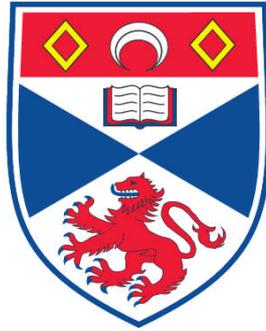


**MIGRATION AND THE INFORMAL SUPPORT NETWORKS OF
OLDER PEOPLE IN SCOTLAND**

Iain Maitland Atherton

**A Thesis Submitted for the Degree of PhD
at the
University of St. Andrews**



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Migration and the informal support networks of older people in Scotland

A thesis submitted to the University of St Andrews
for the Degree of Doctor of Philosophy

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Abstract

This thesis investigates the effects of national patterns of migration on informal support for older adults in contemporary Scotland. It argues that geography matters, and develops a multi-scale conceptual framework to analyse the relationships among population mobility, contrasting local contexts in which older people live, and care and support from the intergenerational family and the community. 130 older persons from three locales with different migration patterns are recruited to the study and a mixed-method approach is adopted, using data from the census, a questionnaire survey and a set of in-depth interviews with both older people and formal service providers.

The findings demonstrate significant differences between the three study locales in terms of the geography of the intergenerational family and the extent and nature of informal support received. Daughters provide more support than sons, suggesting the continuation of traditional gender norms. Local community is important, especially in the rural locale, but friends and neighbours are not providing a substitute for adult children living at a distance. It appears that non-kin respond to need where physical health is compromised but not where the older person suffers from depression. This raises serious questions about the future of family support in an increasingly mobile society with declining fertility and growing numbers of adult daughters in full-time employment. The relationships demonstrated confirm and extend many previous findings, but the discussion concludes that there are some grounds for optimism. The intergenerational family remains important to its members who can and do overcome geographical separation at times of crisis. Further, slowly changing gender norms, combined with contemporary demographic trends, may effect changes in the pattern of intergenerational support, which will, to some extent, offset the worsening older-age dependency ratios predicted for Scotland and other European countries over the next few decades.

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Chapter 1. Introduction

This thesis investigates the implications of social change for older people in twenty-first century Scotland. In an increasingly mobile society, it looks at the availability of kin, and the role of neighbours and friends, in the provision of emotional and practical support. Smaller family sizes and greater distances between older people and their adult children appear to threaten the cohesion of the intergenerational family, with the implication that formal support services may have to expand significantly to cope with a growing demand from an ageing population. Previous research has failed to reach consensus on these issues. Additionally, it has too often considered them at the national scale whilst ignoring the heterogeneity of place. By recognising the importance of the local, this thesis demonstrates both the complex interplay of structure and agency and the geographical variations that underlie the provision of informal support.

Migration plays a crucial role in producing geographical variations and thus is a major focus of this research. Three types of locale form the basis for the analysis, which compares and contrasts informal care and support received by older residents in contrasting places: namely a *retirement locale*, a *rural locale* and an *urban locale*. Many of the findings confirm and extend those of previous research whilst others offer new insights. Furthermore, they provide evidence to support the main argument of the thesis; namely that social changes apparent in contemporary Scotland have not undermined the intergenerational family, which continues to be the main source of social support in older age. Adult children remain an important part of the lives of older individuals and, although forms of kin support may have changed in some locales, there is little to confirm the bleak picture painted by some commentators of a society with increasing numbers of isolated and neglected older people (for example Wright 2002).

Trends similar to those identified in the thesis are occurring in other higher income countries, and findings are thus relevant beyond the Scottish context. Throughout much of Europe, populations are ageing and, as states struggle to develop sustainable welfare policies, understanding the geography of informal support provision for older citizens takes on a new importance. Increases in mobility and decreases in

intergenerational closeness, both spatial and emotional, may be threatening the availability of older age support with obvious implications for formal support services. By combining geographical and demographic analysis of social change at both the macro-level of the nation and the micro-level of the family, the thesis hopes to make an important contribution to the growing literature on population ageing.

In this introductory chapter, I develop themes that are central to the thesis. Firstly, I identify trends that have potentially adverse consequences for the future of informal support; secondly, I establish the need for a geographical perspective; and thirdly, I argue that care and assistance from family and friends remains as important even in the context of countries with well-developed welfare states. The issues involved and philosophical perspectives adopted are then brought together in a conceptual framework, which informs the following analysis. Finally, an overview of the thesis structure is presented, outlining the major components of the discussion.

Section 1.1. Contemporary social change

The early stages of the twenty-first century and latter part of the twentieth are a time in which we are experiencing social change: some incontrovertible, others theorised and contested. There is no disagreement that populations across the developed world are ageing. People are now having fewer children than previous generations and living longer. A consequence is an increasing percentage of the population who are in later life. The implications of these demographic changes for individuals, their communities, and society as a whole, however, are subjects of much debate.

There are those who take a pessimistic view. For example, it is argued that if these demographic changes are not averted, through encouraging young people to immigrate or to have more children, there will occur:

“...a large increase in the demand for state-supplied health care, residential services, housing, pensions and other services consumed by the elderly.”
(Wright 2002).

These assertions suggest that the smaller part of the population of working age will be unable to support an increasingly aged society without a decline in standards of living.

The economy will be stretched in supporting increasing numbers of people who are dependent and thus drain upon society's resources.

Gruenberg (1977) argues that not only will a larger proportion of society be made up of those in later life, but also incidence of chronic illnesses amongst older people will be greater. He further contends that there is no upper biological limit to human longevity. People with chronic diseases associated with ageing, such as Alzheimer's, will survive longer because of medical advances. Hence, the period of life in which we are dependent on others will be extended. The prevalence of age-related conditions will be more than current age-specific incidence suggests. Such a future has implications for formal support services.

Others disagree with such pessimistic views. Fries (1980) argues that the period of time in which illness is experienced at the end of the life course will decline: older age will be increasingly characterised by better health, not worse. In further contradiction to Gruenberg (1977), he claims that longevity does have a biological barrier, beyond which medical advancements cannot add more years. Instead, medical science will achieve a decline in diseases associated with the ageing process, and these will become ever more compressed into the final days of life. If he is correct, the future will not involve a rising demand for services by older cohorts. Quite the converse: later life will be a time of health and fulfilment, to an even greater extent than is already the case.

Evidence regarding the Fries and Gruenberg debate remains inconclusive. For example, Kannisto *et al* (1994) demonstrate that the rate of increase in life expectancy in higher income countries is showing no signs of slowing. Indeed, where mortality is already low, improvements continue apace, suggesting that any biological limit, if one exists, is some way from being reached. However, in contradiction to both sides of the debate, evidence from the United Kingdom suggests that the length of life in which people experience good health is also rising, though it is not keeping pace with improving life expectancy (Dunnell 1997). The future relationship between longevity and health thus remain far from clear. Attempts to forecast the future trajectory are inconclusive, and resolution of the debate remains some way off.

The same is true of debates on implications for resource allocation in consequence of an ageing population. Preston (1984) contends that rising demands made by those in later life will lead to intergenerational conflict. Not only will there be more need for social housing, pensions and so forth, but the increasing proportion of older age groups will give greater power to their interests. An example of such a line of thinking is demonstrated by Hall (1999a). In an editorial in the British Medical Journal, he suggests that paediatric services will be marginalised by the rising need to meet demand for health care facilities for an older population.

Just as the relationship between ageing and health is contested, so the same is true regarding future intergenerational relations. Various studies provide evidence that counter notions of increasingly demanding older cohorts. For example, in the United Kingdom, healthcare spending is increasing more for younger age groups than older ones, even though there is no evidence for reduced need amongst people in later life (Sheshman and Gray 2002). In addition to this, other studies suggest that altruism continues to pervade how one generation views another (Daatland and Herlofson 2003; Logan and Spitze 1995). Research continually demonstrates the interconnections and mutual importance of one generation for the other, both from older to younger (Evandrou 2001; Grundy and Harrop 1992), and *vice versa* (Allen and Perkins 1995). Fougere and Merette (1999) assert that population ageing can act as a stimulus to economic growth; resources will increase, not decrease, *per capita*. These issues are as much political as demographic. Mullan (2000) suggests that interest groups are using population ageing as a means to further neo-liberal agendas of reducing welfare state spending.

These are important issues that researchers will no doubt continue to debate. Whatever the outcome, it is likely that changing population structures will involve difficult decisions; spending on schools, the balance of services to young and old, and so forth. Scotland is already experiencing these demographic imperatives, with falling school rolls raising the possibility of school closures (Audit Scotland 2004). Making such decisions will be politically difficult, and opposition as much by older as younger generations cannot be discounted. Issues cut across the generations. The degree to which different age groups can or will form cohesive political lobbies is questionable. The implications of population ageing for resource allocation and

intergenerational relations will, however, continue to provoke political controversy for the foreseeable future.

In circumstances where the implications of demographic ageing are uncertain, other changes are also theorised as emerging. Demographic change is not occurring in isolation. For Putnam (2000), norms of trust and reciprocity between individuals and towards wider institutions of society, referred to as social capital, are breaking down. He asserts that there is a trend towards people being less community minded and considerate of others; they are less likely to belong to organisations, meet with friends, or even socialise within their family. He is not alone in this belief (see Costa and Kahn 2003; Rahn and Transue 1998). Others disagree, and do so on several counts. They claim that, whilst such changes are possibly happening in the United States where Putnam's work is based, they are not evident in other countries including Sweden (Rothstein 2001) or Britain (Hall 1999b), or in all social groups (Li et al. 2003; Li et al. 2002). Further, the measures used can be criticised for being too general to provide useful insight (Paxton 1999). Theoretical ideas around social capital are thus every bit as contentious as those surrounding population ageing.

Both demographic and attitudinal change are involved in theoretical ideas surrounding another trend that is claimed to be sweeping across the Western world and is encapsulated in the theory of the second demographic transition. Proponents of this theory contend that attitudinal shift marked by increasing individualist attitudes are prompting changes such as declining fertility, rising numbers cohabiting outside of marriage, and an increasing propensity to live in single person households (Lesthaeghe 1983; Van de Kaa 1987). Such changes, its advocates argue, are irreversible and will eventually occur everywhere.

Evidence in support of the theory of a second demographic transition is, again, mixed. Solitary living has undoubtedly become more commonplace across many higher income countries, including the United Kingdom (Evandrou and Falkingham 2000; Grundy 1993). Fertility has declined over the past three decades across the Western World (Caldwell and Schindlmayer 2003). However, there are other ideas as to what lies behind such changes, such as the effects of increasing wealth (McGarry and Schoeni 2000), improvements in the provision of formal support services (Costa

1999), and changing gender relationships (McDonald 2000). Different theoretical perspectives provide different conceptualisations as to the future. Suffice to say that whether or not attitudinal shift is happening remains open to debate.

The changes discussed in this section have many implications. My central concern on which I will focus is informal care and support systems for older people. Reasons why this is an important subject, and hence my rationale for concentrating on it, are addressed in the next section.

Section 1.2. Informal support

Even in the context of higher income countries, assistance from relatives, friends or neighbours remains an important resource for people experiencing ill health in later life (Allen and Perkins 1995; Hirst 2001). This includes roles of “social support”, fulfilling psychosocial needs; and “care giving”, where assistance with daily activities is provided (Keating et al. 2003). Kin, particularly immediate family, play an important role (Qureshi and Walker 1989). However, friends and neighbours also make significant contributions, though usually where less intensive help is needed (Barker 2002; Hirst 2001; Nocon and Pearson 2000).

The aforementioned trends of the contemporary world may threaten the future of such support, as well as raising questions as to the future welfare needs of people in later life. The repercussions of demographic and social change for systems upon which so many rely is therefore an important subject area. That social support is such a crucial part of the lives of older people necessitates that social enquiry investigates how trends, contested as they are, will influence availability and willingness of others to participate in care or support networks. Evidence is crucial if policies are to be developed effectively and realistic demands for formal support services forecast.

The subject of informal support for people in older age is a subject that receives considerable attention in the social sciences, as is discussed in the literature review in chapter 2. However, much of the research into the social dimensions of ageing has been focussed at a national level, and so tacitly assumes that findings apply unchangingly from one place to another. It is my contention in this thesis that geographical insights are essential to fully appreciate the implications of the

changing social contexts within which care and support networks develop. The next section discusses the reasons why the spatial is so important and hence my rationale for utilising geography in analysing informal support networks.

Section 1.3. Structuring of the geographical

Soja (1995) argues that enquiry into the social world requires what he refers to as a *trialectic*. This incorporates three entities: sociological, historical, and spatial. He asserts that these are of equal importance. There are practical reasons why a focus on one or other of these aspects is often necessary such as training and the boundaries of academic disciplines, but his contention is that critical consideration of the *interaction* between these three aspects is essential to achieve a holistic understanding of people's situations. However, the spatial, he claims, has too often been ignored, which is an issue that requires redress. Following Soja in this thesis, I intend to give greater prominence to the spatial than has generally been the case in the subject area of informal support.

The geographical context in which lives are enacted is structured so that experience in one place differs from others, with consequences for people's lives. When considering people's lived experience, then the need for spatial understanding is crucial. Dear and Wolch (1989) suggest three ways in which geography shapes societies. Firstly, human activity can be constituted by space, such as how the location of a beach influences where tourism develops, and thereafter the development of retirement communities. Secondly, space can constrain, for example where mountainous terrain restricts economic development, reducing job opportunities such that young people consider living their lives elsewhere. Finally, space can mediate, such as where the locale in which you live determines your neighbours, and are thus influential in human interaction. Thus distinctive locales are developed, in response to structured patterns of settlement and activity, where those resident will experience the effects of global and national trends in particular ways.

As suggested by Soja's *trialectic*, the interactions between time and space are important in the production of the distinctive nature of locales. Massey (1979) shows how history, geography and sociology intertwine in the uneven development of

Britain, and by implication, Scotland. The early industrial revolution saw cities grow where there was access to raw materials such as coal or iron, or within easy access to ports, so as to maximise capital; to use Dear and Wolch's terminology, the spatial constituted the social. These new urban centres largely depended on particular manufacturing process, leading to what Massey calls a '*spatial division of labour*': cotton in Lancashire, shipbuilding on the Clyde, steel in South Wales. The decline and depression of the 1930s therefore did not affect all areas of the country equally. Where there was dependency on a particular industry, recession was particularly severe. For the people who lived and worked in the affected areas this meant unemployment and hardship. But the experience of capitalist development was not spatially even.

This spatial variation continues to have implications through to the present day. Massey shows how more recent investment has located in areas where there is a surfeit of labour, where wages are concomitantly lower, and capital can be used most efficiently. Thus, experience of economic trends and processes is contingent on both space and time. This differentiation still has at its root forces that are evident across locales, but manifestation is dependent on the history and social makeup of different places. Areas are not unique; they share aspects such as rurality, population composition, or judicial system. Nonetheless, widespread trends that affect countries and continents, such as population ageing or declining social capital, can only be fully appreciated if the effects of locale are recognised.

Just as Britain is structured at a national scale in ways that gives diversity to experience of life across the country, so the same is true of its constituent countries, including Scotland. The industrial revolution led to the development of cities near to the coalfields and shipyards of the central belt. Topography and social history of rural areas to the north and south has resulted in depopulation, with a long history of out-migration, to the major cities of the rest of the United Kingdom and further a field. The Scottish landmass is thus differentiated by its history, topography and society. Insights into social issues will be lacking unless the resultant and complex geography is appreciated and people's experiences placed into context.

Massey's ideas demonstrate not only the way in which Britain has experienced uneven economic development from the onset of the industrial revolution onwards, but also the importance of scale. Structures can be conceived as operating at different levels, each mutually influencing the others (Dear and Wolch 1989). People's lives are shaped by where they live, by, for example, job availability. The characteristics of each locale are themselves influenced by wider national and international trends. Thus, a full understanding of people's experience of the social world requires more than one scale of analysis.

The individual is also important to social enquiry. Structures are not determining of human action. People are conscious and thinking beings who consider, discuss and react to their own circumstances or social situation, time and place. On occasions, actions remain within perceived social parameters, and this way perpetuate and reproduce the societal norms. At other times, individuals push against these constraints, or utilise structures in new ways, to achieve their objectives. Such actions can result in changes, altering the social and spatial, with consequences for the agent as well as others. New forms of social organisation are produced that then *reflexively* influence the decision-making processes (Giddens 1984). Proponents of the second demographic transition suggest that ideational change is occurring as people are exposed to ideas of individualism. Normative values, such as those of marriage, are initially challenged by innovators who are prepared to adopt a new way of living. These ideas subsequently become more acceptable to wider society. Eventually, the theory suggests, new structures are produced that create space for more liberal attitudes towards living out of wedlock, or pursuing a career rather than childbearing. Agency and structure are therefore closely interlinked; one influences the other. Scale is important, from the actions of a person up to the sweep of contemporary events and trends.

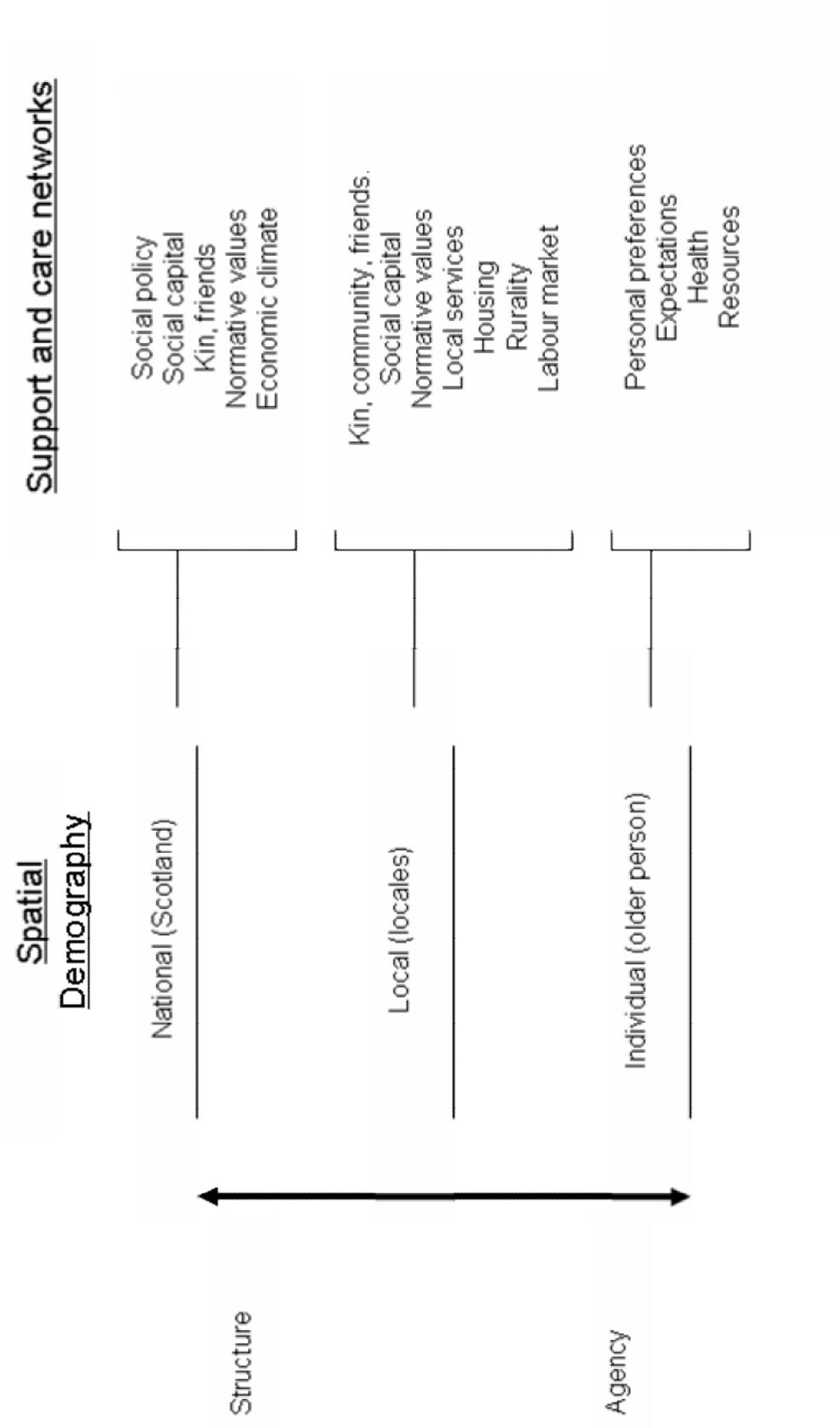
Throughout the thesis, the need to recognise trends at different scales, and the incorporation of agency in the context of constraining and enabling structures in the analysis of care and support networks is integral to the analysis. The conceptual framework that guides the discussion is, therefore, multi-level, incorporating the individual in wider society, and, by implication, in the globalising world.

Section 1.4. *The conceptual framework*

Figure 1.1 outlines the conceptual framework developed from the theoretical literature on which I base the empirical investigations of the thesis. It can be envisaged in two parts: by geographical scale and structure. The largest scale illustrated is the national. This is influenced by and influences trends at higher levels of abstraction. For example, ideational changes claimed to be driving the second demographic transition go well beyond the situation in Scotland or even Britain, hence the earlier claim that findings have implications for other higher income countries whose populations are experiencing similar demographic and social changes.

The research discussed in this and following chapters considers contemporary trends in the context of national, local and individual scales. The support networks that people develop are, in the main, based in their local community, or *locale* as it will be referred to throughout this thesis. Previous research has demonstrated the importance of distance between recipient and provider of support, both in terms of practical assistance (Litwak and Kulis 1987) and frequency of face-to-face contact (Warnes 1986). Migration, and to a lesser extent differences in fertility and mortality, lead to contrasting demographic structures. Hence, the place a person lives is important in analysis of care and social networks. However, as demonstrated in Massey's work on the effects of capitalism on different regions of Britain, larger scale phenomenon have implications everywhere, but differentiated in impact by the particular characteristics of places. Different levels of analysis are thus essential. The recognition of these different spatial scales, and their interaction, is thus essential to the analysis.

Figure 1.1 The conceptual framework



Human agency, at the scale of the individual, is an effective component in this framework. As outlined by Dear and Wolch (Dear and Wolch 1989), there is always the possibility that rather than remaining constrained by circumstances, a person will decide on a course of action that challenges, and potentially changes social and spatial structure. For example, Arber and Ginn (1995) found evidence of cross gender taboos that discourage sons giving personal care to their mother, or daughters to fathers. Where cross-gender help is provided, therefore, norms are challenged and change beyond the particular situation a possibility. People have an understanding of what their society deems acceptable, what can or cannot be asked of family or friends, that forms a basis for their negotiating support (Finch and Mason 1990). Whether the support is forthcoming will depend both on the willingness of others and on issues arising at higher levels of the conceptual framework, such as the level of social capital in their locale.

Migration connects the national to and from the local, as well as between the individual and local. Kin or friends can move to and live at a distance that makes in-person contact difficult. An older person can also relocate, either to facilitate access to support from family, or for non-support related reasons. Doing so, however, may still impact on availability of support if a need develops at a later date. Having a family does not necessarily ensure that support will be available if adult children live many miles away. If parties involved are either unable, or not agreeable to changing their location, then the nature of the locale in which the person in need of support lives becomes crucial to the support networks they can develop.

Social capital is shown in the conceptual framework as operating at two levels: the local and the national. Putnam (2000) argues that the trust and reciprocity implicit within the concept is declining across the United States; in other words, that the perceptions and values held can be considered at a high degree of aggregation. Yet some of the concepts implicit in Putnam's analysis undoubtedly vary from one area to another. For example, volunteerism has been shown to differ from one part of the United Kingdom to another (Bryson et al. 2002; Milligan 2001). That there are geographical differences is further evidenced in studies that attribute contrasting health outcomes to variations in social capital (Subramanian et al. 2003). Given

that values of trust and reciprocity lie at the heart of the development of care and social networks, it is contended that such heterogeneity will have implications for the contrasting opportunities available to older the individuals.

Other factors in the locale will influence opportunities for developing support networks. The availability of affordable housing suitable for residence where health is poor is one example. Warnes and Ford (1995) show that many people would like to move closer to children but are unable to do so because of the lack of appropriate accommodation. In other words, the ability to move from one locale to another, so as to be nearer kin from whom care or social support might be forthcoming either at that point in time or later, is constrained by the structures of the housing market. Al Hamad *et al* (1997) found evidence that people relocate to live with kin after health deteriorates or widowhood occurs. However, this is also likely to be affected by the housing situation of their family.

Structural differences between places also have implications for moves between locales. For example, the South East of England has long been recognised as attracting younger people from Scotland who relocate to advance their employment opportunities (Jones 1992). A lack of affordable housing for younger people potentially has similar effects, influencing a person's adult children to live in a distant locale. Such moves are largely beyond the control of the older person but the effects on the availability of their children as a resource in later life can be profound.

The thesis elaborates this conceptual framework by considering the implications of trends being experienced across the Western world, but in the particular context of Scotland. In the following section, I provide an overview of the path this study takes by briefly previewing the chapters that follow.

Section 1.5. Thesis overview

The central concerns of this thesis are the social and support networks of older people in contemporary Scotland. Why specifically limited the analysis to those who are in their later years? The ageing of populations will lead to greater proportions of individuals who are in older age. There is nothing that is certain about the experience of being older. Some will experience good health and fulfilling retirement years.

For others, it will be a time of struggling to cope with limiting illnesses. The same is true for people of all ages. However, what marks out older age is that the risk of experiencing a decline in health is greater than at any other time in life. The same is also the case for others who were born around the same period of time, and with whom a person has lived through life; and thus their partners. Three factors are increasingly likely to occur: decline in a person's own health; similarly, the occurrence of a limiting illness in their partner; and the onset of widowhood. From a policy perspective, and from a humanitarian viewpoint, the study of older individuals and their ability to cope where health limits ability to manage alone is an important focus for research.

What do I mean by an 'older person'? There is nothing intrinsically certain about later life. There is not a predetermined age at which a person will suddenly become debilitated and in need of help and support. However, individuals' risk of ill health, or widowhood increases gradually from childhood onwards, something only apparent where the experiences of large cohorts are the subject of analysis (Grundy 2006). For this reason, I do not have a strict cut-off point in this thesis. For analytical reasons, I do use particular ages to differentiate between 'younger' and 'older' groups, these classifications being defined when and where they occur in the thesis. Never is this done for any reason other than the need to categorise a group for comparative reasons. I would not claim that a person aged 60 years is necessarily healthier than a person aged 80. However, given the risks of ill health and their association with ageing, it is more *likely* that the octogenarian will be experiencing a limiting illness, and that they will be widowed and so without a partner as a source of support. Having a cut-off point is heuristically useful to understand how later life contrasts with younger.

Spouses are the main source of support in later life. Yet where a person does not have a partner, which is the case for a notable proportion of the population, it is to children that people most often turn (Hirst 2001; Qureshi and Walker 1989; Warnes and Ford 1995). The decline in fertility, one of the factors that lead to population ageing, will potentially increase the number who do not have recourse to sons or daughters in later life. For this reason, I focus on assistance from children. I thus use a narrow definition of kin support networks that involves assistance from sons and daughters. There is the possibility that declining availability of children will bring about

greater reliance on others, such as nieces or nephews. However, for the present time, it is children who are the main sources of help outside of the older person and partner nexus. Additionally, much concern from policy makers and academics has focused on the implications of declining kin availability focusing purely on children. Yet such analysis more often than not does not adequately consider the spatial dimension and its implications. Hence, I maintain the focus of this thesis, where family support is concerned, on children.

In focusing on support from children to older parents I do not in any way play down the assistance that flows in the opposite direction. Mothers and fathers in later life continue to play important roles in the lives of their children. The ageing process does not entirely alter the direction of support. Take for example occasions where a middle aged person continues to rely on their parent or parents for looking after grandchildren, financial assistance, provision of housing after marital breakdown, and emotional support and advice. The list could go on. However, such assistance does not alter the importance of the role of adult children in supporting parents at time where illness reduces ability to cope with life unaided. Ongoing social trends that threaten this source of assistance potentially have significant ramifications. Hence, my focus is on child to parent support rather than *visa versa*.

Support can be viewed as being physical or psychological. Indeed the two are not mutually exclusive. Knowing that a potential carer is available is a fillip to people's sense of well-being (Wenger et al. 1995). However, given the concerns of policy makers in the face of contemporary trends, my main focus is in the main on practical everyday assistance. I differentiate between those who are perceived to be, or who are actually are, providers of instrumental help as being the 'support network' of the older individual. The wider group of acquaintances, of which the 'support network' is a constituent part, I refer to as the 'social network'. This second group will contain people who are seen as being friends, but to whom a person for whatever reason feels that it is undesirable that they should ask or expect to receive help from that particular person. They may trust them implicitly or have had a long friendship. For reasons of trust, reciprocity, or normative obligations, however, the relationship is one of friendship with no expectation of instrumental support with activities of living even

when and where such help is needed.

The conceptual framework discussed in the previous section emphasises the importance of scale and locality. Just what this means for informal support networks is the basis of Chapter 2, where literature that considers social and care networks, and the trends that threaten their future is reviewed. Research shows how the more localised geographical analysis is, the more important the role of migration in determining the age composition of populations. Sociological and spatial determinants of both migration and use of informal support are identified. These demonstrate how individual attributes and the place of residence influence assistance from kin and community. However, the extent to which insights from different academic disciplines have been brought together has been too limited. Doing so, as suggested by Soja's contentions, provides opportunities for new insights into people's lives, and the implications of national scale trends for locales and individuals resident within. Questions are raised that are investigated in the chapters that follow. In particular, how migration affects the spatial demography of the intergenerational family, and what the implications are for the spatial and social determinants of informal support.

Chapter 3 discusses the ontological and epistemological standpoints that underpin the research used in this thesis. The use of Giddens' ideas of the relationship of agency to structure is used as the basis for the investigation. I argue that his theoretical ideas provide a convincing explanation for the degree of lassitude individuals have in deciding their own course of action, and the constraints imposed on their lives. To argue that people are free to do as they wish, or, alternatively, automatons simply responding to social structures that are external to their actions, is unrealistic. This said, I also make the contention that Giddens underestimates the degree to which agents are constrained in their action, particularly in later life, an issue that is returned to at points in later chapters. However, recognition of the importance of both structure and agency emphasises the need for analysis that considers different scales, from trends at national scales down to the individual, if a holistic understanding is to be achieved.

In chapter 4, I discuss methods used and reasons for which they were adopted. Both quantitative and qualitative methods have been used to gain insight into migration at different scales, and the implications for geographic areas (locales) and individuals. Secondary data sources such as the Census are used to identify locales with a high level of retirement migration, or where younger people tend to move away. Large-scale datasets are invaluable to researchers, but are also limited in scope. In particular, the issues of marginalised groups, such as those in later life with limiting long-term conditions, are not fully addressed by these official sources. The specialist requirements of data collection and resources needed make such undertakings difficult. Additionally, the specific and detailed needs of all research projects can never be satisfied by general surveys. Hence, primary data collection, in the form of a small-scale survey and in-depth interviews are carried out. I give an overview of how these were conducted, including the practicalities and ethical problems entailed.

The chapters that follow consider in detail the analysis of both primary and secondary data, based on the conceptual framework. Chapter 5 discusses the analysis of migration across Scotland and identifies areas with particularly marked in-migration of older people, out-migration of younger adults, and areas with comparatively little population mobility amongst these specific age groups. Survey data is analysed to address the research question regarding effects of such migration for proximity of intergenerational residences. In-depth interviews provide insight into the motivations people have for moving, or staying in place despite children living elsewhere, indicating constraints and otherwise of spatial, sociological and historical structures.

Questions then arise regarding the effects of these contrasting spatial living arrangements of the intergenerational family for the use of informal support, which is the theme of the next two chapters. In Chapter 6, assistance from adult children is the focus, and in particular, the implications of not only the geographical differences in the locales, but also the sociological. Differences between locales are investigated. The role of gender is focused on to consider the extent to which personal characteristics, of older individuals and their children, are affected by the spatial. The temporal dimension is considered, in terms of future implications of findings in light of current trends, such as low fertility and increasing population mobility.

The local community is the focus in Chapter 7, and in particular whether there is evidence to suggest substitutability of neighbours for adult children family in areas with higher levels of migration and lower levels of intergenerational residential geographical proximity. Theories of social capital decline suggest that areas of high population mobility will also reflect fragmented communities (Bauman 2001). Primary survey data is analysed for evidence either for or against such a claim from point of view of older individuals. In-depth interviews investigate the effects of migration on people's relationships with others who live locally and the steps they take to address the potential for social isolation that they themselves recognise.

Chapter 8 draws together the findings that emanate from the thesis, in the context of policy implications at national, local and individual scales. Giddens' theories of structuration are revisited, and the relationship between structure and agency refined in light of findings regarding the effects of the ageing process on agents ability to decide on their own courses of action. Research questions emanating from the thesis are outlined that, given the marginalised situation of all too many of the older members of our society, and the potential implications of future trends, are of immense importance for critical social science to pursue.

Section 1.6. Conclusion

The experience of ageing is affected directly by social trends. The implications of these are dependent upon who you are, and where you live. For a significant minority, the later stages of the life course are such that reliance on assistance from others, including family, friends and formal services, becomes a necessity. Migration and geographical differences directly affect the support networks that individuals utilise and develop. This thesis thus uses geography as a means to better understand the experience of the individual managing later life in locales that are subject to, and reflexively impact on, trends of the wider world.

The thesis considers the following questions: are there parts of Scotland where the spatial structuring of population mobility leads to lower use of intergenerational support? To what extent does migration, and the resulting spatial separation of households, influence the use of assistance from adult children? And where family is

less available, is there a substitution effect, where older individuals are able to rely instead on their local community? In the next chapter, I review literature that provides further insight into the determinants of informal care and support, including social and spatial influences and their trends over time.

Chapter 2. Migration and support in later life

Section 2.1. Introduction

Social changes occurring in contemporary Scotland have implications for informal care and support networks. Effects will differ depending on where a person is located, geographically and socially. The temporal trends that are inalienably associated with history will interact with the sociological and spatial. Analysis of the effects of social and demographic change requires understanding of factors that influence the use of informal assistance. Whilst there has been a great deal of research into the role of family and community in supporting older individuals, it is my contention that it has all too often stood in isolation. By bringing together insights from different academic disciplines and considering what one means for another, the situation of older individuals can be better understood. There is abundant evidence regarding factors that influence use of informal support. In the main, this research provides convincing evidence of the effects of social or spatial determinants. However, the sometimes-contradictory findings raise questions as to the implications for individuals and locales located within the social milieu.

I begin the chapter by firstly discussing spatial demography, looking at research that investigates population ageing. Population structures differ from one place to another, in large part because of the geographical mobility of populations. This has implications for informal support at local and individual scales, not only because of the effects on demographic structures because of the resultant differences in the geographies of intergenerational residential locations. Locales differ in terms of the context within which individuals are affected by wider scale trends. The role of the geographic mobility of populations is therefore an important factor, and hence its social and spatial determinants are considered next. These influences have implications not only for whether or not a person moves, but also for their families and communities, and so also for informal support. Analysis of studies that investigate informal assistance care and support networks is considered next, in relation to the implications of these factors for population mobility. Using a similar approach, formal policy responses to issues of care for older individuals in view of

demographic change are reviewed.

Section 2.2. Spatial demography

Populations across the Western world are ageing, as fertility declines below replacement levels (Caldwell and Schindlmayer 2003), and the number of years lived by people already of older age increases (Kannisto et al. 1994). The combined effect of the changing birth and death rates is to alter demographic structures, such that the dependency ratio, the proportion of people in the later stages of the life-course relative to those at earlier points, is also increasing.

Scotland is not immune to such changes. In 2003, it had a Total Fertility Rate of under 1.5, placing it in a group of countries including Canada, and much of southern and Eastern Europe that have what many classify as *very low fertility* (Graham and Boyle 2003). It has since risen very slightly, to 1.54 in 2003 and 1.60 in 2004 (General Registrar for Scotland 2004), though these figures remain well below the rate at which the population would replace itself. In addition to this, age-specific mortality amongst those aged 75 years and over has shown considerable decline over the past two decades (GROS 2004). Shaw (2001) makes various projections for the United Kingdom as a whole, and concludes that an ageing population is now inevitable. Projections suggest that over the next 25 years, the proportion of the Scottish population over 75 years of age will increase by 41 percent, whilst those under 15 years will decline by 19 percent (GROS 2002). Thus, at the national scale, the Scottish population is ageing.

Populations are not evenly distributed across countries, either in terms of numbers, or of social and age composition. Some parts of Scotland have considerably older populations than others (Champion et al. 1996; Dorling and Thomas 2004). For example, at the point of the 1991 census, parts of the Highlands had more than 21 percent of their populations who were pensionable age, whilst at the other extreme, parts of Grampian had under 16.5 percent in the same category (Champion et al. 1996).

Fertility and mortality explain most of the differences between age compositions internationally. However, migration has a marked effect sub-nationally. Fuguitt

and Heaton (1995) show that the smaller the geographic scale of analysis, the more notable are the effects of population mobility on age structures. The smaller the number of people in an area the more notable the effects of migration are for its demography. As will be discussed later, it also has implications for who will be available for a person to draw on for informal support. Migration is therefore a crucial component to understanding the individual's experience of population ageing, especially with regard to intergenerational assistance.

Much research on population ageing does not move beyond the national scale. Much academic and policy related work on the social and economic implications of demographic change focuses issues such as pensions, and the affordability of healthcare (Alders and Broer 2005; Busse et al. 2003; Kemp and Denton 2003; Spiezia 2002; Stewart et al. 2004). Considering the effects for Scotland or the United Kingdom as a whole is important because of the implications of demographic change for fiscal policy, amongst other issues. However, my contention is that for many aspects of population ageing scale is important. Many of the implications of population ageing can only be fully appreciated by taking into account local differences, particularly where informal care and support is concerned.

Section 2.3. Migration

Why do some people move whilst others stay in the same part of the country all their lives? Clearly, given the comments in the previous section regarding the availability of informal support, such a question will also have implications for who an individual can draw on for assistance in later life. The effects of migration on spatial demography and geographical proximity of the intergenerational family make it central to understanding the context within which individuals experience population ageing, and the availability of others for care and support networks. In the sections that follow, I therefore consider geographical mobility of individuals and social groups in the framework of Soja's *trialectic*, namely the sociological, spatial and historical, each being considered in a sub-section. As will be seen, and consistent with Soja's ideas, these facets are closely interrelated.

Section 2.3.1. The sociological dimension of migration

Who is most likely to migrate? Sociological structures have a marked influence on the decisions a person takes through their life-course about whether or not they should migrate. Socio-economic status, gender, and age, can affect the degree to which moving is perceived to be desired. As a result, differences are evident in terms of propensity, destination, and implications of differ depending on a person's social characteristics.

One reason why migration has such a marked impact on spatial demography is the effects of age on the likelihood of a person moving. Differences in age-specific migration rates are evident across the life-course (Warnes 1992a). Similar patterns are found in many different higher income countries (Rogers 1988). The early stages of life are, for most, a time of residential stability, with only a small proportion moving. The proportion of the population relocating then increases dramatically into early adulthood. Thereafter, migration rates decline. The later stages of living, however, break this downward trend. There used to be a small peak in migration discernable for those in their early to mid 60s (Warnes 1992a), although this has become less evident in recent years in the United Kingdom as retirement has become less focussed on the statutory age of 65 years for men and 60 for women (Champion 2005). Later still, after the age of around 70 years, there is an increasing propensity to move.

The cross-sectional studies from which these life-course propensities are drawn indicate that moving in later life is unusual. Longitudinal analysis, however, demonstrate that a considerable proportion of people in older age relocate. Grundy (1987b) shows that, in the United Kingdom as a whole, a third of men and two-fifths of all women aged 65 or over in 1971 changed address in the course of the following ten years. Whilst still a minority, it nonetheless shows that a substantial proportion of the older population migrate.

Social class is another factor influential in migration decisions. Halfacree *et al* (1992) demonstrate that people who are owner occupiers, and so occupy a relatively privileged socio-economic position, move less frequently compared to others who

rent privately, who are concomitantly more likely to be in a situation of relative poverty. Employment opportunities open to those in higher social groups provide the opportunity of furthering career aims, which in many cases will involve relocation. The benefits of moving a long distance are perceived to outweigh the social and economic costs of moving. The extent of geographic mobility in terms of distance of those in lower social categories is more constrained, both by knowledge of opportunities elsewhere, and perceived smaller wage differentials, whilst the frequency of their relocations may involve insecurity of tenure (Davies and Flowerdew 1992).

Similar associations between socio-economic situation and migration are evident in moves made in later life. Studies of retirement migration show that longer distance moves tend to be made by people wealthier than those who make shorter distance moves (Drysdale 1991; Hunt et al. 2002b; Wiseman and Roseman 1979). As with moves made at younger ages, relocating around retirement tends to be necessitated by insecurity of tenure for those who are less well-off (Wiseman 1980; Wiseman and Roseman 1979). Moving further requires both the means to move, and less concern with maintaining local contacts to the same degree (Hunt et al. 2002b).

Given the importance of time and place in the formation of relationships, it is surprising that migration rates do not continue to decline into later life. However, the implications of ageing for employment status, health and marital status lead to many seeing changing residential location as necessary. Litwak and Longino (1987) demonstrate the effects of such factors for migrations made in older age using data from the United States. Firstly, at retirement, people relocate because, unrestrained by work, they can reside in a place they consider to be conducive to their desired lifestyle. There is, as a result, a small increase in the propensity to move noticeable around the ages of retirement (Warnes 1992a). Later on, when people are in their 70s, ill health or bereavement leads them to move closer to family to facilitate access to informal support. When health deteriorates further the need either to reside with a family member, or even to enter institutional care, leads to a further migration event. Hence, the rates of migration increase towards the end of the life-course. Litwak and Longino do not make any suggestion that one person will follow one or all of these

stages.

Other studies find similar reasons for later life migration, both in the United States and United Kingdom, although some have refined the typology, arguing that the one that Litwak and Longino (1987) put forward is too simplistic (Burholt 1999; Wiseman 1980; Wiseman and Roseman 1979). However, their refinements refer to local moves, whilst there is general agreement regarding explanations of relocations over longer distances, those that have implications for local demographics and the context of care and support networks.

Studies relating to typologies all emphasise the important role of health in influencing migration in later life, as do many other studies of later life residential moves. Health influences both the likelihood and spatial dimension of geographic mobility. Those moving to retirement locations are likely to be in good health (Drysdale 1991). However, increasing frailty leads to an increased propensity to move both for reasons of access to formal or informal support (Choi 1996; Crimmins and Ingegneri 1990; Drysdale 1991; Silverstein 1995). A study by Meyer and Cromley (1989) suggests that people will also move prior to the onset of ill health, moving to be near children as insurance should the eventuality of disability come to fruition. Other studies illustrate that health is similarly an important dimension of later life migration in the United Kingdom (Burholt 1999; Warnes 1996).

Another sociological factor that research shows to be influential in individual's migration behaviour is gender. Analysis of migration through the life-course shows differences in timing and the propensity to move (Rogers 1988; Warnes 1992a). The peak in early adulthood occurs slightly earlier for women in comparison to men, as does retirement migration, followed by an increasing propensity in the later years of the life course that is steeper for females than males. These divergences reflect demographic differences, with women tending to marry at younger ages, and set up new households earlier in their lives. Moves associated with retiring are similarly affected by age differentials, with the added effects of a younger statutory age of retirement for females. Differences continue into later life. Women not only marry younger, but also have a higher life expectancy. They are consequently more likely to experience widowhood, and as Robine and Ritchie (1991) shown, are also

more likely to experience limiting long-term illnesses in later life. The combination of women having a higher need for assistance and lower likelihood of having a spouse to provide this help leads to a greater likelihood of moving in their later days, either to be nearer kin, for more suitable housing, or into institutional care. Such findings demonstrate that not only does migration have implications for care and support networks, but the need for assistance can also initiate a change of residence.

These different sociological factors interact with one another. Stockdale (2002b) proposes a typology of migration amongst people moving from rural parts of Scotland, which demonstrate why geographic mobility is such a feature of young adulthood whilst also showing how structures, social and spatial, are intertwined. She identifies, amongst other factors, education and employment as major motivations. The need to find a job or a university place is more likely to feature early in a person's adult life. Opportunities will not always be available in the locale in which the person resides. Commuting may be an option, but only to an extent. Where distances are too great, and transport infrastructure inadequate, the only options will be to relocate or accept a different career path, possibly with lower wages and prestige. Stockdale also shows that the structures influencing migration go beyond education and career needs. There are normative expectations expressed by teachers and parents that encourage younger people to leave. Some younger people perceive their current place of residence to be too traditional, and thus constraining to their lives, though for some family and friends make relocating difficult moving (Jamieson 2000). Moving elsewhere is seen as an opportunity to escape, and forge a personal identity free of the pressures of family and community back in the local in which he or she grew up. Taken together, the pressures and opportunities available make young adulthood a time of residential instability for many.

The work I have discussed in this section points to the spatiality of sociological factors influencing migration, from the location of educational and employment opportunities to perceptions of where is desirable to spend retirement years. In the next section I give greater focus to the geographical dimension, though once more the interrelated nature of the social and spatial is clearly demonstrated.

Section 2.3.2. The spatial dimension of migration

The opportunities available to establish or develop a career, as I have discussed earlier in this chapter, are important considerations for an individual. If suitable openings cannot be found locally, then migration may be perceived as being necessary. Areas where there is not a wide availability of employment or educational opportunities are going to be less attractive as places to live the whole of a life-course. As a result, rural areas have high levels of out-migration amongst younger age groups (GROS 2003; Jamieson 2000; Ni Laoire 2000; Stockdale 2002a; Stockdale 2002b; Stockdale and Petrie 2002), whilst urban areas, especially those with universities, tend to experience in-migration of those in the early stages of the life-course (GROS 2003; Jones 1992).

Other socio-economic structures influence the spatial dimension of younger people's migration, such as the unevenness of the housing market. Pawson and Watkins (1998) suggest that the sale of council houses in the rural north of Scotland has left younger people with little option but to either become homeless, or move elsewhere. Others contend that such issues are not unique to rural areas, but also affect individuals in urban areas (Green 1992; Hoggart 1997). Whether this is a rural-urban issue or not, differences in the housing market at the local level affect decisions people make on where to locate, and thus will have implications for the context in which individuals age.

Migration in later life is also spatially structured. Several studies highlight that people residing in large conurbations tend to move away at retirement, such as from London (Law and Warnes 1975), Paris (Cribier and Kych 1993), and the metropolitan areas of the north west United States (Litwak and Longino 1987). It is in such areas that people will have earned the kind of wealth and pension entitlements that enable such moves, and the geography is such that people will perceive relocation as facilitating a better life-style.

Differences are also evident between national contexts. Litwak and Longino (1987) show the importance of people moving from the industrial areas of the northwest, to the 'sunshine belt states', such as Florida. These relocations involve enormous

distances, such that continuing to maintain kin and friendship networks in the locale of departure to the same depth and degree as ageing in place would allow will be difficult. Retirement migration in other studies suggests that maintaining links with the place of origin is an important consideration. Law and Warnes (1975) show how migrants from London tend to move to south coast resorts, whilst those from the cities of the English northwest move, in the main, to the nearby seaside towns of the Lancashire coast. The suggestion is that maintaining social and family contacts constrains moves further a field.

Differences are found in aspects of social situation of the people moving into different retirement areas. Hunt *et al* (2002b) discuss result of a survey of people who had moved around retirement, and are now residing in different communities around the state of Wisconsin, in the United States. They suggest three different types of 'retirement community'. The first appeals to those who have less concern with maintaining links to the community from which they have left. People who relocate to such a place tend to be the wealthy, healthy and married people who move long distances. At the other extreme are locales where retirement migrants are more concerned to maintain contact with friends and family in the place from where they have moved. Migrations tend to be of short distance, made by people less wealthy, and less likely to be married when compared to respondents in the first type of 'retirement community'. Between these two extremes are locales where spatial structures encourage both types of migration. The locales thus tend to be nearer to conurbations, rather than the more remote and scenic areas the movers to the first type of area chose. Again, this has implications for the development of different contexts within which people age, and are thus able to develop support networks that show contrasts at the local scale.

This section has shown that migration is affected by spatial structures, such that moves made at different points in the life-course differ depending upon the particular attributes of locales. An implication of this migration will be that migration contributes to the differences in populations at the local level, and thus the context within which people grow older. What the papers reviewed in this section do not demonstrate is what the implications are for people if and when their health deteriorates, or they lose a spouse. Litwak and Longino (1987) suggest that some

move back to be close to family. Yet, as Warnes *et al* (1985b) demonstrate, doing so is not always possible, because, for example, of the lack of affordable and appropriate housing. In addition, where younger people are moving away, the context of support and care networks will similarly be affected by the geographical availability of kin that results.

Section 2.3.3. The temporal trends of migration

Is society becoming increasingly mobile? Given some of the concerns regarding declining social capital, and the Second Demographic Transition, both of which posit rising individualism, it is somewhat surprising that migration is showing no signs of increasing in frequency across England and Wales (Vickers 1998). However, given that people in higher socio-economic groups tend to move longer distances, and that the composition of the population is changing so that a greater proportion are in higher social groups, including amongst retirees (Evandrou and Falkingham 2000), there is every likelihood that the population is becoming more mobile in terms of distance involved. People are thus migrating no more than has previously been the case, though going greater distances when they do move.

The destinations of retirement migrations, however, may alter. Increasing wealth, knowledge of places abroad, improved and more affordable air travel, the small matter of sunshine, and greater ownership of holiday homes outside of Scotland are likely to lead to greater numbers looking overseas for their retirement destination (King *et al.* 1998). The effect of relocating to another country in later life opens important questions regarding health and international dimensions of intergenerational relationships, some of which academics have begun to address (for example Casado-Diaz *et al.* 2004). These issues are, in the main, beyond the scope of my work. However, there are changes in retirement migration patterns that are very much of concern to me, which I consider now.

Patterns of retirement migration within Scotland may also change. Theoretical work on such changes includes the concept of an Elderly Mobility Transition (Rogers 1992). This theory proposes that as countries develop economically, so the numbers of older people migrating, and their destinations, will also alter. In the early stages of

development, moves will be, like those of younger people, into the growing cities. As prosperity grows and life expectancy increases, so the opportunity for a retirement phase of life, free from the constraints of work, also increases. People will begin to move to locations where retirement can be enjoyed, usually to places where they have experienced holidays in previous times. Later still, more people are able to make moves once retired. Their destinations become more diffuse and less focused on particular types of location, such as the seaside resorts identified in earlier work (for example Karn 1977; Law and Warnes 1975). The nature of retirement migration for individuals, no longer experienced in the context of a community of others who are in similar circumstances, may change. Furthermore, locales that have a composition including a high proportion of retirees could occur to a lesser extent.

Changing structures may also affect retirement migration in other ways. Retirement ages are becoming more diffuse and people are generally retiring at younger ages. The small rise in retirement rates that Warnes (1992a) notes in England and Wales during the 1980s is becoming less pronounced (Champion 2005). Earlier moves that are in effect retirement migrations will have implications for individuals and locales, both in terms of the opportunities to develop support networks, and potentially the later needs of a population that are in effect ageing in place, having moved there once no longer working.

The structured nature of migration has effects for both age and social composition. This will have implications for the context in which a person must develop their support and care networks, such as the degree to which kin are available. It is to the subject of the geography of the family that I now move.

Section 2.4. The geography of the multi-generational family

Are there differences sub-nationally in the geographical proximity of intergenerational family residences? The interactions between age and spatial dimensions of migration have implications at the local scale for population structures. They also have effects for the individual, notably the geographical proximity that results between households of the same multi-generational family. Migration of either older or younger generations creates distance between residences of older

parents and adult children. As regards causes, there is much in common between geographical mobility and intergenerational separation. However, there is one notable difference. Migration is ultimately the decision of the individual, whilst the distance resided from kin is additionally an outcome of actions taken by others.

Warnes (1986) compares data on migration of both generations to ascertain to what extent residential separation is the outcome of moves by each generation. In the main, his analysis suggests that the mobility of younger people that affects distance between residences most. They move most often and when they do, their moves tend to be of greater distance. However, this assumes that all locales will be the same. As noted in the earlier parts of this chapter, this is not the case. Some areas have a high proportion of older people who have moved longer distances, whilst for others there is a tendency for younger individuals to out-migrate. The findings of Warnes therefore describe the aggregate level, but not smaller scales of geography, and as a result are limited in the insight they provide to the implications of population mobility for older individuals' experiences.

Several studies consider sub-national geographical differences in kin proximity from the perspective of adult children. Shelton and Grundy (2000) demonstrate there to be a north south division in the United Kingdom with people in more southerly areas residing further from parents than those in the north. However, this does not necessarily mean that this will reflect the situation from the perspective of those in later life. Where a child has migrated there may remain other sons or daughters living nearby. However, evidence from the United States demonstrates geographical differences in the distances older people reside from children. Lin and Rogerson (1995) show that, at the national scale, the dispersion of families is greatest in regions of the United States where there is concomitantly high levels of migration, indicating that areas where migration is highest will also have greater distances between intergenerational residences. Some researchers suggest that retirement locations will also have similarly high proportions of older residents without nearby kin (see for example Grundy 1987a; Hunt et al. 2002b), but there is only limited evidence to back this up.

Other social and demographic factors are shown to be associated with the distance an individual lives from their children. Lin and Rogerson (1995) show that higher completed family size is the most significant factor associated with geographically closer intergenerational residence. This may partly be the result that simply having more offspring increases the chance that at least one will live nearby, though is also likely to be associated with the interaction between socio-economic status, completed family size and the propensity to migrate. However, the finding has potential ramifications for population ageing. Whilst the proportion of people who have at least one living child is likely to increase over the next three decades (Murphy and Grundy 2003), smaller family size may also mean lower propensity to have at least one child living nearby.

As will be discussed later in this chapter, gender is an important aspect of informal support and, as previously alluded, can affect migration decisions. Warnes (1985) shows that daughters tend to reside nearer to their parents than sons, although differences are not to the same extent as between socio-economic groups. However, this study only uses data pertaining to married couples, so does not give insight into how being widowed, single or divorced influences the relationship between adult child's gender and distances between households. Given that people entering later life are increasingly likely to be single or divorced (Evandrou and Falkingham 2000), and the high propensity to widowhood in later life, the implications of being unmarried are of increasing relevance. Additionally, as I will discuss in detail later, those who reside alone, in the main those without a spouse, are most at risk of either social isolation. All too few studies consider the effects of the older parent's gender on the availability of adult children in their locale of residence.

Agents are not entirely powerless to reducing the distance between their residence and that of a child, for example in reaction to events, such as a decline in health or the loss of a partner. Studies demonstrate normative beliefs held by people of both younger and older generations and used as a basis for negotiation. These norms imply that, if an older parent requires support, it is most often seen as their responsibility to move (Finch and Mason 1990; Warnes et al. 1985b). There is evidence to suggest that this is enacted in reality. Studies show that ill health and widowhood is associated with older people relocating to join the households of adult children (Al-Hamad et al.

1997; Glaser and Grundy 1998). These studies are limited, however, in that they do not consider moves that reduce intergenerational distance without co-residence being the outcome. Respondents to a survey in Sheffield that provides the basis for analysis by Qureshi and Walker (1989) suggests that people do indeed move closer to one another where need arises, whilst still maintaining independent living arrangements. The degree to which people are able to do so will differ from one place to another, as well as from one individual to another.

Such moves, however, will not always be possible as suitable and affordable housing may not be available in the locale where children now reside (Warnes et al. 1985b). The ability to afford such housing will be less for those in lower socio-economic groups. This is likely to be geographical. Housing markets differ from one locale to another. The value of the house where the older person lives relative to those in the intended destination will influence the degree to which moving is a realistic option. Moving for those in the social renting market may be even more difficult.

Is the family becoming more geographically dispersed? There are popular myths that suggest the family is becoming increasingly fragmented, with adult children living ever further from ageing parents. Studies in various countries, however, demonstrate that large proportions of parents continue to reside near to children. Shelton and Grundy (2000) compare United Kingdom based survey results from three periods of time over recent decades after controlling for various social and personal characteristics. This shows no discernable trend towards more geographically dispersed families. Warnes (1986) found only a relatively small increase in residential distances between the 1950s and early 1980s. There is thus little evidence to suggest a weakening between the association of place and family, although the future remains far from clear. In addition, the issue of scale is once more given inadequate attention. These studies make claims of the national scale, but the situation in different locales, with their complex interactions of social and spatial structures, and age compositions, will differ. Whilst the family may not be increasingly fragmented geographically at the national scale, the same may not be true for all localities.

