Aging and Family Life: A Decade Review

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Abstract

In this review, we summarize and critically evaluate the major empirical, conceptual, and theoretical directions that studies of aging families have taken during the first decade of the 21st century. The field has benefited from an expanded perspective based on four overarching themes: (a) complexity in emotional relations, (b) diversity in family structures and households, (c) interdependence of family roles and functions, and (d) patterns and outcomes of caregiving. Although research on aging families has advanced theory and applied innovative statistical techniques, the literature has fallen short in fully representing diverse populations and in applying the broadest set of methodological tools available. We discuss these and other frontier areas of scholarship in light of the aging of baby boomers and their families.

Keywords

aging families; intergenerational relations; caregiving; siblings; marriage; widowhood

Introduction

In this review, we summarize and critically evaluate the major empirical, conceptual, and theoretical directions that social scientific studies of aging families have taken during the first decade of the 21st century. Scholarly interest in aging families has accelerated in recent years, spurred in part by rapid population aging and increased global concerns about the vitality of systems of care and support for the aged, as well as structural and compositional changes in families first experienced in large numbers by the baby-boom cohort that now stands on the threshold of old age.

Improvements in life expectancy have changed the structure of multigenerational families; joint survivorship within and across generations has resulted in extended periods of support exchanges (including caregiving) and affective connections over the life span. At the same time, relationships in aging families have become more fluid and less predictable, as reduced fertility and increased rates of divorce, remarriage, and stepfamily formation have altered the microcontext in which intergenerational, spousal, and sibling relationships function. The implications of increased diversity in kinship structures for such practical outcomes as support and caregiving to older family members have yet to be parsed but remain important concerns in light of declining filial commitment and the aging of support providers and recipients.

Despite efforts to represent aging families more holistically, empirical research in this area still tends to be segmented by relational type, specifically affiliations between parents and adult children, grandparents and grandchildren, husbands and wives, and siblings. Our

reading of the literature over the past decade across relational domains pointed to four overarching themes that organize our critical review of established and emerging areas of scholarship: (a) complexity in emotional relations, (b) diversity in family structures and households, (c) interdependence of family roles and functions, and (d) patterns and outcomes in caregiving. Another overarching characteristic of research published on aging families in the past decade is an increased focus on global concerns, specifically on how family relationships of older adults function differently across national populations and political regimes. This international research informs our review and is integrated throughout the thematic sections.

Although, strictly speaking, all families studied over time are aging, we limit our review to publications that study families of middle-aged and older individuals, including relationships those individuals maintain with younger family members. This review primarily draws on articles published in two streams of scholarship using a complementary strategy to maximize the number of citations in the highest impact journals between 2000 and 2009. Searches were conducted in Family Studies Abstracts and Abstracts in Social Gerontology using the EBSCO host search engine (http://web.ebscohost.com/). We focused on three journals concerned with family relationships (*Journal of Marriage and Family* [*JMF*], *Family Relations*, and *Journal of Family Issues*, searching the terms *aging*, *aged*, and *elderly*) and four journals devoted to scholarship in social and behavioral gerontology (*Journal of Gerontology: Social Sciences*, *Journal of Gerontology: Psychological Sciences*, *Research on Aging*, and *Ageing and Society* (searching the terms *family*, *intergenerational*, *older parents*, *grandparents*, *adult children*, *grandchildren*, *siblings*, *spouses*, and *marriage*). When topics were sparsely represented, we turned to other social and behavioral science journals as necessary. Because of space constraints, illustrative publications rather than an exhaustive list are cited. In selecting research to discuss, we attempted to strike a balance between representing the main substantive topics found in the literature and highlighting those topics judged to be at the frontier of family research.

Emotional Complexity of Relationships in Aging Families

Over the past 10 years, greater attention has been devoted to complexity in aging family relations deriving from conflicting emotions in intergenerational ties, conflicting reports about these ties based on generational perspective, and patterns of change in the perceived quality of marital relations. In this section, we review conceptualizations of later-life family relationships and supporting empirical evidence that have advanced the field by challenging long-standing assumptions about harmony in the emotional content of adult intergenerational relations, agreement in the perception of relationships across generations, and the presence of a late-life rebound in marital satisfaction.

Solidarity and ambivalence

Conceptualizing and measuring the multiple complexities of families in later life has long been a challenge for social and behavioral researchers. The most prominent conceptualization over the past several decades has been the intergenerational solidarity paradigm—a comprehensive scheme for describing sentiments, behaviors, attitudes, values, and structural arrangements in parent–adult child relationships (Bengtson, Biblarz, & Roberts, 2002). However, in the 1990s, it was formally observed that family members may simultaneously hold both warm and antagonistic feelings toward each other—an emotional discordance identified as ambivalence (Leuscher & Pillemer, 1998). Intergenerational ambivalence soon became a significant focus in family research, and in 2002, a featured section devoted to this topic appeared in *JMF*. The ambivalence perspective was portrayed as a competing theoretical orientation to that of the intergenerational solidarity paradigm (Connidis & McMullin, 2002) but was also viewed as complimentary to an enhanced

conceptualization of solidarity that included conflict in its formulation (Bengtson, Giarrusso, Mabry, & Silverstein, 2002). Continuing scholarly integration between these two approaches has benefitted family research by diversifying the conceptual toolbox available to intergenerational researchers who are studying emotional ties in aging families and their consequences for well-being (Lowenstein, 2007).

Scholars have used several types of measurement strategies to identify intergenerational ambivalence: direct strategies that ask respondents to rate the degree to which they have mixed feelings toward a parent or child (Pillemer & Suitor, 2002) and indirect strategies that ask respondents to independently rate the degree of closeness and conflict with a parent or child. The latter approach has used additive scales that describe the intensity of opposing feelings (Willson, Shuey, Elder, & Wickrama, 2006) and categorical techniques—often employing the solidarity model—to identify ambivalent types of relationships in which affection and conflict are both strong (Van Gaalen & Dysktra, 2006).

Research aiming to identify specific issues that induced parental feelings of ambivalence have suggested reasons related to adult children's busy schedules, choice of romantic partners, and parenting styles (Peters, Hooker, & Zvonkovic, 2006), and tensions between norms of solidarity and parents' expectations that their children be more independent (Pillemer et al., 2007). Adult children were more likely to feel ambivalent about older parents to whom they were providing extensive support and who were in declining health, which suggests that parental dependence and role-reversal caused mixed feelings in these relationships (Fingerman, Chen, Hay, Cichy, & Lefkowitz, 2006).

