INTERGENERATIONAL RELATIONSHIPS BETWEEN ADULT CHILDREN AND OLDER PARENTS IN TURKEY

Thesis submitted in partial fulfilment of the requirements for the
Degree of Doctor of Philosophy in Sociology

by

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LIST OF ABBREVIATIONS

ADL	Activities of Daily Living
EU	European Union
IADL	Instrumental Activities of Daily Living
IFA	International Federation on Ageing
LTC	Long-Term Care
MFSP	Ministry of Family and Social Policy
MYS	Ministry of Youth and Sports
NGO	Non-Governmental Organisation
NHS	National Health Services
OASIS	Old Age and Autonomy: The Role of Service Systems and Intergenerational Family Solidarity
OECD	Organisation for Economic Co-Operation and Development
PAYG	Pay-As-You-Go Pension Schemes
SHARE	The Survey of Health, Ageing and Retirement in Europe
TDHS	Turkish Demographic Health Survey
TFSS	Turkish Family Structure Survey
TSI/TUIK	Turkish Statistical Institute
UK	United Kingdom
US	United States
WHO	World Health Organisation

ABSTRACT

Intergenerational relationships have provided a popular focus of enquiry for family sociology. With recent demographic shifts and structural changes in the family, intergenerational relationships have begun to shift throughout the world. Turkey, as a Muslim-majority country with strong traditional intergenerational bonds, is also undergoing demographic transition and structural changes are taking place in Turkish families. For that reason, it is significant to know how intergenerational relationships are affected by these changes. This dissertation aims to understand the nature of intergenerational relationships and how they are affected by socio-demographic factors. The Intergenerational Solidarity Approach by Bengtson and Roberts (1991) is used as the most appropriate theoretical framework for the research objectives and the Turkish context. The results of the quantitative enquiry have revealed that intergenerational solidarity is still strong among Turkish families; however, inconsistency between attitude and behaviour is detected among educated respondents, which has led to another phase of qualitative enquiry. Interviews conducted with adult and older Turkish women show that the gap between normative and felt obligations is putting pressure on educated Turkish women in particular, and that they develop different management strategies to confront the dilemmas they experience. In this respect, the Intergenerational Ambivalence Theory (Lüscher & Pillemer, 1998) is employed to address the findings of qualitative data. The results of both of quantitative and qualitative analysis show that neither the solidarity nor the ambivalence approach is fully capable of reflecting intergenerational relationships in the Turkish context. For this reason, as a final step, the dissertation suggests a theoretical model for examining intergenerational relationships in Turkish families. The suggested model embraces both the solidarity and the ambivalence models and stipulates the use of mixed methodology in intergenerational research. In this respect, this dissertation contributes to empirical, theoretical and methodological knowledge in the literature of intergenerational relationships.

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INTRODUCTION

Relationships between older parents and adult children in Turkish families have for the most part been characterised by solidarity and filial piety due to historical, cultural and religious factors (Canatan, 2008; Mottram & Hortaçsu, 2005b; Kongar, 1998). The responsibility for taking care of the older adults has always been the duty of adult children. This responsibility also includes the concerns of parents to be cared for by their children in the future. The approach is the amalgam of complex socio-cultural dynamics of the present and individualised insecure perceptions of the parents for their futures (Canatan, 2008; Kağıtçıbaşı, 1982). It has been argued that, even though internal migration streams have fostered substantial transition from extended families to nuclear families within Turkish society, close contact within the kin has retained strong intergenerational support and exchange (Fişek, 1982; Özbay, 1982). In other words, the argument suggests that structural changes within the family have not led to functional changes, largely as a result of strong filial ties and normative obligations. However, apart from internal migration, the contemporary dynamics of post-modern society in Turkey are now challenging such strong intergenerational relationships. Modernisation, individualisation, globalisation, demographic and structural changes within the family are highly likely to lead to substantial change in the way intergenerational relationships operate within Turkish society. Previous research in the European and Asian context shows that declining fertility rates, increased life expectancy, shrinking household sizes, increasing divorce rates, and declining marriage rates, combined with increasing mobility and geographical proximity between the generations, have considerable impact on the existing intergenerational exchanges (see e.g. Attias-Donfut, Ogg & Wolff, 2005; Hoff, 2006). As Turkey goes through a similar structural and demographic transition, it is unclear to what extent intergenerational relationships will be influenced, given the country's own traditional family characteristics.

In this respect, it is necessary to reconsider and understand the intergenerational relationships within contemporary Turkish society in the light of changing family structures, values and demographic challenges. The proposed project aims to reveal the

link between different demographic and structural variables and intergenerational exchange patterns. In doing so, it also aims to explore the extent to which these associations are vital for the intergenerational relationships in Turkey. This perspective will also shed light on the influence of cultural and traditional values on such exchanges, which have mostly been taken for granted in previous studies conducted on intergenerational relationships.

Research Question: How do demographic structures and normative attitudes affect intergenerational relationships between older mothers and their daughters in Turkey?

Sub-questions:

1. What patterns of intergenerational exchange and support exist between older Turkish mothers and their adult female children?
2. What evidence is there of intergenerational solidarity in Turkish families?
3. What evidence is there of intergenerational ambivalence in Turkish families?
4. What do younger Turkish women think about their obligations to provide care and support?
5. What do older Turkish women think about their daughters' obligations to provide care and support?

In order to explore the patterns of intergenerational relationships, it is important to depict the demographic characteristics and family structure in Turkey. In this way, the link between structure and functionality can be established. In the ***first chapter***, I introduce the demographic characteristics and family structure in Turkey within the global context. In this chapter, I give descriptive statistics about the fertility rates, longevity, marriage and divorce rates, first marriage and first birth rates, household structures and the changing statistics over time. For this chapter, national statistics from the Turkish Demographic Health Survey (TDHS, 2013) and Turkish Family Structure Survey (TFSS, 2006; TFSS, 2011) are used. In this chapter I also discuss the changing family values and effects of demographic ageing on families.

In the ***second chapter***, I introduce and discuss the theoretical perspectives on intergenerational solidarity and intergenerational ambivalence with references to empirical studies in the literature. In doing so, I establish the relationship between structure and function and explain how demographic and structural patterns are likely to influence intergenerational solidarity and ambivalence. I also review the relevant literature in Turkey and address the gap in research in terms of intergenerational relationships.

In the ***third chapter***, I introduce my methodology and describe my data, both quantitative (GLAS, 2007) and qualitative (semi-structured interviews). Then I justify the usage of mixed methodology and explain the concepts of development, expansion and triangulation, which correspondingly fit with research questions and objectives.

In the ***fourth chapter***, I depict the intergenerational transfer patterns (volume, direction, type, determinants) in Turkey. The findings of this chapter show that intergenerational transfers are still high in the Turkish context, and no significant correlation has been found between intergenerational transfers and demographic variables, including education level.

In the ***fifth chapter***, I depict intergenerational support motivations in Turkey with reference to the international literature and point out the most relevant explanations for the Turkish context. I also examine the effects of normative affiliations on intergenerational transfers. I demonstrate how education level affects intergenerational attitudes, which in turn are likely to affect intergenerational transfers.

In the previous chapters, the GLAS dataset has shown that normative filial affiliations are affected by education level; however, education level is not necessarily effective on the transfers because norms are expected to determine behaviour. In that respect, the ***sixth chapter*** explores the reasons behind this attitudinal and behavioural gap. Since education level has emerged as the most important factor that affects intergenerational normative attitudes, it was chosen as the anchor variable. In this qualitative part, the focus of enquiry

shifts towards intergenerational relationships between older mothers and their adult daughters as gender is a significant factor in determining intergenerational exchanges (see *Selection of Target Group* for further details). The answer to the following question is pursued in the sixth chapter: "How does education level affect intergenerational normative attitudes of older Turkish mothers and their adult daughters?"

The interviews were used to explore this discrepancy by comparing and contrasting the attitudes and behaviours of educated and less educated women. As a first step, I explain why and in what way educated and less educated women differ in terms of their attitudes towards intergenerational responsibilities. The findings show that less educated women (high school and less) and educated women (higher education and above) differ with regards to their normative affiliations in terms of life aspirations, attitudes towards care and domestic work, push factors and pull factors. As far as older women are concerned, their attitudes towards filial obligations differ in 3 main areas: value of children, gender of children and views on care homes. In the second part of the chapter, the interviews with the dyads (older mothers and adult daughters) show that educated adult women experience ambivalence because there is a gap between their normative and felt obligations. This gap arises from the parental expectations and parental needs.

Having examined the attitudinal differences by education level in the previous chapter, in the ***seventh chapter*** I look at the effects of education level on behaviour. In this chapter, an answer to the following question is pursued: "How does education level affect intergenerational behaviour of older Turkish mothers and their adult daughters?" The previous analysis has shown signs of ambivalence and in this chapter intergenerational ambivalence theory was employed to identify the ambivalence management strategies between different educational background groups. In other words, the intergenerational ambivalence approach has emerged as a complementary perspective to the intergenerational solidarity approach.

In the seventh chapter, I depict how intergenerational ambivalence is negotiated among adult women, both at the individual and the institutional level. I argue that a higher

educational level enables innovative ways of ambivalence management and reduces the ambivalence women experience. On the other hand, higher education can be a handicap for educated adult women because their mothers are more likely to be less educated (due to historical education trends), which may trap them in a conventional intergenerational transfer system. As far as the ambivalence management strategies at the institutional level are concerned, the findings of this chapter show that educated women resort to substitution of functional and associational transfers by financial transfers, whereas less educated women take on the traditional caring role and employ their extended social network when caring responsibilities cannot be reconciled with other social roles.

In the ***eighth chapter***, drawing together the findings of the 4th, 5th, 6th and 7th chapters, I argue that intergenerational solidarity still remains strong in Turkey. However, certain socio-demographic factors and structural changes are putting a strain especially on Turkish women. In this respect, an intergenerational solidarity approach fails to fully explain intergenerational relationships in Turkey. Additionally, I discuss how intergenerational ambivalence can address implicit dynamics in intergenerational relationships. However, the ambivalence approach does not capture the positive dimensions of the relationship. Having demonstrated that neither intergenerational solidarity nor intergenerational ambivalence is capable of fully capturing the nature of intergenerational relationships within Turkish society, a new theoretical framework for studying intergenerational relationships in the Turkish context is introduced. In this chapter, a platform for further discussion and future research implications is also established.

CHAPTER 1: DEMOGRAPHICS AND FAMILY STRUCTURE IN TURKEY

1.1 Introduction

Intergenerational solidarity in Turkey has always been very strong due to cultural norms and filial piety. However, demographic ageing, structural changes within the family and family-reliant welfare systems now challenge this solidarity. Before moving on to the effects of micro-level determinants of intergenerational relationships in Turkey, it is appropriate to set the background for Turkey more widely so that the link between structure and functionality may be established. In this first chapter, demographic characteristics and features of family structure in Turkey are presented within a global context. Descriptive statistics about fertility rates, longevity, marriage and divorce rates, first marriage and first birth rates, and household structures are documented and the change in these structures over time is demonstrated. For these sections, national statistics from Turkish Demographic Health Survey (TDHS, 2013) and Turkish Family Structure Survey (TFSS, 2006; 2011) are used. Subsequently, value changes within the family are briefly introduced to set a background for the attitudinal changes towards intergenerational responsibilities in the following chapters. And finally, welfare state provisions at the meso-level are introduced to better lay out the relationships between intergenerational relationships and public policies.

1.2 Demographic Change

Demographic ageing has become the centre of attention for many academicians, journalists, politicians and policy makers. For that reason, it is appropriate first to explain what ageing is in order to understand its foundations and address its effects on the population and family structure. Demographic ageing is described as the combined impact of declining fertility rates and falling mortality rates on the age structure of a population (Hantrais, 2004). This combined impact of declining birth rates and falling death rates results in an increase in the proportion of old aged people within a given population.

However, this definition falls short of describing all the reasons for ageing population. Today's population ageing challenge is also triggered by increasing longevity and the post-war baby boom population moving into old age.

Even though Turkey has a relatively younger population compared with many other European countries, Turkish population is growing older due to increased longevity and the decrease in fertility rates. In this section, demographic changes in Turkey will be discussed in comparison with other European and middle-income countries.

1.2.1 Decreasing Fertility Rates

One of the most prominent reasons for demographic ageing is the decline in fertility rates. Fertility rate or total fertility rate (TFR) refers to the number of children that would be born to a woman if she were to live to the end of her childbearing years and bear children in accordance with current age-specific fertility rates (World Bank, 2015). All over the world, the numbers of births per women are decreasing and Turkey is following the same pattern. As it can be inferred from the graph below, fertility rate in Turkey was around 4.6 in 1980 and it decreased to 2.07 in 2013. Upper middle-income countries, Mexico and Brazil, started out with similar fertility rates at the beginning of 1980 and as of 2013 fertility rate was calculated as 2.22 for Mexico and 1.8 for Brazil. Another upper middle-income country, China, also has a low fertility rate (1.67), partly due to its one-child policy, which was abolished in 2015. Fertility rates are even lower for the southern European countries Italy (1.39) and Greece (1.3), which share similar welfare state structures and cultural patterns.

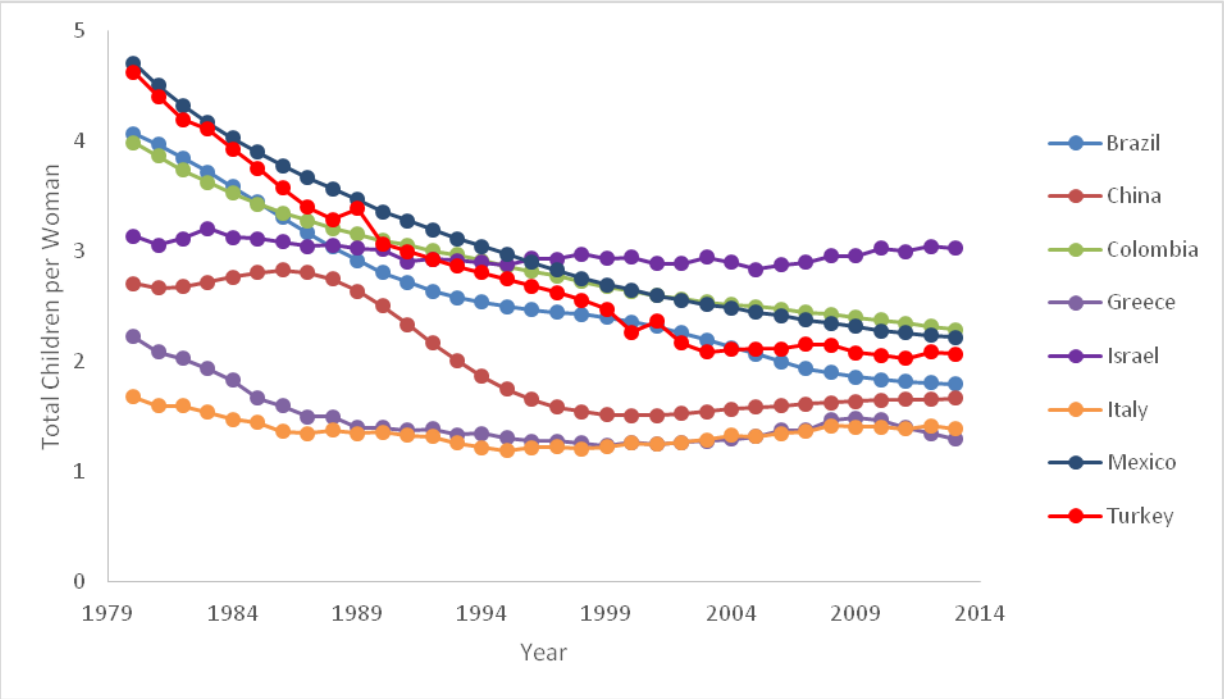


Figure 1 Total Fertility Rates in Selected OECD countries. (Source: OECD, 2014)

It is important to keep in mind that as long as death rates are below birth rates, low fertility rate might not be considered an issue. In this case, "replacement rate" (the birth rate at which deaths are replaced by births) is the criterion that needs to be taken into account. In some European countries, death rates exceed birth rates and cause a considerable decline in the population. In most of the developed countries, birth replacement rate is considered as 2.1, and in countries like Italy, Germany, Romania, Russia, where fertility rates are exceptionally low, deaths exceed births by far (Coleman, 2001; OECD, 2014). Apart from European countries, some Far Eastern countries such as Japan and Korea experience low birth rates (Coleman, 2001). Although birth rates are currently above replacement level in countries like the USA and New Zealand, according to future projections, every country is liable to face population decline sooner or later (Coleman, 2005). In this respect, decreasing birth rates stand as the main factor that causes ageing of the population.

Encouraging fertility might be realised by taking pronatalist measures, contributing to female welfare and encouraging gender equality (McDonald, 2000). When women are given equal conditions, they are likely to bear more children. In many countries, women are expected to be the caregivers. However, because of a lack of childcare services and

child benefits, women postpone having a child and end up having fewer children. According to empirical data, in Europe, women are willing to have more children (2 on average, which is higher than the current number) (Coleman, 2001), but working conditions do not allow them to have more children. In Scandinavian countries, birth rates are relatively high compared to southern Catholic countries. Childcare facilities in Nordic countries allow women to have more children whereas, in a southern country like Italy, women are expected to do all child caring themselves. This causes both a decline in fertility rate decline and restriction of women from labour force participation, which in return decreases the number of labour force. It is controversial whether government policies would affect social behaviour or not. However, in countries with relatively higher birth rates, such as France, pronatalist measures are supportive of higher fertility rates. In the early 1980s, French pronatalist measures were estimated to add about 0.3 to the average family size (Coleman, 2001). In this respect, pronatalist measures can be a way to encourage higher fertility rates.

1.2.2 Decreasing Infant Mortality

One of the reasons for the increase in life expectancy is the decline in infant mortality rates. Infant mortality rate is defined as the number of infants dying before reaching one year of age, per 1.000 live births in a given year (World Bank, 2015). As it can be inferred from Figure 2, there has been a substantial decline in infant mortality rates all around the world. This decrease can be explained by the medical advancements in mother and child health, better access to healthcare and nutrition.

In 1996, infant mortality rate was reported as 40.9 deaths per 1.000 live births, and it decreased to 10.8 deaths per 1.000 live births by the year 2013. As can be inferred from the graph, Turkey started worse off than other upper middle-income countries such as Brazil, China, Colombia and Mexico with higher rates of infant mortality. However, Turkey achieved a lower infant mortality rate by 2013 compared with these countries. In southern European countries such as Greece and Italy, this rate is much lower and there

has been a slight decrease throughout history but it is clear that Turkey has experienced the most dramatic change among these countries.

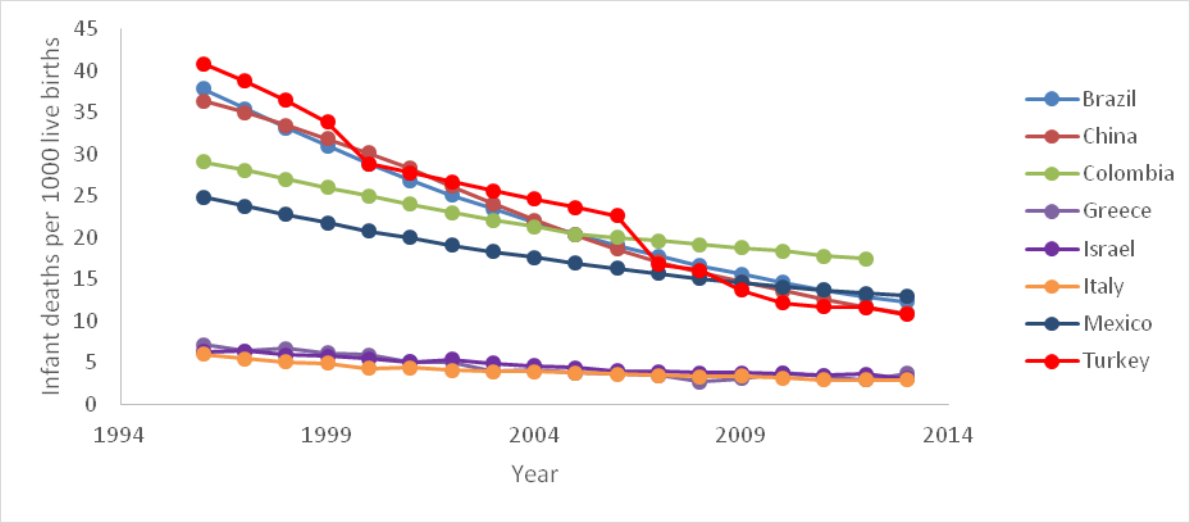


Figure 2 Infant Mortality Rates in Selected OECD Countries (Source: OECD, 2014)

1.2.3 Increased Longevity

The second factor that is problematic for the population, but good for humanity, is the increase in life expectancy. Life expectancy is defined as the average number of additional years a person is expected to live if they are subjected throughout life to current mortality conditions (Hantrais, 2004). Combined with better nutrition facilities and better working and living conditions, technological and medical developments in healthcare have increased the average number of years that a person can enjoy throughout his/her life. People are living longer than before and therefore the proportion of old people has been increasing compared with the younger population. For that reason, a shift in longevity becomes problematic for the ageing issue.

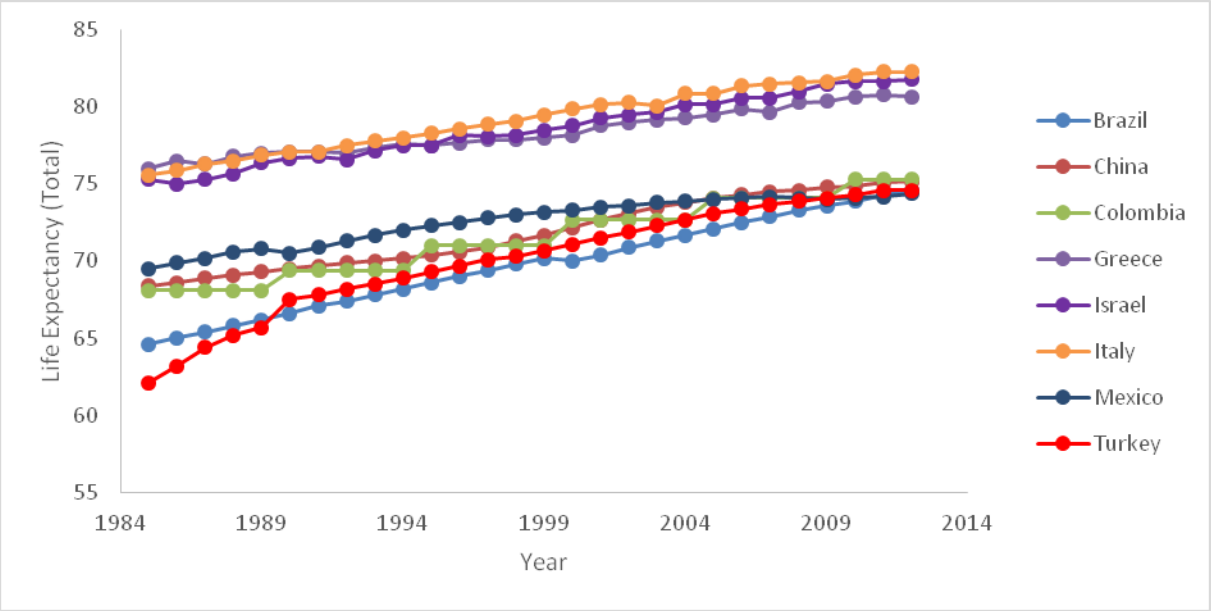


Figure 3 Life Expectancy at Birth in Selected OECD Countries, 1984-2012. (Source: OECD, 2014)

According to UN statistics, current life expectancy for men in Turkey is 69.5 whereas it is 74.4 for women (UNPF, 2008). As can be inferred from Figure 3, life expectancy at birth has dramatically increased within the past 28 years with a shift of almost 30 years. Even if the rate of increase is slowing down, life expectancy at birth is going to keep increasing in the future, reaching 78.5 by 2050 (OECD, 2009).

1.2.4 Population Composition

The fact that the post-war baby boom generation is moving into old age intensifies the discussion of population ageing. In the past 100 years, the population of the world has increased from 2 billion to 6 billion (Coleman, 2001). Especially after World War II, there has been a rapid increase in birth rates throughout the world. Considering the average human lifespan, these babies of the post-war era started to become old at the beginning of the 21st century. Combined with longevity and low birth rates, the percentage of older adults has increased dramatically and is prone to continue doing so in the future. The rate of ageing stepped up a gear as the exceptionally large post –World War II birth cohorts (the “baby boom” generations in Western countries) enter the older ages (McDonald,

2000). As it can be inferred from the figure below, the ratio of older people is increasing within societies, resulting in a dramatic shift with baby boomers moving into old age.

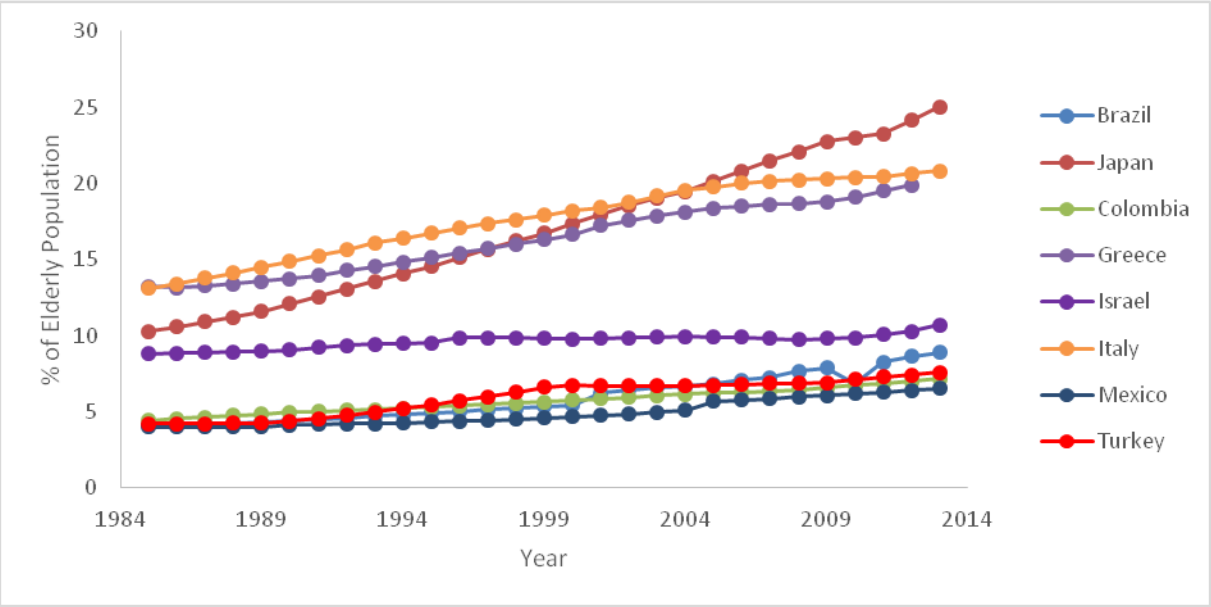


Figure 4 Ratio of Population Aged 65 and Over to Total Population. (Source: OECD, 2009)

1.2.5 Old-Age Dependency Ratio

Due to longevity and declined fertility rates, the proportion of older people within the population has been increasing. Figure 4 shows that there has been a considerable increase in the proportion of older people from 4.3 to 6.9 in a 13-year period and the increase is projected to continue into the future. According to OECD (2009) estimates, 7 percent of the Turkish population is currently considered to be 'old', with the anticipated figure reaching nearly 20 percent in 2050. This situation may be interpreted as an increase in the number of older people in a household composition and a larger number of older people depending on younger generations. The situation has a direct effect on the old-age dependency ratio, which is defined as the number of economically inactive older persons, for every 100 persons of working age, usually taken to be the population aged either 15-64 or 20-59, according to context (Hantrais, 2004). However, in order to make judgements

about the economic side of dependency, total dependency ratios should be considered in which the number of dependent children is put into the equation. In 2013 the old age dependency ratio was calculated as 11.8%. This number is expected to increase to 15% in 2023 and 32.9% in 2050 (TDHS, 2013). Given this increasing dependency ratio, it is evident that the older population will, specifically, need financial support along with social and psychological support.

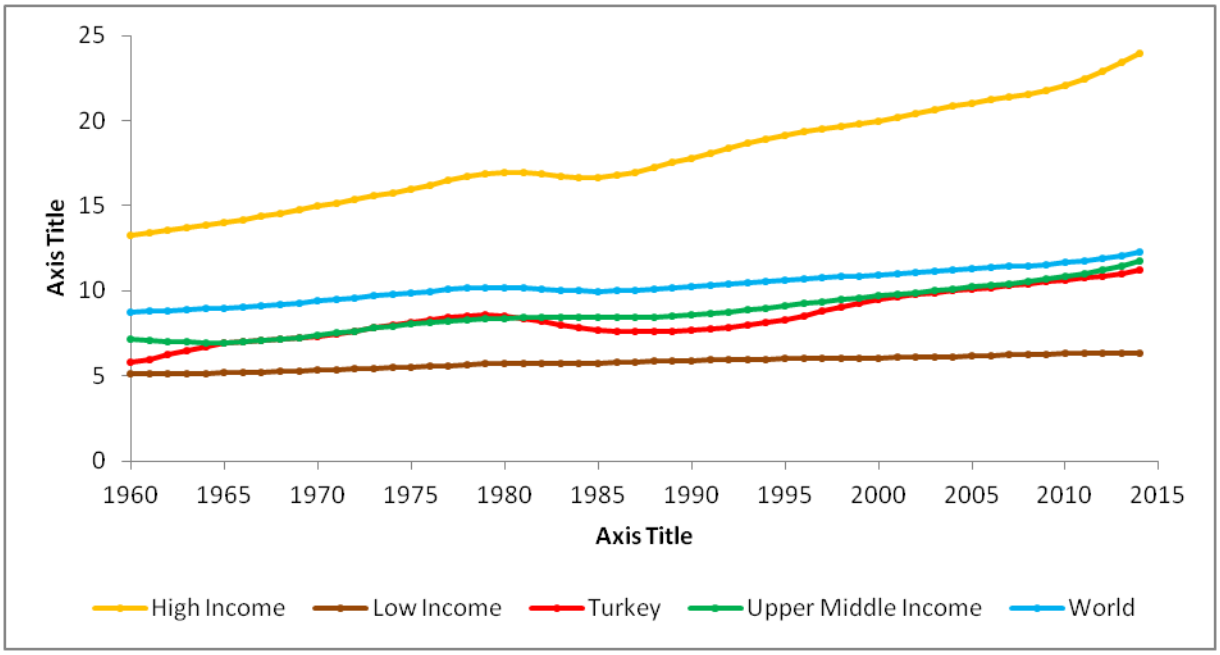


Figure 5 Old-Age Dependency Ratios, 1960-2014.(Source: World Bank, 2015)

1.3 Structural Changes in Family

Families all over the world have witnessed a dramatic change beginning with the second half of the 19th century. Population has increased dramatically and ageing has subsequently emerged as a population challenge. On the other hand, structural changes have taken place within the families. The family as an institution has always been a strong unit in society. However, with the effect of societal changes and demographic ageing, structural changes have started to take place within families. These changes can be linked with various economic, social, ideational and demographic factors. In this section,

structural changes in the Turkish family will be discussed with regard to statistical data and will be compared with other middle-income countries.

1.3.1 Marriage

Marriage is historically considered as the main milestone to establish a family. However, a decline in marriage rates has been taking place all over the world, especially in the Western world. Since marriage is the hallmark of a traditional Turkish family, it is important to see if there is any change in their marriage patterns. When we look at crude marriage rates it does not really give us an idea as there is no linear relationship between the rates and the years. However, when we look at the percentage of married people, we can see a general decline.

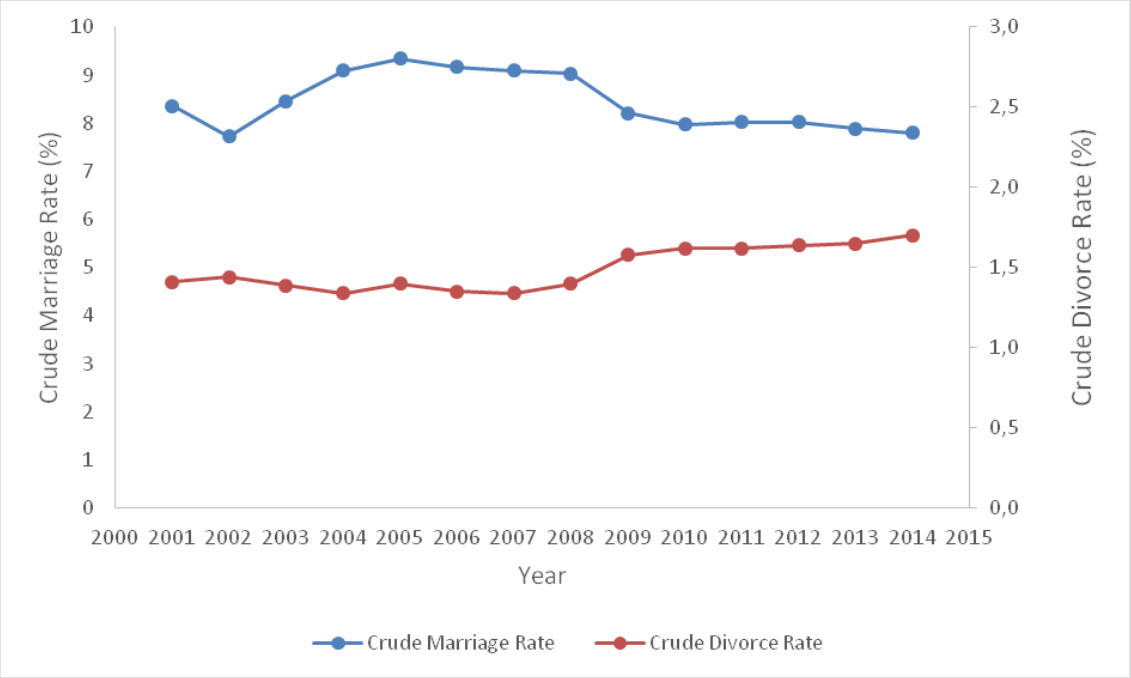


Figure 6 Crude Marriage and Divorce Rates in Turkey,2000-2014 (%).(Source: TFSS, 2011)

1.3.1.1 Age of First Marriage

In addition to the decreasing number of children, as it can be inferred from the table below, the age of first marriage for women and men is rising. Due to increased education levels and work patterns, women prefer to get married later than their peers used to do in the past.

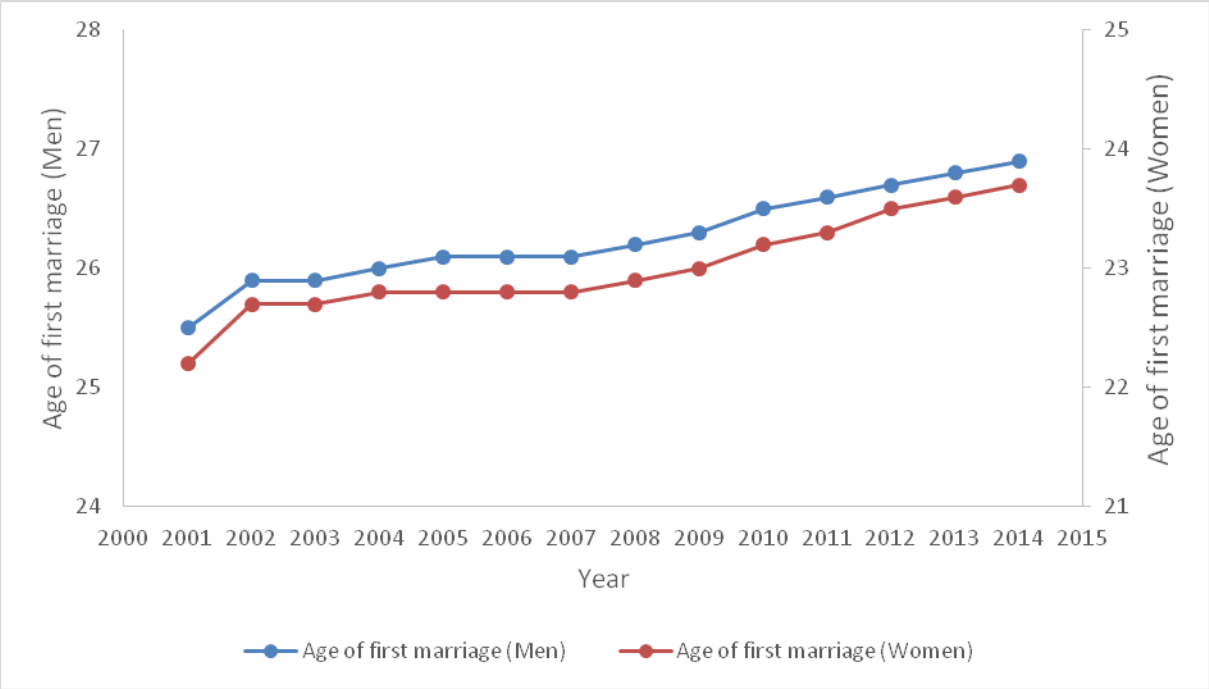


Figure 7 Age of First Marriage in Turkey for Men and Women, 2000-2015. (Source: TFSS, 2011)

1.3.1.2 Modes of Marriage

Arranged marriages have always been the prevailing mode within Turkish families. Most of the arranged marriages were happening without the consent of the bride or the groom. Even though women have been the main victims of forced arranged marriage, men are also forced into marriage without their consent. For men, the percentage of arranged marriages without consent varied between 13.6-17% between 1951 and1970, decreased to 7.9-9.2 % between 1971 and 1985, to 5.3% between 1986 and 1990, and finally to 1.2% between 2006 and 2011 (TFSS, 2011).

For women, the percentage of arranged marriages without consent has always been higher compared with men; however, this percentage has also gradually been decreasing. The percentage of women who married without consent between the years 1951and 1955 is 31% and it decreased to 19.8% between 1966 and1970. Between 1986 and 1990 this percentage dropped to 10.3% and the most recent data shows that only 1.8% of women have reported getting married without their own consent.

As can be observed from the statistics, there has been a dramatic decrease in the way individuals decide when they get married. Having more control over their lives, individuals have started postponing their marriages. In keeping with longer education periods and personal pursuits in life, the age of marriage has increased. Even though the average age of first marriage is still considerably younger than in other upper middle-income countries, first marriage age is increasing both for men and women. This increase in marriage age also affects the age of first birth for women. This situation has a direct effect on household size and composition, which in turn affect intergenerational relationships in the long run.

1.3.2 Divorce

While marriage rates are in decline, the number of divorces is increasing. When we look at the divorce rates in the world, we see an increase in the ratio of people who divorced in the last 35 years. Even in countries where family is still a strong institution, divorce rates may be below global rates but they are still on an increasing slope. For instance, predominantly Catholic countries like Italy, Spain and Mexico have a profile of rising divorce rates. When we look at Nordic or West European countries, we see a decrease or very little change in divorce rates. Obviously, these statistics do not suggest a strengthening in family relationships. As known from the literature and statistics, new forms of families are emerging, such as co-habitation, lone parenting, etc. Subsequently, since the dissolution of relationships is no longer achieved through legal divorce proceedings, there has been a decline in divorce rates within western families. In this respect, change in the family relations of Turkish families can be understood in the southern European context.

1.3.3 Cohabitation

In Europe, marriages are losing their prevalence and cohabitation is on the rise. Table 1 shows the data from OECD (2008) where adult unions are documented. The percentages of cohabitation are especially high in Nordic countries and the highest goes as far as 21% in Sweden. However, this is not the case in Turkey. The Turkish Family Structure Survey shows that legal marriage is the prevailing type of marriage in Turkish society (TFSS, 2011). According to the statistics in 2011, 85.9% of the couples practised both legal and religious marriage and 9.7% only legal marriage. 3.7% of the couples have only a religious marriage and the remaining 0.6% have no form of marriage (TFSS, 2011). In this respect, it can be argued that marriage is still a strong institution for Turkish society and cohabitation is not prevalent.

Table 1 Adult Union Types (%). (Source: OECD, 2008)

	Married %	Civil partnership %	Cohabitants %	Singles %	Total %
Belgium	54	7	6	34	100
Denmark	57	1	13	30	100
Finland	51	0	15	34	100
France	56	2	14	28	100
Germany	54	1	8	36	100
Netherlands	56	6	8	30	100
Norway	50	3	14	33	100
Spain	55	3	4	38	100
Sweden	44	1	21	35	100
Switzerland	61	2	6	31	100
United Kingdom	54	4	6	36	100
OECD-17	54	3	8	35	100

1.3.4 Household Composition

Another factor that contributes to family change is the change in the composition of the household. With the migration and urbanisation that took place in the second half of the 20th century, there has been a dramatic shift from extended families to urban families. Today, only 12.3% of Turkish households are extended families whereas the percentage for nuclear households soars to 70% and to 17.7% for patchwork families (TFSS, 2011). As it can be observed from the graph below, beginning with late 70s, there has been a dramatic decrease in the percentage of extended families. Moreover, the percentage of nuclear families has increased simultaneously with the decrease in extended families.

