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THE COVID-19 PANDEMIC AND SOCIAL SUPPORT. ANALYSIS OF THE IMPACT OF LOCKDOWNS ON INTERGENERATIONAL FAMILY TIES IN EUROPEAN SOCIETIES

ABSTRACT

Social support is one of the most important areas around which research on intergenerational ties is focused. These, in turn, are most often shaped on the basis of family ties. The lockdown periods during the Covid-19 pandemic in 2020 and 2021 significantly reduced the frequency of contacts with immediate family members living separately (parents, children). But what did this impact look like in terms of social support? Were there any noticeable differences in the scope of social support provided to parents and adult children? Did lockdowns result in one of these groups receiving support from relatives more often than the other? In order to answer the questions posed in this way, the author analyzed existing data from the SHARE Corona Survey 1 and SHARE Corona Survey 2. In these surveys, respondents aged 50 and over were asked questions such as how often they helped their parents or children living separately with necessary matters. The next questions concerned the frequency of personal care provided to parents and children. The results indicate that respondents were more likely to support their parents than their children.

KEYWORDS: *intergenerational ties in the family, social support, personal care, assistance in handling necessary matters, Covid-19 pandemic,*

INTRODUCTION

Intergenerational ties are most often observed in the family environment and constitute a particular type of social bonds occurring between generations. They concern the private, and sometimes even very intimate, area of an individual's experiences. Analyses of intergenerational ties often focus on investigating the frequency of contacts. During the Covid-19 pandemic in 2020 and 2021, most countries decided to implement lockdowns, the obvious consequence of which was to limiting social contacts, even with immediate family members living separately. The second, but equally interesting, area of research on intergenerational ties is social support (Fingerman, Sechrist, Birditt, 2013, p. 64). The analysis of the impact of the Covid-19 pandemic on this area of family intergenerational ties is extremely important. Epidemiological control measures, physical distance, travel restrictions, orders to stay indoors and similar measures introduced during the first two years of the pandemic in almost all European countries limited individuals' access to support, both formal and informal (Bergmann, Wagner, 2021, p. 2, Evandrou et al., p. 2). Informal care is most often provided by spouses,

children, other family members, as well as friends, neighbors, etc. (Tur-Sinai, 2021, p. 3; Roth, Fredman, Haley, 2015, p. 310; Colombo et al., 2011, p. 20). The isolation order should therefore result in limitations in the scope of support for immediate members of one's own families living separately (children, parents). Such a situation would be dramatic, because long-term care is provided in as many as 80% of cases by informal caregivers, who, depending on the adopted definition and measures of informal care, constitute from 10% to 25% of the population in individual countries (Tur-Sinai, 2021, p. 3, Zigante, 2018, p. 7; Tur-Sinai et al., 2020a, 975; Tur-Sinai et al., 2020b, pp. 2-3). So, how did Europeans behave during the lockdowns in 2020 and 2021? Did they support their family members living apart? Has the pandemic caused changes in this regard?

The following article attempts to answer the question of whether the lockdowns introduced during the first waves of the Covid-19 pandemic had an impact on intergenerational family ties in the area of social support in European societies. If so, was the impact positive or negative? Were there any noticeable differences in the scope of social support provided to parents and adult children? Did lockdowns result in one group receiving support from relatives more often than the other?

The analysis used data from representative SHARE Corona Survey 1 and SHARE Corona Survey 2, conducted among respondents aged 50 and over, between June and August 2020 and between June and August 2021, i.e., a few weeks after the peak of the first waves of the Covid-19 pandemic, when restrictions were already loosening in most European countries. Unfortunately, no further rounds of testing were carried out during the later waves of the pandemic. Due to the restrictions related to the pandemic, the research was conducted by telephone; these were computer-assisted telephone interviews – CATI. It is important to note that the surveys were conducted on the same group of respondents. Thus, comparison of their results makes it possible to indicate whether the situation of the respondents has changed or remained the same, with unchanged external conditions such as the epidemiological situation (declining number of infections in both periods studied) and similar restrictions in public life (gradual lifting of restrictions) (Bergmann, Wagner, 2021, pp. 3-4; Scherpenzeel et al., 2020, pp. 217-218, Abramowska-Kmon et al., 2023, pp. 9-11).

SHARE is a multidisciplinary panel study characterized by its methodological rigor, offering insights into the health, socio-economic status, and social and familial connections of respondents aged 50 and over. The data collected as part of this study are based on random, representative samples and provide the opportunity for comparisons on an international scale (Bergmann, Wagner, 2021, pp. 3–4; Scherpenzeel et al., 2020, pp. 217–218).

