
Extended Abstract 3-5

Please contact author for paper

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Introduction

The concept of “sandwich generation” appeared in the professional gerontological and family literature in the 1980’s, describing the middle-age generation, and most typically middle-aged women, as “caught in the middle” (Brody, 1981) between two important tasks: caring for children and caring for aging parents. Early literature (e.g., Brody, 1981) described this condition of handling multiple competing demands, along with paid work and being married, as detrimental to the well-being of middle-aged individuals as well as possibly to their aging parents, who might not have their needs met by their overburdened daughters (or sons). However, these reports were usually based on convenience samples (Spitze & Logan, 1990) and the results were therefore not necessarily generalizable to the general population. In fact, demographic studies in the 1980’s and 1990’s suggested that the likelihood of women or men being caught in the middle between care for young children and care for aging parents (Himes, 1994). Rosenthal, Matthews and Marshall (1989) using a small probability sample in Canada and subsequently Spitze and Logan (1990) using a larger probability sample in the U.S concluded that the sandwich generation is not a typical state of middle-aged women or men.

While some studies addressed the prevalence of the “sandwich generation” phenomenon, other studies (e.g., Loomis & Booth, 1995) challenged the nature of its potential adverse effects on those allegedly “caught in the middle”. Using a national sample of married individuals, Loomis and Booth (1995) essentially showed that multigenerational caregiving does not have adverse effects on the middle generation.
This topic has been periodically visited by other researchers (e.g., Spillman & Pezzin, 2000) producing somewhat of a mixed picture, but without concluding alarming results for neither the magnitude nor the gravity of a “sandwich generation” phenomenon.

In spite of no empirical support to an at-risk middle-aged generation, the media and the popular press still frequently discuss the “sandwich generation” providing anecdotal support to the difficulties of mainly women, as well as men, who are caught in the middle between caring for young children, caring for frail parents as well as handling other competing roles such a full time job.

Despite a slight decline in disability rates over the past decade (Cai & Lubitz, 2007; Freedman, Schoeni, Martin, & Cornman, 2007), some of the gains in life expectancy at older ages are years accompanied by chronic disabling conditions and co-morbidity (Crimmins, 2004). Additionally, a large portion of these added years may be accompanied by cognitive impairment (Suthers, Kim and Crimmins, 2003). As a result, it is likely that older parents will require help from their middle-aged children for possibly extended periods of time. At the same time, fertility rates have shown a constant decline (except for the “baby boom” years-1946-1964), suggesting that there are fewer adult children in families to care for their aging parents possibly creating an issue of kin availability (Easterlin, Schaeffer, & Macunovich, 1993). In addition, the age of marriage has been rising for both men and women and there was a trend of delayed childbearing (Casper & Bianchi, 2002). The literature describes an additional trend of lengthening of adolescence, or what sometimes is referred to as “the incompletely launched young adult syndrome” (Skolnick & Skolnick, 2003). Because of various economic trends and the ever-increasing importance of high education in a postindustrial society, the achievement
of a traditional life course of education, career and marriage in the early twenties is no longer easily available. Instead, young adults might need to spend more time in the education system and delay the start of their career as well as the start of their families. As a result, young adults may return home numerous times before they “successfully” empty the nest, and middle-aged parents may need to support their “boomerang children” for extended periods of times.

The Purpose and Significance of this Study

In this paper we describe the prevalence of simultaneous multigenerational support and investigate the possible factors that may be associated with such support. We intend to take into account three types of factors including (1) societal factors including availability of formal services and fertility trends; (2) familial factors including household structure, relationship quality, and exchange of support; and (3) individual factors with an emphasis on fertility behavior such as age at first birth and births spacing.

Our paper contributes to the literature in several unique ways. The first contribution of this study is that we are presenting unique cross national analyses using Old Age and Autonomy: The Role of Service System and Inter-generational Family Solidarity (OASIS). OASIS is a nationally representative five-country study including four European countries—Norway, England, Germany, and Spain, as well as Israel. Europe represents a unique opportunity to study this topic for two main reasons. First, being in the forefront of the demographic transitions of decreasing fertility, increased life expectancy and postponement of childbearing (Kohler, Billari & Ortega, 2004; Wolf & Ballal, 2006), it is beneficial to learn from the European experience. Secondly, and perhaps more importantly, variations in policy environment across various European
countries promote a better understanding of the interplay between factors at the societal, familial and individual levels (Wolf & Ballal, 2007), potentially informing family policy development. In response to a call by Glaser, Tomassini and Grundy (2004) for incorporating more comparative cross national data on family support in research, we feel that our data allow us to consider the various complexities of the Cross-European variation.