Section 2.5. *The geography of care and support*

The contexts in which people experience later life differ from one part of Scotland to another. A consequence is that the opportunities for accessing support from adult children, important even in higher-income countries, will be constrained in some parts of the country. In the sections that follow, I give more detailed consideration to the social and spatial determinants of using intergenerational assistance, and how these interact with the temporal. I begin by discussing research on family support, move on to consider the communities within which individuals reside, and finally the policy implications of informal support.

Section 2.5.1. *The intergenerational family*

How does intergenerational residential separation affect the ability of members of the family to provide support to one another? There are different stances taken by theorists with regard to the importance of residential separation and the ability of the family to adapt (Gillies 2003). The optimistic *Modifiable Extended Network Model* considers the family resilient, and able to adapt to challenges of changes and trends, such as an increasingly mobile population. People can move if need arises, stays of limited duration can permit short-term assistance, and help from formal services can be facilitated from a distance. At the other extreme is the pessimistic *Isolated Nuclear Family*, which portrays the contemporary family as fragmented. Geographic distance and the demands of the modern capitalist economy upon the time of both partners prevents adult children from providing care and assistance to parents and parents-in-law.

It is my contention that the truth lies somewhere between these two extremes. There can be no doubt that the intergenerational family continues to provide assistance both to and from those in later life. Telephones and e-mail permit easier communication, and cars facilitate visiting. Nonetheless, distance is an obstacle to support, especially where need is over a period of time, and of high intensity (Himes et al. 1996). It is also a factor in more subtle ways, influencing the frequency of face-to-face contact and morale.

The degree of geographical separation has been demonstrated to be important because it has a negative affect on the ability of one generation to have in-person contact with the other. Warnes (1985) shows that for older married couples, even very small incremental increases in distance of a few kilometres is associated with marked declines in the frequency of face-to-face contact with adult children. Greenwell and Bengston (1997) discuss similar findings in the context of the United States. At a national scale, it seems unequivocal that distance has a negative effect on visiting between generations. The picture will be more complex at more detailed geographic scales. Transport infrastructure and social class will interact with distance to both facilitate and constrain the ability of an older parent to visit an adult child, or for a child to see their mother or father. The effects of separation on contact will therefore be geographical.

Silverstein *et al* (1998) compare the effects of intergenerational residential distance between individuals residing in North Wales to others living in the United States. Their study finds no great difference in the degree of separation. The effects of distance on visiting are greater for individuals residing in the Welsh context. Various structures could explain why these differences should exist. Socio-economic differences and in transport availability could both potentially explain these findings. Whether such differences would be found between, say, North Wales and the Southeast of England is open to question. The evidence from this international comparison serves to highlight the importance of analysis at the local level when considering geographical aspects of intergenerational relationships. These issues raise important questions as to the effects of location on intergenerational contact.

Wenger *et al* (1995) demonstrate that contact with others, and the perception that there is support available from an informal source if need should arise, are positively associated with morale in later life. They argue that contact affects morale, rather than the other way around. The study uses panel data, showing that frequency of contact occurs before differences in affect are measured, making the assertion that companionship influences morale convincing. Furthermore, for many in later life, their relationship with their children is the most important other than that with their spouses (see for example Al-Hamad *et al.* 1997; Phillipson *et al.* 1996), emphasising

the importance of considering family proximity and its implications.

Lawton *et al* (1994) provide further evidence of the implications of contact for affection and intergenerational relations. They demonstrate an association between the frequencies that women see their adult children and the degree of affection towards the adult child. Where men are concerned, however, this is not the case. The authors argue that contact with fathers might be more based upon obligations, or for practical reasons, whilst sociability is more a feature of mother-child relationships. However, this paper is again based on national data from the United States. Distances are greater and normative values potentially different from the Scottish situation. Nevertheless, their findings provide evidence of affect upon intergenerational relationships and thus the importance of residential distance. The implications for specific locales are not so clearly developed.

Soja's *trialectic* emphasises the importance of time, and its interaction with space and society. The present separation between an older parent and their adult child is important, but so too is the history of residential location over the life-course. Harper (1987) demonstrates that where a person moved in later life to reside near to children the relationship is more formal than where geographical closeness has been maintained. There is much less spontaneity in visiting, with people tending to telephone first before visiting. Whether this is a marker for the level of trust or reciprocity in a relationship is open to question. Nonetheless, Harper's study shows how a person's life history influences support networks. Individual and local scales interact.

Other structures influence the development of both family networks and migratory decisions. Wenger and Burholt (2001) demonstrate how employment structures in North Wales, where the data on which they base their analysis was collected, influence geographical mobility and, partly in consequence, family relationships. The converse is also true, where future employment and inheritance of housing is based on kinship amongst farming families, which acts as a constraint on migration. Other people living in the same locale do not have such ties, and concomitantly are less likely to have adult children living in close proximity. The frequency of contact and

closeness of relationships are interrelated to both employment structures and proximity.

As was discussed in section Section 2.3.1, gender has implications for an individual's decisions regarding migration. Whether a person is male or female also influences intergenerational contact. For the United Kingdom as a whole, Warnes *et al* (1985b) show that contact at a similar distance is greater between older married couples and daughters than it is with sons. This is entirely the result of visiting by parents, rather than the outcome of younger people's behaviour. Whether this is also the result of differences in employment between males and females affording more opportunity to visit daughters, or of normative values encouraging greater contact with female children is unclear. Additionally, the degree to which such a finding can be generalised to all locales is far from clear. For example, if these findings are the result of particular employment patterns, there is the possibility that contrasts will be found with other locales. Structures are spatial, thus their effects on the decisions taken by individuals will also be geographical.

An individual's sociological and geographical situation is influential in the way that separation is perceived. However, the importance of agency must not be discounted. Individuals can perceive distance in very different ways. Mason (1999) highlights this, drawing on in-depth interviews with younger people now residing in locales distant from those of their parents. Whilst some, '*local thinkers*' see the geographic separation from their families as being a major obstacle, others, '*distance thinkers*', do not. These ideas are in themselves largely influenced by class, gender and the need to provide support. However, this also demonstrates that attitudes can differ despite a person's situation in space and society, and hence the need to consider the agency of the individual.

Socio-economic status undoubtedly influences the degree to which individuals provide care to a family member. The reasons why this is so, however, are contested. Arber and Ginn (1992) suggest that differences in living arrangements between people of different social classes are such that greater burdens of care fall upon those in manual occupations, where there is a greater propensity to reside in intergenerational households for economic reasons. Those who provide assistance

to another with whom they reside have a greater likelihood of being involved more intensively when compared to those whose responsibilities lie outside of their residence. Thus, conclude the authors, dividing the population into household and non-household care providers gives evidence on socio-economic differences in informal care provision. Glaser and Grundy (2002), however, demonstrate that when health differences are taken into account, the same degree of assistance is forthcoming across social classes. Lower socio-economic groups are more likely to experience ill health. Thus, there is a greater likelihood that they will have a spouse or parent who needs assistance. The reasons why there are contrasts in the propensity to give or use assistance from kin is important from the point of view of policy interventions. That there are greater demands on those in lower socio-economic groups is not disputed. However, both the studies by Arber and Ginn, and Glaser and Grundy, generalise at the national scale. The contrasting spatial demographics of the local scale indicate a more complex relationship between class and caring than their work suggests.

This is not the only social structure that affects whether or not a person is likely to provide assistance. Gender is also important, with daughters providing most assistance, especially where assistance beyond the household is involved (Hirst 2001). This is partly the result of normative values, in which the caring role is seen as 'natural' for a daughter, whilst providing financial assistance or undertaking practical tasks is seen as a son's responsibility (Finch and Mason 1990; Qureshi and Walker 1989). There is also evidence of cross-gender taboos occurring where the assistance required is of a sensitive or personal nature, such that sons look after fathers, whilst daughters assist mothers (Arber and Ginn 1995). As I have previously pointed out, earlier age of marriage, longer life expectancy and higher propensity to experience limiting long-term illnesses make the need for assistance in later life more likely for women. Such normative values as preferences for same sex care thus further widen the gap between the degree of support that sons and daughters respectively provide.

Distance does not only affect the frequency of face-to-face contact, but also the ability for intergenerational support, either from younger to older or older to younger generations. Studies in the North American context suggest that household separation has a negative effect on assistance with practical day-to-day activities. Litwak and Kulis (1987) demonstrate that even a few streets difference has a noticeable effect

on those forms of help that require in-person contact. Similarly, Himes *et al* (1996) show that where care of parents is of a long duration or high-intensity, then residence of both adult child and older parent in the same locale is crucial. Joseph and Cloutier (1991) show that older people who have relocated a long distance are more likely to use formal services, an outcome of not having kin nearby. Given what I have discussed in relation to the importance of locale in influencing face-to-face contact, the same is likely to be so where practical assistance is concerned. Society's spatial structures will affect the ability of older people to utilise assistance from their children. Thus, whilst the relationship between distance and care provision will undoubtedly pertain as much to Scotland as it does to the United States or Canada, the degree to which this is so, and the differences at scales below the national, is questionable.

Several studies point to the role of locale and migration in kin support. A study by Victor (1996) demonstrates that older people residing in central London have less contact with others, family or non-family, than the general population. This finding draws attention to the possibility that the social situation of individuals in later life is affected significantly by the locale in which they reside. Victor suggests that the out-migration of people of younger age leaves behind older parents for whom social contact is lower than is the case elsewhere. Wenger (1995) also demonstrates the importance of the locale, and the effects of migration, for informal support networks in a study of differences between rural North Wales and urban Liverpool. The population of the former includes considerably more people who have in-migrated at or around the time of retirement. The latter consisted mainly of people who have resided in the same area for many decades. As a result, those living in Liverpool have most resources in terms of availability of family and friends with whom their relationship is emotionally close enough to facilitate the provision of assistance. Other studies also suggest that locales popular as places to which to retire have a higher proportion of their population who do not have kin nearby. Hunt *et al* (2002b) provide the most concrete evidence that this is the case using their survey of older people who have moved to different retirement locations in Wisconsin, in the United States. Individuals moving to locales that are generally attracting retirement migrants from furthest a field are least likely to have kin in the area to which they are

relocating.

However, other studies suggest that older people do not experience 'neglect' in relation to the distances they reside from adult children. Warnes *et al* (1985b) find no evidence of either neglect or unmet need in the four English locales where surveys were undertaken. However, this study uses married couples as a sampling frame. Husbands and wives are important sources for informal care and support (Hirst 2001). Questions therefore arise as to what the implications are once widowhood occurs and a person no longer has another co-resident to provide psychological stimulus or physical care. Furthermore, the interaction of social and spatial structures in locales is complex. Older people residing in the places from which Warnes *et al* draw respondents may well not be experiencing any isolation. The contradictions thrown up by these studies of informal support demonstrate the need for more research investigating the situation of older individuals in the context of different locales. Place, and thus a local scale of analysis, is needed to improve our understanding of the implications of a more mobile society.

Societies, however, are changing. Cohorts now entering later life are very different from earlier generations. These people have very different experiences to earlier generations, having lived through times of dramatic social change. Evandrou and Falkingham (2000) demonstrates that people born in the 1960s, and who will be entering their retirement years around 2020, will be more likely to be childless, divorced, and living alone. Such changes will have effects for both individuals and the contexts within which they live, and thus the opportunities for developing support networks. Older individuals in lower socio-economic groups are increasingly likely to have adult children who are in higher categories, and thus more geographically mobile. An implication will be that the informal support that would have previously been expected will potentially no longer be forthcoming (Smith 1998). The influence of different factors on use of informal support cannot be assumed to be timeless.

This section has demonstrated that there are many sociological, spatial and historical factors that influence the availability and use of intergenerational care and support. These different factors will not necessarily complement one another, and in many situations they will have contradictory influences on an individual. Just such

interaction, between gender and distance, and the implications for support of parents by adult children, is the focus of a Canadian study by Joseph and Hallman (1998). They demonstrate that in the particular context of their survey respondents, distance has less of an effect on the support that daughters provide compared to sons. The normative understandings as to who should provide lead to spatial constraints being less of an impediment to women. Whether the same is true across social class, national boundaries, and of changing values across time requires more consideration.

In this section, I have discussed the importance of analysis of the locale, and emphasised the possibility that there are places where informal care or support from kin will be less available than elsewhere. Ways of coping with an absence of nearby adult children include moving to a locale to close the intervening geographic distance. This is not a feasible option for many because of social and spatial structures. There is potential for social isolation to occur, as is suggested in Victor's analysis of people living in central London (Victor 1996). There are other possible outcomes and different options. In the next section I turn attention to support provided by friends and neighbours.

Section 2.5.2. The local community

An important role of friends is that of confidant; someone with whom a person can talk about worries and concerns, talk out problems, and receive advice. Wenger and Jerrome (1999) demonstrate that for many people, it is a friend or neighbour who fills the roll of a trusted listener. Non-family are especially likely to be perceived in such a role where an individual is not married and does not have children, or where a spouse is in poor health. There is thus a life-course aspect to the relationship between people and non-family. Increasing age is associated with a rising propensity to lose a spouse, or for a partner's health to deteriorate. The findings of Wenger and Jerrome show that as people get older, so non-family become more important, and indeed neighbours are increasingly seen as friends.

There are undoubtedly occasions where the assistance of others goes beyond emotional support (Barker 2002; Nocon and Pearson 2000). There is no reason why others who are non-kin should not do any of the tasks that family might otherwise

perform. In the main, however, as a result of normative values and the temporal influences on relationships, it is with tasks that are not of a personal nature or do not involve a high degree of commitment that friends and neighbours are most likely to become involved. Social structures lead to immediate family being the main sources of support, especially where assistance is intensive or personal.

The giving and receiving of assistance requires an element of trust and reciprocity, which are fundamental aspects of social capital's conceptualisation. As I outlined in the opening chapter, there are researchers who postulate that the links between individuals in society are breaking down, and that communities are becoming less of a cohesive collective in the Western world of the early twenty-first century (Bauman 2001; Buofino and Mulgan 2006; Putnam 2000). Such a contention is also implicit in ideas of a Second Demographic Transition, in that changing values, with individualistic attitudes increasingly becoming the norm (Van de Kaa 1987). Such changes will have implications for the degree to which older people will be able to rely on people living nearby as a source of practical and emotional support. Furthermore, both the theory of the Second Demographic Transition and the decline of social capital thesis involve reliance on the family and, in the case of the former theory, fewer children. These ideas suggest that the degree to which we can depend on family members in later life will decline, yet the role of local communities in people's lives will concomitantly decline. This suggests a bleak outlook for informal support. However, many of the studies used by the proponents of the social capital decline thesis ignore the local context, the level at which, in the main, people directly experience their society.

These theories are controversial and there is far from a consensus as to trends in social capital. Whilst there are constantly popular ideas that 'things are not what they used to be', actually providing evidence, either to confirm or refute, is extremely difficult. One problem with the concept is that it encompasses a wide range of potential factors, which are difficult to measure. The weight given to one factor over another can lead to widely differing conclusions. For example, Stolle and Hooghe (2005) suggest that forms of participation are changing rather than declining. Putnam (2000) bases his thesis on, amongst other measures, a decline in church attendance. Yet other more informal forms of participation may be replacing these more recognisable and

easily measured types of community activity. These might include, for example, a person acting as a confidant to someone residing nearby. Thus social capital may well be changing in its nature whilst not being in irrevocable decline. However, giving weight to Putnam's measure of social capital would lead to much more negative conclusions.

Why concern ourselves with social capital in a study of older individuals and informal support? Social capital is especially important with regards to older individuals given the notable proportion of assistance that is derived from family and neighbours (Hirst 2001). Given that informal assistance is the focus of this thesis, I will now consider what aspects of social capital are important, and how these have been operationalised in studies of older people by different researchers.

There are studies that set out specifically to investigate social capital and its implications for older people (Abels and Abels 2003; Liu and Besser 2003; Locher et al. 2005). These studies tend to rely on measures developed for investigation across all age groups. The concept of measuring social capital within social gerontological enquiry is currently underdeveloped. This said, careful use of more general measures can provide insight into later life and social capital. Pollack and vondem Knesebeck (2004) use several measures in comparing social capital amongst older residents in the United States with similarly aged people in Germany, including questions pertaining to norms of civic trust and reciprocity, and behaviour in terms of participation. They maintain the breakdown in their use of the resultant figures in their analysis, demonstrating how different aspects have contrasting implications for health in older age depending on country of residence. Their study thus clearly demonstrates again the need to recognise the complexities of the concept of social capital, how different components can lead to contrasting conclusions, and the need for judicious use of measurement tools.

Locher *et al.* (2005) investigate links between nutritional status and social capital in a sample of older people. They use a broad definition and wide range of measures including attendance at religious services, and perception of the community. They theorise which measures are likely to influence dietary status of respondents and then develop their measurement tools. They also use length of time resident in a

community arguing that norms of trust and reciprocity will be increase with duration of residence. However, whether this is the case or not is open to question, and is an issue I investigate in this thesis.

Care needs to be taken when using the concept of social capital. Some of the measures touched on above risk being little more than value judgements; for example church attendance. The concept also ceases to analytically useful if used in its broadest sense. As will be seen in the paragraphs that follow, some of the disagreements regarding trends in social capital have their differences in precisely what terms are utilised. The concept is broad and complex. Any attempt to measure it requires precise definition of what dimensions are of interest, and appropriate means for measurement. Caution is then needed in what findings can actually claim based on use of those tools.

What does the evidence suggest is the direction of trends with regard to social capital? Hall (1999c) argues that, in the British context, social capital is not declining. Reforms in education and the changing class structure of the population have ensured that participation in public life has not deteriorated in recent decades. However, such assertions are again problematic in the light of the contentions of Stolle and Hooghe (2005). They argue that social capital is such a broad sweeping concept as to be almost meaningless as a whole. Even if Hall is correct in his assertions, and formal participation remains as high as ever, this does not necessarily mean that the same is true of engagement with informal activities, such as the provision of emotional or practical help for a neighbour whose health is compromising independence.

Evidence at the national scale suggests that assistance from friends and neighbours is indeed declining. An analysis by Hirst (2001) demonstrates that assistance from sources outside of the family declined through the 1990s. These findings, combined with Hall's demonstration of consistent levels of social capital, suggest that different aspects of the broad concept of 'social capital' can move in different directions. In addition to this, I suggest that even Hirst's claim requires caution for similar reasons. Informal support to non-kin is multi-dimensional, from acting as confidant to assisting with practical day-to-day activities. The degree to which the downward trend in assisting others may affect one aspect to a greater or lesser degree than others.

Definitions are therefore important, and investigation of specific areas, such as visiting and face-to-face contact, necessary.

Some studies attempt to provide insight into particular areas of social capital, and their historical trends. For example, Victor *et al* (2002) compare the results of surveys from 1945, 1960 and 1999 that all included questions on perceived social isolation and establish changes over time. Based on this analysis, they claim that there has been no discernable increase; in fact, they suggest the converse has occurred. The data they use is limited. The surveys that Victor *et al* use were all conducted at a local level. However, the authors then extrapolate from these to the national scale. Given differences between locales in contact with neighbours (Phillipson *et al*. 1999), such a step is dubious. Additionally, there is a large non-response rate. The authors acknowledge that those who did not take part are very likely the very ones in which their study is interested. Their work demonstrates that caution should be exercised regarding links between older people and their communities. However, understanding how contemporary processes, such as an increasingly mobile population, influence the contact older people have with others, has the prospect of more informed insight into the future of social capital for individuals in later life.

The study by Victor *et al* (2002) also provides useful and important insights in showing that large minorities of older people experience loneliness, even if non-response is not taken into account. Such findings emphasise the need to consider issues around the social situation of older people. I contend that in taking forward such an agenda, the implications of different locales in which individuals experience their every day realities must be taken seriously.

Social capital is structured, spatially and sociologically. For example, Pickard (1994) shows how women benefit from social networks to a greater extent than men after the psychologically traumatic experience of bereavement. Females are more likely to have wider friendship networks, and place a greater degree of trust in the friends involved, than men. This recourse to others has tangible results in the ability of an individual to cope after the death of somebody with whom they were emotionally close. Pickard contends that understanding the implications of loss can only be

done by understanding the social context. Given the interactions with the spatial, she might have added that the implications of the individual's geographical location.

Whether geographical differences in social capital are the result of compositional differences between populations, or are an effect that can differ even between places with similar age and social compositions is open to question. For example, Subramanian *et al* (2003) analyse the answers given by respondents to questions pertaining to their trust in others who reside in their local community. Even after controlling for various socio-demographic factors, differences still remain between those residing in different locales. Thus, the authors conclude, aspects of trust are not simply the outcome of who is residing where, but are created. Furthermore, the experience of the individual cannot be assumed to reflect that of their locale. Differences may occur through age, or length of residence in an area. The life-course of the individual and migration patterns require more integration to better understand the development of care and support networks.

I have thus far considered family and community separately. However, in many respects the two are closely related. The nature of the association between assistance from children or neighbours is complex. Theories that claim decline in the family also predict community breakdown, such as Van de Kaa's ideas of the Second Demographic Transition (Van de Kaa 1987), and Putnam's concerns for social capital (Putnam 2000). The two go hand in hand. There are also implications of substitutability where mobility is concerned, either where people are moving in later life, or their children have out-migrated in the past. The work of Harper (1987) suggests that there will be occasions when this is not the case, that having sons or daughters living near at hand will actually facilitate assistance from neighbours. However, a study by Magdol and Bessel (2003) finds evidence to the contrary that suggests that there is substitutability. People with more distant kin are more likely to receive assistance from non-kin residing in their geographic area. There are explanations that can reconcile these superficially contrary findings. The respondents in the Harper study are people who have moved into the area. Those in the Magdol and Bessel study include individuals whose children have moved away, and who have thus had more time in which to establish their networks of friends. The interaction of

time and place, the individual and place, both come together in the experience of later life.

The interactions of time, place and society emphasise that caution must be used when extrapolating findings from one place to another. Scotland is affected by international trends, as is evidenced by its ageing demography. However, it also has its own unique aspects that will impinge on the way such forces are played out. For example, the political and economic structures differ from those of the United States, on which Magdol and Bessel (2003) base their assertions, or from rural Staffordshire, England, which is where the respondents in the Harper (1987) reside. Not only does the Scottish context differ at a national scale, but will also have particular aspects at a local level that will influence the way in which contemporary trends impinge on people in the later stages of their life course. The interaction of social, historical and societal structures are complex. Studies that consider particular locales, such as those by Phillipson *et al* (Phillipson et al. 1999), Harper (Harper 1987) and Pickard (1994) emphasise diversity. Thus it is necessary to consider the situation of older people in the context of specific locales.

Of particular note in Scotland has been the recent move to devolution, which has seen powers relating to health and social care moved from Westminster to the new Scottish parliament. New policies have been developed specifically with regard to people in later life. It is to policy that I thus turn to in the next section.

Section 2.5.3. Policy and informal support

There is debate around the extent to which informal support should be relied upon to provide assistance to older individuals. Some research suggests that there are preferences for assistance from formal providers. Various studies show complex interrelations between identity and personal situation affecting attitudes towards preferences for care provision, and evidence of many preferring formal to informal care (Kasper et al. 2000; Wielink et al. 1997). Other studies demonstrate negative attitudes towards receiving help from family, coupled to feelings of being a burden (Fassino et al. 2002). Yet other work suggests the beneficial aspects of informal care both for providers and recipients (for example Russell 2001). However, informal

support remains crucial to the lives of many in later life. The reality is that the provision of care by family and neighbours is going to remain important to the continued independent living of many. Policy must address how best it can supplement and assist in these tasks, for the benefit of both providers and recipients.

Those who, for whatever reason, do not have recourse to family or friends have the greatest personal need for support from formal services. Arber *et al* (1988) demonstrate that living alone increases the use of social services five fold, suggesting that solitary living reflects a lower availability of kin support and so a greater demand for help from the state. Given the implications of residential separation on support provision, having a child in a separate residence but nearby is likely to have a similar effect. Lo Sasso and Johnson (2002) identify older individuals receiving help with basic personal care from children as having a lower risk of requiring admission to institutional care at a later date. From a utilitarian perspective, targeting those who do not have informal support makes more effective use of scarce resources.

Yet the relationship between formal and informal care is contentious. There is debate between academics as to whether service provision by the state works in addition to care given by family or friends, substitutes for it, or even increases the burden on carers. This has particular resonance in Scotland, where the recently created devolved assembly has introduced free personal care regardless of personal wealth. This may have various consequences. Additional spending on social services, rather than improving the support for those in need may simply act as substitutes for informal care. In Sweden, cuts in welfare spending have been matched by increasing demands on family assistance (Johansson *et al.* 2003). However, other studies find no evidence of association between the amount of help individuals receive from formal sources, and that coming from family (Li 2005; Penning 2002). Other work suggests that service providers act to deflect the responsibilities of the capitalist state to family or friends, by encouraging independence and self reliance (Ward-Griffin and Marshall 2003). This issue is thus contentious and a long way from resolution. Given the greater use of family care by those in lower socio-economic positions, there are also important issues of social justice in how resources are used. Targeting those without family support will also entail giving assistance to people who are economically better

off.

From the point of view of those providing support, the picture is very different, suggesting that service delivery needs to look beyond simply focusing on the needs of recipients. One implication of involvement in support is that it adversely affects the ability of an individual to participate in paid employment (Carmichael and Charles 1998). Ungerson shows how provision of support to parents or spouse perpetuates and widens gender and socio-economic inequalities; a good example of the interaction of the historical and sociological. Looking after a family member reduces earnings and pensions for the person concerned, with implications for the rest of their career and life-course. Being less able to break out of deprivation increases their propensity to experience ill-health themselves. The cycle of caring and poverty then occurs across the generations, as their children, especially daughters, will find themselves in a similar situation. Thus there are compelling reasons for services to provide assistance and support to those who have care and support networks.

Providing support to all who are experiencing ill health, however, is made difficult by the finite nature of resources. Pressure to reduce state spending has increased pressure on welfare spending still further. A response to tightening fiscal budgets by governments has been to shift responsibility for service provision to the voluntary sector. Various studies are demonstrating differences in the extent to which these non-statutory organisations have developed (Bryson et al. 2002; Milligan and Fyfe 2004; Milligan 2001). Research in this area shows how the degree to which philanthropy has been contingent on local scale economic development which, as Massey (1979) demonstrates, is highly uneven. In using the voluntary groups to provide services, the government does not start with a blank slate. It is dependent on organisations already in existence as a starting point.

Section 2.6. Socio-demographic change and the future of informal support

Population ageing at a national scale is a cause of concern in policy-making circles. Resulting action from government departments includes employment and training, pensions, and town planning (Dunnell 2001). Concern for the future ability of the health service is demonstrated in a report by the Expert Group on Healthcare of Older

People (2002) for the Scottish Executive. This paper states that,

“Information on current and projected demography, taken together with data on current and predicted service use, means that care of older people is **the major task** of NHSScotland as it enters the 21st century.” [Emphasis added].

The degree to which national scale demographic ageing will add to pressures on health and social services is open to question. Sheshman and Gray (2002) demonstrate that recent increases in health care expenditure can only in small part be attributed to the changing age composition of the population. In the main, new technologies and higher expectations amongst all age groups explain increasing spending. These findings demonstrate the necessity for research to take a holistic view. Consideration of summary indicators in isolation from other information can give potentially misleading impressions of social change.

In addition, the occurrence or otherwise of a ‘compression of morbidity’ has major implications with regard to how population ageing will impact on service demand. If Fries (1980) is correct, and the time during which chronic and debilitating conditions towards the end of the life course reduces, there is no need for concern. However, if conversely Gruenberg (1977) is right, and extending life-expectancies are the result of medical interventions allowing those who would otherwise die to live longer, then pressure on services are likely to be even greater than is suggested by straight forward demographic projections. The evidence to date suggests that the truth in the debate between optimistic and pessimistic ‘compression of morbidity’ debates lies somewhere between the two extreme views. Work by Dunnell (1997) suggests that the time spent in poor health amongst the United Kingdom population has indeed increased, as Gruenberg’s ideas would lead us to believe. However, the increase has not been as rapid as has been the case for life expectancy. Perhaps Manton *et al.* (1991) has got it right where he suggests that, yes, medical advances are keeping people alive longer with otherwise fatal conditions but in a state of health that allows them to enjoy a full and independent life.

Several researchers also question the assumption that the increasing dependency ratio will necessarily mean fewer people available to provide assistance. For example,

Pickard *et al* show that declining mortality, one of the contributory factors to population ageing, will result in an increase in the proportion of people who have a surviving spouse. Not only will decreasing death rates adversely affect the dependency ratio, but will also conversely improve the situation as regards availability of another to people in their later years. Similar complexities affect analysis of changing fertility. Murphy and Grundy (2003) show that improving survival of children, and later ages of childbirth, will contribute to an increasing proportion of older people with at least one surviving child, at least for the coming couple of centuries.

Analysis that places a positive slant on future demographic trends calls into question the pessimistic pronouncement of the Expert Group on Healthcare of Older People (2002) quoted above. However, the situation is not so positive if the local scale of analysis is considered. Pickard *et al* do not take into account differences in mortality between locales. For example, life expectancy of people residing in Strathclyde differs from that found in Lothian. There is evidence to suggest that high death rates amongst the more disadvantaged socio-economic groups explains class differentials in informal support (Glaser and Grundy 2002). Improving mortality for Scotland as a whole may well lead to more people with surviving spouses. But unless more disaggregated approaches are used to understand how changing mortality will influence the need for informal support, our understanding of the implications of contemporary trends will remain inadequate.

The analysis by Murphy and Grundy (2003) similarly suffers from inadequate attention to scale. There is an assumption that more surviving children at a national scale will benefit all equally, and that having a living child will also mean that they are available to provide assistance if and when required. As I have already discussed in this section, the very groups on whom to a greater extent care giving responsibilities fall form a subsection of the population, and these are also the individuals for whom survival chances are poorest. However, there is another issue that Murphy and Grundy do not address: migration. If, as seems likely, the population is becoming increasingly mobile, then there is every chance that the likelihood that your child resides in the same locality if and when you have need of

assistance will decline.

Section 2.7. Conclusions

Research has clearly shown how social and spatial structures influence informal support. Their interaction, however, is poorly understood. Lower socio-economic position increases the likelihood of receiving or providing support. Normative values place expectations on children to provide support, especially on daughters. Yet these will not necessarily coincide with spatial factors. Sons may live nearer than their sisters, and so be geographically in a better position to give assistance. The intergenerational family may be too dispersed to make giving help impractical.

The historical dimension of the *trialectic* emphasises that structures are constantly changing. Normative values that influence migration, the family, community and gender, are not timeless. Neither are the socio-economic structures, with their implications for population mobility and informal care and support. The complex interactions of all these different aspects, the spatial, sociological and historical, will all affect the situation of older individuals into the future. Research must now move beyond a focus on using one academic approach, and bring together these different social facets.

Trends occurring at a national scale will have implications for individuals, although, largely as a result of migration, these will differ from at local levels of analysis. This thesis will therefore investigate whether differences occur between areas with contrasting patterns of population mobility. The following research questions will be addressed: (1) where in Scotland are there age-specific migration patterns that will have potential implications for intergenerational family support? (2) How does migration effect the geographical proximity of older parents and adult children? The hypothesis here is that areas of high migration, particularly the in-migration of older groups or out-migration of younger age groups, will have more dispersed intergenerational families. (3) What are the implications of such differences for locales and individuals in relation to the use of informal support, and the relationship of sociological factors to informal care from children? And (4), what support is forthcoming from other members of the local community, and does it provide a

substitute where members of the intergenerational family are not available. Questions (1) and (2) are addressed in Chapter 5, (3) in Chapter 6, and (4) in Chapter 7.

The issues of structure and agency have arisen throughout the present chapter, and these form a theme of the thesis discussion as a whole. Their importance is such that greater consideration and clarification of the roles of these different concepts is required. The conceptualisation of the social world is also vital to developing the methods through which insight into the issues of interest is achieved. Hence, the next chapter focuses on issues of ontology and epistemology.

Chapter 3. Ontology and epistemology

Section 3.1. Introduction

In the previous chapters, I have given an overview of the importance of informal care and support, and of contemporary social trends that threaten the availability both of kin, and of community. In doing so, I have drawn attention to the paucity of research that gives insight into how changes at the national scale effect individuals, or the locales within which they reside. Now, in this chapter, I discuss the ontology and epistemology on which my research is based.

Outlining the ontology is important so as to identify those aspects of the social world that are important to measure; specifically the degree to which individuals are able to determine their lives and the influence of structures in enabling or constraining their actions. The epistemology is also crucial as it bears on how the research can convincingly demonstrate why people take particular decisions, and the implications both for themselves and others.

The previous chapters have shown that people's actions are far from random. Where they reside or who cares or supports them in later life is structured. My contention in this chapter is that research must thus recognise both the role of individuals, and their circumstances, structure and agency. Hence, in developing my theoretical basis, I draw on Giddens conceptualisation of *structuration* (Giddens 1984), considering and reflecting on other studies that use his ideas, and criticisms of using such an approach, and so will proceed with an overview of its conceptualisations.

Section 3.2. An overview of structuration theory

The theory of structuration not only recognises the roles of both structure and agency, but also refutes entirely their dualism, the idea that there are two separate dipoles with individuals at one end and a notion of 'society' at the other. For Giddens one is constituted by the other, what he calls the *duality of structure* (Giddens 1984). One cannot exist without the other. There is no collective social world without individuals, yet at the same time it is society that makes possible people's actions, and influences their decision-making processes in such a way that geographical places,

periods of time, or experiences of people in contrasting social positions, recognisably differ.

Support networks are social entities, in that they involve more than one person. The various generalisations discussed in the previous chapter regarding, for example, the effects of distance, class or gender, demonstrate that structure is important. Such statistical associations are not the outcome of mere chance. Yet individuals are not coerced to provide assistance to family or neighbours. Nocon and Pearson (2000) quote examples of occasions where a person relies on neighbours despite having an adult child living nearby. Some individuals take action to overcome the impositions of geographical distance by relocating from one locale to another to live with their adult children (Al-Hamad et al. 1997).

Thus far, I have only superficially elaborated on structures, so it is to these I now turn. For Giddens, these are defined as *rules and resources* (Giddens 1984: 16-25). Some of these are written down, such as the legal framework for example. Most, however, are understood in much the same way as children engage in school playground games. The codes that guide their play are not formalised. A generally held mutual understanding is achieved through verbal explanation, discussion, observation, and through taking part. Rules are not precise and are likely to be interpreted in different ways by each actor. There is still shape to their games, enabling those taking part to do so in a cohesive and meaningful manner.

Such an analogy lends itself well to the expectations and roles people have within informal care and support networks. There are no laws that state an adult child must care for their ageing parents in Scotland, though such regulations do exist in other countries, for example France (Ogg 2002) and Singapore (Teo et al. 2003). Knowing what to do, who to call on, where to establish limits to obligations, can only be ascertained through negotiation and experience. The resulting normative values that people develop over their life course act as a guide to their individual decisions (Finch and Mason 1990).

Resources include a person's own attributes, such as knowledge, skills and abilities, as well as material they have available to them. The literature review has highlighted

a number of examples in relation to care and support networks, such as the availability of children (Wenger and Burholt 2001), whether these live nearby (Warnes 1986), the ability to draw on experience in the workplace to give practical assistance to a wife who has dementia (Russell 2001), and so forth. Structures are thus complex aspects that draw on shared understandings and personal attributes to influence the development of care or support networks. Both aspects of Giddens theoretical conceptualisation of structure can thus provide useful insights into opportunities and constraints to the development of care or support networks.

Structures act not only to constrain, but also to enable. People can use these structures to further their own causes, and achieve desired ends. The normative values on which people base negotiations not only restrict what can be demanded, but also place expectations on others (Finch and Mason 1990; Qureshi and Walker 1989). A sense of knowing that others are there if need should ever arise is reassuring, giving a sense of *ontological security* (Giddens 1984) though, conversely, perceptions of declining social capital or the breakdown of 'family values' will be a source of distress. Attitudes, ideas, and beliefs pertaining to the effects of spatial and social structures should thus be seen both in terms of the negative and positive attributes for the lives of individuals. To achieve a holistic understanding of social phenomenon, the constructive and positive aspects of the rules and resources for individuals must be taken into account.

For Giddens, people are knowledgeable agents, able to discursively elaborate on why they took certain actions (Giddens 1984: 3-4). Thus, if in the research process people are asked to elaborate on their actions, they will usually give a coherent explanation. Occasions where participants do not elaborate on why they take a particular course include, for example, where cognitive abilities are limited, or where an individual does not wish to co-operate with the research. Furthermore, explanations may be limited by lapses in memory or rationalisation with benefit of hindsight. However, in the main, people are able to give credible insight into their actions.

Much of day-to-day life is lived without any thought on the part of the agent, what Giddens refers to as *practical consciousness*. Individuals inculcate ideas of the 'right thing to do' through the observation of others around them and reactions toward

how they themselves behave. An example of the guides people use of which they are not fully conscious is demonstrated in Finch and Mason's study of negotiations between older parents and adult children over roles in support networks, what is reasonable to expect or the placing of limits, which they base on normative values (Finch and Mason 1990). This is, in the main, carried out subconsciously and can be elaborated on discursively only to a limited extent. Processes involve constant decision making as to how one should behave, the assistance that should be given, and the limits that are justifiable, both to oneself and to others. Whether or not to move, or to participate in providing assistance or support to a neighbour, involves similar processes.

In the course of daily life people engage in what Giddens (1984: 5-6) refers to as *reflexive monitoring*. This entails observing and considering the actions of others, and also reactions to his or her own behaviour. From this process a person learns about the world of which they are a part, including aspects of society they can make use of to achieve their goals, as well as constraints that structures place on them. Such a process is not necessarily conscious. Much of this does not happen in such a way that it will be discursively elaborated on. It is part of the *practical consciousness*, the everyday unthinking part of life that is subconscious and unthinking, but nonetheless very much agency. The conscious is informed and actively considers how to behave. Giddens suggests:

‘While competent actors can nearly always report discursively about their intentions in, and reasons for, acting as they do, they cannot necessarily do so of their motives.’ (Giddens 1984).

Thus in deciding whether to provide assistance to a family member, or to a friend, people are aware of their situation, and a sense of how this places obligations on them (Finch and Mason 1990). The underlying causes of these shared values are not something they will necessarily consciously recognise. That they exist only becomes apparent where research reveals the patterns that require more than agency as explanation, such as the hierarchy of care identified by Qureshi and Walker (1989). Older individuals who are receiving assistance from others will not state that they have a list through which they work to develop a network. Nonetheless, the survey

that Qureshi and Walker use provides convincing evidence that there are shared concepts and ideas as to who should be turned to where needs arise.

Knowledgeable actors are largely aware of their own circumstances, which they experience in their locale and within a particular period of time. People's biographies are constrained and enabled by structures that exist both historically and geographically. Structures come together in complex ways that differentiate one locale distinctively from another. With regard to support networks for example, Phillipson *et al* (1999) show how different urban areas in England exhibit contrasting support networks. These are not chance differences, but the outcome of individuals considering their own situation and acting accordingly. National scale trends, however, also have implications for both locales and individuals. The ability to reciprocate assistance from an adult child or neighbour is closely associated to income, and thus the level of state benefits (Due et al. 1999), although even this is mediated by the cost of living, which differs from one locale to another. Individuals are to a large extent aware of their own particular situation, such as income or availability of kin support. Such aspects are an outcome of complex social, spatial and temporal interaction. The individual and the social interact.

The development of structures is a process, with individuals' decisions constantly feeding back into wider society. The *rules* are thus continually being revised as a result of the collective actions of agency. The theory that proposes a Second Demographic Transition can be used as an example. A few people act as innovators, living on their own or eschewing marriage to cohabit. Others see what they are doing, and *reflexively* consider whether they too can break convention, and do likewise. Over time, it is feasible that *rules* evolve, and co-residence with older parents, or living with a partner without marrying becomes more common. Such a change is then influential in the decisions of others, who are no longer constrained to the same degree in decisions relating to living arrangements. Such a transformation, however, does not occur instantaneously, but happens over time, as people are continuously influencing and being influenced by structure. A similar idea can be applied to *resources*, using economics as analogy, where supply and demand connects the individual by the 'guiding hand' of the economy. Prices alter and individuals respond, which in turn influences the cost of an item, and so on *ad infinitum*.

Structure, in terms of *rules* and *resources*, and agency are interlinked, each continually evolving in response to changes in the other as an ongoing process happening over time.

The location of a person in time also affects the rules that actors use; hence the need for research into what a Second Demographic Transition or a decline in social capital will entail. Time is not static, but is constantly moving, and so too are social and spatial structures ever evolving, and hence we must consider the implications of the temporal. The changing nature of structures affecting informal support is reflected by the changing involvement of family and friends in intensive assistance through the 1990s (Hirst 2001). Such changes occur as individuals *reflexively* consider their particular needs and resources. That informal support is not constant across time and space is evidence of changing influences, and the dynamic nature of these structures, which affect knowledgeable individuals, and so also outcomes.

Given the role of agency in the creation and reproduction of structures, as well as accounting for particular situations where actions do not fit with the outcomes statistical analyses suggest should occur, for example where neighbours provide assistance despite the apparent availability of kin (Nocon and Pearson 2000), understanding the rationales of individuals that lie behind trends is crucial. People actively take decisions regarding the best course of action. However, the outcomes of a person's actions are not always intended. Giddens (1984: 8-9) offers the example of a person spilling coffee. It is not necessarily an intended act, but that does not mean they are not the agent responsible. Similarly, the consequences of actions such as migration can be considered using a similar approach. The decision by an adult child to relocate to a distant locale does not indicate a poor relationship between adult child and their parent or parents. Nonetheless, an outcome may be that intergenerational support is lessened. Work by Silverstein and Parrot (1997) suggests that lessened contact between grandparents and grandchildren has negative effects for the attitudes of younger generations towards public support for older people. There is no suggestion that this is the intended consequence of reduced contact, rather it is the unforeseen, and unforeseeable for the individual, repercussion for the wider society.

An aspect of the *reflexive* manner in which structures are continually produced and reproduced is that there is a rationale for continuing to follow such practices. People constantly consider what options are open to them, and with virtually no exception there will always be alternative courses of action, and they may act in a rational manner as seen from their own perspective. Consider an issue that Warnes *et al* (1985b) identify: older people wish to live nearer children but feel they cannot due to a lack of suitable housing. These individuals are balancing the advantages of relocating nearer to family against the poorer housing that they would have to accept in so doing. The pros and cons that such a decision involves seem so one sided as to be clear-cut such that respondents state that there is no option but to remain in their present locale. However, Giddens ideas suggest that even in such a circumstance, people make active decisions, balancing different and sometimes having to resolve conflicting influences structures.

Nonetheless, it is my opinion that to an extent Giddens (1984) overestimates the role of agency. He uses the example of a person held against their will, tied up and blindfold. This person is not powerless, he suggests. They have the option to cooperate or to refuse to speak. Their ability to influence the situation in which they find themselves are, to put it mildly, constrained. In the context of informal support networks, there is very little a person can do if social capital is such that there are no neighbours who will look out for them, or provide support. The constraints created by structures can be considerable, to a point where suggesting that choice remains open is misleading. There are occasions where a person's situation within *sociality*, *historicity* or *spaciality* reduces their ability to choose their own path. Take for example an individual who, towards the end of their life-course, becomes unable to mobilise unaided, or another whose pension entitlement is such that choice becomes constrained to a point where to speak of agency becomes disingenuous. Consideration of agency is important for insight into how attitudes, values or beliefs might alter, but there are limits. Especially from a policy perspective, the implications of resources, personal and material, cannot and must not be overestimated.

As I discussed in the previous chapter, relocating has consequences for the individual who moves, but also for their family and social networks. Many of these will be

unintended. The development of ill health, either of the person him or herself, or of others who remain in situ, cannot be predicted. The lack of adequate housing near to a child who has moved (Warnes 1986) is not going to be a consideration at the point in time where relocating is considered. People can have agency yet many of the resultant consequences will not be those that were consciously set out prior to acting.

To an extent, the level of critique that has been brought to bear on it can measure the success of structuration theory. The criticisms also provide challenges that any research that uses these ideas as a theoretical basis has to take seriously in developing a robust methodological approach. Thus, in the next section, I consider and reflect on critiques of Giddens' ideas.

The success of the ideas put forward by Giddens in *The Constitution of Society* (Giddens 1984) can be measured by the level of criticism that has been generated. These critiques provide the opportunity to develop the theoretical basis of research and to critically adapt the concepts contained in the development of an ontological basis for investigations of the social world. It is my contention that Giddens is correct in his assertions that both structure and agency are important. However, I also argue that he underestimates the degree to which an individual's situation constrains what they can personally achieve. Nonetheless, holistic understanding, and openings for action, can be achieved through a theoretical basis that includes both structure and agency. In this section, I consider the criticisms that have been put forward, and discuss the contribution these make to the ideas developed in this thesis.

Kellerman (1987) suggests that Giddens ideas provide the basis through which the ideas of different geographical schools might be brought together, using strengths and insights into new, holistic and coherent explanations, avoiding the limitations of previous approaches. Structuration, it is contended, has the potential to bring together social scientists from disparate traditions: structuralists, humanists, historians, geographers and so forth. Others reject the suggestion that structuration theory can unite. Jonas (1988) argues that Marxism already provides a rounded account of the social world. In response to this, Kellerman (1987) agrees that indeed Marxism can be seen as integrative for many aspects of the social sciences, but not of structure and agency. He contends that Marxist approaches are too deterministic,

offering less scope for recognising the ability of individuals to utilise structures, and overcome those that constrain. It is my opinion that both structure and agency are needed in any credible account. Dogmatic adherence to philosophies that cannot account for commonalities across societies, histories and spaces, or that do not explain or recognise the significance of exceptions, where individuals do not neatly fit into structural explanations, are bound to lead to unconvincing and limited insight.

Another line of criticism is that, whilst Giddens' account is convincing, there are methodological reasons for maintaining a distinction between structure and agency. Thompson (1984) contends that maintaining the dualism provides the means to understand the very real constraints that people face in everyday life. Through trying to bring the two concepts together, Thompson believes that Giddens underestimates structural constraints:

‘The constraints which reduce the options of propertyless individuals to one... are imposed in part by the conditions of capitalist production and exchange.’

(Thompson 1989)

Thompson (1989) argues that for individuals the options for action on the part of the individual to change structures is dependent on their position within society, which is in itself structural. He generally agrees with Giddens, but does acknowledge how an individual's situation influences options for putting agency into affect. There is risk that structuration can place too much emphasis on the role of agency. Giddens suggests that there are always alternatives, no matter how unpalatable. However, for those older people who are living in poverty, or whose health prevents them from maintaining their own lives to the extent they would desire, their situation is limited to an extent that suggesting otherwise, whilst theoretically plausible, is not heuristic to the actuality.

Bauder (2001) formulates a similar argument, suggesting that maintaining the separation of structure and agency is useful for formulating ways in which to envisage political action. This may be so, but many of the concepts of structuration provide similar potential. It recognises agency, and the manner in which structures can be both enabling as well as constraining, which in itself holds the promise of opening up

potential opportunities for intervention. Examples where small-scale measures lead to structures being challenged give indication both of what is possible, and raise questions that demonstrate the complexities of social life. For example, Russell (2001) demonstrates the ways in which men are able to draw on experiences of work to enable them to care for a wife who has dementia. Such insights are missed where only structures are considered, which highlight the negative effects of gender on male participation in such caring roles.

For other writers Giddens oversimplifies the complexities of the social world, providing too neat a conceptualisation. Feminists are critical of the lack of active engagement that Giddens has for issues around patriarchy. He makes only passing mention of gender or the domain of the household in his formulations. Murgatroyd (1989) suggests that this misses the lives of half of the population. Giddens (1989) in reply denies this, arguing that many issues are crosscutting of gender. Indeed, it could be argued that patriarchy itself could be conceived of in structurationist terms. The manner in which other structures are created, through *reflexive monitoring*, and the *unintended consequences* of human agency, can explain the development of inegalitarian gender divisions. The work of feminists highlights how males, and in some instances females, use patriarchy to their own individual advantage, to the detriment of women as a whole (Bottomley 1992). In the same light, he does not develop his ideas into the role of ageing and the affect this has on relationships between individuals and structures. This does not mean they cannot be applied, and the theory developed in doing so, as will be demonstrated in its utilisation in this thesis. As Gregory (1989) suggests, criticisms such as this actually provide momentum to a theory. They are the lifeblood that shows that a theory is alive and well, provoking debate whilst also being further developed.

Others suggest that Giddens' conceptualisation of *institutions* is imprecise (Turner 1991). Murgatroyd (1989) similarly suggests that Giddens' conceptions of *institutions* are inadequately developed. She questions how such aspects as the household or the family would fit into the theory. She suggests that there is no reason why these should not be considered in the framework of structuration, even though Giddens does not specifically do this. Indeed, she suggests that structuration is both capable and would be improved for further working in this direction. The theory of

structuration, as has been the case with predecessors such as Marxism or humanism, is something that is not ever going to be a static and complete explanation of society. The theory is continually developing as it is applied to different questions in the complex milieu of the social world. Murgatroyd suggests that structuration is capable of being expanded to include and further theoretical understanding, for example to conceptualisations of 'the family'.

The scope and potential offered using structuration as a theoretical approach can be demonstrated by considering work that has already utilised it in conceptualisations of the social world. In the section that follows, I discuss the value that using Giddens' ideas have given to other researchers work. To a limited extent, geographers have used the principles of structuration to guide their enquiry, drawn by the manner in which it incorporates both the social and the spatial, and also its recognition of both the structures that give locales and epochs their distinctive and recursive shape, but nonetheless engages the creative agency of people and allows a nuanced understanding of actions in their social and geographical context.

Migration studies in particular have utilised Giddens' ideas. Halfacree and Boyle (1993) use these as a basis of their appeal for people to be brought back into human geography, notably in the context of migration studies, and specifically using biographies to gain insight into the complex and temporal nature of people engaging with structures that influence relocation decisions. Ni Laoire (2000) does just that in her study of younger people's migration decisions in rural Ireland. Her research highlights the complexities of the decision to migrate. Yes, structures such as employment and education are important, but they do not compel relocation. People are aware that if they wish to pursue a career then it will be necessary to move away from where they have grown up. There is an awareness of the decisions made by others and the results of such actions. The biographies also highlight the multitude of issues an agent considers in deciding to move or even return and the temporal aspects of the decision making process, including concerns as to the welfare of parents, something overlooked in other studies of migration (see for example, with regard to retirement migration, Litwak and Longino 1987). These are active decisions people are taking, weighing up different options, and competing senses of responsibility. Structures are potentially useful for developing careers, or for gaining support from

family. Their effects and benefits for an individual have to be considered and action taken. In the decisions made, structures are either perpetuated, or contribution is made to their transformation.

Findlay and Li (1999) also used structuration to inform their research of migration to and from Hong Kong. They were interested in the phenomenon of international migration in the run-up to China regaining sovereignty over the territory, especially given the paradox of both rising in- and out-migration. Using a large-scale questionnaire survey they identified an association between ethnicity and migration decisions. This might have been left there, giving a superficial functionalist explanation, suggesting that 'culture' explained migration decisions. The research was taken beyond such a conclusion, however, using more in-depth qualitative methods. Interviewees discussed the decisions of people to either move away or remain, and in so doing give insight into the manner in which the self-construction of ethnic identity influences the decisions they make on where to live. They suggest that this is a practical example of how the *practical consciousness* constructs identity, and contributes to decisions regarding migration. Again, the temporal aspects of the process are elucidated. People are not just responding to political events. They consider their situation and potentialities open to them in coming to a decision, a choice that is theirs to make but in the context of those recursively constructed structures.

The use of structuration as a theoretical framework to consider support networks has been limited. Mills (2004) uses it to investigate the changing partnership behaviours internationally. Her results demonstrate that, from the 1940s onwards, there has occurred a postponement of partnership formation in Canada and the Netherlands, whilst there remains little change in Russia. Through using structuration theory, she brings the interplay between wider normative and economic structures and individual decisions into focus. Using Giddens' theoretical idea as a framework, Mills considers her findings, in particular the ways in which change has been enabled in some national contexts but not in others. Such work further shows that structures are not necessarily determining, requiring consideration of how they come together in different locations, and how agency responds to the constraints and opportunities

created.

What these demographic and migration studies that use Giddens as a theoretical basis show is the ability of a structurationist approach to shed light on the manner in which people's lives are affected by structure, but not in a manner that removes all agency. It gives recognition to the power of structures, both positively and negatively, as people are constrained, influenced and assisted by them and consider how they should respond. The role of process is also emphasised. The time element of Soja's trialectic (Soja 1995) is recognised, which is particularly important to social gerontology where decisions and events earlier in a person's life course can have repercussions on their present situation, and the opportunities open for company and support. The incorporation of time, place and society, and of different scales, all provide justification for the use of structuration to achieve a nuanced and holistic account that opens up opportunities for action, without losing sight of the very real constraints many face in their reality of living.

Whilst many of the studies discussed in the previous chapter acknowledge the role of structures, or of agency, few consider the manner in which these operate together. No studies have specifically used structuration theory as a means of investigating informal support and older people. Some have implicitly incorporated aspects that reflect similar concerns. For example, Finch and Mason's study of obligations and assistance demonstrated the manner in which people use normative values as a means of negotiating their position (Finch and Mason 1990). There is no sense that the respondents in their survey were in any sense uncritical or accepting of their situation, but rather that they used these ideas to guide their negotiations with their parents or adult children. A more explicit use of structuration theory would have opened up questions as to how the outcomes of such negotiations feed back into normative values, and influence the decisions that others make.

These issues will be expanded on in the following section in which I discuss how others use the ideas of Giddens as a practical basis for research.

Section 3.3. *Structuration as research tool*

In the early 1990s, Cloke *et al* (1991) suggested that the star of structuration was waning. In the time that has since passed there has been disappointingly little development of the theory, with some notable exceptions some of which I discussed in the previous section. If, as Gregory (1989) suggests, this is the stimulus of theory then this lack of engagement is worrying. The reason why this may have occurred is the criticism that, as an ontological theory it does not provide the tools necessary for practical social research such as provided by more epistemologically focussed theories (Gregson 1987). Given the last of these criticisms, this section considers the potential for research offered by structuration. In doing so, the value of both quantitative and qualitative approaches is demonstrated.

Giddens, in *The Constitution of Society*, provides discussion of how he sees his theoretical ideas informing research (Giddens 1984). He does not provide specific details of exactly what methods he believes are required, but instead elucidates on how earlier work by other researchers can be seen to investigate aspects of the social world. The suggestion is that the theory should inform the methodological approach, rather than dictate specific methods to use. The aim of the theory is to guide rather than give a step-by-step formula. One example Giddens uses is based on work by Willis (1977), in which a study is made involving participant observation of young men in the latter days of schooling and early working life. This research gives insight into how their knowledge of the school system, but partial understanding of the wider world, has unintended consequences that constrain their future and reproduces structures of capitalist society, namely cheap labour for repetitive and unappealing jobs. The study thus provides insight into how structures at a high scale of abstraction both contribute to and are created by individual agency.

Another study Giddens uses, again relating to the education system, further illustrates how structuration might provide a framework for research, but in this case the methods used are quantitative. A large-scale study of school children in northern Italy shows how the agency of individuals contends with factors constraining and facilitating to their endeavours. It thus sees the children as active decision makers, though nonetheless operating in a context in which structural factors, economic and

normative, were involved in their active decision-making. The research showed that those from a lower socio-economic group were less likely to stay on at school than those from higher strata. Hence, Giddens suggests that it clearly demonstrates that there was more going on than could simply be explained away as random decisions being taken by individual actors. If the study had not gone further, however, and considered the motivations of students then it would have offered no more than a functionalist perspective. However, it did go on and questioned what options the students perceived, which motivated them to either stay on or leave. They were thus not simply left as automatically responsive objects. The researcher actively considered the human understandings and motivations. Giddens acknowledges that such consideration with statistical methods cannot bring out the complexities of the decision making process, with all its nuances. Nonetheless, it is able to facilitate an understanding of the active process in which actors engage with structure, and allows speculation as to the influences that such actions have on others.