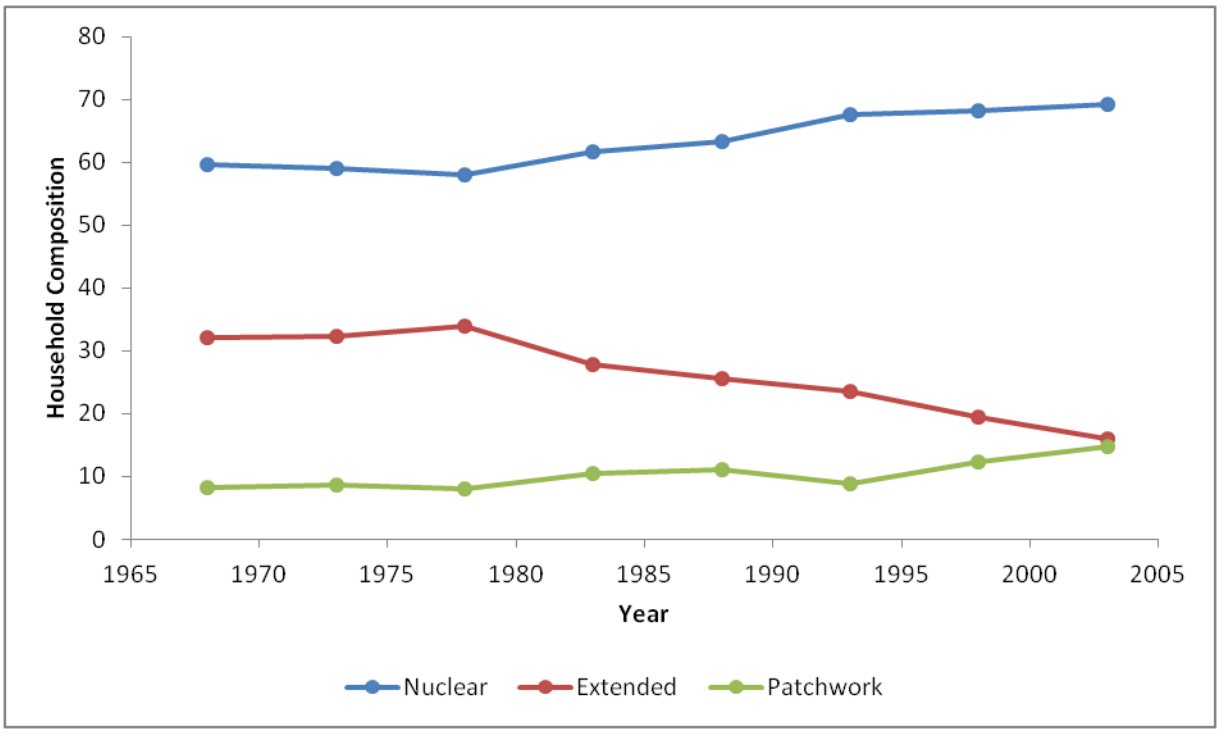


Figure 8 Household Composition Change in Turkey, 1965-2005 (%).

(Source: TFSS, 2011)

1.3.5 New Types of Families

Added to increasing cohabitation, there other types of family forms are also emerging. The old notion of mother, father and children as members of a family is shifting. Dissolution of marriage, single parenthood, heterosexual and homosexual partnership, step-parents and siblings are all new constituents of a family (Harper, 2006). These families are described as 'blended' or 'patchwork' families. Mutual agreements and consensual partnerships have replaced the blood link between family members.

Because of cultural taboos, currently there is no data on homosexual families in Turkey, and information about step-families is also not available. However, the Turkish Family Structure Survey provides information about single person families and single parent families (TFSS, 2011). According to the statistics, single person households increased by 0.3% in one year, from 8.6% in 2012 to 8.9% in 2013. Similarly, single parent families increased by 0.1% in one year, from 8.1% in 2012, and to 8.2 in 2013 (TFSS, 2013). In accordance with the demographic and structural trends, households made up of couples with children have decreased, and couples without children have increased. As was mentioned previously, the percentage of three-generation family households has also decreased.

1.3.6 Verticalisation of the Family

Bengtson argues that due to the ageing of society, the composition of household size is changing (2001). Since people live longer, healthy lives, a typical household is more likely to include members from different generations. Today, people live long enough to see their great-grandchildren, even their great-great-grandchildren. However, since fertility rates are in decline, the number of children in the household is decreasing. This age structure change at the family level is described as a shift from pyramid families –in which the number of people in each generation increases progressively with each younger generation – to **beanpole** families in which the household or family is composed of different generations with fewer numbers in each (Bengtson, 2001).

In Turkey, households are verticalising as well. The decrease in fertility rates (see Figure 1), the increase in life expectancy (see Figure 3) and the increase in age of first marriage (see Figure 7) support the argument that families in Turkey are also becoming more vertical in terms of structure and household composition.

1.3.7 Women Entering the Labour Market

After the World War II, women in Europe started to participate in the paid labour force since many men had become either martyrs or veterans. In that respect, women had to take on the role of "breadwinner" in the household (Hantrais, 2004). This increase of women in the labour market has continued in keeping with the feminist and modernist movements. The necessity of earning money has turned into ideological trends. The stereotype of the male "breadwinner" form of households has started to change into "dual earner" or "adult earner" models where both partners work. This increased labour participation has diminished the conventional care resources for older adults.

1.3.8 Effects of Demographic and Structural Family Change on Intergenerational Relationships

1.3.8.1 Increasing Disability and Dependency

As it has been mentioned previously, with the increase in life expectancy, people are living longer. However, this lengthening of life does not necessarily mean a healthy prolongation. According to WHO statistics, there is an average gap of 7 years between life expectancy at birth and healthy life expectancy at birth (World Health Statistics 2009). On a rough estimate, people are likely to spend 7 years of their lives unhealthy or disabled, which means that they are very likely to be dependent on other people. In this respect, increasing long-term disability will require care support between generations and families.

1.3.8.2 Availability of Care Resources

Families have always been the main source of support and care within society regardless of the cultural or institutional design of the country. However, verticalisation of the family has increased the importance of family care and support. The increasing proportion of older people in society will make families more crucial in terms of care and support.

As we know, the number of children is in decline and this has a direct effect on the availability of care resources. And because of the structural changes, women entering the labour market and the newly-emergent family types described above, the number of family members available to provide care is also decreasing. As a result of the decline in replacement rates, the rate at which deaths are replaced by births, horizontal ties among generations have weakened (Harper, 2006). There has been a need for increase in vertical ties between generations as they have become more dependent on each other. Moreover, the oldest of the old (80+) have children who are older than 60 and 65, and who may require long-term care as well. This situation is challenging, especially for welfare states where the state has special arrangements and policies for older age groups. However, research shows that people prefer to be taken care of at home by a relative. According to a Eurobarometer survey in 2007, 45% of the participants prefer or expect to receive long-term care at home from a relative. 25% are again in favour of care at home but provided by a professional care service. On the other hand, only 10% prefer or expect to receive institutional care. In that respect, we can easily conclude that the majority of European people are in favour of home-based long-term care delivered either in a formal or an informal manner (European Commission, 2008). For that reason, intergenerational relationships become more important in an ageing society.

1.3.8.3 Extended Kinship

In the absence of nuclear family support, extended kin relationships might gain importance in terms of care and support. Even though kinship availability is a critical issue for the initiation of such a relationship, kinship activation is crucial for maintaining the relationship. According to the Model of Hierarchical Compensation, in the

unavailability of the nuclear family, other family members take over the functional role. For example, extended kinship ties in later life are activated in the absence of a primary family figure such as a spouse, child or a sibling. On the other hand, the Functional Specificity model suggests an intensified relationship, which had already been activated but strengthened further after a personal loss. For instance, increasing contact and support from an adult child to a widowed parent can be explained by this model. The results of the Berlin Ageing Study have shown that extended kin resources play an important role for late-life care and support. The statistics show that there are on average 7.2 available kin per person other than those in the nuclear family and it is strongly associated with the given person's status in the family. Being a parent and having a sibling had a significant effect on the number of available extended kin resources (Harper, 2004).

1.3.8.4 Lengthening Adult Union and Parent-Child Relationships

With falling fertility rates and increased longevity, there are certain delays taking place in the major life-transitions. People are delaying the first age of marriage, first age of birth, remarriage, leaving parental home and achieving economic independence from parents. As well as people, these life-transitions are ageing (Harper, 2004). People are intentionally delaying their transition to adulthood or other forms of major transitions in life. This situation is also important for the empty-nest syndrome for the parents. Early fleeing of the children from home is delayed and this also delays this syndrome for the parents.

1.4 Family Value Change

1.4.1 Changing Kin Attitudes

Younger generations have become more independent and their mobility has increased with technology and changing family values. Individualism over communalism has started to prevail among young couples. Goode's and Hareven's study reveal that the extended family encouraged respect and responsibility for elderly care whereas today's nuclear families lack the resources to provide care and this very much affected by a shift from "familism to individualism" (Harper, 2006).

1.4.2 Children Born out of Wedlock

One of the reasons for declining marriage rates may be ascribed to the growing share and social acceptance of the children that are born out of wedlock.

Even though there is no data on the number of children born out of wedlock, the percentage of people who are against it is very high in Turkey. In overall, the percentage of people who claim that having children out of wedlock bothers them is 69.2%, and the percentage for this is 66.1% for urban areas and 74.1% for rural areas (The other percentages show the responses of "*it does not bother me, not interested, no idea"*).

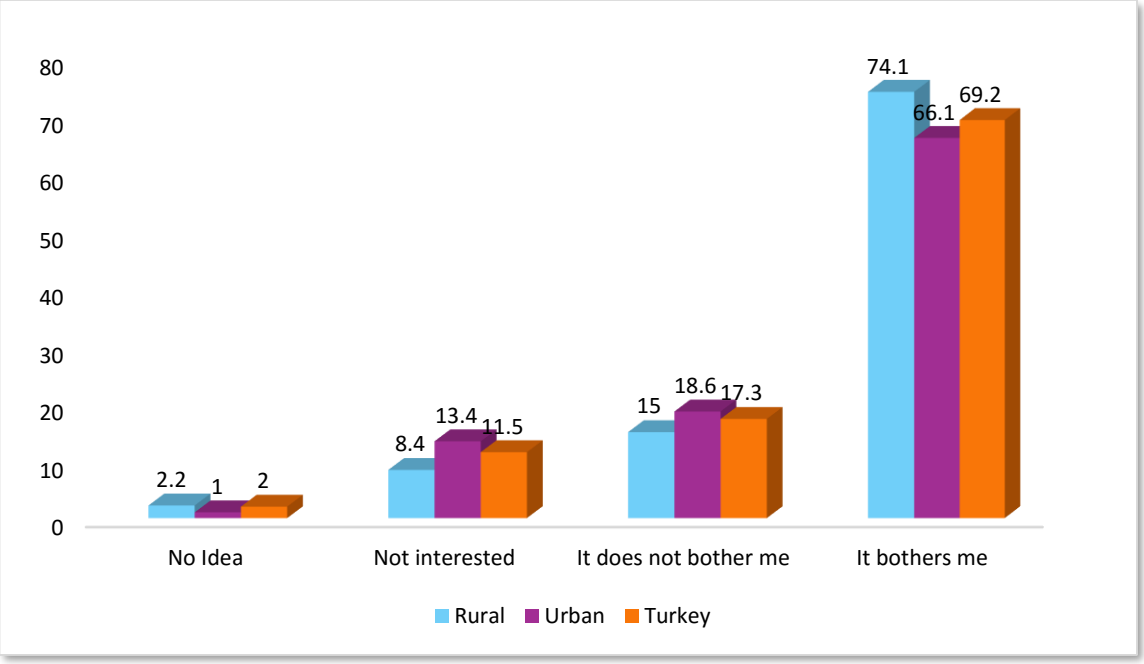


Figure 9 Opinions on Children Born out of Wedlock (%).
(Source: TFSS, 2006)

1.4.3 Value of Children

The most outstanding change has taken place in terms of the value of children. Studies show that the meaning that is attributed to a child has dramatically changed. A study by Cigdem Kagitcibasi (in Nauck & Klaus, 2008) has suggested three different dimensions of the value of children: psychological, social and economic. According to her,

psychological and economic dimensions are very important in explaining fertility behaviour in Turkey. Especially in rural areas, children are very important investments for future risks such as unemployment, illness and old age, because social security and social services are very limited.

Kagitcibasi also refers to two different patterns of intergenerational relationships: material interdependence and emotional interdependence. Later studies show that material interdependence is more common in rural- and lower-income/-education strata whereas emotional interdependence is more common among urban middle class.

As can be seen from the figure below, economic and instrumental value of children has decreased over time. The psychological and emotional value of the children on the other hand has increased substantially.

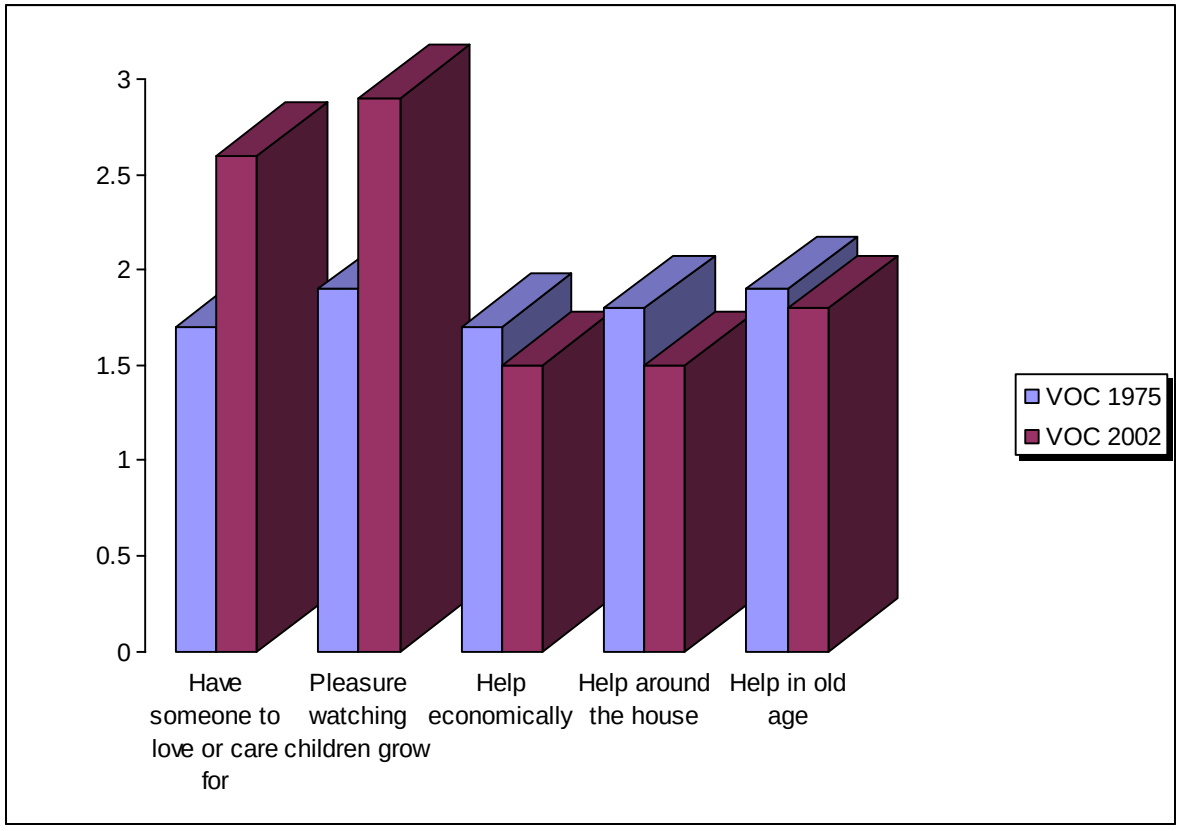


Figure 10 Changing Value of Children,1975-2002.
(Source: Nauck & Klaus, 2008)

1.4.4 Gender of the Child and Son Favouritism

Since patrilineal kinship was prevalent within the traditional Turkish family, male children were of great importance for the household. For the subsistence of the household, sons played a major role in the domestic economy. Daughters were leaving the household after marriage and had no economic usefulness for the household because they became a member of their husbands' family. For this reason, male children were more favoured than female children. Many families kept on having children until they had a son or a satisfactory number of sons regardless of the number of daughters. A survey by Kagitcibasi in 1975 shows that 75% of the female participants and 93% of the male participants preferred male children to female children. However, recent studies show that this is no longer the case. A survey done in 2002 demonstrates that only 41% of the women prefer male children to female children (Nauck & Klaus, 2008).

1.4.5 Childrearing Practices

Parental control and obedience have always been the key elements in intergenerational relations of Turkish society. The children are expected to consult their parents and be dependent on them while making decisions. In Kagitcibasi's study, which was done in 1975, "obedience" was the word most frequently uttered by parents at 60%, whereas "independence" and "self-esteem" scored the lowest percentage, of 18%. Looking at more recent studies, we see that obedience and dependence are still important; however, independence and reliance are rated much higher (Nauck & Klaus, 2008). With the changing value of children and family structures, autonomy and expressiveness in children are more appreciated by the parents. This can also be a result of the modernisation and globalisation process whereby individuality and liberty are emphasised more commonly.

1.4.6 Changing Expectations of Children

With changing values, expectations of children are also shifting. A longitudinal study shows that both financial and instrumental help expectations of daughters and sons have decreased over time (Nauck &Klaus, 2008). Even though there is no existing data referring to the emotional expectations of parents in 1975, the proportion of emotional expectations compared with other expectations is essentially higher in 2002. The financial help and household help expected from sons and daughters have also decreased over time (Nauck &Klaus, 2008).

1.4.7 Views on Care Homes

Another cultural stigma that facilitates family care and thus intergenerational care transfers is the prejudice against care homes and nursing homes in Turkey. Combined with the unpleasant news and footage (elder abuse, bad physical conditions) presented in the media, the image of care homes becomes even worse. Previous research shows that most Turkish people are not keen to go to care homes in their old age (Mottram & Hortaçsu, 2000).

The Turkish Family Structure Survey shows that 40.2% of respondents prefer to stay with their children in old age and only 9.1% prefer going to a nursing home in old age (TFSS, 2011).

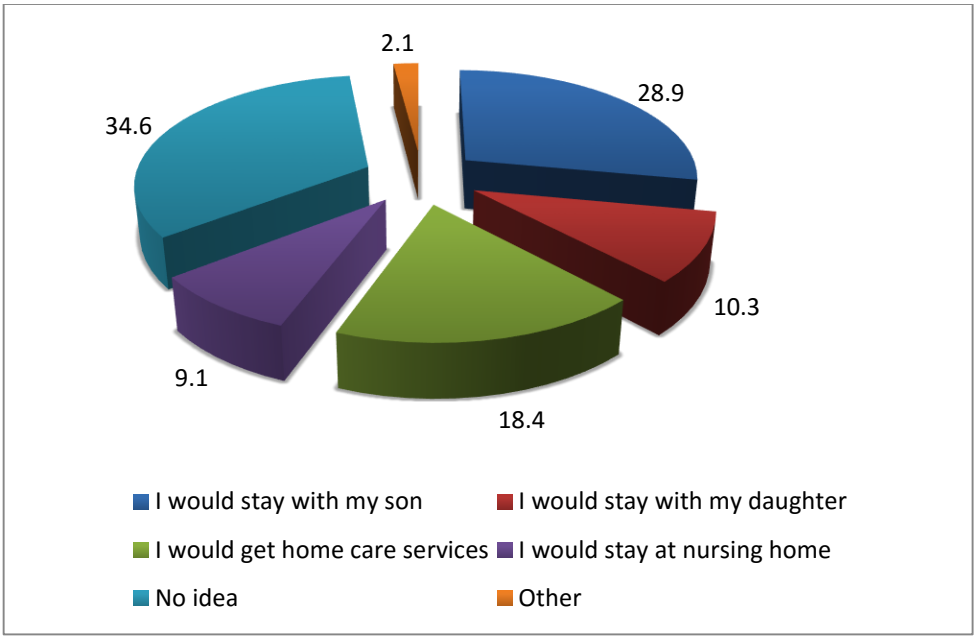


Figure 11 Life Choice of Individuals for Old Ages (%).
(Source: TFSS, 2011)

1.4.8 Migration and Urbanisation

One of the most influential reasons of family change is the migration that has taken place in the last 50 years. In the second half of the 20th century, mass migration has shifted from rural areas to big cities. According to 2008 statistics, 75% of the population are living in urban areas whereas this percentage is only 25% for those who live in rural areas. Istanbul, as the largest city and receiving the most migrants, is host to 17.8% of the country's population. Keeping in mind that these are only the official statistics, the actual picture might be different and Istanbul is likely to be more populated than the official statistics suggest (Nauck & Klaus, 2008).

1.4.9 Modernisation and Women

Since women play a major role in the intergenerational transfers, it is crucial to look at the changing dynamics of women's status in Turkish society. Before the establishment of

the Republic of Turkey in 1923, Islamic Sharia Law operated in Turkish society. After the establishment of the Republic, a great deal of change took place in order to improve the situation of women. With the introduction of a secular state, Sharia law was abolished and a new civil code introduced, which is adapted from the Swiss Civil Code. Polygamy has been abolished and new arrangements made in the spheres of child custody, property ownership and divorce. With the new code, women's status in the family life has been improved and placed on an equal footing with men (Kağıtçıbaşı, 1986).

Moreover, political rights were granted to women in Turkey took relatively earlier than in most of the Western countries. Women were able to vote and run for office in the elections by 1934, whereas universal suffrage was not available until 1971 in Sweden and until 1944 in France. This granting of rights was also crucial for the empowerment of women in political and social life.

As Moghadam (1993) argues, change in family law is an important indicator of social change, especially in Middle Eastern countries, and it also implies a degree of "state feminism". In that respect, it can be argued that Turkey has gone through a significant social change with the establishment of the Republic of Turkey and the empowerment of women plays a crucial role in this change.

However, current Turkish law still regards woman as a dependent child unless she is married. Female daughters continue to benefit from privileges that their families are entitled to until they get married, whereas male children are exempted as soon as they turn 18. This double-standard system is salient, especially in access to healthcare services and special passports.

1.5 Social and Public Policies

1.5.1 Welfare State Typology

Turkey is a special case for welfare state typologies owing to its unique and dynamic economic and social structure. The Turkish welfare state encompasses Mediterranean welfare state characteristics since provision of welfare relies on the family and state support is minimal, which is also the case in southern European countries such as Italy and Greece (Ferrera, 1996). Long-term care provision in these countries is left to the adult children and benefits for the older persons are strictly limited, which is similar to the situation in Turkey.

On the other hand, Turkey might be considered a liberal regime, in which the state plays a residual role. As a transitional economy, Turkey is going through rapid social and economic change. Economic growth and privatisation trend lead to the idea of full-employment and self-responsibility for the welfare of citizens, with state intervention as a last point of resort. Based upon that notion, the Ministry of Family and Social Policy describes Turkish Welfare State as “institutional” and “residual” (MFSP, 2014).

1.5.2 Intergenerational Welfare Regimes

Intergenerational transfer regimes are classified into 3 categories (Scandinavian, Continental, Mediterranean), which also overlap with welfare regimes (Albertini, Kohli & Vogel, 2007; Esping-Andersen, 1990; Brandt, Haberkern & Szdlik, 2009; Litwin, 2010; Leopold & Raab, 2011). However, some scholars prefer to analyse each country as a unique case rather than grouping them (Attias-Donfut, Ogg & Wolff, 2005; Schenk, Dykstra &Maas, 2010). Albertini & Kohli (2012) examine types of generational contract by looking at financial transfers in European families. According to their findings, downward and upward transfers within families differ according to the welfare regime and these transfers have diverse connotations for intergenerational contract. In southern European countries, downward transfers are rare but more intense compared to Nordic

countries, while Continental European countries fall in between (Albertini & Kohli, 2012). There is a vast body of literature that supports changing intergenerational contract both in the Eastern and Western context (Chow, 1999; Martin, 1990). This changing contract constitutes a challenge for the welfare state (Malhotra & Kabeer, 2002).

1.5.3 Formal Care and Long-Term Care Facilities

1.5.3.1 Institutional Care

Institutional care of the older people in Turkey is provided both by the public sector and the private sector. The public institutions are mainly operated through the Directorate of Disabled and Elderly Services, a unit that falls under the Ministry of Family and Social Policy. There are 109 nursing homes that operate under the directorate, with a capacity of 11.826 people. There are also 20 nursing homes belonging to local authorities (municipalities), 30 belonging to associations and foundations, 7 belonging to ethnic minorities and 2 belonging to other public institutions, with a total capacity of 5.983 people. There are also 29 life centres for the older people that operate under the directorate, where older people live with their peers in a flat. There are 118 older people currently living in these flats. On the other hand, there are 139 private nursing homes, and only one nursing home specialised in Alzheimer's disease, which was opened in 2011 by the Alzheimer's Foundation in Turkey. The overall capacity of these private nursing homes is 6.853 and the capacity of the Alzheimer's nursing home is 15 (MFSP, 2014).

According to the 2013 statistics, older people (65+) constitute 7.7% of the population with 5.891.694 people (TUIK, 2014). On the other hand, as it was indicated before, the total capacity of the nursing homes is 24.677 (MFSP, 2014). Regarding the gap between the capacity of the nursing homes and population aged over 65, the insufficiency of these institutions is evident. Moreover, since the minimum admittance age to a nursing home is 55, this gap may be even wider. Future projections for an aged population show that this shortage of institutional care services is likely to increase.

1.5.3.2 Home-based care

As stated previously, care of the older people was being undertaken by relatives and state intervention in home-based care is a very recent development for Turkey. Formal care services that are provided by the state are very limited. There are only 5 Elderly Service Centres operated by the state, again under the Directorate of Disabled and Elderly Services. Membership is compulsory for service reception, which costs 10 Turkish Liras per year (approximately GBP2). These 5 centres have 1.066 members in total, of whom 497 are being males, and 569 females. These home-based services are provided to the older people who are not mentally ill or disabled and who do not need medical care.

There are also some home-based services provided free by the local governments (metropolitan municipalities and sub-provincial municipalities). Their services include day care and long-term care, help with activities of daily living (ADL), providing food, fuel, and basic health check-up. However, these services are not being provided systematically and continuously, which makes it hard to track numbers and real benefit.

The state also provides care benefit for the people who take care of their older relatives. However, these benefits are strictly means-tested. In order to be eligible for the benefit, the patient or the person in need should have a disability ratio of 70% and not to be able to continue his/her life without the help of a third party. Moreover, there is a maximum income criterion and it is capped quite low. For instance, eligibility required a maximum income of 510 Turkish Liras for the first half of the year in 2014, and 540 Turkish Liras for the second half. The amount of money that the caregivers were entitled to receive was around 765 Turkish Liras for the first half of the year in 2014 and around 810 Turkish Liras for the second half (MFSP, 2014). Moreover, the application process itself is also very rigorous. The documents for application include a disability report that includes the level and category of disability, which needs to be issued by the relevant Health Council. Other documents include papers such as consulting covenant and photos. As of February 2011, 27.036 older people are receiving long-term-care benefit in Turkey (MFSP, 2014).

1.5.3.3 Financing

Financing of the residential LTC services depends on the type of service provider. The state-operated nursing homes are subsidised and share the cost with service users. The share of the cost is determined through income assessment and, for instance, if the client is not able to pay the whole admittance fee, then the state takes 75% of the income and leaves 25% to the client as pocket money. These percentages may change according to the income level of the client. However, there has been a recent amendment to the Disability Law (5378) and the extent of pocket money provision is expanded. On the other hand, there are also older people who benefit from these services for free. These people mainly have no relatives or income and the financing of this type of placement is provided by taxpayers. There is very limited subsidy for private nursing homes.

1.5.3.4 Childcare Services

Childcare is an important provision in a welfare state for the work-life balance of citizens, especially working women. In some countries, the state provides universal childcare benefits (e.g. Canada), whereas in other countries, kindergartens and private childcare is very costly, such as the case in the UK and US. Unaffordable institutional childcare makes working women turn to other kin resources (mainly grandmothers) to help raise their children, which will be elaborated on in Chapter 2.

In Turkey, there is no public nursery for families, but with the passage of a law in 2015, working mothers will be able to qualify for childcare benefits. However, regarding the high cost of private nurseries and kindergartens, the estimated amount of benefit will be able to cover only a small part of the childcare cost. On the other hand, workplaces that employ more than 150 women are required by law to establish a nursery (2004) and some institutions offer low-cost nursery services to their employees. Even though the law tries to serve working women with children, it presumes a childcare role only for the mothers, and moreover discourages firms and employers from taking on women. After the age of 3, children are able to go to pre-schools established within the public education system.

1.5.3.5 Pension System and Intergenerational Solidarity

Turkey has an earnings-related mandatory public pension scheme, which is financed on a PAYG (Pay as You Go) basis (OECD, 2011). The public expenditure for pensions is very meagre and so is the amount of the pensions. Pensions in Turkey constitute 6.1% of the GDP, whereas the OECD average is 7% (OECD, 2011). There is also a means-tested pension scheme for those who are disabled or over 65 and who do not have any kind of social security. This scheme pays 100.36 Turkish Liras (22 GBP) per month with an additional payment of 5%. However, given the fact that the 2012 poverty line just for food is 250 Turkish Liras for an average adult, it is obvious how inadequate this means-tested scheme is.

The government has also started to realise that mandatory government pension scheme will not be sufficient in the future and they need to resort to other ways for the provision of old age security. Starting from 2009, the government started giving subsidies for private pension schemes. The state adds 25% of all your savings that you put in your retirement funds. By this way, the government encourages private pension scheme usage among the younger generation.

1.6 Conclusion

This chapter has aimed to demonstrate the demographic and structural changes that are taking place in the Turkish families and the ways intergenerational relationships are affected by these changes. As a country that is going through demographic transition, Turkey is experiencing the share of older people in the population on the rise. On the other hand, structural changes within the family, combined with cultural shifts, are likely to put pressure on intergenerational relationships. Moreover, the limited welfare services in Turkey are one of the factors that strain intergenerational relationships, and specifically on solidarity. Within this changing and pressurising demographic, structural and cultural context, it is appropriate to see how intergenerational relationships are affected by socio-demographic factors. This chapter has built a base for understanding the demographic and structural context in Turkey. The following chapter explains the intergenerational solidarity concept and discusses the literature on intergenerational solidarity at the micro level.

CHAPTER 2: INTERGENERATIONAL RELATIONSHIPS: DEFINITIONS AND CONCEPTS

2.1 Introduction

Before delving into the literature of intergenerational relationships, it is appropriate to clarify some of the terms used. Intergenerational relationship, intergenerational solidarity and intergenerational transfers and exchanges are terms that are sometimes used interchangeably. However, some of them are overarching concepts while others refer to a specific characteristic of the relationship. Intergenerational relationship is a broad concept that encompasses different dimensions of the relationship between the generations. Based on the quality of the relationship, solidarity, conflict and ambivalence theories have been suggested in the literature. Yet intergenerational transfers and exchanges constitute part of the relationship, whether it is characterised by solidarity or ambivalence. Intergenerational transfers indicate a one-way flow of the resources, whereas exchanges are reciprocal. The figure below visualises the relationship between the concepts:

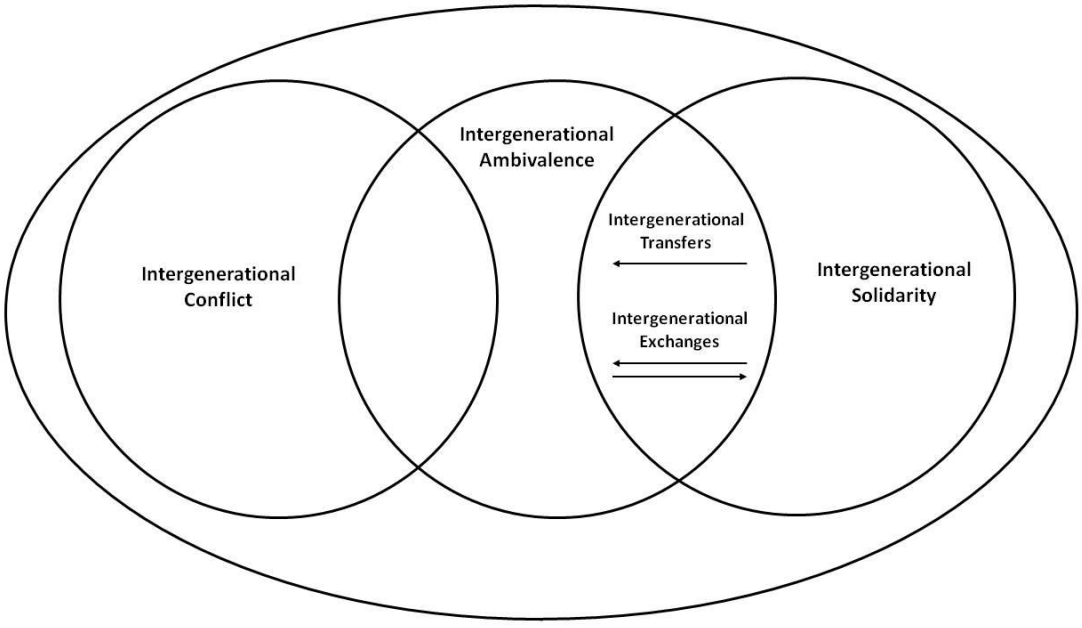


Figure 12 Intergenerational Relationships

As mentioned above, intergenerational relationships have always been characterised by multi-directional and multi-dimensional exchanges, which in turn are characterised by solidarity, conflict and ambivalence theories. In their broadest sense, solidarity theories have focused on the positive sides of the relationship, which are based on mutual support, whereas conflict theories have focused on the negative sides of the relationship, which have concentrated on the contradictory interests of different generations. On the other hand, ambivalence theories have brought the two together and argued that intergenerational relationships consist both of positive and negative aspects (Lüscher & Pillemer, 1998; Connidis & McMullin, 2002). However, the debate about intergenerational relationships has focused around the structure and functionality of such relationships.

In addition to the debates of structure and functionality, temporal and situational factors have also been taken into account by some theorists. As the life-course approach suggests, major life events and transitions affect intergenerational relationships in later life (Elder, Johnson& Crosnoe, 2003). For instance, sudden life events such as death and divorce might affect intergenerational relationships, while early parent-child interactions affect the intergenerational relationship at later phases of the life course (Aquilino, 1997, 2006; Rossi & Rossi, 1990; Van Wel, Linssen, & Abma, 2000; Van Wel, Ter Bogt, & Raaijmakers, 2002). Cumulative life experiences as well as sudden life events also have impact on the intergenerational relationships.

On the other hand, family sociologists and human geographers have started to conceptualise people increasingly as reflexive actors linked by relationships, where the focus shifts to people as active players in shaping intergenerational relationships (Bailey, 2009; Smart, 2011).In addition to life events and experiences, life trajectories are influenced and affected by the family and social networks, relationships and obligations, which signify the importance of "linked lives" (Dykstra & van Wissen, 1999). In this complex and interdependent network of relationships, each member plays a role in the other's lives. Daughters, sons, daughters and sons-in-law, mothers, fathers, parents in-law and grandchildren make up the essence of this complex network of relationships. Choices

made by a family member affect the other member, which also applies to living arrangements and intergenerational support in later life (Elder, Johnson, & Crosnoe, 2003). And yet, apart from spouses and children, many others might become involved in the care-giving process, including sons and daughters-in-law, siblings, grandchildren, other relatives, and nonrelatives (Stone, Cafferata & Stangl, 1987). This interdependency can either result in positive or negative outcomes for both parties (Aquilino, 1997; Greenfield & Marks, 2006; Kaufman & Uhlenberg, 1998).

In this second chapter, I focus on the two theoretical approaches to intergenerational relationships, namely the Intergenerational Solidarity Approach and the Intergenerational Ambivalence Approach, to address the complex relationship between the generations. Introducing the Intergenerational Solidarity Approach, I establish the relationship between structure and function and explain how demographic and structural patterns are likely to influence intergenerational exchanges in terms of financial, practical help and care transfers with references to similar demographic and cultural structures in the literature. I also establish a link between intergenerational transfers and intergenerational solidarity and demonstrate how these transfers are likely to affect intergenerational solidarity within Turkish society with references to other middle-income countries such as Middle Eastern, Latin American and Far East Asian countries.

Further, the Intergenerational Conflict Approach in response to Intergenerational Solidarity Approach is briefly introduced. Subsequently, addressing the limitations of both approaches, I introduce the Intergenerational Ambivalence Approach and its theoretical foundations with methodological implications.

Having reviewed the literature on intergenerational relationship, this chapter concludes that there is a need for the study of intergenerational relations in Turkey that employs a theory-based framework and this research project aims to fill this gap. Moreover, pointing out the methodological strengths of the Intergenerational Ambivalence Approach and the conceptual richness of the Intergenerational Solidarity Approach, this chapter proposes to use a mixed methodology for the enquiry into intergenerational relationships in Turkey.

2.2 Intergenerational Solidarity

Solidarity as a word refers to unity, harmony and cohesion. The Oxford Dictionary of English defines solidarity as "unity or agreement of feeling or action, especially among individuals with a common interest; mutual support within a group". When the concept of solidarity is applied to intergenerational relationships, one should expect "feelings" (emotions and attitudes) and "actions" (behaviour) to be included in the intergenerational solidarity model, where common attitudes and behaviour exist between different generations. "Mutual support" requires exchange of these feelings and actions between the individuals and groups. Individual solidarity might reveal itself in the micro family relationships whereas group solidarity might point to intergenerational cohesion at the macro level. "Common interest" may refer to procreation, reproduction or preservation of the kin as the ultimate goal among family members or between generations. Keeping these pre-conceptions in mind, it is appropriate to have a look at the roots of the intergenerational solidarity approach to see if and how these concepts are reflected in the theory.

2.3 Intergenerational Solidarity Approach

Starting with the second half of the 20th century, many studies have been conducted to understand and explain the relationships between adult children and their older parents (Adams, 1968; Burr, 1973; Cicirelli, 1983; Reiss, 1962; Hoyt & Babchuk, 1983; Mutran & Reitzes, 1984; Robins & Tomanec, 1962; Quinn, 1983). However, these studies failed to establish themselves on a theoretical ground, whereas the intergenerational solidarity approach builds itself on one of the oldest sociological theories (Atkinson, Kivet, & Campbell, 1986).

Intergenerational solidarity theory derives its roots from Durkheim's societal organisation theory, according to which transition to industrial societies from traditional societies has replaced "mechanic solidarity" with "organic solidarity" in society (1933). Parsons has contributed to this theory by arguing that multiple forms of solidarity can co-exist together

(1973). The solidarity approach became popular in social psychology in the 50s (for example Homans, 1950; Heider, 1958) and was adopted by family sociologists during the 60s (for example Nye & Rushing, 1969; Rogers & Sebald, 1962; Straus, 1964). These theories form a basis for the contemporary (intergenerational) solidarity theories with the assumption of a consensus on a set of norms and interdependence in the society (Roberts, Richards & Bengtson, 1991).

Intergenerational solidarity becomes a challenging subject at the macro level, where intergenerational equity and justice arises as an issue between the generations in regard to public policies such as pension and social assistance systems (Izuhara, 2005, p. 327; Walker, 1996, p.2). Even though this thesis will focus on the generational solidarity at the micro level, it is important to define and describe intergenerational solidarity at the macro level to demonstrate the interplay between these two different levels of intergenerational solidarity (Walker, 1996). In other words, to ignore the influences of the macro on the micro is to miss significant aspects of causation on one hand, and to ignore potential action in the form of social policies on the other (Walker & Fong, 2010). For instance, the EU considers intergenerational solidarity from multiple policy areas including poverty, social exclusion, family policies, education policy, environment and sustainable development, immigration and integration, housing and urban development, transport and mobility, quality of working life, co-ordinated retirement schemes and occupational pensions, health and long-term care policies (EU, 2012). For that reason, studying intergenerational relationships can contribute both to family sociology and a vast area of social policy.

In addition to the social policies that are developed to support intergenerational solidarity within the family, non-family programmes to facilitate intergenerational solidarity and contact have been quite popular in the last couple of years (e.g. Generations United in the US and Centre for Intergenerational Practice in the UK), especially with the initiative of the 2012 European Year of Active Ageing and Intergenerational Solidarity (European Commission, 2010). Also in urbanised Asia intergenerational activities in the extra-familial context have started to take place (Mehta& Thang, 2012). There have been guidelines about how to facilitate and establish intergenerational programmes (Epstein &

Boisvert, 2005; Jarrott, 2007; Kaplan & Hanhardt, 2003; Steinig, 2005), and some scholars and activists believe that intergenerational solidarity cannot be achieved only through family contact (Jarrott, Gigliotti & Smock, 2006). However, as stated before, this chapter is devoted mainly to the literature on intergenerational solidarity at the micro level.

Intergenerational Solidarity as a theoretical approach to intergenerational relationships at the micro level was introduced by Bengtson and Schrader (1982) and developed by Mc Chesney et al. (1988). The most commonly used intergenerational solidarity approach was developed by Bengtson and Roberts (1991). There have also been other attempts to classify intergenerational solidarity patterns but none of them has become a prevalent model in the literature (e.g. Goerres & Tepe, 2010; Kalmijn, 2005).

Bengtson and Roberts (1991) have described 6 different patterns of intergenerational solidarity between generations. The **first** is ***affectual solidarity***, which is primarily based on feelings and emotions towards each other and which determines the base of the relationship. The **second** is ***associational solidarity***, which depends on the frequency of contact by the family members. The **third** is ***consensual solidarity*** whereby family members have consensus on the values and opinions about how their relationship should be in relation to societal norms and traditions. The **fourth** is ***functional solidarity***, which emphasises the functional aspect of family that ensures its continuation. The **fifth** is ***normative solidarity***, which is determined by societal norms such as filial piety, etc. The **sixth** is ***structural solidarity***, which is determined by the geographical proximity of the generations.

All these solidarity types have their own empirical indicators and it is possible to measure them. The table below shows the definitions and indicators for measurement of different solidarity types. There have been several studies that looked into the relationship between these different theories but the interactions and associations between these different types of solidarity models are yet to be investigated (Bengtson & Roberts, 1991).