Intergenerational ambivalence as a conceptual tool has found broadened application with regard to the larger social forces that shape family life. For instance, institutional pressures (e.g., the demands of work) that exert competing claims on time and resources of family members are thought to induce stress—what is termed *structural ambivalence* (Connidis & McMullin, 2002). Another broadened conceptualization known as collective ambivalence has been defined as the amount of variation in the quality of intergenerational relationships across multiple children in the same families (Ward, 2008). The concepts of structural and collective ambivalence extend the ambivalence paradigm beyond interpersonal relationships to the more expansive and complex social contexts within which these relationships are embedded.

Ambivalence in intergenerational relationships has been found in several investigations to have negative consequences. Fingerman, Pitzer, Lefkowitz, Birdett, & Mroczek (2008) found that having stronger ambivalent feelings about family members in other generations was associated with worse psychological well-being. Ward (2008) found that collective ambivalence had a similar negative association with well-being outcomes. A five-nation study of older parent–child relations that included measures of intergenerational solidarity or conflict and ambivalence in its protocols found that lower affection and greater ambivalence independently predicted poorer quality of life in the elderly, though the effects were marginal relative to the adverse influence of poor health and low economic resources (Lowenstein, 2007).

Because sibling ties are closer than many family relationships, they also are subject to feelings of ambivalence (Connidis, 2007). Mixed feelings toward siblings may stem from perceptions of parental favoritism—current or past. Retrospective accounts of maternal favoritism in childhood better predicted sibling tension in middle age than did current accounts of maternal favoritism (Suitor et al., 2009). Thus, siblings were more likely to have good relationships with one another in later life if they felt their mother treated them equitably in childhood.

Relational perspectives

Complexity has also been examined in terms of differences in how the partners involved perceive their mutual relationship. Empirical research from the past 10 years has made strides in recognizing that incumbent family members potentially use different subjective criteria to evaluate relationships. Studies that employ dyadic designs capable of comparing assessments across relational partners have suggested that relying on reports from a single informant may produce unique results. For example, Giarrusso, Feng, and Bengtson (2004) found that emotional cohesion between parents and their adult children declined over three decades when assessed from the point of view of the younger generation but not from that of the older generation. Although dyadic reporting discrepancies of this type may be viewed as evidence of bias, they are also informative about theoretical propositions. For instance, the generational stake hypothesis posits that parents are more strongly incentivized to emotionally invest in their children than children are incentivized to emotionally invest in their parents.

Reporting discrepancies have also been found with respect to social support exchanges. Adult daughters tended to overreport the amount of support they provided to older mothers when compared against the amount of support their mothers claimed to receive (Lin, 2008). Similarly, evidence from the Netherlands showed that both older parents and their adult children overreported the amount of help given and underreported the amount of help received, with greater intergenerational correspondence among the better educated (Mandemakers & Dykstra, 2008). The tendency to view oneself (relatively) more as an altruistic provider of support and less as a dependent receiver may be better interpreted within a cultural or social psychological framework than purely as a systematic bias.

Marital quality, age, and aging

How emotional ties between spouses change over the course of a marriage has long been a topic of inquiry in family science. Most cross-sectional studies of marital satisfaction have suggested a U-shaped curve with satisfaction high during the early and late stages of marriage and low during the middle stage (Corra, Carter, Carter, & Knox, 2009). However, research using longitudinal data has suggested that this pattern is overstated and possibly incorrect. For example, VanLaningham, Johnson, and Amato (2001), using national data over a 17-year period, found that marital happiness declined beyond the early years of marriage but continued to decline or remained flat over the later years. Other researchers using the same longitudinal data set, but over a 20-year period, found more stability than change in trajectories of marital happiness; marital quality slightly increased in the later years of marriage and only minimally regained any of its earlier decline (Dush, Taylor, & Kroeger, 2008). In general, these longitudinal studies provide a serious challenge to the long-held belief that marital quality rebounds in old age.

Health and stress appear to play a role in how marital quality changes over time and into later life. Husbands and wives who reported a stronger decline in their spouses' health experienced a greater reduction in their perceived marital quality (Yorgason, Booth, & Johnson, 2009). Marital quality was found to be more strongly associated with chronological age than with marital duration (Umberson, Williams, Powers, Chen, & Campbell, 2005), which suggests that researchers tracking marital trends focus more on life-span changes than on length of marriage. Umberson, Williams, Powers, Liu, and Needham (2005) found that marital quality declined precipitously over an 8-year period in response to stress. In addition, they found that the marriages of those who experienced low levels of stress in childhood were less adversely affected by stress experienced in adulthood. Longitudinal research on marriages generally supports a modest continuous decline in marital quality with aging, but

it also has suggested that poor health and stress, as well as coping resources forged earlier in life, play significant roles in the rate of this decline.

Diversity in Family Structures and Households

In this section, we address the implications of fundamental changes in family and household structures over the past few decades for how elders maintain family relationships and draw on family support. Chief among these changes are increased rates of divorce, remarriage, stepfamily formation, cohabitation, and childlessness.

Divorce and stepfamily formation

Complex family structures resulting from marital disruption and remarriage have variegated family forms such that lines of responsibilities may be blurred or uncertain between generations. A major question addressed in the literature is whether family disruption and reconstitution reduce the amount of intergenerational support available to adults as they age. Research has revealed detrimental effects of parental divorce and stepfamily formation on support that adult children provide to their elderly parents, which has raised concerns about the support portfolio of future cohorts of vulnerable elders with historically high rates of divorce and remarriage (Pezzin, Pollak, & Schone, 2008).

The impact of parental divorce is not equivalent for the intergenerational relationships of mothers and fathers. A significant gender differential was found with adult children having lower contact with divorced fathers and higher contact with divorced mothers when compared to the amount of contact with their stably married equivalents (Shapiro, 2003). A study of frail older parents found that, of all the gender-by-marital status combinations, divorced fathers received the lowest level of personal care from their children (Lin, 2008). Taken together, the evidence suggests that marital disruption has made the filial safety net of elderly men more porous.

However, evidence also suggests that emerging cohorts of elderly parents, including older fathers, may be less socially disadvantaged than those who came before them. Research in the United Kingdom has shown that parental divorce had negligible effects on intergenerational support and contact in early old age (Glaser, Tomassini, & Stutchbury, 2008). The authors conclude that the power of divorce to weaken intergenerational ties has moderated because marital disruption is more normative in contemporary cohorts and therefore more socially acceptable.