The papers I discussed in the previous section give further indication of how Giddens work can provide a theoretical approach as an ontological basis to research. Migration studies highlight the complex array of factors people face in making their decisions, and the role of agency makes in deciding whether to stay or go, each using both qualitative and quantitative methods together (Findlay and Li 1999; Halfacree and Boyle 1993; Ni Laoire 2000). These discussions are informed by the ideas of how the structures constraining and assisting moves between locales are ultimately the creation of the decisions arrived at by respondents and their peers. C. Wright-Mills argued in the 1950s that the challenge for social scientists is to understand the individual in their social context (Wright-Mills 1959). His ideas remain as pertinent today as they did at time of writing. Structuration theory provides, as much as anything, a basis for imagining the situations of, for example, older people in their social and spatial contexts.

Using structuration as a theoretical underpinning suggests the acceptance of various influences within the social world that research needs to address. It is my contention that society is structured socially and spatially, with consequences for the lives of individuals. That these structures are determining of outcomes is not the case. Our agency is also important, as we make decisions that are informed by our situation.

Nonetheless, the implications of where we live and who we are is such that to only a limited extent can we influence the course of our lives.

Such contentions also suggest that people will be aware of their reasons for, for example, providing care to a neighbour, or moving to a different locale. Hence, there is huge scope to researchers asking people why they do certain functions, and through so doing insight can be achieved into the influence of constraining and enabling structures. However, their partial awareness of motivations suggests that quantitative methods also have a place, revealing structures that respondents may not be aware of, such as the role of normative values that Qureshi and Walker (1989) identify in their hierarchy of care. It is doubtful that informants would be aware of any particular ordering of preferences, in what might simply seem as 'natural'. Thus both approaches, qualitative and quantitative, have their place within research that has structuration as a guiding ontology, and hence I use them both in this thesis.

Structuration theory provides an ontology that can utilise both quantitative and qualitative methods. A multi-method approach is thus consistent with such a theoretical underpinning. There are other benefits that can be achieved through using more than one approach together in one study. I will thus now turn to consider the benefits and limitations of using more than one research method in the next section.

Section 3.4. A multi-method approach

To fully address any research question requires methods tailored to the particular question rather than dogmatic adherence to a particular approach (Elliot 1999; Graham 1997). Limiting the study to qualitative or quantitative methods might be appropriate for a particular question. Both approaches have their own strengths that can be used in a complementary manner. Strategic use of these approaches in tandem brings out the nuances of issues, particularly the interacting roles of structure and agency, and gives insight into how people's behaviour is influenced by structures, including those of which they not aware. As has been outlined, both of these are crucial to the formation and reproduction of support networks.

Quantitative methods provide insight into patterns, trends and associations that can be assessed as to the degree to which they may or may not have occurred by chance.

The influences of structures are made apparent where their occurrences are statistically demonstrated to have been unlikely to occur randomly. Yet there are limitations to such insights. Variables that are used at scales encompassed by surveys provide generalisations. These cannot be used to explain the complexities involved in the decision-making processes. Nuances that result from different influences are such that not all individuals will decide on the same course of action. Different outcomes are central to constantly evolving structures. For example, the norms and obligations demonstrated by Finch and Mason (1990) are not timeless. They only exist through the actions of people influenced by others in the operations of structuration described earlier in this chapter.

Such processes, occurring over time, require either large-scale longitudinal datasets (as used for example by Mills 2004), or in-depth biographical interviews. Cross-sectional data is limited in the extent to which causal mechanisms can be ascertained. In addition, as will be discussed in Chapter 4, secondary data is limited in information, geography and the type of respondents captured, this being even more the case where details that follow people over time is needed. The research possibilities of such datasets is demonstrated by several studies that have used the Bangor Longitudinal Study of Ageing, with information on people residing in North Wales (for example Wenger and Jerrome 1999; Wenger and Burholt 2001). However, as I have discussed, place is an important feature of the ageing process. Thus, more resources in line with the Bangor study are needed from other locales and different scales. The English Longitudinal Study of Ageing promises to provide just such a facility, with national scale data. Even so, whilst this is to be welcomed, there will never be a time when such datasets can answer all research questions. There will therefore always be a need for creative means of investigating the social world.

Biographical accounts are another means of understanding the manner in which life-course events are influential in current situations and decisions (Halfacree and Boyle 1993). Attained using in-depth interviews, these can ascertain life histories, giving insight into how events many years previously have led to the current situation of an older individual. Offering the opportunity to reflect and comment on what he or she, as a knowledgeable agent, believes to be the reasons why they have come to particular decisions, and the consequences, intended and unintended, that have prevailed.

These conversations will not necessarily reveal motivations, such as the kind of hierarchy that Qureshi and Walker (1989) develop. Even so, consideration of the justifications for actions, and the limitations and opportunities that interviewees perceive, provides heuristic opportunity.

It might be argued that use of a multi-method approach lacks focus. There must be a clear justification for the use of a multi-method approach (Graham 1999). McKendrick suggests strengths of a multi-method approach, several of which are particularly pertinent to the study of informal care. Firstly, the use of a multi-method approach allows both statistical information to be ascertained, and the social factors that lie behind them to be identified. Insight can be gained into the motivations, behaviours and consequences that produce, and are produced by, observable associations. Quantitative work can highlight relationships between variables, but not always the reasons behind them (Sayer 1992). For example, the work of Al Hamad *et al.* (1997), as acknowledged by the authors, requires further qualitative investigation to more fully understand why people should choose to migrate at particular times, and the consequences to themselves and others of doing so. In a similar vein, the quantitative work of Joseph and Hallman (1998) provides evidence on how distance affects the type of care provided by kin. However, this requires further exploration using qualitative approaches to understand how people come to decisions on when to provide support, and the roles taken by the various actors in negotiating these. Similarly, deeper understanding of informal care networks requires both quantitative and qualitative angles to ascertain both associations and the role of actors that lie behind them.

Certainly, the rationale for using qualitative methods in conjunction with a quantitative approach must go beyond legitimating findings. Triangulation techniques, where results of one approach are compared to those of another, provide little additional insight. However, such approaches do hold benefits where individuals give accounts that do not match statistical findings (Robson 2002). Such occasions may indicate ways in which individuals are challenging structures, and offer opportunity for potential change. Alternatively, insight can be gained into how different and often contradictory social and spatial structures influence agents.

As discussed earlier in this chapter, many of these factors that influence informal care networks are socially constructed. The study by Arber and Ginn (1995) on the role of gender in informal care networks demonstrates that, except in the case of married couples, taboos exist that prevent males from caring for females and *vice versa*. This partly explains why females are so predominately involved in informal care networks. These taboos constrain choices but also create potential difficulties in negotiating informal care networks. Understanding how people view their situation, what is or is not acceptable, and how these contribute to the formation of informal care networks can only be achieved through qualitative techniques. Careful strategic use of the two techniques together has benefits in understanding the role of social construction and how it contributes to the formation of observable social phenomena.

McKendrick further suggests the use of qualitative study nested within quantitative work. This has the advantage of giving context to the qualitative work. A picture is established of the structures within which people live their lives. Qualitative work reflexively builds understanding of how individuals fit into this context, and how their actions contribute to its development. To understand the relationship that exists between people making decisions and acting out their lives, and the limitations placed on these actions by conventions, expectations, and material necessity, requires a range of methods to be adopted. In the case of the study of kin networks, such an approach provides the potential to situate qualitative work in different geographical settings, and to select those whose situation is of particular interest in light of the research question; whose children have moved away, or who have themselves migrated in later life.

Use of qualitative techniques also provides tools with which the variables selected for use in quantitative analysis can be critiqued. Variables selected for analysis are themselves socially produced (Sayer 1992). Definition of variables will have a profound affect on the outcomes of the study. Obermeyer (1999) suggests that qualitative methods in demography provide opportunity for better understanding the complexities of variables such as 'ethnicity' or 'gender', and thus add to statistical work by better understanding why such social constructs should affect the lives of individuals as they do. Qualitative methods hence provide greater transparency, and opportunity to engage in critical discussion of what is constituted in variable

definitions, how these relate to issues under consideration, and further, how relationships found might be influenced by the study design.

There are also policy related arguments to the rationale for using a multi-method approach. Use of qualitative methods provides opportunity for groups that rarely have voice to speak and convey their issues and concerns. It is McKendrick's contention that policy makers are more trusting of the findings from studies using quantitative methods (McKendrick 1999). Thus, by utilising both techniques there is enhanced opportunity for marginalised groups, in this case the older person with limiting long-term illness, to be afforded greater say and have more influence in policy processes. Use of multi-method approaches to social research has scope for bridging the divide between policy makers, academia, and socially excluded groups.

Halfacree and Boyle (1993) argue that qualitative methods have the potential to bring a more human angle into the population sciences, where research has largely been statistical. They also make the important point that bringing a qualitative component into investigations will turn what might have previously been seen as passive individuals into active participants who are not simply responding unquestioningly to their circumstances. As has been outlined with regard to the structuration theory, people do not simply respond to external stimuli: they reason, discuss, make decisions and act. Decisions will be influenced by wider factors, but will also reflexively affect those structures. Gaining a deeper understanding of how people form informal care networks, what constrains them, strategies utilised, outcomes that their decisions and actions bring about, and the resultant problems from their perspective, is the benefit that qualitative approaches will add to quantitative work in a multi-method approach.

Another benefit of a multi-method approach is that it is adept to the consideration of different scales. This provides opportunity to consider how events at the level of populations affect the minutiae of everyday life for individuals, and the ways in which decisions taken by those people contribute to the large scale trends identified from national datasets. This interplay between the individual and their situation in history, space and society is the very essence of structuration; the reproduction of social phenomena that is produced by individual agency.

Philip (1998) considers the problems of combining quantitative and qualitative methods. Her contention is that methods are more often than not chosen and rejected with poor understanding of the alternatives. She suggests that many of the contrasts made between these two apparently contrasting approaches are overplayed. The philosophical basis of the approaches, far from being distinct, actually has much in common. For example, quantitative methods are claimed as objective, yet no form of survey data collection is either error or value free. In analysis, there are also judgements made that are not free from values. There is nothing intrinsic about a 95 percent confidence interval, yet it is often unquestioningly chosen as a mark of significance. Why not 90 percent? Or 99 percent? The decision will have implications for conclusions, yet is not one that is made objectively, but rather one of convention. And qualitative research cannot be seen as being entirely free of objectivity. If being objective is seen as an openness regarding the researcher's own position and the influence that this has on results, then it is surely to be desired. Whilst positionality has been largely the realm of the qualitative researcher, it is also of crucial importance to the quantitative. The distinction between objectivity and subjectivity is overblown. It is my belief that Philip is correct in her reasoning. Indeed I suggest that results of statistical tests and models will be more effectively critiqued and more in-depth understanding achieved where the two approaches are used alongside one another.

Multi-method approaches are ideal given the ontological approach developed earlier in the chapter, allowing social structures to be identified at a national scale, through to local communities, down to the individual's perceptions and rationales. It will also provide the opportunity to better understand the motivations behind moving or not moving, or providing and accepting assistance. Each level and method of analysis provides opportunity for critiquing the other, producing further evidence or, in other cases, raising questions from contradictory findings that give new and dynamic insights. For these reasons, I use both qualitative and quantitative approaches, large-scale data analysis down to individual in-depth interviews. In the next section I describe in greater detail the study design and specific methods utilised in this thesis.

Section 3.5. Conclusion

Giddens' ideas of structuration provide a convincing ontology of the social world, demonstrating that research needs to probe both the ability of agents to affect their own circumstances, and the constraints and opportunities arising from their location in history, space and society. I have highlighted the caveat that caution must be exercised where considering agency, which in certain circumstances, such as where health compromises ability to maintain residential independence, is more limited than Giddens suggests. However, the development of a theory is an ongoing process, of which this thesis is a part, specifically building in aspects of ageing and the development of informal care and support networks.

In the next chapter, I move on and outline the specific methods that are used in this study to elucidate structures at local and national scales, and agency in the context of support and care networks in an increasingly mobile world.

Chapter 4. Data and Methods

Section 4.1. Introduction

In the previous chapter, the ontology and epistemology underlying the thesis have been discussed. Having established the need to include both structure and agency, I now move on to consider the specific methods that will give insight into contemporary informal care and support networks, and the potential implications of trends at a national scale for older individuals. The chapter is set out in four broad sections. In the first of these, I give an overview of the study, and of general ethical issues that are of relevance throughout all stages of the research. The sections thereafter each deal sequentially with specific stages of the study, including sampling, obtaining data, and analysis.

Section 4.1.1. Study design

In this section, I give a very brief overview of the study. Thereafter, and following discussion of the central importance and influences of ethical issues, I will go on to give a more detailed account of each of the steps that the research design involves. A multi-method approach is adopted, an overview of which is shown in Figure 4.1. Spatial demography produces local contexts within which people must make their lives, whether in the locale they currently reside or by moving elsewhere. Migration creates differences in age and social compositions. National scale population mobility thus has implications for local and individual levels. The first stage is thus to identify parts of Scotland that attract people in later life, or from where younger people tend to move away, often over distances that will impinge on ability to provide assistance later on, if needed, to ageing parents.

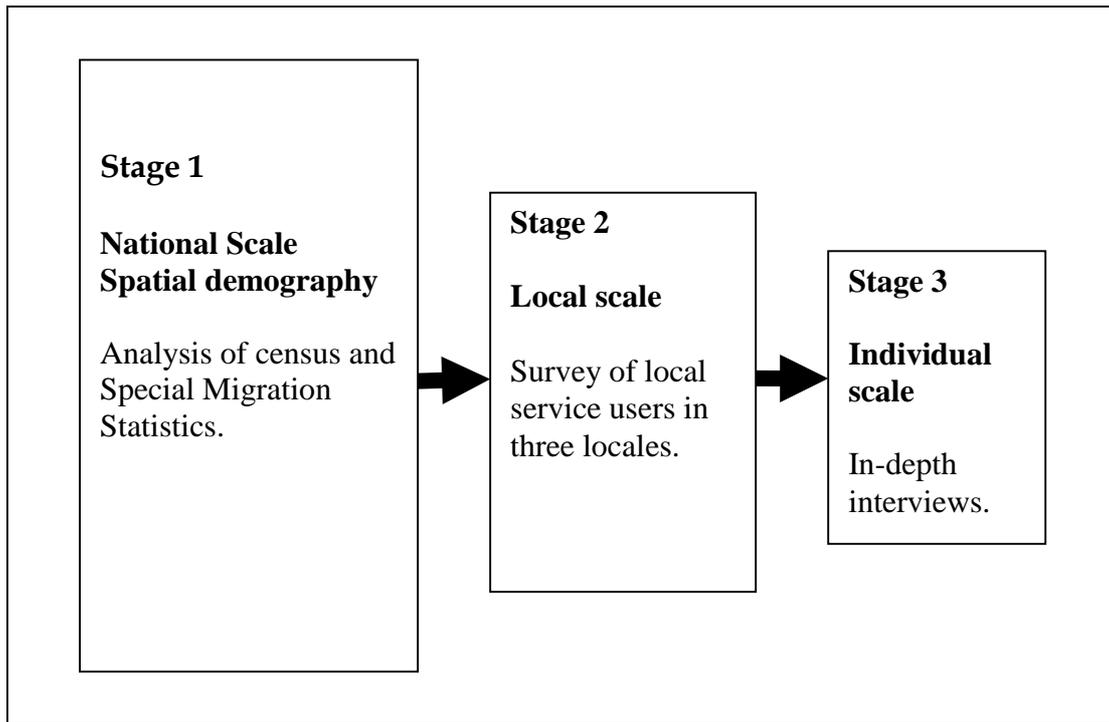


Figure 4.1 Study design.

From this analysis of national population mobility three contrasting locales are identified, each of which is characterised by different migration patterns:

Retirement locales: areas popular to settle in at retirement.

Rural locales: areas that experience a predominantly high rate of younger people moving long distances away.

Urban locales: where rates of long distance migration amongst young and older age groups is lower in comparison to the other two types of area.

These three kinds of locales then form the basis of step 2, comparative work that uses a questionnaire survey to identify patterns and associations indicating the influence of underlying social structures in three examples of locales with contrasting migration patterns. The third and final step involves conducting in-depth interviews with respondents from the second stage and service providers who have experiences of migration and informal support. For consistency, where specifically discussing the survey I refer to participants as respondents. Where the in-depth interviews are

concerned, those taking part are referred to as informants.

Before going on to describe each of these stages in greater detail, including the practicalities of sampling, enumeration and interviewing, I will firstly discuss general ethical issues addressed in the study design. These are of central importance because of the potentially vulnerable situation of many of the respondents, and have thus been influential in many of the decisions I have taken in the process of my research.

Section 4.1.2. Ethics

Ethics must be at the fore in any social research. The welfare of participants demands that careful thought be given to the design and implementation of any project. Consideration of the needs of those taking part is especially important for researchers involved in social gerontology, where respondents might be limited in ability to give informed consent because of cognitive problems, might participate as a means of avoiding loneliness, or could find particular questions distressing. Further to the potential negative implications for older individuals is a need to consider the wider research community. Actions taken by one researcher have potential implications for those who come after.

Many research organisations produce ethical codes of conduct (British Sociological Association 2002; Social Research Association 2002; The British Psychological Society 2000). Whilst none of these are specifically addressed to geographers, we share the same issues and concerns, notably the need to avoid harm to participants, the need for informed consent, and the importance of ensuring confidentiality. The codes of conduct do not give precise details that will cover every eventuality, but they are useful as guides to ensuring that study design incorporates consideration of ethical issues that might arise (Kayser-Jones and Koenig 1994). Anticipation of such issues provides the opportunity to minimise them, and to plan for such possibilities.

Detailed consideration of such issues has been incorporated into the study's design and a submission to the School of Geography and Geosciences' ethics committee, a copy of which is provided in appendix A, along with the response received. Tinker (2001) suggests that such procedures are more than a bureaucratic necessity, as they provide opportunity for scrutiny and discussion with others not directly involved

with the research. Her contentions is one with which I concur. The application gave me the opportunity to critically self-reflect on the contemplated research, and helped to develop a more ethically robust design.

The different methods I use in the course of this thesis each has its own ethical issues, which will be addressed in the sections that follow as and when they arise. It is to consideration of the specific stages that I now turn, beginning with the analysis of national scale spatial demography.

Section 4.1.3. Data sources

The first stage makes use of two secondary data sources: the census; and a dataset derived from the census called the Special Migration Statistics (SMS) (Office for National Statistics 1991). The census is conducted every ten years and includes, with few exceptions, the entire population of Scotland. Questions include ascertaining basic demographic figures, as well as additional information of policy and academic interest. One of these includes asking if respondents have moved in the previous 12 months. If yes, the address lived at 12 months previously is elucidated. From these details is derived the SMS dataset, which provides counts of people moving from one geographical area to another, for example at the scale of pseudo-postcode sectors (PPS). The data is broken down into very broad age groups and gender.

There are benefits, and some limitations to using these data sources. Both provide national coverage, with virtually everybody living in Scotland at the time of enumeration included. Being so comprehensive not only virtually eliminates bias, but also allows for quite detailed geographic scales to be analysed. Other sources, such as the British Household Panel Survey, include questions of relevance to this thesis that have not been available in the census. However, once particular age groups and geographic areas are focussed on, they do not provide adequate numbers for meaningful analysis. Of course, there are limitations to the census and the SMS. The migration question applies to a change of address from 12 months prior to enumeration. Moves made prior to this point in time are missed, a particular issue where the less frequent moves of older generations are concerned, as are those where a person relocates more than once during the calendar year, though this is less of a

problem for this thesis. The range of questions is limited; of particular note to this study, there is no specific question regarding how far people reside from other kin. The census's limitations, however, are more than outweighed by its comprehensiveness that makes it an invaluable resource to social scientists.

Two geographical units of analysis are used: Pseudo postcodes and Consistent Areas Through Time (CATTs). The construction of CATTs is described by Exeter *et al* (2005). These areal units are constructed from Output Areas (OA), the smallest areal unit available from the Scottish census, and is built up to approximations of larger areas, such as PPSs as is done for the analysis in this thesis. Their similarity is demonstrated by some basic summary figures: in 1991, populations in PPSs ranged from 54 up to 18998, with on average 4983.554 in each zone, whilst for CATTs the range was from 64 to 22902, with a mean of 5213.038. The advantage of CATTs is that their geographical boundaries do not change between the 1981, 1991 and 2001 censuses, allowing direct comparison to be made. However, they require data to be available at OA level which, for reasons of confidentiality, is not always so. For example, migration data, including that provided in the Special Migration Statistics, is not available at OA level and thus does not permit the use of CATTs. For this reason PPSs are used in analysis that specifically makes use of data not available for the smaller areal units, specifically where younger people's migration is analysed, whilst the analysis of retirement migration takes advantage of the comparability of populations between points of time of the CATTs.

The second stage uses data from a small-scale survey conducted in three sample locales. I discuss the specifics of conducting the survey in Section 4.3, but will here discuss why secondary sources were not suitable for the research questions addressed in this stage. No secondary dataset has both the required data and adequate numbers for the analysis of social gerontological issues at a local level. Many studies discussed earlier in this thesis have used large national surveys, using both longitudinal and cross-sectional data (for example, Arber and Ginn 1992; Arber and Ginn 1995; Due et al. 1999; Dwyer and Secombe 1991; Gierveld and Peeters 2003; Glaser and Grundy 1998; Mills 2004; Scott et al. 2001; Shelton and Grundy 2000; Silverstein 1995). Others have added special modules onto an ongoing survey already in progress (for example Grundy et al. 1999 did so with the Office for National

Statistics Omnibus Survey). There are certain logistical advantages to using such data sources, as they are quick and inexpensive for end-users to access. However, they also have limitations. Not least of these is that hypotheses tested are limited by questions asked in enumeration. There are numerous datasets available for analysis - what in geography has been referred to as a '*data feast*' (Graham 1999) - but whilst many of these datasets are useful for addressing issues at a national scale, they are very limited in scope where more detailed local geographies are concerned. Indeed, the detail and specifics required in social research are such that secondary data will never be available to an extent where all questions can be addressed, as is the case for the research questions that this thesis considers.

Various other health and administrative datasets, such as Hospital Episode Statistics have been used for social research (for example Adak et al. 2002; Cook and Sheikh 2000; Sheikh and Alves 2000). In particular, over 75 year old people's GP screening checks provide opportunities for local scale social gerontological enquiry (see for example Victor 1996). Whilst all these sources provide scope and opportunity for useful and important research, they are not applicable to addressing my research questions. They provide inadequate information on social indicators, regarding family or other relationships. Thus, once more, despite the benefits in terms of time and resources that using these would afford, they are not suitable for this research project.

Another argument against using only available datasets is that reliance on official and semi-official statistics limits the scope of research questions, something that Graham (1999) argues has been apparent in the range of issues addressed in the past. Especially if the needs of marginalised groups are to be addressed, it is crucial that the social sciences develop and use techniques that reduce reliance on resources that tie us to the whims of the state. Dependence on large-scale datasets has severely limited studies of older age groups. Small-scale surveys and qualitative work are thus crucial to independent research that allows the needs and concerns of people, such as people in later life, to be addressed.

The third stage of the project uses in-depth interviews nested within the survey, as well as with service providers. Again, there are not secondary sources suitable

given the specific requirements of the research questions being addressed. I required detailed conversational interviews with people who have experience of migration, their own or that of others, and its implications for informal support. Achieving the aims of the third stage thus necessitated my conducting in-depth interviews, the specifics of which I discuss in detail in Section 4.4.

Having outlined the data sources that I have used, I will now move on to discuss the specific methods employed in the analysis. I do so in three sections, each dealing with a specific stage of the research, beginning with the analysis of migration using secondary sources.

Section 4.2. Stage 1: Analysis of migration at national and local scales

The analysis of migration involves firstly identifying Scottish locales where social and spatial structures influence people to consider moving away in younger adulthood to live their lives elsewhere and, secondly, other locales to where moves are made with the intention of living retirement years. I begin by discussing how the SMS have been utilised in achieving the first of these aims.

Section 4.2.1. Analysing younger person out-migration

The aim of this part of the analysis is to identify the degree to which people in early adulthood move distances that will hypothetically constrain their ability to provide assistance to their parents, if required, at a later point in time, at both national and local scales, and in so doing to consider the degree to which there are spatial differences within Scotland.

The first step involves calculating a proportion of people aged 16-29 years, the only suitable age group available using SMS data, who relocated a distance of 15 miles or more in the 12 months prior to the 1991 census, which is the earliest period for which data has been derived into the SMS. Migration from further back would have been useful, but is not currently available. Nonetheless, given that structures influencing migration are to a large extent reproduced over time, it is likely that findings will reflect those that would be found with earlier information. The age group used is also a restriction of data availability.

The choice of 15 miles as a cut-off point is based on a study in the United States that found nobody providing support of a high intensity over a prolonged period of time lived outside of this distance (Himes et al. 1996). I am not suggesting there is anything crucial about this degree of separation, but rather that it provides an indication of moves more likely to affect ability for intergenerational care, or frequency of face-to-face contact. Indeed, for reasons I will discuss, many of the migrations identified will actually involve much greater distances. Locales differentiated on the basis of this figure thus give a geographical basis for a comparative analysis of care and support networks.

My particular concern is with moves that affect Scotland's spatial demography, and by implication, also local scale informal care and support networks. In other words, those moves that begin and end in the same locale, or are between two areas in close proximity, are assumed not to affect intergenerational relationships. A method is thus required that will give an indication as to the distances people are relocating. Precise distances of moves cannot be calculated from the SMS as only the departure and destination PPS can be ascertained. However, a grid reference is available for the central point of these areas, and from these can be calculated distances using Pythagoras's theory. The resulting figure is a generalisation for all movers from one PPS to another. I then calculate the total numbers who have made moves of 15 miles or more.

The calculation of distances involved in migrations between pseudo-postcode sectors undoubtedly involves generalisation. People might move more than this distance without leaving a pseudo-postcode sector. Similarly they may relocate further than needed for inclusion, but between areas with central points with less than the required separation. In both cases, migrations that should be included are not. Similarly, migrations of less than 15 miles will be wrongly included where they cross into another area with a centroid greater than the chosen distance. However, these limitations notwithstanding, the end results give an indication of the degree to which younger people are moving and the distances involved.

The final totals of people for this age group who make moves of 15 miles or more are then calculated as a proportion of the populations at the point of time for the 1991

census. Ideally, the enumerator used would have been the 1990 figure. Given that this is not available other than as an estimate, the later number is utilised. The end result is figures for all pseudo-postcode sectors indicating the degree to which younger people move away a distance that will affect support networks. The highest decile is then calculated to represent *Younger person out-migration areas*. These are mapped using ARC GIS. Findings that emanate are discussed in detail in Chapter 4.

No details are available on moves made by siblings. Firstly, it may be that a person moving a long distance has siblings that remain in place. Secondly, moving will not necessarily take a person further from family, but on the contrary could involve moving from afar into the same area. Regarding the first of these two points, the effect of migration for the geography of intergenerational family residences is a research question that I consider later on, using survey data. Regarding the second point, evidence from previous studies demonstrate that the majority of long distance moves made by people in young adulthood take them away from family, and, for the majority, distances that then separate them from their parents will generally only reduce geographical separation to a small degree (Silverstein 1995; Stockdale 2002b). In the main, these moves thus reflect migrations that will increase geographical separation between adult children and their parents, and this intervening distance will endure through their respective life courses.

The end result is proportions of younger adults who moved 15 miles or more in PPSs across Scotland. Whilst these are the moves that account in the main for uneven spatial demographics, it is my contention that at local scales, retirement migration remains important. The next stage of the analysis thus involves identifying parts of Scotland that have an attraction for people who move once work ceases to be a constraint on their choice of residential location.

Section 4.2.2. Analysing later life migration

The aim of this part of the analysis is to identify locales across Scotland where spatial structures influence in-migration of people who have retired, or are about to retire. Identifying retirement areas raises a number of challenges. As detailed in Chapter 2, moves made in later life are a relatively rare event, though not to the extent that cross-

sectional data, such as the census, suggests. Further, identifying specific areas requires a small-scale geography. Using the same approach as was adopted for *younger person out-migration areas* would thus be subject to the vagaries of small numbers of people moving to many potential pseudo-postcode sectors. A different method is thus required.

Law and Warnes (1976) used an approach that I have adopted. The number of people aged 55-64 years in the 1981 census for a particular area is ascertained. The number living in the same place aged 65-74 is then calculated for the 1991 census. If there is no migration, then at the time of the next national enumeration there will be slightly fewer people in an age group aged from 65 to 74 years. An increase in this number can only reflect in-migration of people around the age of retirement during the previous decade. Law and Warnes suggest that a decrease of less than half the figure expected given mortality at a national level can also indicate in-migration. Thus, areas that meet these criteria are retained. Areas with a proportion of their over 65 year old population 25 percent above the average for all CATTs in Scotland are retained to avoid including areas where increasing numbers simply reflect new housing developments where spatial demography is unaffected. For purposes of analysis over time, the same process is repeated for identical age groups, but for the 1991 to 2001 time period.

Once age-specific migration patterns have been identified, I move on to consider what the implications of these are for care and support networks. This involves comparing areas with contrasting population mobility to one another, namely a *retirement, rural,* and *urban* area. I next describe how I selected the particular locales and the development and implementation of the survey.

Section 4.3. Stage 2: Investigating the implications of migration for informal support

Methods for identifying differences in age-specific migration across Scotland have been outlined. The next stage is to consider the implications that such patterns have for the lives of older people where assistance from others becomes particularly salient; where health deteriorates in such a way that independent living is becoming

increasingly difficult. I begin by addressing the methods used in conducting the small-scale survey.

Section 4.3.1. Survey methods

In the section that follows, I discuss the methods used in conducting the survey of older residents from three locales that have contrasting age-specific migration. I firstly give a brief overview, before turning to specifics. Issues of sampling are then outlined, both for selecting specific locales, and then for achieving a sample of people who are in later life. The reasons for using face-to-face enumeration rather than other possible approaches are then elaborated on.

Three different locales are selected on the basis of analysis described earlier in this chapter: a *retirement*; *rural*; and *urban*. I then conducted a survey of older residents, accessing respondents through services such as lunch clubs and day-care centres. Face-to-face enumeration is then used to facilitate participation. In this section, I discuss why I have chosen such an approach, the advantages and limitations of conducting a survey using these methods, and steps taken to ensure ethical rigour and to minimise bias.

Areas were selected firstly on the basis of the type of age specific migration they experienced, which was identified in stage 1 of the research. From there, purposive sampling was used. Enumeration was done face-to-face with users of services such as lunch clubs and day-care-centres. I thus required locales that had such facilities and where providers were agreeable to facilitating the research. Age Concern Scotland provided a list of services and groups for older people. The logistics of in-person interviewing meant ensuring that at least two of the geographic areas involved were within reasonable driving distance of St Andrews. With that in mind, letters and phone calls were made to service providers in potential survey locales. Three locales that met the criteria set out in stage 1, and where there were services facilitating to the work were eventually arrived at. Whilst by no means randomly selected, they nonetheless provide the opportunity for investigating migration and informal support required.

Face-to-face enumeration was chosen as it allowed potentially sensitive questions to be asked of people who in many cases were in poor health. Different approaches can be found across the spectrum of social gerontological research. Researchers have interviewed respondents using the telephone (for example, Mason and Wilkinson 2002; Meyer and Cromley 1989; O'Bryant and Murray 1986), in-person (for example, Harper 1987; Joseph and Cloutier 1991; Warnes 1986), and via postal questionnaires (for example, Ford and Warnes 1992; Roberts and Chapman 2001). Each of these approaches has advantages and disadvantages in terms of logistics, the willingness of participants to give honest and frank answers, the ability to construct a suitable sample frame, and the degree to which people in different situations will be included. The choice of methods thus depends on the research questions and specific population of interest. These will thus be considered in relation to the focus of this study.

Face-to-face enumeration of service users was used because of the desire to facilitate the participation of those whose physical health might impinge on taking part, and allowed the recruitment of the appropriate participants. In addition, the constraints of time and resources in my study were such that data collection had to be attainable for one person to achieve within a period of around six months.

Face-to-face interviews are more time consuming in terms of contact time between researcher and individuals participating. However, this disadvantage was outweighed by advantages gained. Those whose health is compromised, a group that my research is particularly interested in, may be less able to answer a postal survey. Similarly, those who are in a situation of social isolation may be less willing to participate in either a telephone or postal survey, a problem acknowledged in other studies (see for example Victor et al. 2005; Victor 1996). Face-to-face enumeration provided the chance to explain questions to participants in person, clarifying anything not understood, and encourage response from individuals who otherwise are unlikely to take part. Additionally, doing so also enabled the inclusion of questions in the survey that were potentially upsetting, where the presence of an interviewer offered the opportunity for support, and where distress was evident, for individual interviews to be concluded early (see for example discussion of the Geriatric Depression Scale later in this section).

The sampling was purposive, with service users having leaflets and the opportunity to discuss participation with me. They were then asked if they would be willing to take part, either at the lunch club or day-care-centre, or at a later point of time in their own home or in the university. A random sample would be preferred, but was not practical in the case of this study. As mentioned earlier in this section, there is no suitable sampling frame with information on age, contact details, and presence or otherwise of cognitive difficulties. Additionally, for ethical and practical reasons, I required that people were fully able to give their informed consent and could answer questions for themselves¹.

Gaining full and informed consent required identifying those who have cognitive problems, such as Alzheimer's or other forms of dementia. This issue provided another reason for going through service providers. Their knowledge of their clients put them in a position to advise on who not to approach. Ideally, such individuals should also be included. However, doing so was not practical. Research involving those with cognitive disorders in the social sciences has often involved qualitative research, where interviewers spend a lot of time getting to know the individual and his or her family, often from before the disease process precludes the person giving consent (or otherwise) themselves (Bartlett and Martin 2002). Katsuno (2005) reports findings from a survey that did include people with dementia. Interviewers made several visits both to allow the participants to become familiar with them, and to ensure that adequate time was available for completion of the questionnaire. Using such approaches with the numbers of respondents involved in my study was simply not feasible. Using proxy respondents, a relative or care provider, would go some way to addressing the issue of validity. Nonetheless, the issue of consent remains, and questions where opinions or personal values are sought rather than straightforward demographic facts would not be possible. Further to all of these difficulties, other researchers have shown that those with cognitive problems usually live with others or in institutional care (Wenger 1998). My main aim is to consider those living independently and thus, in view of the substantial difficulties of inclusion of people who are cognitively impaired, I took the decision that they should not be included.

¹ Consent form is shown with application to ethics committee in appendix A.

Gaining access to participants through services such as lunch clubs and day-care centres might be seen as placing pressure on potential respondents to take part. Kayser-Jones and Koenig (1994) make a similar point, suggesting that it is not ethical for those who are lonely to be recruited to a study as this would take advantage of their situation. Such a contention, if followed to its logical conclusions, would exclude those for whom research provides both an opportunity on an individual basis for interaction, and a basis for policies that address the occurrence of such situations. It also risks a too paternalistic and ageist attitude towards respondents. The social sciences have a responsibility to represent people who are marginalised. To exclude those who are experiencing loneliness would, therefore, in itself be unethical.

Using services also provided a means by which support was available in the event of someone being distressed after reflecting on issues raised in the course of the questionnaire (Mason and Wilkinson 2002). In the end, the process of interviewing suggested that for many participants it was an enjoyable experience that gave a rare opportunity to talk about their own lives. Even apparently upsetting questions within the Geriatric Depression Scale, which is discussed in more detail later in this chapter, did not seem to cause respondents any distress. The only occasion where a person did become upset was with regard to talking about friends; she had lost a close confidant a year or so prior to the interview. It was, she reflected, the first time she had cried since the loss, and was glad of the opportunity to talk over her feelings with someone completely removed from her life. Hence, for this respondent, participation in the study appeared to be beneficial. The only other occasion where the survey seemed to cause some difficulties surfaced when meeting a respondent at a later date to conduct an in-depth interview. The respondent stated some concern that aspects of what she said might have been taken out of context, or might reflect negatively on family members. Both of these occasions underline the need for careful consideration of potential difficulties, and of the issue of confidentiality/anonymity, that questionnaires might pose for respondents. However, sensitive approaches and planning for eventualities are such that these do not preclude the ethical use of such tools.

By going through services, and not having a random sample, has implications for generalising results from the survey. However, recognition of the potential biases, and comparison of the sample to other data sources such as the census, provides a

basis on which to cautiously extrapolate beyond the sample (see for example Meyer and Cromley 1989). Other studies that use random samples do not avoid the problem of bias, as evidenced by their large non-response rates (see for example Meyer and Cromley 1989; Roberts and Chapman 2001; Victor et al. 2002). Furthermore, the aim of my survey is not to provide a comprehensive dataset, but instead to gain insight into the lives of older people with limiting long-term conditions. As long as relationships between variables are not affected, and induced biases recognised, convenience samples have utility. As mentioned above, high non-response rates from those who are the central concern make their findings questionable despite their being random. With careful design, small-scale statistical studies of vulnerable groups can effectively contribute to a better understanding of marginalised groups, and thus to evidence based policies.

Many previous papers demonstrate the potential of small-scale studies. For example, Meyer and Cromley (1989) have only 40 respondents in their study of people discharged from hospital in the United States. They nonetheless show that people move in anticipation of ill health, something missed in studies that utilise considerably larger datasets (Litwak and Longino 1987). Other studies with relatively small samples provide important insights into who acts as confidant as people age (Wenger and Jerrome 1999), and who provides informal support (Wenger and Burholt 2001). O'Bryant and Murray (1986) have 221 respondents, but also effectively show the role of family proximity in migration decisions after being widowed. Harper (1987) includes only 93 households in her survey, yet effectively demonstrates the importance of family to older migrants being able to access friendship networks. These studies are evidence that research using small datasets can effectively examine issues that would not otherwise be possible if large samples were depended on.

Whilst I contend that using day-care-centres and lunch clubs is the most practical way of obtaining the data required given the focus of enquiry, there are potential biases that are likely to be encountered, some of which Milligan (2001) discusses. There is risk of particular types of individuals being asked to take part and thus incurring bias. Those who are perceived as being most amenable to participating may be more likely to be included. To a large extent, organisers of social groups used left me to identify respondents myself, removing the potential of 'gatekeeper' induced bias, other than

by highlighting any individual with cognitive problems. In the main, people were very agreeable to taking part, with very few refusals, reducing this source of bias.

Additionally, using service providers meant that older people not attending such facilities would be missed. Hence, those who are in extreme situations of social isolation will not have been included. Also, those who have informal support so as to remove the need to attend lunch clubs or day-care centres will not be represented in the sample to the degree they would with a perfect random sample. The under-representation of males, shown in Table 4-1 in the section that follows, is likely a reflection of both their lower likelihood of experiencing limiting long-term illness and greater propensity to have a spouse. Such biases will thus be considered when the results of analysis are discussed in later chapters.

To encourage interest, and thus participation, and to assist in ensuring people were as fully informed about what taking part entailed, information was given prior to approaching individuals. Doing so has been found beneficial by several researchers, using techniques including sending a letter or postcard (Oppenheim 1992), information leaflet (Ford and Warnes 1992), or using the local press (Joseph and Cloutier 1991; Warnes and Howes 1984). I gave short talks to groups to explain that the work was part of a research project towards a PhD thesis, that it would entail being asked a series of questions, and that taking part was entirely voluntary. Similar points were included in information leaflets and in letters to local papers. Information leaflets and letters are reproduced in appendix B. After discussion with Age Concern, a minimum of size 12 font was used for the leaflets to ensure ease of legibility. Distributing this information beforehand helped to give people an understanding of why the work was being done and what would be involved, thus encouraging greater inclusion.

This section has discussed why small-scale studies have a role in the social sciences, notably where respondents from vulnerable and difficult to access groups are concerned, and has highlighted how the use of surveys can provide an opportunity for research beyond what would be possible using large-scale secondary datasets. Small-scale surveys are an efficient means of utilising limited resources, and permit a focus on the concerns of marginalised groups. For these reasons, I decided to use face-to-

face interviews. The larger numbers that could be achieved using postal or telephone enumeration do not outweigh the likelihood that the most vulnerable are unlikely to participate. In-person interviews, rather than postal interviews, provide the opportunity to sensitively encourage participation, particularly those who are in poor health.

The next section discusses the design of the questionnaire that I have used to investigate informal support networks at the local scale.

Section 4.3.2. The questionnaire

This section discusses the design of a questionnaire for investigating the interaction between locale, migration and social identity, considering each section of the final tool in turn, and explaining the data intended to be gained by inclusion of specific questions. I also discuss measures that have been used in the survey stage of the research. The final questionnaire and associated flashcards are reproduced in appendix C.

Central to the design stage of the questionnaire was the need to ensure clarity, conciseness, and length such that it could be completed within no more than 30 minutes. A longer duration would be an undue imposition on the time of participants, especially considering that a large proportion would be in poor health. Keeping the questions to a minimum, as well as ensuring that they are straightforward, increases the accuracy of responses. Logistical issues also impinge on the time factor, as all enumeration had to be done by one person. Both questionnaire and flashcards were piloted prior to the survey, and changes made where appropriate.

Different aspects of social identity have implications for the recourse people are likely to have to family or community care. Section A of the questionnaire thus contains questions regarding basic socio-demographic information: age; gender; marital status; an indication of residential location; household structure; and questions to indicate socio-economic position. A question is also asked regarding the health of those with whom they reside. Glaser *et al* (1997) demonstrate that there is clustering of limiting long-term illnesses in the same household. Thus, having others co-residing does not

itself guarantee that help will be available if and when needed, so this is also ascertained in the questionnaire.

Further questions asked in this section provide an indication of deprivation. O'Reilly (2002) suggests that the proportion of older people who receive income support is a better measure of deprivation of those in later life than other frequently used indicators such as the Jarman, Carstairs, or Townsend indexes. He finds that measures of health amongst the older population correlate better with income support receipt than with other deprivation measures. Income support has been replaced by pension credits since the research on which O'Reilly basis his study was collated. However, the criteria for receipt of this is broadly similar, so will produce a similar indication of socio-economic situation.

The dimension of time is important where the effects of socio-economic circumstances are concerned. The situation a person has experienced in their younger life has implications for current health, housing, education, social networks and so forth (Arber and Ginn 1993). An indication of an individual's past circumstances is provided by their main occupation, which I classify using the categories outlined in the Office for National Statistics' Socio-economic classification (ONS 2005). Hence, I included a question ascertaining what their main occupation was. For female respondents, their husband's career is likely to have been as influential to their living conditions as their own, if not more so, given time out for having children, generally higher wages commanded by men, and the normative values of status. Information is thus also solicited regarding the main career of a spouse, for those who are married, or have been in the past.

The important role of adult children in care and support networks and the concerns of this thesis with regard to increasing population mobility makes desirable that information be gathered regarding their geographical situation and the contact and assistance they provide. This is the central concern of section B. Tick boxes are provided for up to eight children. An approach utilised by the British Household Panel Survey is used, which distinguishes between a range of activities. This gives flexibility and detail to later analysis. A general indication of how frequently this assistance is given is also ascertained. Data on frequencies of contact with

children, both by telephone and face-to-face, is collected. Respondents are asked where, in the main, they brought up their children. This is part of the process of identifying migration over the individual's life-course. Finally, a question is asked to indicate whether reliance is placed on children as a future means of support.

The implications of residential relocation on care and support are a central concern of this thesis. Section C is thus designed specifically to collect information relating to migration. Moves of interest are those with implications for availability of help from children or neighbours, those of a distance that place constraints on the ability of one to help the other where need arises. For this reason, people are asked how long they have lived in their current area of residence, defined as being approximately equivalent to the district. When interviewing, I carried a map to clarify the extent of the census district where people were unsure as to whether or not previous residences counted as being in or out of the locale. Using a question regarding changes of address, as is done in the census, would have included moves of short distance that did not affect the ease with which in-person contact could be maintained between respondents and their children and/or neighbours.

Utilisation of informal care will be largely affected by need. Section D thus focuses on the health of the respondent, using various measures to provide information on different facets of physical and psychological well-being. Each of these addresses slightly different aspects of the concept. Young (1982) demonstrates different facets of health, with implications for likely effects, and thus for measurement. He suggests that 'disease' is a status conferred by a medical practitioner. For example, a person who is aware that they have a certain condition may alter their behaviour, even in the absence of an awareness of symptoms. 'Sickness' is a state that is conferred by society on individuals, where there is a general acknowledgement that something is wrong. A medical diagnosis may assist in this, though is not essential. Assistance from friends, neighbours or kin is likely to depend to a large extent on a recognition and belief that a person requires assistance. Finally, 'illness' is what a person themselves feels and experiences. All three aspects can mutually influence one another, though there are occasions when one can exist without the others, such as when a person feels unwell, but no diagnosis is found, and others consider their malady to be 'in the mind'. My point here is that no one definition or measure of

health will provide insight into all aspects of health, or implications for informal care or support. More than one question is thus included in the questionnaire.

Grundy and Sloggett (2003) suggest that a general health question that taps into a person's own perceptions provides the most holistic indicator of well-being. Questions relating to more specific aspects are also included, namely the Activities of Daily Living (ADL) and Instrumental Activities of Daily Living scales (IADL) (Lawton and Brody 1969). These two measures are based on a hierarchy of needs (Brooks 1995). The former ascertains whether the respondent is able to carry out basic tasks such as washing and dressing or eating, or if assistance is needed, the latter considers abilities with day-to-day roles such as shopping or managing money. Both of these are particularly useful as they give a sense of the degree to which a respondent is incapacitated. It may be that a person has a serious illness, but this may not manifest itself in affecting their ability to manage their lives. Conversely, a more minor illness may cause difficulty in carrying out some tasks, necessitating greater assistance than may be suggested by relying solely on the other indicators. Each of these questions is scored 0-2, with 0 being for managing an activity easily, 1 fairly easily, and 2 not at all. The scores are then totalled up for a final summary indication of disability.

These scales have been criticised in relation to their validity and the degree to which scores can be replicated. Bowling (2005) reports that ADLs have been found to correlate only weakly or moderately with other mobility scales. McDowell and Newell (1987) make similar points, but suggest that the IADL score has been more rigorously tested and is more sensitive to small differences. Bowling also criticises the scales for not taking into account adaptation to environment in which a person lives. Hence, a person with a bath hoist will score lower than another who has less disability, but does not have an assistive aid. However, the line taken in this study is that these scores, criticisms notwithstanding, give an idea of the degree of disability of respondents and thus an impression of need. Of interest here is the degree to which people cope with their situation. Thus, where people have such aids to their daily life, then they are less in need of support from others. This reflects the positive side of modernity and counterbalances the negative views outlined in Chapter 1. Not

everyone has such facilities, however, and thus the ADL and IADL scores give a sense of either unmet need, or situation where the support of others is crucial.

Asking whether a person has a limiting long-standing illness that restrains daily life provides a final indicator of physiological health. This question effectively considers the 'disease' component of Young's typology (Young 1982), but excluding those conditions that, in the opinion of the respondent, have no discernable effects on their day-to-day lives. Thus, conditions that are well controlled and have no discernable impact on well-being, such as diabetes or heart conditions, are excluded. Such a question taps into the effects of having a diagnosis for eliciting support and assistance from others.

An indication of psychological well-being is also found in this section: the Geriatric Depression Scale (GDP) (Sheikh and Yesavage 1986). The measure was devised to be a quick, simple and reliable means of identifying older people who are clinically depressed. This involves a series of questions with yes/ no answers. The format makes administration of the GDP tool less tiring and thus easier than the original version, particularly important where respondents are in poor health (Lyness et al. 1997). Many of the questions are potentially upsetting, and some concern was felt prior to enumeration as to whether these would cause undue distress to participants. Sheik and Yesavage (1986) specifically aimed to only include questions that would not cause those answering to become defensive. However, responses to questions are culturally sensitive and, as yet, no study has specifically considered its suitability in the contemporary British context. As noted in Chapter 2, current research on the implications of geography for informal support and family relationships does not pay attention to the aspect of psychological well-being. Thus, it was decided to incorporate this measure despite these potential difficulties. The experience of enumeration was that the questions posed no difficulties to respondents, even in the one in three cases where depression was evident. Where any signs of distress were noted during enumeration, no further questions were asked. Given that these cases involved people who had already scored 4, the total that indicates depression, the results can be used in the analysis despite the missed questions.

The assistance of people in the respondent's own community form the focus of Section E, which measures aspects pertaining to social capital and assistance derived from non-family. Other researchers use various means to investigate and measure social capital. As I suggested in Chapter 2, the concept of social capital is broad and multi-dimensional. The actual means of measurement will be influenced by the particular focus of the research; older people and informal support in the case of this thesis. Putnam (Putnam 2000) uses associational membership. Given the potential importance of membership to organisations such as the church, questions are placed in the questionnaire to ascertain number of organisations to which respondents belong and frequency of attendance. However, continued attendance may be limited by the respondents' physical health. My concern is whether older people are able to turn to neighbours and their sense of security, and thus I use questions pertaining to perception of the local community.

I divided this part into three: attitudes, contact, and assistance. For the first of these issues, I asked three questions to ascertain the degree of trust towards others in the area of residence, based on those asked of respondents to a Canadian study of social capital (Veenstra 2000). A 5-point Likert scale is used, with possible answers ranging from 'strongly agree' to 'strongly disagree'.

Questions were then asked to ascertain contact with neighbours, either through telephone, or visiting; again predetermined responses are provided and shown on the flash card. These specifically identify contact that involves house visits as this implies closer relationships than would be the case were 'seeing neighbours in passing' included (Phillipson et al. 1999). Finally, questions are asked to ascertain whether assistance is received from others living in the local area or beyond, and the nature and frequencies of such assistance. These are open questions. This differs from the approach used for assistance from children, both to gain a better understanding of the range of tasks for which neighbours and friends provide assistance, and also as a means of keeping the questionnaire to a manageable length. Going through lists to achieve the same detail as was set out for help from children would have led to a more prolonged interaction, something I intended to avoid to ease the process for respondents. A drawback is that to an extent the comparability of assistance from children to that from neighbours is compromised. However,

potential bias is minimised by using broad categories into which help from neighbours is classified prior to analysis.

This section has considered the reasons for and design of the survey stage of the research. It has been argued that use of questionnaires provides the opportunity to investigate issues that reliance on large datasets does not allow. The resultant dataset provides information on a larger number of people than could be achieved by purely relying on qualitative approaches, giving the opportunity to investigate patterns and associations that indicate underlying structures. However, all methods are limited. As discussed in the previous chapter, each has the potential to complement another.

Section 4.3.3. The dataset

As is shown in Table 4-1, a total of 130 people were interviewed, ranging in age from 57 to 99 years, of which 24 were male and 106 female. The considerably larger proportion of females partly reflects the composition of the Scottish population, where there are greater numbers of women at older ages, an outcome of differences in life expectancies. However, it is also likely that this is a result of the methods used for collating the sample. Men are more likely to be married: they tend to marry someone younger than they are themselves and yet live shorter lives. Females are thus much more likely to be widowed, as they live longer and marry younger. They also have a higher propensity to experience limiting long-term illness. The implications of this are that they are also more likely to be in a situation of not having someone co-resident in the event of illness. They are thus more likely to utilise formal support services, and hence to be included in this study.

A similar bias can be ascertained by considering children. The survey respondents have a total of 280 children, of which 153 (54.6 percent) are male, 126 (45 percent) were female, with one response on child's gender missing. This represents a higher number of males than expected. Although there is a tendency in populations for there to be slightly more male than female children born, age-specific mortality is higher for men at all ages. Thus, a random sample of older people would be expected to have respondents who as a whole have more female than male children. As discussed in Chapter 2, informal support is gendered, with females being more likely to act as

providers. This suggests that the role of daughters in providing assistance may be underestimated. The potential implications will be considered where likely to affect results in later chapters.

Table 4-1 Overview of survey participants (figures in brackets represent census results for postcodes from where respondents were drawn)

	Retirement	Rural	Urban
Number of respondents	52	21	57
Gender (percent)			
Male	23.08 (33.97)	9.52 (45.37)	17.54 (34.65)
Female	76.92 (66.03)	90.48 (54.63)	82.46 (65.35)
Age (years)			
Mean	81.42	85.05	78.32
Standard deviation	6.16	8.38	6.96
Children			
Mean completed family size	2.10	1.81	2.70
Mean number of living children	1.92	1.67	2.54
Occupational (percent)			
1 and 2 (Managerial and professional)	44.23	23.81	21.05
3 and 4 (Intermediate occupations/ small employers/ own account workers)	23.08	61.90	10.53
5 and 6 (Lower supervisory and technical/ semi-routine)	28.85	14.29	59.65
7 and 8 (Routine/ never worked in long-term employment)	3.84	0	8.77
Pension credits	32.69	28.57	58.93
Marital status (percent)			
Single	3.85	19.05	12.28
Married/ with partner	26.92	14.29	14.04
Divorced	3.85	0.00	7.02
Widowed	65.38	66.67	66.67

The proportion of respondents receiving pension credits (32.69 percent) is likely to be higher than for the older population in general. O'Reilly (2002) reports that 24.3 percent of the Northern Ireland population of people aged 75 years or over were receiving income support in 1997-98, the benefit that pension credits has replaced. More people are entitled to pension credits. However, there is still a potential that those who are better off will be under represented in the sample. They are more

likely to enjoy good health and thus not require services such as those from which participants are drawn, and will be able to afford other means of support. Nonetheless, for the purposes of this study, where managing limiting long-term illness is the focus, the method adopted matches the need to have a sample of people who are either experiencing, or have experienced, developing strategies to remain independent in the community.

The use of pension credits as a measure of deprivation is given some credence by considering the Scottish Index of Multiple Deprivation (SIMD) Scores of the areas in which survey respondents live. Scores for intermediate datazones have been downloaded from the Scottish Executive (2004) and matched to postcodes. The scores have been ranked, with average ranks being compared using a Mann-Whitney test. Table 4-2 demonstrates the results of this cursory analysis, showing that the mean ranks of those that receive pension credit is significantly less than those that do not ($p < 0.01$). Relative to recipients, those survey participants who receive this income supplement are therefore much more likely to live in more deprived areas. Why not simply use the SIMD score? Given the work of O'Reilly (2002), there is convincing evidence to suggest that pension credits are an effective way of identifying income deprivation. However, given the findings shown in Table 4-2, there is scope for further work to consider the relevance of deprivation indicators for the older population.

Table 4-2 Comparison of Scottish Index of Multiple Deprivation scores for respondents who receive pension credits to those who do not ¹

Receives pension credits	N	Mean Rank
Yes	42	37.82
No	57	58.97
Total	99	

Mann-Whitney $U=685.50$, $z=-3.62$, $p < 0.01$

¹ Includes all participants for whom full postcode available.

Logistical problems faced in recruiting respondents from the *rural area* have led to fewer residents in the sample from that place (21 respondents) than is the case for either *retirement* (52 respondents) or *urban* areas (57 respondents). A combination of fewer service providers and logistical difficulties reduced the numbers that could be enumerated there. Nonetheless, there remains considerable scope for exploring issues of informal support. As I have discussed in Section 4.3.1, other studies have demonstrated the potential of small-scale enquiries. The benefits of quickly and efficiently gathering information from groups marginalised by larger scale datasets far outweigh this other possibility of not using this data.

This section has given a very brief overview of the dataset, touching on some of the biases induced by the method used in collating the sample. I will return to the issues of bias in discussing the results of analysis in the chapters that follow. It is to the survey analysis that I now turn.

Section 4.3.4. Analysis

This section provides a very brief overview of the methods I use to analyse the survey data. I will discuss the techniques used in greater detail in later chapters where they pertain to specific issues addressed.

The data is analysed using both bivariate and multiple regression techniques using the statistical computing package SPSS. Bivariate analysis, such as chi-square or correlation, is important as it highlights the reality experienced by respondents. It may be that after controlling for different factors a relationship changes, becoming either more or less significant. For example, when Glaser and Grundy (2002) control for health, social class ceases to be a significant predictor of informal support. However, this does not change people's actual experience, that those in lower socio-economic groups are more likely to provide assistance to a family member. Nonetheless, modelling provides a means by which relationships between variables can be analysed to better understand why they exist. In the example of the Glaser and Grundy study, the greater propensity for provision of care by people in lower socio-economic groups is demonstrated to result from health inequalities, rather than

from other potential explanations. Bivariate and multivariate techniques are therefore both important, and so are utilised in the analysis of the survey data in this research.