An additional contribution of this paper is that we are taking into account familial factors such as family relationship and exchanges of support. As opposed to other European datasets, OASIS includes an array of variables that address familial normative obligations as well as intergenerational behavior. We are able to include these variables in our analyses.

Finally, while we may not address these issues empirically in this paper, we are engaging in a discussion of some possible future trends of other scenarios of sandwich generations. Specifically we discuss the potential development of a “club sandwich generation” of individuals simultaneously caring for three generations. Specifically, we discuss grandparents, who are themselves aging, but who may provide support to surviving very old parents as well to adult children and grandchildren, while fully participating at the workforce.

Theoretical framework: The intergenerational solidarity - conflict model and reciprocity in family care

Intergenerational solidarity is a multidimensional approach representing dimensions along which family cohesion or integration occurs (Parrott & Bengtson, 1999). These dimensions include the following constructs of solidarity: affectual--the
positive sentiment toward other members of the family; associational—the frequency and patterns of interaction; consensual—the degree of similarity in values, attitudes, and opinions; normative—the strength of commitment to perform familial roles and to meet familial obligations; and functional—the degree to which family members actually exchange support (Bengtson & Mangen, 1988; Lee, Netzer, & Coward, 1994). The dimension of conflict—the negative aspect of family relationship, capturing tension and conflict among family members, was later added to the intergenerational solidarity model, changing its name to the intergenerational solidarity/conflict model (Bengtson, Giarrusso, Mabry, & Silverstein, 2002). Several studies (e.g., Bengtson & Roberts, 1991; Parrott & Bengtson, 1999; Whitbeck, Hoyt, & Huck, 1994) have examined interrelations among subsets of the intergenerational solidarity dimensions and the empirical evidence confirms the theory and demonstrates its utility in examining the nature and the quality of relationships between adult children and aging parents.

In the context of this paper, this theoretical framework is especially important in explaining the aspect of caring for parents. While it is natural for parents to care for their offspring, there have been a plethora of attempts in the literature to explain motivations for caring for aging parents.

There is an abundance of evidence that demonstrate a link between normative obligation and actual supportive behavior, the normative and functional dimensions of solidarity. Bromely & Blieszner (1997) suggested that the sense of filial responsibility an adult child feels to provide support for his/her aging parent affects the actual caring for that parent. Silverstein & Litwak (1993) provided empirical evidence which suggests that stronger filial obligation increases the likelihood that adult children will provide
instrumental support. Furthermore, Silverstein, Parrott, & Bengtson (2005) found that among sons, stronger endorsements of norms of familism are associated with greater support. Peek, Coward, Peek, & Lee (1998) suggested that parents might modify their social norms regarding receiving care from adult children (global filial responsibility expectations from adult children) based on their children’s circumstances and resources. Using data on impaired elderly parents who lived in the community, the authors found such adjusted norms (termed specific expectations or behavioral intentions) influence the amount of care received from the adult children. Whitbeck, Hoyt, and Huck (1994) found that filial concern influenced intergenerational help and support exchanges. Willingness to help and support a parent was, in part, mediated by concern for the parent and a sense of duty. Silverstein, Gans and Yang (2006) similarly found that filial norms as expressed by adult children earlier in life are related to the actual support provided to their parents later on in life. In summary, normative and functional solidarity were found to be associated. More specifically, filial norms, held by adult children as well as filial expectations held by aging parents were found to be associated with the amount of help and support provided to aging parents by adult children in times of need.

Other studies affirm a link between Emotional closeness and actual supportive behavior, the affectual and functional aspects of solidarity. For example, using attachment theory as a framework for studying helping behavior towards parents, Cicirelli (1983) found that emotional closeness to parents affects future helping behavior directly. Rossi and Rossi (1990) found similar results suggesting that affective ties affect exchange behaviors in both directions. Support to the significant role emotional closeness plays in supportive behavior was further provided by Silverstein, Conroy,
Wang, Giarrusso, & Bengtson (2002), who found that emotional closeness triggers higher levels of support and suggested that fostering close emotional bonds may be used by parents as an investment that may lead to increased future caregiving. Yet other studies found that contact with parent is linked to actual supportive behavior, which suggests a link between the associational and functional aspects of solidarity. Cicirelli (1983) referred to communication with parents via phone, mail, and visits as attachment behaviors that allow adult children to feel a sense of psychological closeness even if they are no longer physically close to them.