Filial commitment of adult stepchildren to their aging stepparents has been shown to be particularly fragile. Research has found that norms of obligation toward older stepparents were consistently weaker than they were toward older biological parents (Coleman, Ganong, & Rothrauff, 2006). Indeed, research has demonstrated that many stepchildren do not define their stepparents as parents or even as family (Schmeeckle et al., 2006), which suggests a potentially muted intergenerational response to elderly stepparents with exigent needs.

Cohabitation

One of the newer changes in the living arrangements of aging families over the past several decades is the increase in cohabitation among middle-aged and older adults. Cohabitation among mature adults has become increasingly common (Brown, Bulanda, & Lee, 2005), though there are substantial differences across nations. For example, cohabiting unions are twice as prevalent among older adults in Finland as in the United States (Moustgaard & Martikainen, 2009). Further, new forms of cohabitation have emerged in northern and western Europe, whereby partners maintain separate households and finances while living together intermittently, a phenomenon known as living together apart (De Jong Gierveld,

2004). Although it remains to be seen whether this more unusual type of partnership will diffuse to the mature population of the United States, it is clear that cohabitation will increase in older age groups as younger cohorts with more liberal attitudes toward relationships ultimately age into their later years.

Concerns over cohabitation among the aged center on whether being in a nonmarital union adversely affects the social, psychological, and physical well-being of the cohabitants. Research in the United States has found that middle-aged and elderly cohabitors have lower psychological well-being and poorer quality partner relationships than their married counterparts (Brown, Bulanda et al., 2005). Hansen, Moum, and Shapiro (2007) questioned whether this latter finding would hold true among middle-aged adults in Norway, a country where cohabitation is relatively common. Their results revealed that married and previously married cohabiting Norwegians did not differ in their relationship quality, which led the authors to conclude that cohabitation was not qualitatively different from marriage. Never-married cohabiting Norwegians, however, reported significantly lower relationship quality than did the other two groups, which suggests that poorer relationship outcomes for midlife cohabitors may be due to social selection of independent-minded people away from marriage and into cohabitation.

Another Scandinavian study, this one in Finland, attempted to discover whether the protection marriage confers against admission to long-term-care facilities extended to older adults in cohabiting relationships (Moustgaard & Martikainen, 2009). Older cohabitors were at greater risk of being institutionalized than were their married counterparts because cohabitating unions were less likely to contain a partner committed to being a caregiver in the home. The overall evidence suggests that instability in nonmarital unions has deleterious consequences in later life, at least in current cohorts of older individuals.

Childlessness

The rapid rise of childless individuals, particularly in the developed world, has produced a fundamental change in family structure through the truncation of intergenerational lineages. Only a handful of studies have examined whether child-free older adults suffer disproportionately from distress or lack caregivers to help them. One study found that the supply of available children was of little consequence to the psychological well-being of aging individuals (Bures, Koropeckyj-Cox, & Loree, 2009). Evidence from Amsterdam suggests that the disadvantage of having smaller-than-average support networks may have been compensated by greater disposable income among childless elders (Dysktra & Wagner, 2007). However, in Australia, Finland, and the Netherlands, childless individuals were more likely than parents to engage in risky health behaviors, which argues for the social control functions of parenthood (Kendig, Dykstra, van Gaalen, & Melkas, 2007). Overall, the balance of research reveals few serious deficits in old age related to childlessness, possibly because childless individuals have adapted along the life course by enhancing their financial resources and developing social alternatives to children.

Interdependence of Family Roles and Functions

In this section, we review literature that emphasizes how role responsibilities are allocated and coordinated in aging families. Research has shown that family actors and relationships are interdependent with each other and with the policy environments in which they are embedded. Under this rubric, we consider studies that have focused on mutuality between different types of intergenerational relationships, between intergenerational and intragenerational relationships, between family members in linked generations, and between family and government support of vulnerable elders.

Grandparents and grandchildren

Recent literature on grandparent–grandchild relationships has revealed them to be emotionally close and predominantly companionate in nature (Mueller, Wilhelm, & Elder, 2002) but highly sensitive to changes in family configurations and circumstances (Kemp, 2007; Silverstein & Marenco, 2001). The middle parental generation forms an important relational bridge that links the two nonadjacent generations, as demonstrated by research showing that conflict between parents and grandparents may have negative consequences for the quality of grandparent–grandchild relationships (Monserud, 2008). Marital discord in the parental generation also has been shown to have adverse effects on the quality of grandparent–grandchild relationships, particularly on the paternal side of the family (Amato & Cheadle, 2005).

The adult children of grandparents are not the only the actors mediating relationships in the three-generation family system. One study found that grandparents' relations with their children-in-law were even more powerful mediators of grandparent–grandchild ties than were relations with their own children (Fingerman, 2004). Grandchildren serve a linking function with respect to the two older generations. The simple presence of a young grandchild in the family has been shown to increase the amount of contact between the parents and grandparents of that child (Bucx, van Wel, Knijn, & Hagendoom, 2008).

Grandparents convey core moral values to their grandchildren (King, 2003) and have been found to influence their grandchildren's religious orientations by strengthening or weakening the influence of parents (Copen & Silverstein, 2007). Systemic perspectives on multigenerational families gain insight by considering how a third generation mediates and moderates relationships between two generations.

In-law relationships

Scholars have come to recognize that intergenerational relationships are also acquired through marriage, and they have begun to investigate in-law relationships with regard to support to aging parents and parents-in-law. A more complete rendering of intergenerational relations must take into account the fact that couples may have four (or more) parents to consider when dividing their time and energy. Findings in the United States have shown that wives tended to give greater priority to assisting their own parents, whereas husbands provided assistance more equally between their own parents and their parents-in-law (Lee, Spitze, & Logan, 2003). Other research has found that married couples were more responsive to the support needs of wives' parents even under conditions of equal competition between the needs of parents and those of parents-in law, thus revealing a strong matrilineal preference in the provision of assistance to aging parents (Shuey & Hardy, 2003).

However, in a patrilineal culture such as China, daughters-in-law more than daughters are important sources of support to their elderly parents-in-law. Not having a daughter-in-law as a support provider was found to increase depression in rural Chinese elders (Cong & Silverstein, 2008). By contrast, older adults in urban China had better subjective well-being when they lived with their daughters than when they lived with their daughters-in-law (Chen & Short, 2008). Research into the complex and culturally sensitive role of children-in-law has emerged as an important topic with strong gender overtones in the elder support literature.