The actual tests used in this thesis vary depending on the nature of the data: continuous, binary, or ordinal. Much of the data emanating from the survey is not normally distributed, hence much use is made of non-parametric methods. Thus, chi-square, Mann-Whitney U, are both used for bivariate analysis, and logistic regression for multivariate modelling. The use of logistic regression techniques requires that the outcome variable is binary, hence where it is used a cut-off point has to be decided on to create a two-way outcome. Where I use such an approach in later chapters, the reason for choosing a particular cut-off is explained. The one exception where linear regression can and is used is where the *frequency of assistance score* is the dependent variable. This is a score constructed by totalling assistance from all children. Each child is given a score to give a quantitative indication of the frequency that they provide assistance to their parent or parents, starting from 0 ('never'), 1 ('occasionally'), 3 ('monthly'), 6 ('weekly'), 12 ('several times a week'), and 24 ('daily'). Prior to inclusion, the log of this measure is taken and used as it is both non-normally distributed and heteroscedastic. Using the log of the score, however, resolves both of these problems. All models are built using the ENTER function in SPSS, which provides results that assume the inclusion of all other variables shown for that particular model. Collinearity is checked and results shown in the appendices.

The results of the analysis of the survey data are presented in Chapters 5 and onward. I will discuss the methods used in more detail in each of these chapters where relevant. I now move on from consideration of the survey to look at the methods used in producing qualitative data from conversational interviews.

Section 4.4. Stage 3: In-depth interviews

The research methods used up to this point have developed an investigation of the migration patterns across Scotland, and their implications for support networks. The nested in-depth interviews provide detailed accounts of individual experiences that can never be attained in quantitative datasets. These accounts make it possible to

gain insight into the processes that lead to the outcomes highlighted in the earlier stages of this study. In addition, they also provide opportunities for considering situations where decisions made by human agents do not meet those that what would be expected given their position socially, spatially and historically, what are referred to as 'outliers' in statistical analysis. The reasons for not fitting with expectations include factors not accounted for in the analysis, but also because agency does not necessarily react as would be predicted, demonstrating ways in which circumstances are challenged, and change occurs. Utilising such approaches thus opens up the opportunity of a more nuanced understanding of the decisions people take regarding where they reside, and the implications of this for the trust and reciprocity that is central to relationships with family and community, and thus for informal support. A further rationale for these interviews is to provide an actor-orientated perspective, to focus on issues that are of concern to older people, rather than simply investigate issues identified by the researcher.

Section 4.4.1. Selection of informants

On completion of the questionnaire, respondents were asked if they would be willing to be interviewed again on similar issues; almost without exception people were agreeable. Fifteen respondents from the survey, who were noted to have had experiences of the interaction of migration and informal support, were asked to take part in conversational interviews at least several days after the questionnaire enumeration. The respondents were selected opportunistically. I wished to elicit the stories of people who had experience of being retirement migrants, of ageing in place and unable to rely on immediate family because no children live nearby, be that as a result of migration or fertility history. The numbers involved provided a wealth of information whilst being manageable within the constraints of time for interviewing, transcribing and analysing. These included people who had migrated long distances on retirement, and others whose children had moved a distance away. At the time of the interview, either the informants themselves or their spouses were experiencing poor health, or they had given some thought to their current residential location and the difficulties this poses with regard to family relationships and informal care and support in the future. Others interviewed included people without children, who are increasingly dependent on neighbours and formal services for their care and

support. The informants are thus all people who have direct experience of the very issues this thesis is focusing on, namely the effects of migration on informal support.

Service providers were also asked if they would be willing to be interviewed. This gave an opportunity to consider some of the biases that will be implicit within the survey given the methods of identifying the sample. The survey and conversational interviews discussed thus far in this section have relied on respondents who attend day-care-centres or lunch clubs. As discussed earlier in this chapter, this means that those who do not use such facilities are not going to be included. Those who run such services are also able to provide an additional perspective on informal support, given that they are closely involved in liaising with family members and close friends. Two people who organise services for older people have thus also been interviewed. There is no claim of comprehensiveness, either in respect of the in-depth interviews with older people or interviews with the care managers. The intention is to gain detail and insight. The flexibility of the conversational interviews provides information that adds and critiques that gained from the analysis of the quantitative data.

Section 4.4.2. The aide-memoir

I drew up an aide-memoir to act as a reminder of issues to cover in the conversational interviews. Topics eventually discussed, and the extent to which time was spent on them, differed from one respondent to another, depending on their own experiences and the issues that they themselves wanted to discuss. Nonetheless, the availability of some general headings provided a means by which aspects of the study that were applicable to particular situations were not missed. The issues covered were broadly similar to those of the survey, but the detail, nuances, opportunity to look at processes, and scope for actor-led discussion makes the in-depth interviews a valuable component of the research design. The final aide-memoir is shown with notes in appendix D.

The topics of interest in the aide-memoir included identifying processes that led to the current intergenerational family geography of the respondent, and what the implications of this was for them. The heuristic value of such biographical approaches in understanding the progression of events involved in migration decisions

is clearly demonstrated elsewhere (Halfacree and Boyle 1993). Thus aspects likely to have been involved in migration decisions are included, in particular employment history, family formation, health, and relationships with neighbours. Migration is explored not only regarding why people move, but also what holds them in place, especially with regard to relationships with others living nearby and with kin. Many of these aspects, such as family, health, and relationships with neighbours, are of interest not only in regards to staying in place or moving, but also because of their influence on availability of support. Questions were also asked regarding health, to better understand processes involved in changes over time, and how this affects relationships, or interaction with the local environment.

In-depth interviews also provide the opportunity to investigate participants' perceptions of the future. Topics touched upon in most of the in-depth interviews were thus how informants saw the coming day, weeks or years, whether they felt concern or insecurity, and who they saw as being important to their welfare. Ascertaining the complex nuances of interpersonal relationships with family or neighbours that go beyond frequency of contact, or assistance provided, is another area that in-depth interviews are perfect for considering. Thus, one of the topics discussed was attitudes towards children, and perceptions of the future (for example whether they would consider relocating to reside closer to their children).

Having outlined the rationale for including in-depth interviews in my research process, and the topics that were opened out to enquiry, I now move on to look at how the data were collected, and then analysed.

Section 4.4.3. Qualitative data collection and analysis

To encourage conversation, these interviews were taped. On each occasion, permission for doing so was sought from informants. Afterwards, the discussions were transcribed and entered into Nud*ist for analysis. Gaps in conversation were conveyed in the text using a sequence of three full stops. Laughs, crying, sighs or other sounds that indicate a sense of emotion were also added to the interviews to provide greater depth and indication as to the interviewee's affect during the interaction.

The researcher handled all aspects of the interviewing and transcribing process. McLellan *et al* (2003) suggest that two people independently transcribe and proofread as a means of increasing accuracy. However, no evidence is provided as to the extent that this improves transcription or affects findings. Where a large volume of interviews is being handled and multiple interviewers are involved this would be useful as a means of increasing reliability. However, given resource implications it was felt that double transcriptions were not justified. Transcripts were read through and points where what was being said was unclear were checked with the original recording and, where necessary, altered. After being entered in to Nu*dist, transcripts were coded according to the main key terms on which forthcoming chapters are based, namely migration, family, community, gender and formal service use.

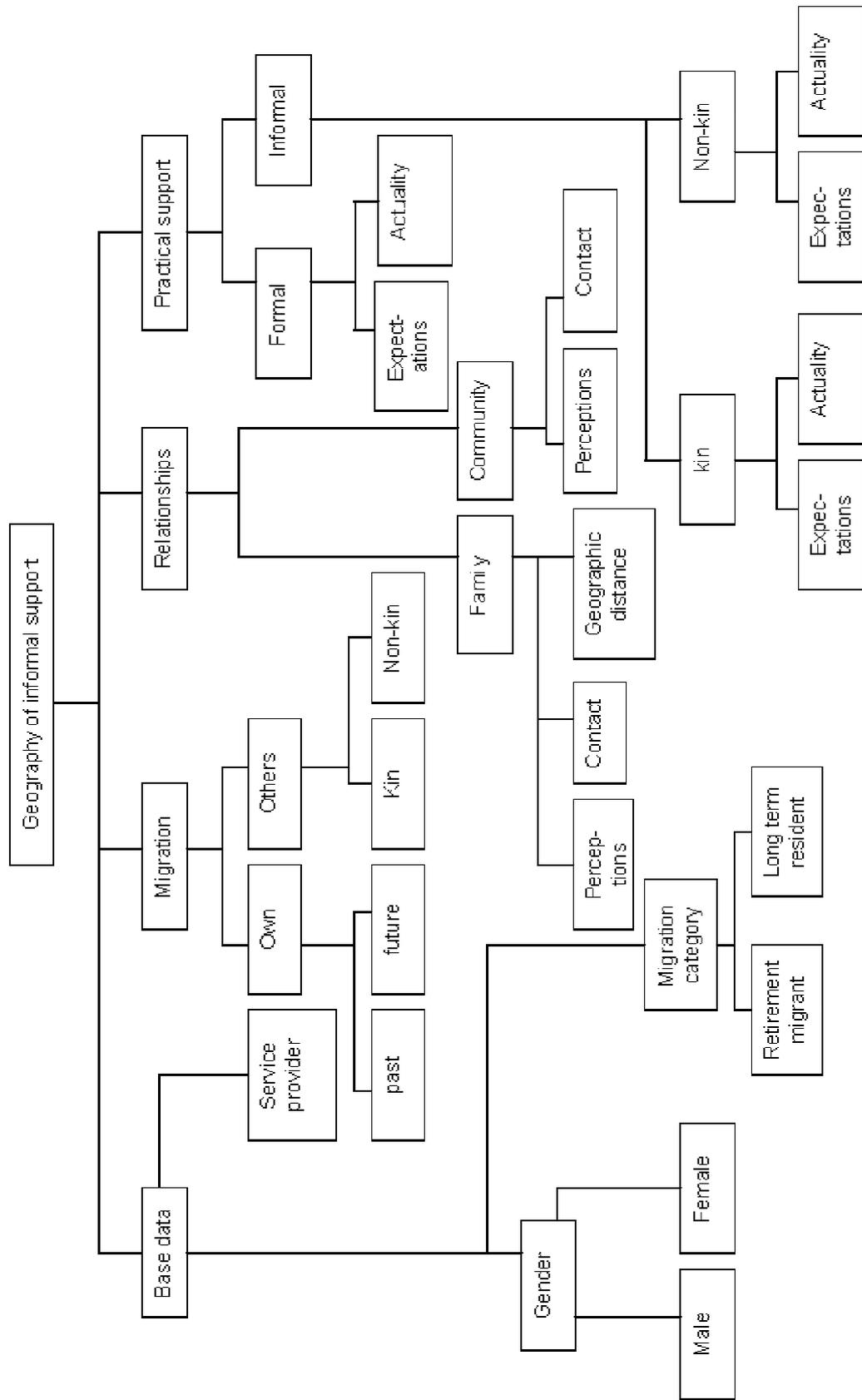
Pseudonyms have been used both for informants and anyone mentioned through the interviews in order to protect confidentiality. Grinyer (2002) suggests that doing this makes assumptions that participants do not want to be identified, whereas they may wish to be associated with the information they have given. Whilst this may well have been so for some of my informants, others mentioned in the texts might not have wished to be identified. Details of the relationship of the informants to others mentioned in the interview, along with other basic demographic information pertaining to the informant have been placed on the document header.

Section 4.4.4. *Qualitative analysis*

Kitchin and Tate (2000) suggest a process for the analysis of qualitative data, which I use here to analyse the in-depth interviews. The first stage involves my creating categories, or nodes, which are illustrated in Figure 4.2. This provides a basis on which different aspects of informants lives, experiences, observations and reflections, as well as those of the interviewer, can be compared and contrasted.

In the first of the categories, the *base data*, I have entered all interviews depending on whether they are with older people or with service providers. Two major areas of interest to this thesis are the implications of migration, and of gender. Transcripts relating to older people are thus classified depending on whether they are long term residents or retirement migrants, and gender. The second category provides a more detailed breakdown of issues surrounding migration. Passages of interviews that relate to moves made over the life course are entered into one node, and then further subdivided into past moves, and intentions for the future. I construct a further node to enter parts of transcripts where people are discussing moves of others, which are further subdivided into *family* and *non-family*. These migration categories provide the opportunity to consider how the time dimension influences aspects such as availability of informal support, or relationships to others.

Figure 4.2 Qualitative interview transcripts coding



The central interest of the thesis is how locale and migration influence intergenerational relationships and informal support. Two categories are therefore created for both of these issues. The *relationships* node is divided into family and non-family, and I further subdivide these into *perceptions* and *contact*. Frequent contact does not necessarily reflect the degree of trust or depth of feelings between two individuals. Yet, as I have outlined in the previous chapter, seeing others regularly is important both psychologically, and in facilitating assistance if and where need arises. Sub-dividing interview passages provides the opportunity to examine issues around how people view others, and the nature and quality of in-person visits.

The final category involves looking specifically at issues of *practical support* from the perspective of individual agency. I sub-divide this category into formal and informal support. As *knowledgeable agents*, to use Giddens terminology, informants recognise opportunities and constraints of their situation, and *reflexively* act in the context of their situation. Coding the data in such a way as to recognise separate *expectations* and the *actuality* gives me the opportunity to look at both past and current assistance from others, and how people view help, should the need arise.

Once labelled, I am then able to explore the data, comparing and contrasting experiences and views of informants, using options that Nu*dist provides. A further node is created to store the various analyses that I conduct, such as merging categories, identifying intersections where passages refer to interlinked issues, or comparing the views of different groups such as males and females.

Section 4.5. Conclusion

This chapter has discussed the methods adopted for investigating the implications of migration for informal support. It has contended that using a range of methods provides a means by which analysis can be conducted at different scales, through which the patterns and associations that result from structures influencing decisions people make, and the processes which lead to people either reproducing such structures or influencing their change can be integrated. Such methods reflect the ontological and epistemological underpinnings of the research, which is heavily

influenced by Giddens' ideas of structuration. The aim is to provide insight into how structure and agency influence the support and care networks that older people are able to develop in the context of different locales.

In the next chapter, I begin to examine the results of the work conducted using these methods. Specifically, I look at migration patterns within Scotland, both at local and national scales. From this, questions are raised as to what the results of the analysis mean for older individuals in different parts of Scotland.

Chapter 5. Migration, spatial demography and the geographical proximity of adult children

Section 5.1. Introduction

Societies are structured socially, spatially and across time. The contexts within which individuals are able to either develop or tap into informal care and support networks will differ from one part of a country to another. Populations are not evenly distributed across space, either in terms of social or age compositions. It is migration that is the main factor that leads to such unevenness at more localised scales (Champion et al. 1996; Fuguitt and Heaton 1995), as people at different stages in their life-course are influenced to either move to and from particular areas, or to continue living and ageing in the same geographical area. Opportunities and resources differ not only geographically but also by social class. Migration thus shapes the social geography such that populations of different localities have contrasting age and social compositions. The contexts for informal support, and implications of trends discernable at national scales, will therefore differ depending on where a person is situated, geographically and socially.

Population ageing is one of the demographic changes that is being witnessed at national scales, with associated concerns regarding its implications, especially for the ability of society to continue to provide care and support. Children provide a notable part of such assistance, but declines in fertility suggest that there will be rising numbers of people who will have to look to other sources, and demand for help from the state will rise. However, more optimistically, there is also evidence to suggest that coming decades will witness a rising propensity amongst those in later life to have at least one living child, as the age at which people have children rises and mortality declines (Murphy and Grundy 2003). Such contentions indicate that the future of family support is, at least for the meantime, assured.

However, the spatial element is missing from such debates. Having a surviving child does not necessarily indicate that he or she will be available to provide assistance, as adult children may be living in another part of the country, or even abroad. Recent studies emphasise that even in higher income countries such as the United States

(Lin and Rogerson 1995) and England (Shelton and Grundy 2000), large proportions of older people continue to live in close geographical proximity to their adult children. Yet such evidence ignores the uneven distribution of populations across space. The experience of an individual in one place cannot be assumed to reflect that of their contemporaries elsewhere, even in the same country.

In this chapter, I look at migration at a national scale across Scotland; the normative and socio-economic structures that facilitate and constrain individuals' moves, and the consequences for people at a local level, in particular the geographic proximity of adult children to their parents. I consider how the decisions taken by individuals, within the wider influences of the society, affect the geographic and demographic contexts within which older people live. Drawing on secondary data, the questionnaire survey and in-depth interviews, I consider how peoples' actions have repercussions at points in time many years later, both for the agents directly concerned, in terms of their residential proximity to children, and for others, namely in creating and reproducing structures that influence migration and intergenerational family geographies. I thus begin by analysing age-specific migration that can be hypothesised to have implications for care and support networks, namely the migration of both young adults and older people. Geographical distance has negative effects on the ability of the intergenerational family to provide assistance over a prolonged period of time, especially where it is intensive in nature (Himes et al. 1996). I thus focus on longer distance migration, moves that have implications for the social and age compositions of locales, and thus for the contexts of care.

Section 5.2. Migration and spatial demography: the national and local scale

People are more likely to migrate in the early stages of their life-course, as is demonstrated in Figure 5.1. The graph shows the proportion of the Scottish population which changed address in the 12 months prior to enumeration of the 1991 Census, where moving involved crossing a regional boundary². Using only those relocations that took people from one region to another indicates moves of longer

² Regions are administrative regions that are used to provide geographical aggregations of Census data. In 1991, there were 11 of these areas in Scotland, with an average population of 416547 people in each.

distance that are thus going to affect both the composition of populations at a local scale, and the distances between movers and their kin. The general pattern of proportions moving at different ages is very similar to patterns identified elsewhere (see Boyle et al. 1999), and demonstrates that the age group with the highest percentage moving longer distances includes those aged 20 to 24 for both females and males.

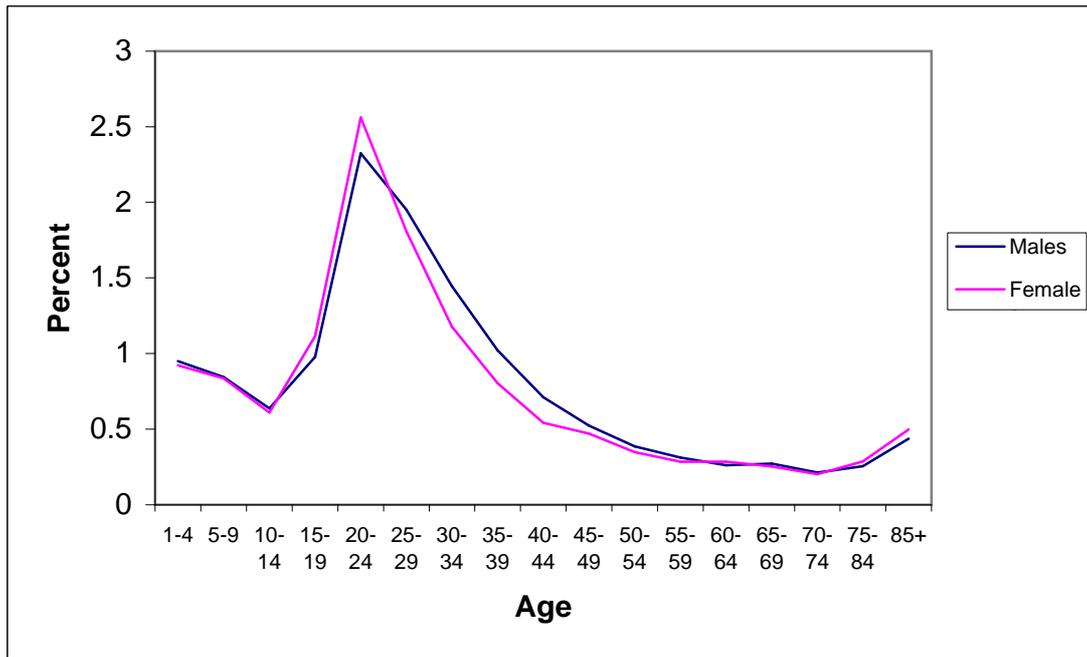


Figure 5.1 Changes of address that involve crossing a regional boundary within Scotland in 12 months prior to 1991 Census.

The higher rates of migration amongst those in early adulthood is used by Warnes (1986) to explain why distances between households of younger and older generations are largely a function of younger people’s geographic mobility. However, whilst this claim might be true at a national scale, the same will not necessarily explain proximities at local scales where in- or out-migration have age specific propensities that differ considerably from the national norm. The degree to which the migrations of older or younger people lead to geographical separation of older and younger generations will thus differ as a result of the spatial structuring of society, with its implications for migration.

Figure 5.1 also shows a high degree of residential stability. Only small percentages at any age move far enough to be captured in this particular part of the analysis. Such a picture reflects findings of studies demonstrating that large proportions of populations in higher income countries continue to live near to at least one adult child (Shelton and Grundy 2000). Even in the context of higher income countries, long distance migrations are a relatively rare event. However, the degree to which such national level conclusions actually reflect the experience of people in different parts of Scotland is, once more, questionable. Where social and economic structures lead to high levels of out-migration amongst young adults, or in-migration of older individuals, there will be greater proportions of older people who do not have adult children living nearby than would be inferred from national scale analysis. To understand the spatial situation of older individuals in relation to the intergenerational family thus requires that we consider the local scale, and contrasts in age-specific migration between locales.

Section 5.2.1. Out-migration by younger people

Migration is influenced across the life-course, so that people are more likely to relocate in the early stages of their adulthood. Pursuing an education or employment of choice may necessitate relocating to a place some distance from family. The economic need to have a career to support oneself through life, and normative values associated with ideas about what constitutes a fulfilling life, lead to a need for many to relocate. Countries are socio-economically structured spatially with the result that individuals perceive a need to migrate to differing extents, depending on where they live and social attributes, such as socio-economic situation.

Table 5-1 provides a summary of the proportions of people 16-29 years of age, who in the 12 months prior to the 1991 Census moved 15 miles or more from the pseudo-postcode sector³ (PPS) in which they were formerly resident. The range extends from one locale where no young adults made such moves, to another where nearly a third of the young adult population moved far enough away to be included, with a mean for all areas of 3.66 percent. The median value (3 percent) and modal value (2 percent) demonstrate that the distribution is positively skewed, such that the majority of areas

³ Pseudo Postcode sectors are the smallest geographical areas of aggregation for which Special Migration Statistics are made available. There were 1003 across the whole of Scotland in 1991.

have levels of out-migration lower than the mean, with a small number having much higher percentages. Figure 5.2 provides the same data in the form of a graph, visually demonstrating that most PPSs had low proportions moving away, whilst a few had considerably higher figures. Thus, most areas have even greater stability than national summary statistics suggest, but notably a few locales have extremely high levels of their younger populations out-migrating.

Table 5-1 Proportion of people aged 16-29 years who moved 15 miles or more in 12 months prior to 1991 Census

mean	3.66
standard deviation	3.24
Minumum	0
Maximuim	29
Mode	2
Median	3

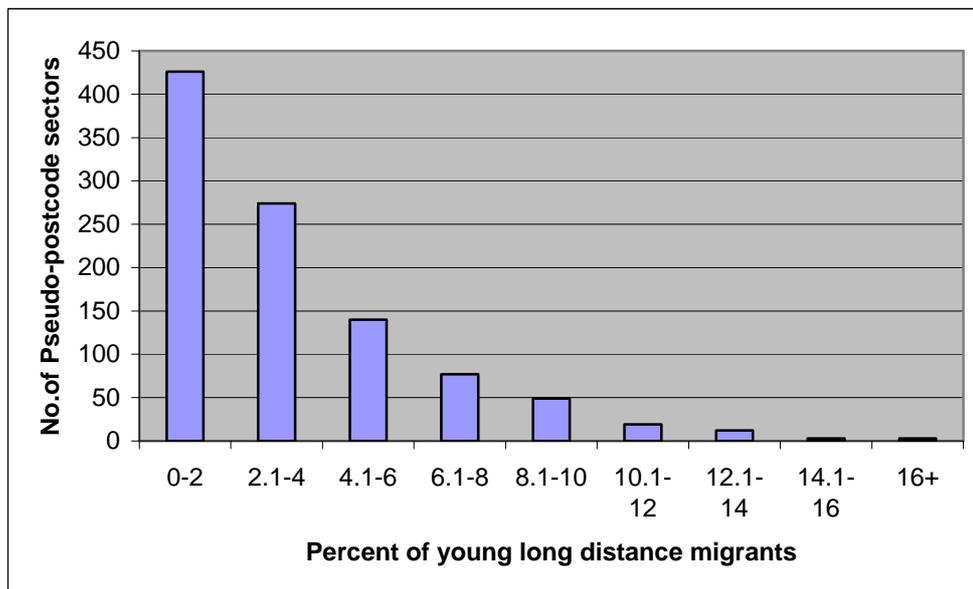


Figure 5.2 Percentage of people aged 16-29 years at the 1991 Census moving 15 miles or more away from Pseudo-postcode sectors in the 12 months prior to enumeration.

Figure 5.3 provides a map showing where PPSs in the highest quintile of proportions of younger adults out-migrating at least 15 miles or more are located. I show only the single highest quintile given the small number of areas with particularly high out-migration. A general summary is of young people moving away from the rural periphery. With few exceptions, the areas are located in the rural Highlands and Islands, Dumfries and Galloway, or Borders regions⁴. Areas outside of the northerly or southerly parts of Scotland include cities with major universities, such as Aberdeen and Edinburgh, and places with military bases, such as in North East Fife. However, such areas are likely to be largely reflecting their military and student populations, whose moves are unlikely to impact on the spatial geographies of family residences of older people locally resident and are thus not of note given the focus of this chapter.

The map in Figure 5.4 shows the opposite extreme, those areas in the lowest 2 deciles in terms of out-migration by people aged 16-29 years in the 12 months prior to the 1991 Census. Two deciles are shown because of the skewed distribution of percentages out-migration discussed earlier in the chapter leads to many PPSs at the lower end of the distribution having similar percentages. All the areas shown have proportions of their younger adult populations moving away 15 miles or more of only 2 percent or less. Areas with the lowest levels of younger person out-migration tend to be found across the Central Belt. Some PPSs with large landmasses but small populations are found in the remoter areas, such as in the far North-west of Sutherland. However, the majority are found in the urban areas around and between the cities of Edinburgh and Glasgow. These geographic areas are small in terms of landmass, but demarcate highly populated areas.

⁴ See Appendix E for location of Scottish regions and major cities.

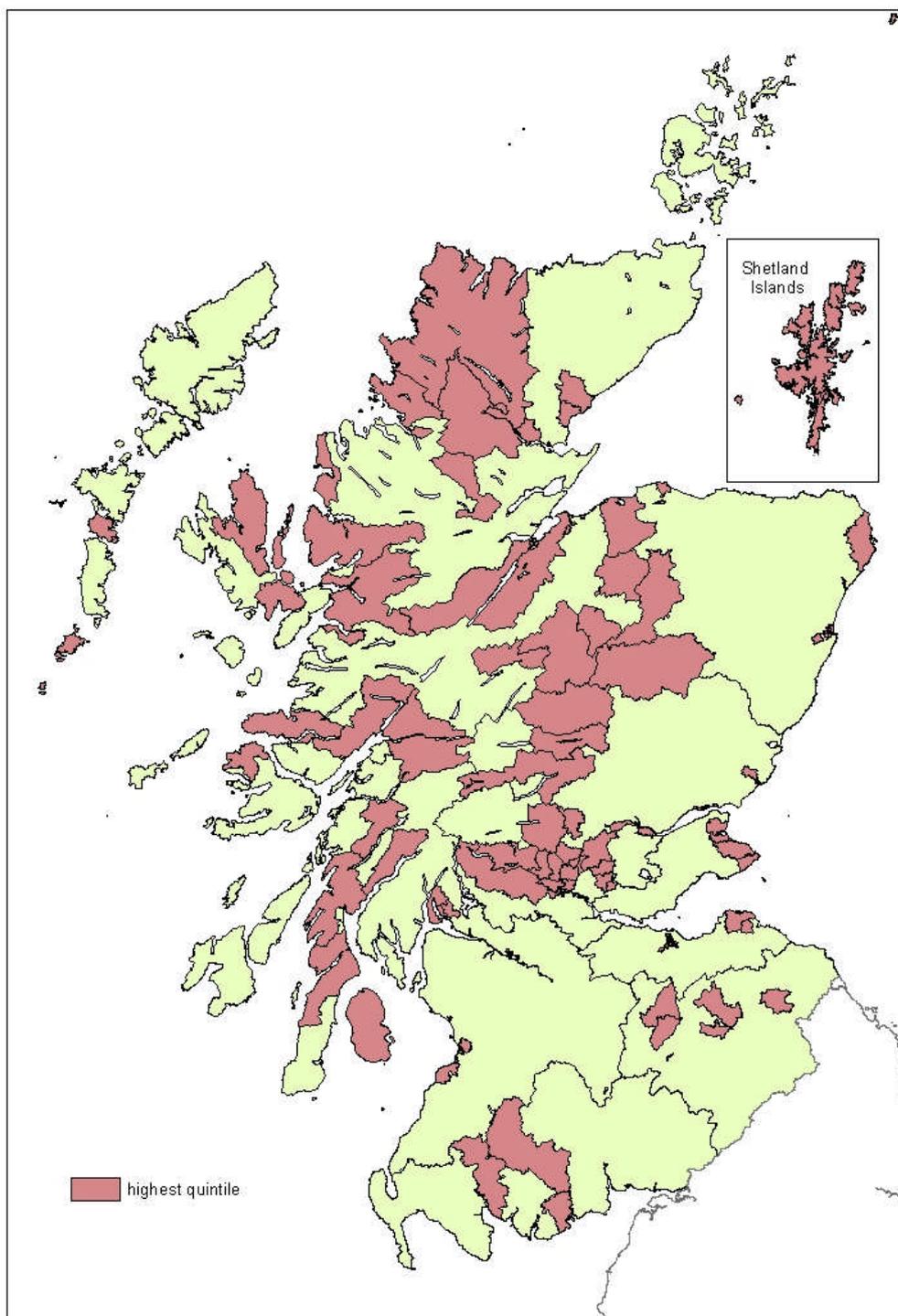


Figure 5.3 Highest quintile of Pseudo-Postcode Sectors grouped by proportions of their populations aged 16-29 out-migrating more than 15 miles in 12 months before 1991 Census.

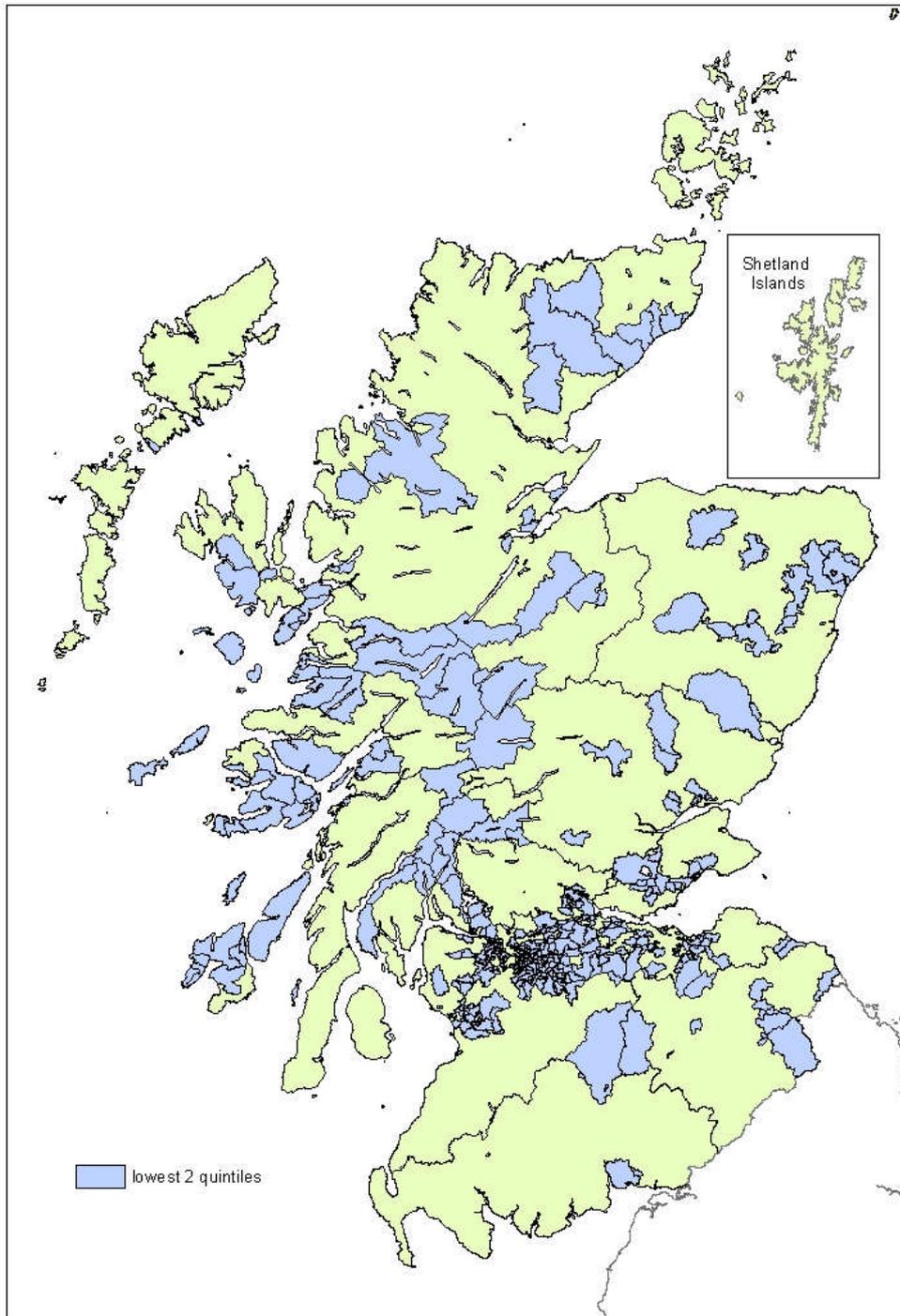


Figure 5.4 Pseudo-postcodes in the two lowest deciles for out-migration of more than 15 miles by people aged 16-29 years in 12 months prior to 1991 Census.

The spatial structures of Scotland's economy lead to people facing decisions in the early stages of adulthood as to where they should be to develop careers and jobs. Where they already live influences the degree to which moving a longer distance is required. Those areas in the north and south are, compared to the Central Belt, sparsely populated and hold fewer life opportunities. Several participants in the in-depth interviews mentioned the need for younger people to move. Jennifer, a resident of one of the areas with high out-migration identified in Figure 5.3, was one such interviewee.

Iain⁵: And of your friends around [the village] and this area, have many of their children had to move south?

Jennifer: Oh nearly all. If you want a skilled job there's no opportunity locally really...we would all like to have our families near us but em it would be very selfish to try and keep them when there's no real job opportunity for a professional career...

Iain: How do they tend to view their children moving south?

Jennifer: Inevitable, mmm hmmm.

Her thoughts echo many of the ideas of structuration. The decisions being made by younger individuals were the results of perceived opportunities for jobs and education elsewhere. Normative structures that contribute to the reproduction and reinforcement of such ideas are evident in what Jennifer says. There is a sense that there is little that can be done by agents (in this case the older individual) to overcome the socio-economic structures that lead to younger people moving away, and that have done so for generations. Normative values regarding roles and responsibilities, in Jennifer's case, include expecting children to move away, even wanting them to do so from the point of view of their own futures. These ideas though are tinged with regret, as she states a desire that younger people did not have to move elsewhere. Patterns of migration do not take into account the needs of people who are ageing in place in terms of the proximity to their children. Separation is thus very often an *unintended consequence* of such moves. The needs of the younger generation, for

⁵ Interviewer is on all occasions the thesis author.

jobs and education, are paramount to both generations. As I will discuss later, there is often little planning even by older individuals themselves as to what will happen in the (far from certain) eventuality of needing the assistance of others.

Such migrations are not necessarily permanent, but in many cases they will not return. Structures have not only a spatial dimension, but are also temporal. The younger person's migration that is discussed in this section has repercussions for both those who move and those who remain behind. Even if a person decides to return, picking up from where they left off is not straightforward. Places change, people move on in their lives, and relationships are altered by the period of separation. Here Jennifer reflects on the time she and her husband returned to the place of her childhood after several years living in the Central Belt.

Iain: Did you still have many friends up here from your childhood days?

Jennifer: No, not really, no eh, I had to just, [start] a completely new life, and it took a wee while to register that it was up to me, you know, nobody else was going to do it for me, so it was up to me to get, integrate myself into the community.

The time that relationships take to develop acts to counteract desires to relocate, even if the intended move takes a person back to the place from where they originally came. An individual's migration thus has implications for opportunities and decisions they make in the future. Lives move on, both the migrant's and those of people who continue to live in a place. Relocating back to a locale, whilst possible, is not easy, given both the socio-economic structures that led to the original out-migration, and the effects of time on social networks. Hence, the patterns of migration shown in Figure 5.3 reflect moves that will have consequences in the long-term for people, including those who move and others who stay.

Data from the 1991 Census used in the analysis reported in this section indicates migration in the 12 months prior to enumeration. The spatial dimensions identified will also be indicative of population mobility both prior to and after that year. The figures I have used will to a large extent reflect geographical patterns over time. Stillwell *et al.* (1990) demonstrate that migration across the United Kingdom has

been temporally consistent, and there is no reason to believe that constituent countries such as Scotland will be any different. The structures that encourage and constrain individuals' moves are themselves reproduced across time. For example, many of the areas that I discuss with regard to high out-migration are rural. The socio-economic structures that lead to out-migration from such localities are unlikely to radically alter in the foreseeable future. Even in places where economic development has led to the creation of job opportunities, out-migration of younger adults continues. Grampian, on the mainland, and the islands of Orkney and Shetland, have both experienced high levels of investment through the 1970s and 1980s as a result of the oil industry. The jobs, however, required specific knowledge and experience, and thus did not reduce the degree to which younger people moved away (Seyfrit and Hamilton 1992). Additionally, the normative structures that reinforce ideas of the need to move away, evident in conversations with interviewees, contribute to the reproduction of such patterns. Hence, whilst structures do change, the findings I present in this section give a good indication of the experiences of the population both prior to and after the particular census year.

What this section has demonstrated is that the propensity of younger people to migrate differs greatly from one part of Scotland to another, the result of socio-economic and normative structures. Locales, notably in the rural periphery, have higher proportions of their younger populations moving distances that will have implications for the spatial demography of Scotland, and for people who continue to reside in those places from which people are moving away. Just what these effects are is an issue I will return to later in the chapter.

Section 5.2.2. Retirement migration in Scotland

Cross-sectional national scale data, such as that presented earlier in this chapter in Figure 5.1, can obscure the importance of retirement migration for care and support networks in specific locales. Economic and normative aspects of social life are spatially structured such that some areas become particularly attractive to people as places to move to on their retirement. Such moves in general account for a high proportion of later life relocations that involve distances likely to affect spatial demography and the immediacy with which kin are available. Where structures

encourage older people to relocate to live in a particular place in later life, their moves will be more influential than other researchers suggest (for example Warnes 1986) in accounting for geographical separation of intergenerational residences.

Figure 5.5, based on data from the 1991 Census, highlights two contrasting areas as case studies: Lothian, and Dumfries and Galloway. I have selected these areas because of the contrasts evident between the age-specific migration rates of their older populations. Only migrations that cross regional boundaries are included as these are the moves that will affect both spatial demography and intergenerational residential separation. Lothian has lower rates of in-migration across all ages of later life shown in the graph, without a discernable retirement peak. Dumfries and Galloway, on the other hand, has a small rise for males in the age groups 60-64 and 65-69 years, around the statutory ages of retirement for men in the United Kingdom. Females have a smaller rise, beginning and ending 5 years earlier, consistent with the findings of (Warnes 1992a) and (Rogers 1988). Also, national scale findings will not necessarily be reflected in specific localities. Champion (2005) shows that the rise around retirement no longer exists. Whilst no retirement peak is evident for Scotland as a whole (see Figure 5.1), there is for Dumfries and Galloway (Figure 5.5).

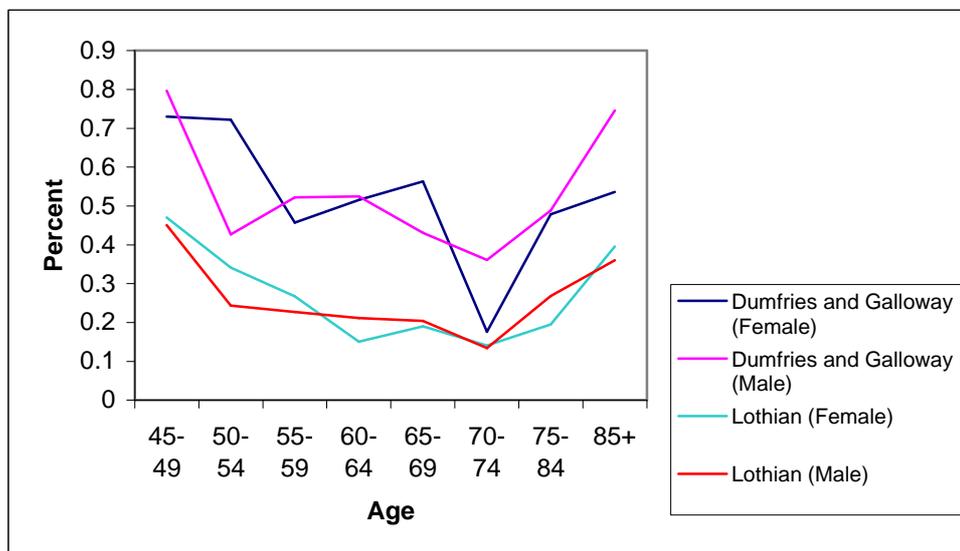


Figure 5.5 Age-specific migration into Dumfries and Galloway, and Lothian, from age 45 years and above from other regions of Scotland in year preceding 1991 Census.

The proportion of older people who move is small but notable. As with the analysis of younger people's migration, the data I use here only record moves in the 12 months prior to the Census. Over a period of years and decades, small percentages will accumulate and have a more marked impact than cross-sectional data suggest. Lothian, and Dumfries and Galloway, the regions I have used in this section's comparative analysis, cover considerable areas. Age-specific migration has increasingly more affect on spatial demography the smaller the scale of analysis (Fugitt and Heaton 1995). Had data been available to allow more detailed geographic investigation, even greater contrasts are likely to have been demonstrated. Additionally, such moves may become more frequent. Cohorts entering later life in the future will contain larger proportions of people in higher socio-economic groups (Evandrou and Falkingham 2000), those who are most likely to make relocations such as those discussed here (Litwak and Longino 1987). Retirement migration is therefore an important feature of some locales and, in coming years, likely to become of greater significance if populations do indeed become more geographically mobile.

Specific localities have been identified as Retirement Areas using the methods set out in Chapter 4, which compare the numbers aged 65-74 to those that would be expected given the numbers aged 55-64 years a decade earlier. Those that have a greater number in the later period than would be anticipated given national declines that result from mortality, and that have older populations compared to the Scottish average, are classified as Retirement Areas. Consistent Areas Through Time (CATTs) are used as the geographic unit of analysis. These are approximations to PPSs, but have the added advantage of having boundaries that do not alter between the Censuses of 1981, 1991 and 2001 permitting temporal analysis. A summary of the identified areas is shown in Table 5-2.

A total of 122 of the 959 CATTs fit the necessary criteria for 1981 to 1991, declining slightly to 105 for the analysis of changes between 1991 and 2001. Of these, 89 are identified as Retirement Areas in both decades, 74 percent of Retirement Areas 1981-1991, and 86 percent for 1991-2001. These high percentages provide a clear demonstration of the socio-economic and normative structures influencing people

across time, such that migration patterns are reproduced across time. Consistencies between decades cannot be explained through chance, but by factors influencing different cohorts to make the same decisions. Such continuities over time also provide support for using identified locales as places for analysing the impact of such population mobility on care and support networks, where spatial structures will have created consistencies that will affect the availability of adult children to older residents.

Table 5-2 Scottish Retirement Areas 1981-1991 and 1991-2001

Period	CATTs
Total CATTs	959
1981-1991	122
1991-2001	105
1981-1991 and 1991-2001	89

The geographical location of Retirement Areas is illustrated in Figure 5.6. Those areas with the darkest shading have been popular as places for people to retire to in both periods 1981-1991 and 1991-2001, whilst the two lighter shades show places that were defined as Retirement Areas in only one of the two decades. Many of the Scottish Retirement Areas have much in common with findings for other countries, including findings for England and Wales (Law and Warnes 1976), Australia (Drysdale 1991) and the United States (Hunt et al. 2002a), in that they are predominantly rural, though near to urban centres, or are in the suburbs of major cities. The shared characteristics of these locations suggest that similar socio-economic and normative structures are both constraining and encouraging decisions regarding relocation around retirement.

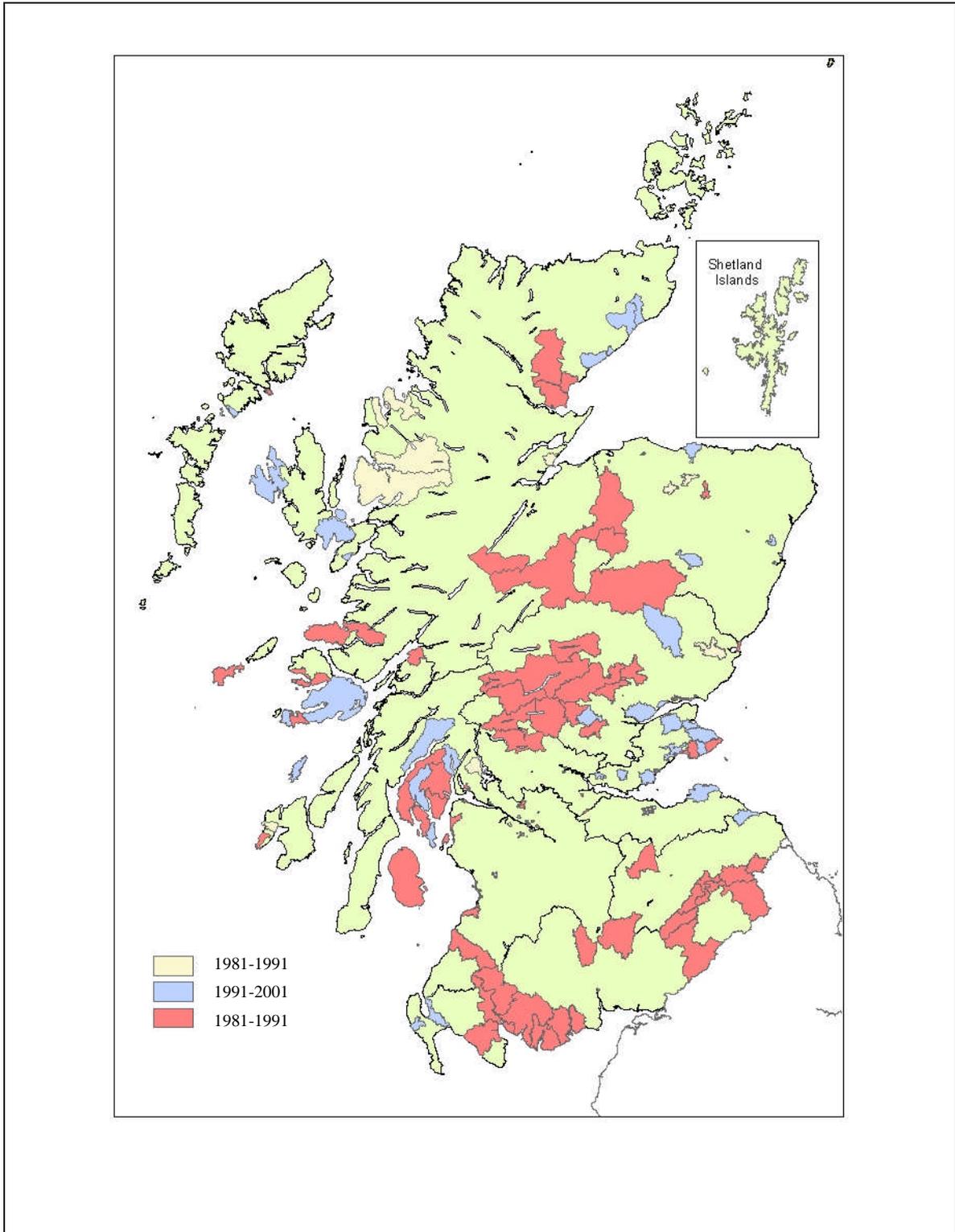


Figure 5.6 Consistent Areas Through Time and Space (CATTs) identified as Retirement Areas 1981-1991, 1991-2001 and for both periods of time.

Many of the places that are either in or close to the Central Belt contain towns that are also popular holiday resorts, again in keeping with findings elsewhere (Hunt et al. 2002a; Warnes 1992b). Locales with seaside towns are highlighted as being Retirement Areas: St Andrews, in the east of Fife; North Berwick, to the east of Edinburgh; and Largs, to the west of Glasgow; and the Island of Arran. Inland, places in mountainous settings, again with small service centres popular as holiday destinations are also identified: Pitlochry, Crieff and Aberfeldy. Other rural areas have also proved attractive for older migrants, including the CATTs following the River Tweed, and in Dumfries and Galloway, whose profile of age-specific migration was discussed earlier in this chapter.

Most of these places are within relatively close proximity to the highly urbanised Central Belt. Such locations suggest that migrants will not be moving distances that preclude maintaining contact with their former areas of residence, as once again has been found elsewhere (Hunt et al. 2002a; Law and Warnes 1976). However, several areas in the north of the Highland Region are also highlighted as Retirement Areas. Islands off the west coast, locales considerably further a field from the Central Belt, are also identified, with the implication that moves to these places will involve considerably greater distances than those discussed thus far. It is possible that these 'retirement moves' could be the result of return migration, though even this would likely involve moves away from established friends or family. Most of these areas are indicated as being Retirement Areas for either 1981-91 or 1991-2001 but few are highlighted as having been so for both. The exceptions to this include one area in Sutherland, in the north of Highland Region, in which is located the town of Dornoch, a popular seaside town. More surprisingly, the small Island of Coll is identified as having met the criteria over the two decades. This is a particularly remote locale, where transport to or from will require either flight or ferry.

Both the location of Retirement Areas and the similarities over time are indicative that there are structures influencing the decisions of agents as to where to relocate. Interviewees also reflected issues in their own thinking that led them, as individuals, to make choices that can be seen to create specific patterns at the national scale. For example, several alluded to developing knowledge and a liking of areas during holidays at earlier points in their life-course. "Betty" now lives in one of the areas

identified as being a Retirement Area, having moved there with her spouse who has since passed away.

Betty: We used to come up every year on holiday...This was always at the back of our mind that we would retire here, up this way, so that was it.

Another interviewee holidayed in a town along the coast from the one which she and her husband now live. In doing so, she developed ideas and beliefs as to what would constitute a good place to which to move later in her life.

Iain: So if I was to ask you what the motivation was for moving here, what would you say?

Ann: Well actually, I always liked [this] coast because, I actually always liked the people on [this] coast.

Iain: Had you holidayed here?

Ann: Yes, yes, uh huh, because we used to go to...to [another town some 40 miles along the coast].

Even though she had never actually visited the particular town to which she and her husband moved, her perceptions of the area were facilitated by previous experiences gained during holidays. The actual motivations for her moving are complex, involving more than one influence, notably the residential location of a daughter. Moves to be nearer family will thus on occasions take into account other factors, such as the perceptions of the area. Agents weigh up the influences of different factors in order to arrive at their decision.

Similar considerations act to encourage moves away from an area. Although my analysis of retirement migration has not considered where people are moving from, several interviewees mention perceptions of the place from which they moved, suggesting perceptions of social capital as a motive. In so doing, they also drew on what they perceived the place they were moving to would offer. "Nancy" is a resident of one of the CATTs identified as a Retirement Area. She states that the city in which

she had previously been living was not conducive to enjoying a peaceful retirement.

Nancy: I mean [the city] was em, by the road where I lived it, used to be a sort of council estate and there was a lot of em people who had been involved in crime and what not. They had a few houses down there so that's why they had all these break-ins, mm hmm.

Iain: You had had a few break ins?

Nancy: Yes, I had two, and my car was stolen twice. The second time it was a right-off. Never got it back so it wasn't a very good place to live.

She was not alone in making reference to crime, and the benefits of moving to a more rural area. Ann, quoted earlier, also makes reference to perceptions of her previous place of residence.

Ann: ...there was lots of factors. One, where we could afford to live in [the city] was deteriorating. There was lots of issues about certain places, I mean.

Perceptions of rural idylls, as places of low crime and where neighbours can be trusted, contribute to individuals' decisions to migrate once formal employment ceases to constrain choices of where to live. Nancy and Ann feel that they will be safer in the area to where they were moving. This contention may, or may not, be correct. However, perceptions of place, which involve normative values, will influence choices individuals make, with patterns evident at a national scale.

Some of the areas defined as Retirement Areas have been shown also to have high levels of out-migration of younger people, for example in the Southern Highlands. Whether or not this is a result of socio-economic structures that coincide (Green 1992), or the direct outcome of one causing the other (Burley 2004) is beyond the remit of this thesis. However, in locales where the two do occur together there are even greater potential implications for both the local demography of the area and intergenerational residential proximity. There will be both individuals who have moved into the area in later life, potentially away from kin, and others who have lived in the same place for a long period of time, but whose younger family members have

moved away.

Another point of note from Figure 5.6 is that several Retirement Areas are located on the outskirts of cities, including Edinburgh and Glasgow. This again accords with findings elsewhere, for migration out of London and Paris, with people moving away from urban centres into the suburbs upon retiring (Cribier and Kych 1993; Warnes 1994). None of the interviews in this study involved individuals living in suburban parts of Scotland. The above quote from Ann, however, indicates that social and economic structures are evidently affecting decisions regarding suitable parts of cities to relocate to every bit as much as moves to rural areas. Hence, she stated that she could not afford to move to the parts of the city that were suitable for enjoying retirement. The spatial dimensions of the housing market thus play a part, with price differentials influencing decisions. She was unable to move to the parts of the city that she felt were desirable places to live. Perceptions of place, coupled with issues of affordability, influence destinations, rural and urban.

A further example of the constraints that the spatially structured economy places on decisions regarding migration is raised later in Ann's interview.

Iain: You've never been tempted to move down to...that part of the world [where Ann's son lives]?

Ann: No. For the simple reason actually, we can't afford it.

Differences in house prices between the area of the Central Belt city where Ann and her husband lived and where their son lives made moving there was beyond their means. As such, it was a move that they did not even consider, and instead moved out to their seaside Retirement Area, near to their daughter's house.

The location of children is an important factor in retirement migration. Several of the interviewees make reference to the role a child had in moving to a particular place. Graham, a man who moved to the *retirement locale* with his wife some years before, reflects on why he came to that particular part of Scotland.

Graham: Well, there was a combination of factors I suppose. We liked the area, plus the fact the youngest daughter, she had a house in [a seaside

town], which is just attached to [town of residence], and uh, we liked the area. Unfortunately when I did sell up to retire we couldn't find a house to suit us in [daughter's town] so...this one in [town of residence] is the next best. That's why we came here.

As with other instances that I have touched on in the course of the chapter, there is not one particular factor behind the decision that Graham and his wife came to. His daughter lived nearby, but his general liking of the area, gleaned from previous visits also played a role.

Just as the location of friends influence destination choice, children help in raising awareness of possibilities, offer encouragement, and help with practicalities of relocating. "Stan", a man now in his eighties, retired in his mid-seventies. He moved along with his wife from the Central Belt to be near their daughter in the *rural locale*. Here he talks of the way his younger kin assisted with the decision to move.

Iain: And what made you decide...

Stan: Well the thing was this, I was still working...at 72, you know. And eh, I had eh, I just couldn't get retired because every time I retired somebody said to me, come and give us a hand. Cause I was a butcher by trade you see. And eh, it just went on and on and on, and eh, anyway, my daughter who is eh...lives up here, on main street, she is also in the council offices. But she rang me up one day and said, 'Dad, there's a house available up here if you want to move up,' she says. 'Right! It's the only way I'm going to get retired.' (laughs). That's how it happened.

His daughter, already living in the area, knew of available housing, and had a nuanced understanding of the needs of her parents. Not only was there the benefit of relocating nearer to kin, but the costs in terms of time and money that are involved in moving were reduced for Stan and his wife.

Normative values of kinship and the boundaries to roles and responsibilities are not uniform, however. Others, who have very close relationships with their children, do not see any contradiction in moving *away* from where their sons or daughters live,

indeed it can be legitimised as being in part an obligation. Here Nancy, who lives in the *retirement locale*, some distance from the city from where she spent most of her working life, talks about how she rationalised with her daughter the decision to move.

Iain: Was it difficult when you moved to [the retirement locale], your daughter still living [in the locale from which interviewee had left]?