Table 2 Six Elements of Intergenerational Solidarity. (Source: Bengtson & Roberts, 1991)

Construct	Nominal Definition	Empirical Indicators
1- Associational Solidarity	Frequency and patterns of interaction in various types of activities in which family members engage	1-Frequency of intergenerational interaction (i.e. face-to-face, telephone, mail) 2-Types of common activities shared (i.e. recreation, special occasions, etc.)
2- Affectual Solidarity	Type and degree of positive sentiments held about family members, and the degree of reciprocity of these sentiments	1-Ratings of affection, warmth, closeness, understanding, trust, respect, etc. for family members 2-Ratings of perceived reciprocity in positive sentiments among family members
3- Consensual Solidarity	Degree of agreement on values, attitudes and beliefs among family members	1-Intrafamilial concordance among individual measures of specific values, attitudes and beliefs 2-Ratings of perceived similarity with other family members in values, attitudes and beliefs
4- Functional Solidarity	Degree of helping and exchanges of resources	1-Frequency of intergenerational exchanges of assistance (e.g. financial, physical, emotional) 2-Ratings of reciprocity in the intergenerational exchange of resources
5- Normative Solidarity	Strength of commitment to performance of familial obligations (familism)	1-Ratings of importance of family and intergenerational roles 2-Ratings of strength of filial obligations
6- Structural Solidarity	Opportunity structure for intergenerational relationships reflected in number, type and geographic proximity of family member	1-Residential propinquity of family members 2-Number of family members 3-Health of family members

According to the Intergenerational Solidarity Approach, better personal relationships lead to higher intergenerational exchanges (Bengtson, Giarrusso, Mabry, & Silverstein, 2002; Cheng, Birditt, Zarit & Fingerman, 2015) and adult children provide more support to their parents when they have higher quality relationships (Schwarz et al., 2005). However, the Intergenerational Solidarity Approach has been criticised for establishing itself on a normative theoretical ground that predicates a positive and harmonious disposition and

not embracing conflictual aspects of intergenerational relationships (Lüscher& Pillemer, 1998). The intergenerational ambivalence model, which emphasises the co-existence of harmonious and conflictual aspects of intergenerational relationships, has been suggested to replace the solidarity model (Connidis & McMullin, 2002; Lüscher& Pillemer, 1998). Moreover, in reaction to the solidarity approach, post-modernist views of intergenerational relations have come into the debate, emphasising peculiar and irregular aspects of the relationships (Kerns, 2009; Martin & Sugarman, 2000).

In response to these criticisms, Bengtson and his colleagues argued that the conflict model should be incorporated into the solidarity model as a 7th dimension (Bengtson, Giarrusso, Mabry & Silverstein, 2002). However, empirical work that incorporates conflictual dimension into the model is very limited. For that reason, the following sections will review the literature on the 6 dimensions of intergenerational solidarity.

2.3.1 Associational Solidarity

Associational solidarity refers to the frequency of contact with family members and the frequency patterns of shared activities where higher contact frequency indicates higher levels of associational solidarity between generations (Bengtson & Roberts, 1991). Contact with the family can take different forms, such as face-to face, telephone, mail, e-mail and texting (Lefkowitz, Vukman & Loken, 2012). There are different intra-individual factors that affect associational solidarity, which might be enlisted as co-habitation, geographical proximity and gender. Cultural motives and welfare structures are the macro-level determinants for associational solidarity. Solidarity theory suggests that associational solidarity is associated with structural solidarity and affectual solidarity (Bengtson & Roberts, 1991). High frequency of contact also facilitates other dimensions of intergenerational solidarity such as financial solidarity (a form of functional solidarity). It is argued that, with higher contact frequencies, generations are more aware of each other's needs, which also facilitates financial exchanges (Schenk, Dykstra & Maas, 2010).

As previously mentioned, ***geographical proximity*** is one of the main facilitators for face-to-face contact (Lowenstein, Katz & Gur-Yaish, 2007). With globalisation and increased

mobility, adult children, especially, are more likely to live in different cities, countries and continents. This situation might construct an obstacle for contact frequency between the generations; however, with technological developments, other means of communication are compensating for face-to-face contact. For instance, although the percentage of cohabitation is low in Norway and Israel, weekly face or telephone contact rate is quite high (91% for Norway and 97% for Israel). Southern European countries have more daily contact with the older parents compared with other European countries. On the other hand, regardless of the cultural and historical context, daily contact with the older parents is in decline. In Germany, research shows that while daily contact between children and parents decreased, weekly communication increased between 1996 and 2002 (Hoff, 2006).

Gender is another indicator for contact frequency. Women, namely daughters, are more likely to visit parents compared with sons, and this difference is even more pronounced with telephone contact (Spitze & Logan, 1990). In Asia, even though the volume of contact frequency is high (Knodel, 2014), variation according to gender is observed. A study conducted in Japan showed that even though men had higher geographical proximity to their older parents, women's contact was as frequent as with non-co-resident parents and contact by phone was even higher among women compared with men (Martin, 1990).

In Turkey, a Mediterranean country with traditionally strong ties, contact frequency is also high. According to research conducted by Yener (1980) in Ankara, Istanbul and Izmir on the social and economic factors that affect the lives of the civil servants who retired on reaching the age limit between 1978-80, it was found that the retired people who live close to their adult children meet up with them more frequently. Research conducted by Atalay (1992) found that 70.04% of older people who live in cities live in their own homes, and 28.26% of families who live in the city meet their parents every day, whereas 19.96% of them meet their parents once a week; 13.36% of them meet their parents once a month; 10.80% of them meet their parents once in 2-3 months; and 4.66% of them meet their

parents only on special occasions (Atalay, 1992). Another study indicates that older parents who live in the same city with their children meet them frequently (Menteş, 1993).

In a more comprehensive study conducted by Öztop and Telsiz (2001), 41.8% of parents stated that their children visit them every day, 26.9% of parents are visited 1-2 times a week, and 26.1% of parents are visited 1-2 times a month. The number of parents that state they are visited 1-2 times a year is low (5.2%). Frequency of visits depends on the gender and marital status of adult children. More than half of older women (50.5%), and 31% of older men stated that they are visited by their children every day. 41.8% of parents are visited both by daughters and sons every day. The effect of the marital status of parents on the frequency of visits has been explored; 62.6% of divorced or widowed parents are visited by their children every day, 34.3% of married older people are visited 1-2 times a month. In another study carried out in Ankara with 200 older people, 35.5% of the participants stated having daily contact with children and 30% with grandchildren (Şener et al., 2008).

According to The World of Elderly study, 93% of the participants stated that their children always visit them during religious holidays but visits on marriage anniversaries are limited to 26% and birthdays to 37% (The World of Elderly, 2006). However, according to the same research, 87% of the participants are happy with the frequency of contact with their family members.

The most up-to-date data on frequency of contact is provided by the Turkish Family Structure Survey conducted in 2011 (TFSS, 2011). In the course of the research older people who live apart from their offspring are asked about the frequency of their visits. According to the results, 33% of sons visit their parents more than once a week and 51% visit their parents at least once a week. 2% of the older people who live apart from their offsprings report no visits from their sons. When urban and rural areas are compared; 59% of the older people in urban areas are visited at least once a week by their sons and this percentage is 42% in rural areas. The percentage of the older people who are visited a few times by their sons in a year is higher (30%) in rural areas.

When socio-economic status of the individuals is taken into account, the group most frequently visited by their sons is the lower middle class. 52% of these parents are visited at least once a week by their sons. It is revealed that 27% of the offspring of the highest socio-economic class visit their parents once a month. This percentage is under 10% for other socio-economic classes. 38% of daughters visit their older parents more than once a week; 12% visit their older parents at least once a week. 50% of these visit their family at least once a week, and 2% of the older people who live separate from their offsprings report no visits from their daughters.

When urban and rural areas are compared, 59% of the people living in urban areas are visited at least once a week by their daughters. This percentage decreases to 40% in rural areas. The percentage of the older people who are visited a few times by their daughters in a year is higher (28%) in rural areas compared with in urban settings. When the 3 biggest cities, Istanbul, Ankara and Izmir, are analysed in particular, the frequency of visits from daughters of older people in Istanbul is the highest. 68% of older people in Istanbul state that they are visited at least once a week, whereas the rates in Izmir and Ankara are 59% and 48% respectively. The percentage of older people in Ankara and Izmir that are visited by their daughters once or twice a year is higher (19% and 12% respectively). Like the percentage of the older people visited by their sons, in Istanbul and the Mediterranean Region the percentage of the older people visited by their daughters is higher. The percentage of older people who are visited by their daughters at least once a week in Istanbul and the Mediterranean Region is 68% and 64% respectively (TFSS, 2011).

As can be inferred from the literature, contact frequency is still high in Turkey and intergenerational studies mainly focus on contact frequency. However, most of the studies that are presented here are conducted in specific regions and are not representative of the whole population, except for the Turkish Family Structure Survey (TFSS, 2011). Moreover, most of the studies are focused on the volume of the contact frequency. This research project aims to contribute to filling this gap in Turkish literature.

2.3.2 Structural Solidarity

Structural solidarity is described as the opportunity structure for intergenerational interaction (Bengtson & Roberts, 1991). Residential propinquity of family members, number of family members and self-reported health status of family members are the opportunity structures for intergenerational interaction and exchange. As in the case of associational solidarity, co-residence and geographical proximity are the main opportunity structures for solidarity. The theory assumes that higher geographical proximity facilitates solidarity, and similarly, better health status provides opportunity for better intergenerational functional and associational solidarity (Brandt et al., 2009; Deindl & Brandt, 2011; McGarry, 1999; Schoeni, 1997; Silverstein et al., 2002).

One of the most studied indicators of geographical proximity is ***co-residence***. With the transition from extended families to nuclear families, the prevalence of co-residence has decreased in Europe. According to the OASIS study, where different welfare states are represented, the incidence of cohabitation is low (under 10%) as in Germany, Israel and Norway whereas it is quite common in Spain, with 38% (Lowenstein & Katz, 2005). As a Mediterranean welfare state, cohabitation of the extended kin is widespread in Spain. In addition to cultural patterns, lack of public care and support facilities are important determinants of cohabitation. In Spain and other Mediterranean countries such as Italy and Greece, public provision is very limited in terms of care and housing services for older citizens, which encourages cohabitation as a practical and economical way of intergenerational practice.

Even though the level of co-residence and proximity is higher in Asian countries, co-residence is in decline and geographical proximity is decreasing as well. In Japan, the percentage of older people living with their children dropped from 77% to 65% between the years 1970 to 1985. In South Korea, this percentage dropped from 71% to 64 % between 1970 and 1980. In Taiwan, the decline was from 81% to 69% between 1973 and 1985 (Martin, 1990). And the most recent data from East Asian Social Survey (2006) shows that co-residence with either side of parents is 24.3% in Japan, 8.6% in South

Korea, and 29.8% in Taiwan (Tokio et al., 2006). As can be inferred from the statistics, there has been a dramatic decrease in the number and percentage of intergenerational co-residence in Far East countries. This striking change is more pronounced in South Korea.

Even though filial piety and respect for older parents are prevalent values for the Turkish society, intergenerational co-residence has decreased over the years. According to the 1988 Turkish Family Structure Survey, 22% of the sample group co-resides with family and 48% near their older parents (Aytaç, 1998). The analysis also shows significant variance in co-residence in terms of the level of regional development, education and modernisation (Aytaç, 1998). In the eastern parts of Turkey, where the level of economic development is low, people are more likely to co-reside. Also, in rural areas families are more likely to co-reside. The reasons for co-residence are primarily due to tradition and religious expectations or the need of older parents for help, support and care. Aytaç also argues that with further economic development, urbanisation, modernisation and secularisation, co-residence is more likely to decrease in the future. A later study by Aykan and Wolf (2000) based on the 1993 Turkish Demographic Health Survey confirms the findings of Aytaç (1998). Moreover, they examined married couples specifically and were able to identify co-residence with either the husband's or the wife's parents. The results showed that 54% of the co-residing couples were living with the both of the husband's parents and 35% with the husband's mother only. In total, 95% of the co-residing couples were living with either two or one of the husband's parents (Aykan & Wolf, 2000).

According to the Family Structure Survey (2006), 80.7% of households are composed of nuclear families, whereas the figure is 13% for extended families. However, proximity to the parents' house is important in choosing where to live and is a common aspect of Turkish society. According to a study conducted in Ankara, 31% of the older people stated that they are living in the same town as their children but in different neighbourhoods, 22.5% in the same neighbourhood, 24% in the same building and 22% in a different town (Şener et al., 2008). Keeping in mind that these statistics are from an urban area, we can predict that these percentages might be higher in rural areas.

As can be inferred from the literature, co-residence is not as common a practice in Turkey as it is in Far East Asian countries. Meanwhile, geographical proximity to older parents is high and structural solidarity is very strong in Turkey. However, the existing research focuses on the volume of intergenerational co-residence. There is not much research that focuses on the effects of structural solidarity on associational and functional solidarity, which is meant to be strengthened by structural solidarity.

2.3.3 Affectual Solidarity

Affectual solidarity is described as the degree of positive sentiments felt for the adult child or the older parent (Bengtson & Roberts, 1991). Solidarity theory argues that positive sentiments facilitate other types of solidarity, such as functional and associational solidarity. In other words, having good relationships and having good feelings for each other make it easier for generations to provide mutual support in terms of financial, practical and care help, and they tend to visit each other and engage in activities more frequently. In order to measure affectual solidarity, feeling of closeness and quality of relationship are examined in research. The results of different research studies reveal findings that differ according to country context and demographic variables.

The results of the OASIS study showed that the percentage of parents' feeling close to the child is higher in England (80%) and Israel (85%), whereas this figure is 51% for Germany. Similarly, the percentage of respondents who stated that they get along very well with their children is high for England (86%) and Israel (85%) and lower for Germany (50%) (Lowenstein & Daatland, 2006).

Research on affectual solidarity is very limited in Turkey. The love and affection that family members feel towards each other is not a common area of study since positive sentiments are taken for granted in the Turkish family structure. According to the World of Elderly study (2006), 91% of the participants stated that they are happy with their family relationships. In terms of satisfaction with their relationships, 47 % were totally

satisfied with their relationships with their children and 47% with their grandchildren (Sener et al., 2008).

According to a study conducted by Öztop and Telsiz, married children receive more emotional support from parents compared to single or divorced children (2001). Widowed or divorced parents receive more emotional support than married parents do; however, they receive fewer phone calls (Öztop &Telsiz, 2001). Similarly, as divorce rates are increasing, the help that elder parents seek from their children may increase, which can be described as an effect of structural family change on intergenerational relations. According to the same research, 52.8%of mothers, and 21.6% of fathers stated that they get help from their children to solve problems; 59% of adult children stated that they get help from their parents to solve their problems (Öztop & Telsiz, 2001). According to the study of Görgün-Baran et al. (2005), older people from higher socio-economic status experience less conflict with their kin than older people from lower socio-economic status.

In a cross-cultural study, Nauck and Suckow (2006) compared the social networks of daughters and grandmothers in 7 countries (Japan, Korea, China, Indonesia, Israel, Germany and Turkey). The findings revealed no relationship between practical help offered and the quality of the relationship. Affectual solidarity was low in Turkey even though practical help was high (Nauck & Suckow, 2006).

Even if the degree of positive feelings is considered high, the effect of these sentiments on intergenerational relationships should be explored. This research aims to fill this gap in knowledge about the affectual and emotional side of intergenerational relationships and solidarity.

2.3.4 Normative Solidarity

Normative solidarity is described as the strength of commitment to performance of familial obligations (Bengtson & Roberts, 1991). It is argued that strong commitment to filial and familial responsibilities leads to solidarity within the family. The literature on the normative solidarity has diverse findings both at the micro-and macro-level

determinants. Attitudes towards family responsibilities differ according to the country-specific context (Katz, Gur-Yaish& Lowenstein,2010). For instance, family obligation tends to be low in Nordic (i.e. Denmark, Sweden) countries. where welfare provision is high, and low in Mediterranean countries (i.e. Spain, Italy, Greece), where welfare provision is meagre (Esping-Andersen, 1990). As part of the OASIS study, a filial responsibility index is created which shows the ranking is highest for Spain and Israel (83%) and lowest for Germany (68%) (Daatland & Lowenstein, 2005). In other words, this finding confirms the argument that southern European/Mediterranean countries feel more responsibility for kin compared with conservative welfare regimes. John Gal argues that Cyprus, Greece, Israel, Italy, Malta, Spain, Portugal and Turkey should be classified as Mediterranean states because they share 3 common characteristics, family, religion, and clientelist-particularist relationships, which shape welfare institutions (Gal, 2010).

In the West, such as in European countries, care relationships are based on reciprocity and affection within kinship networks (Schwarz, et al., 2005; Walker, 2002). In Chinese societies, filial obligations and hierarchical duties dominate the informal care system (Chow, 1996). In a comparative study of American and Japanese families, the findings show that support for parents in old age is 'deserved' in Japanese culture whereas it is 'earned' in the American context through reciprocal support (Hashimoto, 1996).

In the UK, on the other hand, intergenerational relations and responsibilities have varied throughout the course of history. The Poor Law of 1601 stated that it was an individual's responsibility to maintain personal welfare and there is evidence that even during the 19th century there was not much intergenerational exchange taking place in the UK (Chan, 2009). Moreover, a woman's responsibility for her parents was terminated with marriage and her husband had no responsibility for them either. It was "un-English" to expect adult children to take care of older parents and "making children support parents was alien and offensive to English society (Chan, 2009). The current research also shows that intergenerational support has decreased over time and that community care and support has prevailed (Chan, 2009).

Modernity and individualism are considered to be the prime values in modern European welfare states, resulting in a weakening of family ties in these countries (Hastrup, 2008). A previous study states that modernisation negatively affects young people's attitudes towards older people in Turkey (Tufan, 2007). In a recent study by Tamer, the importance of older people living with young generations is examined (2014). 55% of the young respondents stated that older people provide moral support, and 38% indicated that older people contribute to the family with their experience and knowledge. Only 3% emphasised the material support coming from older people while the role taken in caring for grandchildren was indicated by 4%. 51% of the young respondents stated that the importance of older people is in decline whereas the rest (49%) did not agree with this. However, 68% of them think that respect for the elderly has declined, while a great majority thinks older people should be respected. When the main elements their relationship is based on are questioned, respect (21%), love (20%), trust (20%), understanding (20%), and materiality (19%) stand out as the main themes. The results of this study show that older people are still regarded as important elements of society, especially by young people. However, their responses regarding their own relationships are diverse and financial concerns are higher than expected (19%). The respondents also accept that there is a decline in respect for older people (Tamer, 2014).

2.3.4.1 Attitudes towards Care in Old Age

Attitudes towards care in old age are important components of filial and parental norms. In particular, traditional biases towards care homes and nursing homes in Turkish culture put old age living preferences at the heart of intergenerational normative solidarity. For this reason, studies about intergenerational normative solidarity are generally centred on living preferences in old age. And traditionally, as people get older, they would like to live close to their children and to be in touch with their children constantly (Güven, 2002).

Görgün-Baran et al. (2005), in their study conducted in Ankara, also found out that older adults prefer to be taken care of by their relatives rather than strangers in an institutional setting. Being taken care of by a relative causes less conflict in the care process as a result of social pressure and patriarchal values (Görgün-Baran et al., 2005).

According to the World of Elderly Research (2006), the secret of happiness in old age is described as spending your days with your children and grandchildren. Taking into account intimate relationships within Turkish families, this desire to grow old with the family is not a novelty. However, the desired quality and the intensity of the relationship for both parties are yet to be investigated.

The most up-to-date data on living preferences is also made available by the Turkish Family Structure Survey (TFSS, 2011). When the participants were asked about their choice of living arrangements in old age, most of the participants, as expected, expressed their intention to live with their children when they get older. 22% of the participants stated that they could live with their sons, while the percentage for preference to live with daughters is 9%. Preference for institutional care was relatively low. 10% of the participants wanted to live in nursing homes, whereas another 10% wanted to make use of home-care services. However, it is interesting that more than one third (39%) of the attendees over 18 and under 60had no idea about how to answer the question. In other words, they did not know what to expect for their old age.

When place of residence was considered, 12% of people living in urban areas stated that they would prefer to go into a nursing home, while 6% of people who live in rural areas replied similarly. The percentage of people who live in urban areas and stated a preference for living with their children is 28%. This rate is 43% in rural areas. The percentage of the people in rural areas who would like to live with their sons is 33%, whereas the percentage in the case for daughters is 19%. In urban areas, the percentages are 20% and 8% respectively.

In the same research, people who are over 60 and live with their children and/or their children-in-law are asked to answer the question: “Why do you live in the same residence with your offspring?” 30% of the participants stated that they were happy to live like that, 22% of the participants highlighted mutual support between parents and children, whereas 13% addressed the cultural tradition as a reason for co-residing.

As can be inferred from the literature, the research on normative affiliations also focuses on people's living preferences in old age or their current living situation. However, this quest to determine the structure of living or the preferences about living does not reflect the sophisticated relationships between structure and function. Moreover, preferences about other expectations such as financial exchanges, practical help exchanges and care exchanges are neglected.

2.3.5 Consensual Solidarity

Consensual solidarity is described as the degree of agreement on values, attitudes and beliefs among family members (Bengtson & Roberts, 1991). Consensual solidarity can be measured by an objective tool, which compares the answers of dyads (adult children and older parents) separately. A more subjective analysis may be made by asking the subjects if they think they share the same values and attitudes for filial responsibilities with their children or parents. Either way, similarity in the perception of a similar idea affects consensual solidarity, and having consensus might facilitate other types of solidarity, such as associational, functional and affectual solidarity. However, according to Intergenerational Stake Theory (Cheng, Birditt, Zarit & Fingerman, 2015; Giarrusso, Stallings& Bengtson, 1995), older persons have a more positive view of their relationships with children compared with their children's perception of their relationship. For that reason, the second subjective parameter might be misleading for analysing consensual solidarity. Consensual solidarity is often confused with normative solidarity, which similarly indicates harmony in filial values. However, normative solidarity points out to the agreement on traditional normative filial values, whereas consensual solidarity does not distinguish between different types of filial values and attitudes.

As far as the Turkish context is considered, the number of studies is limited. Mottram and Hortaçsu aimed to explore the effects of the social change in the relationship between elder mothers and their daughters in their research in 2005 (Mottram & Hortaçsu, 2005a). 30 mothers and 30 daughters were interviewed for the research. Most of the mothers were born in 1930s, in stable societies in which financial scarcities and restricting social norms

were dominant. Their daughters were born in 1950s, when social change was accelerating, and consumer culture and individualism were prominent. The results of the research indicate that the opportunities and ideals of mothers are in conflict with the opportunities and ideals of daughters, leading older mothers to worry about their daughters' parenting styles and life goals. Adult daughters are stuck between the wishes of their mothers and their children. Internal conflict of mothers and conflicts between mothers and daughters are the result of this situation. Older mothers as well as adult daughters referred to the difference between the tendency to raise children and personal differences (Mottram & Hortaçsu, 2005a).

2.3.6 Functional Solidarity

Functional solidarity, as it is evident from the word itself, indicates the financial, practical and care exchanges within the family that facilitate the functioning of the family or families. The volume of the functional transfers might be significant for the solidarity and integrity of the family. Functional solidarity might be determined by socio-cultural context or wider national and global normative motivations. There are also demographic and structural characteristics that shape intergenerational functional solidarity at the micro level, such as age, gender, marital status, work status, number of children, household size, place of residence, income and education level.

Some studies use and aggregate indicators for all 3 types of functional solidarity. For instance, in the OASIS study an aggregate percentage for functional solidarity is reported and among 5 countries (Germany, England, Norway, Spain and Israel) studied; the lowest percentage of those receiving functional help from children is observed in Israel whereas the highest percentage was reported in Germany. Percentage of providing functional help to adult children was mostly similar for each country, ranging from 49% to 56% (Daatland & Lowenstein, 2005). However, since all three functional transfers are multi-directional as well as multi-dimensional, each functional solidarity type varies depending on the social, cultural and economic context. For this reason, this section will review the literature on financial, practical and care exchanges and their micro-level determinants.

2.3.6.1 Financial Transfers

Old age is generally associated with poverty, income drops dramatically. Especially in countries where pensions are very meagre, older adults are more likely to live in poverty. For that reason, working adult children, who are financially better off compared with their older parents, provide them with financial help. In other words, the financial transfers generally flow upwards, from younger generations to older generations. In European societies, since older adults have a social security net of pension schemes, they are more likely to be better off compared to their children. In this respect, they are more likely to transfer financial resources to their children (Kohli, 1999; Attias-Donfut, Ogg & Wolff, 2005; Hoff, 2006). On the other hand, in southern European countries (i.e. Spain, Italy, Greece), where pension systems are not well-developed, financial transfers operate upwards (Attias-Donfut, Ogg & Wolff, 2005).

A study in Germany shows that public transfers to older people are greater than private transfers. In the PAYG systems, working children contribute more to the public pension systems than they contribute privately to their older parents' living expenses. However, regarding the downward transfers by the older people, it is argued that one sixth of the public pension that is received by the older parents goes back to the adult children (Kohli, 1999). It is controversial whether it is efficient to give generous pensions to older people or not; however, there are different arguments that claim that this system improves the societal status of the older people and promotes social control through empowering them and, subsequently strengthening traditional values and culture. Also, some argue that giving the financial control to the parents is better for the welfare of the children since older people are better at allocating resources for them. And finally, another view suggests that it is a functional mechanism that perpetuates reciprocity in the family in terms of financial and instrumental transfers (Kohli, 1999).

On the other hand, in developing countries, public and private transfers are more likely to flow downwards and this is the case for Latin American countries (Cruz-Saco & Zelenev, 2010; Lee, 2000). Similarly, in China, financial transfers mainly operate upwards (Ko &

Hank, 2014). Economic stagnation, crises and high unemployment rates result in channelling public resources to younger generations. Having been deprived of public resources, older people rely on private transfers. On the other hand, a recent study conducted in Thailand shows that public cash transfers substitute for private transfers from adult children (Knodel, 2014).

As far as Turkey is concerned, even though the pension system is not as extensive and substantial, financial transfers are more likely to operate downwards in Turkish families as opposed to southern European countries where family ties are also strong and pensions are meagre. Older parents in Turkey traditionally provide financial support when their children get married (Mottram & Hortaçsu, 2005b). And since they are older and more likely to have accumulated a certain amount of financial resources, they are inclined to help out with their married children who are having financial problems. In many traditional Turkish families, marriage does not really grant freedom from parents to the married couples. By providing financial help to their children, older parents seek to maintain their status and power over their adult children (Mottram & Hortaçsu, 2005b). For that reason, it is more likely that financial transfers are generally operating downwards in Turkish society.

As indicated in the introduction, public provision might affect the way private intergenerational financial transfers occur. In that sense, ***income level*** is a good predictor for financial transfers. As far as downward transfers are concerned, parental wealth is a good indicator. Previous research shows that availability of the resources increases the likelihood and the amount of financial transfers (Albertini, Kohli &Vogel, 2007; Berry, 2008; McGarry, 1999; Semyonov & Lewin-Epstein, 2001). Similarly, ***education level*** is an important predictor of financial exchanges but it is important to note that there is high collinearity between the variables of income and education. Research shows that a higher level education decreases the financial dependency of older parents on their adult children (Bucx, van Wel, & Knijn, 2012; Ha et al., 2006).

Gender is another indicator for determining intergenerational financial transfers. In Turkey, adult daughters are more likely to provide emotional support and help with caring and housework compared to male children. On the other hand, adult sons are providing more financial support to their older parents compared with female children. Since women are financially more vulnerable than men, it is more likely that older women receive more financial transfers from their children. Both Western and Eastern literature supports this argument and previous studies show that older women are more likely to get financial help compared with older men (Attias-Donfut, Ogg & Wolff, 2005; Deindl & Brandt 2011; Chou, 2010; Grundy, 2005). A previous study conducted in Turkey is also in line with the literature. According to the study, 24.1% of the older women state that they get financial help (cash) from their children, whereas 13.5% of older men receive this financial support, which is also significant at the $p<0.05$ level (Öztop &Telsiz, 2001). The same study also shows that women get more help towards rent, food and clothing, which is also statistically significant at the $p<0.05$ level (Öztop &Telsiz, 2001).

Self-reported health status is another factor for the financial exchanges between the generations. Healthcare is a costly benefit and might require sound financial resources. Regardless of the type of welfare state in question, poor health might financially be challenging, especially for older people. In that case, additional funding might be required. Previous research shows that state of health and receiving financial aid from children are correlated. According to the Asset and Health Dynamic Survey conducted in the US, poor state of health decreases the likelihood of providing financial transfers whereas it increases the likelihood of receiving financial help (McGarry, 1999; Schoeni, 1997). Moreover, findings from the National Survey of Families and Households show that parents are financially assisted more when they are in poor health (Hogan, Eggebeen & Clogg, 1993). The longitudinal study of generations in Southern California also supports this argument (Silverstein et al., 2002).

Marital status is an important indicator of intergenerational transfers made in both directions. A decrease in income sources caused by divorce or widowhood might cause an older person's financial situation to deteriorate and more financial help might be

needed at this stage of life. Marital status is another determinant for financial exchanges. The literature suggests that single, divorced or widowed parents are more likely to receive financial help compared to married parents (Attias-Donfut, Ogg & Wolff, 2005; Bengtson & Roberts, 1991; Grundy, 2005). A study from the US (Changing Lives of Older Couples) also shows that loss of a spouse made older people more dependent on their children within six months of the bereavement (Ha et al., 2006). On the other hand, married children are less likely to support their parents compared with unmarried children (Sarkisian & Gerstel, 2008).

In Turkey, financial transfer is very common from parents to children when they first get married. For instance, parents generally pay for the wedding expenses, buy goods or pay rent for the newlywed children (Mottram & Hortaçsu, 2005b). On the other hand, single or divorced children receive more financial support than married children do. Regarding the increasing divorce rates and decreasing marriage rates, these intergenerational transfers may be affected. For instance, more financial assistance may be required by children from their older parents. Similarly, adult children provide more financial (money, rent, gifts, etc.) and functional (shopping, transportation, etc.) support to their widowed or divorced parents than married parents.

Number of children is also associated with financial transfers between generations. The literature suggests that a greater number of children increases the probability of financial exchanges in later life. Litwin (2004), based on the national Israeli survey, found that number of financial transfers and number of children are correlated. However, this situation might be relevant only to upward financial transfers. When downward financial transfers are considered, the distribution of resources to the children might affect the volume of transfers. On the other hand, in southern European countries, where financial transfers operate upwards, an increase in the number of children might increase the volume of upward financial transfers. However, since fertility rates in these countries are dropping sharply, the financial resources of the older individuals are also at risk of diminishing.

As well as the number of children, ***household size*** is an indicator for providing financial help. There is evidence that children living in the same house are likely to receive less frequent and a smaller amount of financial help from their older parents compared with adult children who do not live with their older parents within the same household (Rosenzweig & Wolpin, 1993). This can be explained by the resources resident children benefit from in co-residence. Similarly, shared resources might also be taken for granted by older people. In Turkey, there is no study that takes number of children and household size into account while studying intergenerational solidarity.

2.3.6.2 Practical Help and Care Transfers

Following discussion of the financial transfers, it is appropriate to look at the exchanges in terms of practical help and care as a part of intergenerational functional solidarity. In the literature, practical help and care are referred to as "time transfers", "care", "support" or "instrumental help", referring most of the time to the two types of help simultaneously. However, since the nature, frequency and intensity of these two types of transfers are different, determinants of care and practical help might also differ at the micro-, meso- and macro-level (Brandt et al., 2009). In other words, personal relationships between the demand and supply sides (micro), family structures and demographic characteristics of the caregiver and the recipient (meso) and the overall cultural and social structures along with the existing institutional support systems (macro), might all have different implications (Szydlik, 2004; 2008). For instance, previous research has shown that the prevalence of practical help in the Nordic welfare states is higher than in the Mediterranean countries, where personal care prevalence is higher (Brandt et al., 2009). For that reason, care and practical help will be treated as different types of functional exchange and the literature on prevalence, intensity, and determinants of care and practical help exchanges will be introduced in this section.

2.3.6.2.1 Practical Help Transfers

Practical help, which is defined as providing assistance in daily chores such as shopping, cleaning and transportation, etc., is one of the elements of functional solidarity between generations. This type of help is also called Instrumental Activities of Daily Living

(IADL), which are not essential for survival but complementary for independent living. As opposed to the direction of the financial help, the direction of the practical help transfers reverses. Regardless of the cultural context, the literature suggests that practical help generally operates upwards, from adult children to older parents (Kohli, 1999; Rossi & Rossi, 1990). According to the German Ageing Survey, adult children provide more help for their older parents in daily chores, shopping, transportation, etc. (Kohli, 1999). The OASIS study findings also confirm that practical help mainly flows from adult children to their older parents in Norway, Germany, England, Spain and Israel (Daatland & Lowenstein, 2005). The SHARE data also shows that time transfers operate downwards (Attias-Donfut, Ogg, & Wolff, 2005). Previous research in Turkey also showed that adult children provide more practical help to their older parents rather than vice versa (Öztop & Telsiz, 2001).

The literature suggests that older people are frailer and more in need of practical help. In this respect, as one's age increases, the likelihood of getting practical help also increases (Brandt et al., 2009). Assuredly, need for help increases with age due to physical or mental decline; however, this explanation relies solely on a" needs-based" definition of practical help and dismisses social and cultural norms that shape intergenerational practices. In Turkish society, respect for older people brings about devotion to service and labour for the older people. This hierarchy of age, regardless of the physical, financial and educational circumstances, increases the burden on younger generations in terms of daily chores.

As far as the downward practical help is concerned, grandparenting is the most common type of practical help the older parents provide to their adult children. The 2008 Childcare and Early Years Survey in Britain shows that about 25% of parents with children under 14 received informal care from their own parents (Speight et al., 2009). A study based on SHARE data found that 58% of grandmothers and nearly 50% of grandfathers in 10 European countries had taken regular or occasional care of grandchildren aged 15 or younger in the previous 12 months (Hank & Buber 2009). A study based on the National Survey of Families and Households (NSFH) found that 43% of grandmothers stated that

they provided regular care to their grandchildren in the US (Baydar & Brooks-Gunn, 1998; Fuller-Thomson, Minkler & Driver, 1997). These studies all show that grandparenting contributes a big share in childcare in the Western world, and this is likely to gain more importance with regard to the demographic and structural changes that are taking place (Harper, 2005). This practice of grandparenting can be explained by relatively higher female labour participation rates in Europe (62.5% for EU28 in 2013) and in the US (56% in 2013). In addition, high cost of kindergartens and nurseries makes the grandparents the best available option for childcare. Moreover, when the middle generation is missing, taking care of grandchildren is left to grandparents, especially to grandmothers in African countries (Aboderin, 2006; Hoffman, 2014).

In Asian countries, main body of research shows that older people take on the responsibility of their grandchildren and take care of them (Hermalin, 1997; Kamnuansilpa & Wongthananvasu, 2005; Teo et al., 2006). Strong family ties and relatively high labour force participation rates lay the groundwork for grandparenting practices. However, a recent study conducted in China and South Korea demonstrates mixed evidence. According to that study 58% of grandparents take care of their grandchildren in China whereas this number dramatically drops to 6% in South Korea (Ko & Hank, 2014). Even though there are no major differences between female labour force participation in these countries (65% for China and 50% for South Korea in 2013) and the level of available formal childcare resources, this difference in grandparenting practice directs questions for cultural motivations. According to the structural lag hypothesis, Korean mothers are not able to adapt to the modernisation and its practicalities (Riley, Kahn & Foner, 1994) and still preserve the norm of taking care of their own children (Lee & Bauer, 2013; Sung, 2003).

In Turkey, a middle-income Middle Eastern Muslim country, tightly knit intergenerational support patterns would be expected to reflect in grandparenting practices; however, the statistics reveal the opposite. A study conducted in 1980 showed that 15.3% of the retired respondents stated that they helped their children with childcare (Yener, 1980). In 2006, the percentage of grandparents (mainly grandmothers) who were

providing care for their grandchildren (age 0-5) are reported at 3,3%, which is a dramatically lower figure compared with the other countries previously mentioned. This rose to 9.2% in 2011 along with the female labour participation rate, which increased from 23.6% in 2006 to 31.5% in 2011 (TFSS, 2011). Turkey has a relatively low female labour participation rate compared with 2012 average for OECD countries (2014) (62.3% vs. 32.3%). This low participation is also aligned with low grandparenting practices in Turkey. The correlation between female labour force participation rate and grandparenting rates is striking. However, cultural implications for grandparenting practices in the Turkish context are an area that is under-researched and the existing literature mainly focuses on intergenerational learning and cultural inheritance (Körükçü, Kıray Vural & Kapıkıran, 2014).

Intergenerational solidarity literature suggests that ***marital status*** is a significant indicator for intergenerational exchanges. For instance, single, divorced, or separated older parents are more likely to receive practical help from their adult children (Davey, Eggebeen & Savla, 2007). The OASIS data (Norway, Israel, Spain, England, Germany) suggests that most of the time couples manage their lives without outside help (Daatland & Lowenstein, 2005). Moreover, SHARE data shows that having a partner decreases the chances of receiving practical help from children (Brandt et al., 2009).

When receiving practical help is considered, it is important to think about the demand side as well as the supply. Poor health condition seems like the very reason that induces this demand. The literature suggests that ***self-perceived health status*** and practical help exchanges are correlated (Brandt et al., 2009, Deindl & Brandt, 2011).

As far as ***gender*** is concerned in receiving practical help, the body of literature suggests that women are more likely to receive this help compared with men (Attias-Donfut, Ogg, & Wolff, 2005; Brandt et al., 2009). In their study, Attias-Donfut and her colleagues have pointed out different determinants of exchange in intergenerational transfers. In the intergenerational exchanges the gender of the child makes a difference. Females are more

likely to offer instrumental help and time whereas males are more likely to engage in financial transfers to the older parents (Attias-Donfut, Ogg & Wolff, 2005).

Previous research shows that daughters mirror the gendered division of labour and they are more likely to perform housework compared with sons (Bianchi & Robinson, 1997; Gager & Sanchez, 2004). And when practical help is to be provided to the older parents, adult daughters emerge as the main suppliers (Spitze & Logan, 1990; Brody & Schoonover, 1986; Litwak, 1985). According to a study conducted in Turkey, the extent and type of intergenerational support also vary according to the gender of the child. Adult daughters are more likely to provide emotional support and help with caring and housework compared with male children (Öztop &Telsiz, 2001).

When the gender of the recipient of practical help is taken into account, the body of literature suggests that older women are more likely to receive practical help compared with older men (Attias-Donfut, Ogg & Wolff, 2005; Brandt et al., 2009, Cloin & Hermans, 2006; Dwyer & Coward, 1991).

Number of children is another indicator for receiving help from adult children. Theoretically, an increased number of children should lead to increased practical help for the older parents; however, research shows the opposite. A European study of 10 nations showed that adult children who had more siblings provided less practical support to parents than adult children with fewer or no siblings (Bonsang, 2007). This can be explained by the "diffusion of responsibility" phenomenon, which is based on the idea of decreasing sense of responsibility with increasing of number of responsible people (Mynatt & Sherman, 1975).

In the Turkish context, research regarding the intergenerational practical help is very limited. The most comprehensive study is by Öztop and Telsiz, conducted in 2001. The findings show that majority of older participants get help from their adult children in sickness (96.6%) or for food shopping (63.4%). 39.9% of the older participants stated that they get help with house chores; 30.8%with repair and maintenance of the property, and

29%with transportation. According to the results, factors such as gender, marital status, and income also have an impact on getting any type of help. Gender of parents does not affect cases such as food shopping, housework, repair and maintenance of property, or sickness, but it affects transportation. Marital status and income also do not affect food shopping, repair and maintenance of property and transportation of parents. When the downward practical help is considered, the majority of adult children get help from their parents in case of sickness or childcare issues (95%in sickness, 77.8% for childcare). They also get help from their parents for property repair and maintenance (32.1%), food shopping (15.4%), and house chores (9.1%). Getting help is affected by factors such as marital status of children and income of parents (Öztop & Telsiz, 2001).

2.3.6.2.2 Care Transfers

In this section, the focus will be on the upward long-term care transfers. As the parents get older, they become more prone to chronic and acute illnesses which may require temporary or long-term care facilities. Western literature suggests that long-term care giving is primarily provided by the spouses, and that children come second (Connidis, 2001). However, in more traditional societies, children might end up being the primary caregivers for their older parents in need of care. On the other hand, institutional care is the first choice for families depending on the cultural patterns and welfare structures. Moreover, there are individual factors that affect care transfers such as gender, income level and education level.

Gender emerges as the most prominent element in care-giving literature. Personal care has always been a female task both in the Western world and in traditional societies of the East. The literature also suggests that women are more likely to be in charge of care facilities compared with men, which may be explained by the traditional gendered division of labour (Brandt et al., 2009; Eggebeen & Hogan, 1990; Finch, 1989). In Turkey, the same tradition applies; daughters are more likely to be in charge of personal care (Mottram & Hortaçsu, 2005b; Öztop &Telsiz, 2001). This division is also reflected in the care profession.

As far as the gender of the care recipient is in question, the same pattern is followed: older women are more likely to receive care compared to men. Since women live longer and are more prone to chronic diseases, they are more likely to benefit from care facilities. Moreover, women live longer than men and are more likely to be receiving personal care (Walker & Pratt, 1991).

Furthermore, ***health status*** emerges as an important factor that affects care transfers. According to the research conducted by Yener (1980) in Ankara, Istanbul and Izmir,44.9% of the retired respondents stated that they get help when they are sick. This shows the latent characteristic of the care help provided by adult children.

2.4 Intergenerational Solidarity in the Transnational Context

The literature review of intergenerational solidarity in the Turkish context has revealed an interesting finding regarding the place where the studies were conducted. It was found that a number of studies focus on the transnational context when researching intergenerational relationships. There are many more studies that research Turkish migrants in other countries compared to Turkish inhabitants living in Turkey.

Sibel Kalaycıoğlu and Helga Rittersberger-Tılıç analysed the intergenerational functional and cultural solidarity types of the immigrants who migrated to Ankara due to the domestic migration that started in the second half of the 20th century, in order to find out the effects of migration on intergenerational relationships. 15 immigrants were interviewed in-depth for the research, and information was gathered about three generations. Information included jobs and educational background, migration story, property ownership, taking care of dependent individuals, and parent-child relationships. Results indicate that the role and the significance of family is a major factor in providing and maintaining prosperity in the case of migration; solidarity within family depressurises the institutional prosperity services, and allows the individuals within family a small space on economic, social and cultural decisions (Kalaycıoğlu & Rittersberger-Tılıç, 2000).