Sibling relationships

Sibling and parent–child relationships have been found to be interdependent with each other. Adult children who had a poor-quality relationship with their parents tended to rely more on

more their siblings for emotional support than did those with a better quality relationship—a compensatory mechanism more common among brothers than sisters (Voorpostel & Blieszner, 2008). There is also evidence that attributes of sibling relationships influence how intergenerational relationships are maintained. Having a sister, a stepsibling, and an emotionally close relationship with a sibling was found to be associated with lower amounts of contact with parents (van Gaalen, Dykstra, & Flap, 2008).

Marriage and widowhood

Family events and circumstances outside the marriage itself influence the quality of marital relationships. For instance, Bookwala (2009) found that marriages were adversely affected when daughters provided care to older parents, whereas marriages of similarly situated sons tended to adapt to the added demands of caregiving. However, the marital quality of older couples did not appear to suffer when adult children became more intimately involved in their lives by becoming residential partners (Ward & Spitze, 2004), which suggests that the impact of intergenerational dependence on marriage may not be symmetrical for parents and children. The effects of family stressors on well-being appear to be multiplicative with respect to spousal and intergenerational relations. Stress induced by marital conflict exacerbated emotional distress felt by adult children newly caring for their older parents (Choi & Marks, 2006).

Widowhood is a transition closely followed by the reconfiguration and adaptation of family roles and functions. Research has shown that widowed persons are less likely than their married counterparts to have a confidant but more likely to receive support from children, friends, and relatives (Ha, 2008). The two-way flow of intergenerational support altered when parents became widowed, such that dependence of parents on adult children increased and dependence of adult children on parents decreased (Ha, Carr, Utz, & Nesse, 2006). Roles outside the family changed as well following the loss of a spouse. Widows were more likely than married individuals to pursue volunteer roles that tended to protect them against depressive symptoms and enhance feelings of self-efficacy (Li, 2007). Similarly, those widows who gave help and support to others experienced a decline in depressive symptoms following spousal loss (Brown, Brown, House, & Smith, 2008).

The transition to widowhood is often considered among the most stressful transitions in later life. Perhaps because it can often be anticipated, characteristics of the prewidowed period have been found to influence the well-being of the surviving spouse. One study found that when a spouse died a "good" death, free from physical discomfort and in the company of loved ones, the bereavement period of the surviving spouse was eased (Lee & Carr, 2007). Many aspects of spousal loss and adjustment are different for surviving husbands and wives —both prior to and subsequent to widowhood. For instance, research has shown that widowers but not widows experienced anticipatory depression prior to spousal loss (Lee & DeMaris, 2007) and, following widowhood, increased their participation in housework (Utz, Reidy, Carr, Nesse, & Wortman, 2004). Adjustment to widowhood also followed different paths on the basis of gender. Men who were instrumentally dependent on their wives and women who were emotionally dependent on their husbands both showed better adjustment to widowhood when they learned they could manage on their own (Carr, 2004). This finding suggests that successful coping with the loss of a spouse may involve altering traditional gender orientations.

Reciprocity and altruism between generations

Research has generally found strong interdependence in flows of time and money support between parents and their adult children. Most studies examining intergenerational resource transfers have found evidence for motivations based on altruism and reciprocity. An altruism

perspective posits that each generation provides to the other on the basis of need: Parents provide money to adult children with the fewest economic resources, and adult children provide social support and care to parents who are in the worst health. On the basis of these criteria, evidence for altruism in adult parent–child relations is irrefutable (Künemund, Motel-Klingebiel, & Kohli, 2005). A reciprocity perspective posits that money transfers from parents to children are later reciprocated by the beneficiaries, who give freely of their time to visit or provide assistance to their aging parents. One study established life-cycle reciprocity of this sort, finding that young-adult children who received more emotional and financial support from their parents provided more social support to their parents decades later (Silverstein, Conroy, Wang, Giarrusso, & Bengtson 2002). This evidence suggests that reciprocal exchanges between generations stretch over a large part of the family life cycle. In the United States, this pattern—known as time-for-money exchange—has held up well across several investigations, although parents in African American and Hispanic families tend to compensate for their lower-than-average financial resources by providing in-kind support (e.g., housing) instead of monetary support to their children (Berry, 2006).

The empirical literature has increasingly taken into account the often-unacknowledged fact that parents differentiate among their adult children when providing help and support. Such differentiation by parents often occurs along the lines of both need (based on a child's poor health and low financial resources) and reciprocity (based on whether the child provided help to the parent) (Suitor, Sechrist, & Pillemer, 2007). Another study found that young-adult children who returned to the parental nest tended to be those who earlier had poor quality relationships with their parents, which offers evidence of selective altruism toward so-called difficult children (Ward & Spitze, 2007). In addition, structural features of relationships have also emerged as determinants of which child parents favor or rely on. Research has found that the youngest child in the family tended to be the one with whom parents were emotionally closest, and the oldest child tended to be the one to whom parents would most likely turn for needed support (Suitor & Pillemer, 2007).

Intergenerational relations and the political economy

Relationships in aging families have been found to be dependent on the larger social contexts in which they are embedded. Cross-national studies have suggested that both economic development and sociocultural factors are responsible for variation in intergenerational support and contact (Broese van Groenou, Glaser, Tomassini, & Jacobs, 2006). The most common narrative in this literature derives from political economy theories that characterize nations by the degree to which care responsibilities are allocated among state, market, and family—a spectrum bracketed at one extreme by social democratic states with strong public welfare provisions and at the other extreme by residualist states with relatively weak public safety nets. Several multinational studies have documented the interconnection between family functions and government structures, showing that older parents tended to have greater interaction with, live closer to, have stronger expectations of, and receive more care from adult children when they lived in nations with less generous social welfare regimes (Hank, 2007; Lowenstein & Daatland, 2006).

A similar political economy paradigm has been used to explain the direction of financial transfers between generations. In Western European countries and the United States, financial transfers are far more likely to flow downstream—from parents to adult children— than in the other direction because of generous public and private pension schemes available to older citizens in those nations (Albertini, Kohli, & Vogel, 2007). Families in developing countries also engage in time-for-money exchanges; however, the direction of resource flows differs from that found in developed countries. In developing countries, parents tend to provide household labor and/or child-care services to their adult children, and adult children provide money to their parents in return (Frankenberg, Lillard, & Willis, 2002).

Cultural values emphasizing filial duty are in line with the absence of public resources, as families survive through mutual exchange across generations (Sun, 2002). However, in more traditional societies that experience abject poverty, adult children used their scarce resources for the betterment of their children rather than their elderly parents (Aboderin, 2004).

Rapid social and economic change in developing countries has opened up lines of inquiry about whether the traditional family safety net is secure for older persons in such regions. Declining family size and rates of intergenerational coresidence are among the major concerns. However, research has found that adult children's expressions of filial piety in China were the same or greater in single-child families as in multichild families, which suggests that deficits in support may be less than expected for aging parents whose fertility was guided by the one-child policy (Deutsch, 2006).