INTERGENERATIONAL TIES IN THE FAMILY

When trying to define what intergenerational ties are, just as in the case of defining social bonds, we encounter a dispute between the structural and psychosocial standpoints. From a structural point of view, intergenerational ties would be the same as objectified systems of regulating interactions. This would allow people from different generations to live together in one society and make it a coherent whole, giving it its own identity. On the other hand, the psychosocial perspective places intergenerational ties in individuals and their cognitive structures – through a sense of belonging and emotional structures – through a sense of approving awareness. Consequently, intergenerational ties become one of the components that shape the individual's identity (Giza-Poleszczuk, Marody, 2006, pp. 22-24).

Both viewpoints identify intergenerational ties as a factor, or rather as a mechanism that consolidates individuals into coherent entities. However, they vary in terms of how they locate and emotionally evaluate these ties, as *conscious and approved tie is akin to an „umbilical cord* that sustains an individual's connection to a specific social structure, whereas the objectified and imperceptible tie functions as a *leash* that holds individuals captive within the social whole” (Giza-Poleszczuk, Marody, 2006, pp. 23). The consequence of this inconsistency is the problem with verification of the thesis, so popular nowadays, which states that social and intergenerational ties are breaking down as a result of the progressive process of individualization of individuals in a globalizing world (Giza-Poleszczuk, Marody, 2006, pp. 21-49; Qi, 2016, pp. 40). On the other hand, researchers increasingly emphasize that it is not a crisis

but rather a change in the nature of bonds as emotional and qualitative factors become more significant (Linek, 2023, pp. 612; Szyszka, 2020; Slany, 2020).

In this article, intergenerational ties are examined from a two-fold perspective, capturing both the objective and subjective dimensions of social reality (Malikowski, 1979, pp. 12-15). It is the body of social relations that bind members of different generations and their mutual attitudes. In other words, the intergenerational tie is conceived, on the one hand, *in the manner of a Durkheimian social fact, as a sui generis reality that exists independently of individuals, imposing upon them a (moral) compulsion; on the other hand, it is seen as an intrinsic reality, a psychological characteristic of the individual, signifying a positive engagement with others or with social structures* (Giza-Poleszczuk, Marody, 2006, pp. 22).

Referring to Paweł Rybicki's definition of social bond, the intergenerational tie can be divided into potential bond, which manifests itself in views and attitudes concerning other generations, and actual bond, expressed in specific behaviors and actions of individuals towards other generations. The actual bond pertains to the sphere of reality, which is objective. In contrast, the potential bond belongs to the sphere of consciousness that is of a subjective nature. It is of note that the potential bond does not always coincide with the actual bond. It is frequently observed that specific actions contradict certain attitudes (Rybicki, 1972, pp. 382). An example may be the declared intention to care for elderly family members; however, when actual support becomes necessary, it has been observed that some families opt for the assistance provided by institutions established for this purpose.

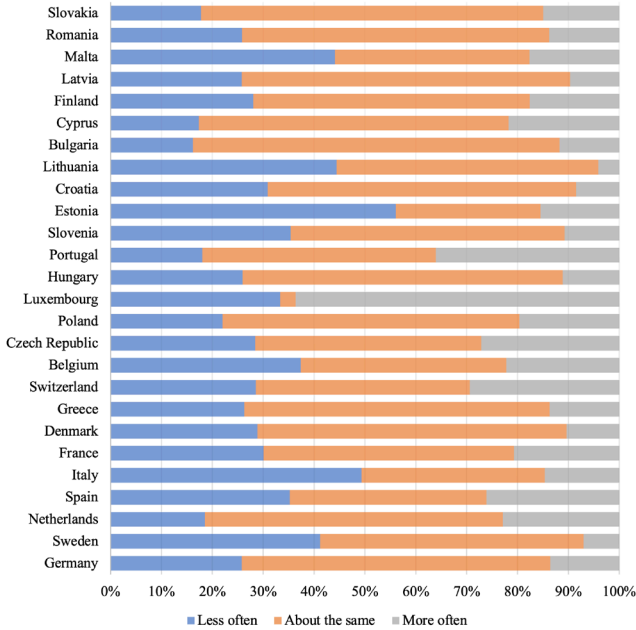
Intergenerational ties are most commonly formed on the basis of familial ties. Solidarity between children and their parents is formed within the family during the process of socialization. This is why parental bonds are regarded as one of the most important interpersonal relationships (Linek, 2023, pp. 610), which underscores the rationale for analyzing intergenerational ties within the family setting. *Among the various environments in which a human functions, the family holds a special place. It is the fundamental life context, an embodiment of stability and continuity, grounded on intimate bonds expressed through direct and enduring interactions. The family is the most evident example of a community based on a network of mutually dependent and interrelated roles* (Bieńko, 2006, pp. 106).