Nancy: U huh, she said to me you know Mum it's a long way to come if you want me to come and see you (laughs).

Iain: And what did you say to that?

Nancy: I said, oh well, we'll just have to take that as it comes. It's one of those things you have to realise. You can't live with your... you can't live with your daughter...your children's lives, you've got to give them space to get on with their own lives, mm hmm.

That the two discussed the decision suggests that they had a good relationship. There is even a sense that both parties would have liked to remain living near to one another. The daughter explicitly pointed out the disadvantages of her parents moving away, whilst Nancy herself states that being unable to live near to your children is something with which a person simply has to come to terms, suggested by her comment, "It's one of those things you have to realise." There is a sense of obligation, a need to ensure that children have space to live their lives independently. Perceptions of roles and responsibilities that are involved in kinship may actually discourage high degrees of intergenerational proximity. Declining propensities to co-reside or lower intergenerational residential proximity will thus not necessarily indicate weakened family affinity.

Values of kinship and intergenerational responsibility towards parents extend into the later stages of the life-course. Several interviewees mentioned their own parents who are still alive. One result of the continuing parent-child relationship is to accentuate structures that encourage moves made by individuals in later life into particular locales. The move of a person at retirement is constrained by a sense of obligation towards a still living parent or parents. A strategy that permits the move yet still

maintains close intergenerational proximity is to encourage the mother or father to also move. Karen, who helps organise services for older people in the *rural locale* reflected on individuals to whom she has given assistance who moved into the area with their children, who were themselves retiring.

Karen: ...what happens is that people move up here and then when they're wanting their father or their mother or their granny to [come]...and its an ideal place for them...So they want to bring their parents up here.

Retirement migration does not preclude older people from living near to their kin. Moves where older individuals move to remain near to children who are themselves making retirement migrations demonstrate that an increasingly mobile population will not preclude close intergenerational proximity, and may even facilitate individuals to live near to their parents or children. These interconnections also reflect historical demographic trends. People now entering their retirement years were born to parents who were younger than is the case today. Hence, today's retirees are more likely to still have living kin than will be the case for cohorts currently still in middle-age and younger.

Other interviewees make references to their retirement migration involving moving closer to friends who have relocated some time earlier. Karn (1977) in her research of people moving to English seaside locations came across several examples of people who had chosen where to move based upon the experiences of friends that had gone before. Interviewees who took part in the in-depth interviews of my study also expressed the location of friends as a reason for choosing where to relocate.

Nancy: ...my best friend lived in [town] and she said to me why don't you put your name down for sheltered housing, so that's what I did and I got one. So I sold my house and paid off the mortgage and moved through to [the retirement locale].

Nancy's story of how she came to relocate indicates both the role of economic factors, namely having the resources to purchase a house in another part of the country, and the influence of a friend. Not only does the presence of a friend act as a motivation, but they can also act to provide information regarding the attractions of an area,

and assist in practicalities such the knowing of the availability of suitable housing. Michael is an interviewee who, after a lifetime spent living in various parts of the world, decided to return to Scotland. He chose to move to one of the locales identified in the analysis of retirement migration.

Michael: I had a friend who lived in [town in which he now resides], you see.

Iain: Did you choose [to move there] in particular because of your friend living in [the town], or the property was available?

Michael: Because the house was available, that's why I chose [this area]... His wife told me, yes, his wife said, 'there's a nice house for sale, the owner's died and his wife wants to sell up and go to England.'

The structures that influence decisions agents make include inter-related factors in which friends may play a role. The map of migration shown in Figure 5.3 does not reflect the intricate and complex nature of relationships, with either kin or non-kin. It shows migration patterns that will have implications for the Scottish population, but ascertaining what these are requires more than secondary data can provide. Furthermore, such structures as friendship networks demonstrate how the actions of one agent can set up situations where others are assisted to follow on. The knowledge and facilitating aspects of having others who you know living in a certain place makes moving there far more likely than moving to places where you know nobody. Such structures will reinforce themselves as others in the same or interlinked networks are also encouraged to move to such locations. Migration is intertwined with human relationships and will continue to be so. An increasingly mobile society will still have agents making decisions on where to settle based on kinship and friendship.

Section 5.3. Local demographics, migration, and proximity

Having established that age-specific migration differs from one part of Scotland to another, I now consider implications for different locales in terms of their demographic ageing and the proximity of older individuals to their geographically nearest child. I firstly analyse the contrasting proportions of people aged 75 years or over at the 2001 Census across Scotland, investigating where in Scotland older and

younger populations are found. I then consider the degree to which individual experiences of migration amongst survey respondents who reside in areas with very different age-specific migration profiles reflect what might be expected given the national level analysis. The individual level quantitative data is then used to investigate place and intergenerational residential proximities.

Section 5.3.1. Local demographics and migration

Figure 5.7 shows CATTs in the highest and lowest quintiles of proportions of people aged 75 years and over at the point of the 2001 Census. The data used was collated ten years after that used to analyse younger people's migration, with the result that analysis will reflect the effects of population mobility over time. The moves people make will have implications that are discernable much later. The age group used represents people who are older than those in the analysis of retirement migration. However, given the time lag, all surviving retirement migrants from the 1981-1991 analysis will be included in the group representing the older cohort. Further, by using 75 years as the cut-off point, a higher proportion will have experienced limiting long-term illness, either themselves or through supporting their spouse, or will be widowed and so without a partner for support.

Both areas with younger populations and those with older reflect the earlier analysis of population mobility. The younger locales are, in the main, found across the central belt, as was found for the areas with the lowest proportions of younger adults out-migrating. Regarding the oldest quintile, a remarkable similarity can be found to the CATTs that have also been identified in Figure 5.6 as Retirement Areas. The Southern Highlands, parts of Dumfries and Galloway, and areas following the course of the River Tweed on the Scottish-English border, have all been mentioned earlier as popular places for those who are retiring, and are all shown to have older population structures in 2001. Decisions being taken by individuals are thus having a discernable effect on the spatial demography of Scotland.

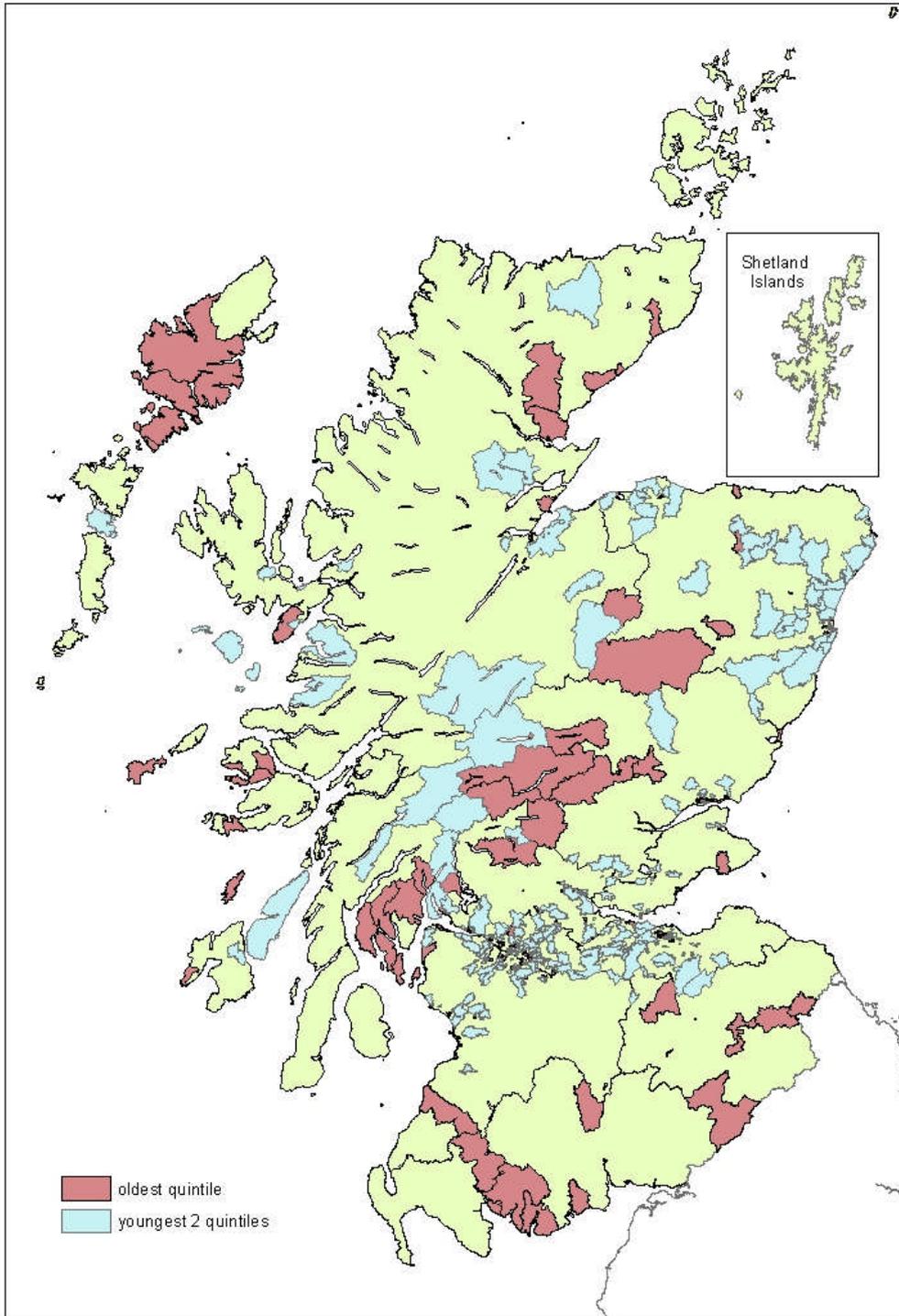


Figure 5.7 Oldest and youngest quintiles of populations calculated by proportion aged 75 years or over in CATTs at point of the 2001 Census.

Hypothetically, there is potential that such contrasting population structures will reflect greater proportions of older individuals who do not have their intergenerational family living nearby. The migration that creates such demographically uneven populations potentially also leads to people living further from their children. Retirement migrations may lead to notable proportions of people who have moved into the area but do not have kin in the vicinity. If people in early adulthood are moving away for education or work, then their parents may age in-place with their sons and daughters living many miles away.

Such contentions are underpinned by various assumptions. As has already been discussed, the presence of kin encourages people to move to specific locales. Retirement migration does not necessarily involve moving away from children. Similarly, high proportions of younger people moving away do not necessarily mean that people will not have other family living nearby. Siblings may remain resident in the locale, in which case, from the perspective of the older parent, there will continue to be younger generations residing in close proximity. A more detailed analysis is needed of individuals within the context of locales that have different degrees of migration amongst their populations. For this reason, the survey of older service users has been conducted.

A purposive sampling approach was taken to selecting the areas, in order that at least two of the locales were in locations that would keep travel within available resources so as to make feasible in-person interviewing. Another criteria was that there should be service providers amenable to the research I was proposing. After contacting various service providers from a list provided by Age Concern Scotland, and negotiating access to their groups, three locales were arrived at, (1) a *retirement locale*, situated in an area with CATTs defined in the previous chapter as being Retirement Areas for both 1981-91 and 1991-2001, (2) a *rural locale*, located in the highest quintile for younger people's out-migration (later analysis using 2001 Census data when it became available demonstrated that it had also become a Retirement Area during the 1990s), and (3) an *urban locale*, including zones in the two lower quintiles for younger people out-migration, not in any Retirement Area, and thus a place of much lower population mobility in comparison to the other two locales selected. As discussed earlier in the thesis, for reasons of protecting

confidentiality I do not name where these locales are. Instead, I will give a brief overview of the geographical situation of these three locales.

The *retirement locale* reflects many of the attributes of other Retirement Areas identified earlier in this chapter. It is predominantly centred on several seaside towns, each of which has several thousand inhabitants, and is located within an hour's drive of the Central Belt. The main town is a major service centre with health care facilities, including sheltered housing, nursing homes and a community hospital. With regards to income deprivation, 33 percent of respondents to the survey are receiving pension credits.

The *rural locale* is situated within Highland Region and also has much in common with other areas identified earlier as having high levels of younger person out-migration. The postcode sector within which all respondents reside consists of scattered crofting communities, with the nearest large town involving a considerable journey. Public transport is limited to infrequent bus services. There are villages within which services are found, including the lunch clubs and day care centre that were used as sites for primary data collection. One of these communities has sheltered housing, though other forms of institutional care require relocating to the nearest large towns. A total of 29 percent of the survey participants receive pension credits, a high and not dissimilar proportion to the *retirement locale*.

The *urban area* draws on lunch clubs and day-care-centres located in the suburbs of a large Central Belt conurbation. The estates where respondents reside vary from affluent to more deprived areas. The proportion receiving income support, at 58 percent, is considerably higher than in either the *rural* or *retirement* locales. Completed family size is, on average, also higher, being 2.70 compared to 1.81 and 2.10 for the *rural* and *retirement* locales respectively.

In summary, the *urban locale* includes respondents generally living with higher levels of deprivation than the other two areas. The *rural locale* includes people living in much more geographically isolated situations, considerable distances (by United Kingdom standards) from major centres of population. The *retirement locale* respondents live in small towns with services nearby. All three locales have a high

proportion of older people who are economically dependent on state income subsidies, namely the pension credit.

Section 5.3.2. Individuals experience of migration

Having given an overview of these three case study locales, I now move on to consider the contrasting spatial geographies of the intergenerational families of older residents. I begin by analysing the data regarding migration of the respondents themselves, and those of their children, considering whether the individual experiences reflect what would be expected given the national scale analysis on which selection of locales has been based. The data is analysed to establish, as the secondary data analysis suggests, firstly, whether the respondents from the *retirement locale* have lived in their area for relatively short periods of time and, secondly, if the *rural* respondents tend to have family who have moved away and now live some distance from them. Not only do these questions illustrate how individual lives reflect larger spatial structures, but also demonstrate that the survey respondents provide a means by which contrasting local geographies can be investigated.

Table 5-3 shows that residents of the *urban locale* have lived there considerably longer than those living in the other two areas. They have lived in the same geographic area for a mean duration of 69 years, a longer period than those from the *retirement locale*, with a mean of 42 years, and the *rural area* with a mean of 50 years. A Kruskal-Wallis test demonstrates that the difference is statistically significant (Chi-Square=12.80, $p < 0.01$). The relative residential stability of the participants from the *urban locale*, and comparatively short duration of residence of those living in the *retirement locale* suggests that those using services, and who have thus been captured in the survey do indeed reflect the findings discussed earlier in this chapter. This said, the 42 years of residence of *retirement locale* residents still represents a long period of time. This is the result of both long-term residents as well as retirement migrants being included, a point I will return to later in this section. However, in general, those from the urban locale have life histories indicating low geographic mobility, whilst a higher proportion of respondents from the retirement locale have been, conversely, less tied to their current place of residence.

Table 5-3 Overview of survey respondents' experience of migration

Areas	length of residence in area (years) ¹			Respondents who moved to area since aged 55 years or over ¹	Long-term residents with no child living within an hour's travelling time ²
	Average	Range	Standard Deviation		
All respondents	55.55	96	29.79	36 (27.7 percent of all survey respondents)	15 (19.2 percent of all long-term residents in survey)
Retirement	42.42	94	32.36	25 (48.1 percent)	7 (29.2 percent of retirement locale long-term residents)
Rural	50.24	90	32.48	8 (38.1 percent)	2 (25.0 percent of rural locale long-term residents)
Urban	69.49	86	18.57	3 (5.3 percent)	6 (13.0 percent of urban locale long-term residents)

1 Includes all 130 participants.

2 Only includes those who have resided in current area from an age no more than 55 years and who have at least one living child.

Findings earlier in the chapter regarding contrasts between national and local scales are echoed in the survey. The average length of residence for the sample taken as a whole is 55.55 years, more than 10 years greater than *retirement* service users, and nearly 15 years less than people living in the *urban locale*. Variation between

locales and an aggregated average for the three areas serves as a parallel to consideration of national data limitations, where geographic mobility does not affect all places equally. Communities' experiences of the consequences of migration also differ, even within the same national context.

Similarly, individuals do not all conform to the general situation of their locale's population. There are people in all three areas who have either resided in the same area all their lives or moved in recently, underlining the complexities of migration and the degree to which typologies represent generalisations. Table 5-3 includes figures showing that twenty-five people in the *Retirement locale* have moved there since the age of 55 years, representing 48.1 percent of those participants residing there. This compares to only 3 respondents in the *urban area* who could be classified as retirement migrants, 5.3 percent of the number in the survey sample for that locale. However, the *rural area* has 8 respondents who have moved in later life into the area, 38.1 percent of its participants, a relatively large proportion, and consistent with the analysis of data for the 2001 Census that suggested the locale was becoming popular with people around the age of retirement.

The situation is more complex when the out-migration of younger people is considered. Take those respondents who have lived in the same locale since before the age of 55 years, the cut-off point for being considered a 'retirement migrant'. Of the longer-term residents, those in the *rural locale* might be expected to have children living further away compared to similarly classified long-term residents in either of the other two locales, particularly in comparison to the *urban locale*. However, 5 people (38.5 percent) of those who participated in the survey from the *rural locale* do not have any living children; a considerably higher proportion than either the *retirement* (8 people, 14.8 percent) or *urban locale* (3 people, 11.1 percent). This higher proportion of childlessness is not the result of mortality as examination of the dataset shows that none of the *rural locale* residents who are childless have had children in the past. Other possibilities include that the spatial structures affecting informal support in the *rural locale* are such that those without children are more likely to use formal services, or that childlessness is more common amongst older residents in this particular locale. This high proportion has implications for the

analysis.

The higher level of childlessness in the *rural locale* leaves too few respondents to draw firm conclusions regarding the effects of out-migration of younger people for older people remaining in the *rural locale*. What can be said with regard to longer-term residents is that 2 people (25.0 percent) in the *rural area* do not have a child within an hour's travelling time, compared to 6 (13.0 percent) in the *urban area*, and 7 (29.2 percent) in the *Retirement Area*. Whilst numbers are not sufficient for a meaningful statistical analysis of the situation of longer-term residents, the higher proportions in the two non-urban locales are nonetheless suggestive of geographically contrasting family residential geographies resulting from out-migration of younger adults.

In summary, I have shown there to be a high proportion of people in the *retirement locale* who in-migrated after the age of 55 years, as imputation from secondary data analysis would suggest. Additionally, a high proportion of those in the *rural* relative to *urban locale* have also relocated in later life and thus can be considered to be retirement migrants. Further, I have also considered the degree to which the *rural locale* reflects what would be expected from the analysis of moves made by 16-29 year old people at the national scale I presented earlier in the chapter. The results of the analysis provides far less clear-cut conclusions regarding out-migration of younger people from the *rural locale* because of a high proportion of childlessness, possibly the result of the method of sample collation. Analysis of the survey data in later sections and chapters must therefore take into account a complex picture of migration. Nonetheless, the respondents' experiences of migration provide a reasonable basis on which to investigate the implications of population mobility for older people.

Section 5.3.3. Proximity of survey respondents to their children

In the sections that follow, I look at intergenerational residential proximity, from co-residence to living far from children, and why such separation does or does not exist. Other studies consistently show that, even in contemporary times and in higher income countries, the majority of people in later life continue to live in close

proximity to at least one of their children (Lin and Rogerson 1995; Warnes et al. 1985a). Most of the respondents to the survey also reside relatively close to at least one child. Of the 110 who have at least one living son or daughter, 74 (67 percent) are no more than half-an-hour's travelling time away. The intergenerational family thus continues to have a local geographical basis for most participants.

Constant factors in much of the literature on informal care and support are the effects of living arrangements (for example Glaser and Grundy 1998; Walter-Girtzburg et al. 2005), and distance resided from kin (for example Litwak and Kulis 1987; Warnes et al. 1985a). Both are the products of interactions between the migration of younger and older generations over their life-courses, with moves either increasing or reducing proximity to one another. Given that the three locales that form the case studies of this thesis have such contrasting migration patterns, it might be expected that difference between them will also be evident in the residential proximities of their older populations and their adult children.

Moves made at one point in time cannot take into account all eventualities. The decision to move a long distance around retirement is more often than not taken by people who are in good health and married (Litwak and Longino 1987). One of the interviewees who had herself moved with her husband when he retired, is now widowed, and commented on the decision making process that led to their relocating out from the Central Belt to the *retirement locale*.

Iain: Did that worry you when you first moved over here, that you were moving a distance from your children?

Betty: No, because we were very active, and eh we could come up any time.

There was no sense that Betty regrets making such a move, and she has developed close friendships in the community in which she now lives. Furthermore, her daughter visits her every couple of weeks or so, and has some intentions to move to live with her mother when she herself retires. Nonetheless, that Betty did not reflect on what would happen years later indicates that informal support in the future may not figure in the minds of people when considering relocating.

There is also the issue of younger people moving away, and what happens when, at a later date, they either lose a mother or father, or one of their parent's health deteriorates. Karen, who works to support older people in the *rural locale* reflected on the situation she and her siblings found themselves in when her mother's health declined. She, along with her brothers and sisters, were living in the South of Scotland, some several hours journey away at that point in time.

Iain: She was very keen to remain in [*the rural locale*]?

Karen: Till the day she died Iain, that's what she would ask, 'when am I going home?' And we used to say to her, 'oh the weather's better mum, and we did that until the day she died...which is horrible...and that's all she wanted to do was come home to [*the rural locale*], but she couldn't...unless one of us came up to live with her.

Spatial structures clearly constrain the ability of younger adults to remain in the place they grew up. In the case of Karen and her siblings, migration and the resulting separation between themselves and their mother created a situation where participation in the care and support was impossible without one or other party relocating. It led to their mother having to move away from the area where she had lived all her life in order to receive assistance from her children. The alternative would have been residential care, which in itself would necessitate moving to a town some 60 miles distant. There are occasions when agents cannot overcome the overwhelming implications of social and economic structures. For Karen's mother, health and bereavement, both functions of the latter stages of the life-course, reduced the ability to choose where to live.

Such occurrences can happen anywhere. However, the spatial nature of socio-economic structures is such that differences exist between local scale populations in different parts of Scotland, making such situations of residential separation more likely in some parts of the country than others. Figure 5.8 shows remarkable similarities. Despite the contrasting migration rates that leads to their selection for this stage of primary data collection, the geography of intergenerational living arrangements have much in common. For example, very similar proportions of

respondents from the three locales have at least one child living within 30 minutes travelling time (including those who co-reside).

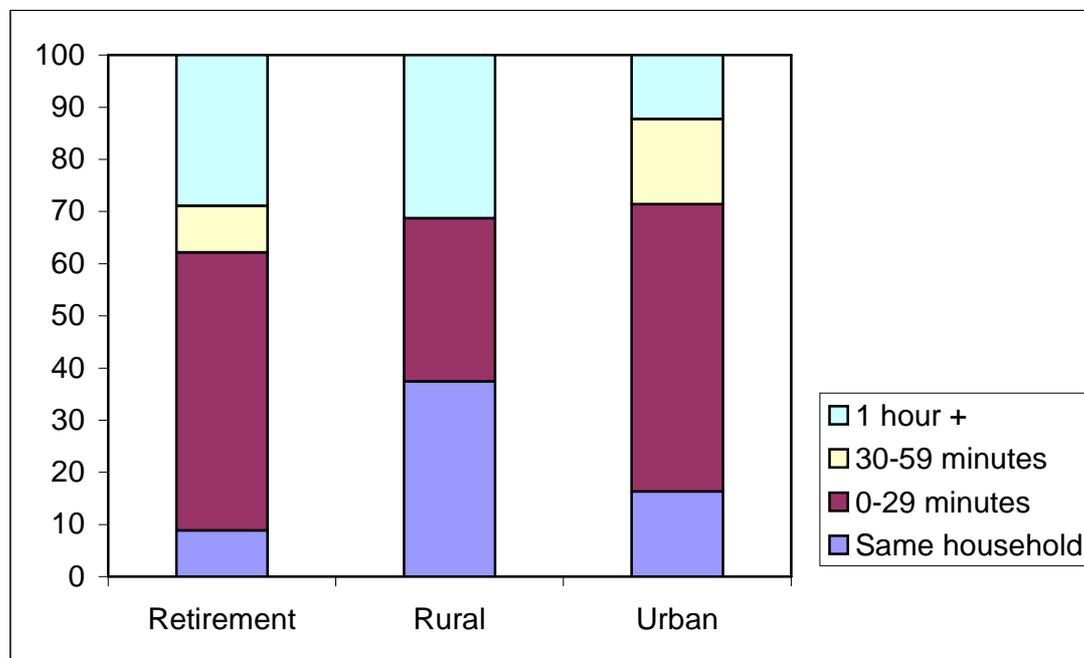


Figure 5.8 Geography of living arrangements in three case study locales for all respondents who have at least one living child (n=110).

Nonetheless, there are also significant differences between the locales shown in Figure 5.8. The *rural locale* has a significantly higher proportion of respondents living in the same household as their children in comparison to the other two (Pearson chi-square=7.06, $p=0.03$)⁶. Conversely, none of the respondents are living in the 30-59 minute travelling time from their nearest child. Either they live with, very close to, or at a considerable distance from their nearest child. Slightly over 30 percent of the respondents have no children within an hour's journey, a level more than twice that of the *urban area*, and fractionally more than in the *retirement locale*.

Respondents who reside in the *urban area* tend to be living in much closer proximity to adult children than is the case for either the *rural* or *retirement locales*, with only a little over 10 percent not having any child within an hour's travelling time, compared

⁶ Tables for statistical tests are shown in Appendix F

to approximately 30 percent for both of the other two locales. These differences are not statistically significant (Pearson chi-square=4.79, p=0.09). However, a significant difference does exist where the two non-urban locales, the *rural* and *retirement*, are combined and contrasted to the *urban* (Pearson chi-square=4.75, p=0.03).

The two notable differences between the locales in terms of intergenerational living arrangements are proportions co-residing, and those who have at least one living child within at least an hour's travelling time. The reasons why differences exist between locales are investigated in the next two sub-sections, beginning with a more detailed consideration of why so many people in the *rural locale* live with one of their adult children.

Section 5.3.3.1. Geography of co-residence

My emphasis on the need to incorporate place into demographic and gerontological studies is clearly demonstrated by the high proportion of respondents in the *rural locale* who reside with children. Demographers frequently site co-residence as a marker of intergenerational support (Kuijsten 1999), with declining proportions of national populations sharing residence with a child often being seen as indicative of greater individualism and thus of the Second Demographic Transition (Van de Kaa 1987).

Results of three logistic regression models developed to analyse differences between the three locales are shown in Table 5-4. Tests for collinearity for these models are shown in appendix F. The first is a basic model that reiterates the significant difference between places, and reveals that in particular the significant contrast is between the *rural* and *retirement* locales (odds ratio=0.16, p=0.01), indicating the higher propensity of respondents from the former to reside with children. The difference between the *rural* and *urban* locales is not significant at this stage of the analysis (p=0.08). This basic model shows the actual situation of the populations in these locales without controlling for factors pertaining to their composition.

The second model in Table 5-4 adds personal and social characteristics of respondents to see to what extent these explain the difference between *rural* and *urban* locales. Doing so allows analysis as to whether propensity to live with a child is the same

for all individuals of similar socio-economic and demographic characteristics. They are not. Indeed the difference becomes slightly more significant ($p=0.01$). Additionally, once the composition of the groups are taken into account, the difference between *rural* and *urban* locales also becomes significant, with an odds ratio showing that respondents in the former are more likely to reside with children once the socio-economic composition of the population is taken into account (odds ratio=0.14, $p=0.01$). The higher proportion of participants drawn from lower occupational categories would, all else being equal, produce a lower percentage of people living with children compared to those in higher groups (Grundy and Harrop 1992). Yet the reality is that more of the older individuals in the *rural locale* compared to both *retirement and urban* locales live with their children than would be expected.

There are various factors that might explain the continuing differences between locales that are not explained by the composition of the populations. Geographical structures are leading to different residential choices being made by respondents as a result of where they live. Contrasting housing markets, with housing either more suitable to sharing in the *retirement or rural* locales might facilitate intergenerational co-residence. Alternatively, a lack of suitable properties for younger generations might make sharing a more attractive option for adult children. Or the greater proximity of residences evident in the *urban locale* might make sharing a house less necessary, with support between the two generations being possible without the need to move house. Local employment structures may also influence differences, as has been demonstrated to occur in North Wales (Wenger and Burholt 2001). Further research would be needed to move these suggestions beyond conjecture in the context of these specific Scottish locales.

Table 5-4 Logistic regression models exploring co-residence^{1 2}

		Odds Ratio	Sig.	-2LL
Model 1	Rural			91.78
	Retirement	0.16	0.01	
	Urban	0.33	0.08	
	Constant	0.60	0.32	
<hr/>				
Model 2	Rural			81.24
	Retirement	0.13	0.01	
	Urban	0.14	0.01	
	Occupational Categories 5-8			
	Occupational Categories 1-4	0.31	0.09	
	Health bad or very bad			
	Health fair, good or very good	4.93	0.10	
	Number of living children	1.55	0.03	
	Married			
	Not married	1.44	0.64	
	Female			
	Male	3.12	0.13	
	Constant	0.06	0.05	
	<hr/>			
Model 3	Rural			76.16
	Retirement	0.12	0.02	
	Urban	0.14	0.03	
	Occupational Categories 5-8			
	Occupational Categories 1-4	0.16	0.04	
	Health bad or very bad			
	Health fair, good or very good	6.07	0.08	
	Number of living children	1.69	0.02	
	Married			
	Not married	2.16	0.35	
	Female			
	Male	3.35	0.12	
	Years lived in area	0.96	0.03	
	Children brought up outside local area			
	Children brought up locally	10.27	0.05	
	Constant	0.06	0.09	

¹ Outcome variable: lives with child compared to does not live with child.

² Models only include respondents who have at least one living child (n=110).

The variables added to model 2 all theoretically have the potential to influence the opportunities available to respondents to co-reside with a child. After being added using the 'ENTER' facility in SPSS, thus controlling for each of the other additional variables, occupational categories, a marker of socio-economic situation through the life-course, remain non-significant ($p=0.09$). Respondents in the survey are no more likely to reside with children if they are from a higher or lower socio-economic group. Others have found evidence to suggest that socio-economic advantage is associated with greater propensity to share residence with children (Grundy and Harrop 1992). Opportunities to co-reside may be greater for those who are wealthier or have larger houses, resulting from higher wages over their life times. However, amongst lower social classes, there may be greater need to co-reside for reasons of ill-health or after widowhood (Arber et al. 1988), both of which are more likely amongst those from lower classes. The two influences may be counteracting one another, such that no significant differences are evident.

Health is also non-significant ($p=0.10$). It may be expected that an association would exist, given the evidence demonstrating that having a limiting long-term illness is one reason for co-residing (Al-Hamad et al. 1997). Once again, however, there are a variety of reasons for forming a single intergenerational household, many of which demonstrate advantage to the adult children (Grundy and Harrop 1992). As with the measure of occupational groups, one may be countering the other, such that neither is discernable. Additionally, the self-reported measure of health will reflect psychological aspects that go beyond disease processes. Thus, co-residing may provide a sense of well-being despite poorer health. Wenger *et al.* (1995), for example, show that the presence of a potential carer is an important influence in having higher morale in later life. However, using other measures, including Activities of Daily Living, Instrumental Activities of Daily Living, and presence of a limiting long-term illness prove similarly non-significant when correlated with co-residence, as once again shown in appendix F.

The number of living children is not significantly associated with co-residence. However, it becomes significant ($p=0.03$) once other factors are taken into account, as revealed in model 2. Other research suggests that the number of children a person has is not an important factor; having more than one child does not increase the

opportunities for living with a child (Timaeus 1986). However, once other factors are controlled, completed family size is an important factor. Given trends in fertility and the links between care giving and co-residence, this association has potentially negative implications for informal assistance.

One surprising finding is that, for the respondents to this survey, marital status is not significant ($p=0.64$). Evidence from other studies indicate that widowhood will increase the likelihood of co-residing with a child (Al-Hamad et al. 1997). The lack of significant association here may once more be two effects cancelling one another out. There will be situations where a son or daughter lives with the older person, but not for the benefit of their parent(s), but rather for their own needs (Grundy and Harrop 1992). Inclusion of these occasions along with those where it is for the benefit a person who has been widowed may cancel one another out. Indeed, one interviewee who began to co-reside with a son shortly after losing her husband talked of how, whilst ostensibly it was for her benefit, there were even within her own individual situation mutual aspects to the arrangement.

Jan: Alisdair said, mum, is it alright if I come back and stay with you...I didn't assume that any of my sons would give up their own life style and come back to live with me.'

Iain: Do you think that it is as much of a benefit to himself to be living in the same house?

Jan: I think, I really think so.

Co-residence may involve particular needs of either the younger or the older generation. Even in such cases, however, there are two-way aspects, and reciprocity is central to the living arrangement. Jan's residential status is complicated. She spends her summer months living in a house in the *rural locale* whilst the winter months are spent with her son in the South of Scotland. I will discuss her situation again later in the chapter.

The next model in Table 5-4 (Model 3) adds migration variables, namely the number of years the respondents have lived in the area, and whether or not they brought their

children up in the current locale of residence. On this occasion, the number of years a person has resided in the area is significant (odds ratio=0.96, $p=0.03$), suggesting that each additional year resided in the locale reduces the likelihood of sharing a residence. This finding is apparently contradictory to those of Al-Hamad *et al* (1997), whose analysis of national level data suggests that distance is not an obstacle to migration to join the household of a child. However, the findings of their study, and the significance of the length of time resided in the locale in the third model are consistent with one another. The Al-Hamad *et al* study involves moves made where limiting long-term illness or widowhood brings about a need on the part of the older person. Both the health and marital status variables in the third model are insignificant. Thus, many of the households where there are children residing with their older parents may be the result of need on the part of the younger generation, where near proximity or residential stability on the part of the mother or father may facilitate co-residence, or even where the son or daughter has never left to form their own household.

The only notable difference from the second model as regards the other variables is that occupational group becomes significant ($p=0.04$), with an odds ratio of 0.16. This finding suggests that when the length of time lived in a locale is held constant, those in higher social categories are less likely to co-reside with adult children. Additional resources may indeed therefore be facilitating older individuals to reside on their own. Health is also controlled in Model 3, so differences in well-being cannot explain the contrast. Declining co-residence may have implicit a decline in the availability of intergenerational support. However, to a large extent this is a choice being made by older people. As such, greater residential independence is not necessarily the negative trend that ideas such as the Second Demographic Transition, or decline of social capital thesis might suggest.

With both migration and composition of the populations taken into account there still remains a significant difference between the *rural locale* and the *retirement* (odds ratio=0.12, $p=0.02$), and the *urban* (odds ratio=0.13, $p=0.03$) locales. The odds ratios demonstrate that respondents residing in the *rural locale* remain much more likely to reside with an adult child than those in the other two locales. That the difference is not explained by the variables added to the model indicates that factors not

included in the model are influential. Unmeasured aspects that could explain the differences include differences in normative values, or socio-economic factors, such as the availability of housing, or local housing structures. Such issues open questions for future research. However, the main point of note from my analysis is that place matters.

The importance of time to co-residence is suggested by the significance of social class in Table 5-4. The same will also be seen to be the case where I come to consider intergenerational proximity later in this chapter. For both of these aspects of living arrangements the association with occupational classification is significant. However, where the receipt of pension credits is used instead as the measure, no statistical significance is found for either group of models. The current economic situation of a respondent has no relationship to the distance they reside from their families. Intergenerational residential geographies are an evolving process, with decisions and events years before leading to the present situation that is demonstrated by cross-sectional analysis, such as has been discussed earlier in this chapter.

Section 5.3.3.2. Non-co-resident geographies

Co-residence has a long history of being used as a proxy for intergenerational support (Kuijsten 1999). However, with declining proportions of people living in intergenerational households, the need to consider geographical proximity where people are not co-resident with children becomes more important, especially in the context of declining fertility mentioned in the introduction to this chapter. I have already shown that there is a significant difference between the residents of the *urban* and *non-urban* locales. The reasons why such differences exist are the subject of the next part of the analysis.

Another sequence of logistic regression models is shown in Table 5-5. Model 1 simply details the significant difference between the areas, with the *urban* contrasted to the *non-urban locale*, the *retirement* and *rural* locales being used together given their respondents' similar propensities to reside within an hour of a child. An odds ratio of 0.33, which is statistically significant ($p=0.03$), indicates that people living in the combined *non-urban locales* are considerably less likely to reside more than an

hour from their nearest daughter or son. The question arises as to why such a difference exists, for example whether the proportion of particular social groups, or the number of surviving children people have. I thus use logistic regression models to see if significant differences remain once particular attributes of respondents are taken into account.

The second model thus includes factors that other studies show to be significantly associated with the intergenerational proximity between older people and their adult children, namely social class, health (measured using the self assessed General Health Question), number of children, marital status and gender. Once these are included no significant difference remains between the locales ($p=0.19$). The composition of the two groups of participants thus explains why such a high proportion of the *urban* population reside within at most an hour's journey of at least one of their adult children. Once the differences in the proportions of people in different socio-economic groups, number of living children, and so forth, are taken into account, the proportion of respondents with no children residing within an hour does not differ from one place to another. The -2 Log Likelihood figure declines from 110.444 in the first of the models shown to 85.244 in the second, the decline demonstrating that incorporating the additional variables leads to a model more effectively predicting whether or not respondents live within 60 minute travelling distance of at least one of their children.

Table 5-5 Logistic regression model of intergenerational residential proximity^{1, 2}

		Odds ratio	Sig.	-2LL
Model 1	Urban			110.44
	Non-urban	0.33	0.03	
	Constant	7.17	0.00	
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Model 2	Urban			85.24
	Non-urban	0.44	0.19	
	Occupational categories 1-4			
	Occupational categories 5-8	5.85	0.00	
	Health bad or very bad			
	Health fair, good or very good	0.35	0.21	
	Number of living children	3.41	0.00	
	Married			
	Not married	1.40	0.63	
	Female			
	Male	1.93	0.41	
Constant	0.32	0.38		
<hr/>				
Model 3	Urban			83.12
	Non-urban	0.37	0.18	
	Occupational categories 1-4			
	Occupational categories 5-8	8.38	0.00	
	Health bad or very bad			
	Health fair, good or very good	0.27	0.14	
	Number of living children	3.83	0.00	
	Married			
	Not married	1.94	0.38	
	Female			
	Male	1.83	0.46	
	Years lived in area	0.97	0.16	
	Child(ren) brought up elsewhere			
Child(ren) brought up locally	3.12	0.26		
Constant	0.41	0.54		

¹ Outcome variable is 'lives within an hour of at least one adult child' which is contrasted with 'does not live within an hour of at least one living child'.

² Includes all respondents who have at least one living child (n=110).

Not surprisingly given its association with geographic mobility, socio-economic status proves to be highly predictive of living within an hour of an adult child. Those in classes 5 to 8 of the Registrar General's occupational classification are more likely to live within an hour's travelling time of a son or daughter than those in classes 1-4 (Odds ratio 5.85, $p < 0.01$), similar to the findings of Warnes *et al* (1985a) for older married couples in English locales. The combination of migrations that both younger and older generations have made through their life-courses, which is associated with their position in society, increases the likelihood that those in higher occupational social groups will live further from their adult children than those in lower social groups.

Additionally, even with social class controlled, the number of living children a respondent has remains highly significant, increasing the likelihood of residing near to at least one son or daughter (odds ratio=3.41, $p < 0.01$). Again, this finding matches expectations given findings from research done at a national scale in the context of the United States (Lin and Rogerson 1995). Such a finding matches expectations simply by virtue that having more children in itself increases the chances that at least one child will remain in the same locale as their parent(s). However, it also raises questions as to whether low levels of fertility in countries such as Scotland have future implications for the availability and contribution of children to informal care and support.

The lack of statistical significance for marital status ($p=0.63$) is surprising. The means by which respondents were recruited to the study may explain such a finding, as the presence of a spouse will in many cases represent a co-resident source of support, and thus a lower propensity to use the services from which participants are drawn. Those who are married are thus less likely to be included in the sample. Another explanation is that the numbers who move to be nearer a child after bereavement are too few to be picked up in a survey such as the one I have conducted to an extent significant enough to demonstrate statistical significance. The Al-Hamad *et al.* study uses national data, and contains several thousand people; in my survey the numbers who are shown to move in response to such an event as losing a husband or wife are small.

A person's self-rated health status is, once more, not significant ($p=0.21$), and neither are other health measures such as the Activities of Daily Living, or presence of a limiting long-term illness. Such a finding does not necessarily mean that health is not an important factor. Individuals, as active agents, may well have moved in *anticipation* of declining health, such as found to be the case by Meyer and Cromley (1989). Hence, agents may have moved to be near to children for health related reasons, but are nonetheless still in good health. It may be that they do not experience ill-health in coming years, and enjoy life to the full living near to their children, an *unintended consequence* of their earlier action. In addition, some respondents have moved to be nearer children with the well-being of their spouse in mind, as indicated by one person who took part in an in-depth interview, a woman who had moved with her husband to be near her daughter.

Ann: ...I thought, if something does happen to me, at least he's got his daughter there...

There are many reasons for moving to live nearer children, the ability to facilitate receiving informal support is only one. Indeed, in Ann's case, there were other motivations, her husband's needs being but one. What the model demonstrates is that health is, in itself, not a major rationale for respondents residing in close geographic proximity to their sons or daughters.

Table 5-6 Logistic regression model of intergenerational residential proximity with addition of interaction between years lived in area and place child brought up^{1,2}

		Odds ratio	Sig.	-2LL
Model 4	Urban			74.51
	Non-urban	0.47	0.31	
	Occupational categories 1-4			
	Occupational categories 5-8	5.66	0.02	
	Health bad or very bad			
	Health fair, good or very good	0.38	0.33	
	Number of living children	4.73	0.00	
	Married			
	Not married	2.79	0.20	
	Female			
	Male	2.01	0.43	
	Years lived in area	0.82	0.01	
	Child(ren) brought up elsewhere			
	Child(ren) brought up locally	0.08	0.14	
	Interaction between years lived in area and place child brought up	1.21	0.02	
	Constant	2.21	0.65	

¹ Outcome variable is 'lives within an hour of at least one adult child' which is contrasted with 'does not live within an hour of at least one living child'.

² Includes all respondents who have at least one living child (n=110).

Model 3 adds a couple of variables that explore the effects of migration from two different angles. The first of these represents the years lived in the area, the second being a binary variable with those who brought their children up outside of the locale being compared to those who state they raised their family locally. Neither proves to be significant, a finding that is not surprising given that social class is controlled. However, the variables do not remain non-significant once an interaction term is added, as is shown in Model 4 in Table 5-6.

The coding of the variables provides a comparison group of people who have brought

up their children elsewhere and only lived for a short duration in their current locale, in other words those who have migrated in later life. The resulting model shows that there is a significant difference between this group and those who also brought up their children elsewhere but have lived in the area for a longer time period ($p=0.01$). The odds ratio indicates that the longer term residents are less likely to live within an hour of at least one child (odds ratio=0.82). The finding suggests that moving after raising a family, perhaps around the age of retirement, is likely to be done without the intention of reducing geographical proximity with sons or daughters.

The interaction term itself is also significant ($p=0.02$). Compared to those who have brought up their family elsewhere and lived a short duration in their present locale of residence, people who raised their family locally and have lived for a long duration in the same geographic area, are more likely to live near to children (odds ratio=1.21). Again, the finding suggests that later life migration will be associated with living a distance away from the younger generation.

Lastly, I will briefly discuss the last of the terms affected by the inclusion of the interaction variable, the contrast of the comparison group to those who have lived for a short time in the locale but also raised their children locally. This is likely to be an unusual scenario and is suggestive of return migration. The odds ratio does not prove to be statistically significant ($p=0.14$) suggesting that such situations will not involve lesser or greater likelihoods of being geographically distant from an adult child. Whether such return moves involve migrating back to live near children, or if children move later to be near their parent(s), cannot be discerned. A combination of the two may well be occurring. Furthermore, the relatively small numbers who are involved may also increase the possibility of actual significant difference being overlooked. Further research into such migrations would be of use to clarifying these issues.

The difference between the locales remains insignificant ($p=0.31$), as was the case after the first stage of adding personal and social information in model 2. However, even though the composition of respondents drawn from each locale explains differences in intergenerational family proximities, place remains important. Firstly, the direct experience of respondents is that higher proportions live further from their adult children in the *non-urban* locales than in the *urban locale*. Explanation is

found in the composition, though this is itself partly the result of migration over time, given the greater propensity of those in higher socio-economic groups to be more geographically mobile. Indeed, drawing distinction between sociological and geographical is difficult. The social is spatial, just as the spatial is social, a clear demonstration of Soja's ideas regarding the *trialectic*. Additionally, from the point of view of the individual, place is also important, given their temporal life histories of migration. For individuals who have lived their lives in the same locality, there is a greater likelihood that they will have family nearby. For others who have had greater mobility, the need for family in later life, for some, draws them back to be closer to family. Thus society, notably social class, space, in particular where a person lives, and time, their life-courses, all come together to influence the proximities of families at scales of the individual and the locality.

Section 5.3.4. Complex residential geographies

The in-depth interviews not only give insights into the thought processes of agency in deciding where to move, and the role of family in such decisions, but also highlight how variables used in quantitative analysis can overly simplify what are in reality much more complex issues. Especially in light of potential changes that would result from a Second Demographic Transition, with increasing individualism and thus diversity, people's living arrangements are likely to become ever more diverse.

The complexity of living arrangements and their temporal dimension is highlighted in a couple of the in-depth interviews where older people change their residential location on a regular basis, having residential independence for several months, and relocating to be with their children for the rest of the year. Take for example something as simple as defining in which locale a person resides. One respondent, Jan, already referred to with regard to the reciprocal nature of the living arrangements she has with her son during winter months, discusses how she moves between locales with the seasons.

Jan: ...we did plan to come and live here, not for the full twelve months, perhaps for nine months of the year, and then my husband died very

unexpectedly, and er...so I, we hadn't sold the house in Glasgow fortunately, so I remained in [a city in the South of Scotland]. This house now belongs to my oldest son, but I can come up for my four months from May until September, and that's it.

She is not alone in making such seasonal moves. A service provider working in the *rural locale* makes the following observation.

Karen: There's a lady...goes and lives with her daughter [further south]...she'll go, I say she's like the swallows, she'll come back in the Spring, she comes back, she's a local lady.

In the survey data, Jan has been included as residing alone in the *rural locale*, as this was the response that she herself provided. Yet she might just as equally have been included in an urban locale living with an adult child. Living arrangements are not necessarily clear-cut and permanent. Social gerontological surveys may need to take into account such flexibility in living arrangements. In addition, Jan's situation is evidence that the theoretical standpoint provided by the concept of the *extended modifiable family* applies. Although she lives in a situation of isolation, in a remote area a long way from kin, she nonetheless is able to relocate when necessary to live with her son. Similarly, such stories also complicate ideas of the Second Demographic Transition. Jan's life in many ways represents what would be expected in the light of such trends, in terms of her living arrangements and pursuit of her own life. Yet the intergenerational family remains important to her, with the opportunity to co-reside available when she perceives the need to have the psychological support of her kin.

Section 5.4. Conclusion

The *trialectic* of space, society and history interrelate in complex ways to influence intergenerational geography at scales of the individual, locality and nation. Place matters, to an extent where caution must be applied to national trends, and their implications for individuals. Differences exist in the degree to which older people either co-reside or at least live within close proximity to their children. Murphy and Grundy (2003) suggest that coming decades will witness increasing propensities

for older individuals to have surviving children. The degree to which they will be geographical availability in an increasingly mobile society is, however, questionable. That there are and will be contrasts from one part of Scotland to another is beyond doubt.

Decisions taken many years previously, by older individuals or their children, may leave them in situations where they are more isolated than would otherwise have been the case. Where socio-economic or normative structures lead to particularly high rates of out-migration of younger adults, or in-migration of older individuals, the proportion of a local population that may have to contend with such situations will be greater than average. Debates regarding informal support, and what changing fertility or social capital means for older individuals, has thus to take into account that contexts differ from one area to another, comparing say the Central Belt to a Highland community.

Space is structured, such that migration is uneven, with consequences at the local and individual scales. Compared to the other two locales, a greater proportion of respondents in the *urban locale* have children living nearby, and those in the *rural* are more likely to co-reside. Such spatial differences mean that consequences of trends occurring at the national scale potentially have different implications depending on *where* in Scotland a person lives. For example, the significance of the number of living children for co-residence suggests that declining family sizes will have more profound effects in the *rural locale*, as such a large proportion of the surveyed service users currently live with a son or daughter. Similarly, trends towards an increasingly mobile society do not necessarily mean that all families will become more geographically fragmented, or even that all places will equally be affected.

Where geographies of intergenerational residential living arrangements are concerned, place is important. National data, whilst providing a general indication of trends such as the move towards independent residence, do not necessarily reflect the situation within specific locales. The interaction of history, society and space lead to different contexts within which people live their lives, as is evidenced by the high propensity of respondents in the *rural locale* to co-reside, and of those in the *urban locale* to live nearby at least one of their adult children. The contexts of locales within which

people reside thus also differ from one place to another, something that leads to my analysis of the implications for care and support networks that is developed in the coming chapters.

Chapter 6. Informal care and support: society and space

Section 6.1. Introduction

Scotland, like many European countries, is currently in the throws of social and demographic change, notably ageing and increasingly geographically mobile population. Implications have particular resonance for those who need assistance to maintain their residential independence, such as older individuals who have a limiting long-term illness. One potential effect of these contemporary trends is to leave people without kin on whom they can rely for support, either because they do not have children, or because migration leaves them living a distance away. Such occurrences are not evenly spread across the country. Circumstances differ from one part of the country to another, a result of the socio-spatial structuring of the country that has evolved over time. Significantly greater proportions of populations in some parts of the country compared to others do not have younger generations of their family living within close proximity. As a result, the potential for experiencing later life without the help and support of a son or daughter differs depending on where a person lives.

However, people are *reflexive* individuals who are far more than victims of circumstance. They evaluate their situation and act accordingly. There are different options and possibilities to which a person might turn if the need arises, such as friends or neighbours. Qureshi and Walker (1989) suggest a hierarchy of care, where people have an order of preference, turning to other sources where a better option is not available to them. Do older individuals living in locales where kin are less geographically proximate draw on others in their local community to a greater extent? The contention is made that there are limits to the degree that the reciprocal aspects of obligations, duties and expectations extend beyond kinship. The rest of the chapter therefore focuses on the family, in particular the extent to which geographical separation can be overcome in maintaining relationships, the provision of practical assistance, and the effects of the gendered dimensions of informal support. Chapter 7 then returns to the role of the community.

Section 6.2. *Care and support networks*

In this section, I consider the extent to which support from non-family sources can provide a substitute for those who do not have kin immediately available. This is done by firstly considering the extent to which proportions using assistance from children and neighbours differs between the three survey locales. I then consider the extent to which such help is a response to need, and thus whether people are able to turn to either their adult children or neighbours where ill health necessitates help from others.

Figure 6.1 compares assistance from family and neighbours in the three study locales. The measure of assistance includes tasks ranging from getting a lift in a car to washing and dressing. Differences are evident from the graph, although caution should be exercised as factors such as degree of need or availability of children are not controlled. Also, differences in the way data has been collected for assistance from children (for which specific categories were included) and for neighbours (for whom open answers were later coded) may also influence results. The broad classifications I use for Figure 6.1, however, are likely to minimise such differences. The first point of note is the high proportion of the respondents who are receiving informal assistance of one form or another from a non-formal source. Only a minority of the sample, 13.2 percent, appear to receive no support from informal sources, be that children or neighbours. Those who do not have recourse to others are, however, an important group from the point of view of policy, given the potential for social isolation. Thus, whilst the small percentage not receiving any form of help represents a minority they still represent a notable group.

As has been shown in previous chapters, place is important, with summary measures at national level not necessarily reflecting the experiences of populations at more localised scales. Are there geographical differences in proportions not receiving any informal assistance? The *retirement locale* has the highest proportion of respondents who do not receive assistance from informal sources (28.9 percent), which contrast with the *urban locale* (7.0 percent). The difference between the two is statistically

significant (Pearson chi square=9.00, $p<0.01^7$). Such a finding is consistent with those discussed in the previous chapter regarding intergenerational residential proximity, given the high percentages in the *retirement locale* without children nearby.

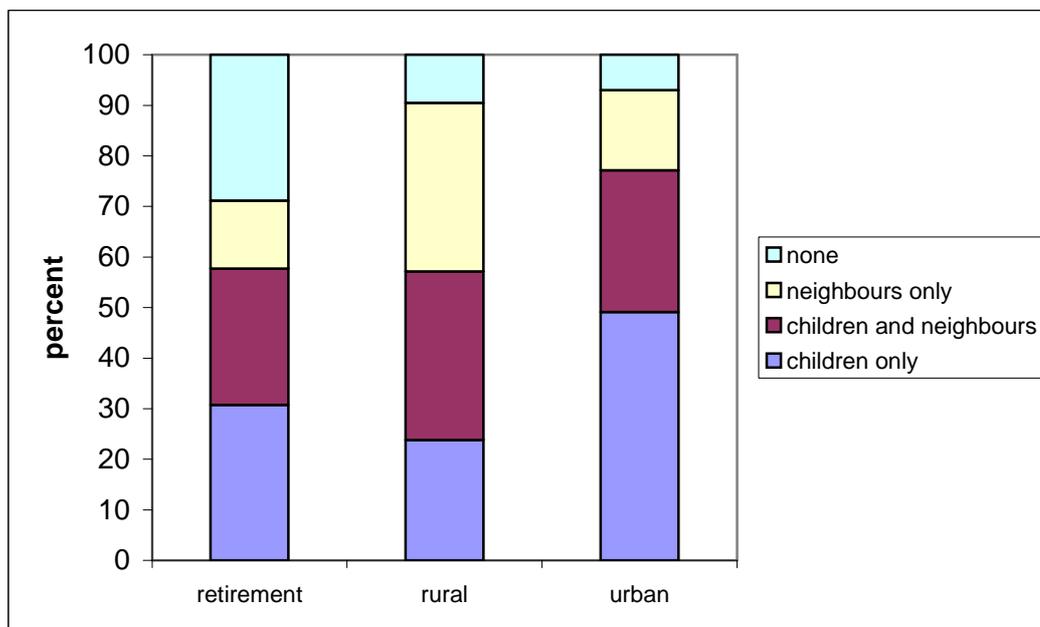


Figure 6.1 Sources of informal support for all survey respondents (n=130).

There are significant differences regarding who is involved in providing support. Contrasting the source of assistance for all three locales also demonstrates a significant difference (Pearson chi-square=16.18, $p=0.01^8$). Respondents' informal support networks therefore differ based on where they reside. Such cross-sectional analysis does not demonstrate why this is so, for example whether it reflects need, or sources of support available. However, it raises questions as to why such a high proportion in the *urban locale* get help from children, or children and neighbours (77.2 percent⁹) compared to either the *rural* (57.1 percent) or *retirement* (57.7 percent) locales, or the high proportion in the *rural locale* who only receive assistance

⁷ Tables for Chi-square analyses are shown in Appendix G.

⁸ Tables shown in appendix G.

⁹ Figures include both those only using children and those who get help from both children and neighbours

from neighbours, or neighbours in conjunction with children (66.7 percent¹⁰) compared to either *retirement* (40.4 percent) or *urban* (43.9 percent).

Such contrasts provide mixed evidence for the idea of substitutability, where a high proportion receiving help from children would be expected to contrast with lower numbers getting help solely from neighbours. Whilst the compositions of support sources in the *rural* and *urban* areas are consistent with such a thesis, the *retirement locale* is not, with low proportions using intergenerational family support, but also exhibiting a small proportion using help from others living locally. The comparison of the three survey locales thus suggests that there is an element of informal support that is substitutable between family and non-family, but that there are limits.

Are there differences in the type of assistance neighbours and children provide? Figure 6.2 compares the assistance provided by children and neighbours, for which the questionnaire allowed more than one activity for which help used to be recorded. For each of these, it is children who provide most assistance, though to differing degrees. Whilst twice as many respondents report getting help with shopping from a child, more than 16 times as many get help with cooking from family compared to that from non-family. Once figures are disaggregated down to specific tasks, statistical analysis is no longer practical. However, these contrasting ratios suggest that the type of task that a person needs help with is likely to influence the degree to which the local community may help in the place of kin. Normative values, those understandings that are generally shared across a society, influence the degree to which the local community will be involved, either because of constraints imposed by recipient or by potential provider. Whilst a person may feel able to turn to a neighbour and ask them to pick up some shopping, they may feel less able to do so for tasks involving greater time commitment or those more personal in nature. Similarly, children may feel less able to rely on people outwith the family for particular activities.