The elasticity of filial norms has been noted in traditional but rapidly developing and developed nations. Evidence from rural Brazil has revealed that intergenerational coresidence in farming communities is based more on meeting the needs of adult children than on the needs of older adults (VanWey & Cebulko, 2007). In Japan, where coresidence between older parents and their adult children has dramatically declined over the past three decades, norms now legitimate a type of shared living arrangement based more on the needs of younger generations and less on cultural mandates to honor the aged (Takagi, Silverstein, & Crimmins, 2007). Similar declines in multigenerational coresidence occurred over a much longer period in the United States, largely due to increased economic opportunities for young adults and reduced control of parents over the lives of their adult children (Ruggles, 2007).

When taken together, findings from international family research demonstrate that a country's level of economic development, political structure, and cultural norms influence transfers of resources up and down generational lines.

Patterns and Outcomes of Caregiving in Aging Families

In this section, we discuss trends in caregiving in aging families that include adult children caring for their elderly parents, spouses caring for each other, and grandparents caring for their grandchildren in custodial and supplemental capacities. We focus on social characteristics that have been found to differentiate levels of involvement in caregiving activities and that lead to differential outcomes in caregivers. Although an obvious implication of aging is that mature adults tend to become recipients of care over time, older adults are also key providers of family care.

Older adults as recipients of care

Family caregiving to impaired older people has become increasingly common, as life expectancy has nearly doubled over the past century (Wolff & Kasper, 2006). Caregiving represents a broad range of activities, including providing personal care, doing household chores, preparing meals, shopping, taking care of finances, providing companionship, checking up regularly, arranging and supervising activities and outside services, and coordinating medical care (Roberto & Jarrott, 2008).

Literature of the past decade has attempted to consolidate and distill what has been learned from the many studies focusing on caregiving. One of the most consistent findings in the elder-care literature is that women provide more family care than men (Silverstein, Gans, & Yang, 2006). A meta-analysis of several hundred caregiving studies found that female caregivers provided more hours of care; were more likely to provide personal assistance; and as a result, experienced greater burden and more depression than male caregivers (Pinquart

& Sörensen, 2006). Caregivers increasingly face the dilemma of balancing their labor-force participation against their caregiving duties, a stressor that tends to affect women more than men. Not surprisingly, caregivers who worked full-time provided lower amounts of care, and their care recipients were at greater risk of having unmet needs than were other caregivers and recipients (Scharlach, Gustavson, & Dal-Santo, 2007). Characteristics of care recipients also make a difference in the caregiving experience. A meta-analysis found that caregivers to dementia victims suffered greater stress and worse physical and mental health than caregivers to recipients without dementia and noncaregivers (Pinquart & Sörensen, 2003b).

Caregiving is increasingly viewed as a team effort, with multiple family (and nonfamily members) trading off and coordinating their care efforts. Although the structure of caregiving is typically hierarchical, with a main care provider who coordinates the efforts of subordinate caregivers, research has indicated a good degree of turnover in the composition of caregiver networks, as well as in primary providers, over time. In one national study, more than half the personnel of care networks—including more than one fourth of primary caregivers—changed in composition over a 2-year interval, this rotation ostensibly helping avoid caregiver burnout (Szinovacz & Davey, 2007). However, the number of care providers per recipient has declined in recent years. Through the decade of the 1990s, there was a 50% increase in the proportion of primary caregivers who had no secondary partner available to help shoulder the load, a worrisome trend that may portend greater stress for caregivers and a weaker safety net for care recipients (Wolff & Kasper, 2006).

Siblings often negotiate among themselves as to who will provide care to an aging parent, which sometimes introduces conflict into the family (Connidis & Kemp, 2008). When inequalities occur in the division of labor among adult siblings, primary caregivers may ask their less involved siblings to contribute more or change their cognitive appraisal of the situation to justify the inequity (Ingersoll-Dayton, Neal, Hall, & Hammer, 2003). Even if siblings find a way to deal equitably with their caregiving responsibilities, advance directives for health care that involve appointing one child durable power of attorney may undermine children's relationships with one another (Khodyakov & Carr, 2009).

Positive consequences of caregiving have received attention in the literature. Although intensive care is often demanding and stressful, it has been shown to enhance subjective well-being and to produce uplifts in mood, as the very act of helping a loved one provides an intrinsic reward (Pinquart & Sörensen, 2003a). Taking a life-span approach to the topic of family elder care, Roberto and Jarrott (2008) noted that the emerging literature on caregiver growth demonstrates a clear, positive impact of caregiving, including improvements in problem-solving abilities, increased self-understanding, and a growing sense of competence.

Spouses as caregivers

Although spouses are second to adult children in their prevalence as primary caregivers, this statistic is somewhat misleading because only half of frail older adults are married with a spouse available to care for them. One study found that, among married middle-aged and older adults with a serious functional impairment, a spouse was caring for about 80% of them (Lima, Allen, Goldscheider, & Intrator, 2008).

The literature commonly compares spouse caregivers with other types of family caregivers, most often adult children. Research has shown that the increase in depressive symptoms following the transition into caregiving was the same for spouse and adult-child caregivers (Marks, Lambert, & Choi, 2002). However, other research has revealed differences in positive outcomes of caregiving based on the caregiver's relationship with the recipient. For instance, adult children derived greater emotional rewards from caregiving than did spouses

(Raschick & Ingersoll-Dayton, 2004), which suggests that positive and negative feelings about caregiving may mix differently depending on the relationship involved.

Among spousal caregivers, gender differences have been found with regard to the impact of caregiving on their daily lives. Wife caregivers tend to suffer greater adverse effects than husband caregivers, such as in the extent to which caregiving duties restrict outside activities (Choi, Burr, Mutchler, & Caro, 2007). Pinquart and Sorensen's (2006) meta-analysis of gender differences in spousal caregiver outcomes found that wives generally experienced greater caregiver burden and depression than husbands, but gender differences were smaller for spouses than they were for other caregiver relationship types. The smaller gender differential for spousal caregivers was attributed to the relatively strong responsibility that spouses feel for their partners.

The experience of spousal caregiving also has roots in the pre-caregiving period of marriages. Spouses who had higher levels of marital disagreement prior to caregiving reported a greater decrease in happiness and a greater increase in depression following their assumption of caregiving responsibilities than did spouses with more favorable marital experiences (Choi & Marks, 2006). Caregivers who reported lower quality marital relationships were also more likely to end their caregiving activities than were those who reported higher quality marital relationships (Duchareme et al., 2007).

