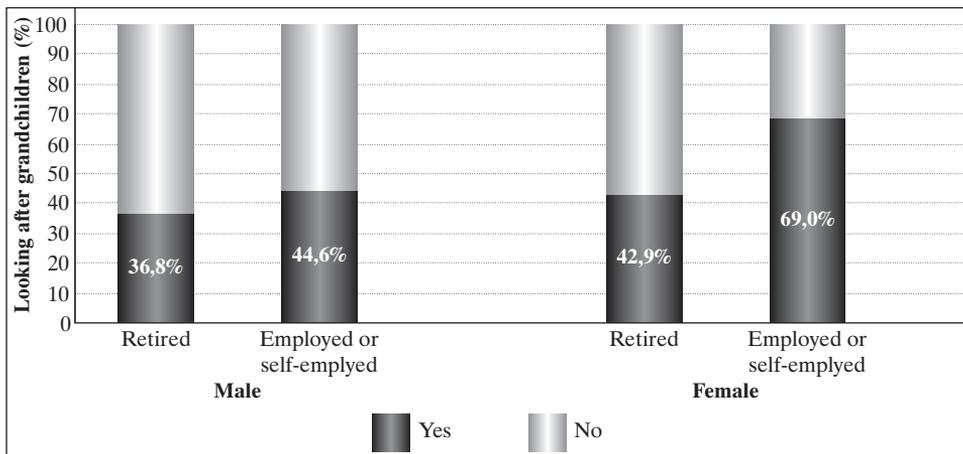
It may be noticed from the chart above that younger grandparents take care of their grandchildren much more commonly than older grandparents do, and this relationship is stronger for women than for men. In the category of 50-59-year-olds, care for grandchildren is provided by as many as 70% of women and 44% of men. This phenomenon has considerable consequences for the labour market and for people at

⁸ In 2008 the average life expectancy was 71 years for men and 80 for women.

the pre-retirement age,⁹ notably women as it is women who exit the labour market earlier in order to fulfil the social expectations related to grandchildren care. The years of schooling do not significantly differentiate those respondents who take care of their grandchildren and those who do not. Research findings indicate that when parental care is impossible or unavailable (e.g. when parents work), it is grandparents that usually substitute for their children in child care responsibilities (Brandon 2000). The phenomenon of generational succession will be described in more detail in the part which discusses qualitative findings.

If we look at the relationship between the occupational situation and care for grandchildren, we will notice that people in hired employment and those who are self-employed look after their grandchildren more often than retirees do and, again, this relationship is stronger for women than for men.

Chart 6
Grandchildren Care vs. Respondents' Work Status and Gender



Source: Author's own analysis based on SHARE data, N = 393 (males), N = 484 (females).

In comparison with men, women are more likely to perform multiple social roles, combining career with grandchildren care. More importantly, this group (referred to as the 'sandwich generation') often also looks after their living elderly parents.

Intergenerational Solidarity II: Taking Care of Elderly Parents

As a rule, elderly people in Poland enjoy respect. According to a study conducted by CBOS in 2009 on a representative sample of 1,022, as many as 87% of those

⁹ The employment rate for those aged 55–64 in Poland is lowest in the European Union. Additionally, women work for shorter periods and retire early, which, in the context of Poland's pension system, increases the likelihood of poverty among women after retirement.

polled think that the society needs elderly people.¹⁰ Acceptance of old age increases with the level of education and, interestingly, declines with age (CBOS 2009). In the context of findings described in the first part of this analysis it is interesting to explore the reasons why elderly people are thought to deserve appreciation. Most frequently (97%), the surveyed respondents said that the elderly people have time for their grandchildren while parents spend a lot of time working. Social expectations with regard to grandparents' duty to look after grandchildren are clearly pronounced and articulated both by the young (more often) and by the old (less often, especially by women). How can we describe the picture of intergenerational solidarity in the normative aspect with regard to elderly care?