INTERGENERATIONAL SUPPORT IN EUROPEAN SOCIETIES DURING THE FIRST WAVE OF THE COVID-19 PANDEMIC IN 2020

Studies on intergenerational relations typically concentrate on three expansive topics: (a) the strength of emotional bonds, (b) the exchange of social support, and (c) the impact of these relationships on an individual's well-being (Fingerman, Sechrist, Birditt, 2013, pp. 64). The subject of the analysis in the article is the area of social support. It is also defined as functional solidarity, which is based, among other things, on mutual assistance (Georgas et al., 1997, pp. 306-307). Family support can be considered at several levels. Firstly, it can be the support of elderly parents requiring help from now-adult children, and secondly, the support of now-adult and often independent children by their parents. In developed countries, the latter is the case for most of an individual's adult life. In contrast, help for parents occurs only when they require care, which is usually when they are older (Fingerman, Sechrist, Birditt, 2013, pp. 66-67; Fingerman et al., 2010, pp. 87-88; Son et al., 2007; Grundy, Henretta 2006, pp. 707-708).

The SHARE Corona Survey 1, conducted in the summer of 2020, involved 26 countries and respondents were asked several questions about supporting their family members. One of them concerned providing help in obtaining necessities such as buying food, medicines or other household repairs. The second question used in this analysis concerned the exercise of personal care. Separate questions were asked about the support of children living separately and parents living separately.

Chart 1. *Help provided to own children to obtain necessities (e.g. buying food, medicines or urgent repairs in the household) compared to the period before the outbreak of the pandemic (in %) (children living separately)*

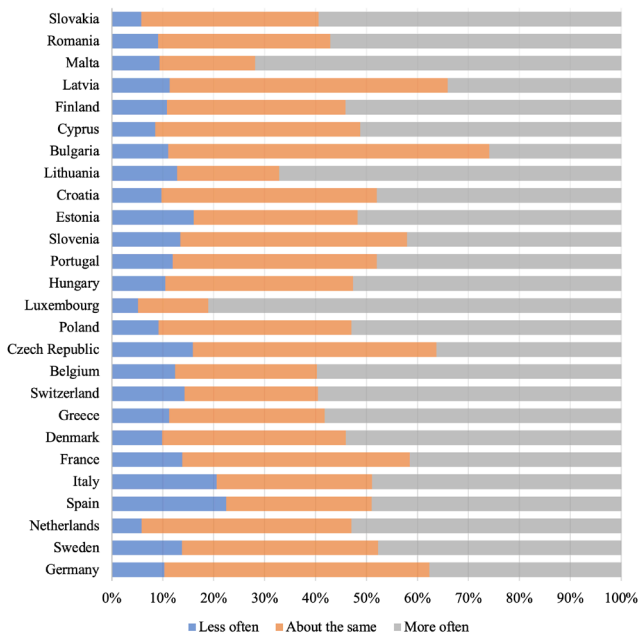


Source: own calculations based on: Börsch-Supan, A.(2022), Survey of Health, Ageing and Retirement in Europe (SHARE) Wave 8. COVID-19 Survey 1. Release version: 8.0.0. SHARE-ERIC. Data set. DOI: 10.6103/SHARE.w8ca.800

In 15 countries: Germany, Sweden, the Netherlands, Denmark, Greece, Poland, Hungary, Slovenia, Croatia, Lithuania, Bulgaria, Cyprus, Finland, Latvia, Romania, Slovakia, half or more of the respondents among those who provided help in obtaining necessities to their own children living separately did it about as frequently. The answer *less frequently* was given by a higher percentage of respondents than the answer *more frequently* in most of the countries analyzed. However, the differences in the percentage of indications for these responses were the largest in Estonia (56.1% *less frequently*; 15.5% *more frequently*), Lithuania (44.4% *less frequently*; 4.12% *more frequently*), Italy (49.3% *less frequently*; 14.7% *more frequently*) and Sweden (41.2% *less frequently*; 7% *more frequently*). The opposite

situation (more frequent indications for the answer *more frequently* than *less frequently*) was observed in countries such as: Luxembourg (63.6% *more frequently*; 33.3% *less frequently* – this is an interesting case in general, because the percentage of indications for the answer *less frequent* is very high anyway, and only few people, i.e. 3%, answered *about as frequently*), Portugal (36.1% *more frequently*, 18% *less frequently*) and the Netherlands (22.9% *more frequently*; 18.6% *less frequently*). Similar percentages of indications for these two categories of responses were recorded in countries such as Switzerland, the Czech Republic, Poland, Bulgaria, Cyprus and Slovakia. In general, however, it should be noted that a decrease in the frequency of help provided to children in this area was observed.