Spousal caregiving appears to be sensitive to national context, as well. A study of mature adults in the Netherlands and Germany—two culturally similar nations—revealed that Germans depended on their spouses for support more than the Dutch did; the authors attributed the difference to the weaker public support system in Germany than in the Netherlands (Stevens & Westerhof, 2006).

Grandparents as custodial caregivers

The number of grandchildren being raised by grandparents has increased in all socioeconomic strata and ethnic groups but increased most dramatically in inner-city African American families starting in the 1980s, when those communities were hit particularly hard by the crack-cocaine epidemic, HIV/AIDS, lack of employment, and incarceration of men (Fuller-Thomson & Minkler, 2001). That African American grandmothers step in to raise their grandchildren more often than other racial/ethnic groups do continues a long history of extended-family resilience as an adaptation to persecution and economic deprivation. Although much attention has focused on the vulnerabilities of grandparent-headed African American families, custodial grandparenting remains most numerous in White non-Hispanic families (Deleire & Kalil, 2002).

Caregiving grandparents face challenges that predate their caregiving activities. Studies have shown that caregiving grandparents are more likely than their noncaregiving counterparts to live below the poverty line, receive public assistance, have less than a high school education, and lack access to adequate medical care and supportive services (Baker & Silverstein, 2008). Pathways into caregiving that involve drug and/or alcohol abuse in the parental generation produce the most negative psychological outcomes in custodial grandparents, which provides evidence of accumulated disadvantages in this group over time (Goodman & Silverstein, 2002).

Evidence suggests that the high demand of grandchild care takes a toll on the physical and mental well-being of custodial grandparents (Hughes, Waite, LaPierre, & Luo, 2007). Because grandchildren being cared for by grandparents are at particularly high risk of exhibiting behavioral and emotional problems, it is not surprising that grandparent caregivers have even higher levels of stress than parental caregivers (Musil, Youngblut,

Ahn, & Curry, 2002). Intrafamily strain and poor quality intergenerational relationships also contribute to the poor physical and mental health of caregiving grandparents (Musil, Warner, Zauszniewski, Jeanblanc, & Kercher, 2006). Adopting the caregiver role unexpectedly or off-time has been cited in the literature as a source of stress for grandparent caregivers as well (Landry-Meyer & Newman, 2004).

Although most research has tended to focus on the difficult precursors and stresses of custodial grandparenting, attention also has also been devoted to studying the resources that may offset negative outcomes. Support networks have been found to have palliative effects on the emotional well-being of caregiving grandparents by buffering the deleterious effects of caregiving stress (Gerard, Landry-Meyer, & Guzell, 2006). Engaging in external activities may link grandparent caregivers to social as well as tangible resources that can prove to be beneficial (Baker & Silverstein, 2008). Research has shown that grandparent caregivers who relied on extended family for help and participated in special programs fared better than those who didn't avail themselves of such resources (Lumpkin, 2008). The intrinsic satisfaction derived from caring for a grandchild has been found to ameliorate distress by reducing the sense of burden and increasing positive affect (Pruchno & McKenney, 2002).

Although stress is generally high among grandparent caregivers, notably those with the fewest resources, such as African Americans (Ross & Aday, 2006) and Native Americans (Letiecq, Bailey, & Kurtz, 2008), some evidence suggests that caregiving grandparents from cultures with a strong extended-family tradition adapt more successfully to their custodial role than do grandparents from cultures without this tradition. African American custodial grandmothers, for example, were more apt to know others raising grandchildren and to have themselves been raised by grandparents, thus legitimating this family form (Pruchno & McKenney, 2002). A cross-cultural comparison found that African American grandmothers who were sole providers for their grandchildren and Hispanic grandmothers who were coparenting their grandchildren (with mothers) were less distressed than comparable White grandmothers (Goodman & Silverstein, 2006), which provides evidence that cultural expectations for care arrangements have mental health implications.

Custodial grandparenting is far more common in less developed regions of the world than it is in the United States. Households consisting of older adults and grandchildren of deceased parents are quite common in sub-Saharan Africa countries with high rates of AIDS infection (Zimmer & Dayton, 2005). Many older women in poor African nations are left to care for their grandchildren with few government benefits and largely devoid of kinship support systems (Oppong, 2006). In rapidly developing nations of Asia such as China, it is common for rural grandparents to care full-time for their grandchildren so that their adult children can seek employment opportunities in more prosperous urban regions (Silverstein, Cong & Li, 2006).

Grandparents as supplemental caregivers

Caring for grandchildren on a supplemental basis is quite common around the world. In the United States, 40% of grandparents provide at least 50 hours of care per year for the children of working parents (Hughes et al., 2007), whereas in Europe, 40–60% of grandparents take care of grandchildren at least occasionally (Attias-Donfut, Ogg, & Wolff, 2005). Increased women's labor-force participation and the growth of single-mother households in the United States has provided grandparents with expanded opportunities to provide complementary care for grandchildren, such that the prevalence of grandparents who provide extensive but not primary care exceeds that of custodial grandparents (Fuller-Thomson & Minkler, 2001). In a study of 10 European nations, grandparents in countries with more generous social policies toward children were more likely than those in countries with less generous policies to provide any care for grandchildren but less likely to provide care on a daily basis (Hank &

Buber, 2009). Higher rates of female labor-force participation in more liberal states ostensibly increased the demand for occasional services of grandparents, whereas the greater availability of low-cost day care suppressed the demand for full-time care of grandparents. Evidence is mixed concerning whether providing part-time care to grandchildren is stressful to grandparents. Hughes et al. (2007) found in a national sample that, in contrast to full-time caregiving, part-time caregiving produced few negative effects on grandparents.

Children exposed to stressful family conditions tend to turn to their grandparents for emotional support (Wood & Liossis, 2007) and appear to benefit in their psychosocial development by doing so (Deleire & Kalil, 2002). Evidence shows that strong attachments to grandparents enhanced the mental health of adolescent grandchildren who grew up in a single-mother family (Silverstein & Ruiz, 2006) and who were raised by a depressed mother (Ruiz & Silverstein, 2007). Thus, grandparents serve as key resources to their grandchildren in accordance with emergent family needs.