The intergenerational solidarity model as well as other models that explain intergenerational relationships further suggest that there is some reciprocity in caring behavior. Silverstein, Gans, and Yang (2006) discussed the concept of filial norms as an aspect of social capital that resides in family relationships. They discussed social capital as a latent resource that accrues when others feel the obligation to reciprocate and provide something in return for earlier investments. Social capital was defined by Furstenberg and Kaplan (2004) as the “stock of social goodwill created through shared norms and sense of common membership” (Furstenberg & Kaplan, 2004, p. 221). An earlier model—the support bank model (Antonucci, 1990) suggested a similar notion. Support bank is a reserve that parents build early in life through investing money, time, and other resources in their children. Later on in life, parents may draw from this support bank by receiving support from their adult children in times of need (Silverstein, 2005; Silverstein, Gans, & Yang, 2006). Yet another similar concept to discuss intergenerational reciprocity as a form of social exchange across generations is the concept of latent kin matrix. Coined by Riley (1983), this term represents the existence of family ties that may remain dormant.
for long periods of time but may become active as a source of support in times of need. Bengtson (2001) utilized this concept in his explanation of the increasing role of extended family members in the lives of modern families and especially the potential role of grandparents in raising grandchildren.

This study attempts to incorporate measures that address the various dimensions of the solidarity model including affectual, conflictual, associational, and normative and their relationship to functional solidarity, the actual provision of support. These dimensions are especially important in explaining the support to aging parents and may be relevant in differentiating between those caring for children alone or for both children and parents. The study further attempts to incorporate the concept of reciprocity by looking at the role reciprocal help from parents play in provision of such support to them. Our data are cross-sectional and thus represent a “snap shot” of the adult child-parent relationship rather than a longitudinal view that allows us to test whether earlier supportive behavior from parents to children is reciprocated by current reciprocal support. However, our data allow us to investigate the normative view of adult children with regards to the right of parents to get some return on their earlier investments in children.

**Research Questions and Hypotheses**

Our study aims at addressing two general research questions regarding the prevalence and risk factors associated with simultaneous mutigenerational support. Our first aim is to describe the prevalence of the classical “sandwich generation” scenario within a cross-national perspective. We therefore ask: what percentage of respondents who have surviving parents and children are providing regular care to at least one parent
while caring for a child. We consider parental support as providing care regularly to a parent who is either 75 years and above or one that requires help with basic activities such as household chores or personal care. We include parents to children who are under the age of 25 and who still reside at home. We assume that children under the age of 25 who reside at home, are likely to be there because the parents still support them and not vice versa. This assumption is consistent with research demonstrating that intergenerational coresidence is likely to be a result of the adult children’s needs rather than parental needs (e.g., Crimmins & Ingegneri, 1990; Ruggles, 2007). Our interest in children over the typical minor age of 17 stems from the growing documentation of the prolongation of the dependence period of adolescence to the young adulthood as previously discussed. We are therefore suggesting that it is important to extend the traditional view of the “sandwich generation” to include not only individuals who care for young children up to the age of 17, but rather those with coresident young adult children, who are simultaneously caring for aging parents.

Our second study aim is to investigate factors associated with the likelihood of providing multigenerational support. We ask: what are some characteristics that make individuals more likely to be caught in the middle between providing support to aging parents and children. We are interested in exploring several types of factors including societal contextual factors, familial factors and individual factors. First, at the societal level, we are taking into account availability of formal services and fertility trends. We are interested in exploring whether there is indeed less need for parental care in countries where social services are more generous. As will be described in more detail in the methods section of this paper, the countries represented in OASIS were selected because
they represent differing welfare regimes. The relationship between the welfare state and families has long been in a center of debate (Motel-Klingebiel, Tesch-Roemer, & von Kondratowitz, 2003). On one hand, economists have suggested that services offered by the welfare state may “crowd out” families and thus lead to less efficient service provision. This idea is also described in the literature as the substitution hypothesis, suggesting that the provision of services provides a substitution for families. On the other hand, researchers suggested that families and formal services may complement each other by providing services simultaneously. For example, Litwak, Silverstein, Bengtson & Wilson Hirst (2003), guided by task-specific theory, suggest that formal organizations are optimal in managing technical tasks in caregiving while primary groups, such as families, are optimal for managing nontechnical ones. As a result, they suggest that a partnership between formal organizations and primary groups is the best approach to negotiate informal and formal care, with each partner providing a different type of support. Finally, others further suggested that the introduction or existence of formal services may encourage further support from families. This hypothesis is the exact opposite of the “crowding out” hypothesis and is sometimes referred to as the “crowding in” hypothesis (e.g., Kunemund & Rein, 1999).