Further on, this paper presents key characteristics which determine the nature of personal care for elderly people in Poland. Two independent respondent groups were selected for further analysis: those who had taken care of elderly people, and those who had received assistance in the twelve months preceding the study. Before moving on to the results of SHARE data analysis, let us consider the terminology related to elderly care and assistance as this plays an important role at each stage of the research process and, in particular, at the stage of data analysis. Gerontologists apply two measurements to study behaviours related to care and assistance for the elderly. The first one is the ADL scale (Activities of Daily Living), developed by Sidney Katz and his research team. The Katz scale measures an individual's independence in performing the following activities: bathing, dressing, toileting, transferring (moving in and out of bed and chair), feeding, continence (bladder and bowel control) (Katz et al. 1970). The second tool is the IADL scale (Instrumental Activities of Daily Living) developed by Powell Lowton. The Lowton scale tests an individual's independence in performing the following activities: using the telephone, shopping, food preparation, housekeeping, laundry, mode of transportation, responsibility for own medications, ability to handle finances (Lowton and Brody 1969). From the research strategy perspective, answers to questions can be provided by care recipients and carers. It is important to note that the ADL scale measures assistance in personal hygiene which usually requires much more intensive work performed on a regular basis in comparison with assistance in household activities (measured by IADL). To begin with, let us look at the characteristics of individuals who provide assistance and care for the elderly. Operationalisation of assistance (IADL) and care (ADL) in the SHARE data looks as follows:

Now I would like to ask you about the help you have given to others. Please look at card 38. In the last twelve months, have you personally given any kind of help listed on this card to a family member from outside¹¹ the household, a friend or a neighbour?

Three types of assistance/care were presented to the respondents:

¹⁰ In the study, an elderly person was defined as one who was 60 or older or who was retired.

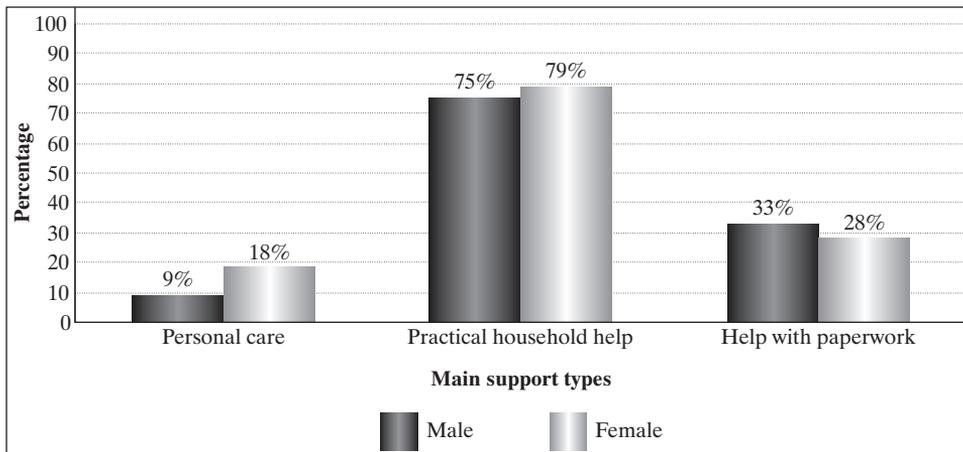
¹¹ As the subsample of people taking care of parents living in the same household is very small (N = 70), this section of the paper will deal with support provided to parents living outside the respondents' households (N = 515).

- a) personal care, e.g. dressing, bathing or showering, eating, moving to or out of bed, toileting;
- b) practical assistance in the household, e.g. home repairs, gardening, transport, shopping, cleaning;
- c) assistance with paperwork (documents or official errands) such as completing forms, handling financial or legal matters.

32% of the respondents take care of someone from outside their household. In most cases, they provide such care and assistance nearly every week (32%), for five hours on average. 22% provide care at least once a month for about seven hours. Daily care is provided by 18% of caregivers, who spend an average of seven hours a day doing so. 28% of the respondents provide care less frequently than once a month, devoting a total of twenty-three hours on average. As regards the type of support, personal care is provided by 16% of caregivers in the study. Practical assistance in the household prevails: it is provided by nearly 80%, whereas assistance with paperwork was mentioned by nearly 35% of the respondents. Analysis of types of support provided reveals a clear differentiation in the practices of care depending on the caregivers' gender (chart 7).