Supplemental care provided by grandparents has been found to have positive effects on intergenerational relationships. For example, grandchildren who received early care from grandparents tended to have closer relations with them in adulthood than do grandchildren who did not receive such care (Brown, 2003). In Taiwan, adolescents raised in households in which grandparents resided were more likely than other adolescents to be solicitous toward their extended family members (Yi, Pan, Chang, & Chan, 2006). There is some evidence that grandchildren cared for by grandparents later reciprocate by providing care to those grandparents as they age (Fruhauf, Jarrott, & Allen, 2006). An intriguing body of research suggests that the parents of grandchildren being cared for by grandparents are the true beneficiaries of such care and are therefore most likely to reciprocate in this way (see Friedman, Hechter, & Kreager, 2008). Thus, exchange motives may coexist with altruism in explaining why grandparents devote themselves to the well-being of their grandchildren.

Discussion

In this review, we summarized and critically evaluated the empirical literature that has shaped and advanced the study of aging families over the past decade. Mostly relying on research articles published in top-tier family and gerontological journals, we organized our discussion into four thematic areas that cut across different relationships in older families. We revisit these themes in our discussion, first focusing on major substantive issues and gaps in coverage, then reviewing progress and limitations in the overarching theoretical and methodological orientations on which the substantive literature rests, and finally forecasting where we think the leading edge of family scholarship in this area may be heading.

Substantive Issues

Our review suggests that research over the past decade has gone far toward advancing our understanding of variation and change in aging families based on emotional complexity, structural diversity, role interdependence, and patterned caregiving. We comment on each of these areas in turn.

The surge of literature on intergenerational ambivalence reminds us that most family relationships involve a dose of dissonance, harkening back to ideas first put forth by Sigmund Freud about conflicting impulses toward one's closest family members. Although originally viewed as pathological, ambivalence in more contemporary interpretations is viewed as part of the human condition, of the give-and-take between autonomy and dependence and the tension between concern and disappointment. Indeed, dependence and the perception of inequitable exchanges in intergenerational relationships—whether induced by failing health of older parents or by failure of children to launch—is an important

correlate of ambivalent feelings and/or ambivalent behaviors. Whether the discomfiting nature of mixed feelings has positive or negative implications for the subject or object of ambivalence has only begun to be investigated. Many questions remain to be answered. For example, to what degree does ambivalence depend on the family role position of the reporting individual? Are adult children less able to hold conflicting feelings than their parents? And to what degree can the concept of ambivalence be used to describe older sibling and marital relations?

We also discussed literature on complex family structures due to divorce and remarriage, and the resultant families that include half-siblings, stepsiblings, former and new spouses, stepchildren, and stepparents. Given this complexity, it is important to know how "nontraditional" family relationships function, how they are emotionally and normatively connected in service to older relatives, and how older family members form expectations of others in these relationships. The implications of "new" family types—such as those headed by single parents and by cohabiting opposite-sex and same-sex partners—for aging family members have yet to be fully parsed. Blind spots certainly exist in the literature, for example, the almost complete inattention to gay and lesbian couples in later life. Extended families of four or more generations and truncated childless families have to some degree become normalized in U.S. society, but knowledge about them remains sparse. Although Sun and Matthews (2006) estimated that one in three Americans are currently part of a four-generation family, there have been few studies of great-grandparents and their intergenerational relationships. In contrast, research has begun to pay greater attention to in-law and step relationships, filling gaps in knowledge by moving attention beyond the boundaries of the nuclear family. In general, however, family structures have altered in ways that research on aging families has not kept pace.

We note that the impact of social changes on family life—because they typically first manifest early in the family life cycle—do not show up in late-life families until years later. Such changes as increasing ethnic diversity; the proliferation of disrupted, step, and blended families; and the greater legitimacy (and in some states, legality) of same-sex unions, historically lag in the older population. However, there are several reasons it is prudent for scholars to examine social change in aging families before they are in full bloom. First, older adults are interconnected and interdependent with family members whose social milieux have changed in line with contemporary patterns. Older parents may maintain relationships with divorced, remarried, never married, and cohabiting adult children that are quite different from those they maintain with stably married children. Second, the direct impact of social change on the elderly themselves is not far off, and studying the leading edge of elders—those who are most likely to have experienced divorce, stepparenting, and more egalitarian marriages—will provide a window onto the wave of change to come and help anticipate concerns about care and support to older relatives in "new" family environments.

Interdependence among family actors, family relationships, and formal state systems was a central theme in our review that included consideration of conjoint family roles, intergenerational exchange, and variation in the political economy of nations. Research on aging families has only begun to use person-centered approaches that treat individuals as embedded within a web of family affiliations and responsibilities. For example, middle-aged persons often occupy several family roles simultaneously (e.g., spouse, sibling, child of an older parent, parent to an adult child, grandparent to a young grandchild); therefore, it is important to examine these role demands in combination when assessing their impact on individual well-being. In addition, cross-institutional demands need greater attention to determine whether work stress that adult children experience is detrimental to the quality of their intergenerational relationships and impedes their ability to provide care to aging parents. In light of trends toward multiple marriages of shorter average duration, the

mutuality between older husbands' and wives' marital satisfaction is another salient topic in the study of interdependence in late-life families.

Cross-national studies have demonstrated that support exchanges between generations are sensitive to the political economy of the nation-state. Comparative research among nations in the developed world has been critical for identifying state–family trade-offs in how macrolevel government structures influence microlevel family behaviors. Much work remains to be done in rapidly developing countries, where nascent pension and health-care programs for older persons are likely to reduce intergenerational coresidence and support. Government policies toward dependents in the population may ease the demands imposed on family resources for needed care and support but also may crowd in family members as supplemental providers. Specifying the correct causal factors at the macrolevel represents a great challenge in this realm of research. Explaining how context matters needs to be of greater concern, lest conclusions remain at the level of description.

The large volume of literature on caregiving within and across generations has achieved some degree of consolidation by virtue of several meta-analyses and a generally more inclusive and balanced rendering of the caregiving process. The accumulation of evidence suggests that caregivers are embedded in a networklike structure that adjusts in composition over time in response to the changing resources and constraints of providers and the needs of recipients. Systemic and dynamic approaches to caregiving are most informative because they come closest to representing caregiving as it is actually experienced in families. A notable shift in the literature has been that greater attention is paid to older adults as care providers to family members and not simply as passive recipients of filial resources. Research on older individuals as caregivers for their grandchildren and as economic providers to their adult children has proliferated. The literature on inter- and intragenerational caregiving has also begun to question long-standing assumptions about caregiver burden in aging families by better balancing the psychic rewards of enacting a valued family role against the dire consequences documented in much of the literature.