¹⁰ Figures include both those only using neighbours and those who get help from both neighbours and children.

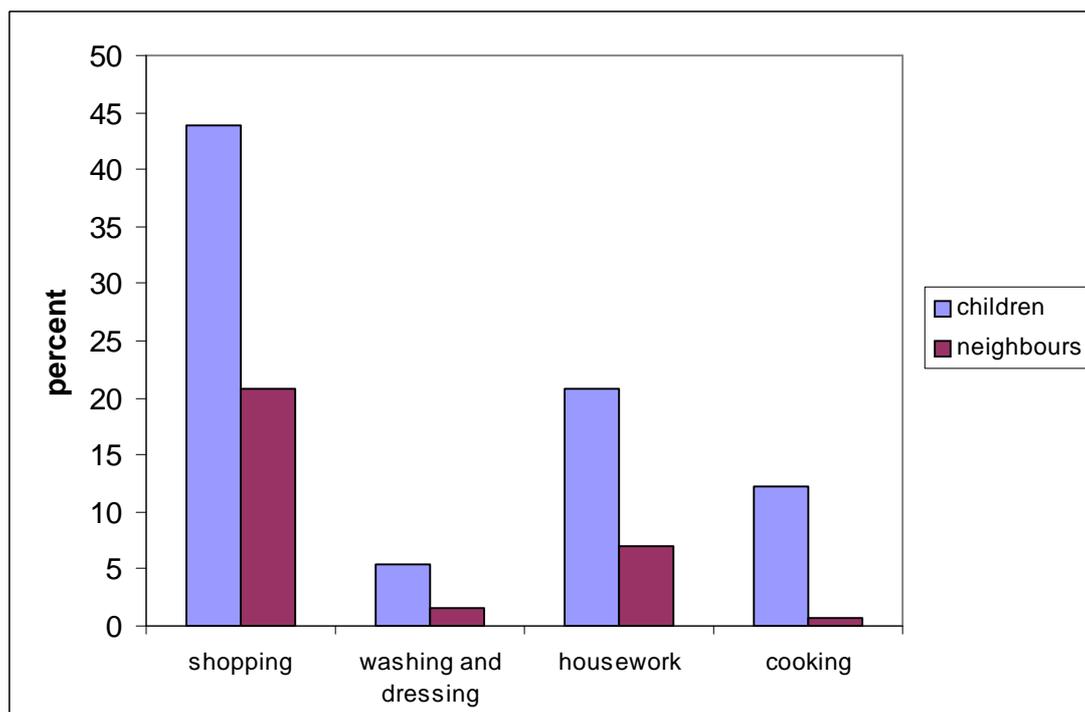


Figure 6.2 Comparison of assistance with specific activities from children and from neighbours (n=130).

Family are particularly important where health is compromised by illness. However, assistance with many activities is not just a response to need, but forms part of social relationships. For example, a friend living nearby might do some shopping simply because they have a car. Helping one another is part of a reciprocal relationships and not just a response to ill health, just as the example of the mother living with her son discussed in the previous chapter did not simply reflect the older person's need. The role of health in receiving assistance, and differences between kin and community, is demonstrated by analysing the association between limiting long-term illness and receipt of help with shopping. Consider those with at least one living child with whom they are not co-resident. For this group, there is a significant relationship between having a limiting long-term illness and getting help with shopping from a child (Pearson chi-square=6.82, $p < 0.01$)¹¹, whereas the relationship between getting help with shopping from neighbours and having a limiting long-term illness is not significant (Pearson chi-square=2.24, $p = 0.13$)¹². Such a difference suggests that

¹¹ See appendix G.

¹² See appendix G.

family step in when need occurs to a greater extent than do friends or those living locally. The help the latter give is much more a part of general neighbourliness.

Nevertheless, neighbours in certain circumstances play an important role where health limits the ability of an individual to manage unaided. That two respondents receive assistance from friends with something as personal as washing and dressing indicates that neighbours on occasions can and do step in to help. Additionally, there are some tasks that individuals get help with from both family and neighbours. Using one source of help does not preclude using another. Of the 52 respondents with children with whom they do not co-reside who get help with shopping, 12 (52 percent) also get help from neighbours. However, where housework is concerned, an activity that involves rather more involvement and mutual trust, of the 16 respondents getting help from a child, none also receive assistance from neighbours. They use one source of assistance or the other. The extent to which people desire to have family support to the exclusion of drawing on the local community differs. Being able to use the help of a son or daughter can preclude turning to others. Hence, where children are able to take the task on, neighbours do not assist. Thus according to the type of task, and the associated normative values of trust and practicalities of time, the role hierarchy of choice between family and community alters.

It is worth noting, however, that assistance from kin or community does not necessarily represent a zero sum situation. One of the service workers interviewees identified the way in which she was alerted to the declining health being experienced by her own mother. At the time, she was living in the Central Belt whilst her mother was living in the *rural locale*, a separation that represents several hours driving.

Karen: I mean, **local people who knew her would say, oh really she's, something's going to have to be done**, she's not safe. Things that she would forget, it was...my mum was quite religious and I mean she went to church twice on a Sunday, and she was quite strict, she was free church, quite strict. And I went down one day and she, she liked the garden, and she's Sunday morning and she was digging in the garden, and I said mum, are you going to church, and...she forgot and she was mortified, absolutely horrified. She would be caught doing any gardening on a Sunday because she did

nothing, she said I'm sure God will forget, silly old woman. And she was doing things like that...[emphasis added]

Karen had been unaware that her mother's cognitive abilities had declined. The neighbours knew her mother well enough to recognise that there was a problem, and communicated their concerns to the daughter believing, correctly, that she would take action. Kinship thus continues to be recognised as entailing intergenerational responsibilities, and is used as a means by which members of a community, such as the *rural locale* in this example, give help through liaising with the family.

Neighbours can thus work with kin in the care and support of older members of the community. However, in an increasingly mobile society, or in areas where kin are less likely to be immediately available, such as the *non-urban* locales explored in this thesis, non-kin may become particularly salient in the avoidance of social isolation. Their roles in care are, as I have shown, mainly focused on the less intensive or less personal tasks, such as shopping. They also play a particularly important role in the social lives of people in later life. However, the family continue to be the main resource for help for the older individual at times when their health declines. Differences evident between locales in the availability of adult children, discussed in Chapter 5, and in use of their assistance, raise questions regarding the level of intergenerational support. As mentioned earlier in this section, such contrasts may reflect various factors, such as the degree to which people actually need assistance. I consider kin assistance in greater depth in the next section, and will return to contrasts in support drawn from the local community in Chapter 7.

Section 6.3. Children and informal support

Whilst children are an important source of practical support, their role in the psychosocial lives of their parents should not be ignored. Indeed the two are not entirely separate from one another. Seeing a parent every day is potentially positive for the older parent's sense of well-being, but it also provides the chance to ascertain if there are any tasks with which their mother or father is experiencing difficulty, either through observation or in conversation. Knowledge of such issues is a prerequisite for early intervention either by adult children themselves or through

liaison with others. Similarly, the knowledge that there is someone there on whom expectations can be placed regarding future support needs is psychologically beneficial (Wenger et al. 1995). Other than the reciprocal links between contact and care, intergenerational relationships more generally are an important part of the lives of older people (Allen and Perkins 1995). For these reasons, I will begin by considering contact before moving on to consider assistance with practical tasks.

Section 6.3.1. Contact between respondents and their children

Differences have been demonstrated between locales in the proportions of respondents who do not have children living nearby, and the composition of informal support networks. Such findings raise the question: to what extent do intergenerational relationships differ between locales? And where there are significant differences, are they consistent with the thesis of migration having a negative impact on support from children? In this section, I will use survey data on frequency of contact, face-to-face and by telephone, to gain some insight into the importance of older parent/ adult child relationships for survey respondents.

Figure 6.3 shows the percentages of people in each of the three locales by the frequency with which they have contact with their children for those who have at least one child with whom they do not co-reside. It is assumed that those who are co-resident will have daily contact with one another so this group is not included. Two different forms of staying in touch are considered. The left hand side of the graph shows only face-to-face contact. The right hand side has figures that include both face-to-face and contact by telephone. Why use two different measures here? Where an older person has face-to-face contact with an adult child on a frequent basis, there is the potential for the son or daughter to pick up on any deterioration in the ability of their older parent to cope with any of their daily activities, thus facilitating assistance. The contention can also be made that social isolation or loneliness are less likely to occur where the older person is seeing a child on a regular basis. As mentioned above, the knowledge that there is the *potential* of assistance plays an important role in psychological well-being in later life (Wenger et al. 1995). On the other hand, telephone contact will go some way to fulfilling such a role, and provides an indication of the strength of intergenerational relationships, especially where both forms are

considered together, as is done in Figure 6.3. The frequency required to meet needs of companionship will differ from one person to another, so how often contact occurs is disaggregated into frequencies ranging from “several times a week” to “less than weekly”.

The graph in Figure 6.3 demonstrates the strength of intergenerational relationships for respondents in all three locales. More than 40 percent of all respondents report seeing children several times every week. At the opposite extreme, 20 percent do not see any children on at least a weekly basis. However, when telephone contact is included in the total figure, as it is on the right hand side of the graph, the percentage in the “less than weekly” category drops to less than 10 percent, a small minority, though once again notable given their potential for isolation. The picture, however, shows that even in contemporary times, with all the pessimism regarding the future of family care, children and their older parents remain important to one another in terms of interaction. Furthermore, regardless of the extent to which migration is a feature of the locale of residence, intergenerational relationships remain strong.

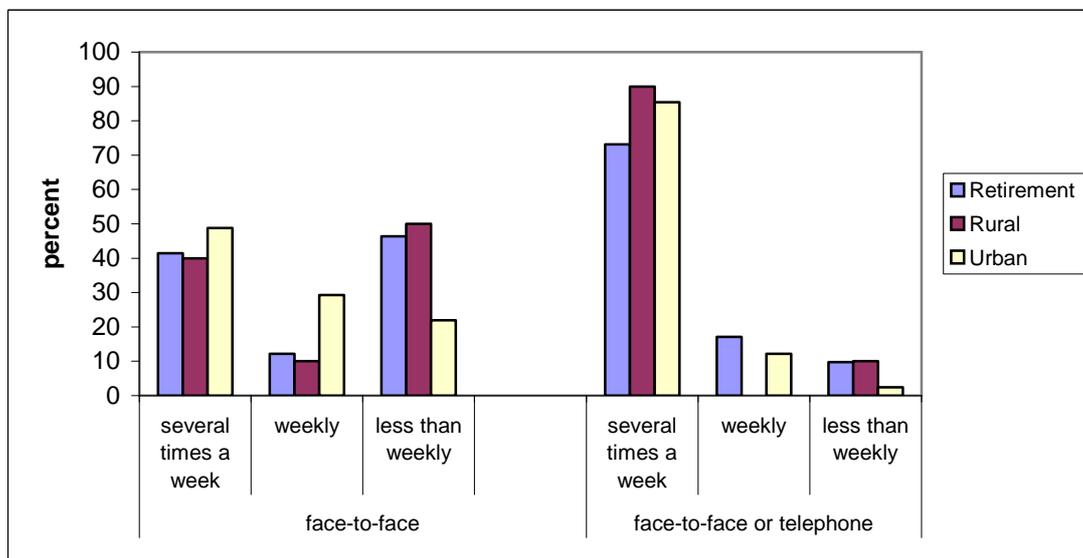


Figure 6.3 Contact with children for all respondents who have at least one surviving son or daughter but who do not reside with a child (n=92).

For face-to-face contact, differences between the three locales are relatively small and

not statistically significant. An exception is demonstrated in the case of face-to-face contact where seeing one another “less than weekly”, is considered. A chi-square test comparing differences in proportions of respondents who do not co-reside with a child and who see their children less than weekly is significant (Pearson chi-square=6.37, $p=0.04$)¹³, with those residing in the *rural* and *retirement locales* being less likely than expected to see their children on such a regular basis, whilst those in the *urban locale* are more likely. In part, this reflects the high proportion in the *rural locale* who live in an intergenerational household and who are thus not included in the analysis. However, the finding is also consistent with the contention that the contrasting contexts of the three locales, in terms of population mobility, constrain or facilitate the degree to which intergenerational contact can be maintained, with the higher proportion of respondents in the *urban locale*, where migration is less a feature, being in a situation where seeing their children is a lot easier than is the case in either of the *non-urban* locales.

Another point of note regarding in-person contact, is that those in the *rural locale* either see their children on a very regular basis, or infrequently. The proportions seeing a child once a week is lower than in the other locales. The family residential geography, discussed in Chapter 5, showed that respondents in the *rural locale* either lived very close or a considerable distance away from their children. One reflects the other, with a suggestion that geographical constraints are again playing a role in hindering or facilitating the ability of people to see one another. The spatial context within which the individual resides, which differs at the local scale, has a bearing on the role of the intergenerational family and, possibly, the form of relationships.

However, when telephone contact is included less difference is found between the three locales with all respondents in all three locales reporting very high proportions of frequent contact, the majority either seeing or talking to children several times a week. All have very high proportions of respondents who have very regular contact with their children. The proportions having less than weekly contact is lower in the *urban locale*, though statistical testing demonstrates this not to be significant (Pearson chi-square=2.79, $p=0.25$). If frequency of interaction, telephone or face-to-face, is taken to indicate strength of intergenerational contact, then there is no evidence from

¹³ See Appendix G.

this survey to suggest that migration weakens the importance of the intergenerational family.

However, the comparatively high proportions in the *rural* and *retirement* locales who report less than weekly in-person contact with their children raises questions regarding the degree to which intergenerational care and support can play a role in supporting older generations to the same degree across space. I thus now move on to look at more practical forms of support provided by younger to older generations within the family.

Section 6.3.2. Adult children and assistance with practical tasks

For many day-to-day tasks, distance represents an obstacle to intergenerational help (Litwak and Kulis 1987). To what extent are differences in intergenerational support between locales the result of the contrasting intergenerational residential geographies identified in Chapter 5? Considering this question involves analysing the role of geography in concepts of the *Extended Modifiable Network Model*, asking whether the intergenerational family does continue to act as a source of support across space and examining the role of place. I address these questions using both responses to the survey questionnaire, and through the analysis of in-depth interviews.

Contrasting compositions of support networks were demonstrated in Section 6.2, with the role of adult children contributing to significant differences between locales. Figure 6.4 breaks down the broad category of “receiving assistance from children” into specific tasks, and only includes respondents who have at least one living child. Comparison of the three case study locales demonstrates similar contrasting pictures regardless of task, although the only category that has a statistically significant difference is where assistance with paperwork is considered (Pearson chi-square=14.98, $p<0.01$), and the category ‘other’ (Pearson chi-square=7.60, $p=0.02$). However, the consistency of comparisons between locales for each of the other tasks suggests that they are more than the result of chance. Of the ten different activities, with the only exceptions being “washing/dressing” and “cooking”, people in the *urban locale* have a higher propensity to be receiving help. There are no examples where *retirement locale* residents have a higher proportion of recipients than those

from the other two locales. For 7 of the 10 categories included in the chart, it is respondents from the *retirement locale* who are least likely to be receiving help from a son or daughter. However, I reiterate the point that such patterns may simply be the result of differing degrees to which help is needed. More refined analysis is required to consider the reasons behind these local differences.

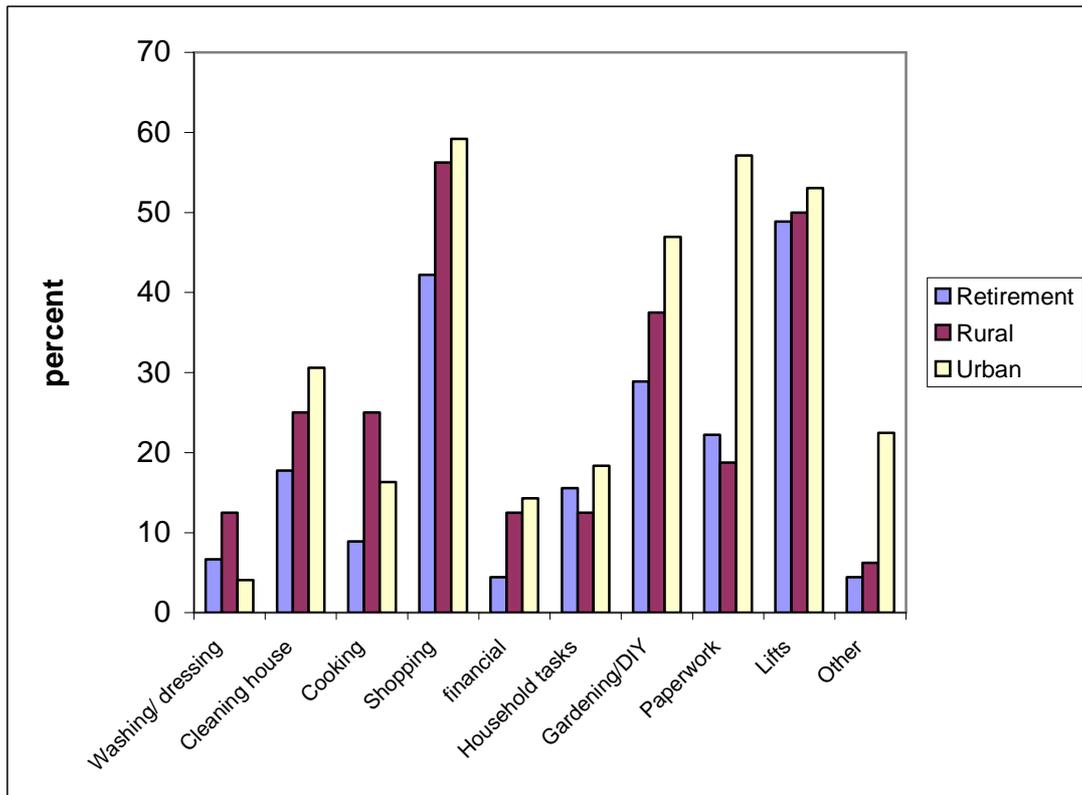


Figure 6.4 Types of assistance by locale for respondents who have at least one living child (n=110).

Of the three tasks where the proportion of *retirement* respondents is not lowest of the three locales, all involve small numbers and all involve forms of help likely to require a high degree of personal commitment on the part of the provider. I identified the *rural locale* as having the highest proportion of respondents co-residing in the previous chapter, and indeed all those receiving help with both of these activities (washing and dressing, and cooking) in that area are living with adult children. The exceptions are thus affected by differences in household living arrangements found between the three geographical areas. The spatial structures discussed in Chapter 5 therefore contribute to some of the differences in informal support that have been identified.

Proximity in itself is unlikely to explain the systematic variance of these different tasks between locales. Take the significant difference exhibited in reported help received with paperwork. Such a task does not necessarily require frequent face-to-face contact, and thus a high degree of residential proximity should not be a prerequisite. In the *urban locale*, 57 percent of respondents receive assistance from children with paperwork, compared to 19 percent in the *rural locale* and 22 percent in the *retirement locale*, a difference that is statistically significant (Pearson chi-square=14.98, $p < 0.01$). Such a difference may result from the contrasts in intergenerational residential proximity. The high proportion of people in lower socio-economic groups in the *urban locale* may also lead to a higher proportion who are less able to complete paper work (noted as being a major problem in terms of unclaimed benefits). The role of spatiality, in terms of local differences, sociality, and historicity, namely cohort differences in education, interact to influence the lives of individuals. Thus, the effects of social circumstances may also be influential.

Considering assistance using tasks as I have done up until now provides little indication of the degree of time commitment involved. This limitation is overcome by considering the *frequency of assistance score*, calculated using the method described in Chapter 4, with higher scores indicating greater frequency. Respondents from the *urban locale* prove to receive the most assistance using such an approach. When a Kruskal-Wallis test is applied, the differences in mean ranks are significant

(Chi-square=7.96, $p=0.02$, 2 degrees of freedom¹⁴). We can thus conclude that those who live in the *urban locale* make more frequent use of assistance from children than those in either the *rural* or *retirement* locales.

One factor influencing this behaviour is likely to be the greater geographical proximity of kin in the city. Those who live in the *urban locale* are the most likely of the respondents to have a child within at most an hour's travelling time. However, migration also affects the social composition of populations, so social class, with the differences in living arrangements and health may also provide part of the explanation. One of the most notable differences between locations that I have highlighted is the high proportion of people in the *urban locale* who are receiving help from an adult child with at least one task. I will therefore use the contrast between *urban* participants, and those from the *retirement locale*, which exhibits the least frequent assistance forthcoming from children, as a case study for investigating differences using multiple regression techniques.

Social and spatial influences are, as I have indicated, interrelated and thus potentially confound one another. For example, socio-economic composition differs between locales, so that observed differences may be the result of geographical or societal structures. Disentangling their effects and better understanding how place influences intergenerational exchanges requires the use of the multi-variate approach of linear regression. Table 6-1 shows three models I use to look at how different characteristics of the *retirement* and *urban* locales constrain and enable assistance from adult children. The basic model (model 1) demonstrates the positive relationship between living in the *urban locale* and the *frequency of assistance score* ($B=0.72$, $p<0.01$) that exists even after taking into account need, measured using the respondents' Instrumental Activities of Living Score (IADL). The difference is thus more than just a reflection of need. However, simply knowing where a respondent lives does not provide adequate detail to predict the degree of assistance an individual receives. Without the inclusion of additional variables to refine the model, only 13 percent of the variation is explained (adjusted $R^2=0.13$).

¹⁴ see appendix G.

Table 6-1 Linear regression models examining frequency of assistance from adult children¹.

		B	t	Sig.	Adjusted R ²
Model 1	Retirement locale				0.13
	Urban locale	0.72	2.75	0.01	
	Instrumental activities of living	0.16	2.31	0.02	
	Constant	-1.69	-2.70	0.01	
<hr/>					
Model 2	Retirement locale				0.20
	Urban locale	0.42	1.55	0.12	
	instrumental activities of living	0.14	2.06	0.04	
	Occupational groups 1-4				
	Occupational groups 5-8	1.39	2.59	0.01	
	Number of living children	0.19	1.07	0.29	
	Unmarried				
	Married	-0.80	-1.33	0.19	
Constant	-2.14	-2.90	0.00		
<hr/>					
Model 3	Retirement locale				0.24
	Urban locale	0.36	1.37	0.17	
	instrumental activities of living	0.16	2.38	0.02	
	Occupational groups 1-4				
	Occupational groups 5-8	1.06	1.96	0.05	
	Number of living children	0.07	0.39	0.70	
	Unmarried				
	Married	-0.82	-1.40	0.17	
	A child living within an hour				
	No child within an hour	-1.58	-2.36	0.02	
Constant	-1.26	-1.56	0.12		

Outcome variable: log of frequency of assistance from children.

¹Includes all participants from *retirement* and *urban* locales who have at least one living child (n=94).

Model 2 thus includes personal and social factors that other research suggests are important in influencing the degree to which adult children's assistance is utilised, or that binary analysis demonstrates to be significantly associated with the frequency of help. Once these additional variables are added, the difference between the two locales ceases to be significant ($p=0.12$). It appears to be the compositions of the two populations rather than where the older person lives that explains the frequency of assistance from kin. This said, less than 20 percent of the variation is explained by model 2 (Adjusted $R^2=0.20$).

Which factors are important in determining difference in use of support from children between these locales? I will consider which of the additional variables caused the locales to become statistically insignificant. Social class, measured using the Registrar General's classification of occupational groups, is significant in the second model ($B=1.39$, $p=0.01$). Those in groups 1-4, mainly managerial and professional, act as the comparison group. Respondents in lower socio-economic groupings are thus shown to be having considerably more frequent assistance from their adult children. Given the findings of others (Arber and Ginn 1992; Glaser and Grundy 2002) such an association comes as no surprise, though the reasons why they receive so much more help need further examination. Other variables associated with both social class and assistance may be acting to confound the apparent link. That the difference between the *retirement* and *urban* locales becomes statistically insignificant after taking into account the socio-economic composition of their respondents provides another demonstration of how sociality and spatiality interact with one another.

As discussed in the previous section, Glaser and Grundy (2002) suggest that differences that result from socio-economic contrasts are the outcome of contrasts in health. People who are in higher social classes are less in need of assistance because of their better health. The inclusion of the Instrumental Activities of Daily Living (IADL) suggests that such an explanation only partially explains why respondents position within society should influence the degree to which they use help from adult children (IADLs are used as the measure of health here as analysis demonstrated that it has the strongest association with the *frequency of assistance score* amongst

respondents). Respondents IADL score remains significantly associated with frequency of assistance despite occupational group being controlled ($B=0.14$, $p=0.04$). Thus, even taking into account socio-economic status, the level of health of respondents still remains significantly associated to the frequency of assistance from adult children. Differences resulting from social class appear to be more than simply reflections of health circumstances as measured by IADL scores.

Other variables in the second model in Table 6-1 are not significant. The number of living children is not statistically significant ($p=0.29$), which provides evidence that having more than one child makes little difference to use of informal, a finding which is in keeping with findings of other studies (Timaeus 1986). Whether or not a person has more than one child has no bearing on the likelihood of their receiving more frequent help. This finding is particularly notable given the significant association between the number of children a person has and the distance they reside from them, as demonstrated in Chapter 5. It suggests that, where need arises, the intergenerational family can indeed overcome the constraints of geographical separation. However, as will be considered in the third model, distance to the nearest child remains an important factor. Marital status is also insignificant ($p=0.19$), another point that I will return to when discussing Model 4.

Although the contrast between the two locales I have focussed on here ceases to be significantly different once the personal and social characteristics of respondents are taken into account, the actual experience of participants remains one of less frequent assistance for those residing in the *retirement* locale. Differing compositions of those taking part from each of the locales explain why the differences occur, but this does not alter the initial finding regarding frequency of assistance from children: those in the *urban locale* receive the most assistance.

Model 3 adds the distance a person lives from their nearest child into the model, coded as a binary variable which compares those without to those with children inside of an hour's travelling time. This variable is significant ($p=0.02$). The value of B indicates that, unsurprisingly, not having a child nearby reduces the assistance from children ($B=-1.58$). Geographic proximity enables intergenerational assistance and.

Conversely, distance between residences acts as a constraint.

The inclusion of a measure of intergenerational geographical proximity also influences the significance of occupational classification. This measure of socio-economic situation is marginally insignificant ($p=0.05$), indicating that the influence of socio-economic group may be due to differences in distances resided from children. Those in higher social groups are less likely to reside near to their children, as has been shown by Warnes (1986). The relationship of other variables to the log of the *frequency of assistance score* remains largely unaltered from the second model. The fit of the model also improves with the adjusted R^2 increasing ($R^2=0.24$).

A surprising feature of Models 2 and 3 in Table 6-1 is the insignificance of marital status. However, geographical differences shed light on its influence. The final model (Model 4), shown in Table 6-2, includes an interaction term between distance resided from children and marital status. The base against which comparisons are made are people who are not married (mainly widowed) and who have a child residing within an hour's travelling time; individuals who might be expected to receive the most support from children. With the inclusion of the interaction term, marital status becomes significant with a negative B value ($B=-1.38$, $p=0.04$). Those who are married and also have children living nearby receive less support than those who are not married; in the main, those who are widowed. Proximity to child's residence remains significant, with a negative relationship to the log of frequency of assistance ($p<0.01$, $B=-2.29$). Those who are not married and living further away receive less assistance from children in comparison to those living nearer to their progeny. Finally, the interaction term itself is not significant ($p=0.08$). Thus people who are married and live further from children, compared to the unmarried who reside nearer to offspring, do not receive more or less assistance from children. This last finding is surprising, given that both being married and living a greater distance away are grounds for expecting less support. The result may be an outcome of chance, with a few exceptional cases leading to the lack of significant difference. Alternatively, there may be further factors such as the health of spouses leading to this counter intuitive association.

Table 6-2 Linear regression model examining frequency of assistance from adult children¹.

		B	t	Sig.	Adjusted R ²
Model 4	Retirement locale				0.25
	Urban locale	0.38	1.46	0.15	
	instrumental activities of living	0.16	2.34	0.02	
	Occupational groups 1-4				
	Occupational groups 5-8	0.93	1.71	0.09	
	Number of living children	0.04	0.22	0.83	
	Unmarried				
	Married	-1.38	-2.09	0.04	
	A child living within an hour				
	No child within an hour	-2.29	-2.97	0.00	
Interaction term between marital status and distance from children	2.48	1.78	0.08		
Constant	-0.97	-1.19	0.24		

Outcome variable: log of frequency of assistance from children.

¹Includes all participants from *retirement* and *urban* locales who have at least one living child (n=94).

The models demonstrate is that distance is a constraint. Where there is not close geographical proximity between residences there is not an increase in the logged *frequency of assistance score*. Potentially, reduced residential proximity across populations has negative implications for those who are most in need of help. The pessimistic scenarios would appear to have credence. However, as will be seen later in this chapter when I move on to discuss the in-depth interviews, the situation is rather more complex.

As mentioned above, the final model predicts a little under a third of the overall variation in frequency of assistance. Other factors such as the characteristics of children are also likely to be important. Decisions regarding informal support are not

only influenced by a person's own circumstances but also by the circumstances of others involved in intergenerational networks. Children's own responsibilities towards work, for example, will impinge on their ability to assist their parents, as is demonstrated by Warnes (1986), who shows the constraining effects of younger people's socio-economic status. Other aspects of their lives may also have a bearing, such as other family commitments or their own health. The effects of agency will further reduce the ability of any model to perfectly predict the social world. Influences will not necessarily result in individuals taking a course of action that is consistent with their location in time, space or society as is predicted by statistical models. Whilst statistical models are useful predictors of actions at an aggregate level, individuals are able to, and do, take unpredictable courses of action, the results of their own initiative and inventiveness. Additionally, contradictions of social and spatial structures call for complex decisions to be made as individuals attempt to reconcile conflicting pressures. Different individuals will not always come to the same conclusions, and thus will act differently. The processes of structuration are such that individual behaviour cannot be entirely explained by structural factors. Statistical modelling can thus never achieve a perfect fit to data.

The findings so far in this section demonstrate the complexity that lies behind any attempt to apply or refute theories such as that of the *Modifiable Extended Network Model*. The models in Table 6-1 suggest that family still remains important where need arises, as shown by the significance in all three models of the measure of health, the IADLs. Where a respondent is less able to cope unaided, they are more likely to receive more frequent help from their children. The role of marital status further suggests that sons and daughters step in where required, though the constraints of geography remain apparent. Even though there is almost certainly bias within the data as a result of the methods used to recruit the sample, the implications of widowhood for intergenerational support are clearly seen. Those who receive most assistance from their children are people who have greater need, live near to their children and are widowed. However, the continued significance of distance suggests that, for frequent help of the type I am considering with its important role in supporting independent living, intergenerational geographical separation continues to be an impediment to family assistance.

Data from in-depth interviews demonstrates the extent to which children act in a manner consistent with the *Modifiable Extended Network Model*. The *frequency of assistance score* used in the models emphasises tasks being assisted with on a regular basis. However, interviewees in the conversational interviews on occasions refer to times when they needed help during a period of crisis, either after losing a spouse or during recuperation from an operation. These events indicate how the intergenerational family remains crucial to the lives of older people, and can overcome the constraints of distance. For example, a participant from the *retirement locale* talks of how his daughter who lives in Australia immediately responded when his terminally ill wife's health declined markedly.

Graham: Well luckily, she phoned on the Saturday and was able to speak to her mum, you know, and the...then I, well I phoned her that night...it was their morning like...and she said, she will be on a plane that day...she got here, I think it was the Tuesday that she arrived. It takes a while to get from Australia...

And another *retirement locale* interviewee tells a similar story of the support she received from her daughter, who at the time also lived a considerable distance away, on the death of her husband.

Linda: Oh, I couldn't live without her. She came and stayed with me actually, when John [her husband] died...and she stayed with me I would say about 6 weeks must be, and then she went back to her own flat.

Both Graham and Linda's daughters were thus able to provide support for their parent at a time of crisis, despite living a considerable distance away to the extent of living overseas, which demonstrates aspects consistent with the *Modifiable Extended Network Model*. In times of crisis, where assistance was of a short duration, adult children were able to give help to their parents.

Susan, an interviewee from the *rural locale*, relates how she went to stay with her daughter after a fall.

Susan: Well that was when I broke my ankle... I went to spend some time with

my daughter after that.

Despite her daughter living a considerable distance away, relocating for a short period of time enabled them to overcome the constraints of geographical separation to enable intergenerational assistance.

Another respondent from the *rural locale*, Stan, relates how his daughter looked after her mother, his spouse, now suffering from Alzheimer's, when he was admitted to hospital.

Iain: What happened to your wife while you were in?

Stan: Well she was being looked after by the family you see. She was being looked after by the family. Cause up till then, they, I wasn't. We weren't getting any sort of help at all, except by the family, whatever they were able to do...[his daughter] came to stay, you know, they did it between the two houses, you know. When I was in hospital.

Again, the occurrence of a crisis situation enables constraining spatial structures to be overcome by agency, and provides evidence of how the *Modifiable Extended Network Model* provides a useful means of understanding how contemporary trends will influence informal support. The intervening distance separating Stan's residence and that of his daughter is not great; they live in the same village. However, providing a high degree of intensive support is difficult unless the generations are co-resident, notably in the cases where the older person has cognitive impairment (Wenger 1998), such as is the case with Stan's wife. The creative ability of his daughter as agent is nonetheless able to overcome such a difficulty if and when the need arises.

Another interviewee, who has decided that she can no longer cope in her own home, is going to move into sheltered accommodation, having resided in her current house for over 30 years. Her son lives in England, but came up to Scotland to help her look for alternative accommodation.

Iain: Your son came with you to see this did he?

Lorna: So he's going to come with me, I said that to the warden. I said em,

'[My son] will be up.' She said, 'oh well', she said, ' it would be better with him coming, just to have a look...[her son] has been on the internet for it, finding out all about it...

Lorna places a high degree of trust in her son's opinion of where she should move. He is also in a situation where he can provide her with information to further help in deciding where she should live. Despite his living so far away, he is still able and willing to provide her with the psychological support of his views in making a life changing decision.

Another interviewee relates how his son and daughter-in-law, who live in the Central Belt, a little over an hour's drive away, helped him come to a similar decision with regards to his wife who had a deteriorating neurological disorder that had reached a point where he could no longer cope unaided.

Iain: You said that when you came out, 'we knew it was the right place.' So that was you and...

Ken: Oh it was the daughter-in-law and son. The three of us went round the home. We left the children with my son's mother-in-law, so we went round the...we spent, was it a Saturday or a Sunday, and we went round them all, checked them all out. And uh, you see social workers are not allowed to voice an opinion, you know.

The experiences of Ken and Lorna thus show how the support of children can provide reassurance when faced with a difficult decision. The impediment of distance is not a constraining factor that prevents intergenerational support at times of crisis.

Agency is not limited to the younger generation or to times of crisis. An interviewee from the *retirement locale* relates how assistance from an adult child helps her in a regular activity that is important to her day-to-day life. Her mobility is compromised, and her daughter lives a distance of more than an hour's travelling time from her place of residence. Furthermore, she does not have access to a car of her own.

Nancy: Well, I'm lucky having my daughter once a fortnight. If I need anything extra, she can get it. We [she and her daughter] can get a taxi to

Tesco, and em get a taxi back if I need anything extra. But there's ways and means.

Her daughter is thus able to assist her to maintain her residential independence and quality of life. Intergenerational assistance, whilst more difficult when there is not close geographical proximity, is still possible.

There are also occasions where living in close proximity does not necessarily lead to frequent or intense forms of informal support. In Chapter 5 the experience of Ann was discussed. She is a resident of the *retirement locale* who relocated with her spouse from the Central Belt several years ago after her husband's health began to require him to have assistance with some of his daily activities. Taking her story further, her expectations were not met. She did not receive the support she thought would be forthcoming.

Ann: I just thought we were more closer than that, you know. I didn't think there was such a gap, it just...just actually...I'm a bit disappointed, put it that way. I didn't think it would work out that like this. I thought it would be better than this. I thought we would be more of a family. Like, that's one of the reasons I came to keep sort of family together.

Ann's experiences show that accessing informal support is more than a decision of the individual, that it develops out of processes of interaction where others ideas, opinions and attitudes can act to constrain. Just why this particular situation arose is difficult to pinpoint, though other parts of the discussion give some indication that the poor relationship has its roots in earlier stages of the life-course. The effects of relationships between parent and child also demonstrate the importance of the temporal dimension even at the individual scale.

Ann: So I did try to sort of try and be really close to her, but the more I tried to be close to her the more she tried to push me away.

Interpersonal relationships are complex, and to suggest that Ann and her daughter did not get on would be an exaggeration. Normative values regarding intergenerational support are such that Ann still felt that relocating to the same village as her daughter

would lead to her getting more help looking after her husband. Indeed her daughter facilitated the move by identifying suitable housing available locally. However, despite the close geographical proximity that resulted from the move, the expectations of the mother and the poor health of her father, frequent informal support was not forthcoming.

Such occurrences have always happened, and will do so into the future. However, the models I have discussed earlier in the chapter demonstrate that Ann's experience is an exception for the survey respondents. A decline in the closeness of intergenerational relationships, or a change in normative values regarding the most appropriate course of action, may lead to future decreases in the propensity for the younger generation to help their older parents, but there is little evidence from other studies to suggest that people are currently any less inclined to giving informal support. Indeed, the modelling results summarised in Table 6-1 and Table 6-2, especially in relation to health and widowhood, and the illustrations from in-depth interviews of assistance proffered even at a distance in emergency situations, both confirm the continued role of family in assisting their older members if and when the need arises.

Section 6.4. Gender and informal support

The previous section has shown how, for the individual, geography is an important aspect influencing the availability of support from their adult children. The interactions of the sociological and spatial, however, add layers of complexity to such conclusions. Take for example gender: many studies demonstrate that, compared to men, women are more likely to be a provider or recipient of support at one point or another through their life course (for example Arber and Ginn 1995; Himes et al. 1996; Hirst 2001; Ungerson 2000). However, in not all circumstances will there be a daughter available, either for reasons of demography or geography. Structures influencing individuals' decisions and negotiations can thus, on occasions, contradict one another. Hence, I now consider the question, does the gender of the survey respondent, or of their children, affect their use of informal support?

A point that is highlighted by the interviewees' conversations is the role of gender, an aspect of social life that is itself an outcome of a structuration process involving individuals in *reflexively* acting on normative and socio-economic structures. In virtually all cases where help has been drawn on by interviewees at times of crisis it is daughters to whom they have turned, or who have stepped in to help. In some examples, such as Graham's, there are only female children to whom he could turn. Other interviewees, such as Stan, have both sons and daughters. In Stan's case, he sought support from his daughter who lived closer to her father than her brothers. However, as is demonstrated by the other situations drawn from the in-depth interviews, there are means by which distance can be overcome, so Stan could have turned to a son.

In the section that follows, I focus on the role of gender, both the respondents' gender and that of their children's. Normative values, which structure social life, result in differences in expectations of daughters and sons that are reproduced across time and between generations. Societies and thus the context within which care and support networks are created are constantly changing. The interactions between the normative values that underpin gendered aspects of intergenerational assistance, and the effects of geography (spatiality), and time (historicity), do not always fit neatly together. Contradictions between these different influences suggest ways in which gendered relationships may alter in the future. I begin by considering points brought up during in-depth interviews that suggest ways in which gender leads to contrasting values and expectations regarding providing and receiving assistance from children.

Experience across the life-course may also provide some insight into why differences emerge between male and female respondents where greater assistance is required. Many of the female interviewees discuss past experiences they have had of caring for either their own parents, or other relatives. Such reflections are notably absent from the conversations with male interviewees. Take the case of Susan, mentioned above in relation to the help she has received from her daughter.

Susan: My mother, I looked after my mother. It was just after my husband died, so I was able to go...I was with her a couple of years, she was 96 when she died...and erm, well my father died before I was married so I was able

to leave [where she was staying at that time] and stay with him...and then I had my husband's sister for two years, we had her in the house. But we managed to keep them all at home which was the main thing...

Iain: You brought them to your house?

Susan: No...I went over to their home...

Jennifer, who has lived in the *rural locale* for most of her life, recounts how she came to look after both her parents and parents-in-law when they experienced poor health in later life. Part of the discussion with her shows how agents, in making decisions, will on occasions come to take actions that in many respects they would rather not. Informal assistance can be forthcoming even when the provider does not have a particularly close relationship with the person to whom they are giving support.

Jennifer: Erm, it was very difficult with my mother-in-law because she wasn't a dear old sweet old lady, she was a very demanding person and it...in some ways it interfered with our marriage because my husband was torn between me and his mother...erm...and...the children when they were small, we couldn't do anything as a family because somebody had to stay in to look after Granny and we could never do anything as a family or if we wanted to go away had to, even for a weekend, you know you had to get somebody to stay with granny and erm I think it certainly affected the children's upbringing and that I did resent, yes...

Jennifer goes on to talk about the reasons why she ended up looking after both her own and her husband's parents but having less input into her own mother's care.

Iain: And how did it come about that you ended up looking after both your own parents and your husband's?

Jennifer: Cause I was the one that was there. I didn't do so much for my own parents erm... particularly my mother em but em because my brother Angus lived with her but I I was... there when required, back and fore but em yeah and I nursed my sister-in-law until she died and er yeah, I've been a carer all

my life.

She indicates the role of living arrangements, such that her brother ended up being the person who provided most assistance to her parents. He lived with them, and thus relieved Jennifer to an extent in providing assistance.

What is also noticeable from the in-depth interviews is the way in which gender is not explicitly recognised as being a reason for support being provided. At no point in any of the interviews does anyone state that they were expected to provide support, or now feel that one of their children should give help, because of gender. Yet results from the survey, and the consistency with which interviewees refer to receiving help from daughters, demonstrate that intergenerational assistance is gendered. The influences of normative values and socio-economic factors that together lead to such differences illustrate Giddens' ideas of how actors do not always recognise the underlying reasons behind their actions, and rely on their *practical consciousness* discussed in Chapter 3. The interweaving of expectations, not only a person's own but also those of their older mother or father and siblings, may lead to an outcome for which the underlying reasons are not necessarily immediately apparent to the agents.

However, examples drawn from the in-depth interviews and used above point to other ways in which changing structures may facilitate the role of the family with regards to informal support. In the situation of Linda, her daughter was divorced and so had greater flexibility to assist her mother when the need arose. There were no expectations of a husband to add to the complexities of the decision making process. A similar point was raised in the previous chapter, where one interviewee, after the loss of her husband had one of her three sons move in with her, the one who was not married. Demographic trends may thus act to increase opportunities for informal support, as rising divorce rates place children in a situation where they are more able to support their parents.

The values and expectations that result from gender remain a powerful influence on decisions regarding provision of informal support. This is demonstrated by analysis of the survey data. Table 6-3 shows the results of chi-square tests comparing the effects of children's gender on contact with their parents. The first of the questions

addressed demonstrates that being male or female does not significantly affect the propensity to see their mother or father at least weekly (Pearson chi-square=1.744, $p=0.19$). Sons are just as likely to see their parent as daughters on at least a weekly basis. The other two questions that are addressed in Table 6-3 tell a different story. Where more frequent contact is used, namely seeing one another more than weekly, the child's gender becomes a significant factor. There is a highly significant difference between the likelihood of seeing a parent several times a week compared to seeing them weekly or less, with females being more likely to see a parent on such a basis (Pearson chi-square=7.63, $p<0.01$). Having at least weekly telephone contact also shows a significant gender difference (Pearson chi-square=5.44, $p=0.02$), again with daughters being the more regularly in touch.

Table 6-3 Pearson chi-square tests of gender and contact ¹.

	n	Pearson chi-square	Degrees of freedom	p	Gender effects
Does child's gender affect the likelihood of having at least weekly contact?	279	1.74	1	0.19	none
Does child's gender affect the likelihood of having more than weekly contact?	279	7.63	1	0.01	females more likely
Does child's gender affect the likelihood of having at least weekly telephone contact?	279	5.44	1	0.02	females more likely

¹ includes all children of respondents who have at least one living child.

There are many reasons why gender may impinge on frequency of contact. The data do not indicate whether the telephone calls or visits are initiated by the respondents, or their child. Warnes (1986), in a study of married couples in England, finds that daughters are more likely to be visited by parents. His data suggest that the finding is not the result of more attentive daughters, but rather results from the actions of their parents. Different normative values and expectations influence actions, in much the same way as is noted regarding provision of informal support by Qureshi and Walker (1989). However, as regards the finding drawn from my work, one potential explanation can be ruled out. Differences in the frequency of both in-person and telephone contact between older respondents and their children, is not the result of geographic separation, as sons are no more likely to live a distance away than daughters.

Differences in receiving assistance from children that result from gendered structures are also evident where assistance with other tasks is considered. Table 6-4 shows comparisons of sons and daughters helping their parents, the respondents, with

different aspects of daily life¹⁵. When separated out, significant difference is found between some tasks, though not all, and to differing degrees. Daughters are most likely to assist with housework compared to sons (Pearson chi-square=6.99, $p < 0.01$). To a lesser extent, though still significant, is help with paperwork, with which daughters are also more likely to help (Pearson chi-square=4.70 $p = 0.03$). A larger percentage of daughters help with shopping, though not to a degree that is statistically significant (Pearson chi-square=3.48, $p = 0.06$). Amongst the sample, a greater proportion of sons help with DIY compared to daughters, though not to an extent that is significant (Pearson chi-square=3.73, $p = 0.05$). The degree to which either sons or daughters help with different tasks thus differs depending on what is involved, suggesting that there are structures that lead to contrasts in the assistance those sons and daughters provide. Whether these are normative or socio-economic is not clear from the data.

¹⁵ See appendix G for cross-tabulations.

Table 6-4 Gender and assistance with daily tasks ¹

	n	Pearson chi-square	Degrees of freedom	p	Gender most likely to assist?
Housework	279	6.989	1	0.008	female
Paperwork	279	4.704	1	0.03	female
Shopping	279	3.481	1	0.062	none
DIY	262	3.734	1	0.053	none

¹ includes all respondents' children for which data is available.

Might these differences be the result of spatial differences that concomitantly are associated with gender, with daughters living closer? The evidence from bivariate analysis demonstrates that the answer is no. Table 6-5 considers factors that affect their likelihood of living within half an hour of at least one child, or whether the child being a son or daughter matters, using Pearson Chi-square tests¹⁶. The first question asks whether having more than one surviving child makes a difference, which it does (Pearson chi-square=8.68, $p < 0.01$). Having more children increases the likelihood of living nearer to at least one of them. The second question investigates association between geographical proximity to children and the respondents' own gender, the third as to whether a child being a son or daughter makes a difference to distance resided away from parent. There is found to be no statistically significant difference to either whether the respondent is male or female (Pearson chi-square <0.01 , $p=0.95$), or to whether the children are sons or daughters (Pearson chi-square=0.01, $p=0.91$). For the respondents, whether they are male or female does not alter the chance that they live within half-an-hour of a child. Similarly, from the perspective of their children, gender makes no difference to the chances of living near to their mother or father. Spatial contrasts based on gender thus do not explain the more frequent contact between daughters and their parents.

¹⁶ See appendix G for cross-tabulations.

Low fertility currently characterises Scotland’s population and this will eventually lead to families with fewer children. Additionally, a more mobile population may lead to fewer children being immediately available to assist with their parents’ day-to-day tasks. Changing economic structures are leading to greater proportions of the female population being involved in formal employment. An implication is that fewer people will have daughters available who can provide help. If the needs of older individuals are to be met, substitution will have to occur, with greater reliance on formal services, or on sons. The interaction between sociological and spatial structures over time therefore brings about the possibility of change. Social and demographic trends open the intriguing possibility of gendered structures becoming less sustainable if people turn to their sons when needing help. Is there any evidence to suggest that they will?

Table 6-5 Chi-square tests of determinants of distance.

Question	n	Pearson chi-square	Degrees of freedom	p	Effects on likelihood
Are you more likely to live within 30 minutes of a child if you have more than one?	92	7.18	1	0.01	Increases
Does a parent’s gender affect the likelihood of living within 30 minutes? ¹	92	0.17	1	0.89	None
Does a child’s gender affect the likelihood of living within 30 minutes? ²	279	0.01	1	0.91	none

¹ includes all respondents who do not reside with any children but who have at least one living child.

² includes all respondents’ children.

From the analysis thus far, a reasonable assumption would be that having no daughters is detrimental for the respondents in terms of the frequency of assistance they will receive. As shown in the analysis thus far, female children are more likely to help with most tasks so that, all things being equal, it would seem that to have only sons will mean less help is forthcoming. However, agents respond to their circumstances. Where structures are changing, people *reflexively* find themselves in contexts in which they may alter their behaviour. In other words, sons may be more likely to provide a greater degree to assistance where they do not have a sister, or where he is has the greater geographical proximity to his parents. Indeed the evidence from this study does not support the contention that having a daughter necessarily makes a difference to the *frequency of assistance score*. When a binary variable 'has a daughter' is correlated with the *frequency of assistance score*, the result is not statistically significant ($p=0.06$). Given the results of analysis of different aspects of support, the lack of significant difference suggests that there may be a compensatory aspect to decisions people make regarding their contribution to intergenerational care and support.

What influence does proximity have on the assistance that adult children provide? Table 6-6 compares the gender of the child who provides the most assistance to a respondent, in a sense their 'main' supporter, to the closest residing progeny's gender. This analysis includes only those who have at least one living child but with whom they are not co-resident. As can be seen, there is a significant association ($p<0.01$ with 4 degrees of freedom). Comparison of expected values to those actually found suggests that the propensity for a son to be the main provider of assistance increases when he is the nearest child to the parent. There is little difference where there is a son and a daughter living approximately equidistant, with daughters being very slightly more likely to be providing the most assistance.

Table 6-6 Children's gender, proximity and informal assistance for respondents who do not co-reside with children.

		gender of child who lives closest				
		male	equal	female	total	
gender of child who provides most assistance	equal	Count	18	7	17	42
		Expected	18.92	6.46	16.62	42.00
	male	Count	21	2	2	25
		Expected	11.26	3.85	9.89	25.00
	female	Count	2	5	17	24
		Expected	10.81	3.69	9.49	24.00
	total	Count	41	14	36	91
		Expected	41.00	14.00	36.00	91.00

Pearson chi-square=15.58, $p < 0.01$ with 4 degrees of freedom.

n=91.

Where situations are considered where sons are the nearest children to respondents, it can be seen that they are more likely to be providing the most support. Of the 41 respondents who have a male child living nearest, 21 were also receiving most support from a son. This figure compares to what would be expected in the case of the null hypothesis of 11.26. Conversely, where there was a female child residing closest, only 2 survey participants provide indication that daughters are giving the most help, compared to the expected value (expected value=10.81).

Table 6-6 thus provides some evidence to suggest that gendered values may very well be influenced by geographical proximity and availability to other siblings. Declining fertility and increasing population mobility are likely to reduce the likelihood of men having a sister or sisters who live closer to their parents. If, as is suggested by the analysis presented here, they are more likely to taking on supportive roles than the association between gender and informal care may well change. Given the *reflexive* manner in which people consider their actions, such changes could have a self-perpetuating effect.

Such a finding has implications for gendered values given demographic changes currently affecting Scotland and other higher income countries. Having fewer children will mean that people are less likely to have both male and female children. Gender roles may therefore alter, with male adult children being increasingly likely to be in a position where they will be the main source of support for their older mother or father, either because they do not have a sister, or because she lives too far away to practically provide day-to-day assistance. Changing values and attitudes that are central to the theory of the Second Demographic Transition may thus be accompanied by challenges to normative values of parents, children, or both, as to expectations and obligations regarding the provision of intergenerational support.

This section started out by asking the question, does the gender of the survey respondent, or of their children, affect their use of informal support? From the point of view of adult children, daughters provide more assistance than do sons, although the extent differs depending on the task involved, some actually exhibiting no difference. The reasons behind such gendered differences are complex, and are likely to involve an array of factors, including the normative values of both providers and recipients.

Normative values regarding gender are deeply rooted to the extent that people may turn to their daughters without explicitly doing so for reasons of gender. As Giddens (1984) suggests, whilst a person can account for the reasons behind their actions, they may not always be aware of underlying motivations. Although several of the in-depth interviewees provide evidence of the role of daughters, especially at times of crisis, none specifically state gender as being an explicit reason. They provide

suggestions that for reasons of practicalities, it was easier for their daughters to come and stay, or that a daughter has greater flexibility now being divorced. Taking the findings of the survey and in-depth interviews together suggests that there is rather more to the explanation. Daughters, in general, provide more assistance. None of the in-depth interviewees make reference to turning to a son at time of crisis. This is possibly co-incidental, but such a conclusion would be tenuous. Normative values that perceive daughters as being the person to turn to when a crisis occurs provide a much more convincing hypothesis, although further investigation into motivations and perceptions of roles and abilities is required to gain a more detailed understanding.

I have also questioned whether the declining availability of children, because of increasing migration and declining fertility, might have an effect with regards to gendered values. There is some indication in the survey that to an extent people do turn to sons where daughters are not available, with implications for future gendered attitudes to intergenerational support. However, having a daughter makes a significant difference to the frequency of support for respondents who require greater degrees of help. This said, values can transform over time. Whether social changes, increasing geographic mobility and population ageing, will lead to contradictions between structures that individual agents will resolve in such a way as to create new understandings of roles, responsibilities and expectations that are less gendered remains to be seen, although the evidence I have shown here provides some support for such a theory. The effects of ageing and increasingly geographically mobile populations, may be to accelerate change in, rather than perpetuate, long-standing gendered attitudes.

Section 6.5. Conclusion

This chapter has addressed several research questions pertaining to the connections between the sociological and spatial dimensions of informal care and support networks. I began by questioning whether geographical differences exist in the structure of support networks, and whether any found fitted with expectations, given the migration patterns and intergenerational residential proximities identified in Chapter 5. A high proportion of people not using informal support were found to exist in the *retirement locale*, in keeping with expectations. The respondents from

the *urban locale* tended to get more help from their children relative to those from the other two survey locales. All this suggests that the conceptualisations of the Extended Modifiable Network Model are limited, in that those places where migration levels were high also had lower levels of assistance forthcoming from younger to older generations. Analysis has also shown that the sociological and the spatial are closely interrelated. Determinants of migration, proximity and informal support are interlinked; individual characteristics, such as social class and gender, are intrinsically geographical, and hence so too are their implications for informal support.

Conclusions suggesting that the intergenerational family is under threat in an increasingly mobile social world are simplistic, as much of the rest of this chapter has shown. Adult children continue to be an important part of people's lives, as evidenced by the high proportions of respondents in all three locales who speak to their children several times a week, by telephone if not in person. The ability of the intergenerational family to overcome the constraints of geographical distance at times of crisis shows how enterprising agents can find the means to maintain the practicalities of familial roles of support. The intergenerational family continues to respond to need, be that bereavement or ill health. Yet both qualitative and quantitative analysis has highlighted that gender continues to be an important influence, both from the point of view of the recipient and provider. People tend to turn to daughters for assistance. In-depth interviews have time and again thrown up examples of interviewees going to stay with female children, or female children coming to stay with them for several weeks. Multivariate modelling has also shown that children's gender influences the degree to which assistance is forthcoming; structure and agency each playing a role in the lives of participants.

Not all survey respondents had children. For these respondents, and indeed for those who do not live close to children, other means of coping with day-to-day life need to be found. As agents, they are not simply victims of their circumstances, but to an extent can find other means of managing. For those without close kin, including those who do have sons and daughters, the local community is an important part of daily life. This chapter has touched on the role neighbours play in providing assistance. The next chapter will consider the degree to which regular interpersonal contact is

maintained between older individuals and their locality.

Chapter 7. The local community and informal support

Section 7.1. Introduction

Social changes in the early stages of the twenty-first century, such as those theorised as the Second Demographic Transition, may place intergenerational support in jeopardy, both support adult children give to their parents and *vice versa*. Such changes are creating new intergenerational geographies and perhaps weakening kin ties of obligation and reciprocity. People's experiences of these trends will differ depending on where an individual is located, socially and geographically. For many, sons and daughters will continue to be a source of psychological and instrumental support. For a notable proportion whose nearest son or daughter lives a distance away, or who do not have children, other forms of help must be sought. Whilst support is still forthcoming across geographical distance, the ability to help with day-to-day needs that are vital to maintaining psycho-social well-being and residential independence are reduced. For people who do not have close younger kin to whom they can turn, the local community potentially becomes more significant.