Chart 7

Types of Assistance and Care Provided for Relatives Living Outside the Household



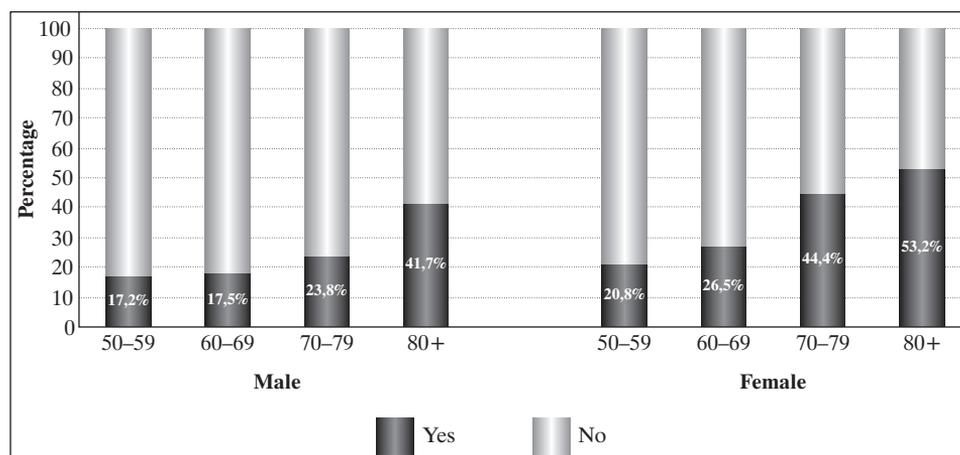
Source: Author's own analysis based on SHARE data, multiple choice question; answers do not add up to 100%, N = 515.

Women provide assistance twice as often as men do, usually to their parents, and mostly in the sphere of personal hygiene. Research findings (cf. Gough 1994) show that both women and men prefer private personal care to be provided by women, which can be explicated by gender-based definitions of social norms regulating the personal space in relations between the sexes. This mechanism translates into the possibilities of obtaining formalised care (of course, only in those countries where such care is widely available): sons of bedridden mothers are more likely to seek

assistance from public services than daughters do. The issue of women taking care of their elderly parents bears serious consequences for the labour market (as is the case for grandmothers who gradually exit the labour market because of the social expectations motivating them to look after their grandchildren) and for health. Care is usually provided by women aged 50–59. Trying to reconcile social expectations related to child care and then to care for their elderly parents, women are not only at risk of poverty but also of health problems (Pinquart and Sörensen 2003; Choi and Marks 2006). Additionally, as demonstrated in the preceding part of this paper, the people who require care from women also include grandchildren. According to SHARE data, as many as 66% of women who take care of their grandchildren also provide care (usually practical assistance in the household) to other individuals, mostly their mothers.

If we now take another look, i.e. see the picture from the perspective of people who claim to receive care,¹² we will see that 27% of the respondents are recipients of care (N = 302). The respondents who need care usually receive it at least once a week (32%) for an average of six hours, others receive it each month (24%) for an average of nine ours, or and those who receive it less frequently (27%) get an average of fifteen hours of support. Everyday care is required by 16% of all care recipients in the study and they receive, on average, four hours of time from their family or relatives. Respondents’ age is the decisive factor which determines the reception of care from family members (chart 8).

Chart 8
Care Recipients vs. Respondents’ Age



Source: Author’s own analysis based on SHARE data, N = 1128.

The older the person, the more likely she/he is to need care. As a rule, such care is provided by children (62%), followed by neighbours and friends. Practical assistance

¹² The analysis includes individuals who claim to receive support from outside the household.

in the household is the prevalent type of care (90%), followed by assistance with paperwork (34%) and personal care (11%).

As respondents' age increases, the type of support changes: the older the person, the more likely she/he is to need help with personal hygiene and such support, as mentioned earlier, is most commonly provided by women. The practice of care provided and received by women reveals certain ambivalence. Women are more likely (31%) than men (21%) to need some kind of support, which confirms the claim that women do not only take care of family members but are also more likely to need care. More importantly, since women live longer than men in statistical terms, they need care for longer periods. Over time, such care begins to involve the caregiver's work with the physical body of the person who needs care.