Theoretical Issues

Although much of the literature on aging families continues to rely on established theories of the middle range, modifications to those theories and the emergence of new scholarly perspectives have energized the field. In particular, the ambivalence perspective continues to provide an important reminder of the emotional complexities of intergenerational family relationships in later life, whereas the intergenerational solidarity paradigm that has guided research in this area for some decades has expanded to include conflict, thus making it more compatible with ambivalence theory. Attempts at bridging the two paradigms may provide a theoretical synthesis that will strengthen the rigor and explanatory purview of both. More theoretical work needs to be done to conceptually distinguish perceived (by the subject) and ascribed (by the researcher) forms of ambivalence, as well their unique origins and consequences.

Exchange theory has provided a useful lens for understanding sequential transfers of time, money, and emotion between generations. As aging families increasingly include relationships that are nonbiological and mixtures of biological, legal, and social affiliations, reciprocity and altruism as social forces may weaken or change shape in response to new family structures and intergenerational patterns of resource allocation. What this means for the viability of family support systems for dependent elders remains an important topic for the future.

Although we are struck by the relative absence of macrotheorizing (apart from the implicit use of modernization theory), we conclude that it is potentially healthier for the field to let

many middle-level theories bloom than have a single perspective dominate in a hegemonic fashion. However, feminist, class, and race theories—and their intersection—have achieved little traction as central organizing paradigms in research on aging families published in main family and gerontology journals. Noticeable by their relative absence from the literature are scholarly research articles in top-tier journals that focus on race and ethnicity in later life. Using the EBSCO search engine we found only three articles published in *JMF* between 2000 and 2009 that contained the terms *age* or *aging* and *race*, *ethnicity*, or *ethnic* in their title or abstract. Although the majority of quantitative studies include race and ethnicity as control variables, consideration of intergenerational, spousal, and sibling dynamics in aging families of color has been tangential at best.

Methodological Issues

The development and ready accessibility of advanced statistical techniques have expanded the quantitative toolbox available to researchers analyzing longitudinal, hierarchical, and otherwise complex data sets. The analysis of trajectories of family relationships over long periods of time has benefited from the application of growth-curve modeling. Research studying how aging families vary across various social, political, and filial ecologies— where individuals are nested in larger aggregates—has increasingly made use of multilevel modeling techniques. Application of structural equation and hierarchical techniques have become increasingly common, thus providing answers to questions related to change and context that were previously not answerable and resulting in better specified models and more trustworthy inferences.

At the same time, public availability of large, longitudinal, and nationally representative data sets such as the National Survey of Families and Households, Americans' Changing Lives, Midlife Development in the United States, and the Health and Retirement Study (HRS) have greatly enhanced the scope and richness of research on aging families. Harmonization of measures between the HRS in the United States and similar studies of older populations in Europe, Latin America, and Asia has expanded opportunities for comparative research on aging families on an unprecedented scale. Together the data sets are valuable public assets; they cover a wide array of topics from a variety of disciplinary perspectives, are nationally representative, typically oversample minority ethnic groups, and are easy to access through data-archiving services. Although their scope and accessibility have resulted in a remarkable surge of theoretically informed and empirically rigorous research on aging families, we add a note of caution. The danger remains that these large data-collection enterprises have a homogenizing influence on scholarship by narrowing the spectrum of constructs available for analysis. Thus, one may ask whether at times the availability of particular measures in these well-used studies drives emergent research questions rather than the other way around.

It is also our impression that quantitative analyses of large data sets may have crowded out fine-grained analyses and in-depth qualitative investigations from the leading family journals. Thick descriptions of microfamily environments, narrative analyses, and ethnographic approaches are needed to provide deeper understandings of social and behavioral processes in aging families that quantitative studies can sometimes only infer from correlational data. Qualitative research may best discover the cultural frames that the elderly and their relatives use to negotiate the gap between expectations and behaviors regarding help and support, tensions between dependence and autonomy, residential decisions, and resource allocation strategies in aging families.

Our review suggests that research on aging families still tends toward segregation based on family position and the relationship under investigation. Such balkanization, for instance, prevents grandchildren from being considered in the gerontology literature and grandparents

from being considered in the adolescence literature. Such divisions no doubt come from disciplinary boundaries that tend to divide families into segmented life stages. For instance, until fairly recently, the long-running Adolescent Health Study asked no questions specifically about relationships with grandparents.

Dynamic models are essential for understanding how and why families and relationships change over time and in response to normative and nonnormative events. For instance, caregiving—whether between parents and adult children, grandparents and grandchildren, or spouses—is best understood as a career, with early family antecedents, cyclical involvements, and short- and long-term impacts. Longitudinal models are also best able to resolve questions about reciprocity between family members over the adult life span, the long-term evolution of sibling ties, the course of bereavement and recovery among widows and widowers, trajectories of marital happiness and unhappiness for husbands and wives, the persistence of ambivalence and conflict in intergenerational relations, and whether adverse selection or exposure to risk is more important in explaining the poor well-being of caregiver grandparents than the caregiving itself. It is our impression that longitudinal analyses have become more common over the past 10 years but still are less represented than family science demands to answer key descriptive and explanatory questions about the aging of families as a lifelong process. To adequately understand aging families, research must study the process of incremental change and stage-sequential transitions in family relationships and systems over time, as well as their antecedents and long-term consequences.

The Future of Research on Aging Families

In the middle of the decade we just reviewed, the National Institute of Child Health and Human Development charged a prominent team of scholars with setting the agenda for the demographic study of family change and variation over the next quarter century (Seltzer et al., 2005). Their recommendations for the study of aging families called for greater focus on how flows of assistance, resource sharing, and kinship obligations have been affected by the emergence of new family forms caused by declines in fertility, and increases in divorce, remarriage, nonmarital childbearing, and grandparent-headed households. In more general terms, they called for an integrated life-course approach that considers multiple family actors over the entire life span. We agree with their assessment, and in our broad reading of the literature, we note that the empirical literature in the first decade of the 21st century has moved us closer, if perhaps modestly, to achieving these goals.

An ambitious agenda lays ahead, one that requires data that do not yet exist and methodologies still to be perfected. However, we are sanguine about the future of aging family studies given the innovative paradigms that have gained footholds, the expanded use of longitudinal data, and the ever-widening global lens over the past 10 years. The coming decade will surely allow for direct tests of hypothesized scenarios at which we have only been able to glimpse in the previous decade—namely whether baby boomers, with high rates of divorce, remarriage, and childlessness (and as of late, poor retirement prospects)—will in later life be adequately served by their family networks. We are cautiously optimistic about the fate of aging families, given the historical evidence showing time and again the resilience of family life to altered environmental conditions, and we anxiously await the research to come.

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