The focus of this chapter is on the role of people who are not connected to respondents by kinship, but live nearby and are thus a potential source of support. Social changes affecting the family, however, do not work in isolation from the rest of society. The Second Demographic Transition, associated in part with declining fertility and greater psychological and geographical distances between the generations, is seen as interlinked with increasingly individualistic attitudes which, some researchers contend, are also associated with a reduction in trust and reciprocity between individuals and their communities; in other words, a reduction of social capital. At a time when kin may be less of a resource for many, turning to those who live nearby to meet needs may also be less of an option, both because of changing perceptions of 'community', and because of normative values characterising what responsibilities people feel they have towards neighbours.

Whether or not early twenty-first century society is experiencing a decline in social capital remains contentious (for example Hall 1999b). Even if such a decline is occurring, it is unlikely to be happening equally in all locales. Some communities

will be better at fostering social capital than others, just as some individuals will retain close-knit social networks whilst others will be more socially isolated. Just as characteristics of society and space are important for the future of the role of the extended intergenerational family, so too they influence individuals' experiences of communities. Additionally, personal attributes impinge on the degree to which the older person is able to turn to non-family for social support. For example, some studies suggest that there are gender differences in the use of social networks, with women developing more relationships with others outside the family (Pickard 1994).

Can the local community substitute for the family? The evidence presented in Chapter 6 suggests that the family continues to be the main source of support, though to differing degrees at both individual and local scale. For the study sample, friends and neighbours, in the main, provide less intensive or personal care. However, the importance of face-to-face contact cannot be underestimated in terms of the potential psycho-social benefits to the older individual. That differences exist between the three locales in this study raises the question of whether communities play a greater role where families are not available or geographically proximate. Such a scenario optimistically raises the possibility that non-family may increasingly take on roles that normative values have previously assumed would be fulfilled by kin. An alternative and more pessimistic hypothesis might suggest that, conversely, family and social networks are closely associated. Not only will high degrees of population mobility leave individuals without the support of an extended intergenerational family, but it may also place them within fragmented communities, increasing the prevalence of isolation. In this chapter, I use survey data to investigate the substitutability of neighbours for kin, and in-depth interviews to explore relationships with friends, and how they are affected by migration.

Section 7.2. Contact with neighbours

Figure 7.1 indicates the frequency of face-to-face contact that survey respondents have with their neighbours in the three study locales, ranging from daily contacts down to those who see others on a less-than-weekly basis. It includes all those who took part in the survey, not only those with living children on whom much of the analysis up to this point has focussed. Face-to-face contact includes only those

occasions where people either go to the houses of those living nearby, or where neighbours visit their residence, which excludes interaction such as verbal exchanges ‘in passing’. There are two reasons for only including times when houses are visited. Firstly, visiting indicates a stronger social relationship, and one that would facilitate, for example, acting as confidant. Secondly, visits from others are particularly important for the psychosocial well-being of a person whose health is failing, and who is thus most at risk of social isolation (Wenger et al. 1995).

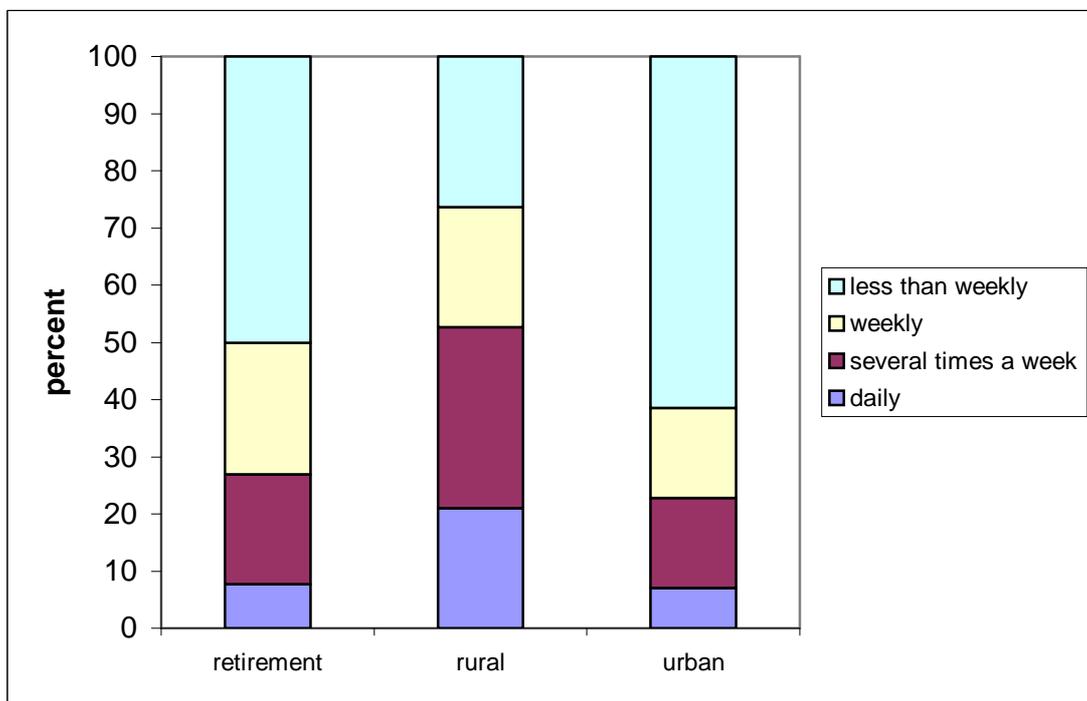


Figure 7.1 Frequency of in-person contact with neighbours for all survey respondents (n=130).

Distinct differences between the three geographic areas are evident in Figure 7.1. The *rural locale* shows a greater frequency of contact with neighbours on a daily basis or several times a week than do the other locales. This corresponds with the popular image of rural communities having particularly strong social networks. In contrast, but again conforming to stereotype, those in the *urban locale* are most likely to report not seeing neighbours on at least a weekly basis. For the category of least frequent contact with neighbours, less than weekly, the differences are statistically

significant (Pearson Chi-square=8.70, $p=0.01$)¹⁷. Infrequent contact is an indication of vulnerability to social isolation. Those who reside in the *urban locale* may be considered to be most at risk of loneliness.

The high proportion of respondents in the *urban locale* reporting less than weekly contact with neighbours appears to support suggestions that older individuals in urban areas are particularly at risk of social isolation (Victor 1996). However, given findings in earlier chapters regarding proximity of family, it is also consistent with the hypothesis that people are more likely to develop local social networks where they do not have family immediately available in contradiction to other research that indicates that having nearby kin increases the size of friendship networks (Harper 1987). The difference may reflect no more than different needs of individuals in contrasting contexts of their locales, and simply demonstrates how agency *reflexively* responds to overcome the constraints of social structures, tapping into and developing social networks.

Spatial structures are not the only factors that constrain or facilitate interaction with others from the local community, social factors also play a role. Bivariate analysis of individual characteristics demonstrates other statistically significant associations. In the previous chapter, gender was shown to influence the use of informal support by survey respondents. Gender also proves to be important in the context of local social networks, with females being significantly more likely than men to see a neighbour on at least a weekly basis (Pearson chi-square=4.74, $p=0.03$)¹⁸, supporting findings elsewhere (Pickard 1994). However, this finding counters the idea that non-kin support will be substitutable where family are not available for all individuals. The analysis of the previous chapter points to men using less family support, and it seems that men also have a greater propensity to be isolated from the local community.

However, this preliminary analysis needs to be treated with caution. Individuals' behaviour may not correspond with what would be suggested through inference from aggregated data. For example, it may be that those men who are highlighted as having less than weekly contact with neighbours are actually those who have family support. Similarly, those in the *urban locale* who appear from the analysis of contact

¹⁷ Tables and calculations shown in Appendix H.

¹⁸ Tables and calculations also shown in Appendix H.

with neighbours to be more socially isolated may be the ones who have family nearby. To better understand these issues needs a method that brings together these different facets. Hence, I once again use multivariate techniques to explore the complex relationships in the next section.

Section 7.3. Substitutability and place

The sub-sections that follow will use a set of models to investigate in more detail differences between locales in terms of social capital, specifically the extent to which respondents have at least weekly contact with neighbours. This will also give insight into the issues of substitutability of the local community when kin are not available. The first model is a simple bivariate analysis that demonstrates the significant difference that is evident between places. Each model thereafter, discussed in a separate sub-section, builds on the preceding model, each progressively adding additional variables to better explain why respondents see or do not see their neighbours on at least a weekly basis. This approach also provides the chance to better understand the interrelationship of these different facets to one another. The second model adds demographic and geographic information, mainly relating to family support. The third model then includes measures of individuals' mental and physical health. Finally, the fourth model includes indicators of community, in particular respondents' perceptions to others living nearby, and migratory stability.

Section 7.3.1. Place and interaction with neighbours

Table 7-1 shows model 1 which is the basic model, and takes into account no factors other than which locale a person comes from, using respondents from the *urban locale* as the group against which those from the other two locales are compared. It highlights a statistically significant difference based on place of residence exists between the *urban* and the *rural* locales ($p < 0.01$), with the odds of seeing a local neighbour at least weekly considerably higher in the *rural locale*. The difference between the *urban* and *retirement* locales, however, is not statistically significant ($p = 0.16$). The significant difference between the *rural* and *urban* locales fits with the stereotypical view of the rural idyll of close-knit communities. However, it does not take into account the personal characteristics, and tells us nothing about what

constrains or enables the development of social networks.

Section 7.3.2. The influence of demographic characteristics

Individual characteristics and socio-demographic variables are added in model 2 (Table 7-1). These additions are included to better understand why the contrasts between locales exist and the extent to which the composition of the population explains the geographic differences. Their inclusion reduces but does not eliminate the significance of the *rural-urban locale* difference ($p=0.02$). The interrelated nature of the geographical and sociological again are demonstrated to impact on the lives of older individuals.

The only added variable which, with all other aspects in the model controlled, is significantly associated with at least weekly contact with neighbours is occupational group ($p=0.04$), those in the higher category having an odds of seeing a neighbour at least weekly more than twice that of the lower group (odds ratio=2.44). This tallies with findings elsewhere that show people in higher social classes to have wider social networks than individuals in lower classes. Arber *et al.* (1992) show that extra household support is most often provided by those who have access to a vehicle. Such a finding may be being reflected in the answers given by the respondents in the survey I report here. Even journeys of relatively short distances to visit others in the community may be impeded by not having a car. Additionally, others may be in less of a position to visit if they themselves do not have their own transport. Once again, the agency of the respondent is constrained by their situation, and to a greater degree than would have been the case in their younger life.

Table 7-1 Logistic regression models of at least weekly in-person contact with others from respondent's local community (models 1 and 2) ¹.

		odds ratio	sig.	-2 log likelihood
model 1	urban locale		0.02	166.09
	retirement locale	1.75	0.16	
	rural locale	4.90	0.01	
	Constant	0.57	0.05	
model 2	urban locale		0.08	158.59
	retirement locale	1.39	0.45	
	rural locale	4.03	0.02	
	female			
	male	0.41	0.10	
	not married			
	married	0.62	0.38	
	occupational groups 4-8			
	occupational groups 1-4	2.44	0.04	
	number of living children	0.81	0.19	
	does not live within an hour of at least one child			
	lives within an hour of at least one child	0.77	0.71	
	less than weekly contact with children			
	weekly contact with children	0.63	0.48	
Constant	1.42	0.65		

Outcome variable: sees neighbour at least once a week.

¹ includes all respondents (n=130).

When considering access to a car, there are potential interactions with gender. Several female interviewees mention that they do not have access to a car, or are unable to drive. The converse is or was generally true for their husbands. Here Betty, a resident of the *retirement locale*, mentions the issue of driving.

Iain: Do you drive, yourself?

Betty: Drive everybody round the bend (laughs). No.

Iain: You've never driven a car. Did your husband drive?

Betty: Well [her husband] drove...And young [her son], he drives.

A similar situation was the case for Ruth, an interviewee from the *retirement locale*.

Ruth: Drive? No, I've never driven...My husband never drove either. He never had a car. But my brother, he'd a car.

And again, in another of the in-depth interviews, both the gendered and socio-economic aspects of driving are touched on.

Susan: No, I don't drive, no. I never did drive. Then of course my husband passed away it wasn't easy to keep a car then. Very expensive, especially now.

The last point that Susan makes underlines that car ownership is dependent on socio-economic situation, and is a reason suggested by Arber and Ginn (1992) for those in higher occupational groups having more frequent contact with others. The increasing proportion of the population in higher socio-economic groups, and generally greater accessibility to cars across social classes and genders, has the potential to strengthen social networks. Conversely, if the costs of motoring increase, the impact is likely to be particularly felt by older members of society. Social structures and time together alter the relationship between the individual and wider spatial structures. Having a car provides the individual with greater ability to overcome geographical constraints on visiting others, including family. For example, here one interviewee comments on seeing her extended family despite living a distance from them.

Jennifer: oh yes, we see a lot of them. I'm probably in [town some 60 miles away] probably once a fortnight.

Iain: You drive now?

Jennifer: I drive, oh yes, and eh, they're up here quite a lot as well.

Jennifer is able to take the initiative herself to go and see her children. She is not dependent on them coming to see her, although they do this as well. The relationship between structure and agency is not static over time. The degree of ability to take actions may thus increase in future years as the increased opportunities of women to learn to drive increases. There are also implications for the ability to see friends, as is indicated by the statistically significant contribution of occupational status in favour of those in categories 1-4 (Table 7-1, model 2).

The interaction of personal mobility, in the form of access to a car and ability to drive, socio-economic situation and temporal trends demonstrate the complexity of the relationship between structure and agency. The ability of individuals to enact a decision to visit family or friends is constrained by their situation in time, space and society. For women born in the early to middle parts of the Twentieth Century, opportunities to drive have been far more limited compared to opportunities for women born later. Similarly, the affordability of such mobility has, in the past, been beyond the means of a considerable proportion of the population. Lifetime experiences, and wealth developed through the life-course contribute to the ability to maintain contact with others. Greater accessibility to personal transport may constitute a contemporary development that increases social interaction, and potential trust and reciprocity.

Other variables entered into model 2 have no significant association with having at least weekly contact with others. Several of these non-significant variables give evidence to suggest that there is *not* substitutability between kin and non-kin. The included measures of strength of family support might be theorised to be associated with seeing neighbours on at least weekly basis, but none prove to be significant. The number of living children a person has ($p=0.19$), living within an hour of a child (0.71), or seeing a child at least weekly ($p=0.48$) might all be hypothesised as

being associated with developing social networks with non-kin, either positively or negatively, but none are significant. Running the models with only one of these three factors at a time does not alter the lack of statistical relationship. There is thus no evidence from this model to suggest that having either more or less contact with adult children influences the contact respondents have with their geographically nearby community, positively or negatively.

Another finding that counteracts ideas of community substitutability for family is forthcoming from the inclusion of marital status in the model. Not having a spouse, were there to be substitution occurring, would result in an increased likelihood of visiting or not visiting neighbours, but this also is not found to be the case ($p=0.38$). There is therefore no indication that not having a husband or wife leads to greater interaction with local non-kin. Again, a null hypothesis, suggesting that there is no association between weaker kin support and stronger community networks, is given credence.

Surprisingly, gender has ceased to be a significant factor ($p=0.10$). As discussed earlier in this chapter, bivariate analysis highlights a statistical association between a person's gender and their use of social networks, something found not only here, but also elsewhere. With the other variables controlled, in particular marital status, the association becomes non-significant. A far higher proportion of the females in the sample are not married (widowed) compared to men. In large part, the significance of gender is affected by controlling for marital status, even though marital status is not in itself a significant factor. An explanation as to why this should be is that marital status mediates the effects of a person's gender. Only on being widowed do men suffer the effects of being widowed. Nevertheless, the inclusion of an interaction term does not provide a significant result, although the lack of significance may be due to the small number of widowed men in the sample. A larger number of respondents might have demonstrated the ways in which marital status and gender interact with one another.

Despite adding social and demographic variables, model 2 shows only a small improvement on model 1 in predicting the outcome. The basic model (Model 1) was able to predict 58.9 percent of the outcome variable, 'sees neighbours at least once

a week'. Model 2 accounts for 62.8 percent of variance in this outcome and shows that some contrast between locales remains once other factors are controlled, the difference between the *rural* and the *urban* locales still being significant ($p=0.02$). Furthermore, the issue of health has not yet been considered, an important omission where questions of substitutability are concerned.

Section 7.3.3. The effects of health on interaction with neighbours

Model 3, shown in Table 7-2 builds in two additional variables to represent health, one for physical health, and the other for psychological well-being. I have used the General Health Question because it reflects to a greater degree a holistic sense of a respondent's health, broader than simply using the Instrumental Activities of Living or Activities of Living scores (Grundy and Sloggett 2003). This variable is formed by aggregating responses into two groups: those who specifically state that their health is bad or very bad, and the rest who declare themselves to be in fair health or better. Psychological well-being is also represented by a binary variable, using the Geriatric Depression Scale to indicate a person's mental health status, with, as is conventional, those scoring 4 or more being adjudged to be depressed (Sheikh and Yesavage 1986).

Table 7-2 Logistic regression models of at least weekly in-person contact with others from respondent's local community (model 3) ¹.

		odds ratio	sig.	-2 log likelihood
model 3	urban locale		0.18	149.99
	retirement locale	1.40	0.46	
	rural locale	3.25	0.06	
	female			
	male	0.31	0.04	
	not married			
	married	0.63	0.41	
	occupational groups 4-8			
	occupational groups 1-4	2.90	0.02	
	number of living children	0.73	0.06	
	does not live within an hour of at least one child			
	lives within an hour of at least one child	0.79	0.76	
	less than weekly contact with children			
	weekly contact with children	0.65	0.53	
	health fair to very good			
	health bad or very bad	2.90	0.05	
	not depressed			
	depressed	0.30	0.01	
	Constant	2.16	0.36	

Outcome variable: sees neighbour at least once a week.

¹ includes all respondents (n=130).

An examination of model 3 findings indicates that physical and psychological illnesses have differing implications for contact with neighbours. Being in poorer physical health results in an odds ratio of 2.90, signifying increased likelihood of seeing a neighbour at least weekly. Although this result is not statistically significant, it is so close to being so and thus a possibility that a larger sample would confirm the association ($p=0.05$). Those who are depressed, however, have an odds ratio of 0.30, indicating a lower likelihood of seeing a nearby resident at least weekly, which is significant ($p=0.01$). These results suggest that there are differences in the support utilised from members of the local community depending on whether ill health is of a mental or physical nature. Having poor physical health appears to increase community support, whilst mental health problems reduce it.

Caution is needed in interpreting these results. The cross-sectional nature of the data limits the ability to draw conclusions about causation. It may be that those who do not receive visits from their local community become depressed; being more isolated may lead to people becoming depressed, an explanation consistent with Wenger's findings regarding negative moral and meeting others (Wenger et al. 1995). Alternatively, depression may cause the isolation. Both directions of causality are plausible and not mutually exclusive; there may be an element of both explanations reflected in the findings. Further research is required to examine the links between depression and isolation, an especially pressing issue given current social trends alongside the high proportion of respondents to my survey who gave answers indicating depression.

As is found in model 2 in Table 7-1, there is no indication in model 3 in Table 7-2 of substitution of community support for family, with no significant effect being found either for those measures indicating intergenerational support, or of having a spouse. The number of living children a person has makes no significant difference to their likelihood of seeing neighbours on at least a weekly basis ($p=0.06$), and this is notable since the sample used includes those with no living children. The measures of geographical proximity to children ($p=0.76$) and frequency of intergenerational kin contact ($p=0.53$) similarly have no statistically significant effect. Marital status also has no effect on the integration of the individual with the community ($p=0.41$). A significant finding for any of these measures would have suggested that non-

family who live locally step in where kin support is less available. However, no evidence to support such a hypothesis is found.

Gender, statistically non-significant in model 2, becomes significant in model 3 once the health variables are added and controlled, with an odds ratio demonstrating that women are more likely to see their neighbours on at least a weekly basis (odds ratio=0.31, $p=0.04$). The suggestion is that once health is controlled, women are more likely to receive the support of their local community. The strength of their social networks are such that, when times occur where having others drop in becomes so much more crucial, they are able to rely on others, much in keeping with the suggestions of Pickard (1994). Thus the extent to which an individual is able to turn to others is influenced by their personal characteristics. The ability of a person to look to others, and to take advantage of the social capital of the locale within which he or she resides, varies according to the gender of the individual, once local context and other factors are taken into account.

Even with health variables included in the model, social class, measured using occupational group, remains a significant predictor, with those in the higher groups having a greater likelihood of having at least weekly contact with others (odds ratio=2.90, $p=0.02$). However, a notable change that adding the health variables does make is that there is no longer a significant difference between the *urban locale* and *rural locale* ($p=0.06$). Where in model 2 there was evidence of a much lower risk of social isolation in the *rural locale*, the same is not found in model 3. Respondents from both locales are equally likely to see others on at least a weekly basis. This finding provides evidence for a local scale community effect where generally poorer physical health is responded to by neighbours. Just as Glaser and Grundy (2002) suggest that differences in levels of informal support between social classes are the result of contrasts in experiences of health, so too are the geographical differences in neighbourhood support. Such a finding indicates that informal support from non-family sources is responsive to need with regard to physical health.

Yet the converse is true where depression is concerned. Whether the direction of causality is depression leading to isolation, or *visa versa*, findings here provide a cause for concern. A large proportion of the sample, 33.8 percent, answered the

Geriatric Depression Scale questions in such a way as to indicate they are depressed. A decline in social capital that effects the older population has the potential to increase the prevalence of mental health problems. The findings emphasise the complexity of the links between social capital and well-being. Whilst there are positive indications that neighbours can and do play a role in supporting those with physical illnesses, the same cannot be said where mental health is concerned. Ability to draw on others who live locally will be affected by a myriad of factors, the nature of health problem being a notable constraint or facilitator.

The fit of the model has once more been improved by the addition of the health variables. Where model 2 predicts 62.8 percent of variance, model 3 predicts 68.2 percent. However, I have thus far not attempted to introduce variables that indicate the level of social capital in each of the three locales, and this is addressed in a further model.

Section 7.3.4. Social capital and informal support

Model 4, shown in Table 7-3 includes several variables that provide an indication of the level of social capital found in each of the locales. Firstly, the extent of residential stability is indicated by inclusion of the number of years that respondents have lived in the local area. More specific indication of attitudes towards the locality are included using Likert-type responses to questions regarding the extent to which the area is perceived to be safe, that others will help if needed, and that neighbours can be trusted. The answers given to these questions are used as linear variables, with higher scores suggesting more positive responses.

Table 7-3 Logistic regression models of at least weekly in-person contact with others from respondent's local community (model 4) ¹.

		sig.	odds ratio	-2 log likelihood
model 4	urban locale	0.031		137.063
	retirement locale	0.180	2.006	
	rural locale	0.010	7.645	
	Female			
	Male	0.107	0.384	
	not married			
	Married	0.452	0.630	
	occupational groups 4-8			
	occupational groups 1-4	0.002	5.593	
	number of living children	0.023	0.659	
	does not live within an hour of at least one child			
	lives within an hour of at least one child	0.699	0.731	
	less than weekly contact with children			
	weekly contact with children	0.337	0.480	
	health fair to very good			
	health bad or very bad	0.036	3.441	
	not depressed			
	Depressed	0.006	0.226	
	others in local area can be trusted	0.009	2.384	
	others living locally will help if needed	0.989	1.005	
	local area is safe	0.404	0.778	
	years lived in area	0.061	1.018	
	Constant	0.153	0.076	

Outcome variable: sees neighbour at least once a week.
¹ includes all respondents (n=130).

The addition of these different measures of social capital leads to the difference between *urban* and *rural* locales once again becoming significant, with an odds ratio suggesting a much greater likelihood of seeing neighbours at least weekly in the *rural locale* (odds ratio=7.65, $p=0.01$). The finding once more fits with popular perceptions of more supportive relationships being evident in more rural areas. However, the reasons why differences should again emerge are complex. Few of our measures of social capital are themselves significant. The one exception relates to the perceptions of others in the local community as being trusted (odds ratio=2.38, $p<0.01$). Once again, the direction of the relationship cannot be deduced from the cross-sectional survey data. It may be that individuals who have a high degree of trust towards others are more likely to visit or be visited. Conversely, seeing neighbours on a regular basis may lead to a greater degree of trust. In other words, the high degree of social capital that seems to be present in the *rural locale* may be the result of the structures that lead to frequent interaction, or the cause of visits to and from others living locally.

The association between trust and seeing others on at least a weekly basis is not a surprise. However, the other questions pertaining to social capital counter-intuitively fail to demonstrate significant associations. Perceptions that others will help if needed are shown to have no statistical association with interaction with others in the local community ($p=0.99$), suggesting that normative values distinguish between interaction with others and assumptions that they will provide help if needed. The suggestion is that respondents place limits on what they expect of their neighbours, even where relationships are relatively strong as marked out by relatively frequent contact.

Perceptions of the local community as being a safe place to live are also found not to be significantly associated with seeing others on at least a weekly basis ($p=0.40$). Again, this is surprising as it would be reasonable to assume that frequent interaction would be associated with a greater sense of security. The non-significance indicates that the relationship between individual and local scales is complex, with distinctions being drawn between specific relationships and the wider community more generally. A greater trust in others is not reflected in a lower likelihood of social isolation,

neither is distrust associated with not seeing others more often. Perceptions of local community are thus detached from experiences of 'embeddedness'. Social capital is a complex concept, and distinction needs to be drawn between specific aspects, including interaction with others and sense of security. Further research is required, but there may even be an intergenerational component to this finding. Simplistic pronouncements of a decline of social capital, such as claimed by Putnam (2000), need to be tempered by recognition of these different dimensions, and implications for individuals in different sociological and geographical situations, including generational aspects.

The final variable added to model 4 (Table 7-3) is the number of years lived in the locale, which also proves to be insignificant when other factors are controlled ($p=0.06$). This is a little surprising, as the assumption might be made that places with high degrees of residential stability would also foster greater interaction. That this is not so indicates that relationships that facilitate support, in terms of seeing neighbours on at least a weekly basis, do not necessarily require long periods of time to develop. An increasingly mobile world will not necessarily be a more socially fragmented one. Indeed, evidence was forthcoming in some of the in-depth interviews that people who migrate into a locale in later life recognise the potential danger of isolation and so make additional efforts to engender contact with others, and become involved with their new communities.

Other variables that are insignificant in model 4 include gender. The findings indicate that gender does not alter the degree to which respondents are likely to see their neighbours on at least a weekly basis ($p=0.11$), surprising given the results shown in the previous model (model 3, Table 7-2). Adding the social capital variables leads to the relationship becoming non-significant, indicating that interaction is more important for the psychosocial well-being of women. Once perceptions of the local community are taken into account, no difference between males and females is evident with regards to contact. However, the lack of statistical significance in the models does not remove the basic relationship, which indicates that, at a time of crisis, males are less likely to have a confident, and are potentially at greater risk of social isolation.

The models presented and discussed in the previous sub-sections have demonstrated the complexity of constraints that influence the extent to which older people are able to tap into their local community and develop networks to protect themselves against the risk of social isolation. The next section considers how migration affects access to social capital.

Section 7.4. Migration, social capital and community

Migration has the potential to weaken social networks. A development of trust and sense of reciprocity will not be instantaneous within a relationship, but are features that may result from friendship developed over a period of time. Indeed Bauman (2001) suggests that increasingly geographically mobile societies will threaten the basis of social capital. However, he ignores the ability of people to *reflexively* recognise their situation, and act in a manner that addresses the threats to their psychosocial lives. The ability of older people to do so is demonstrated by interviewees, though with notable limits imposed by health and class. Additionally, the life-course involves a process of constantly forming and reforming relationships. Migration is only one part of the fluidity of social life, something especially noticeable to us when towards the end of our lives.

In Chapter 6, I discussed the situation of Jan, an interviewee who spends her summer months in the *rural locale*, and spends the winter months with her sons who live in the Central Belt. The in-depth interview with her provides insight into her attitude to people who are her neighbours when she is residing away from her family, and the steps she herself takes to develop her social networks.

Iain: So was it something you made a conscious effort to do?

Jan: Yes, I think, I think so. I had the feeling that you can either sit in a corner and feel sorry for yourself, or you can stick your neck out and get on with things and do things.

Those, like Jan, who migrate in later life may *reflexively* recognise that they do not have the degree of trust and reciprocity with those who live nearby that they would have if they had lived in a community for a longer time. The result is that they make

a conscious effort to go out and interact with their community. In addition, those who move represent a self-selecting group who are more likely to be outgoing and able to overcome inhibitions to developing new relationships. Here Ann explains her attitude towards getting to know others.

Iain: As far as the people are concerned in [village in *retirement locale*] were you able to get to know people?

Ann: Yeah, but I'm a [Central Belt city] gab, that's what they call me here. I talk to a fly on the wall. I actually didn't, em...I actually didn't em mind actually talking to people and things like that, you know.

Ann expresses a confidence in interacting. For her, getting to know others has not proved to be at all difficult. She has always seen herself as having an outgoing personality so that getting to know others did not present a particular challenge. Whether she would have also moved were she less outgoing is questionable. Agents weigh up their own circumstances in making decisions.

Later in the same conversation, Ann makes the point that time moves forward regardless of whether or not a person remains in the same locale. Getting to know others and losing friends is a part of daily life, especially in later years, even for those who are not geographically mobile.

Iain: But most of your friends would have been in the [Central Belt]?

Ann: All my friends were in [the Central Belt], all my friends, but actually, they kept dying off, one after the other, with cancer.

Linda, another interviewee from the *retirement locale* expresses similar sentiments. She, however, is a longer term resident who is having to confront the experience of losing neighbours who have been close friends.

Iain: What about your neighbours. Do you know your neighbours very well?

Linda: I used to know the one across from me very well. She came everyday to say hello, and bring me jellies or whatever she was making. But she died a

month or two ago. The one next door to me died a week or two ago...I'm getting left...it's so sad and I miss them so much...

There is a tendency to see those who are geographically mobile as not having the opportunity to develop relationships with others in their community as do those with more residentially stable life histories. However, the above quotes from the interviews with Ann and Linda underline that loss is a part of life, even where migration does not occur. The life-course involves constant change. Relocating is only an addition to the list of events that can happen, and does at least allow a degree of ongoing interaction. Not moving is no guarantee that friendships will be any more enduring. Loss is a reality of later life that agents have to confront regardless of their geographic mobility.

The ability of agents to address constraints in their own individual situation has implications for the communities into which they move, contributing to structures that can be beneficial to others already resident. Far from leading to more fragmented neighbourhoods, the *reflexive* actions of agents can contribute to the development of communities. Jennifer, a long-term resident from the *rural locale*, reflects on what the immigration of others means for her.

Jennifer: Well, our community has changed too a great deal in the last ten years, but we've been lucky. All the ones who've come into our community are, they're very nice neighbours...some of them you have absolutely nothing in common with, but erm they're nice, you can chat with them and er if they are interested in anything well you know, you can get at least one point where you can touch base with them. But erm, as I say, I think we've been lucky in our community in having nice neighbours.

Similar sentiments are expressed by Susan, another long-term resident from the *rural locale*.

Iain: The people that have moved into the area that you mentioned there, you've been able to get to know them?

Susan: Very well, some, yes, yes, very well, especially the couple who live

nearest me...they're really good friends and both of them you would send for if you wanted help, you know.

Susan's last comment demonstrates the degree to which agents are able to develop trust and rapport with one another, to the extent that Susan places trust in her new neighbours and sees them as a possible source of support if she should need assistance. Whether her sentiments are mutual with her neighbours is not known. However, given the role of *expectations* in psychological well-being (Wenger et al. 1995), the ability to develop a relationship with others even without there being a history of residential stability suggests that we should be optimistic regarding the implications of increased geographical mobility for individuals in later life.

Other interviewees provide further indications of how they were able to act to create their own circumstances, making a point of getting involved with events in their new communities. Here Nancy, another person who moved to the *retirement locale* in later life, explains how she was able to become a part of the community.

Iain: Did you make friends easily when you first moved here?

Nancy: Well, of course with my friend already being here I made friends through her and we worked in Bernardos and Save the Children. I used to do part time in the charity shops working. And you met people doing that.

Iain: So you made quite a lot of friends quickly?

Nancy: Yes, well, more sort of acquaintances. You make friends with people who you're near, who you see a lot of. The others are just sort of people who you need to see and pass the time of day with.

Note that she had a long-term friend already residing in the locale, a point mentioned by several of the interviewees, and also found to occur in English retirement communities in the 1970s (Karn 1977). Hence moving actually helped her maintain or even improve her social network by tapping into those already in place through her friend. Geographical mobility can, therefore, enhance, develop, and strengthen communities, perhaps especially in 'retirement communities'.

Indeed, the people who are perhaps most at risk of social isolation are not necessarily those who move long distances, but individuals who relocate within the general area of the same locale. Ascertaining the length of residence in the locale where the respondents currently live provides an indication of migration in the survey but short distance moves are not captured. Such local relocations do not affect the locale's population composition and have minimal implications for proximity to kin. And are thus not the main focus of interest in this study. Evidence from one interviewee, however, indicates that short distance moves can have implications for informal support. Here Ruth, who has lived in the *retirement locale* since her early childhood explains the effects of her moving from one town to another, a distance of around only 5 miles. She relocated originally to be near her brother whose health was failing, but he died not long after. However, whilst the separation of the two towns is not great, it was enough to effectively disrupt her relationships with neighbours in the place from which she left.

Iain: So do you have many friends that are now in [the current place of residence]?

Ruth: Well, not really, not really...

Iain: And do you still have many friends back in [the town from which she moved] that you stay in touch with?

Ruth: No, not really...I've got the odd one or two, maybe two or maybe three old acquaintances I knew, I get a Christmas card from them, you know, but I'm never out, I'm never out to meet them again, you know.

She has limited personal mobility, both in terms of access to a car and as a result of her health. The manner in which she discusses her friends from the community in which she used to live indicates a large physical separation, such as her contact mainly continuing through annual Christmas cards. Yet very few miles actually separate them.

Several typologies of later life migration highlight that most relocations involve relatively short distances, the result of insecurity of tenure, the need to find more

suitable accommodation after bereavement with its financial implications, or changes in health (Burholt 1999; Wiseman and Roseman 1979). Such moves are not a recent phenomenon, and there is no reason to believe that they will occur more or less frequently amongst the population in the future. Their implications for well-being and interaction with local community may be as important as those of long distance migrants that have been a source of concern to researchers. Hunt *et al.* (2002b) suggest that the retirement communities that attract longer distance migrants that they identify in rural Wisconsin, in the United States, have individuals who are at risk of social isolation, compared to other areas where people have tended to move from points of origin much nearer. However, those moving further are generally drawn from higher socio-economic groups (Hunt et al. 2002b; Litwak and Longino 1987). They are thus likely to have greater economic and personal resources, including good health, that permit them either to maintain their relationships with others or to relocate to live nearer family.

The short distance movers are more likely to be in poor health (physical and psychological) and not to have a car. The same is true of their social groups, the interaction between social and geographical characteristics thus having negative implications for contact with nearby friends. Possibly, the lack of conscious recognition of the effects of moving means that the agents do not *reflexively* consider the need to develop new friendships with those who live in the area into which they have relocated, something very different from the retirement migrants quoted earlier. Short distance migration has been a feature of later life for many older people for at least several decades. The impact of such moves on the older individual's ability to access the social capital of their networks of friends and neighbours is similarly not a new phenomenon. Since the Second World War, the growth of the welfare state has provided another means of providing a substitute for informal support from either kin or non-kin for both those moving long and short distances, and indeed for those who have resided in their community for a long duration, who are at risk of social isolation.

Section 7.5. *Formal support*

The main focus of this thesis has been on the role of informal care and support, namely assistance forthcoming from the intergenerational family or the local community. I have examined substitutability of community for family support and found no evidence. Now I will consider the role of formal services and another form of substitutability. Hours of formal home support, when added to the models above, shows no significant association with 'seeing others at least weekly'. Again, a hypothesis of substitution would predict that not having contact with others would be associated with a higher likelihood of having a greater amount of formal assistance, either because of a direct substitution or because of the protective effect of having contact with others. Nonetheless, formal support services are important, either for the intended aspects of assisting people to remain living in their own home, and/or because of their role in developing social networks. The latter is demonstrated in the in-depth interviews where several older people mention the role of day care centres in fostering friendship networks. Responses are notably gendered, with men being the ones who indicate this important, role of formal social services. For some, adversity, such as ill health, has been the occurrence that has led to the opportunity to get to know others who live nearby. Stan is an older man whose situation was touched upon earlier in the thesis. He moved with his wife from the Central Belt to the *rural locale*, where his daughter lives, when in his 70s. However, not long afterwards his wife began to develop Alzheimer's Disease, something that meant she needed a great deal of attention. She started to use the day-care-centre, which he attended along with her, and from where I recruited him to take part in the study.

Iain: Had you got to know many people before you moved up?

Stan: Eh...not particularly. I mean, near neighbours, yes...you know...but eh...it wasn't until I moved up here and got involved with this [day-care centre]...I just about know everybody now.

Iain: So when you first moved up here, did you get to know many people, em, it was mainly through [the day-care centre] that you got to know people.

Stan: Yes, I got to know a lot of people belonging here you see, and mainly through the centre. I mean I did know people like before I even started to come down here. But I mean you get really involved with quite a number of people from outlying districts, you see, so...

Stan is not alone as a later life migrant in having used a group as a means of getting to know others, and developing relationships with the local community. Graham, who moved to the *retirement locale* after his retirement, explains what the benefit of the lunch club, from which he was recruited to the study, has been to his becoming part of the community.

Graham: I'm quite happy on my own. My daughter heard about this lunch club, so she got in touch with [the organiser] and she came to see me and, so no, no problem. In fact, I rather enjoy it.

Iain: Did you know the people that go before...

Graham: No I didn't know anybody before, no. There is the one fellow, he's, he's an ex ploughman, so he and I have quite a lot in common, you know, country life. I enjoy it, having a crack with him.

Earlier in the chapter, I commented on the role of gender, and of women being able to develop social networks that they can rely on to a greater degree than males. The only interviewees who made comment on developing relationships with others through services or groups were males, indicating that formal services play an important role in their psychosocial lives. At a time of crisis, where their health has declined, they have been able to establish friendships and the psychological support provided through these organisations. Formal and informal support are not entirely separate entities. Neither are social structures immutable. Declining social capital need, if occurring, can be confronted. Furthermore, the experiences of Stan and Graham point to formal services far from substituting for community, actually helping to foster and develop networks of friends.

Section 7.6. Conclusion

The question was posed in the introduction to this chapter: can the local community substitute for the family, given contemporary social and demographic trends? The evidence presented has suggested that currently the family remains the main source of support, and normative values limit the degree to which individuals either expect to receive assistance from or to provide assistance to non-kin. Survey data provides little evidence to suggest that neighbours are more actively involved in the support of older individuals even where simply maintaining contact is concerned. Neither marital status nor measures of intergenerational kin availability indicate that seeing others in the community is any more likely where children or spouse are not present.

These findings contradict the assertions of Qureshi and Walker (1989) who suggest a hierarchy of care, with family being looked towards first, and non-family only turned to where no other alternatives are available. The multi-variate models in this chapter indicate that people do look to their neighbours if they have no family available. Why might this difference exist between the current study and that of Qureshi and Walker (1989)? Two explanations are plausible. Firstly, the interaction of social, historical and spatial structures may lead to contrasts between the two studies. Qureshi and Walker conducted their study in working class Sheffield in the 1970s. It is possible that the community there had particular attributes that lent themselves to a greater degree of substitutability, with a higher degree of community social capital being present. However, many of the respondents to the current survey, particularly in the *urban locale*, were also from lower socio-economic groups, and living in a residentially stable area. There is little reason to believe that they should be any different from the respondents in the Qureshi and Walker study. Another explanation is that the multi-variate methods employed here provide a more effective means of investigating the complex interrelationships involved in support networks. Had Qureshi and Walker used such techniques, they may well have come to different conclusions regarding their hierarchy of care.

Do these findings mean that community can never replace kin? The socio-economic and normative structures that underpin understandings of kinship and neighbourliness are not immutable. The previous two chapters have shown that neighbours are an

important part of the lives of older people, providing assistance and liaising with family, amongst other roles. There is no reason why a growing number of people without children being immediately available should not translate into changing perceptions of social roles in relation to others living nearby. Friends may well come to be relied on to an increasing extent. Further and ongoing research is needed to monitor and investigate attitudes to obligations and expectations of both family and non-family.

Other social changes hold the potential to facilitate community support. Growing car ownership and the ability to drive amongst cohorts now entering older age will assist people in maintaining relationships with friends even where separated by distances that would previously have precluded maintaining meaningful contact. The locale within which a person lives could effectively become larger. Social trends have the potential to not only fracture society, but also to bring it closer together. In the same way that children were shown in the previous chapter to remain an important part of the lives of their older parents even when separated by continents, so too might friendship networks be facilitated by improved means of communication and transport. Contemporary changes will not only have negative implications.

The relationship of the individual to the local community has been demonstrated to be complex. Simplistic statements regarding declines of social capital or otherwise do not take into account the relationship of a person, with unique combinations of personal characteristics, to locales with particular sociological, historical and spatial make-ups. As an example, whilst neighbours have been shown to be more likely to help those who are in poor physical health, the converse is true where mental health is compromised. Such a finding complicates theories of social capital, but likewise also questions assumptions of the relationship between structure and agency. Giddens makes no allowance for the psychological ability of a person to take decisions and affect their situation. The degree of choice people have will differ as a result of their resources, including personal physical and psychological health. A person who is depressed may be less able to take advantage of social networks, be that because they themselves are less able to take the necessary steps or because of the attitudes of others.

A further example of the difference personal characteristics make to an individual's ability to act as an agent is demonstrated by migration. My assumption in this thesis has been that long distance migration will have a negative effect on both family and non-family support, echoing the contentions of Conway and Houtenville (2001), Grundy (1987a), and Hunt *et al.* (2002b). However, older people who make such moves are agents conscious of the possibly negative consequences of their actions. They take steps to ameliorate the potential social isolation. These retirement migrants, as many studies have previously shown, tend to be fit and healthy when moving, and are economically well-off. They are therefore able to affect their situation. Contrast their situation to that of those who make shorter moves. Again, many studies have indicated that these people tend to be poorer, both economically and in terms of health. They are likely to be moving as a response to a decline in health, or the loss of a spouse. As a result, they may be less empowered to act as agents. The constraints imposed by health and poverty reduce their ability to maintain social contacts. It is thus the shorter distance migrant who could be more likely to be socially isolated.

Communities are an important part of the lives of older people, regardless of whether or not they have family living nearby. Measures can be taken to encourage the development of support networks regardless of whether or not they are actually substitutes for informal support from kin. Services such as lunch clubs and day care centres provide an important means of developing friendships for people at a time of life when other long-held relationships are ended as a result of bereavement or declining health. Men are recognised to have weaker support networks (Pickard 1994), a contention for which support have been found in this chapter. With men living longer, the likelihood of a higher proportion of them experiencing widowhood may also increase. In such circumstances, the role of formal services as a means of fostering and encouraging links between older individuals and their communities will become increasingly important. Continued funding for formal services remains essential as part of community building across the generations in the early decades of the twenty-first century.

Chapter 8. Conclusion

Section 8.1. Introduction

In this concluding chapter, I take the opportunity to reflect on the thesis and to draw out its main findings for both research and policy perspectives. The thesis has utilised several innovative approaches. The work has developed from research questions, drawing together from a broad range of literature in geography, demography, sociology and social gerontology. Issues that are too often considered in isolation have been investigated more holistically to identify relationships that might otherwise be overlooked; for example, the links between population mobility and informal support in older age. The thesis has also brought together analyses at different scales, considering what macro-scale trends actually mean for localities and individuals, and conversely what the effects of people's *reflexive* actions are for trends at the national scale. Addressing questions that cross disciplinary boundaries has required the use of methods that also cut across approaches used in previous studies. I have therefore used both quantitative and qualitative approaches in an integrative manner, allowing insights from one to inform analysis using the other, and vice versa. In sum, the thesis has built upon a diverse literature and more than one research method to consider the geographical dimensions of informal care and support.

A number of issues are discussed below. Firstly, given the innovative analytical framework of the thesis, it is timely to reflect on what the findings add to the geographic and social gerontological literature. Secondly, since concerns with the well-being of older individuals motivated this research, the main points of note for policy and practice are discussed. Thirdly, the methods and methodology are reflected on and critiqued, and the extent to which findings can be generalised beyond Scotland considered. Lastly, it is important to critically assess the limitations of this study in order to identify directions for future research. A major contention is that research is an essential part of a caring society's support for its more vulnerable members. Ongoing academic enquiry must continue to engage in the investigation of the lives of marginalised groups, which often include older individuals, if it is to remain a critical part of contemporary society.

In the course of the research that this thesis reports, several points of note for geographical and gerontological research have been demonstrated, many of which have applicability to the social sciences more generally. In the next section, I highlight and discuss some of these findings.

Section 8.2. Informal care and support networks in social and spatial context

Other researchers have identified places that are popular with people at retirement in countries including Australia (Drysdale 1991), the United States (Hunt et al. 2002b; Litwak and Longino 1987), and England and Wales (Law and Warnes 1976). The issue has never previously been considered in the context of Scotland. Analysis in Chapter 5 addressed the question of Scottish retirement migration. Many of the areas identified have much in common with those found elsewhere, though some particularly remote areas were also noted, such as on the Island of Coll, just off the West Coast of Scotland. The study by Law and Warnes suggested that retirement migrants tend to move to destinations within relatively close proximity to their origin so as to enable ease of contact with friends or family. The findings in Chapter 5 indicate that such concerns may be less a constraint now than previously, something consistent with ideas of an *Elderly Mobility Transition*, as suggested by Rogers (1992). The traditional idea of the retirement location may be becoming less of a feature as people consider more diverse locations to retire in.

Much previous work has assumed that areas popular as retirement destinations will also have greater numbers of people who are at risk of isolation, living many miles from their family (Conway and Houtenville 2003; Grundy 1987a; Hunt et al. 2002b). Bivariate analysis of survey data in Chapter 5 provides some evidence to back such contentions, with spatial differences being demonstrated between survey locales in distances resided from the nearest living child and in relation to co-residence. However, such geographical contrasts do not necessarily mean more isolated lives and less inter-generational support, an issue addressed in Chapter 6.

The analysis presented in Chapter 6 highlighted that children continue to remain the main source of support for the respondents to the survey. In all three locales, frequent intergenerational contact was the rule for virtually all, regardless of the degree of

residential stability in the area of residence. However, differences between survey locales were demonstrated using bivariate analysis in line with a hypothesis suggesting that children will have less involvement in providing practical assistance in geographic areas of high migration, namely the *retirement* and *rural* locales, and supporting the contentions of Conway and Houtinville (2003), Grundy (1987a) and Hunt *et al* (2002b). Nonetheless, evidence from in-depth interviews also demonstrated that the intergenerational family remains an important resource at times of crisis. Several respondents discussed how support was forthcoming from children who lived many miles away on occasions such as the loss of a spouse, or on discharge from hospital. Thus, even in the context of people living a considerable distance from a child, perhaps even living in a different country, sons and daughters remain an important resource.

The spatial gendered nature of intergenerational support was also noted both in survey and in-depth interviews. Bivariate analysis of survey data showed that daughters were more likely to be providers of informal support, reinforcing findings elsewhere (for example Ungerson 2000). However, the consideration of what happens where a daughter is not available, for reasons of demography or geography, provides new insights. The gender of children is not important from the perspective of the older person. The question was posed, does having a daughter increase the *frequency of assistance score*, the answer was no. This finding raises the possibility that current trends may lead to a decline in perceptions and expectations of who should provide assistance. However, that daughters were without exception the children turned to at times of crisis, a finding emanating from in-depth interviews, suggests that, paradoxically, gender still remains an important dimension of the provision of intergenerational assistance.

Not only have findings refuted suggestions that increasing population mobility would lead to older individuals being increasingly isolated from family, but they have also contradicted assertions, notably by Bauman (2001), that migration necessarily leads to more fragmented communities with lower social capital. People making moves of greater distance in later life tend to be drawn from higher socio-economic groups. As a result, they generally have greater personal resources, including financial means and better health. As *reflexive* agents, they recognise that moving puts them in a

situation where they have to take steps to develop relationships with their new neighbours. They are in many cases confident and outgoing, and so are not only willing to move residences at a later stage of the life-course, but are more able to develop new friendships. For others, it is the distance to friends that leads them to move, so that they reduce geographic proximity to sources of informal support. Migrating facilitates their maintaining social networks. Indeed, the life-course progresses regardless of whether or not an individual remains in place. An increasingly mobile society thus does not necessarily mean more fragmented communities. People *reflexively* consider where it is in their interests to live and take into account issues such as their own well-being. Confronting the loss of cherished members of social networks is a feature of everyone's lives whether or not they move. Social isolation amongst the older population is an issue in a more mobile society, though not any more than is already the case.

A surprising finding relates not to long distance moves, but those of a much shorter distance. The thesis was predicated on an assumption that it is moves that take people to locales where they have not previously resided that will impact on their support networks. However, those who relocate short distances in many cases do not, as individuals, have the resources of those moving longer distances, either economically, in health, or the presence of a spouse. Their social situation also constrains their ability to maintain contact with friends no longer spatially proximate, as they too are less likely to have the personal resources to enable them to visit. The effects of proximity difference are influenced by the interactions of social situation, which is itself the result of events through the life-course, from birth through to later life.

The finding regarding the effects of short and long distance migration, and their interaction with social characteristics, highlights a methodological finding of note. This is namely that the relationship between structure and agency differ depending on an individual's social situation. In Chapter 3, I argued that understanding contemporary trends and their implications required the incorporation of both the ability of individuals to decide on their own course of action and the constraints within which they had to live. Such a theoretical stance drew heavily on Giddens' ideas of Structuration, though with some qualification. I suggested that the relationships between structure and agency are more influenced by personal

resources, notably health, than Giddens suggests. A person's sociological or spatial situation will have ramifications for the degree to which an individual can determine their own lives. The ageing process, with its physiological and social dimensions, can reduce a person's ability to achieve their desired goals. Similarly, socio-economic situation, with its implications for financial resources and health, affect the degree to which a person can overcome constraints of structure. That short distance migrants may face greater obstacles to maintaining friendships evidences the need to recognise that agency is more constrained for some compared to others,

The thesis has thus used a variety of literatures and methods to gain new understandings of the geographical dimension of informal support. In doing so it has reinforced many of the findings of others, such as the gendered nature of informal support. It has also refuted some of the concerns as to the implications of geographical mobility for informal support, though at the same time has raised new issues with regard to the welfare of older individuals who, because of their lack of personal resources, are less able to affect their own situation. As such, many of the findings have implications for policy, from the national scale down to individual practitioners.

Section 8.3. Policy implications

The thesis has provided insights into informal support that have important implications for formal support. Policy has the potential to create and develop structures that can be utilised by agents to achieve their goals. In discussion of the implications of findings for interventions to help care and support, I will touch on some of the possible developments that can further the agency of older people. As with the conceptual framework outlined in Chapter 1, I will consider implications at national, local and individual scales.

The effects of population ageing, and questions as to how social care can be funded, are a cause of concern for policy makers at a national scale. Murphy and Grundy (2003) suggest that, despite declines in fertility, the coming decades will actually witness greater proportions of people who have at least one living child. However, they do not take into account the implications of the spatial dimension, a shortcoming

that they acknowledge. Smaller completed family size is strongly related to living further from an adult child, as was demonstrated in Chapter 5. However, analysis presented in Chapter 6 demonstrated that despite the spatial implications, having fewer children does not reduce the likelihood of receiving assistance. Additionally, my research has demonstrated that the normative values of kinship, obligation and expectations remain powerful, and can overcome separation even where older and younger generation live in different countries. Sons and daughters, particularly the latter, remain extremely important parts of the lives of older individuals, especially at times of crisis, such as the loss of a spouse, or an acute episode of illness. However, there are limits to the extent to which continued close relationships can be translated into assistance where adult children and their older parents live a considerable distance apart. Where help is required with day-to-day activities, those forms of help measured in the survey, close residential proximity does make a difference. Thus, despite the spatial dimension that may see a decline in close geographic proximity between intergenerational households, the research that I have presented in this thesis reinforces the contentions of Murphy and Grundy, where support at times of crisis is concerned.

There is some evidence that friends do become more important where family are not available, as is suggested at the local scale by the high proportion of *rural* respondents who had at least weekly contact with neighbours, yet as a group were concomitantly less likely to have family living nearby. Normative values are such that it is unlikely in the near future that friends will replace family to any great degree where roles of informal support are concerned. Nonetheless, the community is important both in terms of psychological support, and for the role of neighbours in 'keeping an eye' on the vulnerable elder person.

Future trends will have implications for informal support, both positive and negative. Demographic change will mean that people are less likely to be widowed in the future as previously, as the life-expectancy of men closes to an extent with that of women (Pickard et al. 2000). Increasing divorce rates will lead to more people living on their own, especially women. Moves away from intergenerational households will reduce the likelihood that those who are widowed will share with others, further increasing the tendency to solo residence. The potentially isolating effects of living alone at

a time of life where loss of friends and acquaintances is more likely accentuates the need to develop structures to facilitate interaction. Interviewees have indicated that lunch clubs and day-care centres play a particularly important role in fostering such networking. At both national and local scales, the continued funding, or even further expansion, can promote support that goes beyond the time spent within the centre.

The more frequent social contact characteristic of people of higher socio-economic status compared to those with fewer financial resources indicates other avenues through which greater community support might be encouraged. The ability to drive and access to a car may in part explain the finding. Again, more research is needed into the effects of personal mobility on social accessibility. However, the availability of personal transport does appear to be important. There are positive connotations that can be drawn. The increasing proportion of those in higher socio-economic groups amongst cohorts entering later life suggests that a trend towards a greater role for the community might be forthcoming. Far from declines in social capital, for older generations there may be an increase. There will still remain notable proportions who will not have their own vehicle. Free travel on public transport can help. Income transfers allow a person to afford taxis, so they can enjoy the same degree of independence of movement as car owners, and so provide another means by which policy makers can address constraints of social class.

One of the most concerning findings from the survey was the high proportion of respondents who exhibit signs of depression. This may be in part reflect the method of recruiting the sample. People attending day-care centres and lunch clubs are more likely to be at risk of depression because of declining physical health and a greater likelihood of being widowed. Conversely, they are at least in touch with social services. Others who are not, and are possibly more socially isolated, may be at greater risk. Further research into the social impacts of depression amongst the older community would be useful. However, such a high proportion of mental health problems amongst users of services is in itself an issue to be recognised and addressed. The potential to facilitate greater community interaction suggested above provides openings for which a social rather than medical model could offer ways forward. A starting point is recognition of the problem, from national to individual

scales, from the policy-making community to individual health and social care practitioners.

The findings of the thesis suggest that there may be substitution of assistance from neighbours where family is not resident in the same locale where visiting is concerned. The *urban* locale had the highest proportion of respondents with close proximity of their intergenerational family, and it concomitantly had the greatest proportion of people who did not see a neighbour on at least a weekly basis. Seeing a friend will almost certainly not equate to provision of informal support, given normative values surrounding who should provide assistance. The importance of seeing others for a person's psychological well-being cannot be underestimated, however, as was suggested by the negative association with being depressed. As has been indicated in the in-depth interviews, there is an important liaison role that non-family can play. Additionally, people recognise their situation, and *reflexively* take action to maintain links to others, as demonstrated by the actions taken by those who have migrated in their later years. Whilst the local community will not necessarily replace the family, it can, nonetheless, play a role in assisting those who do not have adult children in the immediate geographic vicinity.

An increasing geographical fragmentation of the intergenerational family will not necessarily represent less supportive relationships. At times of crisis, adult children have been shown to continue to play roles of giving support. Increasingly mobile populations will continue to have values of kinship that will transcend separations. Informal support, however, covers a range of activities, some of which will be less amenable to overcoming more distanced residential location, such as where assistance with day-to-day activities is concerned. The differences that were apparent between locales in terms of *frequency of assistance* from adult children suggests that it is in these areas where greater formal support will be required.

The interactions between the sociological and spatial highlight a particularly difficult problem with regard to social justice. As indicated above, and in Chapter 6, intergenerational support is most intense amongst those who are in lower socio-economic groups. Targeting services to those older individuals most in need, who have no immediate family in close proximity, is a tempting means of using funds

efficiently. However, doing so would mean greater use of resources by those in higher social classes. The Scottish Executive's emphasis on the need to support carers will help in addressing this problem (Scottish Executive 2005). Nonetheless, doing so will require adequate funding to ensure that the needs of all are met, those of people without as well as those with informal support.