Table 1

Respondents' Gender and Age vs. Type of Support Received

Main support types		Age			
		50–59	60–69	70–79	80+
Male	Personal care	4%	7%	8%	5%
	Practical household help	93%	90%	83%	90%
	Help with paperwork	11%	10%	25%	40%
Female	Personal care	6%	9%	16%	22%
	Practical household help	88%	89%	87%	80%
	Help with paperwork	20%	31%	36%	44%

Source: Author's own analysis based on SHARE data, multiple choice question; responses do not add up to 100%, N = 301.

The table above shows that when women's age increases, the need for personal care grows systematically and such care requires considerable time and financial costs on the part of the caregiver.

To sum up the topic of elderly care, let me reiterate that social expectations as to who should provide support and how are fulfilled through specific care practices, with all their emotional and economic consequences. Women are both the main caregivers to the elderly and the ones who are more likely need care in the old age. Meanwhile, considering women's early exit from the labour market, unavailability public care institutions and the shrinking number of children (who could potentially take care of their elderly parents, notably mothers), the quality of life in the old age may deteriorate further.

Intergenerational Solidarity III: Moral Exchange and Generational Succession

The preceding sections of this paper discussed intergenerational solidarity based on social expectations and cultural practices. The main goal of this section, based on qualitative data, is to present the mechanism of identity construction as a caregiver and projections of one's own visions of old age. As stressed before, the expectations

as to who is supposed to take care of ‘the young’ and ‘the old’ are socially defined in the Polish society. This study adopted an assumption that during the interviews individuals should offer narratively constructed accounts of their caregiving roles (whether current or past), visions of their own old age and the resultant need for support/care services.

As demonstrated earlier, neither legislative solutions nor social expectations identify public institutions as the core source of care services. Instead, they point to the family on the assumption that emotional closeness is the most important and sufficient precondition for professional personal care. Findings from qualitative studies indicate that emotional closeness is indeed an important aspect of caregiving relations in the family. Nevertheless, when faced with the problem of caregiving at some point of their lives, individuals make certain calculations and ‘manage their heart’ (Hochschild 2009), guided by the norm of moral reciprocity. Research finds that this norm applies to grandchildren care as well as elderly care and represents the pivotal element of intergenerational solidarity in the family. The moral norm of reciprocity may be defined using informants’ words:¹³

I don’t know who is going to take care of me but I think... like I took care of my parents, and now I’m helping my mom, and that’s how I’ve raised my daughter, so if I need care, she will give it to me. If she can’t, I will cope for as long as I can [PD17_F].

There’s the family, my wife, my daughters, my grandchildren, once they grow up. Who else would take care of me if not my family? They will give it back [author’s emphasis] ... Now, I’m the one to provide care and they will do so in future [PD42_M].

I mean, it was my grandson who mostly helped me [in deciding to retire—author’s explanation]. This was an airtight argument because otherwise my daughter would have had to take a nanny, and I wasn’t happy with my job so I thought... Financially speaking, it wasn’t perhaps a winning situation because you lose a lot when you retire [...] My mother also looked after my kids. I went back to work after my maternity leave was over. I didn’t have any parental leave afterwards. So I didn’t quite realise, probably, how much work you need to do around a baby. I went to work, like my daughter now, she’s working. And I would come back after work... Well, now I know and I appreciate what my mother did. Perhaps this was the reason why I decided to look after my grandson because my mother helped me a great deal in my life and perhaps I’d like to pass it on. That’s what I think [PD25_F].

The quotations above indicate reproduction of social order based on the norm of moral reciprocity and fulfilment of social expectations. As a rule, it is elderly people who act as ‘guardians of the order’, a finding which is well documented by cultural anthropology. It is also worth remembering that old age is a social construct with no fixed borderlines. It is dynamic, with different meanings ascribed to it in different communities and different periods throughout history. Some societies attribute high status to the elderly whereas others exclude them from their community (cf. Vincent 1995), or even are violent against them (cf. Tobiasz-Adamczyk 2009), the latter also being found in traditional societies (cf. Bois 1996).