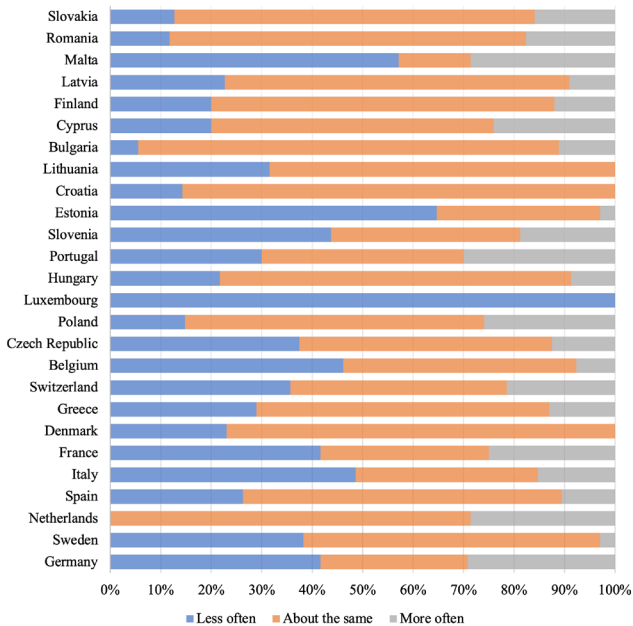
Chart 2. *Help provided to own parents to obtain necessities (e.g. buying food, medicines or urgent repairs in the household) compared to the period before the outbreak of the pandemic (in %) (parents living separately)*



Source: own calculations based on: Börsch-Supan, A.(2022), Survey of Health, Ageing and Retirement in Europe (SHARE) Wave 8. COVID-19 Survey 1. Release version: 8.0.0. SHARE-ERIC. Data set. DOI: 10.6103/SHARE.w8ca.800

In the case of help provided to parents, the situation was different, i.e. more respondents gave an answer indicating that parents were more frequently supported in dealing with necessary errands than less frequently. This situation took place in all the analyzed countries. In none of them, the percentages for these responses were even at a similar level. The differences between the indications of these responses were greatest in Luxembourg (81% *more frequently*; 5.2% *less frequently*), Malta (71.9% *more frequently*; 9.4% *less frequently*), Lithuania (67.1% *more frequently*; 12.9% *less frequently*) and Slovakia (59.4% *more frequently*; 5.8% *less frequently*). As for the answer *about as frequently*, it was also less frequently indicated than in the case of help provided to children. More than half of the respondents chose this answer in such countries as: Bulgaria (63%), Latvia (54.5%) and Germany (52%). In other countries, this answer was less frequently indicated.

Chart 3. *Personal care provided to own children compared to the period before the pandemic (in %) (children living separately)*

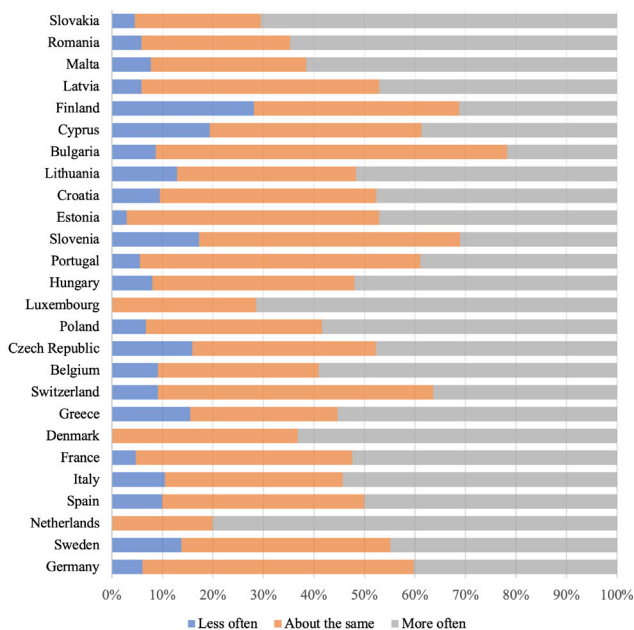


Source: own calculations based on: Börsch-Supan, A.(2022), Survey of Health, Ageing and Retirement in Europe (SHARE) Wave 8. COVID-19 Survey 1. Release version: 8.0.0. SHARE-ERIC. Data set. DOI: 10.6103/SHARE.w8ca.800