Most evidence points to a process of “crowding in” suggesting that elderly who reside in welfare regimes that provide generous formal services are more likely to receive support from their children (e.g., Kunemund & Rein, 1999). In a more recent paper using data from the Old Age and Autonomy: The Role of Service Systems and Intergenerational Family Solidarity (OASIS) research project of five countries (Norway, England, Germany, Spain and Israel), Motel-Klingebiel, Tesch-Roemer, & von
Kondratowitz (2005) report that the total quantity of help received by older people is greater in welfare states with a strong infrastructure of formal services. In this study, we are able to directly test the competing hypotheses of “crowding in” or crowding out” by including level of services as a variable in our analyses. We are also able to look at the effect of the total rate of fertility (TFA) for each country on the individual behavior of intergenerational support. We hypothesize that individuals in countries with high fertility rates will be more likely to be in a dual supporting position.

The second group of factors are at the family level. We are interested in exploring the role of reciprocal intergenerational support and the endorsement of familial obligations in determining the likelihood of multigenerational support. Previous research demonstrated that there is a great deal of reciprocity in exchange across generations (e.g., Lowenstein, Katz, & Gur-Yaish, under review). Research further addressed the interplay of the various dimensions of intergenerational solidarity as previously described. We hypothesize that individuals who have strong affectual bonds with their surviving parent(s), those who endorse familial commitment more strongly, and those receiving reciprocal support form their surviving parents are more likely to provide support to their parents and more likely to be in a dual support position than their counterparts.

The third group of factors intends to look at individual differences. We are especially interested in fertility behavior and specifically age at first birth and birth spacing. Based on analyses of dual caregiving by British middle aged individuals, Agree, Bissett and Rendall (2003) suggested that relatively minor changes in age at childbirth could lead to increases in multigenerational support needs for women. Because the peak of caring for aging parents is later in life, postponing childbearing to later years may
cause a “squeeze” of middle aged individuals into a dual support position. We, therefore, hypothesize that individuals who had their first child later in life and who have had a larger spacing between children will be more likely to be caught in the middle between supporting both aging parents and young children. We are also interested in controlling for religiosity level. We are specifically interested in those not religious as previous research (Gans, Lowenstein, & Katz, 2007) shows that those not religious are likely to provide less support to parents.

Methods

Data

We employ data from the *Old Age and Autonomy: The Role of Service System and Inter-generational Family Solidarity (OASIS) study*. OASIS includes data on five countries—Norway, England, Germany, Spain, and Israel, each representing a different regime and familial culture. Data were collected using face-to-face structured interviews with an age-stratified, urban, representative sample of about 1,200 respondents from each country totaling about 6,100 respondents. Please see Lowenstein and Ogg (2003) for a full description of the OASIS theoretical model, design and methodology. As described in Table 1, The five countries are located along a dimension from the presumably more familist pattern in the south to a more individualist tradition in the north (Reher 1998). They also represent different welfare state regimes – the social democratic Norway, the more liberalist England, the conservative (corporatist) Germany, and the conservative (southern) Spain (Esping-Andersen 1990, 1999; Ferrera 1996). Israel is best described as a mixed model. The OASIS-countries thus represent different contexts and opportunity structures for family life and family care. Germany and Spain are familist welfare states
that tend to favor family responsibility. These two countries have legal obligations for adult children towards older parents and relatively low levels of social care services. England and Norway have individualist social policies, no legal obligations between generations, and higher levels of social care services. Norway and England also have high employment rates for women and comparably high fertility rates. The mixed Israeli model is illustrated by having legal family obligations as in Spain and Germany, but also high service levels like in Norway. Israel is also unique in its exceptionally high fertility rates.

The subsample utilized for the descriptive analyses comprises of 1,322 individuals who have at least one living parent and at least one coresiding living child aged 25 or younger. The country representation in the subsample is as follows: Norway, N=282; Spain, N=232; England, N=255; Germany, N=205; and Israel, N=348.