In a comparative study conducted among immigrant Turkish, Moroccan, Surinamese and Antilles living in the Netherlands, the results showed that Turkish and Moroccan immigrants scored higher for intergenerational solidarity compared to the two other migrant groups. As expected, first generations had higher family values compared to the second generation. There was also a positive correlation between family values and commitment to religion (Merz, Özeke-Kocabaş, Oort & Schuengel, 2009).

In the Netherlands, a comparative study comparing intergenerational solidarity levels among 5 different ethnic groups was conducted in 2010. The results of the study show that migrant families have greater normative and associational solidarity compared to Dutch families. When migrant families are compared within themselves, families with Turkish and Moroccan origins scored the highest on normative solidarity. The percentage of Turkish respondents who agreed with the statement "Children should take care of their parents when they get sick" is 85% whereas Dutch respondents' agreement is 40%. Similarly, the percentage in agreement with the statement "Children who live close to their parents should visit them at least once a week" is 87% among Turkish families and 38% among Dutch families. Associational solidarity among Turkish migrants is reported as the greatest compared to associational solidarity among other ethnic groups (Schans & Komter, 2010).

A qualitative study conducted with adult Turkish migrants showed that there are significant changes in intergenerational relationships with their older parents in Turkey in terms of structural, associational and functional solidarity. Increased geographical distance has decreased face-to-face contact and increased Internet and phone calls. Financial support for older parents mainly reveals itself in annual visits to Turkey or in the form of air tickets to the US to enable their parents to visit. The participants complained about not being close to their older parents when they were sick but expressed that it was best for their parents to live in Turkey as they have an extended social network there. However, they experience ambivalence (Şenyürekli & Detzner, 2008).

2.5 Intergenerational Conflict

Intergenerational conflict theory has been suggested as an opposing argument to the solidarity model, maintaining that the solidarity model focuses only on the positive aspects of intergenerational relationships. Intergenerational conflict is defined as the tension, conflict and disagreement among the generations and it can be measured by the expression of negative feelings towards each other, number of arguments and the level of imbalance in the exchange of support. In response to this criticism, Bengtson and his colleagues argued that conflict model should be incorporated into the solidarity model as a 7th dimension. On the other hand, intergenerational conflict is described as the unequal distribution of resources between the young and elderly generations, which might cause conflict between them. However, in their work *"The Myth of Generational Conflict*", Arber and Attias-Donfut argue that there is no empirical evidence that proves the existence of intergenerational conflict based on the several researches conducted in Europe (Arber & Attias-Donfut, 2000).

2.6 Intergenerational Ambivalence

In addition to the theories of solidarity and conflict, Lüscher and Pillemer introduced a new theoretical approach to intergenerational relations (1998). They applied the concept of 'ambivalence' to intergenerational relationships. The literal meaning of the word 'ambivalence' refers to the co-existence of two conflicting emotions, such as love and hatred. Previously, the concept was used in different social science fields, such as psychology and sociology. Regarding psychology, Erikson's description of psycho-social developmental stages (1959) is a good example. All stages are composed of concurrent conflicting feelings and emotions such as autonomy vs. shame, trust vs. mistrust, industry vs. inferiority and so forth. On the other hand, sociological ambivalence was first introduced by Merton and Barber in 1963 and later by Coser in 1966. The main focus of the sociological ambivalence is the irreconcilable expectations of attitudes, beliefs and behaviours. It is illustrated with the social role of a doctor, which requires being compassionate, caring and professionally distant from the patient at the same time. In the

literature of sociological ambivalence, there are two types of theoretical orientations in general. The first is incorporated into post-modern theory, which argues that contemporary societies are more likely to create ambivalence because there is more clash between individual autonomy and the demands of community. People want to be free in their actions whereas they expect support from institutions. The second approach of sociological ambivalence is found in feminist literature. According to the theory, women's domestic role in the family creates two opposing feelings of loving and caring on the one hand and resentment and fatigue on the other.

While the prevailing theories on intergenerational relationships focus on either negative (conflict) or positive (solidarity) aspects of the relationships, the ambivalence approach proposes a view that combines the two characteristics of solidarity and conflict. Lüscher and Pillemer describe intergenerational ambivalence as 'contradictions in relationships between parents and adult offspring that cannot be reconciled' (Lüscher & Pillemer, 1998). This ambivalence is evident in two dimensions: first at the societal level, which stems from the contradicting social norms, status and roles. And second, at the individual level, which creates emotional, cognitional and motivational contradictions and conflicts. Furthermore, Lüscher and Pillemer describe three different aspects of parent-child relationships in later life (1998):

The **first** is the ambivalence between ***dependence and autonomy.*** The studies on elderly mother and adult daughter relationships show that mothers feel ambivalent because they want to help and support their daughters while trying to be independent and achieve self-fulfilment. Similarly, close son-father relationships show that fathers try to encourage their sons to be autonomous but try to maintain their authority over them at the same time, which again creates ambivalence.

The **second** is ***ambivalence resulting from conflicting norm***s regarding intergenerational relations. In this aspect, countervailing social norms create ambivalence for the elderly parents and adult offspring. For instance, when a caregiver is caught between filial piety and distress of care-giving, it creates ambivalence for that person. Similarly, since the

elderly cannot reciprocate the exchange of upward transfers, the situation is also ambivalent for them. However, it is also argued that ambivalence can serve as a safety valve for imbalanced intergenerational exchange. According to some studies conducted in the US and Hungary, ambivalence resulting from conflicting norms of amity and distrust serves to curb excessive exchange.

The **third aspect** of intergenerational ambivalence is ***ambivalence resulting from solidarity***, which argues that frequent interaction, dependency, close proximity and co-residence are more likely to increase ambivalence between elderly parents and adult children. Research into elderly abuse shows that most of the time the abused parents are physically impaired and dependent on their children. Similarly, the abusers are more likely to be financially and instrumentally dependent on their parents, and enable to establish their autonomy.

Adding a critical approach to Lüscher and Pillemer's conceptualisation, Connidis and McMullin develop the approach of intergenerational ambivalence (2002). They argue that contradiction that arises from conflicting social roles and statuses is deeply embedded in the social structure of the society (Connidis & McMullin, 2002). According to them, intergenerational ambivalence occurs when 'social structural arrangements collide with their attempts to exercise agency when negotiating relationships, including with those family members' (Connidis & McMullin, 2002). Applying the life-course approach to the theory of intergenerational ambivalence, they also argue that the strategies developed for coping with ambivalence is an ongoing process that transforms with changing social conditions and circumstances and might result in intergenerational relations that are characterised by solidarity, conflict and ambivalence. For that reason, intergenerational ambivalence is predominantly seen in the process of status transition such as marriage, employment, parenthood. etc. Moreover, they assert that intergenerational ambivalence has significant implications for social policy as, with appropriate policy making, ambivalence can be reduced (Connidis & McMullin, 2002).

On the other hand, Bengtson argues that the ambivalence approach is also problematic because it requires negotiation and resolution, creates discomfort and stems from conflicting needs and demands, and is inherently normative. However, in a later article Lüscher asserts that the ambivalence model is different from the conflict model and is open to solution whereas conflict might not be resolved (2002).

After describing two dimensions of ambivalence, ***personal and institutional***, Lüscher (2002) gives new labels to the contradictions. At the personal level, according to the level of emotional proximity, relationships between the generations are described as ***convergence*** or ***divergence***. At the institutional level, following the same familial or institutional heritage is described as reproduction whereas striving for freedom from these values is described as innovation. For the operationalisation of the term ambivalence, he introduces 4 different patterns of dealing with intergenerational ambivalence, which can be seen in Figure 13 below:

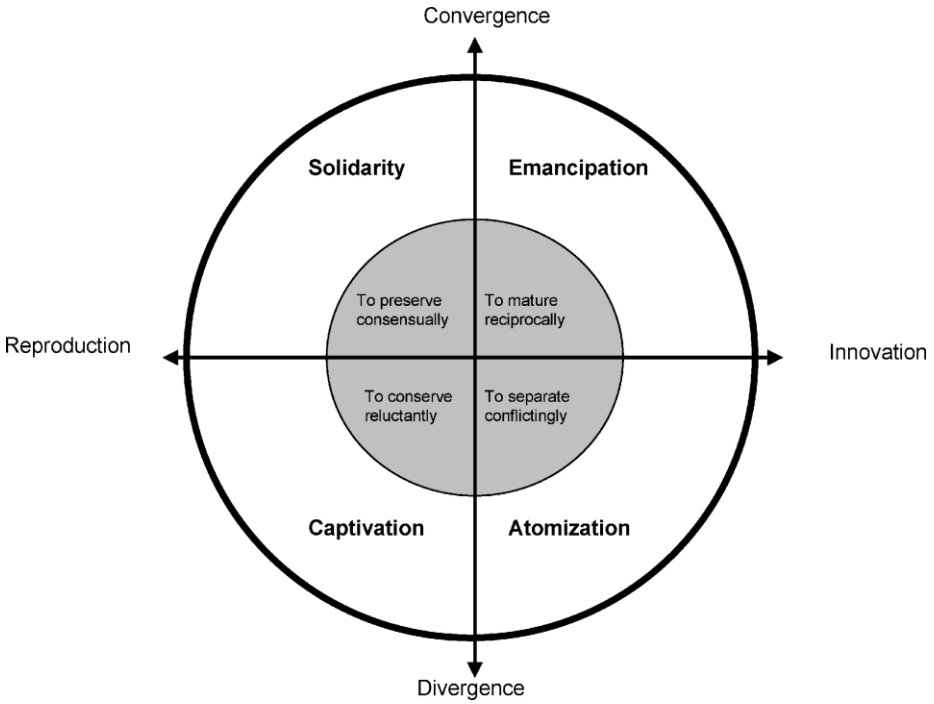


Figure 13 Patterns of Dealing with Intergenerational Ambivalences. (Lüscher, 2002)

According to the diagram, intergenerational ambivalence is managed by 4 different strategies. The first is described as ***solidarity***, whereby values and traditions are preserved consensually. The second is ***emancipation***, by which mutual interdependence persists along with individual development. The third is ***atomisation***, where conflicting separation between the generations occurs. And finally, ***captivation*** is seen when family traditions are reproduced by one-sided demand, mainly from the older generations.

2.6.1 Measurement and Methodology

Since previous studies of intergenerational relationships generally focused on solidarity and conflict aspect of the relations, the questions that are asked tend to focus on either negative or positive aspects of the subject matter. Introducing an ambivalence perspective, co-existence of two feelings should be measured. In that respect, triangulation of different methods is suggested to explore ambivalence. In terms of qualitative approach, repeated in-depth interviews, semi-structured questionnaires and ethnographic observations can provide triangulation. It is argued that quantitative methods should also be developed to draw out both negative and positive aspects of a relationship that can be measured on a Likert scale. In a later article, Lüscher suggests three different approaches to the study of intergenerational ambivalence (2002).

The **first** proposes to ask the parents and the children directly if they are experiencing and if they are aware of the ambivalence (Lüscher, 2002). For this qualitative method, in-depth interviewing is the main tool, widely used in psychotherapy as ambivalence has long been studied within the discipline of psychology (Lettke & Klein, 2004). As far as quantitative methods are concerned, statements are designed in such a way that participants can either state if there is ambivalence in a particular relationship or rate the degree of ambivalence.

The second is an indirect way of finding out ambivalence by designing questions that depict opposing feelings (Lüscher, 2002). For qualitative methods, structured interviews and other open-ended measures have been used so far. In terms of quantitative methods, various methods have again been used, including mixed feeling questionnaires, semantic

differential scales, and positive and negative affect schedule (Lettke & Klein, 2004). In a study carried out in the US by Fingerman and Hay, 187 individuals belonging to different age groups are asked to complete Kahn and Antonucci (1980) diagram, in which they state and rate their close relationships with their relatives, friends or acquaintances (2004). Similarly, in a modified version of this diagram the participants are asked to list social contacts that bothered them the most. In the analysis of the results, the social contacts who are listed only in the close relationship circle are considered as ***solely positive*** relationships, whereas the other circle of contacts who are a bother to them are considered as ***solely negative***. If the names of the contacts appeared in both circles, then the relationships are considered ***ambivalent***.

And as **a third** approach, Lüscher proposes to use vignettes by establishing hypothetical situations involving intergenerational relationships and examining responses to these fictitious situations. And he also mentions that he has used financial transfers and care for the elderly for such methodology (2002).

2.7 Researching Intergenerational Relationships in Turkey

Until now, the literature on intergenerational relationships has been presented in terms of intergenerational solidarity components. However, there is a body of research that focuses on different groups and dimensions of intergenerational solidarity. For instance, there are certain ethnographic studies in which certain communities are the main focus of research. Işık and Pınarcıoğlu (2001) in their research inspect the family relationships in slums in Istanbul while White (2010) focuses on the female labour dynamics in the slums of Istanbul. Even though the existing studies give clues about the intergenerational structure of these communities, the multidimensional aspects of intergenerational relationships are neglected. Moreover, these research projects are limited to a certain population or community, which does not reflect the general picture in Turkey. Furthermore, the majority of these studies uses qualitative methods as a medium for enquiry hence the need for large-scale quantitative studies is evident.

Moreover, there is a body of research that has mainly focused on attitudes towards older generations and intergenerational conflict. Because of the inherently tightly-knit relationships within Turkish families, the conflictual aspects of the relationships were the centre of attention. This generational conflict was mainly attributed to the changing attitudes between generations and this unidimensional account of intergenerational relationships has kept the scope of research very narrow. For example, in her research Cangöz (2008) found out that there is a conflict between younger and older generation in terms of resources, goals and values in Turkey. Another attitudinal research by Hazer (2011) focuses on the conflictual aspects of relationships between adults and their children. These studies focus mainly on young people, especially university students (Adıbelli, Türkoğlu & Kılıç, 2013; Göçer & Ceyhan, 2012; Kulakçı, 2010; Özdemir, 2009; Ünalan, Soyuer & Elmalı, 2012; Vefikuluçay, 2008; Yılmaz & Özkan, 2010). However, these studies only reflect the perceptions of young people towards older individuals and not vice versa. For this reason, they are not able to depict the potential conflict or solidarity from the older person's point of view.

In addition to the ethnographic and attitudinal studies, there are a number of articles that discuss intergenerational relationships at the theoretical level. Tufan and Yazıcı argue that increasing longevity and modernisation have augmented the need for elderly care and that these factors have changed the way intergenerational relationships operate (2009). Similarly, in their article "Family Relations in Aging", Güven and Şener argue that when older people receive support, trust, love and attention, the ageing process becomes much easier, their capacity to cope with problems improves and they lead a happier life (2010). They also state that the family is the ultimate social unit that should be studied for investigating the ageing process (Güven & Şener, 2010). However, these theoretical articles do not build their arguments on empirical data. For that reason, it is important to determine on the basis of empirical studies in what way intergenerational relationships are evolving.

On the other hand, the emphasis on intergenerational solidarity has increased in Turkey, especially with the announcement of 2012 as the "European Year for Active Ageing and

Solidarity between Generations". Conferences and workshops (e.g. IFA and TURYAK International Istanbul Initiative on Ageing "Intergenerational Solidarity" (IFA, 2012); workshop on Intergenerational Solidarity based on Social Responsibility: Searching for Models, (Hacettepe,2011) were organised, and papers (Kapar, 2005; Tufan & Yazıcı 2009; Yıldırım, 2015) were published to draw public and academic attention. However, research is very much neglected in this area of family relations. Also in Turkey, intergenerational solidarity programmes that aim to unite older people and young people have become very popular in the past few years (e.g. Intergenerational Solidarity Competition by the Ministry of Youth and Sports (MYS, 2013); From 7 to 77: Intergenerational Solidarity Project by Yeditepe University, (Yeditepe, 2014). However, these programmes are social responsibility programmes that aim to bring together different generations from different families to encourage intergenerational learning and prevent isolation in old age. Programmes or policies that might facilitate intergenerational relationships and solidarity within the same family are a much neglected area.

2.8 Conclusion

This chapter demonstrates that the literature on intergenerational relationships in Turkey is very limited and are hardly based on theory. Moreover, none of it employs the Intergenerational Solidarity or the Intergenerational Ambivalence approach to disentangle this complicated relationship between the generations. Even though intergenerational relationships in Turkey are characterised by solidarity and harmony, the theory of intergenerational solidarity has hardly been referred to in explaining intergenerational relationships in the Turkish context. Yet attitudes towards older people and conflictual dimensions of intergenerational relationships at the normative level have been the focus of intergenerational research. Moreover, normative and theoretical studies have dominated the academic discussion on intergenerational relationships. For that reason, this research project aims to examine intergenerational relationships from a theoretical perspective, employing both Intergenerational Solidarity and Intergenerational Ambivalence approaches to better establish the relationship between function and structure. This use of different approaches enriches the methodology and broadens the conceptual and empirical analysis regarding intergenerational relationships.

CHAPTER 3: METHODOLOGY

3.1 Introduction

In this chapter, the quantitative and qualitative phases of the study are introduced. The datasets and the types of statistical analyses conducted for the quantitative phase are introduced and discussed. Similarly, the qualitative phase of the research study is explained, starting from the sample selection, to data collection, and to the final coding and analysis. Consequently, the link between the qualitative and quantitative phase is established and finally the benefits of mixed methodology are discussed.

3.2 Phase 1: Quantitative Analysis

3.2.1 Demographic Characteristics and Family Structure in Turkey

In order to set the demographic and structural context of Turkey, basic statistical information was explored. Population trends and projections, old age and total dependency ratios, fertility and mortality rates, life-expectancy and replacement rates, marriage and divorce rates, age of marriage and age of first birth are the main statistics that are presented in the first chapter. The graphs and tables were generated with data derived from Turkish Demographic and Health Survey (TDHS, 2013) and Turkish Family Structure Survey (TFSS, 2011), available through Turkish Statistical Institute.

The Turkish Demographic Health Survey (2013) is the last wave in a series of surveys which were started in 1993. The 10th and the most recent (TDHS, 2013) was conducted by Hacettepe University Institute of Population Studies. The survey aims to map out the basic demographic and health-related characteristics of Turkish society. It is a nationally representative survey conducted in 11.794 households with 9.746 women at reproductive ages (15-49). The Turkish Family Structure Survey is also the latest conducted in a series of surveys (TFSS, 2011). This survey is also nationally representative, with a sample size of 16.500.

3.2.2 Intergenerational Transfers and Attitudes

Because of financial and temporal restrictions, own (primary) data could not be collected. However, secondary data analysis is employed in order to examine intergenerational transfers in terms of financial, practical and care help transfers, and attitudes towards parental and filial responsibilities. For this reason, existing surveys conducted in Turkey were examined. The Turkish leg of the Global Ageing Survey (GLAS, 2007) was chosen as the most appropriate dataset since no other dataset, including Turkish Family Structure Survey (TFSS, 2011) and Turkish Demographic Health Survey (TDHS, 2013), included questions enquiring into intergenerational transfers and attitudes. The questions in the survey are designed to address the Intergenerational Solidarity Approach (Bengtson & Roberts, 1991) and the data is suitable for the analysis the theoretical framework requires.

3.2.3 Description of the Dataset

The HSBC Global Ageing Survey is designed with the collaboration of the Oxford Institute of Population Ageing and HSBC. The survey is conducted in 25 countries drawn from Asia, America, Europe and Africa, encompassing both 'advanced economies' (i.e. Canada, France, Germany, Japan, Sweden, UK, US) and 'transitional economies' (i.e. Brazil, China, Egypt, Hong Kong, Indonesia, India, Malaysia, Mexico, Poland, Russia, Saudi Arabia, Singapore) including Turkey. The survey includes cross- comparative modules with the Health and Retirement Study conducted in the US and the Survey of Health, Ageing and Retirement in Europe, which is conducted in European countries. The survey comprises questions on health and retirement, attitudes, expectations and behaviour regarding later life and retirement. In particular, as mentioned above, intergenerational transfers and attitudes are present in this questionnaire, which makes it the main medium for enquiry.

This cross-sectional Turkish sample of GLAS dataset covers 1017 people aged 40-79 years (250 respondents in each 10-year generation, generationally representative). Computer-assisted telephone interviewing (CATI) was used to gather the data and the samples were randomly selected via telephone numbers. Interviewing was carried out by

Harris Interactive, a global agency in the field (www.harrisinteractive.com). Access to the data is obtained through the Oxford Institute of Population Ageing. As a member of the institute, the researcher is granted the permission to use the dataset.

Following basic statistical analysis, correlation analysis was performed. As a final step, binary logistic regression was applied to fit models to examine factors associated with financial, practical and care help. For the analyses described, SPSS 17.0 statistical analysis software package was used.

The GLAS dataset made it possible to look at the relationship between various different demographics variables and intergenerational transfers in terms of financial, practical help and care. Regarding the theoretical framework, the dataset only allowed for analysis of functional, associational, structural and normative solidarity to certain extent.

3.2.4 Variables and Measurement

3.2.4.1 Binary Logistic Regression

The answers to the attitudinal questions are mostly in Likert Scale, which has led to the employment of multinomial logistic regression for analysis. For this reason, 3 categories (1 = Strongly Agree/Agree, 2 = Neither Agree, Nor Disagree, 3 = Disagree/Strongly Disagree) are created out of 5 category Likert Scale. However, due to the limited size of the sample, zero frequencies are observed for some of the cells and a warning that suggests the merger of some categories have emerged (see Annex 1). For this reason, the second category (neither agree nor disagree) has been merged with the negative statements (see Table 5). As a result, binary logistic regression is used as the final method for analysis.

Binary logistic regression was run for all types of intergenerational transfers and attitudes. **Binary logistic regression** estimates the probability that a characteristic is present given the values of explanatory variables. In this case, 10 categorical variables are used as explanatory variables and each was re-coded into binary categorical variables. For the analysis, odds ratios are reported instead of individual coefficients due to the practicality

and convenience for the interpretation of the results. The model can be explained as follows:

Let *Y* be a binary response variable

Y_i = 1 if the trait is present in observation *i*
Y_i = 0 if the trait is not present in observation *i*

$X = (X_1, X_2, ..., X_{11})$ are the set of explanatory variables which are all categorical. x_i is the observed value of the explanatory variables for observation.

$$\pi i = \Pr(Yi = 1 \mid Xi) = \frac{exp(\beta 0 + \beta 1 xi)}{1 + exp(\beta 0 + \beta 1 xi)}$$

Multicollinearity: Multicollinearity refers to the situation in which one or more predictor variables in the equation are highly correlated (Draper & Smith, 1998). There are many ways to determine multicollinearity and examining the standard errors for the b co-efficients is one of the easier and simplest ways to do it (Draper & Smith, 1998). A standard error larger than 2.0 indicates numerical problems such as multicollinearity among the independent variables (Draper & Smith, 1998). In this analysis income and education might be highly correlated and lead to a multicollinearity problem for the analysis. However, the standard errors for logistic regression models were all smaller than 2.00 and when the two variables (income level and educational level) were put into the regression analysis together and separately, the standard error values did not change. For instance, the standard error for "agreeing with filial responsibilities" was .089 for each analysis. The tables for standard errors are provided in Chapter 4 and Chapter 5.

3.2.4.2 Independent Variables

For all the binary logistic regression models, all 10 independent variables are fixed the same and coded into new dummy variables. The cross-tabulation of the original independent variables and dependent variables for each category is provided in Annex2 for the readers' inference. It is also noteworthy to emphasise that the binary logistic

regression analyses are conducted for functional and normative solidarity as the focus of enquiry.

The independent variables are listed below:

Table 3 Independent Variables for Binary Logistic Regression.

Independent Variables	**Classification and Measurement**
Gender	Male = 0
	Female = 1
Marital Status	Never married/Separated/Divorced/Widow(er) = 0
	Married/With a Long-term Partner = 1
Age Group	40-59 (Adults) = 0
	60-79 (Older Adults) = 1
Household Size	Living Alone = 0
	2 or more = 1
Number of Children	No Children = 0
	1 or more children = 1
Self-Reported Health	Poor/Very Poor = 0
	Fair/Good/Very Good = 1
Education Level	High School and less = 0
	University and higher = 1
Employment Status	Unemployed = 0
	Full-time/Part-time/Once in a while = 1
Income*	Below poverty line = 0
	Above poverty line = 1
Place of Residence	Rural = 0
	Urban = 1

(*Income level of the respondents is calculated based on the 2007 household poverty line for 4 people determined by the Turkish Statistical Institute (TUIK, 2008). Income higher than the 2007 Household Poverty Line is labelled “Above Poverty Line” and income lower than 2007 Household Poverty Line is labelled “Below Poverty Line”.)

3.2.4.3 Functional Help

After going through the literature and looked at the questions in the GLAS dataset, 6 dependent variables were selected to explore the factors associated with functional help transfers among generations. The questions in the dataset are as follows:

1) Have you received financial support from a friend or relative during the last 6 months?

2) Have you provided financial support to a friend or relative during the last 6 months?

3) Have you received practical help in the home (e.g. cleaning, shopping, cooking) from a friend or relative during the last 6 months?

4) Have you provided practical help in the home (e.g. cleaning, shopping, cooking) to a friend or relative during the last 6 months?

5) Have you received personal care (e.g. nursing, bathing, dressing) from a friend or relative during the last 6 months?

6) Have you provided personal care (e.g. nursing, bathing, dressing) to a friend or relative during the last 6 months?

The answers to these questions are recoded into binary dummy variables as shown in the table below.

Table 4 Dependent Dummy Variables for Functional Help.

Dependent Variables	**Values**
Financial Help Provided	No = 0
	Yes = 1
Financial Help Received	No = 0
	Yes = 1
Practical Help Provided	No = 0
	Yes = 1
Practical Help Received	No = 0
	Yes = 1
Care Provided	No = 0
	Yes = 1
Care Received	No = 0
	Yes = 1

3.2.4.4 Intergenerational Attitudes

In order to measure the intergenerational attitudes, one attitudinal question was selected as the dependent variable. This variable was computed into a bivariate dummy variable. The same independent variables are used for the analysis.

1) Here are some statements about family responsibilities. Do you agree with each of them? – It is the duty of adults to provide for their parents in times of need later in their life.
2) Here are some statements about family responsibilities. Do you agree with each of them? – It is the duty of a parent to do his/her best for his/her children even at the expense of ...

Table 5 Dependent Dummy Variables for Intergenerational Attitudes.

1 Agreeing with Filial responsibilities	Neither agree nor disagree/disagree/strongly disagree = 0
	Agree/Strongly Agree = 1
2 Agreeing with Parental responsibilities	Neither agree nor disagree/disagree/strongly disagree = 0
	Agree/Strongly Agree = 1

3.2.5 Hypotheses

3.2.5.1 Functional Solidarity

Direction of the transfers: Financial transfers are more likely to operate downwards whereas time transfers in terms of practical help and care provision are more likely to operate upwards.

Gender: Female children are more likely to provide practical help to their elderly parents whereas male children are more likely to provide financial help.

Marital status: Single, divorced or widowed parents are more likely to receive both practical and functional help compared with married parents.

Occupation: Adult children who have full-time jobs are more likely to provide financial help to their elderly parents compared with children who are unemployed.

Normative Attitudes: Adult children who state strong opinions about filial responsibilities are more likely to provide financial, practical help and care facilities to their elderly parents.

Household size: As the number of people in the household increases, elderly parents are more likely to receive practical help and care.

Self-perceived health status: Elderly parents who have poor health are more likely to receive practical help compared with the elderly who perceive their health as fair or good.

3.2.5.2 Normative Solidarity

Age: Older (65+) respondents are more likely to state strong opinions about family responsibilities.

Gender: Female respondents are more likely to state strong opinions about family responsibilities.

Education: More educated respondents (university and higher) are less likely to state strong opinions about family responsibilities compared to their less educated (high school and less) counterparts.

3.2.6 Linking Theoretical Framework with the Dataset

As stated in the previous chapter (Chapter 2), in the 4th and 5th chapters, I employed Bengtson and Roberts's (1991) Intergenerational Solidarity Approach as the theoretical framework.

There are three principal reasons on this focus. First, there is a strong reference to solidarity in the Turkish case by means of which the definition of intergenerational relationships gains importance. Second, objectives of my project overlap with this theory, which emphasises the prescription of empirical demographic and attitudinal indicators. Finally, the aforementioned theory has been widely deployed in various national and international contexts whereas it has not been applied to the Turkish context. It will hopefully open new gates in the studies of sociology of family. And finally, Bengtson and Roberts (1991) described 6 different patterns of intergenerational solidarity between the generations. All 6 solidarity types have their own empirical indicators and it is possible to measure them.

My preliminary analysis with the GLAS dataset showed that intergenerational exchanges are very much gendered, and that women are always at the centre of exchanges, either as recipients or as givers. For that reason, I conducted the interviews with elderly women and their daughters/daughter-in-laws to better understand the gender specific exchange dynamics, which are crucial for intergenerational solidarity in Turkey. Since education was the only variable that affects normative attitude and does not affect behaviour, it was selected as the anchor variable. As the sample group, 10 educated (university and higher) and 10 less educated (high school and less) elderly and their adult daughters are recruited for the qualitative phase of the research. In total, 20 dyads and 40 subjects were interviewed. Conducting my interviews at a geriatric clinic gave me the opportunity to explore care-giving exchanges because the elderly women who were admitted to the hospital had received care at least once in their lives, which is a crucial stage for intergenerational care transfer.

For the 6th and 7th chapter, I used the "Intergenerational Ambivalence Theory", which was introduced by Lüscher and Pillemer (1998). They apply the concept of "ambivalence" to intergenerational relationships. I use this concept to demonstrate the individual and institutional ambivalences experienced by the adult women in the 6th chapter.

Lüscher (2002) also talks about ambivalence management strategies in the scope of his theory and these management strategies are used in the 7th chapter while explaining the intergenerational behaviours among adult women.

3.3 Phase 2: Qualitative Analysis

After the exploratory quantitative analysis, a qualitative research question was developed accordingly, which further investigates the association and correlation between different variables. The qualitative phase is formed of semi-structured interviews and the sample is chosen depending on the nature of research question that emerged from the quantitative analysis.

As described previously, quantitative research is interested in finding out the associations between different variables. On the other hand, qualitative research focuses on how social experience is created and what meaning people attach to it (Denzin & Lincoln, 2005; Willis, 2007). In this respect, qualitative research helps to see the experiences of elderly parents and their children as they exchange practical and financial help. By means of in-depth interviews, the researcher understands the motivations and processes of mutual exchange between the generations, which cannot be achieved by using quantitative methods.

Since qualitative methodology puts the researcher as the main actor crucial to the research, the researcher remains as the key player who interprets, constructs and transforms the world (Denzin &Lincoln, 2005; Maxwell, 2005). In this respect, qualitative methodology allows the researcher to understand intergenerational exchanges from a naturalistic and interpretive point of view (Denzin & Lincoln, 2005; Willis, 2007). Moreover, using a

qualitative method reveals different interpretations of support and care between different subjects from diverse cultural and economic backgrounds.

3.3.1 Selection of Sample

The results of the quantitative analysis determined the essential criteria for the sample for the qualitative phase of the study. Education level was selected as the anchor variable since the attitudes and behaviour showed discrepancy in the analysis. However, an intentional focus on women has been directed for the qualitative enquiry.

As introduced previously in the theoretical chapter on intergenerational relationships (Chapter 2), there are many actors and factors that take part in this complex network of relationships (for example life-course theory and interlinked lives). Since the focus of this study is the scrutiny of intergenerational relationships, intra-generational relationships and relations with other kin are neglected in the first instance. The first and quantitative part of this study includes all the members from two generations: adult children and older parents of both sexes. The results of Chapter 4 and Chapter 5 are derived from the population included in the study (see "Description of the Dataset" section in Chapter 3 for further detail). However, in the second and qualitative part of the study, the focus of enquiry is on older mothers and their adult daughters. The reason for this deliberate choice is the fact that all around the world care work is mainly undertaken by women (Brandt et al., 2009; Eggebeen & Hogan, 1990; Finch, 1989; Horowitz, 1985; Stone, Cafferata, & Sangl, 1987). Even though sons and fathers are active players in shaping intergenerational relationships, the role of women is more interesting since they undertake a lot of domestic and caring roles throughout their life course. And yet, when the factors that increase the likelihood of providing care are controlled for, the odds of daughters providing care is higher than that of sons (Dwyer & Cowards, 1991).For this reason, the literature generally focuses on daughters as caregivers even though there is a growing number of studies that examine the role of male caregivers in the caregiving process (e.g. Chang & White-Means, 1991; Young & Kahana, 1989).For this reason, the qualitative part of this research study focuses on the intergenerational solidarity patterns of older mothers and their adult daughters.

3.3.2 Access to the Sample

In the scope of the qualitative phase, 17 mother-daughter dyads were interviewed. Since the interviews aimed at capturing care exchanges and attitudes about care, a hospital setting where care need of the elderly mother had arisen was selected. In this respect, a geriatrics clinic in Ankara was selected for recruiting participants. Since Ankara University Medical Faculty Hospital's geriatrics clinic is the only one with hospitalised patients, it was easier to reach them. Other hospitals have polyclinics where only outpatient care is available. The chosen clinic was also situated at the crossroads of two socio-economically diverse provincial districts. Mamak, on one hand, is mainly a deprived area where the income level is lower compared with many other districts of Ankara. On the other hand, Çankaya, situated right next to Mamak, is composed of dwellers mostly of high socio-economic status. As a consequence, the clinic is accustomed to receiving patients from different socio-economic backgrounds. Moreover, as the only available geriatrics clinic in Ankara, it receives patients from all different backgrounds. For that reason, it was convenient to recruit both educated and less educated participants.

It might be argued that the sample is biased; however, since qualitative research does not necessarily seek representation in the sample selected (Gobo, 2004), the sample chosen is regarded satisfactory. In qualitative research, the focus is directed to the social experience and process (Denzin & Lincoln, 2005; Willis, 2007) that renders the numbers irrelevant. In gerontological research, especially, qualitative clarity can serve as an analogue to statistical power (Luborsky & Rubinstein, 1995). Rich and diverse theoretical grounding and sensitivity contexts are the qualities that a good qualitative sample requires. Given the strong theoretical framework and the context chosen for this research, the sample of the study meets the requirements for a solid sample.

3.3.3 Interview Themes/Topics

The interview themes are determined based on Intergenerational Solidarity Approach (Bengtson & Roberts, 1991) and Intergenerational Ambivalence Theory (Lüscher& Pillemer, 1998)

- ***Financial exchange patterns, motivations and processes***: The interviewees were asked how often (if at all) they exchange money, goods, presents, etc. and what the motivations are behind these exchange patterns.
- ***Practical exchange patterns, motivations and processes***: The interviewees were asked how often (if at all) they help each other with daily chores, cleaning, shopping, transportation, etc. and what the motivations are behind these exchange patterns.
- ***Care exchange patterns, motivations and processes:*** The interviewees were asked how often (if at all) they provide care facilities (for long-term care or childcare for grandchildren, etc.) and what the motivations are behind these exchange patterns.
- ***Views on family responsibilities***: Interviewees' opinions about family responsibilities were also inquired. They were asked to what extent and why family, state and employers should play a role in providing welfare (financial and practical services) to the elderly or adult children.
- ***Positive and negative feelings towards other family members***: The members were asked if providing financial or practical help creates positive or negative feelings towards the person that is cared for to reveal to what extent filial obligations outweigh personal emotions and thoughts.

3.3.4 Data Collection

After forming the qualitative research questions subsequent to the quantitative analysis, the characteristics of the target group are identified accordingly. Since education level is selected as the anchor variable, the interviewees were selected according to their education levels. Initial aim was to recruit 20 dyads of mother-daughters, 10 dyads belonging to the educated (higher/tertiary/university education and above) group and the

other 10 belonging to the less educated (high school and less) group. However, the researcher ended up conducting interviews with 17 dyads of adult daughters and their elderly mothers/mothers-in-law when the data had reached a saturation point where additional interviews would not affect the results and replicability of the study (Fusch & Ness; Mason, 2010)

To reach the desired target group, the researcher visited the geriatric clinic almost every day to see if there were any new patients who were eligible for the study. The researcher received information from the administrative personnel in order to see if there were new admissions. Having identified the older patients and the daughters who were taking care of them, the researcher entered their room and introduced herself. After briefly talking about the objectives of the project, the researcher asked if they would be willing to participate in the research study. After obtaining the written consent of the interviewees, face-to-face semi-structured interviews were conducted by the researcher (native speaker) in Turkish. Quiet, comfortable, convenient and accessible environments that did not jeopardise the effectiveness of the interviews were selected. A funnel approach, whereby the researcher begins the interview with broad questions and gradually narrows down the focus, was followed during the interviews (Harper & La Fontaine, 2009). Initially general questions about the lives of the participants and their general wellbeing were asked. Subsequently, following the previously prepared topic guide (Annex 4) specific questions were addressed during the interviews. The dyads were interviewed separately unless the mother/patient needed constant attention due to her illness/condition. All the interviews were tape recorded, transcribed and translated. The interviews were completed in a 3-month period.

Power relations between the interviewer and the interviewee are a significant issue in terms of its impact on the efficiency and effectiveness of the study. The interview site and the characteristics of the interviewee are important elements in determining the power relations during interviews (Henry, 2003). Doing research with older adults, one of the frailest groups in society, is a challenging task. Along with the physical restrictions, cognitive challenges make it difficult to communicate with older people. For that reason,

the interview site gains significance both in determining the power relations between the interviewer and the interviewee and ensuring the interviews are effective in serving the research objectives within ethical considerations. In this data-collection phase, the hospital setting affected the power relations and exacerbated the power imbalance between the interviewer and the interviewee. As the interviewer, I sensed that the older interviewees felt more powerless because of their sickness and frailty in the hospital setting.

3.3.5 Data Analysis

Verbatim transcripts from the interviews are read through by the researcher for preliminary analysis. Then the data is coded by segments, and themes are developed from the coding. Emergent themes are connected and related to each other. To secure accuracy and validity, thick descriptions, member checking and external auditing are employed.

3.3.6 Description of the Data

The interviewees consist of 17 dyads of adult daughters and their elderly mothers/mothers-in-law (34), 3 siblings and 4 other participants who are not related. The table below shows their basic demographic characteristics.

Table 6 Demographic Characteristics of the Interviewees.

No	Initials	Age	Education	Profession	Marital Status	Children
1	Y.S.	35	University	Lawyer	Single	0
2	L.B.	31	University	Graduate student in Architecture	Married	0
3	Ş.T.	43	High School	Civil service	Married	2
4	R.D.	40	High School	Unemployed	Single	0
5	A.L.	38	University	Economist	Single	0
6	D.M.	29	Master's Level	Institutional consultant	Married	0
7	M.N.	32	High School	Part-time sales person	Single	0
8	Y.N.	67	Primary School	Housewife	Married	3
9	Z.T.	36	Secondary School	Housewife	Married	2
10	Ş.H.	50	University	Professor	Widowed	2
11	F.Ç.	34	High School	Housewife	Married	1

12	M.A.	33	Primary School	Housewife	Single	0
13	H.G.	60	Primary School	Housewife	Married	4
14	R.N.	54	Primary School	Housewife	Married	3
15	L.P	41	University	Sales representative	Married	2
16	Ş.Ö.	38	University	Housewife	Married	2
17	K.D.	30	High School	Sales representative	Single	0
18	D.A.	83	Illiterate	Housewife	Married	4
19	T.B.	68	Illiterate	Housewife	Married	5
20	A.T.	66	University	Retired	Married	1
21	A.R.	71	Primary School	Housewife	Married	2
22	H.R	69	Illiterate	Housewife	Married	3
23	F.Y.	73	Secondary School	Housewife	Married	4
24	B.R.	37	High School	Sales person	Married	2
25	C.S.	72	Illiterate	Housewife	Widowed	4
26	Y.M.	45	University	Doctor/Gynaecologist	Married	1
27	FK.	85	High School	Housewife	Widowed	3
28	Y.K.	71	University	Lawyer	Married	2
29	N.K.	76	University	Retired	Single	0
30	B.D.	47	High School	Housewife	Married	2
31	A.K.	51	University	IT Specialist	Divorced	1
32	N.T.	63	Primary School	Housewife	Married	4
33	N.Ö.	44	University	Lawyer/Journalist	Divorced	0
34	A.C.	51	Secondary School	Housewife	Married	3
35	H.L.	76	Primary School	Housewife	Widowed	5
36	B.N.	36	University	University student	Single	0
37	S.N.	68	Secondary School	Retired civil servant	Married	2
38	A.Ç.	41	High School	Housewife	Married	2
39	Y.S.	71	Primary School	Housewife	Married	4
40	L.M.	48	High School	Retired factory worker	Married	3
41	K.O.	30	Master's Level	PhD student	Single	0

3.4 Nature of Mixed Methodology

Within the scope of the proposed project, mixed methodology is employed to answer the research questions. Mixed methodology (also referred as mixed methods, mixed strategy) goes beyond the dichotomy of quantitative and qualitative methods and combines them as an alternative methodology. The research projects, which use at least one qualitative and one quantitative method to answer the research question or questions, are considered

mixed-method researches. Mixed methods have emerged as a popular methodology especially in the social science research arena (Woolley, 2009; Bryman, 2006). Using mixed methodology, in a way dilutes the debate about the superiority of one method over another. For instance, Hellström (2011) discusses the strengths and weaknesses of quantitative and qualitative approaches and argues that neither quantitative nor qualitative approaches are superior. He argues that "reality is too complex, and our knowledge too limited and error-prone to provide more than probabilistic accounts of social relationships" (p. 74). In that respect, he recommends adopting a probabilistic approach rather than a deterministic one. According to him, as long as the statistical model "produces a given outcome, in a statistically satisfactory way" (p. 72), quantitative approach can be used to supplement the qualitative comparative analysis, or vice versa. Hellström (2011) talks about earlier empirical studies in which both linear regression (Clark, Gilligan & Golder, 2006) and logistic regression analysis (Grendstad, 2007) were found to be sufficient to handle the complexity of the social phenomena and successfully supplement and enhance qualitative comparative analysis. Grendstad showed that logistic regression analysis not only produced parallel results with qualitative comparative analysis, but also claimed to be more parsimonious and powerful. With this finding, Grendstad refutes Ragin and Bradshaw's earlier claim in which they argue that 'the kind of information provided by qualitative analysis differs qualitatively from that provided by the logistic regression of the same data' (Ragin & Bradshaw, 1991, p. 221). Even though both Hellström (2011) and Grendstad (2007) agree on the practicalities of pluralistic approach, neither claims superiority for applied statistical analysis over qualitative methods. Instead, Grendstad says "it is up to the analyst to choose the appropriate method with a solid grounding in research question, theoretical logic and types of data" (Grendstad, 2007, p. 139).