As indicated by the data in the case of personal care, as in the case of help provided in obtaining necessities, the frequency of its provision increased to a greater extent in the case of care for parents living separately than in the case of care for children. Considering the age of those surveyed (50 and older), this fact should come as little surprise. When interpreting the data on personal care provided to children, it should be emphasized that only in four countries more respondents chose the answer *more frequently* than *less frequently*, and these were the Netherlands (28.6% *more frequently*; 0% *less frequently*), Poland (25.9% *more frequently*; 14.8% *less frequently*), Bulgaria (11.1% *more frequently*; 5.6% *less frequently*) and Cyprus (24% *more frequently*; 20% *less frequently*). In the remaining countries, the situation was the opposite, with the largest differences recorded in Luxembourg (100% for answer *less frequently*), Estonia (64.7% *less frequently*; 2.9% *more frequently*), Belgium (46.2% *less frequently*; 7.7% *more frequently*), Sweden (38.2% *less frequently*; 2.9% *more frequently*) and Italy (48.6% *less frequently*; 15.3% *more frequently*). The answer *about as frequently* was chosen more often in this case than in the case of personal care provided to parents.

In none of the countries analyzed, the percentage of respondents providing personal care to their parents, who provided answer *more frequently* was lower than that of those who provided the opposite answer. The largest differences were recorded in the following countries: the Netherlands (80% *more frequently*; 0% *less frequently*), Luxembourg (71.4% *more frequently*; 0% *less frequently*), Denmark (63.2% *more frequently*; 0% *less frequently*), Slovakia (70.5% *more frequently*; 4.5% *less frequently*), Romania (64.7% *more frequently*; 5.9% *less frequently*), Malta (61.5% *more frequently*; 7.7% *less frequently*), Poland (58.4% *more frequently*; 6.7% *less frequently*), and Belgium (59.1% *more frequently*; 9.1% *less frequently*). The highest percentages, indicating more frequent provision of personal care to parents compared to the pre-pandemic situation, were recorded in: the Netherlands (80%), Luxembourg (71.4%), Slovakia (70.5%), Romania (64.7%), Denmark (63.2%), Malta (61.5%), Belgium (59.1%), Poland (58.4%), Greece (55.3%), Italy (54.3%), France (52.4%), Hungary (52%), Lithuania (51.6%), and Spain (50%). The answer *less frequently* was chosen most often by Finns (28.1%), Cypriots (19.4%), Slovenians (17.2%), Czechs (15.9%), Greeks (15.5%) and Swedes (13.8%). Only in six countries did half or more of the respondents give an answer *about as frequently* (Germany, Switzerland, Portugal, Slovenia, Estonia, Bulgaria).

Chart 4. *Personal care provided to own parents compared to the period before the outbreak of the pandemic (in %) (parents living separately)*

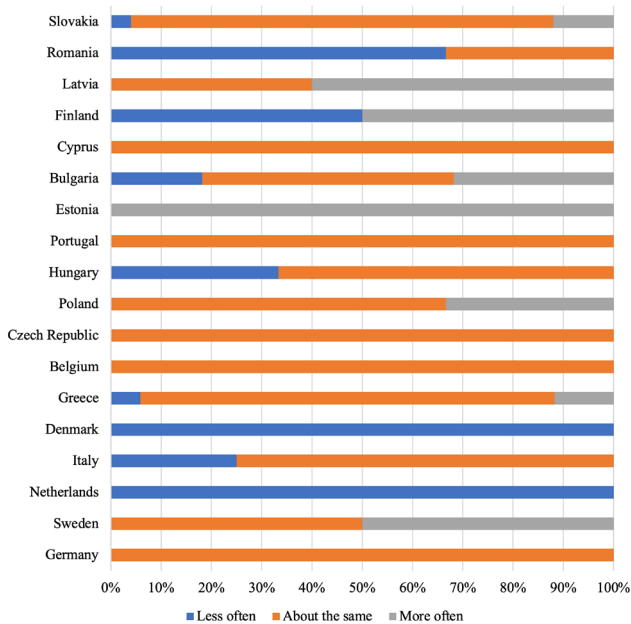


Source: own calculations based on: Börsch-Supan, A.(2022), Survey of Health, Ageing and Retirement in Europe (SHARE) Wave 8. COVID-19 Survey 1. Release version: 8.0.0. SHARE-ERIC. Data set. DOI: 10.6103/SHARE.w8ca.800