----------Insert Table 1 about here----------

**Measurements**

**Dependent Variables**

The main variable of interest in our analyses is the dual supporter status. Support for parents is operationalized as providing regular care in at least one form to either: (1) a parent who requires help on a regular basis with household chores such as cleaning or washing clothes, and/or with personal care such as nursing or help with bathing, or dressing; or (2) a parent aged 75 or older. Support to this parent should be provided on a regular basis in at least any of the following areas: house repair and gardening;
transportation or shopping; household chores such as cleaning; washing clothes etc.; personal care such as nursing or help with bathing or dressing; and/or financial support. This variable is a dummy variable with 1 indicating support for aging parents and 0 indicating no provision of parental support.

*Support of children* is operationalized as having: (1) a young child aged 17 or under; or (2) a child between the ages of 18 and 25 who resides at home with the parent. Given the literature on the prolongation of adolescence, our assumption is that before the age of 25, children who live at home are likely to receive more help from parents than vice versa. A dummy variable was created with 1 indicating the relevant support and 0 indicating no provision of such support.

The *dual support* status variable is a dummy variable where 1 indicates provision of both support to parents and support to children and 0 indicates no provision of dual support.

*Independent Variables*

Variables at the *societal level* may include level of services and fertility rate. Level of *social services* is indicated as high with a reference category of medium and low. *Fertility rates* for each country are included as the Total Fertility Rates (TFR), which is a statistic that describes the estimated average number of births per woman in a lifetime, based on the age-specific birth rates observed in a given year, based on the United Nations report (UN, 2003). An ordinal variable is derived from the raw fertility rates describing countries as low (1.1 and 1.3), medium (1.6 and 1.7) and high (2.7) levels of fertility, with medium level treated as the reference category. In the logistic
regression presented here we are using countries as a set of dummy variables and use Israel as the reference category.

At the familial level, we are considering several variables. Consistent with the solidarity model, we are interested at the reciprocal help parents may provide to children. We construct two variables to address reciprocity. Reciprocal help is a dichotomized dummy variable, where 1 indicates receipt of at least one type of help from parents including house repair and gardening; transportation or shopping; household chores such as cleaning; washing clothes etc.; personal care such as nursing or help with bathing or dressing; help with child care; emotional support; and/or financial support. The reference category (0) indicates no receipt of any type of support from parents.

Our second familial variable measures normative solidarity, and specifically, the endorsement of familial obligation with regards to family care and more specifically parental care. The variable is constructed based on the following statement: “Parents are entitled to some return for the sacrifices they have made for their children”. Respondents indicate their level of agreement with this statement and responses range on a likert scale from strongly disagree to strongly agree. A higher number represents stronger endorsement of this norm or belief regarding adult children’s responsibility towards aging parents. We choose to utilize this question because it allows us to investigate within the intergenerational exchange model suggesting reciprocity across generations.

Additionally, we consider associational solidarity by including variables that measure frequency of contact with parents in person. The contact variable is measured on a seven point likert scale ranging from more seldom than several times a year to daily or more often.
Furthermore, we consider the affectual and conflictual dimensions of the solidarity/conflict theoretical model. *Affectual solidarity* or the emotional closeness or intimacy between the child and the parent was measured by using three questions that represent the affectual/emotional solidarity scale (see Bengtson & Mangen, 1988) asking: (1) How close do you feel to your parent?; (2) How good is your communication with your parent?; and (3) how do you and your parent get along? Responses to each item score on a six-point Likert scale, ranging from not at all well to extremely well. The items were added to create a summative scale ranging from 0 to 18, with 0 representing lowest level of emotional closeness and 18 representing the highest level of emotional closeness. The summative scale was highly reliable with a chronbach’s alpha of .88 for mothers and .89 for fathers. A dummy variable is created indicating the top 25 percentile as strong affectual ties (1) with a reference category (0) indicating weaker affectual ties.

*Conflict* or the negative aspect of the relationship between the child and the parent was measured by using three questions that represent the conflict asking: (1) how much conflict or tension do you feel there is between you and the parent?; (2) How much you feel this parent is critical of you or what you do?; and (3) how much does this parent argue with you? Responses to each item score on a six-point Likert scale, ranging from not at all well to extremely well. The items were added to create a summative scale ranging from 0 to 18, with 0 representing lowest level of emotional closeness and 18 representing the highest level of emotional closeness. The summative scale was highly reliable with a chronbach’s alpha of .82 for mothers and .80 for fathers. A dummy variable is created indicating the top 25 percentile as highly conflictual relationship (1) with a reference category (0) indicating weaker affectual ties.
Finally, we look at existence of sibling (=1 versus no sibling=0) as part of the structure of the family and a possible optional caregiver in the family.