3.4.1 Interaction of Quantitative and Qualitative Methods

It has been controversial whether the research question that is posed in a mixed-methods project should consist of two separate questions (most of the time in the form of "what and how" or "what and why" questions) or be in the form of one overarching question which can be addressed with different methods employed (Creswell & Tashakkori, 2007).

Since the different methods were applied sequentially and the second phase was based on the results of the first, asking two separate questions is more appropriate regarding this project. The first phase of the project started with a "what" question: "What are the patterns and determinants of intergenerational exchange within Turkish society?" Since descriptive statistics offered the best way of looking into exchange patterns and determinants, a quantitative methodology was employed for the first phase. The results showed that intergenerational exchange is still high among the generations and exchanges are not determined by individual demographic factors. However, when the attitudes towards intergenerational responsibilities were examined, education level made a difference. All these results have raised the question of behavioural gap between attitude and behaviour. In order to find out why there was a gap between attitudes and behaviour among educated women", interviews were conducted with women as the second phase of the research project. In order to find the reason behind this gap, I turned to qualitative methods and asked the "why" question. The results demonstrated that for educated women there was a disparity between normative and felt obligations, which in turn pushes them to provide intergenerational support to their ageing parents but this time in a different form and shape compared to less educated adult women.

3.4.2 Mixed Methodology Objectives

Using multiple methodologies may serve many purposes. There are different objectives that are classified by different authors but Greene and his colleagues'' classification (1989) is useful in demonstrating the methodological objectives of this research project. After developing a theoretical framework for different purposes, they come up with 5 different but not mutually exclusive justifications based on empirical work (Greene, Caracelli & Graham, 1989).

The first justification for the method employed is "**triangulation**". Even though triangulation does not necessarily justify the use of multi-methods (triangulation may be achieved through the use of different techniques within one method), correspondence and convergence between the results might reveal a great deal about the validity of the results

(Greene, Caracelli & Graham, 1989). In this study, both quantitative and qualitative enquiries about the intergenerational transfers and attitudes towards filial responsibilities showed similar results, which served the purpose of triangulation and validation of the research results.

Another justification for using multi-methods is the "**complementarity**" (Greene, Caracelli & Graham, 1989). In this research project, the quantitative analysis was able to display the patterns of intergenerational transfers and their associations with demographic and family structures. However, the quantitative analysis did not allow sight of the process of intergenerational transfers and motivations behind them. For that reason, to obtain a better picture of intergenerational relations within Turkish society, the qualitative study helped to depict a considerably representative segment of the population in Ankara. However, since qualitative research does not pursue statistically representative sampling, seeing the mechanisms of intergenerational transfers and attitudes from different educational backgrounds was sufficient to complement the quantitative data.

"**Development**" is another justification for the use of different methods and the first phase of the proposed project helps to inform and develop the other phase of enquiry. In this study, the results of exploratory quantitative analysis are used to develop a research question that can be answered through qualitative enquiry. To be more specific, the question why educational level makes a difference for attitude but not for behaviour could only be answered through qualitative enquiry.

3.4.3 Integration of the Results

As established previously, mixed methodology has different objectives, all with the aim of integrating the results in one way or another. In the scope of this project, the qualitative method helps to complement and expand the quantitative while trying to initiate and develop other research questions. The combined results of two different methods help to provide a holistic and deeper understanding of intergenerational relationships within Turkish society. More specifically, using both methods enables the researcher to see how

different theoretical approaches can address different issues about one subject. In this case, when the results are integrated, it is seen that intergenerational solidarity and intergenerational ambivalence theories give a more accurate picture of intergenerational relationships in Turkey when combined.

It is important to keep in mind that mixed methodology might bring about unexpected results since there are no pre-determined questions to pose (Bryman, 2006; Erzberger & Kelle, 2003). This inherent characteristic of the mixed methodology can be a challenge for the researcher; however, it might also reveal interesting results worthy of further enquiry and research. In this case, mixed methodology has revealed interesting results in the quantitative phase, which have led to other interesting results in the qualitative phase of the study.

3.4.4 Ethical Considerations

In order to implement the qualitative part of the research project, CUREC/1A form (for studies where target sample group is not formed of minors, vulnerable or deviant groups) was submitted as requested by the University of Oxford. Research Ethics Approval was granted on the 11 July, 2011 (see Annex 5). An informed consent letter is attached to the CUREC/1A, which outlines the objectives of the study and states the role and rights of the participant in relation to the research study (see Annex 6). This form was translated into Turkish and distributed to the participants before the interviews. Written consent was obtained from the participants and signed by them. The participants were reminded verbally of their right to withdraw from the study at any time they wished and that their information would be kept anonymous. During the interviews, utter care and attention was paid not to distress and upset the participants with the questions. The topic guide, which outlines the content of the questions that the participants were asked, was also approved as an attachment to the CUREC/1A form (see Annex 5). During the data analysis phase, anonymity of the data was assured in the terms of the Data Protection Act. To anonymise the identities of the participants, their initials were used in the description of the data collected. The data is kept in encrypted files accessible only by the researcher.

CHAPTER 4: INTERGENERATIONAL TRANSFERS

4.1 Introduction

This chapter aims to examine one of the solidarity dimensions of the Intergenerational Solidarity Approach (Bengtson & Roberts, 1991), namely functional solidarity. Functional solidarity consists of three dimensions, which include financial transfers (both in cash and in kind), practical help with daily activities and long-term care. As the intergenerational solidarity literature suggests, there are a number of socio-demographic indicators that affect intergenerational exchanges. This chapter aims to explore the level of functional solidarity within Turkish society and socio-demographic factors that affect intergenerational transfers. In this respect, this chapter aims to answer these two questions:

1. What is the level of functional solidarity within Turkish society?

2. What are the socio-demographic determinants of functional solidarity within Turkish society?

The enquiry started with descriptive statistics in order to show the characteristics of the survey respondents and, to this end, frequency tables are constructed. Bivariate analysis (chi-squared tests) is performed to explore the associations between the variables. In order to assess the strength and the direction of the association, correlation analysis is performed. The analysis is finalised with multivariate analysis (binary logistic regression). All statistical analyses are carried out with the raw data because weighting of the data might cause numerical problems (Korn & Graubard, 1991; Lohr & Liu, 1994; Skinner & Mason, 2012).

The table below shows the characteristics of the respondents, which are used as independent variables for the analysis.

Table 7 Individual Level Socio-Demographic Factors and Frequencies

Factors	Code	Cases	%
Gender			
Male	0	379	37.3
Female	1	638	62.7
Marital Status			
Not Married	0	244	24.0
Married	1	773	76.0
Age group			
40-59 yrs	0	515	50.6
60-79 yrs	1	502	49.4
Household Size			
Single (living alone)	0	83	8.2
2 or more people	1	933	91.8
Having Children			
No Children	0	31	36.9
1 or more children	1	984	63.1
Health Status			
Poor	0	676	66.5
Good	1	341	33.5
Education Level			
High school and less	0	964	94.8
University and above	1	52	5.1
Employment Status			
Unemployed	0 931		91.5
Employed	1 86		8.5
Income			
Below poverty line	0 333		38.0
Above poverty line	1 544		62.0
Place of Residence			
Rural	0 238		23.8
Urban	1 761		76.2

Total number of respondents N = 1.017, Global Ageing Survey, Turkey, HSBC, 2007

In the course of the analysis 10 independent variables are used. The first independent variable is gender. 62.7% of the sample consist of female respondents whereas 37.3% of the respondents are male respondents. This imbalance between gender distribution can be explained by the data-collection method. Since the survey was conducted by means of telephone interviews, it is highly likely to encounter women compared to men due to traditional gender roles and division of labour within the household. Among all the respondents, 76% are married and the remainder (24%) are either single or widowed. Age group distribution is almost even, with 40-59 year olds making up 50.6% and 60-79 year olds constituting 49.4%. Since binary logistic regression is employed, household size is divided into 2 binary categories as single households where respondents live alone, and which constituted 8.2% of the sample, and the remaining households, composed of at least 2 people (91.8%). Only 3.1% of the respondents do not have any children whereas the rest have at least 1 child (96.%). When the respondents were asked about their health status, 66.5% reported having poor health whereas 33.5% were satisfied with their health status. As far as the education level is concerned, only 5% of the respondents are university graduates, and 94.9% of the respondents graduated from high school or less. 91.5% of the respondents are either unemployed or retired and only 8.5% of the respondents are working. 38% of the respondents live below the poverty line (which is calculated according to the 2007 poverty threshold) and 62% of the respondents live above the poverty line. And finally, 23.8% of the respondents live in rural areas and 76.2% live in urban areas, which reflects the country level distribution.

Table 8 Dependent Variables and Frequencies.

Variables	Code	Cases	%
Financial help provided			
No	0	716	70.4
Yes	1	301	29.6
Financial help received			
No	0	926	91.1
Yes	1	91	8.9
Practical help provided			

No	0	805	79.2
Yes	1	212	20.8
Practical help received			
No	0	840	82.6
Yes	1	177	17.4
Care provided			
No	0	925	91.0
Yes	1	92	9.0
Care received			
No	0	979	96.3
Yes	1	38	3.7

Total number of respondents N = 1.017, Global Ageing Survey, Turkey, HSBC, 2007

In the scope of this chapter, 6 dependent variables are used. Receiving and providing help is asked to the respondents for three dimensions of intergenerational support (financial help, practical help, and care help). Negative answers were coded into "0" and positive answers were coded into "1". Of all the respondents, 29.6% of them reported providing financial help whereas 8.9% stated having received financial help. This difference shows that respondents provide more help than they receive. As far as the practical help is concerned, 20.8% of the respondents reported providing practical help to a friend or relative whereas 17.4% of them reported receiving practical help. Again provision of practical help exceeds the amount of practical help provided. With regard to care, 9% of the participants reported having provided care help whereas only 3.7% of them stated receiving it. Since breaking down the dataset into smaller groups does not allow for a robust analysis, aggregate data is used for the bivariate and multivariate analysis. However, in the following section, frequencies are visualised for each age group to capture the direction of transfers between generations.

4.2 Direction of Transfers

Before moving on to the bivariate and multivariate analysis, it is useful to have a look at the direction of the transfers. To visualise the gap between transfers, frequencies are used for each age category (40-59 and 60-79). The figure below shows the discrepancy between

the provision and reception of financial, practical and care help among younger adults (40-59) and older adults (60-79).

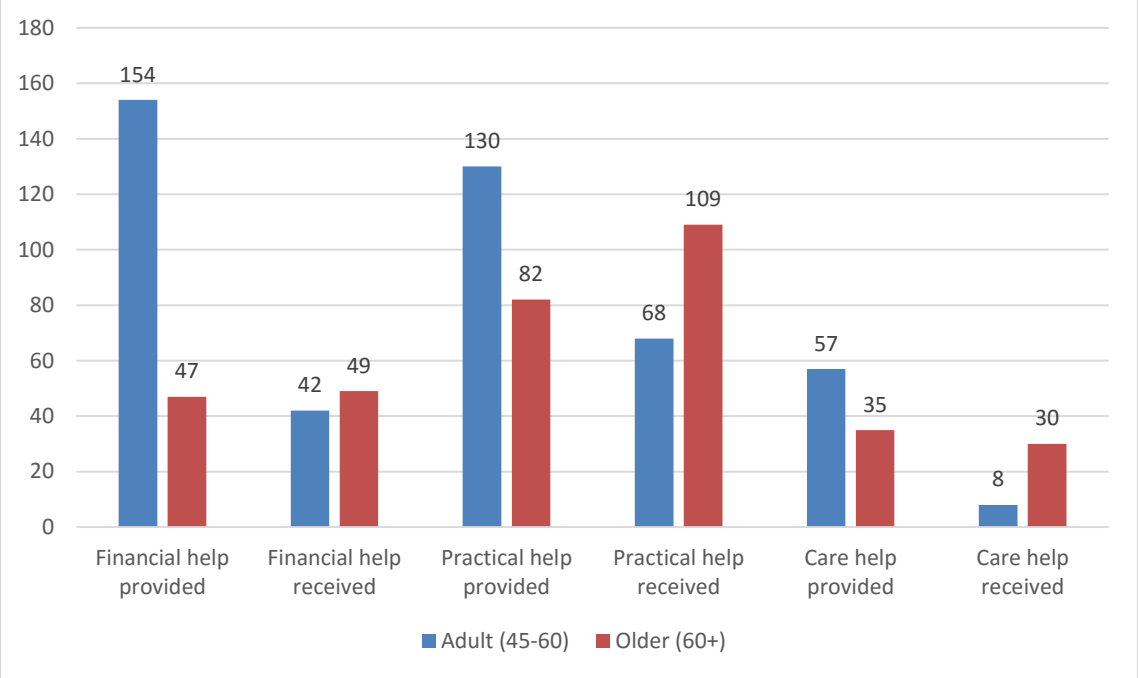


Figure 14 Direction of Intergenerational Transfers. (Source: GLAS,2007)

When financial transfers are taken into account, it is observed that about the same number of older people are recipients as well as providers of financial help. This situation challenges the traditional downward flow of financial transfers in Turkish society. As far as practical help is concerned, it is seen that older people (60+) receive more practical help than they provide, which is in line with the traditional patterns of practical help. On the other hand, an interesting finding emerges when care help is looked at. Older respondents stated that they provided more care help than they received. However, since frequencies are low, it is difficult to draw conclusions about the direction of the transfer. Moreover, it is important to look at the results based on the responses of adult children.

When the responses of adult participants regarding financial transfers are analysed, it is observed that adult children provide far more financial help than they receive. This situation again challenges the traditional patterns of financial transfers. For practical help,

the same pattern as in the previous figure applies. Adult respondents provide more practical help than they receive. Care help also shows similar patterns for practical help, which contradicts the statements of older respondents. However, as mentioned before, the frequencies are not sufficient to draw generalizable conclusions. Moreover, when we look at the breakdown of the care provision by older people, we see that only a few stated that they provided care to their children or grandchildren, which again decreases the likelihood of downward care transfers. Even though the dataset allows seeing information on the person(s) the transfers are provided to or received from, because of low frequencies it is hard to compare the generations. And yet, since it is not possible to detect from the dataset the help received (financial, practical, care) specifically from the parents, it makes it even harder to make analysis on these specific relationships. For all these reasons, all the bivariate analyses and multivariate analyses are conducted on the aggregate answers given to the question: "In the course of the last 6 months, have you received/provided Financial Help/Practical Help, Personal Care from/to a friend or relative?". The specific breakdown of the transfers, namely to whom transfers are provided or from whom the transfers are received (i.e. spouse/partner, children, grandchildren, other family, friend), can be found in Annex 3. The reason why "other family" emerges as a main transfer point can be attributed to the missing choices, for mothers/fathers/parents.

4.3 Bivariate Analyses

As part of the bivariate analysis, chi-squared tests were performed in order to investigate any significant association between the variables involved in the equation. Correlation matrix is used to explore the strength and the direction of the relationships between the variables. Since the variables of gender, marital status, household size, number of children, health status, employment status, and place of residence do not follow a meaningful order (i.e. ranking), the results of chi-squared tests were used for the interpretation of the results.

When the association between the variables was explored with the chi-squared test, results showed that the gender variable created a statistically significant difference in

respondents' answers regarding financial help that is provided and (p=.049) and practical help received (p=.001). This finding implies that men are more likely to provide financial help compared with women. This gender discrepancy in financial help provision might be due to the available financial resources of both genders. Women are less likely to work and have limited financial resources; consequently, they might be less likely to provide financial assistance to others. The other finding, that women are more likely to receive practical help, is interesting. It is very likely that husbands are the last source of practical help received owing to the patriarchal structure and gendered division of labour in the society. In this case, women assume the role of housekeeper and the help that is received is attributed to women. Men underestimate the help from their children or wives because they are taking all the domestic work for granted.

Marital status was also correlated with financial help provided, practical help received and additional care received. According to the results, married individuals are more likely to provide financial help to others (p=.014). This finding is in line with expectations because marriage enables people to accumulate more financial resources whereas living alone might be costlier, which decreases the likelihood of financial help provision by single individuals to others. Similarly, receiving practical help is negatively correlated with being married (p=.001). Not being married (single, divorced, widowed) decreases the likelihood of receiving practical help, which is in line with the literature. Likewise, not being married and receiving care help is positively correlated (p=.008). Individuals who do not have partners are more likely to receive practical help and care help from other people.

Age group is an important independent variable as it depicts the direction of the intergenerational transfers. According to the results, younger adults (40-59) are more likely to provide practical help (p<.001) whereas older adults (60+) are more likely to receive practical help (p=.002). Similarly, younger adults are more likely to provide care for others (p=.023) whereas older adults are more likely to receive care help (p<.001). In this respect, it can be argued that intergenerational practical help and care provision operate upwards in Turkish society. However, there is no statistically significant result for

financial transfers. This might support the needs-based hypothesis on financial transfers where financial transfers emerge in case of need.

Household size is another variable associated with intergenerational transfers, especially with practical help. The results of the bivariate analysis show that, both for receiving and providing practical help, having another person in the household increases the likelihood both of giving (p=.004) and receiving (p=.023) practical help. However, for care provision, only providing care is significantly associated with household size (p=.028).

Perceived health status is a significant variable in terms of intergenerational transfers, both for adult children and elderly parents. The result of the bivariate analysis shows that there is a positive relationship with providing financial help and health status (p=.002). Moreover, both receiving (p=.012) and providing (p=.015) practical help are positively associated with health status. And yet, receiving care is positively associated with health status (p=.007).

For education level, only providing financial help was significant (p=.003). This can be explained by the strong relationship between income and education level. Availability of financial resources increases the likelihood of provision of financial help to the kin. As expected, providing financial help was positively associated with being employed (p=0.002) and having an income level above the poverty line (p=.002). On the other hand, income level was negatively associated with providing practical help (p=.019).

Number of children and place of residence did not reveal a significant relationship for dependent variables.

The correlation coefficients support the negative correlation between these five variables (gender r=-.062, health status r=-.096, education level r=-.094, employment status r=-.097, and income level r=-.156) and providing financial help. On the other hand, there is

a positive correlation between marital status and providing financial help.

As far as practical help provision is concerned, there is a positive correlation between providing this and household size (r=.091), health status (r=0.76) and income level (r=.079). There is a negative correlation between providing practical help and age group (r=-.124).

When receiving practical help is considered, the same variables as those laid out by chi-square analysis have significant correlation with receiving practical help. Gender (r=.102) and age group (.097) are positively correlated with the dependent variable in question whereas marital status (r=-.100), household size (-.071) and health status (-.079) are negatively correlated with providing practical help.

Providing care is also positively correlated with household size (r=.069) and negatively correlated with age group (-.071). On the other hand, receiving care is positively correlated with age group (r=.117) and negatively correlated with marital status (-.084) and health status (r=-.085).

The overall bivariate analysis showed that socio-demographic factors are very strongly associated with intergenerational transfer behaviour. However, bivariate analysis examines only the relationship between two variables, while interaction of all the variables should be considered. For that reason, in the following section multivariate analysis (binary logistic regression in this case), which investigates the effect of a factor controlling for others, will be presented.

Table 9 Bivariate Analysis Results of Intergenerational Transfers.

	Financial Help Provided		Financial Help Received		Practical Help Provided		Practical Help Received		Care Provided		Care Received	
	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes
Gender												
Male	66.8	33.2	91.6	8.4	81.8	18.2	87.6	12.4	92.6	7.4	97.1	2.9
Female	72.6 p=.049	27.4	90.8 p=.664	9.2	77.6 p=.110	22.4	79.6 p=.001	20.4	90.0 p=.155	10.0	95.8 p=.280	4.2
Marital Status												
Not married	76.6	23.4	90.2	9.8	82.8	17.2	75.8	24.2	93.9	6.1	93.4	6.6
Married	68.4 p=.014	31.6	91.3 p=.577	8.7	78.0 p=.109	22.0	84.7 p=.001	15.3	90.0 p=.070	10.0	97.2 p=.008	2.8
Age Group												
Adults (40-59)	68.7	31.3	91.1	8.9	74.2	25.8	86.2	13.8	88.9	11.1	98.4	1.6
Older adults (60-79)	72.1 p=.239	27.9	91.0 p=.896	9.0	84.3 p<.001	15.7	78.9 p=.002	21.1	93.0 p=.023	7.0	94.0 p<.001	6.0
Household Size												
Living alone	75.9	24.1	89.2	10.8	91.6	8.4	73.5	26.5	97.6	2.4	96.4	3.6
2 or more people	70. p=.258	30	91.2 p=.530	8.8	78.1 p=.004	21.9	83.4 p=.023	16.6	90.4 p=.028	9.6	96.2 p=950	3.8
Having Children												
No children	80.6	19.4	83.9	16.1	80.6	19.4	87.1	12.9	83.9	16.1	100	0
1 or more children	70.2 p=.210	29.8	91.3 p=.156	8.7	79.3 p=.852	20.7	82.4 p=.499	17.6	91.6 p=.164	8.8	96.1 p=.265	3.9
Health Status												

Poor	73.5	26.5	91.1	8.9	81.4	18.6	80.5	19.5	91.7	8.3	95.1	4.9
Good	64.2 p=.002	35.8	90.9 p=.910	9.1	74.8 p=.015	25.2	86.8 p=.012	13.2	89.4 p=.233	10.6	98.5 p=.007	1.5
Education Level												
High School and less	71.5	28.5	91.1	8.9	79.1	20.9	82.3	17.7	90.8	9.2	96.3	3.7
University and above	51.9 p=.003	48.1	90.4 p=.864	9.6	80.8 p=.779	19.2	88.5 p=.251	11.5	94.2 p=.397	5.8	96.2 p=.967	3.8
Employment Status												
Unemployed	71.8	28.2	91.1	8.9	78.8	21.2	82.1	17.9	91.1	8.9	95.9	4.1
Employed	55.8 p=.002	44.2	90.7 p=.904	9.3	82.6 p=.417	17.4	88.4 p=.140	11.6	89.5 p=.632	10.5	100 p=.056	0
Income Level												
Below poverty line	79.3	20.7	91.0	9.0	82.3	17.7	79.9	20.1	92.8	7.2	94.6	5.4
Above poverty line	64.5 p<.001	35.5	90.8 p=.928	9.2	75.6 p=.019	24.4	83.5 p=.180	16.5	89.2 p=.074	10.8	96.5 p=.171	5.5
Place of Residence												
Rural	74.8	25.2	90.8	9.2	81.5	18.5	82.4	17.6	92.0	8.0	97.5	2.5
Urban	68.7 p=.074	31.3	91.1 p=.885	8.9	78.2 p=.272	21.8	82.9 p=.841	17.1	90.4 p=.454	9.6	95.8 p=.236	4.2

Table 9 Correlation Matrix.

Variables	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
1. Financial Provided	1															
2. Financial Received	-.007	1														
3. Practical Provided	.054	-.008	1													
4. Practical Received	.032	.083**	.026	1												
5. Care Provided	.028	.009	.201**	-.018	1											
6. Care Received	-.048	.011	-.025	.210**	.028	1										
7. Gender	-.062*	.014	.050	.102**	.045	.034	1									
8. Marital Status	.077*	-.017	.050	-100**	.057	-.084**	-.276**	1								
9. Age Group	-.037	.001	-.124**	.097**	-.071*	.117**	-.199**	-.265**	1							
10. Household Size	.036	-.020	.091**	-.071*	.069*	.002	-.148**	.514**	-.201**	1						
11. Having Children	.039	-.045	.006	.021	-.044	.035	-.089**	.155**	.015	.177**	1					
12. Health Status	-096**	.004	.076*	-.079*	.037	-.085**	-.155**	.131**	-.110**	.090**	-.008	1				
13. Education Level	-094**	.005	-.009	-.036	-.027	.001	-.126**	.047	.056	.020	-.063*	.167**	1			
14. Employment Status	-097**	.004	-.025	-.046	.015	-.060	-.263**	.129**	-.215**	.078*	-.028	.196**	.058	1		
15. Income Level	-156**	.003	.079*	-.045	.060	-.046	-.171**	.214**	-.103**	.130**	-.074*	.144**	.153**	.102**	1	
16. Place of Residence	.056**	-.005	.035	-.006	.024	.038	.010	.002	,040	.006	-.027	.076*	.099**	-.004	.095**	1

**. Correlation is significant at the 0.01 level (2-tailed).
*. Correlation is significant at the 0.05 level (2-tailed).

4.4 Multivariate Analysis

To explore the effects of socio-demographic individual factors on intergenerational transfers, the present analysis employs a binary logistic regression analysis model. In the first place the suitability of the model is evaluated to secure the reliability of the results. The first analysis is the Omnibus Test of Model Coefficients, which is used to decide if the new model (the model with independent variables) is significantly different from the baseline model (the model with only intercept). This analysis shows the capability of all independent variables to predict the dependent variable. If the result is significant, it means that the new model explains more of the variance in the dependent variable and the accuracy of the model improves when the variables are inserted into the equation. For the present analysis six logistic regression models were developed. The probability value of all the models were less than the significance level of .05 (Model 1 χ^2=37.817, df=10, p<.001; Model 2 χ^2=2.367, df=10, p=.993; Model 3 χ^2=27.571, df=10, p=.002; Model 4 χ^2=28.051, df=10, p=.002, Model 5 χ^2=18.750, df=10, p=.044, and Model 6 χ^2=34.057, df=10, p<.001). That means all six models are satisfactory and explains more of the variance in the dependent variable than the baseline model.

Table 11 Omnibus Test of Model Coefficients.

			Chi Square	df	Sig.
Model 1	Step 1	Step	37.817	10	.000
		Block	37.817	10	.000
		Model	37.817	10	.000
Model 2	Step 1	Step	2.367	10	.993
		Block	2.367	10	.993
		Model	2.367	10	.993
Model 3	Step 1	Step	27.571	10	.002
		Block	27.571	10	.002
		Model	27.571	10	.002
Model 4	Step 1	Step	28.051	10	.002
		Block	28.051	10	.002
		Model	28.051	10	.002
Model 5	Step 1	Step	18.750	10	.044
		Block	18.750	10	.044
		Model	18.750	10	.044
Model 6	Step 1	Step	34.057	10	.000
		Block	34.057	10	.000
		Model	34.057	10	.000

The Hosmer and Lemeshow test measures the association between the actual and predicted values of the dependent variable. The finding that there is no significance in this test shows that the model prediction is not significantly different from observed values. For the current analysis, all models have p values that are higher than the significance level of .05, implying a good model fit. However, it is important to note that this finding does not mean that the model necessarily explains the variance in the dependent variable.

The chi squares for this test is inserted in the odds ratio table (Table 13).

On the other hand, these goodness of fit measures do not actually tell much about the accuracy or the numerical problems with the sample. Minimum or no multicollinearity is the ideal condition for a useful model. Standard errors, which are all greater than 2.0, indicate multicollinearity. However, none of the independent variables had a standard error larger than 2.0, which shows that the scores of each independent variable can be accurately separated into subdivisions.

Another helpful way of evaluating problems associated with the sample is to check the classification tables, which show how correctly the cases were classified. A perfect model is one in which the predicted and actual group membership is the same, and the overall correct percentage is 100%. For the financial help provided, the cases were correctly classified at 70.2% by the model, whereas this percentage was higher (90.8%) for the financial help that is received. For the practical help that is provided, the cases were correctly classified at 73.3% while received practical help was correctly classified at 82.2%. For the care help provided, the cases were correctly classified at 90.5% and for the care received this number was 95.7%. When this figure was checked for the null model (Step 0), it was seen that adding the independent variable does not result in significant improvement.

Table 12 Classification Table.

			Predicted		
			No	Yes	Correct %
Model 1	Step 1	No	596	14	97.9
		Yes	245	15	5.8
					70.2
Model 2	Step 1	No	790	0	100.0
		Yes	80	0	.0
					90.8
Model 3	Step 1	No	681	0	100.0
		Yes	189	0	.0
					78.3
Model 4	Step 1	No	715	0	100.0
		Yes	155	0	.0
					82.2
Model 5	Step 1	No	787	0	100
		Yes	83	0	.0
					90.5
Model 6	Step 1	No	833	0	100.0
		Yes	37	0	.0
					95.7

Hosmer and Lemeshow (2005) indicate that accurate or inaccurate classification does not point to the criteria for goodness of fit, and that classification is sensitive to the relative size of the two component groups, which always favours classification into the larger group. Regarding this point, Hosmer and Lemeshow suggest not using the classification table as the core measure for the model performance. Based on these explanations, it can be argued that the overall fit of the model is satisfactory.

Having discussed the possible problems with the model and obtaining positive results, it is appropriate to discuss the effect of the factors on the dependent variables. Under this section, six logistic regression models were generated to reveal the effect of socio-demographic factors on intergenerational transfers. The subdivisions that act as reference groups were selected according to bivariate analysis results and displayed in the table with

the sign of (ref).

Table 13 Odds Ratio for Functional Help.

Socio-Demographic Characteristics	Intergenerational Transfers					
	Financial help provided (Model 1)	Financial help received (Model 2)	Practical help provided (Model 3)	Practical help received (Model 4)	Care help provided (Model 5)	Care help received (Model 6)
Gender						
Male (ref)						
Female	1.010	1.180	1.372	1.867**	1.699*	1.596
Marital Status						
Not married (ref)						
Married	1.111	.903	.909	.902	1.251	.606
Age Group						
40-59 (Adults) (ref)						
60-79 (Older Adults)	.997	1.040	.660**	1.761**	.996	3.411**
Household Size						
Living alone (ref)						
2 or more	.823	.986	2.480**	.780	4.293*	2.672
Number of Children						
No children (ref)						
One or more children	2.826*	.551	1.074	3.199	.302**	2.407
Self-Reported Health						
Poor (ref)						
Fair	1.222	1.095	1.316	.743	1.268	.349**
Education Level						
High school and less (ref)						
University and higher	1.947**	1.183	.909	.656	.506	1.463
Employment Status						
Unemployed (ref)						
Employed	1.635*	.913	.756	1.167	1.121	.000
Income Level						
Below poverty line (ref)						

Above poverty line	1.908***	1.020	1.469**	1.038	1.463	.839
Place of Residence						
Rural (ref)						
Urban	1.138	1.022	.773*	.954	1.069	2.115
Constant	-2.457***	.163	.082***	.052**	.034***	.000
Number of valid observations	870	870	870	870	870	870
Chi-square	12.380	5.921	7.191	3.317	5.550	8.056
The odds ratio for the reference category (ref.) is 1.000. Significant at *p<0.10; **p<0.05; ***p<0.001						

When the results of the bivariate logistic analysis are looked at, having at least one child, education level, employment status and income level are statistically significant variables in providing financial help. People with at least one child are three times more likely to provide financial help to a relative or a friend. Controlled for other variables, education level was also a significant variable for providing financial help. People with higher education are twice as likely to provide financial help to a friend or relative. Employed people have 64% greater odds of providing financial help compared to unemployed people. Similarly, people with an income above poverty line are twice as likely to provide financial help to a friend or relative. Regarding the relationship between the availability of financial resources and provision of financial help, the association between providing financial help and income level, education level and employment status meets the expectations. By contrast, for the second model, none of the variables revealed a significant association for receiving financial help.

For Model 3, where determinants for providing practical help are explored, age group, household size, income level and place of residence showed statistically significant results. Older adults have 64% lower odds of providing practical help to a friend or relative. As expected, in households with more than 1 person, the odds of providing practical help are 2.5 times higher. As far as income level is concerned, people with an income above poverty line have 47% higher odds of providing practical help. In an urban setting, the odds of providing practical help are 33% lower compared with rural place of residence. For Model 4, in which determinants for receiving practical help is explored,

gender and age group are the variables which revealed statistically significant variations. Controlled for other variables, women have 87% higher odds of receiving practical help compared to men. Similarly, older adults (60-79) have 76% higher odds of receiving practical help compared to adults (40-59).

As far as providing care is concerned, controlled for other variables, gender, household size and number of children reveal statistically significant results. Women have 70% higher odds of providing care to a friend or relative compared to men. This finding confirms the traditional caring role of women. People living with others are four times more likely to provide care for them compared to people who are living alone. People with children have 70% lower odds of providing care to a relative or friend. This finding is interesting when it is combined with the effect of "number of children" on the provision of financial help. Respondents with children are more likely to provide financial help and less likely to provide care help, which might be interpreted as the substitution of care help with financial help. Since having children diminishes temporal resources for care help, people with children might be replacing care help with financial help. As far as receiving care is in question, age group and health status reveal significant results. As expected, older adults are almost 3.5 times more likely to receive care compared to their younger counterparts. Similarly, people who report good or fair health status have 65% lower odds of receiving care compared to poor health reporters. This finding confirms the needs-based perspective on intergenerational transfers.

4.5 Conclusion

Functional solidarity is an important element of intergenerational exchanges. As far as the bivariate regression analysis is considered, the fact that gender makes a difference in practical help and care help confirms the traditional role of women in practical house chores and care giving activities. However, providing practical help did not reveal any significant difference regarding gender. This might be due to the gendered division of labour between men and women. Since men undertake the out-of-the-house duties, such as transportation, shopping and paying bills, they also give a positive answer to the

question and that produces no difference between men and women in providing practical help for others. The difference in age groups shows the direction of intergenerational transfers. Except for financial transfers, older groups are more likely to receive care help and practical help. Household size and number of children also affect the exchanges of help within the family. Self-reported health makes a difference only in terms of receiving care help, which shows the latent quality of the relationship. Care help emerges in case of need. University graduates, working people and people with higher income levels are more likely to provide financial assistance to a relative or a friend, which confirms the availability of the resources argument. The finding that in urban locations people are less likely to provide practical help is also consistent with the modernisation argument. People living there have less time or they are less willing to help each other with of family chores. Assuming that the majority of the families live in an urban setting, it can be argued that functional solidarity regarding practical help is in decline. Since geographical distance could not be integrated into the model, there is not much evidence regarding the effect of geographical proximity (structural solidarity) on intergenerational exchanges. Having examined the functional aspects of intergenerational solidarity, it is appropriate next to examine the normative dimension of intergenerational solidarity, which will be the main focus of Chapter 5.

CHAPTER 5: INTERGENERATIONAL NORMS

5.1 Introduction

In the previous chapter (Chapter 4) factors associated with individual level demographic factors and intergenerational transfers were analysed. In this chapter, the relationship between the individual level demographic factors and normative attitudes is explored. The objective of this chapter is to determine if the same demographic variables are associated both with attitude and behaviour as there is a high correlation between the two.

As stated, the objective of this study is to determine the levels of solidarity within the Turkish population by employing the Intergenerational Solidarity Approach of Bengtson and Roberts (1991). This chapter seeks to answer two questions:

1. What is the level of normative solidarity within Turkish society?
2. What are the socio-demographic determinants of normative solidarity?

In this chapter, the same statistical analyses (chi-squared tests, correlation analysis and binary logistic regression) were conducted as in Chapter 4 and the same independent variables are used for exploring the relationship between socio-demographic variables and intergenerational attitudes.

In the analysis, the same 10 explanatory variables as in the previous chapter (see Table 9) were used to explore the relationship between intergenerational transfers and individual level demographic characteristics. 62.7% of the sample consists of female respondents whereas 37.3% of the respondents are male.

Table 14 Dependent Variables and Frequencies Used for Analysis.

Variables	Code	Cases	%
Agreeing with Parental Responsibilities			
No	0	41	4.0
Yes	1	976	96.0
Agreeing with Filial Responsibilities			
No	0	174	17.1
Yes	1	843	82.9

Total number of respondents N = 1.017, Global Ageing Survey, Turkey, HSBC 2007.

The first dependent variable is the degree of agreement with parental responsibilities. When the survey respondents were asked to what extent they agreed with parental responsibilities (It is the duty of a parent to do his/her best for his/her children even at the expense of ...) the vast majority of respondents either agreed or strongly agreed with the aforementioned statement. Only 4% of the respondents either strongly disagreed, disagreed or abstained. Since agreeing with parental responsibilities was of more interest, responses of agreeing and strongly agreeing were coded into 1 and the other responses were coded as 0.

The second dependent variable is the degree of agreement with filial responsibilities. When the respondents were asked to what extent they agreed with filial responsibilities (It is the duty of adults to provide for their parents in times of need later in their life), 82.9% agreed or strongly agreed. This percentage is still very high, however, compared with parental responsibilities; the percentage of agreement with filial responsibilities is 13.1% lower. Similar to the previous dependent variable, strongly disagreeing, disagreeing and abstaining were coded as 0, which consists of 17.1% of the respondents.

The difference between the percentages of agreement with parental responsibilities and filial responsibilities is interesting in view of the patriarchal family values in Turkey. According to the results, older parents are expected to provide more compared to adult children. That also explains the previous finding that financial transfers operate mostly downwards. The normative obligations reveal themselves in financial transfers.

Attitudes are significant determinants of behaviour. Intergenerational norms might affect the way intergenerational transfers operate. It is important to know what kind of socio-demographic factors are associated with attitudes towards parental and filial obligations. This analysis might help to explain how attitudes are formed within the Turkish cultural context.

The statistical calculations were performed with two different approaches. While bivariate analysis looked at the unique association between the involved variables (chi-squared tests) and the strength and the direction of the relationship (correlation), multivariate analysis (binary logistic regression), disentangled the factors affecting respondents' attitudes towards parental and filial responsibilities. The following sections are allocated to present the results of these analyses.

5.2 Bivariate Analyses

In conducting the bivariate analysis, chi-squared tests were performed in order to investigate any significant association between the variables involved in the equation. Correlation matrix is utilised to explore the strength and the direction of the relationships between the variables. Since the variables of gender, marital status, household size, number of children, health status, employment status and place of residence do not follow a meaningful order (i.e. ranking), the results of chi-squared tests were used for the interpretation of the results.

So far, the results of the frequency analysis revealed that 96% of the respondents agree with the statement addressing parental responsibilities while agreement with the statement

related to filial responsibilities remains far below that percentage (82.9%).

When the unique association between the involved variables was investigated with the chi-squared test, results demonstrated that the gender variable had created a statistically significant difference in respondents' answers regarding parental responsibilities ($p<0.05$). This finding implies that females are more likely to state stronger opinions about parental responsibilities when their own children are in need of support. Another variable that reveals differentiation in respondents' attitudes towards agreeing with parental responsibilities is having children or not ($p=0.001$). This result means that people with children are more likely to believe that parents should support their children in times of need. The correlation coefficients support the positive correlation between these two variables (gender $r=0.090$, having children $r=0.109$) and agreeing with parental responsibilities. Among the other independent variables, place of residence, income, employment status, educational level, health status, age group, household size and marital status did not reveal any statistically significant difference meaning that the sub-categories of the mentioned variables hold similar opinions towards parental responsibilities.

As far as filial responsibilities are concerned, gender, as well as having children, did not constitute a significant differentiation between the sub-categories. Besides, marital status, age group, household size, employment status, and income level did not reveal any statistically significant difference between the subgroups of the questioned independent variable.

Unlike parental responsibilities, filial responsibilities disclosed a statistically significant difference for health status, education level and place of residence variables. People with poor perceived health status are more likely to state stronger opinions about filial responsibilities compared to those with fair perceived health status ($p< 0.05$). Similarly, people with lower educational attainment level (high school and less) tend to express stronger views about filial responsibilities compared to people who hold university degrees and above ($p< 0.05$). Moreover, people who live in rural areas of the country are

more likely to have strong views about filial responsibilities compared to respondents who live in urban areas ($p < 0.05$).

The correlation coefficients revealed parallel results depicting negative correlation between the same variable pairs (health status $r=-0.081$, education level $r=-0.084$, place of residence $r= -0.075$).

Combining the results of the chi-squared tests and correlation matrices, it can be concluded that people with children and females are significantly more likely to express stronger opinions regarding parental responsibilities towards children in times of need. When it comes to agreeing with filial responsibilities, people who perceive their health as poor, who have lower educational attainment (high school and less) or who live in rural areas are more likely to hold stronger views.

The finding that women are more likely to express stronger opinions about parental responsibilities might be explained by their altruistic attitude towards their children. Similarly, people with children might feel more obligation for helping out their own children in times of need. People with poor health are in need of care and their strong opinion about filial responsibilities might stem from their personal needs. On the other hand, due to their low education level and living in rural areas, others hold on to more traditional views of intergenerational obligations.

The bivariate analysis showed that socio-demographic factors have a limited effect on normative attitudes. However, bivariate analysis examines only the relationship between two variables, and interaction of all the variables should be considered. For that reason, in the following section multivariate analysis (binary logistic regression in this case), which investigates the effect of a factor controlling for others, will be presented.

Table 15 Distribution of Respondents' Filial and Parental Attitudes (%).

Characteristic	Normative Attitudes			
	Agreeing with parental responsibilities %		Agreeing with filial responsibilities %	
	Not Agreeing	Agreeing	Not Agreeing	Agreeing
Gender				
Male	6.3	93.7	17.7	82.3
Female	2.7	97.3	16.8	83.2
	$p<0.05$		p=.710	
Marital Status				
Not married	3.3	96.7	16.0	84.0
Married	4.3	95.7	17.5	82.5
	p=.493		p=.592	
Age Group				
Adults (40-59)	4.1	95.9	18.4	81.6
Older Adults (60-79)	4.0	96.0	15.7	84.3
	p=.940		p=.251	
Household Size				
Living alone	4.8	95.2	19.3	80.7
2 or more	4.0	96.0	16.9	83.1
	p=.705		p=.587	
Having Children				
No children	16.1	83.9	29.0	71.0
1 or more	3.7	96.3	16.8	83.2
	p=.001		p=.074	
Health Status				
Poor	3.3	96.7	14.9	85.1
Good	5.6.	94.4	21.4	78.6
	p=.076		p=.010	
Education Level				
High school and less	3.8	96.2	16.4	83.6
University and higher	7.7	92.3	30.8	69.2
	p=.169		p=.007	

Employment Status				
Unemployed	3.9	96.1	16.9	83.1
Employed	5.8	94.2	19.8	80.2
	p=.380		p=.494	
Income				
Below poverty line	2.4	97.6	17.4	82.6
Above poverty line	4.8	95.2	17.3	82.7
	p=.077		p=.958	
Place of Residence				
Rural	4.2	85.8	12.2	87.8
Urban	3.9	96.1	18.8	81.2
	p=.859		p=.018	
Variation between subdivisions is carried out by Chi-squared test Total number of respondents N=1.017, Global Ageing Survey, Turkey, HSBC 2007.				