INTERGENERATIONAL SUPPORT IN EUROPEAN SOCIETIES DURING THE NEXT PANDEMIC WAVE IN 2021

Only 18 countries (excluding Spain, France, Switzerland, Luxembourg, Slovenia, Croatia, Lithuania and Malta) have participated in the SHARE Corona Survey 2, which took place between June and August 2021. The questionnaire was only slightly modified compared to the 2020 survey. (Abramowska-Kmon, 2023, p. 10). In the area of social support, questions were asked, among others, about the frequency of help and care provided compared to the first wave of the pandemic.

Chart 5. *Help provided to own children to obtain necessities (e.g. buying food, medicines or urgent repairs in the household) compared to the first wave of the pandemic (in %) (children living separately)*

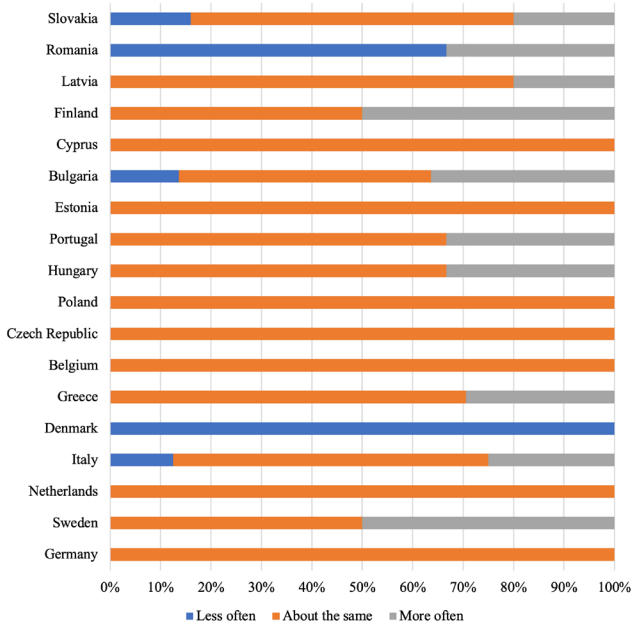


Source: own calculations based on Börsch-Supan A (2022), Survey of Health, Ageing and Retirement in Europe (SHARE) Wave 9. COVID-19 Survey 2. Release version: 8.0.0. SHARE-ERIC. Data set. DOI: 10.6103/SHARE.w9ca.800

In Germany, the Czech Republic, Belgium, Portugal and Cyprus, all respondents answered that they had helped their own children living separately in obtaining necessities as often as during the first wave of the pandemic. This answer was also given by 84% of respondents in Slovakia, 82.4% in Greece, 75% in Italy, just under 67% in Poland and Hungary, 50% in Bulgaria and Sweden, 40% in Latvia and 33% in Romania. In the Netherlands and Denmark, all respondents indicated the answer *less frequently*. This option was also chosen by 67% of respondents in Romania, 50% in Finland, slightly more than 33% in Hungary, 25% in Italy, 18.2% in Bulgaria, 5.9% in Greece and 4% in Slovakia. In Estonia, all respondents helped their own

children more frequently, similarly in Latvia – 60%, in Finland and Sweden – 50%, in Poland – 33.3%, in Bulgaria – 31.8%, in Slovakia and Greece – 12%.

Chart 6. *Help provided to own parents to obtain necessities (e.g. buying food, medicines or urgent repairs in the household) compared to the first wave of the pandemic (in %) (parents living separately)*