At the *individual level* we included various variables that address fertility behavior, specifically, *age at first birth* and birth spacing, representing the gap between the first and last child. Because we are specifically interested at those giving birth to their first child at older ages, we dichotomize this variable to those giving birth to their first child at age 32 or older versus those giving birth to their first child earlier in life. We further include various demographic variables including *employment status* (1=employed, 0=not employed); and divorced (1=yes; 0=any other marital status). Given lack of objective measures of income and wealth in the dataset, we include education level as a proxy of *social economic status*. We dichotomized education level where 1 indicates low education level of no vocational training or university education, and 0 indicates any level of vocational training or university education. Because we are interested looking at specific at-risk age groups and specifically middle-aged individuals, we are looking at the category of ages of those above 40 (=1) with a reference category of those under 40. In this study we measure religiosity using a dichotomized variable where 1 indicates not at all religious and 0 indicates all other levels of religiosity.

**Statistical Model**

We are using descriptive measures to discuss the first aim of our paper. Given that we are interested in describing the prevalence of multigenerational support in each of the countries, we are providing a description of the support status as percentage of the whole OASIS sample in each country and as a whole, as percentage of only those who have children under the age of 26 and surviving aging parents in each country and as a
whole, and finally as percentages of those with coresiding children aged 25 and under and surviving parents in each country and as a whole.

Our second aim is to estimate what characteristics at the societal, familial, and individual levels, may affect one’s likelihood of being a dual support provider to both children and parents. Because we assume that childcare is a given and that individuals are expected to do that, we are only looking at a sample of those with coresident children aged 25 and under for this analysis who also have a surviving parent. We allow variation only on the parental care aspect, essentially estimating what contributes to the likelihood of caring for one’s parents in addition to one’s children versus caring for one’s children only. We are using a logistic regression analysis to address this goal using STATA. Logistic regression analysis is the appropriate method for predicting the likelihood of being in this dual support position as the outcome variable of interest is a dichotomous variable. Logistic regression is a generalized linear model that extends linear regressions to binary or dichotomous outcome variables (Hosmer & Lemeshow, 1989). Given the great variation across the countries on various factors, the analyses presented here use four dichotomous country variables (with a reference of Israel) as accounting for societal factors. Because of the variation on the various factors, we believe that we can not account for all possible differences by including various indicators and choose to represent this variation by including country variables.

**Preliminary Results**

The analytical sample for this paper includes 1,322 individuals who all have at least one coresiding child at home aged 25 and under and a surviving parent. As previously explained, we are assuming that parents are providing care for their children,
and as a result, we are only interested in the variation in parental care. Because everyone is supporting children, the only variation is between those providing only one way support downwards to their children, and those providing two-way support both downwards to their children and upwards to their frail and/or very old parents. Over a fifth of this sample (21.9%) falls under the dual supporter category, caught between caring for both parents and children. This figure varies greatly across the five countries. Germany at the bottom shows that only 7.3% of those with coresident children aged 25 and under also provide support on a regular basis a frail or very old parent. Spain follows with 17.7%, followed by England with 19.6%. In Norway almost a quarter of individuals with coresident children and a surviving parent provide support to that parent on a regular basis. In Israel, a third of the population provides reporting such care.

Taken together, these results suggest that the proportions of those providing support on a regular basis to at least one frail or very old parent, while still caring for at least one child 25 at home, are significant. In fact, a fifth of all parents to coresiding children aged 25 and under are caught in between caring for those children and providing support on a regular basis to at least one frail and/or very old parent on a regular basis. The results further show a great variation across countries, with a general trend of high proportions of supporters in Israel and Norway and lower proportions of supporters in Germany and to some degree, with the exception of coresident young adult children, in Spain. In fact a third of the parents in Israel and a quarter of the parents in Norway are providing dual support simultaneously.
References


Table 1. Characteristics of the five countries as welfare state regimes.

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<tr>
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<th>Norway</th>
<th>England</th>
<th>Germany</th>
<th>Spain</th>
<th>Israel</th>
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<td>Welfare state model</td>
<td>Social-democratic</td>
<td>Market-liberal</td>
<td>Conservative/corporatist</td>
<td>Conservative (southern)</td>
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