Table 10 Correlation Matrix

Variables	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**11**	**12**
1 Agreeing with parental responsibilities	1											
2. Agreeing with filial responsibilities	.212**	1										
3. Gender	.090**	.012	1									
4. Marital Status	-.022	-.017	-.276**	1								
5. Age Group	.002	.036	-.199**	-.265**	1							
6. Household Size	.012	.017	-.148**	.510**	-.201**	1						
7. Having Children	-.109**	.056	-.089**	.155**	.15	.177**	1					
8. Health Status	-.056	-.081**	-.155**	.131**	-.110**	.90	-.008**	1				
9. Education Level	-.043	-.084**	-.126**	.047	.056	.020	-.063**	.167**	1			
10. Employment Status	-.028	-.021	-.263**	.129**	-.215**	.078	-.028	.196**	.058**	1		
11. Income Level	-.060	.002	-.171**	.214**	-.103**	.130	-.074	.144**	.053**	.102	1	
12. Place of Residence	.006	-.075*	-.010	.002	.040	.006	-.027*	.76	.099	-.004	.095*	1

**Correlation is significant at the 0.01 level (2-tailed).

* Correlation is significant at the 0.05 level (2-tailed).

5.3 Multivariate Analysis

The present analysis employs binary logistic regression analysis model to explore the effects of socio-demographic individual factors on intergenerational transfers. First, the fitness of the model is evaluated to secure the reliability of the results. The first analysis is the Omnibus Test of Model Coefficients, which is used to decide if the new model (with independent variables) is significantly different from the baseline model (with only intercept). This analysis shows the capability of all independent variables to predict the dependent variable. If the result is significant, it means that the new model explains more of the variance in the dependent variable and the accuracy of the model improves when the variables are inserted into the equation. In other words, adding the independent variables increases the accuracy of the model. The probability value of the two models in the present analysis was more than the significance level of .05 (Model 1 χ^2=14.799, df=10, p=0.140; Model 2 χ^2=15.904, df=10, p=0.102), implying that adding the factors into the equation does not contribute to our understanding of filial and parental attitudes.

Table 17 Omnibus Test of Model Coefficients.

			Chi Square	df	Sig.
Model 1	Step 1	Step	14.799	10	.140
		Block	14.799	10	.140
		Model	14.799	10	.140
Model 2	Step 1	Step	15.904	10	.102
		Block	15.904	10	.102
		Model	15.904	10	.102

The Hosmer and Lemeshow test measures the association between the actual and predicted values of the dependent variable. The finding that there is no significance in this test shows that the model prediction is not significantly different from observed

values. For the current analysis, all models have p values that are higher than the significance level of .05, implying a good model fit. However, it is important to note that this finding does not mean that the model necessarily explains the variance in the dependent variable. The chi-squares for this test can be found in the odds-ratio table (Table 19).

When we look at the standard errors, again, none of the independent variables had a standard error larger than 2.0, which shows that the scores of each independent variable can be accurately separated into subdivisions.

Similarly, when we check the classification tables, the cases were correctly classified 96% by the model for parental responsibilities. For filial responsibilities, the cases were correctly classified 83%. When this figure was checked for the null model (Step 0), it was seen that adding the independent variable does not lead to a marked improvement. These imply a classification inaccuracy.

Table 18 Classification Table.

			Predicted		
			No	Yes	Correct %
Model 1	Step 1	No	0	34	0.
		Yes	0	836	100.
					96.1
Model 2	Step 1	No	0	152	0.
		Yes	0.	718	100.
					82.5

Table 11 Odds Ratio for Normative Solidarity.

Characteristics		
	Agreeing with Parental Responsibilities (Model 1)	Agreeing with Filial Responsibilities (Model 2)
Gender		
Male (ref)		
Female	2.844**	1.073
Marital Status		
Not married (ref)		
Married	1.117	.787
Age Group		
40-59 (Adults) (ref)		
60-79 (Older Adults)	1.335	1.318
Household Size		
Living alone (ref)		
2 or more	1.747	1.599
Number of Children		
No children (ref)		
One or more children	3.813*	1.905
Self-Reported Health		
Poor (ref)		
Fair	.659	.771
Education Level		
High school and less (ref)		
University and higher	.823	.565*
Employment Status		
Unemployed (ref)		
Employed	1.834	.998
Income Level		
Below poverty line (ref)		
Above poverty line	.615	1.245
Place of Residence		
Rural (ref)		
Urban	1.199	0.622**
Constant	2.611	2.417
Number of valid observations	870	870
Chi-square	9.105	2.782
*p<0.10; **p<0.05; ***p<0.001		

Model 1, in which the determinants of parental responsibilities were investigated, revealed a statistically significant effect of gender on agreeing with parental responsibilities. Controlling for the other variables, compared to males, females are 3 times more likely to agree with parental responsibilities in times of need. Similarly, having children as a parent variable revealed a statistically significant effect on the dependent variable when other factors in the equation are controlled. People with children were found to agree 4 times more likely than people without children.

Remaining explanatory variables did not reveal any statistically significant variation on the dependent variable, and moreover, the results are presented to expose the effect of each factor. For instance, the odds of an employed person's agreeing with parental responsibilities were 83% higher than that of an unemployed person. Similarly, those who live with 1 or more persons in the same household were found to have 75% higher odds of agreeing with parental responsibilities compared to people who live alone. As far as the age group is concerned, older adults (60-79) were found to have 34% higher odds of agreeing with parental responsibilities compared to younger adults (40-59). Looking at marital status, it was found that the odds of a married person's agreeing with parental responsibilities are 18% higher compared to those who are not married. As far as place of residence is concerned, people living in urban areas were found to have 20% higher odds of agreeing with parental responsibilities compared to people living in rural areas. Looking at health status as an exploratory variable, it is observed that the agreement rate of people with good health status is 44% lower compared those with poor health. When education level is considered, people with higher education level (university and higher) were found to have 18% lower odds of agreeing with parental responsibilities compared to those with lower educational attainment (high school and less). And finally, as far as income level is concerned, people with an income above poverty line were found to have 48% lower odds of agreeing with parental responsibilities compared to those with an income below poverty line.

Moving on to the effects of the same socio-demographic factors on filial responsibilities, the analysis shows different results. Among all the explanatory factors, only place of residence and education level revealed a statistically significant effect on the dependent

variable of agreeing with filial responsibilities. The odds of people who live in urban surroundings were found to be 36% lower on agreeing with filial responsibilities compared to people who live in rural areas. Similarly, people who have higher levels of education were found to have 43% lower odds of agreeing with filial responsibilities compared to people with lower educational attainment level. It is worth noting that education as a parent variable was found to be significant at the borderline of 10% confidence interval ($p<0.10$).

Among other factors, which did not reveal any statistically significant effect on the dependent variable, the odds of agreeing with filial responsibilities for people with children were found to be 91% higher compared to those without children. As far as household size is concerned, the chances of agreeing with filial responsibilities for people who live with others are 60% higher compared to those who live alone. When age group is taken into account, the older age group was found to have a 32% higher likelihood of agreeing with filial responsibilities compared to the younger group. Looking at marital status, it was found that married people have 21% lower chances of agreeing with filial responsibilities compared to people who are not married. People with good self-reported health status have 23% lower odds of agreeing with filial responsibilities compared to people who report poor health status. As far as income level is concerned, people who have an income above poverty line have 25% higher odds of agreeing with filial responsibilities compared to people with lower income level. Looking at the gender differentiation, females were found to have 7% higher odds of agreeing with filial responsibilities compared to male respondents.

5.4 Conclusion

The frequency analysis revealed that there is strong normative solidarity when it comes to parental and filial responsibilities in the Turkish population. Almost all (96%) of the respondents stated agreement with parental responsibilities when their children are in need of support. Similarly, 82% of the respondents agreed with the statement that children should support their elderly parents in times of need. This finding implies that there is a strong mutual consensus on normative responsibilities between the two generations and that they both feel responsible for each other in times of need. However,

there are certain socio-demographic factors that affect the way these norms are shaped. These differences in sub-divisions of the parental variables are examined through bivariate and multivariate analyses.

According to the bivariate analysis, gender as a parent variable revealed inconsistent results for the low dependent variables, filial and parental responsibilities. Gender is a significant factor that differentiates people's attitudes towards parental responsibilities whereas it fails to differentiate for filial responsibilities. When the results of the multi-variate analysis are considered, the findings support those of the bivariate analysis by showing statistically significant difference between gender and parental responsibilities. The chances of a female's agreeing with parental responsibilities were found to be 3 times higher than those of a male's. However, multivariate analysis did not reveal any statistical significance for filial responsibilities. Gender is a strong predictor for agreeing with parental responsibilities whereas it might not be considered a strong predictor for agreeing with filial responsibilities. This finding shows the higher assumed responsibility of women towards children when they state that parents should take care of their children in times of need. When it comes to agreeing with filial responsibilities, women do not have as strong opinions as they do for parental responsibilities. The overall finding suggests stronger support for normative responsibilities and yet females tend to hold stronger opinions for parental responsibilities.

As far as marital status is concerned, bivariate or multivariate analyses do not reveal any statistically significant differentiation between the subdivision categories. However, scrutinising the differentiation levels when controlled for the other factors, it was observed that married people were more likely to agree with parental responsibilities, while they were less likely than single people to agree with filial responsibilities.

Looking at the age group, we see that neither bivariate nor multivariate analysis revealed a significant effect for age groups as a parent variable. However, the older group was found to display about 33% higher odds of agreeing both with filial and parental responsibilities.

Again, household size as a parent variable did not reveal a statistically significant effect

in bivariate and multivariate analyses. Nevertheless, people who live with others were found to display markedly higher chances of agreeing with both parental and filial responsibilities.

It was in the context of parental responsibilities that having children created a statistically significant difference between people with or without children for both bivariate and multivariate analysis. People who have children were 4 times more likely to say that parents should take care of their children in times of need compared to those without children.

When the unique association between independent and dependent variables was looked at, it was seen that health status depicted a statistically significant difference for filial responsibilities. However, when the other factors in the equation are controlled, the same variable failed to reveal a statistically significant effect on attitudes towards normative responsibilities. However, it was observed that people with poor health are more likely to agree with normative responsibilities.

Both bivariate and multivariate analysis demonstrated that education level creates a difference in respondents' responses to filial responsibilities. People who have higher levels of education are less likely to agree with filial responsibilities compared to people with lower educational attainment level. There was also a similar tendency for parental responsibilities whereby more educated people were less likely to agree with parental responsibilities compared to people with lower education.

Employment status showed no statistically significant effect on bivariate or multivariate analyses. Additionally, when controlled for other factors, employed people tend to display lower chances of agreeing with parental responsibilities. For filial responsibilities, working and workless people adopt the same approach.

Income is another factor that failed to depict a statistically significant effect on the dependent variables. Nevertheless, people with an income above poverty line were less

likely to agree with parental responsibilities while they were more likely to agree with filial responsibilities.

Place of residence, again, showed a statistically significant effect in agreeing with filial responsibilities. People who live in urban areas displayed lower odds of agreeing with filial responsibilities. However, these people tend to display a higher possibility of agreeing with parental responsibilities.

Having conducted the analysis both for intergenerational transfers (Chapter 4) and norms (Chapter 5), it can be observed that education level is a significant variable for affecting intergenerational attitudes but not intergenerational behaviour. Assuming that behaviour is very much shaped by attitude, this interesting finding has led to a further step of enquiry in which the reasons for this discrepancy are explored. A qualitative research method is designed and employed to reveal how education level affects intergenerational attitudes and behaviour. The next chapter (Chapter 6) will illustrate how intergenerational attitudes diverge among Turkish women.

CHAPTER 6: EDUCATION AND INTERGENERATIONAL NORMATIVE ATTITUDES

6.1 Introduction

The findings of the GLAS dataset showed that normative filial affiliations are very high among Turkish women and that lower normative affiliation does not necessarily affect intergenerational transfers. This finding was also valid for education level, and no correlation was found between higher education level and transfers even though education level was influential on the normative attitudes. For this reason, as a further step I wanted to investigate by means of semi-structured interviews why there is a gap between normative attitudes and behaviour. As education was a prominent variable that affects normative attitude but does not affect behaviour, it was selected as the anchor variable. In addition to the statistical analysis conducted with the GLAS dataset, the national level data also indicated education level as an important variable that influences normative attitudes towards filial obligations. For that reason, educated (university level and above) and less educated (high school and less) subjects were selected for semi-structured interviews. In this respect, this chapter addresses the following question: "How does education level affect intergenerational normative attitudes of older Turkish mothers and their adult daughters?"

In doing so, the chapter reveals the reasons behind this attitudinal and behavioural gap. The interviews were used to explore this discrepancy by comparing and contrasting the attitudes and behaviours of educated and less educated women. As a first step, I explain why and in what way educated (university and above) people have lower levels of normative affiliations compared to their less educated (high school and less) counterparts. The findings show that less educated women (high school and less) and educated women (higher education and above) differ regarding their normative affiliations in terms of life aspirations, attitudes towards care work and domestic work, and other divergent push and pull factors. On the other hand, older educated and less educated mothers had different attitudes about the value and gender of children and views on care homes. Looking at the filial attitudes of these women, discrepancy between the felt and normative obligations among educated women emerges as an important finding, which might be due to parental

expectations and emerging parental needs.

6.2 Education Level and Normative Attitudes

Education is a variable that is frequently used in gerontological studies to look at the association between normative attitudes and educational levels (Silverstein, Gans, &Yang, 2006). Education level is mainly an indicator of class status and lower class families are more likely to indicate stronger affiliation towards family norms due to their need to be self-reliant (Connidis, 2001). In this study, I make the same assumption as the GLAS dataset (2007) and Turkish Family Structure Survey (TFSS, 2011), which had similar findings.

The figure below shows the theoretical framework used for the relationship between education and intergenerational solidarity. The model I use in this study assumes that education level affects transfers either through structural factors or by influencing attitudes towards filial responsibilities.

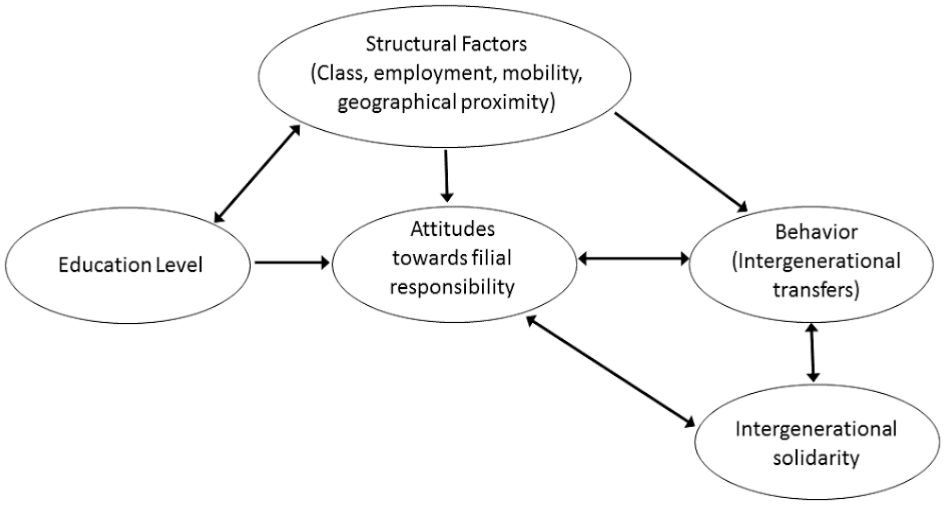


Figure 15 Education and Intergenerational Solidarity

6.3 Variance in Intergenerational Normative Attitudes among Educated and Less Educated Adult Women

The objective of the semi-structured interviews was to reveal different motivations between the educated and less educated adult women/daughters. In the process of quest for attitudinal differences, 5 themes emerged as diverse attitudes between educated and less educated adult daughters. These 5 diverse attitudinal themes are “life aspirations”, “attitudes towards care work”, “attitudes towards domestic labour”, “pull factors” and “push factors”. As may be inferred from the table below, less educated adult women have more family-oriented life aspirations whereas educated adult women would like to pursue an individualistic life, which may constitute an obstacle for traditional intergenerational obligations. Moreover, less educated adult women regard care work as a duty that comes with the intergenerational obligations while for the educated adult women caring for older people requires special skills and should be done by professional staff, which again stands as an obstacle to upward intergenerational transfers. Finally, less educated adult women perceive domestic labour and thus practical help as part of the intergenerational norms (as in the case of care work) and domestic work is part of their identity as a housewife. On the other hand, educated adult women regard domestic labour as a burden and a burden that can be performed by anyone and it is not necessarily a part of the intergenerational norms.

In the following section, all these emerging themes will be discussed, with excerpts from the semi-structured interviews conducted with adult women.

Table 20 Motivational Differences between Adult Women.

Adult Daughters	**Educated**	**Less educated**
Life aspirations	More individualistic	More familistic
Care work	Mostly seen as professional occupation	Mostly seen as part of intergenerational solidarity
Domestic labour	Mostly regarded as drudgery	Mostly regarded as part of intergenerational solidarity and a tool for self-identification
Pull factors	More emphasis on affection and positive sentiments	More emphasis on religion and religious obligations
Push factors	Mostly conscience	Mostly social disapproval

6.3.1 Life Aspirations

One of the most common themes identified among educated adult women was the expression of independent and individual life aspirations. Individualism and self-interest were the main concepts that emerged from the interviews that were conducted with the educated women. They envisage a different type of lifestyle compared with those who are less educated. For instance, for educated women, career and independence are a priority and these aspirations constitute a challenge for intergenerational responsibilities.

A 35-year-old lawyer, who is single and working fulltime at a private company, indicated that her education life had led her to follow a career path that is incompatible with physical work. She thinks her personal contribution to the world and to her life can be achieved by using her professional skills. This individualistic element prioritises personal interests and goals in life.

> "You know I have different expectations from life. I have studied this far and I believe I can further contribute to the world through my own job and career rather than doing manual work. I cannot imagine myself sitting at home and physically taking care of my parents. Of course I can spend time with them, help them with stuff or give money to them. But giving personal care is something different. It is a hard manual work, not everyone can do it" (Y.S. 35).

Another participant, a married graduate student in architecture, stated that she wanted to travel around the world and thinks her priorities are really important. For her, individualism is particularly important and she believes people should pursue their own unique desires. However, she is hesitant about reconciling her parental duties and personal life.

> "I love travelling and I have been to many places and quite a few countries in the world. I also travel for my job a lot. I would like to see more and travel all around the world. I do not know how it would go along with my ageing parents" (L.B. 31).

On the other hand, when less educated women were asked about their life goals, a settled

and a happy family life emerged as the common theme. Familism and family solidarity prevail over personal interests. Ş.T. is a 43-year-old woman who works in civil service. She is a high-school graduate. When asked about where family stands in her life, she replied:

> "At primary school they taught us that family was the keystone of the society. I would make fun of the expression as a child and make jokes about family being a stone literally [she laughs]. But as I am an adult now, I can see how important family is, how it is actually the keystone of the society" (Ş.T. 43).

In another case, R.D., who is a single 40-year-old adult daughter, when asked what made her happy in life, replied:

> "I do not need much to be happy actually. What I have is enough to make me happy. I have a great family; I am so lucky. Even though my parents are sick, it just makes me happy to see them smile. I love my sister and I adore my nephew He is very smart and starting university this year. What else can I ask for?" (R.D. 40).

6.3.2 Care Work

Another theme that emerged as a diverse attitude between the educated and less educated adult women is recognition of care work as a distinct occupation. As professionals themselves, educated adult women believe that care work is a hard task that requires certain skills. Since they are not equipped with the necessary skills to care for an older person, they think a professional person who is trained should be doing the job.

This 38-year-old woman, an economist, stated that care work was a distinct type of work that requires a certain set of skills.

> "Long-term care is hard work. It requires certain skills and training; I do not think everybody is capable of doing that. I know people get trained for this. Even lifting my mother is a big issue for us. The carers have techniques for that" (A.L. 38).

In another case, the woman is aware of the challenges that illness might cause and she thinks professional help is a better option for proper care of the parent. She foresees a supervisory role for herself in the care of the parent rather than being the primary caregiver.

> "This really depends on the level of sickness. They (children) surely should financially and emotionally support them in every level of sickness. However, if they should hire a nurse, they should closely monitor their situation, and show their emotional support every day" (D.M. 29).

Another example is as follows:

> "I cannot imagine myself sitting at home and physically taking care of my parents. Of course I can spend time with them, help them with stuff or give money to them. But giving personal care is something different. It is a hard manual work, not everyone can do it" (Y.S. 35).

On the other hand, most of the less educated counterparts did not offer a definite opinion about care work. When they were asked, they were happy to do the physical care work for their parents. For them, it was another chore that had to be done.

In one of the cases, the adult daughter (M.N. 32) is a high-school graduate; she works part-time at a shopping mall, in a clothing store. She is single and lives with her parents. Her mother (Y.N. 67) has diabetes and needs regular injections throughout the day. The disease has affected her legs and feet so she has difficulty walking and doing house chores. When the daughter talks about her daily routines, she talks about the injections she (M.N) gives her mother, giving her a bath and performing all the other care activities. For her, care work commitment is another item on the list and she arranges her working hours according to her mother's needs.

> "My mother has diabetes and she needs regular insulin injections. She is really scared to give herself shots so unless I really have to be away, I do the shots. I do not mind doing them. I am happy to help her. It is no burden, just another job I have to do daily" (M.N. 32).

Similarly, this daughter-in-law sees care as a part of the intergenerational obligations that come with marriage and takes pride in the care work as a way of self-identification and locating her role in the marriage union.

> "As a daughter in-law, it is my duty to take care of my mother-in-law. I knew what I was getting into when I got married, that is part of the deal. It is not that I have to do it but also I am proud to take care of the house and my mother-in-law" (Z.T. 36).

6.3.3 Domestic Labour

Another subject that educated and less educated adult women did not converge on was their concept of domestic labour. The educated sample regards daily domestic labour as a means to an end that has no benevolent value, whereas less educated women regards serving older people as a way of showing respect and gratitude. For that reason, educated adult women resort to outsourcing the practical help activities by hiring domestic helpers and caretakers because, for them, manual work is a waste of time and they prefer to spend quality time with their mothers. On the other hand, less educated housewives prefer taking on the responsibility for practical help activities including care. They see it as their duty, as a part of marriage and intergenerational obligations.

This 50-year-old woman, a professor at a university, stated that she preferred spending more interactive time with her mother instead of doing "time-wasting" chores.

> "I prefer spending more quality time with my mother. I like engaging in conversations, shopping together, doing other activities. Cooking or cleaning is a waste of time. Anyone can do it. So why should I be bothered with that. I even can't do my own cleaning at home let alone doing my mother's" (S.H. 50).

On the other hand, this daughter and a daughter-in-law talked about their obligations to their mother/mother-in-law and claimed that they took pride in doing the housework and care work which is a part of the intergenerational duty.

> "Of course I will serve my mother. That is my duty as a daughter. Who

> else can do it any better than I can? A good daughter should always take care of their parents in every single way" (F.Ç. 34).

> "As a daughter-in-law, it is my duty to take care of my mother-in-law. I knew what I was getting into when I got married, that is part of the deal. It is not that I have to do it but also I am proud to take care of the house and my mother-in-law" (Z.T. 36).

Similarly, a young daughter-in-law, who has primary school education, expressed strong opinions about her duties as a daughter-in-law:

> "It is my duty to do the housework and it is not appropriate for an older woman to perform housework when youngsters are around" (M.A. 33).

In this case, less educated women regard housework and taking care of older people as a way of consolidating their status and increasing their self-worth as a respectful, caring human being, which is a value appreciated in the family context. Certainly, there could be other factors that influence the views of these adult women, such as financial restrictions, inadequate time due to work, mobility, etc. However, the objective is to point out how normative attitudes vary among women from different educational backgrounds.

6.3.4 Pull Factors

Another distinction that reveals itself as the discrepancy between educated and less educated women is the motivations of "religion" and "affection". When the subjects were asked about the reasons for intergenerational transfers, less educated adult/older women had a tendency to give religious references for such behaviour. God (Allah) and the holy book (Koran) constituted the basis of religious tradition of filial piety. On the other hand, educated women stressed the role of affection and love for intergenerational support and exchange. For them, intergenerational transfers can be made out of personal will and affection.

Turkey is a predominantly Muslim country in which religion plays a big role in determining social life. According to Islam, total respect and sympathy should be shown to older parents because they put a great deal of effort into bringing them up. However,

regardless of the parents' earlier investments or attitude towards their own children, Islam requires mercy and respect for older people since parents are the ones who brought them up.

> "And your Lord has decreed that you not worship except Him, and to parents, good treatment. Whether one or both of them reach old age [while] with you, say not to them [so much as] 'uff' [i.e., an expression of irritation or disapproval] and do not repel them but speak to them a noble word. And lower to them the wing of humility out of mercy and say: 'My Lord! Have mercy upon them as they brought me up [when I was] small" (Koran 17:23-24].

In some of the interviews, people mentioned religion and stated that Allah (God) would not like people who do not take care of their older parents.

> "How can I not take care of my mother? It is not acceptable before God" (H.G. 60).

> "God knows what we do; we can run away from our responsibilities, but we cannot run away from God. We will have to give account of everything we have done and have not done in the afterlife" (R.N. 54).

As it is clear from the quotations, fear of God and religion is also important in shaping attitudes towards responsibilities to older people. However, since religious and cultural norms are highly blended, it is difficult to come up with an argument about the prevalence of one over the other. However, the interviews show evidence about the significance of religion as a motivation.

Affectual solidarity is described as the type and degree of positive sentiments and feelings that are held about family members, and the degree of reciprocity of these sentiments (Bengtson & Roberts 1991). Previous research shows that positive sentiments and reciprocation of these sentiments are positively correlated with intergenerational exchanges (Katz, Gur-Yaish, & Lowenstein, 2010). In this context, love and affection were articulated more specifically by the educated adult women in contrast to the religious connotation mentioned by the less educated adult women.

> "Even though sometimes we have arguments with my mother, I still love her. How can I not? She is my mother" (L.P. 41).

> "We have a very strong bond with my mom; I think we can overcome any difficulty if we pair up" (A.L. 38).

6.3.5 Push Factors

Another motive for intergenerational obligation that varied among educated and less educated women was the discrepancy between social disapproval and conscience. Educated women mentioned conscience as a motivation for intergenerational obligations whereas the risk of social disapproval was articulated more frequently by the less educated women. For the less educated women, social pressure from their environment is much more important whereas for the educated women self-judgement was more prevalent.

The strength of normative obligations revealed itself at two different levels. At the individual level, "conscience" emerged as evidence of personal guilt. In some of the interviews, the interviewees brought up the term "conscience" and said that their conscience would not let their older parents be neglected. They argued that it was a matter of personal responsibility to take care of the older parents and that no one could be obliged to take care of their parents against their will.

> "Children should take care of their older parents if they have conscience, no other person can force them" (Ş.Ö. 38).

> "I think it is all about conscience, not religion. I get upset and restless if something happens to them" (K.D. 30).

While conscience was the main push factor for educated adult women, social pressure was more prevalent among less educated women. Since neglecting intergenerational responsibilities is socially disapproved of, women with less education were seriously concerned about social pressure. Here again the individualistic characteristic of educated women may be observed. Educated women care less about the opinion of the society and

focus primarily on their own judgement whereas less educated women rely on normative social rules as a reference point for intergenerational behaviour. Another factor that pushes people for intergenerational transfers at the societal level is disapproval by the society. The social discrimination that an adult child might face as a result of neglecting his/her older parents, especially when there is a need for personal care, brings immense pressure to bear, regardless of the felt obligation and affectual sentiments. In that respect, it can be argued that social pressure is another push factor for intergenerational transfers. One of the interviewees, when asked what would happen if she were to not take care of her older mother in need, replied:

> "Not taking care of your mother? I cannot even imagine such a thing. She is my mom, how can I not take care of her and besides what would everyone say?" (M.N. 32).

The quotation above shows that the interviewee is very much concerned about the opinions of others and the shame of not taking care of your parent outweighs other motivations. The shame and disapproval of society reveal the importance of norms at the societal level. This cultural disapproval concerning elderly care can be better understood by looking at the views held on care homes in Turkey.

Table 21 Attitudinal Differences between Older Women.

Older Women	**Educated**	**Less educated**
Value of children	Social/Psychological network at old age	Financial/Practical/Care network in old age
Gender of children	Equal treatment and expectations	Son favouritism
Views on care homes	Sympathetic	Biased

6.3.6 Value of Children

As far as the different perceptions of the educated and less educated older women are concerned, value of children and expectations of them emerge as the main theme of disparity. Educated older women or mothers regard their children as providing a social and psychological support network whereas less educated older mothers regard their

children as future investments for practical and financial help. This disparity is very similar to the historical change which has taken place in the perception of children in Turkey. Before moving on to the interviews, it is appropriate to talk about the historical change in the value of children to point out the similarities in perceptions.

The VOC (Value of Children) Survey (1978-2002) clearly presented the changing attitudes of parents towards their own children over time (In Nauck & Klaus, 2008). With the shift from agricultural societies to the industrial societies, children have lost their significance as manpower that contributes to the household economy. Studies show that the meaning attributed to a child has changed radically from having an economic value to offering psychological and social value. A study by Cigdem Kagitcibasi (1982a, 1982b) has suggested three different dimensions of the value of children: psychological, social and economic. According to her, psychological and economic dimensions are very important in explaining fertility behaviour in Turkey. Especially in rural areas, children are crucial investments against future risks such as unemployment, illness and old age, as social security and social services are very limited. However, according to the study by Nauck and Klaus (2008), financial and instrumental help expectations of daughters and sons have decreased over time and the psychological and social aspects of bearing children have begun to prevail. This distinction can also be observed among the older interviewees.

The interviews show that there is a considerable difference between the expectations of educated and less educated older women. Less educated women have stronger beliefs about the normative obligations regardless of their age whereas educated women have fewer expectations of their children. An illiterate older woman replies, when she is asked if her children should take care of their parents when they are old and dependent:

> "Why do we give birth to children? Why do we call them sons and daughters? Did I give birth to them in vain? I brought them up in the middle of scarcity and tried to provide everything, rocked the cradle all night long on top of all the housework. What a shame on them if they do not take care of us!" (D.A. 83).

On the other hand, interviews with educated women clearly indicate less filial

expectations of their children. One of the respondents, a university professor, stated the following about intergenerational responsibility.

> "I do not think there is an obligation for children to take care of their older parents. I have two adult daughters and I live with them. But if I had a chance, I would live in a separate household. It is hard to get along when everybody has their own life" (S.H. 50).

6.3.7 Gender of Children

As it is stated above, less educated women are more likely to cling to the traditional norms of filial obligations. This situation reveals itself in the case of "son favouritism". This can be explained as the favouring of the male children over female children which leads to downward transfers flowing mainly to the sons and upward transfers being expected from the daughters (Cong & Silverstein, 2014). In the Turkish context, less educated women are more likely to adopt traditional patterns of gender discrimination against their own children and favour their sons over their daughters. On the other hand, educated older women treat their children equally and have similar expectations of both genders. This situation undoubtedly affects the relationship between older mothers and adult daughters.

None of the educated older women mentioned or stated treating their daughters and sons differently. On the other hand, there were cases of less educated older women who favoured their sons over their daughters. This mother confirms not giving money to her daughters, offering the traditional custom as an excuse:

> "I would lie if I said I give money to my daughters. I just give money to my sons. You know, it is not common in our culture to give money to daughters. Maybe it is wrong but what can you do? This is our custom; it has always been like this" (T.B. 68).

However, there are also cases where women are forced to follow the traditional patterns of son favouritism. One of the cases in the interviews illustrates this situation perfectly. This 60-year-old woman migrated to Ankara years ago and has 4 children, of whom 3 are sons. She secretly gives money to her daughter, who is financially in a bad situation.

And obviously, the sons and the husband are not happy with her giving money to the daughter. The respondent's family had also been discriminating against her and that is why she is trying not to differentiate between her own children.

> "I also give her (daughter) money secretly from my husband. My eldest son gets jealous. But I tell him that he has no right to say that because I also bought him a house, furniture and a car. They are both my children; how can I discriminate? Last year they sold some property of my father's. And they did not give me anything, not even a pair of socks. My mom also discriminates against her children but look, in the end; it is me who looks after her in the hospital" (H.D. 60).

6.3.8 Views on Care Homes

As mentioned in Chapter 1, there is immense prejudice against care homes and nursing homes in Turkey (Mottram & Hortaçsu, 2000). For that reason, another interview theme that emerged, showing the different views of educated and less educated older women, was attitudes towards preferences for living arrangements in old age. Educated older women were relatively keener on going into a nursing home or receiving services at home when they become sick and dependent in old age. On the other hand, less educated women stated that they would prefer to be taken care of by their children when they are ill and dependent. Going into a nursing home is considered taboo.

This older participant, who is illiterate and has 2 daughters and 3 sons, talks about her later life or dependent living arrangement:

> "Heaven forbid being really sick and tied to bed. But if it ever happens, I would like my children to take care of me. They are the only people whom I can trust. I am sure they can take care of me better than anyone else" (T.B. 68).

When she is asked if going to a nursing home is an option, she immediately responds negatively:

> "No, no, that is not an option. I do not even want to think about going there. And my children would not let me go there anyway. God prevent me from going there and help those who happened to go there. We see every day on television what happens to the older people in the nursing homes. It is terrible" (H.D. 60).

As far as the educated respondents are concerned, nursing home was among the considerable options.

> "If I get old and become dependent, I would prefer to be taken care of in a nursing home. I would not want to be a burden for my daughters" (S.H. 50).

6.4 Discrepancy between Felt Obligation and Normative Obligation among Educated Women

In the previous section, normative filial obligations of the educated and less educated women were discussed. Previous research shows that there is a positive correlation between the level of normative commitment to filial responsibilities and intergenerational support (Katz, Gur-Yaish& Lowenstein, 2010; Silverstein, Gans, &Yang, 2006). However, the literature suggests that normative and felt obligations might not necessarily match (Stein et al., 1998). In other words, an adult child's general normative thoughts might not apply when it comes to their own parental responsibilities. This discrepancy between normative and felt behaviour is more evident among women than men. The literature suggests that women have higher levels of felt obligation towards their parents than their male counterparts (Stein et al., 1998).

As, according to the GLAS dataset (2007) and Turkish Family Structure Survey (2011), normative attitudes varied with education level, but did not affect the way intergenerational exchanges operate, this dichotomy raised a question about the felt and normative obligations of educated women. When the interviews were carefully analysed it was evident that educated adult women who stated lower normative obligations showed high felt obligations due to emerging parental need or parental expectations.

First, being in the hospital, coming to the clinic or polyclinic with their older mothers,

caring for them or looking after them is a clear sign of felt obligation that surfaced as a result of parental need. Nevertheless, in order to depict the effect of parental need, it is appropriate to look at the interviews. The 50-year-old university professor rejects the idea of being obliged to take care of older parents and states that she would live in a separate household from her daughters if she had a chance and yet she takes care of her own older mother (S.H. 50). Having idealised a very individualistic intergenerational relationship, this adult woman stays with her older mother during the latter's hospitalisation. Even though the older mother lives in a separate household, S.H. is the main person responsible for her mother. This situation is a good example of how individual circumstances may lead to a gap between normative and felt obligations, so causing ambivalence at the individual level.

In the second case, parental expectations shape the felt normative obligations. When I talked to the educated adult woman (L.P. 41), she stated that she was struggling with care but had no other choice. Her mother wanted her to take care of her. When the mother was interviewed, she was very firm about her daughter's obligations. This adult university graduate daughter, who has worked for 15 years as a sales representative in a medical company, quit her job because her mother had a stroke and half of her body was paralysed. At first, they hired someone to take care of her but the mother did not want her. Then L.P. quit her job and started taking care of her mother full-time. When she was asked about the filial obligations an adult child has towards their older parents, she replied:

> "I think everybody has a responsibility to take care of their parents. They are the ones who brought us up. But there should be a balance with the sacrifice and your own life".
> *Researcher*: But you quit your job to take care of your mother. Is it a balanced sacrifice?
> "I did not question it at the time. I had to quit my job and I did. Sometimes I think about it and really miss having a job... That makes me resentful of my mother sometimes but it is okay, I do not try to question it anymore" (L.P.41).

This adult woman has mixed feelings about what she has been doing and what she would have liked to have done instead. She says she is resentful sometimes but then in the next moment she says she no longer questions it. Having mixed feelings about her thoughts and obligations, she is clearly ambivalent. Torn between her mother's expectations and her personal life, she chooses to commit to her mother's expectations. This case shows us how parental expectations can create a gap between normative and felt obligations and can cause ambivalence at the individual level.

6.5 Conclusion

The interviews show that educated and less educated adult women have different perspectives of filial norms in terms of their life aspirations, attitudes towards care work and domestic work, and other push and pull factors that are described above. Moreover, educated older women and less educated older women diverged in terms of their views on the value of the children, gender of the children and their attitudes towards care homes. Even though the educated adult women indicate lower levels of normative filial obligations, emerging parental need or the expectations of the older mother are very influential in shaping their felt obligations. This causes ambivalence at the individual level and it is appropriate to have a look at ambivalence management strategies, both at the individual and institutional level.

CHAPTER 7: MANAGING INTERGENERATIONAL AMBIVALENCE: RECONCILING NORMS AND RESOURCES

7.1 Introduction

In the previous chapter (Chapter 6), divergent normative attitudes of educated and less educated women were introduced. In presenting the divergent attitudes of these women, a gap between normative and felt filial obligations of educated adult women was observed. This discrepancy stemmed mainly from emerging parental need or from parental expectations and attitudes. The co-existence of these two conflicting feelings or attitudes produces ambivalence at the individual level among educated adult women. Having examined attitudinal differences in the previous chapter, this chapter attempts to look at the intergenerational behaviour (upwards) patterns and identify any similarities and differences between the ambivalence management strategies of adult women with different normative obligations and educational levels.

The findings of this chapter show that educated adult women are more likely to resort to innovative ways of intergenerational transfers as opposed to conventional ways of intergenerational exchanges that traditional solidarity requires. Mutual consensus between the educated mother and educated adult daughter leads to emancipation, whereas the expectations of the less educated mother may leave the educated daughter in captivation. By agreeing with traditional values of filial responsibilities, less educated adult and elderly women reproduce conventional ways of intergenerational exchange.

In order to assess the management strategies of each group of women, the "intergenerational ambivalence" approach, which was introduced in the previous chapter, will be used. For this reason, it is appropriate to further explain intergenerational ambivalence management strategies as a next step.

7.2 Intergenerational Ambivalence and Management Strategies

As demonstrated in the previous chapter, there is a discrepancy between the attitudes and behaviours of educated women in Turkey, which is validated by the GLAS data and by the semi-structured interviews. This discrepancy is a clear sign of intergenerational ambivalence. Intergenerational ambivalence is described as "contradictions in relationships between parents and adult offspring that cannot be reconciled" (Lüscher& Pillemer, 1998). This ambivalence is evident in two dimensions: first at the societal level, which stems from the contradictory social norms, status and roles. And second, at the individual level, which creates emotional, cognitional and motivational contradictions and conflicts (Lüscher & Pillemer, 1998). In this chapter, I will look at the ambivalence experienced at both levels.

7.3 Management Strategies at the Individual Level

As introduced in the previous chapter, the inconsistency between the attitudes and behaviour of the educated women stems from the discrepancy between normative and felt obligations. The reason for this is the attitudinal gap between less educated elderly mothers and their educated daughters. In other words, this situation arises from a lack of consensual solidarity. Even though the educated adult daughter believes that it is not her full responsibility to take care of her elderly mother, the mother's expectations shape the daughter's felt obligation, both at the personal and institutional level. This lack of mutual agreement on filial obligations or consensual solidarity leads to different management strategies, which are described below.

Table 22 Ambivalence Management Strategies by Education Level.

Ambivalence Management Strategies	**Educated Adult Daughter**	**Less Educated Adult Daughter**
Educated Elderly Mother	Emancipation	-
Less Educated Elderly Mother	Captivation	Solidarity

7.3.1 Emancipation

As the table above shows, management of the ambivalent intergenerational relationships can differ according to the education level of each of the parties. In the first case, where both parties are educated, *emancipation* is the resolution whereby the educated elderly daughter and the elderly mother share the same unconventional type of intergenerational norms and come up with innovative resolutions to their relationships. This type of resolution is classified as "renegotiation", based on common values, norms and behaviour.

In this type of renegotiation, both parties are content with the management strategies they have developed. There are two types of strategies that are identified for emancipation: 1. Substitution of functional solidarity with financial solidarity, and 2. Prioritisation of associational solidarity over functional solidarity.

7.3.1.1 Substitution of Functional Solidarity with Financial Solidarity

In this type of management strategy, both parties (adult daughters and elderly mothers) agree to engage external services for care and daily activities instead of the daughters' physically helping their elderly mothers. By outsourcing the help, they substitute functional solidarity with financial solidarity. However, it is important to keep in mind that the availability of such financial resources is also important in making such arrangements.