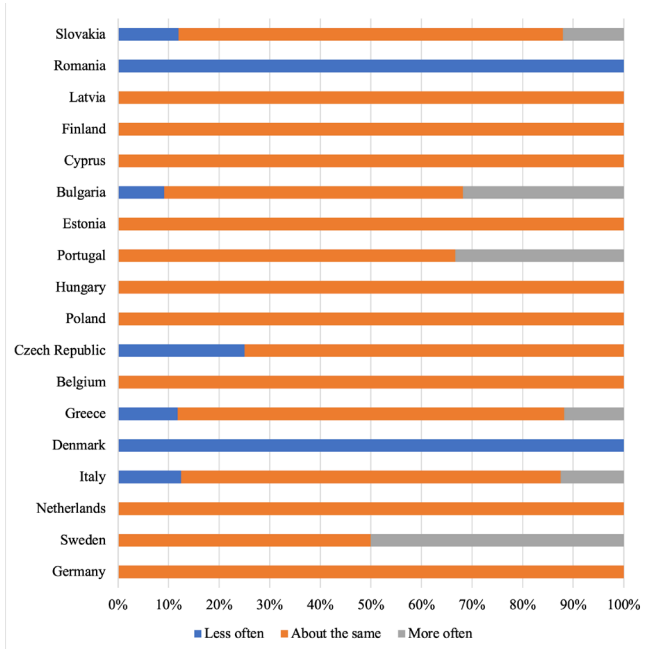


Source: own calculations based on Börsch-Supan A (2022), Survey of Health, Ageing and Retirement in Europe (SHARE) Wave 9. COVID-19 Survey 2. Release version: 8.0.0. SHARE-ERIC. Data set. DOI: 10.6103/SHARE.w9ca.800

As for the frequency of helping parents living separately, in all analyzed countries at least half of the respondents did it about as frequently as during the first wave of the pandemic, while in Germany, the Netherlands, Belgium, the Czech Republic, Poland, Estonia and Cyprus 100% of them provided such an answer. Only 12.5% of respondents in Italy, 13% in Bulgaria and 16% in Slovakia did so less frequently, while in Romania this was the case for almost 67% of respondents, and in Denmark for all of them. Parents were more frequently assisted in this respect by the residents of Slovakia and Latvia (20%),

Italy (25%), Greece (29.4%), Hungary, Portugal and Romania (33.3%) as well as Finland and Sweden (50%).

Chart 7. *Personal care provided to own children compared to the first wave of the pandemic (in %) (children living separately)*

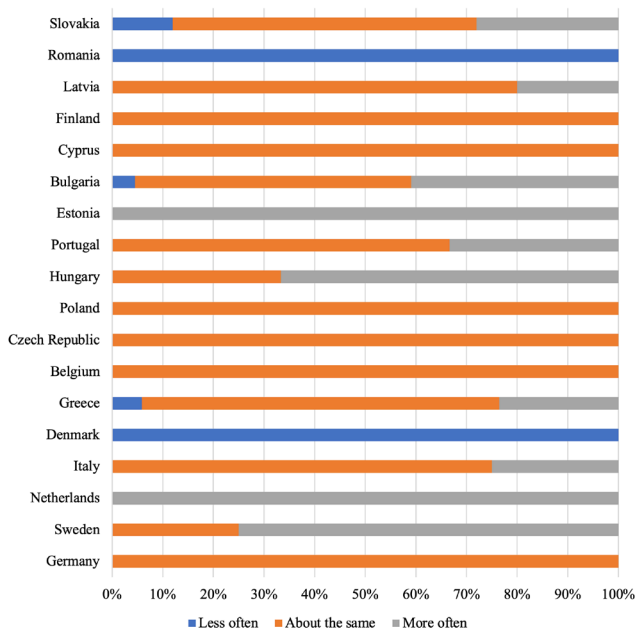


Source: own calculations based on Börsch-Supan A (2022), Survey of Health, Ageing and Retirement in Europe (SHARE) Wave 9. COVID-19 Survey 2. Release version: 8.0.0. SHARE-ERIC. Data set. DOI: 10.6103/SHARE.w9ca.800

The analysis of the frequency of care for children living separately leads to similar conclusions as the analysis of the help provided to them. The dominant responses in this regard were *about as frequently* (Germany, the Netherlands, Belgium, Poland, Hungary, Estonia, Cyprus, Finland and Latvia 100% of indications, Greece 76.5%, Slovakia 76%, Italy and the Czech Republic 75%, Portugal 66.7%, Bulgaria 59% and Sweden 50%) and *less frequently* (Denmark and Romania 100%, the Czech Republic 25%, Italy 12.5%, Slovakia 12%, Greece 11.8% and Bulgaria 9.1%). Only in Greece (11.8%), Slovakia (12%),

Italy (12.5%), Bulgaria (31.8%), Portugal (33.3%) and Sweden (50%), respondents indicated that they were more likely to take care of independent children.