One of the quotations (PD25_F) presents the norm of moral reciprocity as the key mechanism underlying generational succession. By taking care of her grandchild, the woman enables ‘the young’ to be fully active on the labour market:

¹³ Transcription codes are provided at the end of each quotation. For instance, PD17_F means transcription of the seventeenth interview conducted with a female respondent.

I decided it was time to give way to the young, let them go to work. And to spend more time with my grandchildren because I know they also need me. I started to pamper them a lot [PD41_F].

Ann Gauthier calls such grandparents ‘educational subcontractors’. They live within relative geographic proximity of their grandchildren. This type of intergenerational relations entails high frequency of visits, maintenance of those relationships within the home, assistance to older grandchildren with homework, and care for younger grandchildren. Gauthier writes: ‘The fact that grandparents look after their grandchildren is actually a continuation of the help that is provided to married children, which is a typical way of expressing intergenerational solidarity.’ (Gauthier 2001: 302).

The respondents very often describe care provided for grandchildren in the context of old age. In the informants’ opinion, old age begins exactly when one ‘needs’ to take care of grandchildren. The role of a grandmother (or, less frequently, a grandfather) who looks after her grandchildren seems to be a crucial ingredient in the construction of the final stage of an individual’s life:

She [daughter—author’s comment] has two children and a job. I wanted to help her in those chores because it’s hard to reconcile a job with raising the kids. And what are grannies for anyway? [PD39_F]

Researcher: What does old age mean to you?

Informant: When the time comes for me to look after my grandchildren. [PD38_M]

Although the respondents themselves admit that taking care of grandchildren is not much of an effort for them, i.e. they provide care motivated by love for their grandchildren and children, yet this activity is usually performed at the expense of leisure:

R: And when is your free time?

I: I have free time when I’m not working.

R: And what does it mean when we say that someone has free time?

I: What does it mean? Well, you have time for yourself, for your family, for your grandchildren [...] I spend it [free time—author’s comment] with my grandchildren and children but I dream about having time just for myself [author’s emphasis], to take a break from it all, from problems. I dream about that kind of relaxation. [PD10_F].

Generational succession occurs not only within intergenerational relations in the family but also in the society at large (relations between cohorts):

[...] I decided that before retiring I will move to a part-time job... One reason was that... well... I have lots of young staff, many young nursing graduates who had no jobs. I was in a good situation, I just could afford it and work less, on a part-time basis. And as regards... I’d like to add that... As far as... The result was that it was possible to take on one young nurse to our ward, and she received that other half of my full-time job that I had given up. [PD41_F].

My manager suggested that I could retire because he saw I had a sufficient service length for retirement. In fact, when an old worker is entitled to retirement, it would, sort of, be a pity to stay on the job which a younger person can take up. And that is right, in a way. [PD21_M].

[...] Yeah, that was certainly my own voluntary decision, nobody tried to persuade me. There comes a moment in life when you realise you’ve done a whole lot and you feel you’ve done enough. You need to

make room for the young. As for my doubts, I did have doubts, I had had an opportunity to retire one year earlier but I really wanted to make sure that my children would manage. [PD11, M].

These quotations indicate a few important aspects related to intergenerational solidarity in both a narrow sense (intergenerational relations in the family), and in the broader sense (intergenerational relations in the society). In their comments, the respondents express the social belief that young workers are more valuable and effective than old ones, which is why an older worker needs to 'make room' for them. Moreover, retirement is a 'tragic event', particularly for men, and entails a loss of power and prestige, combined with assumption of new social roles (caregivers) associated with lower prestige. Transition to retirement in the context of generational succession and the resulting loss of power may explain why women are more likely than men to perform work which is socially associated with low prestige, a phenomenon which has been demonstrated by numerous studies. Those two factors (retirement as a loss of power and retirement as a way to make room for the young) comprise the culturally defined strategy of generational succession on the labour market (cf. Graebner 1980) with culturally-embedded social expectations towards the elderly. They focus, above all, on providing care to either grandchildren or old parents and deny, in a sense, the claim made by Ernest W. Burgess about the worthless social roles fulfilled by old age pensioners, described as 'imprisoned in a roleless role' (Burgess 1960). In fact, the norm of moral reciprocity and the generational succession mechanism very often leave ageing people, mostly women, 'sandwiched' between two caregiving burdens:

I took care of my father, until his death. And he died when he was... 84. He was alone so I helped him, **you know, like people would do with their fathers** [author's emphasis]. And then first my first granddaughter was born, and then another one, so I helped my daughter to look after them because two young children are quite a handful. [PD50_F].

Conclusion

The Polish society has strongly rooted expectations towards grandparents and adult children. In the case of grandparents, those expectations define their solidarity with the younger generations expressed through assistance in child care, provided for their own children. In turn, children are expected to provide support for their elderly parents (grandparents). As I have demonstrated in this paper, social expectations are correlated with the support (un)available from public institutions. Countries where social expectations related to grandchildren and grandparent care are fulfilled are characterised by low public outlays on institutional care providers.

Poland is a country where the absence of public care institutions pushes citizens, especially women, out of the labour market at the pre-retirement age (50–59 y.o.). The social expectations are fulfilled through the mechanism of generational succession in the family and at the workplace. This is a push-and-pull mechanism. The *push* aspect is related to the workplace: people who reach pre-retirement age and have the opportunity to retire early would leave their jobs in order to 'make room for the

young', as they themselves put it. The *pull* aspect is related to the family lifecycle: when grandchildren are born, an expectation arises that grandparents will help to look after them. When this is combined with the need to look after ageing parents, people are more likely to give up work and look after their grandchildren.

Intergenerational relations, described in literature using the notion of 'intergenerational solidarity', represent not only a source of emotional closeness between generations but also a source of potential tensions provoked by the mechanism of generational succession, regulated by the norm of moral reciprocity. Poles' attachment to their families and the mutual emotional bond between generations (factors which are stressed in the public debate and legislative solutions) must not obscure the fact that early exit from the labour market entails a higher risk of poverty for the elderly, especially for women. Moreover, the proposed legislative proposals on retirement age are not accompanied by thinking about the actual drivers of such early exits. The proposed amendments assume that citizens will continue to fulfil and maintain social expectations (correlated with the absence of public care institutions) alongside the stereotypes on who should take care of 'the young' and of 'the old'.

Generational succession regulated by the norm of moral reciprocity is a source of potential tensions in families. Such tensions are both cultural (normative), and systemic. For instance, the social expectation (cultural aspect of tensions) that grandparents will help their children and look after the grandchildren contradicts grandparents' interest SINCE, given the condition of Poland's pension system, grandparents would be better off working for as long as possible. At the same time, the low statutory retirement age (especially for women), the possibility to retire early and the insufficiency of public institutional care (systemic aspect of tensions) mean that the fulfilment of culture-defined expectations is legally (systemically) justified and sanctioned, thus channelling intergenerational tensions and conflicts. In the case of elderly care, there is a similar succession mechanism which generates multiple tensions. For instance, elderly parents who need support usually receive it from their adult children who themselves are often at a pre-retirement age and already help their own children by looking after the grandchildren. Tensions caused by this situation concern not only early exit from the labour market in response to social expectations but also attempts to reconcile those expectations: how much time should be spent with grandchildren and how much with elderly parents? Also in this case, public institutions in Poland channel the existing tensions, offering *ad hoc* solutions which are unfavourable for caregivers (in the sense of their living after retirement). Those institutions draw on stereotypical ideas of intergenerational relations where social expectations are excused in view of the existing emotional bonds. As an example, let us quote a comment made by a Polish MP who took part in the public debate in 2010, when the Polish Constitutional Court issued its judgment on unequal retirement age for men and women in Poland:

Women have the right to retire early because Polish women attach a great importance to family life, even at the expense of their career. There is a belief that the woman's role is to raise children, or grandchildren. We cannot just look at the financial aspects. Let us appreciate the cultural aspect as well. (Kostrzewski and Miączyński 2010).

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