An example of this type of emancipation is Mrs A.T. (66) and her daughter A.L. (38). A.T. is a retired lawyer and she has cancer. She becomes frail during chemotherapy and needs full-time assistance. Her husband has passed away and she lives alone. Her daughter A.L. is an economist and married with 1 child (12). She has a part-time consultancy and a flexible work schedule. When I asked her if she was able to attend to her mother when necessary, she responded positively. However, they both agreed that they would hire a caregiver for the mother when she needed help. In talking to them both, their consensual decision to come up with an alternative resolution for the problem

emerged clearly. When I asked A.L. how she would react if her mother wanted her to take care of her physically, she replied:

> "Even though I love my mom, it would be very difficult for me to take care of her physically. It really helps that she is not demanding in that way. Of course I want to do things for her but I believe what I can do best for her is to pay for a caregiver and do other social activities with her when she feels better. I am not saying that I am a fair-weather friend but I think our relationship is better this way" (A.L. 38).

Similarly, when the mother was asked why she did not turn to her daughter to provide care when she needed it, consistency was observed:

> "I would not really ask my daughter for this drudgery work. She is young and she has [a] family. I would prefer her to engage in more sociable and fun activities with her family and friends instead of getting stuck here with me. I think it is a great generosity to pay for my caregiver, God blesses her. She does not have to cook for me or give my medication every day. That would make me feel bad. I am just happy to have her by my side when she visits me every other day" (A.T. 66).

As can be inferred from the quotations above, there is mutual normative consensus on the filial obligations. Their perspective makes it easy to renegotiate the rules of the game and they find other ways to make intergenerational transfers. These innovative resolutions lead to emancipation and the contentment of both parties.

7.3.1.2 Prioritisation of Associational Solidarity over Functional Solidarity

In the previous section, it was demonstrated that one type of functional solidarity is replaced by another type (e.g. care and practical help with financial help). In this section, replacement of functional solidarity with associational solidarity will be discussed.

In the interviews, most of the educated adult women stated that they would prefer to spend quality time with their ageing parents instead of providing them with practical help with house chores.

As presented in the previous chapter regarding the attitudinal differences to domestic labour, this 50-year-old university professor stated that she preferred spending more interactive time with her mother instead of doing “time-wasting” chores.

> “I prefer spending more quality time with my mother. I like engaging in conversations, shopping together, doing other activities. Cooking or cleaning is a waste of time. Anyone can do it. So why should I be bothered with that? I even can't do my own cleaning at home let alone doing my mother's” (S.H. 50).

It is clear from the quotations and examples that there is mutual consensus on the manner in which the needs of the elderly mothers can be met. Substitution of practical help or care help with contact frequency and spending quality time are a priority for the educated mothers and daughters. Finding innovative ways for intergenerational transfers diminishes the risk of ambivalence; here is a good example to demonstrate it:

> “I used to help my mother with the housework myself. However, we disagreed all the time. She was not happy with what I did and we used to argue all the time about silly things. Now I hire a maid for her and she does all the cleaning for her. She still complains to her about the cleaning and stuff but at least we do not argue that much anymore. We also have more time to spend together, we go for walks and shopping when I have spare time. I think she enjoys it more now as well” (A.B. 38).

In this case, the respondent tells how their relationship was affected when she changed the type of help she was providing. For this reason, it can be argued that consensual innovations can facilitate affection and increase affectual solidarity among elderly parents and their adult children.

7.3.2 Solidarity

In the second case, both parties are less educated and their management strategy is described as solidarity, whereby both parties agree on the traditional filial obligations

and keep to them. In this type of relationship, the conventional institution of intergenerational piety is reproduced on a consensual basis.

This case is represented by a dyad of a mother, a primary-school graduate, and the daughter, a high-school graduate who works in the civil service. In this particular case, both felt high normative obligations for filial obligations. The mother had had surgery in the past and needed special attention and care. The daughter had care leave from her work and looked after her mother for 2 months. When she was asked if they ever thought of hiring a caregiver instead of her having to leave work, the answer was clear:

> "No, we have never thought about it for a second, it is out of question in our family. If I won't take care of my mother when she is sick, when will I? I am happy to do it even if it takes me away from my job" (Ş.T. 43).

Similarly, the mother was very clear about the normative obligations of adult children and her daughter in particular:

> "I would never want to be taken care of by a stranger. I think it is the duty of children to take care of their elderly mothers and fathers. It would be inappropriate if my daughter did not take care of me" (A.R. 71).

This dyad was a deliberate choice as an example because the daughter was working full-time. In this way, the bias of having a full-time job vs. being unemployed is eliminated. Both parties have similar views on intergenerational normative responsibilities and they were happy with the care arrangements they had made in the past.

7.3.3 Captivation

In the case of captivation, in which the adult daughter is educated and the mother is less educated, it is the adult daughter who meets the expectations of the traditional intergenerational relationship. This reproduction of the traditional roles may cause resentment and anger. This type of intergenerational ambivalence arises from conflicting norms and values between two generations.

In this particular case, this scenario was well illustrated. The previously mentioned adult university graduate daughter who quit her job and started taking care of her mother full-time is a good example (L.P. 41).

> "I really did not want to leave my job but I had no other choice. She rejected all three caregivers we found for her. She wanted to me to take care of her. At first I refused and tried to explain it to my mother. But she would not understand. Then I quit my job. Of course I am happy to take care of my mother but sometimes I resent my mother for making me sit at home the whole day. I miss having a professional life. This resentment sometimes affects our relationship but I try to make it up to her quickly when I argue with her or when I yell at her. I feel that sometimes she feels guilty for making me quit my job but she never admits that because there is no way back" (L.P. 41).

In this particular case, it is obvious that this woman is experiencing ambivalence, having mixed feelings about her care role. However, she chooses to perform her traditional role as a care-giver. Mother and daughter manage to preserve a conventional relationship, but the situation affects the quality of their relationship.

7.3.4 Atomisation

Another type of ambivalence management strategy is atomisation, whereby a conflictual separation occurs due to divergent norms and values. The elderly parent and the adult child cease any exchanges, transfers or even contact. However, the percentage of atomised relationships is very low. According to the Turkish Family Structure Survey (TFSS, 2011) only 1.3% of the elderly subjects stated that they did not see their children at all. This atomised relationship might occur as a result of various factors.

In the interviews there was only one case in which the hospitalised elderly women did not have any support from her children. She stated that her daughters in-law did not like her and they were against seeing her. They manipulated their husbands (her sons) and convinced them not to see their mothers. This woman was very upset about the fact that her sons were not visiting her, and not supporting and taking care of her. She said:

> "It is really tough when your own kids turn their back to you. But God knows, they will understand when their kids do the same thing to them" (H.R. 69).

This elderly woman was a primary school graduate and her 3 sons were all university graduates. However, it is not possible to make a distinction between education levels since there only one case was noted and atomised relationships can occur in every socio-economic background although the prevalence is low in Turkish society.

7.4 Management Strategies at the Institutional Level: Reconciling Filial Obligations and Structural/Temporal Resources

As discussed in the previous section, the difference between normative and felt obligations is already causing ambivalence among educated women. However, even if they share the same norms and values, which leads to either solidarity or emancipation, there is no guarantee that the resources necessary for such emancipation or reproduction will be acquired. The lack of temporal and financial resources, coupled with structural inabilities, may compromise such solidarity and emancipation for women regardless of their educational level. The norms for intergenerational solidarity might still be valid but the structural conditions may militate against achieving it.

In this section, I will discuss the management and reconciliation strategies women employ when resources are scarce and the conditions not conducive to consensual transfer. These conflicting roles are observed at the institutional level when the adult womanish employed, has children of her own or multiple elderly to take care of, or when she is sick herself or lives far from her elderly parents.

7.4.1 Employment

Employment status is one of the factors that lead to intergenerational ambivalence within society. Especially for women, being a carer and breadwinner comprises two conflicting roles. In order to see the effects of being employed on the management of intergenerational ambivalences, 2 types of working adult women (educated and less educated) with intergenerational obligations were selected. Regardless of their normative attitudes, both types of women stated that they were experiencing conflict between their

work and caring responsibilities. As far as the management strategies are concerned, in this study different resources were employed by different adult women from different educational backgrounds. With regard to educated adult women, since they had more financial resources they preferred to hire professional services for care. On the other hand, less educated women relied more on their extended social networks.

As set out in the previous chapter, there was conflict between normative and felt obligations among educated women, which creates an ambivalent situation. Feeling the obligation to cater for their elderly parents and having conflicting moral norms, women experience ambivalence. On the other hand, limited temporal resources may add to this ambivalence. In particular, adult women who work full-time may not have the time to help their elderly parents in periods of need. In order to reconcile work and felt obligations, working women resort to other types of intergenerational transfers rather than the conventional forms. To be more precise, the traditional forms of care-giving or provision of practical help by women morph into providing financial transfers or outsourcing these transfers.

In the first case, I use the example of emancipation, discussed in section 7.3.1. In this dyad, the mother, A.T., is a 66-year-old retired lawyer, and the daughter, A.L., is a 38-year-old economist who works full-time. She hired a caregiver for her mother. Since she was working full-time they both agreed that it was the best solution; the traditional care-giving role was taken on by a total stranger thorough mutual consensus.

In the other case, the adult daughter (M.N. 32) is a high-school graduate, and works part-time at a shopping mall, in a clothing store. She is single and lives with her parents. Her two older brothers are married with children and live in another part of the city. Her mother (Y.N. 67) has diabetes and needs regular daily injections. The disease has affected her legs and feet so she has difficulty walking and doing housework. The father is retired but still working in a turnery. When I asked M.N. about her responsibilities regarding her mother, she replied:

> "She can't really stand up all the time so she cannot do housework or cooking. I am doing the cooking all the time. She needs to eat regularly and properly as she is diabetic. I always try to cook healthy stuff. She

also needs regular injections. I do most of them but if she is alone at home, she does them. She does not quite like the feeling of self-injection [she giggles]. She can go to the toilet by herself but I need to shower her."

Researcher: What about your father? And your brothers?

"My father is working but he helps with small things such as setting the table, taking my mom to the balcony, etc. My brothers visit at the weekend but they are not really involved in the care part. I am mainly the person in charge."

Researcher: Would you manage it all if you were working full time?

"No, not really, that is why I am working part-time. I arrange my shifts according to my mother. If she needed more attention, I would just leave work and take care of her. Once my workplace took us to the city of Denizli (approximately 466 kilometres away from Ankara) for a small trip to a textile factory where our clothes are manufactured. My older sister-in-law stayed with my mother while I was gone. Even though it was a 2-day trip, I was really worried about my mother; I just wanted to come back to Ankara quickly. It is just uncomfortable to leave with her someone else."

Researcher: What if you want to get married? What would happen then? Who would take care of your mother?

"I got engaged once but it did not work and we broke up. Actually my mother was the reason why we broke up. I told him I would actively look after my mother after getting married. And he was not really happy. We started arguing about everything and then we broke up... I think the man to marry should respect that. They (men) have mothers too, they should be sympathetic. I do not have any plans to get married at the moment but who knows, a decent man can change my mind [she giggles]. Jokes aside, I need someone who will accept me and my mother. Otherwise, I do not think it would work" (M.N. 32).

It is also appropriate to refer to the previous example, in which the adult daughter (Ş.T. 43) had been given leave from her workplace in the past. In this dyad, the mother had completed primary school and the daughter was a high-school graduate. The adult daughter was working full-time in the civil service. The mother had surgery in the past

and needed special attention and care. The daughter had taken leave from her work and had been taking care of her mother for 2 months. Hiring a caregiver was out of question.

As the examples show clearly, the women all find it difficult to reconcile their jobs with their parental responsibilities. However, the educated women choose financial replacement whereas the less educated ones find a solution with part-time employment or annual leave. Undoubtedly, these renegotiations can be regarded as a trade-off between time and money. However, educated women, especially, prefer to be financially independent and keep working. On the other hand, necessity might be the reason why women chose to work in the first place. Whatever the underlying motivation, it is clear that the lack of temporal resources among working women pushes them to modify their filial obligations towards their elderly parents.

7.4.2 Sandwich Generation

As part of a sandwich generation, women provide care facilities both to younger and older generations who are in need, which intensifies the workload for women, and the provision of transfers by them. Even though women are more likely to receive financial and practical help transfers in old age, the time and care women in middle age provide for children and the elderly is beyond reciprocity. Bringing up children demands a great deal of time and energy, and when combined with domestic chores inside the house plus practical help and care provided to the elderly, the intensity of the labour is indisputable. Adult women of the sandwich generation are usually torn between the two roles they assume. Even when normative filial obligations are consensual between the two parties (elderly mother–adult daughter), the adult daughters experience ambivalence towards their duties as a mother and a daughter, regardless of their education level. In this section, I will present the institutional/ structural ambivalence that both educated and less educated women experience.

The first case is a 38-year-old adult woman, Ş.Ö. who has 2 small dependent children aged 5 and 9. She had her mother, F.Y. (73) hospitalised during the previous two months due to multiple chronic diseases and infection. This adult daughter is a university graduate in management and although she had worked before, she is not currently

working and is a housewife full-time. When asked if it was difficult to take care of the kids and her mother at the same time, she replied:

> "Yes, it has been harder than I thought. I have 2 young children, one of them is 5 and the other one is 9. The little one is a boy and he is very hyperactive. I need to watch him all the time to make sure he does not hurt himself. The older one is a girl and she is in the third grade. I wake up early in the morning to prepare breakfast for her and I take her to school. Then I leave my son with my mother-in-law to go to the hospital. I stay with my mom in the hospital the whole day and then collect my daughter from school and my son from my in-laws. Then I go home, try to cook something, play or study with the kids, deal with their fights and demands and so on. I get so tired in the evening that I do not remember falling asleep."
>
> *Researcher:* How about your husband? Doesn't he help you with your kids or house chores?
>
> "Not really, he works a lot and travels a lot; sometimes he does not even see the kids. But when he is home, he deals with them, helps with my daughter's homework or plays with my son. But this does not exceed a couple of days in a month because he either works till late at night or travels to other cities for work."
>
> *Researcher*: How does it make you feel, trying to manage everything?
>
> "It was okay before my mom fell ill. I was at home the whole day and I could deal with the house chores easily and I had time for myself. But now it is really tough, all these things I have to do. Sometimes I feel burnout but what can I do? I have to keep it together for my mom."
>
> *Researcher*: What about your siblings? (She has a brother living in Istanbul and a sister living in Germany.) Is there a way they can help with your mother?
>
> "Not really. My sister has young children that she has to take care of too, she cannot come all the way from Germany. And my brother is working really hard and it is not easy for him to get leave from the work place. Sometimes he comes at weekends and accompanies my mom for a couple of hours so that I can run my own errands."
>
> *Researcher*: What about your father?

“I don't know what I would do without my father. He is the one who stays with my mother at night and in the morning we change shifts and he goes home to sleep. “

Researcher: How long do you think you can go on like this?

“I do not know; I really do not know. As long as it takes I guess. I do not know how long my mother's condition will last. And I do not know how long my mother-in-law will be able to take care of my son. She has been very kind to offer her help to take care of my son but I know she has a difficult time with my son since she is very old and he is very hyperactive. I might have to put him in kindergarten or consider options for a caregiver for my mom. All these things have to be discussed but I really do not want to think about these things right now. All I am thinking is to save the day and juggle my responsibilities” (Ş.Ö. 38).

In another case, a 37-year-old adult woman (B. R.) is a secondary school graduate and married with 3 children. She struggles with the care of her disabled 72-year-old mother (C.S.)

Researcher: How long have you been taking care of your mother?

“She fell in the bathroom last March and broke her hips; since then. So I guess it has been one-and-a-half years.”

Researcher: Where do you take care of her?

“Normally I take care of her at her house; our houses are very close. But since she was admitted to hospital last week, I come here every day”

Researcher: What about your kids?

“I leave them with the neighbours when I come here. The oldest one goes to school and goes to the neighbour when she comes back from the school.”

Researcher: What about when you go to your mother's house?

“The two little ones come with me. The older one goes to school as I said and comes back to his grandmother's house. My husband comes there too, we usually eat there and come back home at night.”

Researcher: How do you feel about this routine?

“It is very tiring, you know. I have things to do at home and I also have to take care of mother at the same time. Sometimes I myself wonder how

I manage it all. Doing the housework of the two houses, taking care of the kids, cooking, cleaning, caring."

Researcher: What upsets you most about this routine?

"Sometimes I happen to go to my mother's house late because some kind of problem arises or I urgently need to do something at home. When I get to my parents' home, I find my mother not fed and her diaper unchanged. My mom tells me that she does not like the food that my father gives [her] and my father is incapable of changing a diaper. I feel very sad that she is dependent on me. God give me strength, I do not know what would happen to my mom and to my kids if something happens to me."

Researcher: Do you have any siblings who could help you with your mother's care?

"My older brother died in a traffic accident. His wife rarely calls my mother, that is it. My sister lives in Yozgat (approximately 220 kilometres from Ankara), but she also has children and some land to take care of. Sometimes she comes for a week or so but her husband does not let her stay more than that. "

Researcher: Would you consider putting your mother in a care home? Or get some professional help at home? Like a carer or a nurse?

"As much as I am desperate for help, I would not really think about it. I will keep going as much as I can. I do not know how long it will take. It is really hard at the moment but might get better once my kids become independent… If things get worse I would consider taking my mother back to our village in Yozgat. We have a lot of family members there who can help. My sister is also there. We will manage somehow; may God give us strength" (B.R. 37).

As is clear from these two cases, both women struggle with their duties as mothers, daughters and housewives. The multiple roles they assume are conflicting and ambivalence arises as a result. They are both torn apart between their responsibilities and the dilemma has captivated them. Even if they are not happy and are struggling with their circumstances, they keep providing conventional forms of care help both to their mothers and their children. In order to manage their situation, both use their extensive social network and resources. In the first case, the adult woman reaches out to her mother-in-law for babysitting, and in the second case, the adult woman relies on her neighbours to

take care of her children when she goes to the hospital. Even though they mentioned similar management strategies, the future options they considered were different. When asked if they would consider other options in the future, the first adult woman, who is a university graduate, said that she might find other ways of dealing with her multiple responsibilities, such as sending her child to a kindergarten, or hiring a caregiver. On the other hand, in the latter case, the adult woman who had secondary school education stated that she might use other social networks to support her and her mother.

7.4.3 Multiple Care-Giving

In the previous section, the ambivalence experienced as a result of taking care of young children and elderly parents is presented. In addition to taking care of people from multiple generations, women end up taking care of many people from the same generation. It is evident that women take care of several children at the same time, but they also care for many elderly simultaneously, which further intensifies the workload for them. In many cases, people have two ageing parents, and if the adult woman is married, this number doubles with the in-laws coming onto the scene. Moreover, in some cases women end up taking care of their elderly parents as well as their elderly grandparents due to increasing longevity. These multiple demands may cause burnout both physically and mentally.

In the first such case, a single daughter, R.D, takes care of both her parents. This 40-year-old woman is a high-school graduate and is not working. She lives with her elderly parents and a divorced sister with the sister's 18-year-old son. The mother has multiple chronic diseases and the father has Alzheimer's. The daughter says she does not mind coping with chronic diseases. She trained herself to measure blood pressure and blood sugar levels, and keeps track of the medication schedule. However, she says she had a difficult time when her father developed Alzheimer's. When he was diagnosed 5 years ago, she did not know anything about the disease.

> "It was hard before, when he was diagnosed 5 years ago. I did not know anything about the disease and managing my father was very difficult. I was taking care of him but I was really depressed at the same time. Then

> I got some professional psychological help and I got used to it. Things are easier now"
> *Researcher*: How about taking care of both of your parents?
> "I cannot say it is easy, it still gets depressing at times but I love them and that love keeps me going."
> *Researcher*: Does anyone help you with the care-giving?
> "My sister helps in the evenings when she comes from work. Also, look, my nephew (she points to him) helps us a lot with the care-giving activities. But he is starting university this year. I am not sure if he can help now as much as he used to before."
> *Researcher*: Would you consider any other options for care-giving? Such as a nursing home or a care-giver at home?
> "No not all, not as long as I and my sister are alive" (R.D. 40).

As can be observed from the case above, even though she struggled a great deal in the past with her parents' illnesses, she still chooses to keep to the traditional ways of intergenerational care-giving.

In another case, that of the adult daughter who is a 45-year-old gynaecologist (Y.M.), the elderly mother has dementia and the father is receiving chemotherapy for colon cancer. The adult daughter is married with a 14-year-old daughter but does not have any siblings.

> "We went through a real hard time when my mom was diagnosed with dementia. At first I started helping my father whenever I could and my father was somehow managing the situation even though he was having a hard time. But then he got sick and that was another shock for us. Then I was no longer able to support both of them and we decided to hire a caregiver. Now she (the caregiver) stays with them all the time, takes care of the house, cooks and follows their medication. And she also watches my mother as she needs constant supervision. She is off on Sundays so I try go on Sundays to help them out. I usually take my daughter with me because they are always happy to see their granddaughter."
> *Researcher*: Would you ever consider leaving work and taking care of them by yourself?

> "Even if I retired or left work, I do not think I could manage all by myself. As much as I love them, it is a very hard work. My grandmother lived until she was 93 and she was very sick when she died. My mother had suffered a lot and luckily my grandma died 2 years before she was diagnosed with dementia. If my grandma was to live longer, I would have to take care of the 3 of them. I do not think I could handle it physically, mentally or financially" (Y.M. 45).

As is clear from these two examples, both adult women experience ambivalence, but they chose different strategies for managing the care needs of their elderly parents. In the first case, multiple care-giving is taken on by the single daughter, who gets help from the divorced sister and her young brother. In other words, family network is the source of care for multiple care-giving whereas, in the second case, financial means emerge as a management strategy.

7.4.4 Ageing and Health Problems

In addition to coping with multiple care-taking burdens, the caregiver may also be in need of care. With increased longevity, it is very likely that different generations will live to old age at the same time. Since multiple chronic and acute diseases in old ages are inevitable, both generations may end up needing care. This situation may create ambivalence, especially for the next generation down the line.

One of the interviewees stated that she had to take care of her sick mother and stay with her as her attendant when she is hospitalised. However, she stated, she was sick herself and needed treatment and care. With all the caring responsibilities that she has, it is not possible to take care of herself.

> "It is really hard to take care of her; I am also diabetic. I have ovary cancer and I need to take chemotherapy but I become useless for 3 days if I get the medication. How can I leave my old mother for 3 days?" (H.G. 60).

In this particular case, the interviewee chose self-sacrifice rather than neglecting her elderly mother. Like her mother, she was not well educated and she shared the same

filial values as her mother. It is clear that the woman is experiencing ambivalence even though she wants to meet her mother's expectations. This example is particularly interesting because H.G. (60) has quite a wealthy family and they are financially able to hire a caregiver for her. However, it was a conscious choice on the part of the daughter to undertake the care work. This time ambivalence and captivation are created not because of conflicting norms, but because for structural reasons.

By contrast, it is appropriate to examine a similar case, in which the actors are educated. F.K. (85), an elderly woman without any children, was suffering from chronic diseases and was admitted to the geriatric unit, where accompanying attendants are compulsory during hospitalisation. The only relatives who could attend to her were her two siblings. The male sibling, Y.K. (71), was a full time lawyer and was unable to take care of her physically. The only other option was her graduate younger sister N.K., who is 76 years old. She, too, had chronic diseases, such as hypertension, and had difficulty walking. In this case, she was not able to attend to her older sister F.K. either. Having the financial means, the family chose to hire a private caregiver. If they had not had the financial means, the situation would have become ambivalent for them. Since there was mutual agreement on the innovative ways of intergenerational transfers, and financial means implement the arrangements, ambivalence was avoided. However, if this family had not had the means to hire a caregiver, the health condition of the younger sister (76) would not have allowed her to take care of the older sister and ambivalence would have been inevitable.

Again, financial solutions emerge as the management strategy of educated people when potential caregivers have poor health. Juggling the resources and pushing the limits provided the resolution that the less educated adult woman came up with.

7.4.5 Geographical Proximity and Mobility

7.4.5.1 Substitution of Functional Help with Financial Help

Another obstacle for women in complying with filial obligations is high mobility, especially among educated women. In order to pursue better employment opportunities, educated women move cities, even countries and continents. Even when adult women reside close to their elderly parents, the nature of their work may require constant

travelling in a fast-changing globalised world. In any case, as geographical distance increases between adult children and their older parent, the conventional way of providing care and help becomes almost impossible to implement.

As far as the interviews are concerned, there were two occasions on which the interviewees stated that downward financial transfers were coming mostly from children who live abroad. B.D. (47), who was taking care of her mother at the hospital, stated that she had two brothers in Germany who were sending their mother money regularly. In another case, A.K. (51), who lives in England, stated that she was not physically able to look after her parents when they were sick; her siblings in Turkey were the ones responsible for care. However, she did provide mostly financial support.

> "I really wanted to be with my parents when they were sick but I have been working here in England for 25 years now and I have a daughter who goes to school. How could I go and leave everything? Luckily my siblings took care of them and I made sure they are doing okay financially. I constantly sent money to them for care expenditures; that was all I could do from here" (A.K. 51).

In this respect, it may be argued that low geographical proximity might increase the likelihood of financial transfers as compensation for practical help. However, it is important to keep in mind that availability of resources plays an important role. Since the adult children mentioned above are living abroad, they are more likely to have a better income compared with their siblings at home.

7.4.5.2 New Modes of Communication for Associational Solidarity

Contact frequency is one of the indicators of associational solidarity, which was discussed in Chapter 5. This intergenerational interaction traditionally takes place by way of face-to-face visits or other means of communication, such as phone calls. However, with recent developments in communication technologies, the variety of and forms of communications media have expanded. Smart phones, video calls and social media are becoming increasingly prevalent for worldwide communication. Even though the Internet is not yet automatically associated with older people, these technologies have in

fact become very popular among the elderly in communicating with their adult children who live far away or abroad. In this way, one type of associational solidarity is replaced by another type.

One of the interviewees stated that they used Skype for video calls. She said that she was very happy to see her children and especially her grandchildren through video calling. She stated that she had purposely installed the Internet at home to see her family, who live in another city.

> "When you speak with your children and grandchildren via video calls it is like having them right beside you. You see them, you talk to them instantaneously. The only difference is you cannot touch them. Having video calls are largely fulfilling my longing for my children and grandchildren living away" (N.T. 63).

Moreover, social media tools are becoming increasingly important in replacing contact. One of the interviewees, N.Ö. (44), who has been living in England for the last 20 years, stated that their main mode of communication with her elderly mother was Facebook. Facebook messages, status updates and comments have replaced their need for a phone or video call. Similarly, another interviewee, K.O. (30), who studies in England, stated that Facebook had completely changed their way of communication and contact frequency.

> "Before my mom started using Facebook, we would make video calls by Skype. However, since she created an account, the number of video calls has diminished. Even though she was the one who would generally push me for a Skype call, this time I started to worry why she was not calling me. I would think there was something wrong or she was sick etc. When I asked her why she is not calling me as frequently as she used to or why she was not getting online on Skype, she told me that there was no need for it since she was able to track down what I had been doing from Facebook status updates, check-ins and activities. I was quite surprised to see how my mother's behaviour changed about our contact" (K.O. 30).

This is a good example of demonstrating the changing frequency and mode of intergenerational contact. The transformation through different Internet and social media tools can be considered intergenerational renegotiation in itself, while this type of associational solidarity facilitates affectional solidarity.

7.5 Conclusion

The findings show that even though educated women are more prone to ambivalence and captivation at the personal level, at the institutional level, all women are likely to experience ambivalence due to structural reasons. Regarding the rising level of women's education, increasing personal and institutional ambivalence is expected in Turkish society in the near future. Despite the growing resources and available technologies, the lack of mutual agreement between the generations might constitute an obstacle for harmonious intergenerational relationships. On the other hand, even when there is mutual consensus and strong intergenerational commitment, the structural and demographic obstacles present a formidable challenge to the conventional practice of intergenerational obligations. Even though the attitudinal differences play a major role in determining the differences between intergenerational transfers among educated and uneducated adult women, availability of resources linked to education level is also important in determining the type of upward transfers. Educated women are more likely to be employed compared to uneducated women and subsequently are more likely to have a higher and stable income, which enables upward financial transfers. (This was also confirmed in the previous descriptive chapters). Having a full-time job also means reduced available time for educated women. To compensate for this, educated women replace their labour with money whereas uneducated women are more likely to offer practical help since that is their best asset, assuming they also have to fulfil normative obligations towards their own parents. Regardless of the education level of the women, different roles at the institutional level push women into ambivalence. Although some women are able to manage their intergenerational responsibilities, others are not, due to lack of resources. For this reason, institutional support in terms of social policies is crucial for the minimisation of ambivalence among adult women.

CHAPTER 8: INTERGENERATIONAL RELATIONSHIPS REVISITED

8.1 Introduction

The quest to examine intergenerational relationships is an attempt to disclose the relationship between structure and function, a long-debated issue in family sociology literature. There is no doubt that demographic changes, structural changes within the family and cultural changes affect the dynamics between the structure and function of the family. This study also attempted to reveal the relationship between the structure and function of the Turkish family, using the Intergenerational Solidarity Approach. The objective of this study was to reveal the state of intergenerational solidarity within Turkish society and how this relationship is affected by different socio-demographic variables. Starting with quantitative analysis, the results have led to further qualitative enquiry, and moved on to mixed methodology as the most effective method to reach the research objectives.

The results of the research confirmed that intergenerational solidarity still prevails among Turkish families even though the pressure of certain demographic changes, structural changes and normative shifts has started to be felt in Turkish society. However, neither the Intergenerational Solidarity Approach, nor Intergenerational Ambivalence Theory was able to capture the essence of intergenerational relationships in Turkey. For this reason, in this chapter I first discuss the findings of the analysis in the light of the intergenerational solidarity and ambivalence theories. Next, I introduce a model for intergenerational relationships specific to the Turkish context. I believe it is appropriate to engage in this because, as the research findings confirm, Turkey has a unique family structure and cultural context for intergenerational relationships.

8.2 Solidarity Concept in Turkish Society

As noted previously in the literature review (Chapter 2), intergenerational solidarity approach does not have a long history. Mainly conceptualised by Western academics, solidarity refers to mutual support among generations. However, in the Turkish context solidarity means being together no matter what, and people perceive solidarity as a

unilateral obligation to parents. This solidarity might be identified with filial piety, which is the norm in Asian countries. For that reason, conceptualisation of solidarity is very important.

The reason that the term solidarity is not used in the Eastern context is that intergenerational transfers are based on obligations. As the results of the analysis show, obligations and compulsory transfers do not reflect solidarity and cannot be evaluated within the solidarity context. Even though Turkish society includes some obligatory elements culturally, the analysis in Chapter 6 shows that other motivations such as conscience and positive feelings contribute to intergenerational solidarity. For that reason, the solidarity concept is intertwined with the concept of filial piety concept within the Turkish concept. In this respect, intergenerational solidarity in Turkey should also include intergenerational ambivalence approach since this approach reflects and links the gap between norms and behaviour.

In the methodology section, the employment of solidarity theory was justified by the practicality and suitability of the approach for the family structure of Turkish society. Revealing the volume and determinants of solidarity dimensions was the ultimate goal. However, the conceptualisation of solidarity approach did not fit exactly with Turkish family structure.

The solidarity approach argues that higher normative solidarity leads to higher exchanges of intergenerational support. Moreover, better mutual relationships are supposed to build a base for intergenerational support exchanges. However, in Turkish society the cultural norms are so strong that the quality of the relationships does not affect the functional exchanges. Because respect for the older people and serving them at all costs is so ingrained in the culture that negative feelings for them have little effect on the way their children or children-in-law treat them. As noted in Chapter 7, the adult children still served their older parents even when they were not getting along well. In this respect, the low level of affectual solidarity did not diminish the frequency or quality of the intergenerational functional help, namely, practical help.

In the Turkish context, the solidarity approach is useful for visualising the volume and frequency of intergenerational exchanges. Financial flows, practical help provision and

the much discussed care help are the main issues of intergenerational debate, and the solidarity approach makes these elements clear and visible for researchers and policy makers.

In the economic debates of intergenerational solidarity, it is not known how far frequency of contact (associational solidarity) is relevant for solidarity among generations. The solidarity approach suggests that frequent contact leads to better relationships and vice versa. However, the interviews revealed that contact frequency and geographical proximity do not always lead to better relationships. The intensity of the relationships could sometimes affect the quality of the relationship negatively, and thus the potential exchanges for solidarity.

Solidarity as a concept in intergenerational relationships had been criticised for reflecting a positive normative standpoint. It is true that this perspective underestimates the conflictual aspects of the relationships; however, harmony and congruence are the desired and basic assumptions and characteristics in family studies.

8.3 Ambivalence Concept within Turkish Society

Having said that the solidarity approach does not capture the effect of norms on intergenerational relationships, it may be argued that ambivalence theory better explains the pressures that younger generations experience regarding their responsibilities to older generations. However, the focus on dilemmas in the ambivalence approach lacks the positive dimensions of intergenerational relationships and fails to depict interactions of intergenerational solidarity. Moreover, ambivalence theory focuses more on the emotional and normative dimensions, while underestimating the functional part of the relationship.

As set out, neither solidarity nor ambivalence theories are comprehensive enough to explain the complexity of intergenerational relationships in Turkey. In this respect, I present here an individual effort to conceptualise intergenerational relationships in Turkey. Moreover, the finding that there is a discrepancy between attitude and behaviour has drawn attention to the importance of distinguishing between normative obligations and felt obligations.

Ambivalence is an important concept especially in conservative and traditional cultures like Turkish society. Solidarity theory underestimates the cultural pressures on people and establishes a theory based on free will, which is characteristic of individualistic countries. For traditional countries in which filial piety is the norm in intergenerational relationships, ambivalence theory enables a better understanding of the dilemmas and ambivalences adult children and older parents experience. In addition, for ambivalence theory, intergenerational transfers are not mere tools for solidarity, but also management strategies for ambivalence.

On the other hand, intergenerational solidarity theory reveals the functional side of intergenerational relationships. Moreover, the positive attitude of the solidarity theory, which is attractive to policy makers, makes the theory more appealing to take on.

As Chapter 6 shows, education level makes a difference in the attitudinal norms of Turkish women. Even though quantitative analysis was able to capture this disparity, the quantitative method itself is not capable of demonstrating how these attitudinal differences between women from different educational backgrounds vary. Hence, in order to understand normative attitudes or solidarity better, qualitative enquiry should be employed. On the other hand, the findings of Chapter 7 showed that different education levels lead to different emotions and therefore produce different solutions for managing intergenerational ambivalence. The complex relationship between norms, transfers and emotions is more evident in the intergenerational ambivalence approach. Moreover, there is more emphasis on the consensuality characteristic of the intergenerational norms in ambivalence approach, which is also one of the solidarity dimensions.

Following the analysis of all the strengths and weaknesses of both approaches for the Turkish context (solidarity and ambivalence), it is evident that neither is capable of fully addressing intergenerational relationships. Therefore, a unique approach that combines both approaches is suggested in the following section. One may argue that attempts to incorporate ambivalence approach into solidarity approach already exist in the literature. It is true that ambivalence is added to the solidarity approach as a 7^{th} dimension. However, this research project proposes to integrate ambivalence approach into solidarity not as the7^{th} dimension, but rather as a combination of the two approaches. Additionally,

the proposed approach not introduces not only conceptual innovations, but also methodological contributions.

8.4 A New Model for Intergenerational Relationships in Turkey

As shown in Chapter 2, Turkey has a unique cultural context and it is difficult to categorise Turkey with any of the countries regarding intergenerational regimes. This makes it important to examine the dynamics of its intergenerational relationships. Introducing a model for this is a challenging and complicated task and consequently it is appropriate to establish different dimensions of intergenerational relationships.

Assessing intergenerational solidarity involves two main dimensions, namely norms and behaviour. Even though norms and attitudes are focal determinants of behaviour, people might come across situations in which they are compelled to act against their own will. However, the solidarity approach assumes that attitude and behaviour are in harmony. For that reason, both behaviour and attitude should be included as separate measures for assessing intergenerational relationships.

In the proposed model, there are four types of relationships, namely solidarity, emancipation, captivation and atomisation. Although these four dimensions are described as management strategies, they can also be called types of relationships. In this thesis, Chapter 6 shows how different socio-demographic variables (in this case education) can affect intergenerational attitudes from a solidarity point of view. In Chapter 7, by examining both attitude and behaviour, different types of relationships are identified. In order to see how these relationships are affected, it is appropriate to analyse each type separately. First, it is convenient to identify the types of relationships according to this model and then determine how different socio-demographic and structural characteristics of the generations, their expectations and needs, and the welfare context (public transfers) affect these different types of intergenerational relationships. In other words, the role of each independent variable should be explored for each pillar of relationship.

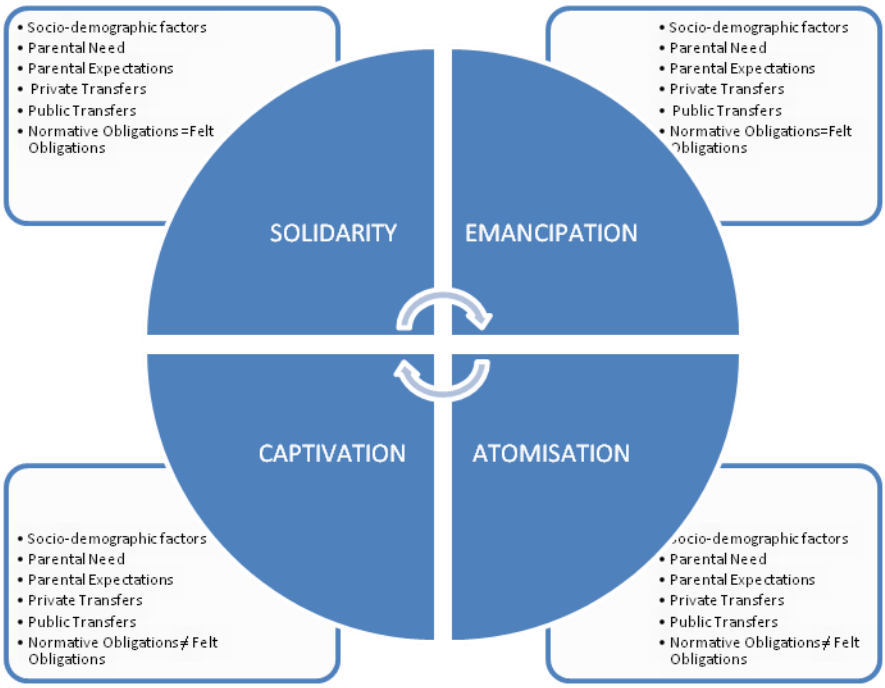


Figure 16 Proposed Intergenerational Relationship Model.

Below are the independent variables that proposed for inclusion in the model:

Table 12 Independent Variables for Proposed Model.

Independent Variables
Age
Gender
Marital Status
Household Size
Number of Children
Income Level
Education Level
Employment Status
Health Status
Place of Residence
Geographical Proximity
Parental Need
Public Transfers
Private Transfers
Normative Obligations
Felt Obligations
Reciprocity

Table 13 Dependent Variables for Proposed Model.

Dependent Variables
Solidarity
Emancipation
Captivation
Atomisation

It is appropriate first to establish the tangible and non-tangible aspects of intergenerational relationships. ***Tangible aspects*** consist of the functional and associational exchanges between generations. On the other hand, ***non-tangible aspects*** consist of norms, and the consistency of these norms among different generations, cultural patterns, positive and negative emotions, their co-existence and mutuality. All these tangible and non-tangible aspects of intergenerational solidarity should be incorporated into the model.

In examining intergenerational solidarity, the ten ***socio-demographic factors***; age, gender, marital status, income level, education level, employment status, place of residence, health status, household size, and number of children should be taken into account along with geographical proximity. There is not much literature focusing in particular on the intergenerational relationships and comparing urban and rural context. Research on place of residence sheds light not only on intergenerational transfers, but also on intergenerational norms. Intergenerational norms and exchanges play a big part in solidarity among generations. However, it is also important to point out what affects, facilitates and undermines solidarity.

It is important to distinguish between public and private transfers when talking about intergenerational transfers. There is a body of literature and research on the effects of public and private transfers on each other. Even though the crowding-out hypothesis is disproved in some countries, the quest for such an implication should continue in different cultural and economic settings. As for Turkey, a country with a fast-growing economy, meagre old-age benefits and strong filial norms, the relationship between public and private intergenerational transfers should be explored. As the GLAS data indicates that financial transfers are correlated with income level, the effect of public transfers becomes a significant issue to consider for intergenerational relationships.

Traditionally, filial piety and respect for older people have dominated societal norms regarding intergenerational attitudes. These attitudes have also played a role in shaping intergenerational transfers and have helped to maintain intergenerational solidarity. Even though reciprocity is regarded as a characteristic of intergenerational exchanges, when norms are stronger, reciprocity might not be the motivation for such exchange. It is thus important to reveal the factors that affect reciprocity.

Parental need and parental expectation are important factors that affect intergenerational transfers regarding functional solidarity dimensions. Health status, especially, is a very significant parameter for parental need. However, in the Turkish context, normative obligations might exceed needs-based transfers and what was a need can become a necessity in the cultural context.

8.5 Methodological Approach

Juggling filial responsibilities, other roles and household tasks is an important part of intergenerational transfers. Moreover, developing strategies for managing multiple roles is a significant part of intergenerational solidarity. A quantitative enquiry is therefore not sufficient to capture the essence of intergenerational relationships. To this end, qualitative enquiry should be incorporated into the model. The use of mixed methodology makes it possible to capture all aspects of intergenerational relationships. The solidarity studies in the literature focus mainly on the quantity of the exchanges, however, qualitative enquiry is significant to depict the quality of the relationships and how they affect the types of exchanges between generations.

In the model, normative and felt obligations should also be included. As seen from the findings from the interviews, participants struggle to distinguish between their own felt obligations and normative obligations. In the design of the interview questions or questionnaires, vignettes and hypothetical questions can be used. A vignette in psychological and sociological research presents a hypothetical situation to which research participants respond and thereby reveal their perceptions, values, social norms or impressions of events. When the hypothetical situation is applied to their own

case, the responses may differ from the generic answer they might otherwise give to the same question. Moreover, vignettes provide the opportunity to control for different environments and conditions. Multiple Segment Factorial Vignettes are commonly used for researching intergenerational norms and attitudes (Ganong & Coleman, 2005). These vignettes are elaborated forms of factorial survey methods (Rossi & Nock, 1982). Vignettes are useful for testing several hypotheses regarding type and quality of relationships and motivations for relationships, let alone socio-demographic factors that affect intergenerational behaviour (Ganong & Coleman, 2010). Moreover, vignettes might be useful for making a distinction between felt and normative obligations.