Chart 8. *Personal care provided to own parents compared to the first wave of the pandemic (in %) (parents living separately)*



Source: own calculations based on Börsch-Supan A (2022), Survey of Health, Ageing and Retirement in Europe (SHARE) Wave 9. COVID-19 Survey 2. Release version: 8.0.0. SHARE-ERIC. Data set. DOI: 10.6103/SHARE.w9ca.800

On the other hand, the care of parents living separately was taken just about as frequently (Germany, Belgium, the Czech Republic, Poland, Cyprus and Finland 100%, Latvia 80%, Italy 75%, Greece 70.6%, Portugal 66.7%, Slovakia 60%, Bulgaria 54.5%, Hungary 33.3% and Sweden 25%) or more frequently (the Netherlands and Estonia 100%, Sweden 75%, Hungary 66.7%, Bulgaria 40.9%, Portugal 33.3%, Slovakia 28%, Italy 25%, Greece 23.5% and Latvia 20%). Nevertheless, all respondents from Denmark and Romania chose the answer *less frequently*, as did 12% of the population of Slovakia, 5.9% of Greece and 4.5% of Bulgaria.

CONCLUSIONS

The aim of the article was to check whether the lockdowns introduced in 2020 and 2021 during the first waves of the Covid-19 pandemic had an impact on intergenerational family ties in terms of social support in European societies. The analysis was based on existing data from the representative SHARE Corona Survey 1 and SHARE Corona Survey 2, conducted among respondents aged 50 and over, between June and August 2020 as well as between June and August 2021. For this purpose, the respondents' answers to questions about the frequency of assistance in obtaining necessities provided to parents, as well as children living separately, and questions about the frequency of personal care provided to parents and children were used.

The obtained results indicate that during the first wave of the Covid-19 pandemic in the spring of 2020, the frequency of assistance in obtaining necessities to parents increased in almost all European countries, along with a decrease in help provided to children. A similar situation occurred in the case of personal care, as there was an increase in the number of children caring for their parents and a decrease in the number of parents caring for their children. A study conducted in 2021 showed that during the next wave of the pandemic a greater decrease in the frequency of help provided to children than to parents was observed compared to the situation during the first wave. In the case of parents, in most countries help was provided just as often or more often, and in relation to children the dominant answers were *about as frequently* or *less frequently*. The same situation was observed in terms of care.

This means that in the case of support provided to children, the negative impact of the lockdown introduced during the first wave of the Covid-19 pandemic on intergenerational family ties and a small negative impact during the next wave were noticeable. In contrast, the situation was different in the case of ties with parents. The fact that the respondents are people aged 50 and over means that their parents are elderly people struggling with health problems as well as, in many cases, dependency. This leads to the conclusion that for those in need of support (elderly parents), the COVID-19 pandemic did not have a negative impact on the strength of intergenerational family ties.

Researchers indicate that social support usually flows from parents to children, not the other way around. The support provided to parents usually takes place in situations of their dependency (Fingerman, Sechrist, Birditt, 2013, pp. 66–67; Fingerman et al., 2010, pp. 87–88; Son et al., 2007; Grundy, Henretta, 2006, pp. 707–708). Explanations of this often indicate an emotional connection. Parents are emotionally more connected to their offspring than children are to their parents. In addition, the parent-child bond is, from the point of view of parents, a kind of investment for the future when they are older and require care (Fingerman et al., 2009, pp. 1221–1223; Fingerman et al., 2010, pp. 88–89; Shapiro, 2004, pp. 130–131). Sociological contingency theory considers issues related to the life course of individuals. In developed countries, on the one hand, the period of education is significantly extended, career development is very important for young adults, and a longer dependence of children on their parents in economically well-off families is observed. On the other hand, parental support also applies to those children who deal with single parenthood, need help raising offspring, or experience job insecurity (Fingerman et al., 2009, pp. 1221–1223; Furstenberg, 2000, pp. 898–899).

So the question arises why during the first waves of the pandemic, the situation developed differently and parents received more support than children. In this case, sociological contingency theory can also help with explanations. When elderly parents are unable to perform daily tasks on their own or require care, their children will provide more support to them than to their own offspring (Fingerman et al., 2009, pp. 1221–1223; Eggebeen, Davey, 1998, pp. 940–942). This was the situation during the pandemic, when there was a call for reduced social contact and isolation, especially in the case of the elderly, who were more exposed to the negative effects of COVID-19. Nevertheless, conducting further research in the future, in which an independent variable like the support needs of parents and adult children would be taken into account, is advised to help determine whether this variable influences the amount of support they receive.

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