An alternative way forward is to recognise the interactions between different groups, and the commonalities between issues. Evidence from a Danish study (Lewinter 2003) suggests that income transfers made to older individuals are passed on to younger people in the form of reciprocity, where effectively payment is made for informal support received. Intergenerational support can include the transfer of income from the older to the younger generation, either as a means of reciprocity for care and assistance, or as part of the normative values embedded in conceptualisations of kinship. Demographic ageing is not in itself a problem if it is viewed in a framework of mutually dependent parts, in which older people are not just individuals who need help but also important contributors to society. Targeting resources at the older population has the potential to create structures that not only enhance their quality of life, but are also inclusive of wider aspects of social justice. Pensions can thus be seen as a means of addressing more than issues of poverty amongst older age groups. Recognising and developing the crosscutting interests of society will also counteract the potential for intergenerational conflict that Preston (1984) suggests will be the result of population ageing with, he claims, greater proportions of older people claiming a bigger share of resources. Such claims ignore the cross-cutting commonalities of intergenerational relationships.

Whilst interventions at a national scale (income transfers and social service funding) and local level (provision of lunch clubs and so forth) are important, there are also findings in this thesis of relevance at an individual scale. A notable part of carrying out this research has been the observation of the dedication and caring attitude of those who work in the field of providing support to older members of the population. The association between depression and infrequent contact with others in the local community is in itself a vindication of the essential work done by providers of day-care centres and lunch clubs. As discussed in the previous chapter, men especially find these facilities to be an important means of developing social networks. The

work done by local providers is crucial, and adequate funding is therefore essential.

Another finding of importance is the effects of short distance migrations. The claim is tentative, and more research is required that addresses the specific problems encountered by older people when they relocate to a nearby residence. Shorter distance relocations are the most frequent moves made by older individuals (Burholt 1999), and they may also be the most detrimental to psychosocial well-being. An awareness of potential problems is once more the starting point for care planning that can address these issues. Interventions such as ensuring home visits in the early stages after a move, or increasing time available at support centres, are means by which formal support workers can assist the adjustment process.

Section 8.4. Method and methodology

The conceptual framework developed in Chapter 1 emphasised the need to incorporate scale into research. To what extent has such a contention been validated by the work that has followed? Connections between different scales have also been a key theme of this thesis. National trends have been a major focus of social scientists, especially demographers, including such work as that of van de Kaa on the theory of the Second Demographic Transition (Van de Kaa 1987). Such work clearly sets out ideas that will have implications for individuals. However, the analysis of effects for people's lives have thus far been poorly developed. As I have shown through the forgoing chapters and discussed above, the interactions of facets of the society mean that effects of large scale trends are not the same for all people, or in all places, even within the same country or locale. "Average" figures, whilst providing a snapshot of the national situation, do not necessarily reflect the situation of all localities, or of the people there resident. Temporal trends, such as those that underpin the theory of the Second Demographic Transition, are no less likely to have a spatially uneven development.

A key part of this thesis has been the selection of three locales that have different migration patterns, identified using national scale data and largely reflected in the analysis of the local scale survey and insights provided by interviewees in in-depth interviews. The *retirement* and *rural* locales both proved to have relatively high

proportions of older people who moved into the areas in their later years, and notable proportions who had lived in the same area most of their lives but whose children lived some distance away. The third of these locales, the *urban*, in the main, had a much more geographically stable population. These places will have much in common with others that share similar patterns of age-specific migration. The implications for local demographics, and proximity of intergenerational residential proximity, will be reflected elsewhere. This said, the interaction of the *sociological*, *spatial* and *historical* will also lead to differences. In the same way that Hunt *et al* (2002b) identified differences between retirement areas in the United States, so too there will be contrasts evident from one retirement locale to another in the Scottish context. Similarly, rural locales and urban locales will also exhibit differences from one part of Scotland to another. Local contexts will lead to subtle differentiation.

The cross-sectional nature of the survey data is limiting as regards identifying cause and effect. The use of in-depth interviews has gone some way to providing insight into the temporal dimensions of people's lives. As indicated in the previous section, however, there are findings from the survey where cause and effect cannot be ascertained. Such difficulties underline the need for longitudinal datasets that include adequate numbers of people in later life. Surveys intended for groups of people who are in poor health, and who may be socially isolated, have very specific requirements in terms of methods, and are resource intensive. Given the demographic changes occurring, such secondary resources are desperately needed if social sciences are to better understand the implications of ageing in contemporary Scotland. Large panel studies that cover the whole population are useful, but numbers are too small once disaggregated into specific cohorts. The English Longitudinal Study of Ageing will shortly become available (English Longitudinal Study of Ageing 2005), and the Bangor Longitudinal Study of Ageing has demonstrated considerable benefits to social gerontological research (Wenger et al. 1999). The Scottish context has commonalities with other parts of the United Kingdom, but it also has aspects that are unique. As has been demonstrated in this thesis, place matters. Spatial and social structures in different parts of Scotland require data that is specific to place. Devolution has also brought about policies that are specific to Scotland, bringing a need to have data specific to its population, and the opportunity to analyse the effects

of the actions of the state. Longitudinal studies take years to come to fruition. The development of a Scottish Longitudinal Study similar to that of the Office for National Statistics is welcome, and will provide the opportunity for social gerontological investigation. However, given the needs of an ageing population, a Scottish study specifically addressing ageing needs to be initiated in Scotland at the earliest opportunity.

Until such resources become available, which will be many years at least, other methods must be used. Furthermore, as argued in Chapter 4, even with the availability of suitable datasets, there will always be a need for primary data collection to address specific research questions. The use of a mixed method approach has been demonstrated to provide insight into informal support networks, especially with consideration of the ontological stance that I have taken. The survey demonstrated the effects of a child's gender on their role in assisting parents who are in poor health. Many of the interviewees discussed the help they received from their daughters at times of crisis. None of them specifically stated that they turned to their child specifically on the basis of gender. The normative values that influence such decisions operate in such a way that agents rarely recognise their existence. Both the quantitative and qualitative analysis, however, indicate that where more intensive help is needed, it is daughters to whom people turn for support. The use of the two methods has therefore provided both additional insight and verification of different points.

Using in-depth interviews provided unexpected insight, critiquing some of the assumptions on which the methods were developed. A clear example is of the effects of short distance moves. These have no effect on spatial demography, but have considerable impact on the lives of individuals who, because of their socio-economic situation, are less able to cope with the constraints such relocations bring about. Their reasons for making moves are less out of choice than enforced by insecurity of tenure, widowhood, or health (Burholt 1999; Wiseman and Roseman 1979). The consequences are also something they are less in a position to cope with.

The potential implications demonstrate a methodological finding, specifically the ontological basis provided by structuration theory. Giddens argues that people

always exercise agency, that they always have choice in a given situation. I suggested in Chapter 3 that he overplays this claim, and that structures can constrain to an extent that leaves the individual unable to influence the course of events. The interviewee who was unable to maintain contact with her neighbours of old was, because of her health and lack of resources, could not stay in touch to the degree previously possible however much she may have wished. Had she had greater personal resources, then she would have been able to maintain contacts, and possibly develop new friendships in the community in which she has recently settled.

The negative association between depression and contact with neighbours also raises questions as to the degree to which people are able to exercise agency. Whether because of their own mental health, or attitudes of the community, their psychological situation places boundaries on their ability to interact. To an even greater degree, if it is lack of contact that leads to depression, then the agency involved is questionable. People do not choose to be widowed, or to be depressed. If it is isolation that is the cause, then not seeing others is something effectively beyond the control of the individual. Again, consideration of the degree to which agents can choose suggests that more recognition is needed of the role of structures for individuals in particular situations where they are denied resources, including economic and mental well-being.

To what extent are the findings generalisable beyond Scotland? The trends towards older populations are a feature at a global scale. Below replacement level fertility rates and rising life expectancy amongst older age groups are occurring in countries other than Scotland. Dependency ratios, the proportions of people who are in the later years of their life-course in comparison to those of working age, as a result are increasing across much of the world. The implications of these demographic trends are of concern well beyond Scottish context. Lessons learnt from research therefore have the potential to be of interest beyond the country of focus. For example, migration is a feature everywhere. Age specific migration profiles have a remarkable similarity across the globe (Boyle et al. 1999). Spatial structures are demonstrated to lead to uneven local demographics in the United States (Fuguitt and Heaton 1995), in much the same way as they do in Scotland, and there is no reason to believe that similar uneven population ageing will not occur to a greater or lesser extent

everywhere. Spatial demography will as a result very likely differ at sub-national levels. There is a need for research to investigate the specific situations of individuals in different parts of a country. Many of the findings that emanate from my research thus raise questions as to the implications of contemporary trends for people living in other countries.

In summary, the use of quantitative and qualitative methods together has provided a means by which the strengths and weaknesses of the two approaches can be addressed. Quantitative methods have provided insight into underlying structures influencing the use of informal support, such as gender. In-depth interviews have provided the chance to gain a more detailed and temporal view of the processes leading to drawing on family or the local community for support, and to critique some of the assumptions on which the analytical framework was developed. The effects of short distance moves were unexpected, and thus not included in the study design. The potential negative effects of such moves raise questions that future research should address.

Section 8.5. Future research directions

What limitations have there been to the study presented in this thesis? The recruitment of a representative sample has been constrained by the lack of an adequate and accessible sample frame. The ethical needs of the study also necessitated that people who have cognitive problems were excluded from the survey. As a result, I have had to rely on a 'convenience sample' drawn from services such as day-care centres. Using such an approach will inevitably have led to some bias. Older individuals who have adequate informal support are less likely to use such services, and so concomitantly will have a lower likelihood of inclusion in my study. Similarly, there is a very real possibility that those who are particularly socially isolated, and thus not accessing formal services, will also not be included. The difficulty of recruiting an adequate sample has also resulted in smaller numbers than would have been ideal. A possible way forward would be the investigation of administrative datasets to a greater degree than has thus far been employed. The benefits of Hospital Episode Statistics for epidemiological investigation has been demonstrated (for example Adak et al. 2002; Dixon et al. 2006; Hewson 2005;

Jarman et al. 1999; Marshall et al. 2004; Thompson et al. 2004). The development of methods and use of such data may provide a means by which some of these limitations could be addressed. Nonetheless, small-scale surveys and in-depth interviews remain essential for addressing questions for which larger scale datasets are not available. For example, addressing issues of intergenerational residential proximity at the local scale could only have been done through primary data collection.

Sample size is a consideration with regard to findings from both the survey. Type II errors cannot be ruled out. Insignificant results may have occurred where genuine difference exists. For example, Chapter 7's logistic regression analysis of contact with neighbours suggests no significant difference between the *urban* and *rural* locales once health is taken into account. The small samples are a function of the need to use face-to-face interviewing to encourage participation and maximise data collected. I stand by such a rationale, despite the smaller statistical power. There are costs and benefits to any approach. Nonetheless, some caution needs to be exercised with those findings that are not significant.

I have addressed this issue of the small sample size in the analysis in Chapter 5 by combining the *rural* with the *retirement* locales. Nonetheless, the two areas have very different geographies, for example in terms of migration patterns. Other features also differ, notably the distance people reside from services. Future research is required that focuses specifically on the issues of remoter areas and that specifically set out methods that ensure such geographic areas are represented so that datasets can be disaggregated and their specific issues focussed on.

Findings from the in-depth interviews also need to be treated with caution given the relatively small number of interviewees. Is the respondent who has difficulties maintaining contact with friends after a relatively short move simply an unfortunate but unusual case? There is a strong theoretical basis to be made to suggest that she is not. The generalisability of this woman's experience to others requires further research. Such investigation needs to establish whether this occurrence does occur more widely, and whether there are particular circumstances that lead to shorter

moves acting to socially isolate.

A lesson from this particular limitation is the benefits of using in-depth interviews alongside survey or secondary data analysis, in that it provides the opportunity to critique quantitative methods and findings. In the case of this research, qualitative work has brought out surprising issues that the questionnaire tool was not designed to address, in particular the effects of residential moves within the same locale. The inclusion of questions that would permit investigation of short distance migrations would have allowed more detailed examination of moving within locales for ongoing relationships to friends. However, any survey will inevitably be constrained by the practicalities of finite time and keeping questionnaires to a reasonable length

Other research questions arise from issues relating to the spatial dimension of social gerontology. Increasing population mobility is not only a national issue, but also international. People who moved to Scotland in past decades are now entering their later years. The impact of the Scottish context on their availability of family and community support, the potential being socially isolated, and access to formal social and health services all need to be considered by social sciences. Similarly, Scots who have moved to other countries, often at retirement, and return at a later date raise questions about their well-being, and relationships to others, family and non-family.

The study was carried out largely from the perspective of the older person. As a result, little has been elucidated regarding the attitudes of children towards their roles and responsibilities, or the effects of intervening geographic distance. A refinement to the conceptual framework would be to draw on the situation of members of the intergenerational family or community to a greater extent. For example, the views of neighbours towards older members of their community are important. My work has shown that retirement migrants make a considerable effort to integrate in their new place of residence, which is often largely successful. Insight from the point of view of those who have aged in place would add considerably to my work.

Migration patterns across Scotland are ever changing. Rogers (1992) suggestion of an Elderly Mobility Transition raises the potential that retirement locales such as I have identified will become less a feature of retirement migration. People will choose

much more diverse destinations than has been demonstrated in my study to have occurred in the 1980s and 1990s. Ongoing monitoring of later life migration patterns is therefore needed, as is investigation of what the implications of going to a place that does not have the structures of a 'retirement location'. The interviewees in my study indicate how having others of their own age group in the vicinity, some of whom were also later life movers, and opportunities such as lunch clubs, facilitated them to settle. Effects of not having such facilities to the same degree raise new research questions.

Other trends are evident that threaten informal support, but also raise possibilities of new structures developing. Women are increasingly likely to be involved in full-time employment and thus have less opportunity to be providers of care to their parents. I have shown how gendered stereotypes are challenged. No difference was found in Chapter 6 in the likelihood of sons or daughters providing support once aspects such as number of children were taken into account. A similar effect might occur where the obligations towards formal work means that a daughter is not the sibling in the best position to provide support, and that it is to one of her brothers that the responsibility will fall. Another limitation of my study, with its emphasis on the older individual, is that the survey included little detail of adult children, their spouses, or of grandchildren. For example, what are the implications of differences in social class between generations of the same family?

Social change also raises questions pertaining to roles beyond the immediate family. I have based my analysis mainly on support that adult children and neighbours provide. There are good reasons for having done so, particularly given concerns regarding the implications of population mobility and demographic ageing. However, the wider family may also play an increasingly important part in supporting older kin. The move towards 'bean pole families', for example, might lead to grandchildren or even great-grandchildren becoming more significant in the networks on which people can rely in later life. Questions therefore arise as to what extent such family structures will be a feature of the Scottish population, the effects of migration on proximity and intergenerational relations across several generations, and the degree to which these new forms of family will act as carers.

Questions pertaining to changing roles also call for further research into the substitutability of non-family for family. Studies are needed that specifically focus on whether people are able to turn to friends or acquaintances if he or she does not have recourse to kin, be it for reasons of demography, geography or simply because they do not get on. My data collection utilised specific categories to identify help from family whilst open responses regarding support from neighbours were coded later. This approach cut down on the time required for questionnaire completion and so facilitated participation and ensuring a reasonable sample size. The drawback is that categories needed to be kept reasonably wide to allow comparison. In Chapter 6, I simply coded all help from neighbours into a single binary variable, yes or no. Future research that specifically focuses on substitutability should use more detailed questions that are consistent for family and non-family to aid direct comparisons.

Demographic trends also offer other new openings for informal support, some of which I have touched, others also open up avenues of research. Increased levels of divorce will mean that more people will enter later life without a spouse. However, such changes also affect younger generations. The importance of intergenerational support, for younger and older, may thus be perpetuated, not constrained, by such developments. Increasing numbers of individuals opting for relationships such as 'Living Apart Together' (LAT) relationships open up potential for new forms of mutual support, where the boundaries between 'family' and 'non-family' become increasingly blurred. The recognition of same sex relationships by the state makes possible new types of household, with supportive relationships an intrinsic part. Increased individualism, central concepts of the Second Demographic Transition and the decline of social capital thesis, may also foster new forms of community. The spatial dimension of the social world make geographic enquiry an ideal approach to investigation of the implications of such trends.

Section 8.6. Final thoughts

My study has demonstrated that the effects of contemporary trends are not all negative, and that the *reflexive* nature of older individuals is such that people actively address issues that threaten their social well-being. People consider their own situation and take decisions that take into account the effects of wider structures;

for example, actively seeking means by which new friendships can be developed after moving into another community on retirement. Additionally, many of those structures foster informal support. For example, the family remains for many an important feature of their lives, with relationships that can be relied on at times of crises even if there are many miles of separation. This is not to say that the future does hold challenges to which policy must respond.

Geographers can make an immense contribution to research into the implications of such trends. As I have shown in this thesis, the inclusion of the geographical perspective can also help develop new insights into the social experience of later life. Recognising the heterogeneity of contexts within which individuals live their lives raises new questions about difficulties, coping strategies, relationships, and so forth. Geographers therefore have an important contribution to a better understanding of later life in the contemporary world and, in so doing, can play a role in the development of policies that take older people and the context in which they live into account in their widely differing situations.

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Appendix A Application to School of Geography and Geosciences/Psychology ethics committee, consent form and ethics committee response.



**UNIVERSITY OF ST ANDREWS
SCHOOL OF GEOGRAPHY AND GEOSCIENCES
ETHICS COMMITTEE**

PROPOSAL FOR RESEARCH

Please submit 3 copies of the completed Proposal Form, which **must** include (if applicable) Participant Information Sheets, Debriefing Form, Consent Forms and any Advertisements for subjects to: Robin Flowerdew, Acting Committee Secretary. Alternatively submit 1 copy by email attachment to rf15@st-and.ac.uk, clearly labeled 'Ethics Application' (you must however submit 1 paper copy of the signed signature sheet).

1. Name and Status of Proposer:
Iain Atherton, Postgraduate student.
2. Name of Supervisor:
Dr Elspeth Graham.
Second supervisor:
Professor Robin Flowerdew
3. Title of Proposed Project:
Migration and the informal support networks of older people with limiting long term illness.
4. Does this Study involve the participation of children and/or vulnerable adults?

YES/NO

5. Please give a summary of the proposed project, including the questions to be answered, full details of the participants, the procedures to be used, and how the data will be analysed. Explain in plain words why this particular investigation is important: what is it going to contribute to our knowledge in the field? Use this page, and not more than one additional page.

This study is chiefly interested in the effects of kin proximity on family support for older people in contemporary Scotland. It is known that assistance from family remains an important source of help for people in their later years, and for many is crucial for maintenance of independence in the community. However, the future availability of such help is questionable given current mobility patterns and

population ageing. As the 'baby boomer' generation retire over the next couple of decades, the proportion of people entering their latter life stages, where limiting long-term illness is more prevalent, will increase. Previous research has shown that living further from children - even if only a relatively short additional distance - reduces the amount of support available from that source. Such patterns of migration and population ageing, however, are not uniform across Scotland. Whilst research to date has considered kin support and the effects of proximity, the geographically uneven dimension resulting from different patterns of migration has received little attention.

Initial analysis of data from the 1981 and 1991 Census of Scotland has highlighted areas of the country that attract older migrants, and others that have experienced the out-migration of the younger population. All else being equal, such areas will have demographically older age profiles, and are likely to have a greater number of older people suffering from long-term illness but with no children living in close proximity. Yet other areas of Scotland are demographically more stable, having 'mixed' age profiles. In this context, the research is designed to address two central issues:

- How does distance between the older person and their kin impact on the support provided by family members in those places (a) to which older people have moved – *retirement areas*; (b) from which younger people have moved – *out-migration areas*; and (c) which are demographically stable and have mixed age profiles – *stable areas*.
- Do the geographies of migration (reflected in the three area types) influence the sources of support (e.g. neighbours, friends or formal services) that older people rely on when family members are not in close proximity?

The study will thus add to the academic literature and contribute to issues of policy relevance.

Having identified different geographies of migration (and thus three types of area across Scotland) using secondary data, the next stage of the project requires the collection of primary data. Three hundred interviews will be conducted with people over 75 years of age across the three types of geographical area identified. Equal numbers of males and females will be recruited in each area selected to represent its 'type', with a target of 50 interviews in six areas across Scotland.

This set of interviews will employ a structured questionnaire that lasts 20-30 minutes (copy attached). Questions asked will explore the support networks of the participants and the distance/proximity of kin in relation to individual circumstances, as well as care and support. The data collected will allow a quantitative analysis of the similarities and differences between the selected area, as well as between population groups.

To complement the structured interviews, between twenty and thirty participants who are experiencing clear limitations in their ability to cope with activities of everyday living will be asked if they would agree to take part in in-depth interviews lasting between 1 and 2 hours. The rationale for this is to achieve a qualitative understanding of the issues covered in the questionnaire among a group of participants most in need of (informal) support. Feelings, attitudes, expectations and relationships with kin and neighbours will all be explored in a more conversational way, guided by an aide memoire (copy attached). Permission will be sought to tape-record these conversations. The information collected in these in-depth interviews will complement the data from the structured questionnaires by providing an insight into respondents' own viewpoints as expressed in their own words.

Structured and conversational interviews will be conducted at times convenient to the participants and at least a few days apart to allow time for reflection and to make the interviews less tiring for participants. Again, participation will be entirely at the discretion of the participant, both in terms of whether they wish to take part and

the length of discussion. Where the opportunity arises, in-depth interviews may also be conducted with 'carers', again only with the fully informed consent of both recipients and providers of that care. Strict confidentiality regarding information attained from interview with the care recipient will be studiously observed. An aide memoire for such interviews is also attached.

All interviewed will be asked if they would like a summary of research findings, again with thoughts and comments being welcomed and where possible incorporated into research outcomes, including the thesis. Where summaries are requested, addresses will be noted and immediately detached from the questionnaire.

Overall, the aim is to collect useful and meaningful data/information on a subject of policy concern that is little researched, in a manner sensitive to the welfare of respondents.

6. Please describe how the participants will be selected, and how informed consent will be obtained.

The study will be based on a purposive sample of men and women over 75 years of age. Organisations such as lunch clubs and church groups in geographical areas of interest will be approached. Where organisers of these clubs/groups are agreeable, the researcher will attend a meeting and give a brief talk of no more than 10 minutes, outlining the work being done and what would be involved for anyone who agrees to be interviewed. Information leaflets (example attached) that provide clear and concise details of the study, and participants' rights - including the right to withdraw at any point - will be distributed. An appeal for volunteers to be interviewed will then be made. One benefit of this method of identifying respondents is that club/group organisers are likely to know members reasonably well and hence can provide an additional safeguard for those who may be vulnerable (for example those who have memory and/or cognitive difficulties). Some 'snowballing' will also be used as a means of including individuals who are more socially isolated and unable to attend such groups. This will entail asking participants selected through organizations to pass information leaflets onto anyone they know who may be willing to take part and asking them to contact the researcher if they are agreeable to being interviewed. Avenues for contacting participants through health care professionals such as community nurses are also being explored. These are wholly dependent on gaining clearance from appropriate medical ethical committees.

Participants will be asked to sign a consent form (sample attached) that contains further clarification of the study and participant rights. Verbal explanation will be given by the researcher before interviewing proceeds.

7. Will there be difficulty in obtaining informed consent due to participants' age, mental illness or communication difficulties?

YES/NO

If YES, please give brief details.

Given the age group of interest, it is possible that some potential participants will have reduced cognitive or communication abilities. The research design is such that those with cognitive problems will be identified and not included in the research. Those with sight and hearing difficulties will only be included where it is possible to explain the study to them such that they fully understand and are able to give their informed consent. The consent form also reiterates the rights of participants.

8. Will the participants receive the standard payment of £4 per hour **YES/NO**

If NO, Why Not?

Funding for this research does not include payment to participants. Interviews will be conducted either in the respondents' own homes or at places they would be attending anyway, such as a lunch club. Thus participants will incur no personal expenses if they agree to take part. This is common practice in the field of human geography and social gerontology.

9. Starting date of project: Data collection – 1 February 2004

Duration of data collection phase: 6-7 months.

Questionnaire: involvement for individual participant = 20-30 minutes.

In-depth interviews: involvement for individual participant = 1-2 hours

Location of testing of participants: initially at site of club or meeting they attend. With their agreement, and advice from support workers, some may be interviewed at a later date in their own home.

10. Please state who will have access to the data, and what steps will be taken to keep data confidential.

The researcher and supervisors will be the only people who have any access to original questionnaires or tapes of interviews, both of which will be kept in a locked filing cabinet in the School of Geography and Geosciences. Taped interviews will be transcribed and anonymised (ensuring that all possible identifiers are changed/omitted) before being stored electronically.

All outputs, including the thesis will either use data in aggregate form or ensure confidentiality through the use of pseudonyms.

11. a. Are there any potential hazards to either the investigator(s) or participant(s). If YES, please explain what these are.

YES/NO

- b. Will the procedures cause discomfort or distress? If Yes, please explain what these are, and what steps will be taken to minimize them.

YES/NO

It is possible, given the nature of the subject matter, that some distress could be caused to some interviewees. Those who have little contact with their children, for example, may be upset when talking about this to the researcher. For many participants, however, the opportunity to talk about their lives and families may be welcomed. The nature of the topics to be discussed will be outlined prior to the interview and the important contribution the individual will be making to the research emphasised. Pause will be given at points through the interview to allow for reflection, particularly after the set of questions from the 'Geriatric Depression Scale'. The researcher has experience of working with older people in his professional role as a general nurse, and is very aware of the need for sensitivity. The nature of the research role (in terms of not intervening) will be made clear both verbally and on the consent form prior to the interview. Where the researcher has concerns, it will be suggested to participants that they contact their GP.

- c) What training has the investigator received in order to offset any negative consequences resulting from the experiment?

As a registered general nurse the researcher has experience of working with people in the age group of interest, and dealing with emotionally distressing situations. Furthermore, the researcher has discussed the potential difficulties that might be experienced with his supervisors, and with academics from the Centre of Gerontology and Health Studies at the University of Paisley who have been involved in similar research projects with older people.

12. Are any of the participants in a dependent relationship with the Investigator, (e.g. student). If YES, explain why this is necessary.

YES/NO

13. a. Will participants be kept naïve to the purpose of the experiment? YES/NO

- b. If YES, why is participant naivety necessary for achieving the aims of the research? Please justify your answer.

- c. If NO, how will the participants be debriefed?

Participants will receive an information leaflet that broadly explains the aims of the research, and their rights as participants. After consultation with Age Concern, it has been ensured that font is large enough to facilitate reading. Explanation will also be given to people prior to their interview, again giving details of the nature of the study, emphasizing that there is no obligation to take part, any questions they do not wish to answer can be missed, and that the interview can be terminated at any time. The consent form emphasises these points.

14. Please note and justify any other aspect of the research that in your view requires special ethical consideration.

Areas requiring ethical consideration have been discussed above.

15. Where in the application have the following key points been addressed?

Confidentiality: See section 10

Withdrawal: See section 6 and 13c

Informed Consent: See section 6 and 13c

Debriefing: See section 5

For Undergraduate Supervisors (only)

Why do you consider this project requires special ethical consideration?

For All Supervisors

Please specify the particular aspects of the project you wish the committee to consider.

Have you read the statement by the British Psychological Society on Code of Conduct and Ethical Principles?

YES/NO

Applicant's Signature Date

Supervisor's Signature Date

Informal support study
Consent form

To be completed by respondent after explanation from interviewer

**Please cross-out
as necessary**

Have you received the information sheet? YES/ NO

Have you had the chance to discuss this study and taking part? YES/ NO

Have you received answers to all the questions you have? YES/ NO

Have you received enough information? YES/ NO

Do you understand that taking part is entirely voluntary? YES/ NO

Do you understand that this study has no bearing on any services or payments you receive, either now or in the future? YES/ NO

Do you understand that you are free to withdraw from the study YES/ NO

- At any time?
- Without having to give reason for withdrawing?

Do you agree to take part in this study? YES/ NO

Participant's signature Date

Name in block capitals.....

Home telephone number (optional).....

Signature of researcher.....



University of St Andrews

School of Psychology

**UNIVERSITY OF ST ANDREWS
SCHOOL OF PSYCHOLOGY ETHICS COMMITTEE**

Tuesday, 23 March 2004

School of Psychology
University of St Andrews

Dear Iain

Re: Migration and the Informal Support Networks of Older People with Limiting Long-Term Illness

The above-named project has been read and approved by the School of Psychology Ethics Committee, based on the information provided.

If, during the course of the proposed research, any important condition were to alter, then the Committee would wish to be informed.

Yours sincerely

B Dr. Barbara Dritschel
Internal Convener

(Dictated but not read)

St Mary's Quadrangle, St Andrews, Fife KY16 9JP, Scotland
Switchboard: (01334) 476161 Extension: Direct Line: (01334) 46
Fax: (01334) 463042

Appendix B Information leaflets and letters

Study of informal support

I am doing a study about informal support of older people and am looking for volunteers to talk to.

- **What is the study about?**

The effects of people moving from one location to another on support networks of older people. Different parts of Scotland tend to have differing migration patterns. Some areas are popular with those who are retiring. Other places have experienced younger people moving away from home. The world is becoming a more mobile place, with people moving further a field from home. I am interested in what the effects of such movements are for people's day-to-day lives: both those who move and those remaining in their own area.

- **Who is doing this study?**

I am a postgraduate student in the University of St Andrews. The work is thus primarily towards my PhD. However, it is my hope that findings will be useful to those who plan and provide support services for older people. Your experiences are crucial to this.

- **You won't want to talk to me, will you?**

I am keen to speak with both those who enjoy good health, and others who have experience of coping with ill health.

- **What do the interviews involve?**

I will be asking questions on issues including family, friends, and health. All answers are treated in a strictly confidential manner. Interviews are on a one-to-one basis and last around 20-30 minutes.

- **I would like more information**

If you have questions particular to the study you can contact the researcher's office (01334 462811) or mobile (0790 3424422). If you wish to verify the researcher's identity, you can contact the School of Geography and Geosciences at the University of St Andrews (01334 462894).

- **I might be interested, what should I do next?**

I can ask you the questions either when first visiting you or arrange to meet you at a later time and date; whichever is most convenient to you.

I look forward to meeting you!

Iain Atherton.

Letter to local papers in survey locales.

Dear Sir:

Does the increasing mobility of the Scottish population isolate older members of our society? I am researching this issue by considering how migration affects those in later life who have moved, or whose children have relocated.

I will be interviewing people who live in Wester Ross. I am contacting people through lunch clubs and day care centres. The survey takes around 30 minutes and includes questions on how long the respondent has lived in the area, the distance that children live from them, contact with kin, and general health.

I am keen to talk to a broad cross section of the population, including anyone who have never moved or does not have children. I can be contacted at the University of St Andrews (01334 462811) or by mobile phone (07903424422).

Yours faithfully

Iain Atherton
Postgraduate Research Students.

Appendix C: Questionnaire and flashcards

Code no.

A questionnaire on informal support networks of older people in Scotland

**Information recorded during interviews is confidential and will only
be used for the sole purpose of research.**

**Iain Atherton
School of Geography and Geosciences
Irvine Building
University of St Andrews
St Andrews
Fife
KY16 9AL**

Section A

Background information

Firstly, I would like to ask you some general questions about yourself and where you live.

A1 What is your postcode?

A2 How old are you?

A3 The respondent is:

Male	.	.	.	.	1
Female.	.	.	.	.	2

A4 Are you currently:

Single	.	.	.	.	1
Married/ living with partner	.	.	.	.	2
Divorced	.	.	.	.	3
Widowed	.	.	.	.	4

If married or living with a partner:

A5 How long have you been married/ living with partner?

A6 Had you been married before?

Yes	.	.	.	.	1
No	.	.	.	.	2

A7 Who lives with you (eg spouse, child, brother, sister)?

If living with others:

A8 Do any of the other members of your household have any illness or medical condition that prevents them from managing any every day activities without difficulty?

A9 What has been your main occupation throughout your life?

If ever married

A10 What was/ is your spouse's main occupation?

A10 Do you currently receive income support in addition to your state pension?

Yes . 1
No . 2

Section B Family

Now I would like to ask you about your family.

	Eldest					youngest				
	0	1	2	3	4	5	6	7	8	>8
B1: How many children do you have?										
<i>If none go to question B13</i>										
B3: Son or daughter?										
Male										
Female										
B2: How long would it take you to travel to their home? (flashcard 1)										
Lives in same household										
0-14 minutes										
15-29 minutes										
30-60 minutes										
1-2 hours										
Over 2 hours										
Lives abroad										
	0	1	2	3	4	5	6	7	8	>8
B4: Do any of your children help you with any of the following (flashcard 2):										
Washing and dressing										
Cleaning the house										
Cooking										
Shopping										
Financial help										
Household tasks such as ironing and cleaning										
Gardening or general DIY										
Helping with paper work										
Lifts in car										
Other										
No help										
B5: In total, how often does each of your children give you help?										

	0	1	2	3	4	5	6	7	8	>8
B6: How often do you see each of your children? (Flashcard 3)										
Daily										
Several times a week										
Once a week										
Fortnightly										
Monthly										
3-4 times a year										
At least once a year										
Less										
Never										
B7: How often do you speak to each of your children on your telephone? (Flashcard 3)										
Daily										
Several times a week										
Once a week										
Fortnightly										
Monthly										
3-4 times a year										
At least once a year										
Less										
Never										
B8: Which child would you say you get on best with/ are closest to?										

B9: Where did you bring your children up? (flash card 4)	Place(s)
Local area	
Elsewhere in Scotland	
Elsewhere in UK	
Abroad	

B10 Do you expect your family would provide assistance/ further assistance for you should it be required in the future?

Yes 1
No 2

Section C: Migration

I would now like to ask you about the length of time you have lived in this area.

C1 Have you lived in North East Fife (other interview area) for most of your life?

Yes . 1
No . 2

If yes go to Section D

If no,

C2 How old were you when you last moved into this area?

C3 What were the reasons for this move?

C4 Did this move make it easier or more difficult for you to see your children?

Easier . . 1
Same . . 2
More difficult . 3

Section D: Health and welfare

I would also like to ask you some questions about your health.

D1 Over the last twelve months would you say your health has on the whole been good, fairly good, or not good?

Very Good.	.	.	1
Good	.	.	2
Fair	.	.	3
Bad	.	.	4
Very Bad	..	.	5

D2 Do you have any long-standing illness, health problem or disability that limits your daily activity?

Yes	.	.	1
No	.	.	2

D3: How easily can you manage the following activities? (Flashcard 5)	easily	Fairly easily	Not at all
bathing			
dressing			
walking			
transferring			
toileting			
eating			
Using the telephone			
Grocery shopping			
Preparing meals			
Doing housework			
Doing laundry			
Taking medications			
Managing money			
Going places beyond walking distance			

D4 Do you personally receive assistance from formal services
(e.g. meals on wheels, district nurse, home help, etc)?

Yes . 1
No . 2

If yes:

D5 Which ones?

D6 How frequently do you receive these services, and for how long
each week/ month?

The next few questions have been specifically designed to give an impression of your emotions and how you feel. Please give your initial response to each question, rather than taking a long time to think about it.

- | | | |
|-----|--|---------|
| D7 | Are you basically satisfied with your life? | YES/ NO |
| D8 | Have you dropped many of your activities and interests? | YES/ NO |
| D9 | Do you feel that life is empty? | YES/ NO |
| D10 | Do you often get bored? | YES/ NO |
| D11 | Are you in good spirits most of the time? | YES/ NO |
| D12 | Are you afraid that something bad is going to happen to you? | YES/ NO |
| D13 | Do you feel happy most of the time? | YES/ NO |
| D14 | Do you often feel helpless? | YES/ NO |
| D15 | Do you prefer to stay at home, rather than going out and doing new things? | YES/ NO |
| D16 | Do you feel you have more problems with memory than most? | YES/ NO |
| D17 | Do you think it is wonderful to be alive now? | YES/ NO |
| D18 | Do you feel pretty worthless the way you are now? | YES/ NO |
| D19 | Do you feel full of energy? | YES/ NO |
| D20 | Do you feel your situation is hopeless? | YES/ NO |
| D21 | Do you think that most people are better off than you are? | YES/ NO |

Section E: Local community

The next section aims to find out a little about what you think of the place where you live. Please say whether you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree with the following statements (flashcard 6).

E1 People in my local area can be trusted.

Strongly disagree	.	.	.	.	1
Disagree	.	.	.	.	2
Neither agree or disagree	.	.	.	.	3
Agree	.	.	.	.	4
Strongly agree	.	.	.	.	5

E2 People in my local area are willing to help if you or others need assistance.

Strongly disagree	.	.	.	.	1
Disagree	.	.	.	.	2
Neither agree or disagree	.	.	.	.	3
Agree	.	.	.	.	4
Strongly agree	.	.	.	.	5

E3 My local area is a fairly safe area to live.

Strongly disagree	.	.	.	.	1
Disagree	.	.	.	.	2
Neither agree or disagree	.	.	.	.	3
Agree	.	.	.	.	4
Strongly agree	.	.	.	.	5

E4 Are you a member of any local groups, clubs or organisations (e.g. church, bridge club, bowling club)?

Yes	.	.	.	.	1
No	.	.	.	.	2

<i>If yes:</i>	daily	Several times a week	Once a week	Once a month	Less than once a month
E5: In total, how often do you attend meetings or events, or see others, in connection with these groups? (Flashcard 7)					

<i>(Flash card 7)</i>	daily	Several times a week	Once a week	Once a month	Less than once a month
E6: How often do you speak to a neighbour on the telephone?					
E7: How often do you visit a neighbour's house?					
E8: How often does a neighbour come in to see you?					

E9 Do you receive any assistance with day-to-day activities from neighbours (e.g. gardening, housework, shopping, getting about)?

Yes . 1
 No . 2

If yes:

E 10 Please give details

E11 How often/ for how long is that?

E12 Do you have good friends who live outside of your local area with whom you are in regular contact?

Yes 1
No 2

If yes:

E13 In total, how frequently do you have contact with this/ these friend(s)?

(Flash card 7)

Daily 1
Several times a week 2
Once a week 3
Once a month 4
Less than once a month 5

E14 Do you receive any assistance with day-to-day activities (e.g. gardening, housework, shopping, getting about) from these friends?

Yes 1
No 2

E15 What activities are involved?

E16 About how long is spent by these friends providing such assistance?

Is there anything you would like to say regarding informal care that has not as yet been touched upon?

A large, empty rectangular box with a thin black border, intended for the respondent to provide their answer to the question above. The box is currently blank.

DETACH THIS PAGE ON COMPLETION OF INTERVIEW

Further interviews will be taking place as part of this study. These will be more conversational, and will expand on some of the areas that have been touched upon here. Would you be willing to take part in a further interview?

Yes

No

Would you like a resume of the research findings?

Yes

No

If any or the above are answered yes then an address will be required, and telephone number if agreeable to taking part in further interviews.

Telephone number:

Address

Record no:

Flashcard 1

Lives in same house

0-15 minutes

15-30 minutes

30-60 minutes

1-2 hours

Over 2 hours

Lives abroad

Flashcard 2

Washing and dressing

Cleaning the house

Cooking

Shopping

Financial help

Household tasks such as ironing or cleaning

Gardening or general DIY

Helping with paperwork

Lifts in car

Other

Flashcard 3

Daily

Several times a week

Once a week

Fortnightly

Monthly

3-4 times a year

At least once a year

Less

Never

Flashcard 4

Local area

Elsewhere in Scotland

Elsewhere in UK

abroad

Flashcard 5

Bathing

Dressing

Walking

Transferring

Toileting

Eating

Using the telephone

Grocery shopping

Doing laundry

Taking medications

Managing money

Going places beyond walking distance

Flashcard 6

Strongly disagree

Disagree

Neither agree or disagree

Agree

Strongly agree

Flash card 7

Daily

Several times a week

Once a week

Once a month

Less than once a month

Appendix D: The aide-memoire for in-depth interviews

Aide-memoire

Interview schedule for older people with some limiting illness

Method

This schedule is intended as an indication of issues that will be raised during in-depth interviews. People will be recruited for these during questionnaire enumeration. Only those with some degree of limiting illness will be asked to take part in this part of the research. These interviews are required to obtain a more detailed understanding of the issues investigated using the large-scale survey. The order and questions will depend upon the course of the conversation. The general themes and some example questions are provided below.

The intention is to build a detailed biography of the individual in relation to the central themes of the thesis. A time-line line with major points over the past century - such as the year of VE day and coronation of the Queen - will be used to help get a general sense of the timing of major transitions during the interviewee's life-course. This will provide a reference point for the conversation. Interviews will be taped with the consent of the older person.

History of employment

This will entail eliciting whether, when and where the older person has worked through their life. The work history of any partners they have had will also be ascertained. Issues relating to attitudes to work and economic dependency will be explored.

*Key questions: When did you retire? How did you feel about retiring?
Tell me about where you have worked through your life.*

Migration and social capital

This theme will involve finding out where the person had lived, why they moved, feelings towards relocating, and to the areas in which they have resided. This is likely to be closely related to their employment history. As with several of these themes, they are likely to be discussed together, building a picture of the individual's life course. The difficulties or otherwise of moves, their own or those of family members, will be discussed. Perceptions of the locations as places in which to live will be considered.

*Key Questions: Did it take you long to feel at home in this area?
Is this a good place to live for someone whose health may be failing? Why?*

Marriage and family

Life events such as marriage, birth of children, and bereavements will be ascertained. The points and reasons for children leaving home will be discussed. The current situation of children in terms of work, family, and relationship with them will be explored.

*Key questions: Do you wish you lived closer to your children? Why?
Have you, or would you ever, consider living in the same house as your children?*

Health

Discussion will be had on the nature and timing of health decline, perception of health compared to what would be expected at that point in the life-course, and the impact declining health has had on day-to-day life. Investigating this topic during in-depth interviewing allows probing to better understand how and to what degree the older person copes with day-to-day life.

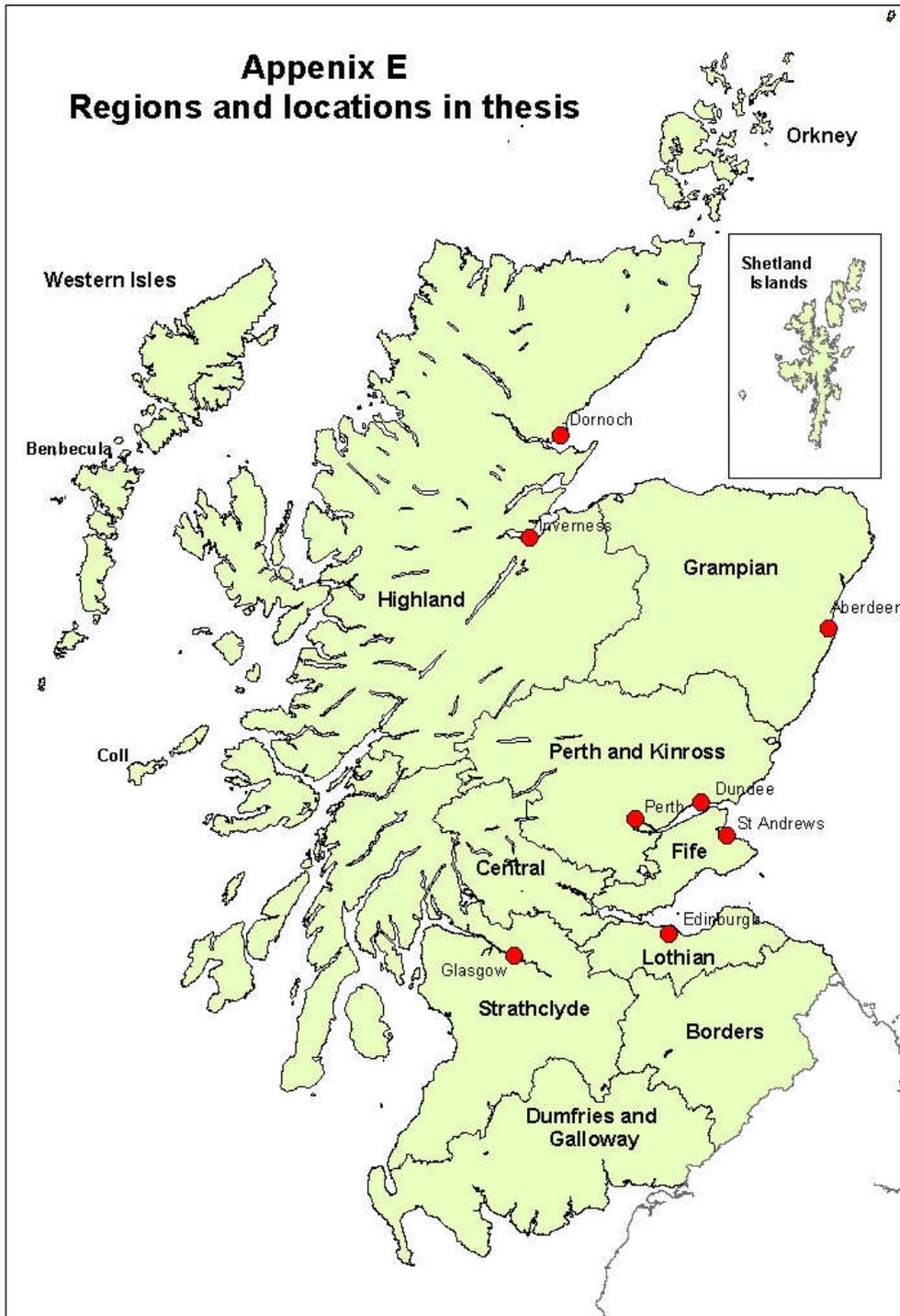
*Key question: Are there things you can't do now that you could previously? What do you put this down to?
Has life been good to you?*

Assistance

Points at which key decisions have had to be made will be identified and various aspects of decision-making explored; e.g. who will provide help, the nature of that support, with whom these decisions were discussed, and the rationale for the decision. Conversational interviews will provide the chance to enquire retrospectively into whether the older person wanted, prior to their health deteriorating, the balance of formal and informal care that developed or expected such assistance. Arrangements both at present and in the future will be considered, touching upon hopes, fears, and expectations of where assistance could be found, and where they believe it is likely to come from.

*Key questions: Did you ever think about what would happen if your health deteriorated prior to it becoming an issue?
Do you ever discuss the future with your family/ friends/ carers?*

Appendix E Regions and locations in thesis



Appendix F

Additional tables relating to Chapter 5

The first set of tables show calculations for Chi-square tests, the results of which are referred to in Chapter 5.

Locale of residence by co-residence with adult child.

		lives with children	no child in household	Total
retirement	Count	4	41	45
	Expected Count	7.364	37.636	45
rural	Count	6	10	16
	Expected Count	2.618	13.382	16
urban	Count	8	41	49
	Expected Count	8.018	40.982	49
		18	92	110
		18	92	110

Pearson chi-square=7.06, p=0.03.

Locale of residence by living within/not living within an hour of at least one adult child.

		child within an hour	no child within and hour	total
retirement	Count	32	13	45
	Expected Count	35.182	9.818	45
rural	Count	11	5	16
	Expected Count	12.509	3.491	16
urban	Count	43	6	49
	Expected Count	38.309	10.691	49
		86	24	110
		86	24	110

Pearson chi-square=4.79, p=0.09.

Locale of residence (urban or non-urban) by living within/not living within an hour of at least one adult child.

		child within an hour	no child within and hour	total	
non-urban	Count	43	18	61	
	Expected Count	47.691	13.309	61	
urban	Count	43	6	49	
	Expected Count	38.309	10.691	49	
		Count	86	24	110
		Expected Count	86	24	110

Pearson chi-square=4.75, p=0.03.

Collinearity checks

Field (2000) quotes Menard (1995) suggesting that tolerance values of less than 0.1 almost certainly indicates collinearity. He also refers to Myers (1990) who suggests that a VIF value greater than 10 also indicates collinearity. The following two tables show calculations for the main models constructed for Chapter 5, neither of which suggest that there is a problem with collinearity.

Collinearity tests for model investigating co-residence with adult children

	Tolerance	VIF
locale	0.765	1.307
occupational category	0.708	1.413
general health question	0.962	1.040
number of living children	0.905	1.104
marital status	0.743	1.345
gender	0.835	1.197
length of time lived in area	0.256	3.899
place where child up brought up	0.308	3.250

Collinearity tests for model investigating living within and hour/not living within an hour of nearest adult child.

	Tolerance	VIF
locale	0.722	1.386
occupational category	0.652	1.533
general health question	0.959	1.043
number of living children	0.898	1.114
marital status	0.741	1.350
gender	0.834	1.199
length of time lived in area	0.225	4.435
place where child up brought up	0.141	7.107
Interaction term	0.277	3.610

Appendix G

Additional tables relating to Chapter 6

The first table details calculations for the chi-square calculation demonstrating a significant difference in the proportion of survey respondents not receiving any informal support from either adult children or members of the local community.

		does not receive any informal support	receives informal support from children or neighbours	total
retirement	Count	15	37	52
	Expected	9.064	42.936	52
urban	Count	4	53	57
	Expected	9.936	47.064	57
Total	Count	19	90	109
	Expected	19	90	109

Pearson chi square=9.00 p=0.003.

The following table shows the cross-tabulation and chi-squared results demonstrating that there are significant differences in structure of support networks between the three locales.

		type of informal support				Total
		none	children only	neighbours only	children and neighbours	
retirement	Count	15	16	7	14	52
	Expected	8.400	19.600	9.200	14.800	52
rural	Count	2	5	7	7	21
	Expected	3.392	7.915	3.715	5.977	21
urban	Count	4	28	9	16	57
	Expected	9.208	21.485	10.085	16.223	57
total	Count	21	49	23	37	130
	Expected	21	49	23	37	130

Pearson chi-square=16.18, p=0.013.

The next table shows a cross-tabulation comparing those who receive help from children to those who do not. Only those who have at least one living child, and who do not co-reside with any children, are included in this analysis (n=92).

limiting long-term illness		informal support from children		Total
		no	yes	
no	Count	20	9	29
	Expected	14.185	14.815	29
yes	Count	25	38	63
	Expected	30.815	32.185	63
	Count	45	47	92
	Expected	45	47	92

Pearson chi-square=6.815, p=0.009.

The following table cross-tabulates those receiving help from neighbours to those who are not, and those who have a limiting long-term illness to those who do not. All respondents are included for this calculation.

limiting long-term illness		support from neighbours		Total
		no	yes	
no	Count	22	16	38
	Expected	18.123	19.877	38
yes	Count	40	52	92
	Expected	43.877	48.123	92
	Count	62	68	130
	Expected	62	68	130

Pearson chi-square=2.240 p=0.134.

The next table shows the calculations behind the Kruskal-Wallis test that demonstrates a statistically significant difference in the frequency of assistance scores of respondents in the three locales. Only those with at least one living child are included (n=110).

locale	n	Mean Rank
retirement	45	46.256
rural	16	53.594
urban	49	64.612
Total	110	

Chi-square=7.958, p=0.019.

The following shows cross-tabulations that lie behind the calculations of figures shown in for table 6.2.

		sees parent at least weekly		Total
		no	yes	
male	Count	85	68	153
	Expected	79.516	73.484	153
female	Count	60	66	126
	Expected	65.484	60.516	126
total	Count	145	134	279
	Expected	145	134	279

Pearson chi-square=1.744, p=0.187.

		sees parent several times a week		Total
		no	yes	
male	Count	119	34	153
	Expected	108.581	44.419	153
female	Count	79	47	126
	Expected	89.419	36.581	126
total	Count	198	81	279
	Expected	198	81	279

Pearson chi-square=7.626, p=0.006.

		At least weekly telephone contact with parent		Total
		no	yes	
male	Count	63	90	153
	Expected	53.742	99.258	153
female	Count	35	91	126
	Expected	44.258	81.742	126
total	Count	98	181	279
	Expected	98	181	279

Pearson chi-square=5.444, p=0.020.

The following tables show cross-tabulations used in calculations of figures for table 6.3.

		Helps parent with cleaning the house		Total
		no	yes	
male	Count	142	11	153
	Expected	134.903	18.097	153
female	Count	104	22	126
	Expected	111.097	14.903	126
total	Count	246	33	279
	Expected	246	33	279

Pearson chi-square=6.989, p=0.008.

		Helps parent with paper work		Total
		no	yes	
male	Count	132	21	153
	Expected	125.032	27.968	153
female	Count	96	30	126
	Expected	102.968	23.032	126
total	Count	228	51	279
	Expected	228	51	279

Pearson chi-square=4.704, p=0.030.

		Helps parent with shopping		Total
		no	yes	
male	Count	113	40	153
	Expected	105.839	47.161	153
female	Count	80	46	126
	Expected	87.161	38.839	126
total	Count	193	86	279
	Expected	193	86	279

Pearson chi-square=3.481, p=0.062.

		Helps parent with DIY		Total
		no	yes	
male	Count	114	30	144
	Expected	119.817	24.183	144
female	Count	104	14	118
	Expected	98.183	19.817	118
total	Count	218	44	262
	Expected	218	44	262

Pearson chi-square=3.734, p=0.053.

The next tables show cross-tabulations that lie behind table 6.4.

		parent within 30 minutes		Total
		no	yes	
male	Count	84	69	153
	Expected	84.452	68.548	153
female	Count	70	56	126
	Expected	69.548	56.452	126
Count		154	125	279
Expected		154	125	279

Pearson chi-square=0.012, p=0.913.

		child within 30 minutes		Total
		no	yes	
one child	Count	13	9	22
	Expected	7.2	14.8	22
two + children	Count	23	65	88
	Expected	28.8	59.2	88
total	Count	36	74	110
	Expected	36	74	110

Pearson chi-square=8.681, p=0.003.

		child within 30 minutes		Total
		no	yes	
male	Count	7	14	21
	Expected	6.873	14.127	21
female	Count	29	60	89
	Expected	29.127	59.873	89
total	Count	36	74	110
	Expected	36	74	110

Pearson chi-square=0.004, p=0.948.

The following table shows tests for multi-collinearity for models shown in Table 6.1. None of the Tolerance values are less than 0.1, or the VIF values greater than 10, indicating that there is no multi-collinearity with between any of these variables.

	Tolerance	VIF
LOCATION	0.843	1.186
instrumental activities of living	0.937	1.067
occupational group	0.768	1.302
number of living children	0.822	1.217
marital status	0.591	1.691
distance to nearest child	0.559	1.788
interaction term between marital status and distance from children	0.498	2.009

Outcome variable: log of frequency of assistance from children.

Includes all respondents who live in the *Retirement* or *Urban* locales who have at least one living child (n=94).

Appendix H

The following table shows the cross-tabulation and chi-square for the comparison between those who have at least weekly contact with neighbours and those who do not. All survey respondents are included (n=130).

		Frequency of in-person contact with others living locally		Total
		Less than weekly	At least weekly	
retirement	Count	26	26	52
	Expected	26.400	25.600	52
rural	Count	5	16	21
	Expected	10.662	10.338	21
urban	Count	35	22	57
	Expected	28.938	28.062	57
total	Count	66	64	130
	Expected	66	64	130

Pearson chi-square=8.698, p=0.013.

The next table show the cross-tabulation comparing genders, and whether they see neighbours at least weekly or not. All survey respondents are included (n=130).

		Frequency of in-person contact with others living locally		Total
		Less than weekly	At least weekly	
male	Count	17	7	24
	Expected	12.185	11.815	24
female	Count	49	57	106
	Expected	53.815	52.185	106
total	Count	66	64	130
	Expected	66.000	64.000	130

Pearson chi-square=4.741, p=0.29.

The following table shows the results of collinearity tests between the variables used for models in Chapter 7. Using the criteria suggested by Field (2000), results show no evidence to suggest that there are problems with multi-collinearity, with no tolerance values less than 0.1, and no VIF values greater than 10.

	Tolerance	VIF
locale	0.748	1.337
gender	0.818	1.222
marital status	0.763	1.311
occupational group	0.719	1.391
number of living children	0.619	1.616
distance to nearest child	0.328	3.046
weekly/less than weekly contact with child(ren)	0.346	2.889
general health	0.880	1.136
depressed/not depressed	0.844	1.185
trust with others in local area	0.836	1.196
others in local area are willing to help	0.776	1.288
local area safe place to live	0.864	1.157
length of time lived in area	0.623	1.606

Outcome variable: at least weekly contact with children.