The Summary of the Chapters

This attempt to explore intergenerational solidarity within Turkish society begins with the demographic and structural characteristics of the society in Chapter 1. Moving on, Chapter 2 sets out the concepts of intergenerational solidarity and intergenerational ambivalence and examines the national and international literature on intergenerational relationships. Chapter 3 describes the methodology employed for the investigation of intergenerational relationships within Turkish society.

Chapter 4 analyses intergenerational transfers within Turkish society and highlights socio-economic and demographic factors for functional transfers between generations. Subsequently, Chapter 5 investigates the normative attitudes held by different generations and how are affected by the variables employed in Chapter 4. On the assumption that attitude and behaviour are highly correlated, the following hypotheses were developed:

- Respondents with high normative attitudes regarding filial responsibilities should also provide higher levels of financial help to their kin.
- Respondents with high normative attitudes regarding filial responsibilities should also provide higher levels of practical help to their kin.
- Respondents with high normative attitudes regarding filial responsibilities should also provide higher levels of care help to their kin.

However, comparing the results of both analyses, a mismatch between the findings was observed. One of the main inconsistencies is the disparity between education levels. As the normative inclination of highly educated respondents on filial responsibilities was significantly different from the less educated, I was expecting similar results for behaviour. More specifically, I was expecting significant variation for education regarding the provision of financial help, practical help and care help, whereas having a higher education made a difference only in regard to financial help. However, having a higher education had no impact on the provision of practical help and care help. For this reason, as a further step, I wanted to investigate why there was a gap between normative attitudes and behaviour regarding education, which led to the qualitative enquiry. I built

my qualitative question from the quantitative part of the study, which reflects the development characteristic of mixed methodology. Education was selected as the anchor variable, both for the analysis results from the GLAS dataset and the dramatic change in education levels in Turkey. To this end, educated (university level and above) and less educated (high school and less) subjects were selected for comparative analysis, Semi-structured interviews were conducted to find an answer to the question: "Why is there a discrepancy between normative attitudes and behaviours among Turkish adult children?" In order to answer it, practical help and care help were targeted as the focus of enquiry, both in terms of practice and attitudes towards the performance of these tasks. However, in order to understand why there was discrepancy it was important to understand in what ways the attitudes of women diverged. For that reason, the question was: "How does education level affect intergenerational normative attitudes of older Turkish mothers and their adult daughters?" Because practical help and care help are undertaken mainly by women, only women were selected as the sample group for the semi-structured interviews. In Chapter 6, in an attempt to answer the question, I constructed categories of disagreement both for adult daughters and older mothers. The findings show that less educated women (high school and less) and educated women (higher education and above) differ regarding their normative affiliations in terms of life aspirations, attitudes towards care work and domestic work, and other divergent push and pull factors. On the other hand, older educated and less educated mothers had divergent attitudes about the value and gender of children and views on care homes.

However, although the adult daughters presented diverse attitudes, the respondents nevertheless provided their older mothers with practical and care help. This finding shows the discrepancy between normative and felt obligations that adult women display. As a next step, I wanted to find out how they managed this discrepancy between felt and normative obligations. Here ambivalence theory was helpful in explaining management strategies. Next, Chapter 7 shows that educated adult women are more likely to resort to innovative ways of intergenerational transfers as opposed to conventional ways of intergenerational exchanges the traditional contract requires. Mutual consensus between the educated mother and educated adult daughter leads to emancipation whereas the expectations of the less educated mother may leave the educated daughter in captivation. By agreeing on the traditional values of filial responsibilities, less educated adult and elderly women reproduce the conventional ways of intergenerational exchange.

By employing both the Intergenerational Solidarity Approach and Intergenerational Ambivalence Theory, the analyses made in Chapters 4, 5, 6 and 7 revealed that none of the approaches is sufficient to fully understand and explain intergenerational relationships in Turkey. In Chapter 8, a new model is suggested which combines intergenerational solidarity and ambivalence approaches as well as different methodologies.

a) Intergenerational Transfers

In Chapter 4, intergenerational exchanges and the socio-demographic factors that affect intergenerational transfers are presented. These findings are discussed below in the light of existing literature. The multivariate analysis has revealed both similar and divergent results compared to the international literature.

i) Financial Transfers

When the volume of financial transfers is examined, it is observed that the respondents state that they provide more help than they give (29.6% vs. 8.9%). These ratios indicate that one third of the participants provide financial assistance to a friend or relative, which is a high number. However, it is difficult to determine the direction of financial transfers because age group did not reveal any significant variation among the respondents in terms of either providing or receiving financial help.

When the results of the bivariate logistic regression analysis are considered, having at least one child, education level, employment status and income level are statistically significant variables in the provision of financial help. The findings are mainly in line with the literature. As indicated in the literature review, income level is a good predictor of financial transfers. As far as downward transfers are concerned, parental wealth is a good marker. Previous research shows that availability of resources increases the likelihood and the amount of financial transfers (Albertini, Kohli &Vogel, 2007; Berry, 2008; McGarry, 1999; Semyonov & Lewin-Epstein, 2001). Similarly, education level is an important predictor of financial exchanges but it is important to keep in mind that there is high collinearity between the variables of income and education. Moreover, employment status is highly correlated with income level. As the last statistically significant factor, number of children emerges in the study and the literature suggests that a greater number of children increases the probability of financial exchanges in later

life (Litwin, 2004). This finding is important in terms of economic and fiscal policies. Since the availability of financial resources facilitates intergenerational transfers, increased pensions or cash benefits might facilitate intergenerational solidarity at the micro level.

Moreover, financial transfers do not also operate according to the quality of the relationships. Gender, namely son favouritism, as a factor affects the downward financial transfers. Especially in the Eastern regions of Turkey, inheritance is passed on mainly to male offspring. Although the focus of this research is on inter-vivos transfers, the interviews also revealed that the belief that the bloodline continues with the son serves to increase financial investments made for sons compared to investments for daughters. In these particular cultures, women are seen as commodities that are passed on to the husband's family. As consequence, gender emerges as an important factor that affects financial transfers.

ii) Practical Help Transfers

Looking at the volume of practical help that is provided (20.8%) and received (17.4%), it can be argued that intergenerational practical help is quite high within Turkish society. However, compared to a previous study conducted in Ankara, these percentages are much lower. In the sample of Öztop and Telsiz (2001), 63.4% of the older parents stated receiving help with shopping, 33.9% reported receiving practical help with house chores and 29% stated that they received help with transportation. Even though the sample of Öztop and Telsiz is restricted to the city of Ankara, it can be argued that there is a general tendency towards a decrease in the amount of practical help provided to older parents.

As far as the bivariate analysis is concerned, age group, household size, income level and place of residence showed statistically significant results. The fact that the older age group is more likely to receive practical help confirms the argument that intergenerational practical help transfers operate upwards regardless of cultural context (Kohli, 1999; Rossi & Rossi, 1990). Moreover, the study shows that the older cohort is less likely to provide practical help compared to their younger counterparts. According to the German Ageing Survey, adult children provide more help to their older parents with daily chores, shopping, transportation, etc. (Kohli, 1999). The OASIS study findings confirm that practical help flows mainly from adult children to their older parents in the countries of

Norway, Germany, England, Spain and Israel (Daatland & Lowenstein, 2005). Similarly, previous research in Turkey has demonstrated that adult children provide more practical help to their older parents rather than vice versa (Öztop & Telsiz, 2001). The SHARE data shows that time transfers operate downwards (Attias-Donfut, Ogg & Wolff, 2005).

In this study, place of residence proved to be an important factor affecting intergenerational exchanges, which is also in line with previous studies conducted in Turkey. Rural respondents are more likely than their urban counterparts to provide practical help. This finding is in line with previous studies conducted in Turkey (Aykan & Wolf, 2000; Şener et al., 2008). Moreover, as noted in the literature review (Chapter 2), the same pattern applies in family-oriented cultures (Nauck & Suckow, 2006). However, since the population of Turkey is highly urbanised compared to other traditional countries, this finding is especially significant in terms of intergenerational solidarity. This finding also confirms the argument that urbanisation leads to change both in behaviour and attitudes regarding intergenerational relationships.

Providing practical help and income level are positively associated. This finding is interesting because the relationship between providing practical help and income level is vague. However, the interviews revealed that women with higher income tend to hire domestic help and cleaners for their older parents, which might explain the significant relationship between income level and practical help. In other words, by providing cleaners and domestic help to their older parents, the adult children might see themselves as providing practical help to their older parents.

iii) Care Transfers

Compared to practical help and financial help the volume of care transfers is low. The percentage of respondents who stated that they provided care is 9% and receiving care is reported by 3.7% of the participants. However, care provision emerges in time of need and the question posed in the Global Ageing Survey does not address a needs-based perspective. In other words, the question about intergenerational care asks the respondent if he or she received care help within the last 6 months in GLAS questionnaire. If the question had been arranged on the basis of need, the response rate would have been much higher. As a matter of fact, the study conducted by Öztop and Telsiz (2001) poses the question based on need and the response rate is much higher (96.6%).

When the results of the multivariate analysis are considered for provision of care, gender, household size and number of children reveal statistically significant results. Women have 70% higher odds of providing care to a friend or relative compared to men. This finding confirms the traditional caring role of women. Long-term care has always been a woman's task both in the Western world and in traditional societies of the East. The literature also suggests that women are more likely to be in charge of care facilities compared to men, which may be explained by the traditional gendered division of labour (Brandt et al., 2009; Eggebeen & Hogan, 1990; Finch 1989). In Turkey, the same tradition applies; daughters are more likely than sons to be in charge of personal care (Mottram & Hortaçsu, 2005b; Öztop & Telsiz, 2001). In this respect, the finding that women are more likely to provide care help is in line both with international and Turkish literature.

People living with others are four times more likely to provide care for them compared to people who are living alone. People with children have 70% lower odds of providing care to a relative or friend. As far as receiving care is concerned, age group and health status reveal significant results. As expected, older adults are almost 3.5 times more likely to receive care compared to their younger counterparts. Similarly, people who report good or fair health status have 65% lower odds of receiving care compared to poor health reporters. This finding confirms the needs-based perspective on intergenerational transfers.

iv) Normative Attitudes

Normative intergenerational beliefs and attitudes are important to study because beliefs about family values influence and shape social and public policies (Finch & Mason, 1993). Results both from the quantitative and qualitative analysis show that Turkish society still holds strong opinions about family responsibilities.

When the survey respondents were asked to what extent they agreed with parental responsibilities (It is the duty of a parent to do his/her best for his/her children even at the expense of ...), the vast majority of the respondents either agreed or strongly agreed

with the statement. Only 4% of the respondents strongly disagreed, disagreed or abstained.

When the respondents were asked to what extent they agreed with filial responsibilities (It is the duty of adults to provide for their parents in times of need later in their life), 82.9% agreed or strongly agreed. This percentage is still very high, however, compared to parental responsibilities; the percentage of agreeing with filial responsibilities is 13.1% lower. Similarly, to the previous dependent variable, 17.1% of the respondents reported strongly disagreeing, disagreeing and abstaining.

Even though there are many studies on the attitudes of individuals towards old age, the majority focuses on living arrangements and care-giving (Görgün-Baran et al., 2005; TFSS, 2011; The World of Elderly, 2006). However, these studies reflect only the individual living choices in old age. People are asked where they want to live when they grow old or by whom they want to be taken care of when they are old and dependent. These questions focus only on the older person's perspective and do not give adults the opportunity to reflect on what they want for their parents. On the other hand, the GLAS survey provides an opportunity to reflect the normative affiliations of people regardless of their own experiences.

Looking at the quantitative analysis it can be observed that there are certain factors that influence filial norms in society. First, when the effect of gender on intergenerational attitudes was examined, the results showed that women tended to agree with parental responsibilities more, whereas agreeing with filial responsibilities is not statistically significant for gender. Similarly, having a child is influential in agreeing with parental responsibilities, whereas this is not the case for filial responsibilities.

The most prominent variable that affects attitudes towards filial obligations is education. Both bivariate and multivariate analysis demonstrated that education level created a difference in respondents' answers for filial responsibilities. Those who have higher levels of education are less likely to agree with filial responsibilities compared to people with lower level of educational attainment. A similar tendency emerged for parental

responsibilities in which more educated people were less likely to agree with parental responsibilities compared to people with lower education. Likewise, the interviews revealed that educated and less educated women diverge in terms of intergenerational attitudes. Given the fact that the level of education has been increasing over the years, especially among women, an attitudinal shift is very likely in Turkish society. However, what is intriguing is not the attitudinal change but rather how this change is reflected in behaviour. Reflection of this attitude in behaviour is as problematic as not reflecting, in terms of intergenerational solidarity in Turkish society. Reflection of attitudinal change on behaviour, in other words, decreased sense of filial responsibility might undermine intergenerational solidarity. Moreover, mere attitudinal change not only undermines the relationship, but also puts pressure on younger generations. For that reason, a balance between attitude and behaviour should be supported by social policies.

Respondents living in rural areas voice stronger opinions about filial responsibilities than their urban counterparts. This finding is also in line with the previous literature. As noted in the literature review, the Turkish Family Structure Survey (TFSS, 2011) revealed similar results. 12% of people who live in urban areas stated that they would prefer going into a nursing home, whereas 6 % of people who live in rural areas replied similarly. The percentage of people who live in urban areas and stated a preference for living with their children is 28%. The rate is 43% in rural areas. Traditionally in Turkish society nursing homes have been a taboo subject, regarded as a threat to intergenerational solidarity. On the other hand, in certain Western contexts, nursing homes may be regarded as a medium for intergenerational solidarity because they serve as a safety valve, alleviating the pressure on families.

b) Policy Implications

Throughout the world, demographic and structural changes are putting pressure on the welfare state; this is also the case for Turkey. Increasing longevity and the need for long-term care is raising the costs of health and social care in the welfare state. Moreover, families are pooling extra sources for long-term care as the pressure mounts on them. Women, especially, become victims to this pressure as the main care-takers and care-givers within the family. If the state refrains from supporting the family, the accumulating pressure might undermine familial structure as well as functionality. The assumption that

families, women in particular, are able to cater to the needs of all generations is a misleading notion. In order to strengthen the intergenerational relationships, family and age-friendly policies should be put into practice. For further consolidation and reinforcement of intergenerational relationships and solidarity, the following recommendations might be taken into account:

Policies supporting work-life balance: The findings of this research show that adult children, daughters in particular, have difficulty in employing temporal resources for their older mothers/parents, especially when they also have small children to take care of. For this reason, expansion of *affordable/subsidised public nurseries/kindergartens* by the government might take the pressure off women. Moreover, *flexible working hours* and *options for part-time work* might enable women to manage their own time. Longer periods of *parental leave agreement* and *emergency/dependent care agreements* might be a solution for handling emergency situations. It is important to note that work-life-balance-friendly policies should apply to men as well as women.

Building long-term care capacity: Long-term care is one of the greatest challenges faced by the family. This research shows that especially educated and working women, in particular, experience ambivalence in their relationship with their mothers/parents when care work is in question. The clash of personal ideals, desires and societal and parental expectations place women in a difficult situation. To ease the pressure, the government might expand national and local care services for elderly. Since nursing homes are still seen as a last resort, *expansion of home-based care services* might be chosen over institutional care. Day services for personal care and daily living activities should be supported for those in need, along with assistance with transport and house chores where needed. Institutional care of high quality and with good services should also be available to those in need. *Day-care centres*, especially for older people with Alzheimer's disease and dementia, should also be offered as an alternative to boarding facilities.

c) Future Research

Intergenerational research has gained attention for the last couple of decades and there are still many under-researched subjects that need to be covered. Intergenerational

relationships account for one of the gap fields that require attention. Even though there is ample literature on intergenerational relationships in the Western context, the need for further research in the context of developing countries and emerging markets is evident. The literature review conducted in Chapter 2 points to the inadequacy of intergenerational research in Turkey. The main problem arises from a lack of interest in intergenerational issues and gerontological research. This results in a lack of good quality data capable of capturing every aspect of intergenerational relationships in the Turkish culture. The existing datasets (Turkish context) are cross-sectional and do not allow for longitudinal analysis regarding the changing intergenerational norms and behaviour over time. They are small in size and representativeness of the samples is problematic. In this respect, future studies should systematically collect large amounts of data and engage in longitudinal analysis. The collection of data should follow the structure suggested in this chapter, embracing all the characteristics of solidarity and ambivalence theories of intergenerational relationships. Association between each ambivalence management stratagem (Table 29) and socio-demographic and structural factors (Table 28) should be examined. Where possible, three generations should be included in this quest for understanding intergenerational relationships, given the extent of the interplay between these generations.

The quantitative studies should also be supported with qualitative studies focusing on intergenerational relationships because associations between variables do not reveal the essence and quality of the relationships. Qualitative data helps to step out of structured statistical models and provides opportunities for new fields of enquiry. In this research, the qualitative enquiry focused on women to reveal the essence of their relationship. However, intergenerational relationship between sons and fathers, daughters and fathers, and sons and mothers should also be studied in depth (including the in-laws). Qualitative research should also focus on three generations where possible to disentangle the intricate relationship between them.

Even though this study speaks of the target group as Turkish society, ethnic and cultural diversities within the country more widely should also be acknowledged and the focus of interest extended to different communities in Turkish society. Especially with the increasing influx of migrants/refugees from Syria, Iraq, Afghanistan and many African countries, Turkey is expanding in terms of cultural and ethnic diversity. For this reason,

future research should also aim to capture intergenerational relationships in a transnational context. Research studies should be designed to capture cultural and ethnic diversity and demographic dynamism within Turkish society. Since human relations are full of complexity and fluidity, the odds are great that there will always be a new area of interest regarding intergenerational relationships that requires investigation.

d) Conclusion

This doctoral thesis set out with the intention of investigating the state of intergenerational solidarity within Turkish society. As a widely used approach to intergenerational relationships, the Intergenerational Solidarity Approach (Bengtson & Roberts, 1991) was employed for the quantitative phase of the enquiry. However, an intergenerational solidarity approach failed to reveal the gap between normative and felt obligations that adult children have towards their older parents. Even though the Intergenerational Ambivalence Approach (Lüscher & Pillemer, 1998) was able to depict the ambivalences and dilemmas adult children experience, other dimensions of the relationships covered by the solidarity approach were missing. For that reason, this dissertation developed a new model, appropriate for the Turkish context. By combining solidarity and ambivalence approaches, the model extends beyond the idea of reciprocity and resets the context in the light of demanding obligations. In this respect, the dissertation contributes to the empirical, theoretical and methodological knowledge of intergenerational relationships.

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ANNEX 1: Logistic Regression in Three Categories

Filial Responsibilities in Three Categories

Warnings

There are 211 (52.5%) cells (i.e., dependent variable levels by subpopulations) with zero frequencies.

Unexpected singularities in the Hessian matrix are encountered. This indicates that either some predictor variables should be excluded or some categories should be merged.

The NOMREG procedure continues despite the above warning(s). Subsequent results shown are based on the last iteration. Validity of the model fit is uncertain.

Measures of Monotone Association table is not generated because the dependent variable does not have exactly two levels.

Parameter Estimates

Filial repsonsibilites in three categories[a]		B	Std. Error	Wald	df	Sig.	Exp(B)	95% Confidence Interval for Exp(B)	
								Lower Bound	Upper Bound
1.00	Intercept	-18.245	1.084	283.351	1	.000			
	Gender	.921	.504	3.330	1	.068	2.511	.934	6.748
	Marital status	.571	.689	.687	1	.407	1.770	.459	6.830
	Age group	-.139	.465	.089	1	.765	.870	.350	2.166
	Household size	-.835	.855	.954	1	.329	.434	.081	2.318
	Having children	15.923	.000	.	1	.	8230449.434	8230449.434	8230449.434
	Health status	.197	.416	.223	1	.637	1.217	.538	2.753
	Education	-15.804	1327.361	.000	1	.991	1.368E-007	.000	.[b]
	Employment	-.404	.848	.227	1	.634	.668	.127	3.518
	Income	.087	.426	.042	1	.838	1.091	.474	2.514
	Place of living	1.050	.652	2.593	1	.107	2.858	.796	10.260
2.00	Intercept	.660	.663	.991	1	.319			
	Gender	.263	.238	1.220	1	.269	1.301	.816	2.073

	Marital status	-.115	.310	.137	1	.712	.892	.486	1.637
	Age group	.246	.233	1.109	1	.292	1.279	.809	2.020
	Household size	.292	.430	.461	1	.497	1.340	.576	3.114
	Having children	.954	.492	3.751	1	.053	2.595	.989	6.812
	Health status	-.217	.215	1.014	1	.314	.805	.528	1.228
	Education	-.851	.364	5.474	1	.019	.427	.209	.871
	Employment	-.074	.359	.043	1	.836	.928	.459	1.875
	Income	.238	.223	1.141	1	.285	1.268	.820	1.962
	Place of living	-.286	.249	1.319	1	.251	.751	.461	1.224

a. The reference category is: .00.

b. Floating point overflow occurred while computing this statistic. Its value is therefore set to system missing.

Parental Responsibilities in Three Categories

Warnings

There are 243 (60.4%) cells (i.e., dependent variable levels by subpopulations) with zero frequencies.
Unexpected singularities in the Hessian matrix are encountered. This indicates that either some predictor variables should be excluded or some categories should be merged.
The NOMREG procedure continues despite the above warning(s). Subsequent results shown are based on the last iteration. Validity of the model fit is uncertain.
Measures of Monotone Association table is not generated because the dependent variable does not have exactly two levels.

Parameter Estimates

Parental Responsibility in three categories[a]		B	Std. Error	Wald	df	Sig.	Exp(B)	95% Confidence Interval for Exp(B)	
								Lower Bound	Upper Bound
	Intercept	-38.800	2.141	328.537	1	.000			
1.00	Gender	3.229	1.434	5.071	1	.024	25.264	1.520	419.933
	Marital status	-.991	1.494	.440	1	.507	.371	.020	6.935

2.00	Age group	-.006	1.303	.000	1	.997	.994	.077	12.782
	Household size	16.973	.000	.	1	.	23502661.228	23502661.228	23502661.228
	Having children	18.842	.000	.	1	.	152370573.559	152370573.559	152370573.559
	Health status	-1.235	1.324	.869	1	.351	.291	.022	3.899
	Education	-15.088	5345.200	.000	1	.998	2.801E-007	.000	.[b]
	Employment	5.296	1.653	10.261	1	.001	199.572	7.812	5098.684
	Income	.295	1.308	.051	1	.821	1.343	.103	17.455
	Place of living	-1.149	1.154	.993	1	.319	.317	.033	3.039
	Intercept	.633	1.068	.351	1	.553			
	Gender	1.384	.461	9.005	1	.003	3.992	1.616	9.861
	Marital status	.082	.640	.016	1	.898	1.085	.310	3.804
	Age group	.359	.439	.669	1	.413	1.432	.606	3.383
	Household size	.780	.785	.988	1	.320	2.181	.468	10.158
	Having children	1.606	.748	4.606	1	.032	4.983	1.150	21.600
	Health status	-.581	.390	2.215	1	.137	.560	.260	1.202
	Education	-.234	.666	.124	1	.725	.791	.215	2.916
	Employment	1.811	1.058	2.930	1	.087	6.116	.769	48.648
	Income	-.420	.467	.806	1	.369	.657	.263	1.643
	Place of living	.008	.455	.000	1	.987	1.008	.413	2.457

a. The reference category is: .00.

b. Floating point overflow occurred while computing this statistic. Its value is therefore set to system missing.

ANNEX 2: Frequency Cross-Tabulation for Original Independent and Dependent Variables

Cross-tabulations are made only with categorical variables (gender, marital status, health status, education level, employment status, place of residence) and numerical (income, household size, number of children) and continuous variables (age) are neglected for practicality reasons. Cells with 0 frequencies are highlighted with yellow paint.

Gender

Intergenerational Transfers		**Male**	**Female**	**Total**
Q545 In the course of the last 6 months, have you received Financial Support from a friend or relative..?	Yes	32	59	91
	No	347	579	926
Q550 In the course of the last 6 months, have you received Practical help in the home (e.g. cleaning, shopping, cooking) from a friend or relative...?	Yes	47	130	177
	No	332	508	840
Q555 In the course of the last 6 months, have you received Personal care (e.g. nursing, bathing, dressing) from a friend or relative...?	Yes	11	27	38
	No	368	611	979
Q560 In the course of the last 6 months, have you provided Financial Support for a friend or relative...?	Yes	126	175	301
	No	253	463	716
Q565 In the course of the last 6 months, have you provided Practical help in the home (e.g. cleaning, shopping, cooking) for a friend or relative...?	Yes	69	143	212
	No	310	495	805
Q570 In the course of the last 6 months, have you provided Personal care (e.g. nursing, bathing, dressing) for a friend or relative...?	Yes	28	64	92
	No	351	574	925

Intergenerational Normative Attitudes		Male	Female	Total
Q516_1 Here are some statements about family responsibilities. Do you agree with each of them? - It is the duty of a parent to do his/her best for his/her children even at the expense of ...	Strongly Agree	119	193	312
	Agree	236	428	664
	Neither agree nor disagree	1	4	5
	Disagree	23	12	36
	Strongly Disagree	0	1	1
Q516_4 Here are some statements about family responsibilities. Do you agree with each of them? - It is the duty of adults to provide for their parents in times of need later in their life.	Strongly Agree	85	119	204
	Agree	227	412	639
	Neither agree nor disagree	10	28	38
	Disagree	52	70	122
	Strongly Disagree	5	9	14

Marital Status

Intergenerational Transfers		Never married	Married	With a long-term partner	Separated	Divorced	Widow/widower	Total
Q545 In the course of the last 6 months, have you received Financial Support from a friend or relative..?	Yes	3	67	0	2	2	17	91
	No	10	705	1	7	6	197	926
Q550 In the course of the last 6 months, have you received Practical help in the home (e.g. cleaning, shopping, cooking) from a friend or relative...?	Yes	2	118	0	3	0	54	177
	No	11	654	1	6	8	160	840
Q555 In the course of the last 6 months, have you received Personal care (e.g. nursing, bathing, dressing) from a friend or relative...?	Yes	1	22	0	0	0	15	38
	No	12	750	1	9	8	199	979
Q560 In the course of the last 6 months, have you provided Financial Support for a friend or relative...?	Yes	2	244	0	2	2	51	301
	No	11	528	1	7	6	163	716
Q565 In the course of the last 6 months, have you provided Practical help in the home (e.g. cleaning, shopping, cooking) for a friend or relative...?	Yes	5	170	0	2	1	34	212

	No	8	602	1	7	7	180	805
Q570 In the course of the last 6 months, have you provided Personal care (e.g. nursing, bathing, dressing) for a friend or relative...?	Yes	3	77	0	0	0	12	92
	No	10	695	1	9	8	202	925

Intergenerational Normative Attitudes		**Never married**	**Married**	**With a long-term partner**	**Separated**	**Divorced**	**Widow/widower**	**Total**
Q516_1 Here are some statements about family responsibilities. Do you agree with each of them? - It is the duty of a parent to do his/her best for his/her children even at the expense of ...	Strongly Agree	3	241	0	1	4	63	312
	Agree	9	498	1	6	3	147	664
	Neither agree nor disagree	0	4	0	0	0	1	5
	Disagree	1	29	0	2	1	2	35
	Strongly Disagree	0	0	0	0	0	1	1
Q516_4 Here are some statements about family responsibilities. Do you agree with each of them? - It is the duty of adults to provide for their parents in times of need later in their life.	Strongly Agree	2	152	0	1	2	47	204
	Agree	8	485	1	6	6	133	639
	Neither agree nor disagree	0	31	0	0	0	7	38
	Disagree	3	93	0	2	0	24	122
	Strongly Disagree	0	11	0	0	0	3	14

Health Status

Intergenerational Transfers		**Very good**	**Good**	**Fair**	**Poor**	**Very poor**	**Total**
Q545 In the course of the last 6 months, have you received Financial Support from a friend or relative..?	Yes	3	28	42	13	5	91
	No	42	268	403	154	59	926

Q550 In the course of the last 6 months, have you received Practical help in the home (e.g. cleaning, shopping, cooking) from a friend or relative...?	Yes	7	38	74	38	20	177
	No	38	258	371	129	44	840
Q555 In the course of the last 6 months, have you received Personal care (e.g. nursing, bathing, dressing) from a friend or relative...?	Yes	0	5	16	13	4	38
	No	45	291	429	154	60	979
Q560 In the course of the last 6 months, have you provided Financial Support for a friend or relative...?	Yes	24	98	128	38	13	301
	No	21	198	317	129	51	716
Q565 In the course of the last 6 months, have you provided Practical help in the home (e.g. cleaning, shopping, cooking) for a friend or relative...?	Yes	14	72	91	25	10	212
	No	31	224	354	142	54	805
Q570 In the course of the last 6 months, have you provided Personal care (e.g. nursing, bathing, dressing) for a friend or relative...?	Yes	1	35	41	11	4	92
	No	44	261	404	156	60	925

Intergenerational Normative Attitudes		**Very good**	**Good**	**Fair**	**Poor**	**Very poor**	**Total**
Q516_1 Here are some statements about family responsibilities. Do you agree with each of them? - It is the duty of a parent to do his/her best for his/her children even at the expense of ...	Strongly Agree	16	92	145	33	26	312
	Agree	27	187	284	128	38	664
	Neither agree nor disagree	0	1	3	1	0	5
	Disagree	2	15	13	5	0	35
	Strongly Disagree	0	1	0	0	0	1
Q516_4 Here are some statements about family responsibilities. Do you agree with each of them? - It is the duty of adults to provide for their parents in times of need later in their life.	Strongly Agree	9	54	101	23	17	204
	Agree	23	182	280	122	32	639
	Neither agree nor disagree	3	12	13	6	4	38
	Disagree	6	44	49	15	8	122
	Strongly Disagree	4	4	2	1	3	14

Education Level

Intergenerational Transfers		Illiterate	Primary School	Secondary School	High School	Vocational School	University	Total
Q545 In the course of the last 6 months, have you received Financial Support from a friend or relative...?	Yes	22	41	8	14	1	5	91
	No	219	439	69	121	30	47	925
Q550 In the course of the last 6 months, have you received Practical help in the home (e.g. cleaning, shopping, cooking) from a friend or relative...?	Yes	52	75	17	24	3	6	177
	No	189	405	60	11	28	46	839
Q555 In the course of the last 6 months, have you received Personal care (e.g. nursing, bathing, dressing) from a friend or relative...?	Yes	14	13	4	4	1	2	38
	No	227	467	73	131	30	50	978
Q560 In the course of the last 6 months, have you provided Financial Support for a friend or relative...?	Yes	40	142	27	50	16	25	300
	No	201	338	50	85	15	27	716
Q565 In the course of the last 6 months, have you provided Practical help in the home (e.g. cleaning, shopping, cooking) for a friend or relative...?	Yes	27	105	21	38	10	10	211
	No	214	375	56	97	21	42	805
Q570 In the course of the last 6 months, have you provided Personal care (e.g. nursing, bathing, dressing) for a friend or relative...?	Yes	12	49	8	15	5	3	92
	No	229	401	69	120	26	49	924

Int. Normative Attitudes		Illiterate	Primary School	Secondary School	High School	Vocational School	University	Total
Q516_1 Here are some statements about family responsibilities. Do you agree with each of them? - It is the duty of a parent to do his/her best for his/her children even at the expense of ...	Strongly Agree	57	141	28	46	15	25	312
	Agree	177	325	43	82	13	23	663
	Neither agree nor disagree	1	2	0	2	0	0	5
	Disagree	6	12	6	4	3	4	35
	Strongly Disagree	0	0	0	1	0	0	1

Q516_4 Here are some statements about family responsibilities. Do you agree with each of them? - It is the duty of adults to provide for their parents in times of need later in their life.	Strongly Agree	43	99	18	25	7	12	204
	Agree	167	317	41	72	17	24	638
	Neither agree nor disagree	6	18	4	8	1	1	38
	Disagree	22	43	11	27	6	13	122
	Strongly Disagree	3	3	3	3	0	2	14

Employment Status

Intergenerational Transfers		**Yes full-time**	**Yes part-time**	**Yes once in a while**	**No**	**Total**
Q545 In the course of the last 6 months, have you received Financial Support from a friend or relative..?	Yes	8	0	0	83	91
	No	53	10	15	848	926
Q550 In the course of the last 6 months, have you received Practical help in the home (e.g. cleaning, shopping, cooking) from a friend or relative...?	Yes	4	3	3	167	177
	No	57	7	12	764	840
Q555 In the course of the last 6 months, have you received Personal care (e.g. nursing, bathing, dressing) from a friend or relative...?	Yes	0	0	0	38	38
	No	61	10	15	893	979
Q560 In the course of the last 6 months, have you provided Financial Support for a friend or relative...?	Yes	28	4	6	263	301
	No	33	6	9	668	716
Q565 In the course of the last 6 months, have you provided Practical help in the home (e.g. cleaning, shopping, cooking) for a friend or relative...?	Yes	11	2	2	197	212
	No	50	8	13	734	805
Q570 In the course of the last 6 months, have you provided Personal care (e.g. nursing, bathing, dressing) for a friend or relative...?	Yes	7	1	1	83	92
	No	54	9	14	848	925

Intergenerational Normative Attitudes		**Yes full-time**	**Yes part-time**	**Yes once in a while**	**No**	**Total**
Q516_1 Here are some statements about family responsibilities. Do you agree with each of them? - It is the duty of a parent to do his/her best for his/her children even at the expense of ...	Strongly Agree	25	3	5	279	312
	Agree	32	7	9	616	664

	Neither agree nor disagree	2	0	0	3	5
	Disagree	2	0	1	32	35
	Strongly Disagree	0	0	0	1	1
Q516_4 Here are some statements about family responsibilities. Do you agree with each of them? - It is the duty of adults to provide for their parents in times of need later in their life .	Strongly Agree	14	1	5	184	204
	Agree	35	6	8	590	639
	Neither agree nor disagree	1	0	1	36	38
	Disagree	9	2	0	111	122
	Strongly Disagree	2	1	1	10	14

Place of Residence

Intergenerational Transfers		**Rural**	**Urban**	**Total**
Q545 In the course of the last 6 months, have you received Financial Support from a friend or relative..?	Yes	22	68	90
	No	216	693	909
Q550 In the course of the last 6 months, have you received Practical help in the home (e.g. cleaning, shopping, cooking) from a friend or relative...?	Yes	42	130	172
	No	196	631	827
Q555 In the course of the last 6 months, have you received Personal care (e.g. nursing, bathing, dressing) from a friend or relative...?	Yes	6	32	38
	No	232	729	961
Q560 In the course of the last 6 months, have you provided Financial Support for a friend or relative...?	Yes	60	238	298
	No	178	523	701
Q565 In the course of the last 6 months, have you provided Practical help in the home (e.g. cleaning, shopping, cooking) for a friend or relative...?	Yes	44	166	210
	No	194	595	789
Q570 In the course of the last 6 months, have you provided Personal care (e.g. nursing, bathing, dressing) for a friend or relative...?	Yes	19	73	92
	No	219	688	907

Intergenerational Normative Attitudes		**Rural**	**Urban**	**Total**
Q516_1 Here are some statements about family responsibilities. Do you agree with each of them? - It is the duty of a parent to do his/her best for his/her children even at the expense of ...	Strongly Agree	55	253	308
	Agree	173	478	601

	Neither agree nor disagree	3	2	5
	Disagree	7	27	34
	Strongly Disagree	0	1	1
Q516_4 Here are some statements about family responsibilities. Do you agree with each of them? - It is the duty of adults to provide for their parents in times of need later in their life	Strongly Agree	48	152	200
	Agree	161	466	627
	Neither agree nor disagree	4	34	38
	Disagree	24	96	120
	Strongly Disagree	1	13	14

ANNEX 3: Distribution of Transfers Among Family Members

Source: HSBC GLAS, 2007

FREQUENCIES-TO/FROM	My spouse/ partner	One of my children	One of my grandchildren	Other family	A friend	Not applicable
Financial Help Received	1	20	1	47	25	926
Financial Help Provided	2	67	15	177	72	716
Practical Help Received	16	93	3	57	26	840
Practical Help Provided	42	36	3	111	48	805
Care Help Received	10	21	1	8	3	979
Care Help Provided	14	5	1	61	14	925

ANNEX 4: Topic Guide for Interviews

Demographic information: Age, Gender, Education, Number of children, Marital Status, Occupation, Rural vs. Urban

1- ***Practical exchange patterns, motivations and processes***: Do you help your parent/child with practical chores? How often? What kind of help? Why? How does it affect your relationship with your children/parent?

2- ***Financial exchange patterns, motivations and processes***: Do you financially help your parent/child? Do you buy gifts, groceries, furniture, etc.? Why? How does it affect your relationship with your children/parents?

3- ***Care exchange patterns, motivations and processes:*** Have you ever taken care of/Are you taking care of your parent/child at the moment? Why did you do it? How did it affect your relationship with your children/parent?

4- ***Contact frequency patterns, motivations and processes:*** How often do you see or talk to your children? What kind of activities do you engage in together? Where do they live? Would you rather have them closer? How does it affect your relationship with children/parents?

5- ***Views on family responsibilities*** Do you believe that parents/children should financially support each other? Why? Do you believe that parents/children should practically support each other? Why? When you grow old and become dependent, by who would you like to be taken care of? Why?

ANNEX 5: CUREC Form

SOCIAL SCIENCES & HUMANITIES
INTER-DIVISIONAL RESEARCH ETHICS COMMITTEE

Hayes House, 75 George Street, Oxford. OX1 2BQ
Tel: +44(0)1865 614871 Fax: +44(0)1865 614855
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Co-ordinator of the IDREC
Social Sciences Divisional Office

UNIVERSITY OF OXFORD

Monday, 11 July 2011

Burcu Ozdemir
Oxford Institute of Ageing, Department of Sociology

Dear Burcu,

Research Ethics Approval

Ref No.: SSD/CUREC1A/11-207

Title: Intergenerational Solidarity Between Adult Children and Elderly Parents in Turkey

The above application has been considered on behalf of the Social Sciences and Humanities Inter-divisional Research Ethics Committee (IDREC) in accordance with the procedures laid down by the University for ethical approval of all research involving human participants.

I am pleased to inform you that, on the basis of the information provided to the IDREC, the proposed research has been judged as meeting appropriate ethical standards, and accordingly approval has been granted.

Should there be any subsequent changes to the project, which raise ethical issues not covered in the original application, you should submit details to the IDREC for consideration.

Yours sincerely,



Dr Chris. Ballinger

cc: Prof Sarah Harper, Oxford Institute of Ageing
Anne Millard, Department of Sociology

CAJB/EB

ANNEX 6: Informed Consent Form

RESEARCH TITLE: INTERGENERATIONAL SOLIDARITY BETWEEN ADULT CHILDREN AND ELDERLY PARENTS IN TURKEY

RESEARCHER: Burcu Ozdemir, Doctoral (PhD) Student in University of Oxford

PURPOSE OF THE STUDY: The objective of this study is to understand the way that intergenerational solidarity operates between elderly parents and adult children in Turkey. The reason I would like to ask you questions is that you are eligible either as an elderly parent who is over 60 or as an adult child living in Turkey.

ETHICS APPROVAL: This project has been reviewed by, and received ethics clearance through, the University of Oxford Central University Research Ethics Committee.

PUBLICATION OF THE THESIS: If you agree to participate in this project, the research will be written up as a doctoral thesis. On successful submission of the thesis, it will be deposited both in print and online in the University archives, to facilitate its use in future research.

PROCEDURE: The participants will be interviewed and will be asked certain questions. The interviews will take place at a time and place which is convenient for the participant. The interview will take approximately an hour. The interviews will be tape-recorded.

RISKS: There are no risks associated with participating in this research project.

BENEFITS: There are no benefits associated with participating in this research project except apart from contributing to the understanding of intergenerational relationships within Turkish society. The participant should not expect any material compensation for their time and participation.

PARTICIPATION IS VOLUNTARY: Your participation in this project is completely voluntary. If you decide not to participate, you can withdraw from the study at any stage. Removal of your data from the study is an option as well. You may also refuse to answer any questions you do not want to respond to and still remain in the study as a participant.

CONFIDENTIALITY: If you choose to participate in this study, the tape recordings and field notes taken by the researcher will be kept private and confidential.

ANONYMITY: Your identity will also remain anonymous in any publications regarding this project. No information that might reveal your identity will be mentioned in the publications. Pseudonyms will be used to refer to the participants.

QUESTIONS AND CONTACT: If you have any questions regarding the study, please contact the researcher using the contact details below:

Address: Gonul Sok. 8/3 Demirlibahce-Ankara (my home address at the time)

Tel: 0533 3168640

E-mail: burcu.ozdemir@gtc.ox.ac.uk

CONCERN AND COMPLAINTS: If you have a concern about any aspect of this project, please speak to the researcher concerned (Burcu Ozdemir: 0533 3168640) who will do his/her best to answer your query. If you remain unhappy and wish to make a formal complaint, please contact the Research Ethics Committee at the University of Oxford (ethics@socsci.ox.ac.uk); +44 (0)1865 614871, Social Sciences & Humanities Inter-Divisional Research Ethics Committee, Oxford University, Hayes House, 75 George Street, Oxford, OX1 2BQ, UK).

YOU WILL RECEIVE A COPY OF THIS FORM WHETHER OR NOT YOU AGREE TO PARTICIPATE.

If you agree to participate in this study, please sign the following statement. Thank you.

Agreement:

I have read the procedure that is described above. I voluntarily agree to participate in the procedure and I have received a copy of this description**.** I understand that this interview will be tape-recorded.

Name (Printed) _____

Signature: _____

Date: _____

Principal Investigator: Burcu Ozdemir_____ Date: _____