

# Norms and Care Relationships in Transnational Families: The Case of Elderly Parents Left Behind in Lithuania

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**Abstract:** *In the context of high migration rates and limited formal care support for the elderly the paper deals with normative expectations and actual flows of support in Lithuanian transnational families. The study is based on a representative survey of elderly parents who have at least one migrant child (N=305). The data analysis revealed predominance of familistic attitudes towards filial responsibilities in transnational families. We did not find any significant differences in filial expectations between the two types of transnational families (elderly parents having only migrant children and those with both migrant and non-migrant children). High expectations of elderly parents are not being met in regards to face-to-face and virtual contacts with migrant adult children. The differences in provided/received emotional support between migrant and non-migrant children were insignificant. However, the data revealed significant differences in provided/received financial support between migrant and non-migrant children.*

**Keywords:** *care relationships, elderly parents, intergenerational solidarity, norms, transnational family*

## 1. Introduction

For a couple of decades social researchers have been addressing the question how intergenerational responsibilities are changing in the contemporary society. The initial reason for this interest was a concern that since traditional norms and values are giving way to more individualistic ones, adult children may cease providing support for their elderly parents (Herlofson *et al.*, 2011). Such fears appeared to not have any ground. Along with the partners/spouses, adult children, especially daughters and daughters-in-law, are still providing support for the elderly parents in most societies. However, due to increased migration and mobility, a growing number of transnational families have brought other questions into the field of intergenerational relationships studies. Researchers have addressed questions of how family contacts are being kept over the distance and what type of intergenerational care models are being developed in transnational space. There is numerous literature providing evidence that intergenerational support is circulating in transnational space (Baldassar & Merla, 2013). However, most of these studies have been carried out with non-European origin migrants (De Winter *et al.*, 2013), while applying qualitative methods (Paasche & Fangen, 2012).

Most of the studies on intergenerational norms focus on the impact of norms towards actual support. These studies have presented mixed results. Some researchers have found direct relationship between intergenerational obligations and actual behavior (Parrott & Bengston, 1999; Silverstein *et al.*, 1995, Rossi & Rossi, 1990; Whitebeck *et al.*, 1994; Stein *et al.*, 1998), while others found no significant relationship at all (Lee *et al.*, 1994; Lee *et al.*, 1995; Eggebeen & Davey, 1998; Peek *et al.*, 1998). However, the question how intergenerational norms are consistent with actual support have received less attention from researchers, especially in transnational space.

We aim to reveal whether norms of filial expectations are consistent with actual flows of support in Lithuanian transnational families. Based on a representative survey of elderly parents, the paper examines the level of normative intergenerational solidarity and associational, functional solidarity in transnational families. We analyze few dimensions of intergenerational solidarity (contacts, emotional and financial support) as part of care relationships maintained in transnational space.

There are several reasons why Lithuania is suitable for studying intergenerational norms and actual support in transnational families. First of all, Lithuania has experienced high migration rates since the restoration of independence. The emigration processes have accelerated after the accession to the EU that allowed

free movement of citizens within the Member States. The net migration rate per 1,000 inhabitants is the highest in the EU (Sipavičienė, 2013). Secondly, the main migration destination countries (UK, Ireland, Germany, and Norway) are in relatively close geographic proximity, allowing migrants to keep contacts with family members left behind. Finally, Lithuania represents a case of a limited formal support system for the elderly. Social care services for the elderly, in most cases, are offered in stationary care institutions, but the quantity and quality of the services are not sufficient (Žalimienė, 2007). The demographic factors (high emigration rates, low birth rates, rapid population ageing) demonstrate that family networks can hardly compensate the deficiencies of the care system provided by the state. This makes Lithuania an interesting case to explore the normative attitudes and actual support from the perspective of those who stay behind. This way, the study aims to contribute to quantitative studies in the under-researched area of Eastern Europe.

## 2. Theoretical approach

**Norms, normative solidarity and familism.** Usually defined as behavioral rules and responsibilities structuring family relationships (Kalmijn, 2005), norms are a crucial concept explaining the interlink between cultural factors and actual intergenerational support. Along with norms other concepts, such as attitudes and values, are often employed in social sciences. The latter ones show rather personal perspective, but do not signify behavioral standards. Norms, however, are a group-level phenomenon (Herlofson *et al.*, 2011), which demonstrates the general climate in society.

These concepts—norms, attitudes and values—are closely related to familism, which helps to determine family's role in the overall welfare system. The measures of social policy are not neutral: it can impose dependency for certain groups or promote the fulfillment of familial responsibilities (Dykstra, 2010). The welfare system, which has a sufficiently developed system of elderly care, allows sharing responsibilities between family members and the state. Contrarily, in societies with poorly developed care systems for the elderly, the whole responsibility is carried by family members, in most cases daughters/daughters-in-law, who often have to combine this responsibility with other obligations. Thus, the state takes a central role in constructing traditional care relationships and maintaining dominant family roles for the elderly care (Walker, 2003).

**Intergenerational solidarity approach.** The intergenerational solidarity theory has been constructed as a way to reveal what holds family members together as

an entity (Roberts *et al.*, 1991). In other words, it serves as a measure of social cohesion. In the light of intergenerational solidarity approach (Bengtson, 2001), both parental responsibilities towards their children (“flow above”) and filial responsibilities towards their parents (“flow below”) belong to the normative dimension of solidarity, which is used to define the obligations to perform family roles and the responsibilities related with these roles (Roberts *et al.*, 1991, p. 18). Other dimensions of solidarity approach include associational solidarity (the frequency and patterns of interaction among family members), affectual solidarity (the type and degree of positive sentiments about family members), consensual solidarity (the degree of agreement on values, attitudes and beliefs), functional solidarity (the exchange of support and assistance), and structural solidarity (the number, type and geographic proximity of family members) (Roberts *et al.*, 1991, p. 18). While testing how normative solidarity is being met by associational and functional solidarity, this study focuses on the three dimensions of intergenerational solidarity.

**Intergenerational care relationships.** Broadly defined, care is support for a person who cannot manage by him/herself (Krzyżowski & Mucha, 2013). Yet some researchers see the key distinction between different kinds of support and provide a more accurate definition: care is understood as a reciprocal and multidirectional relation that has two main aspects: “caring for” and “caring about” (Reynolds & Zontini, 2006; De Winter *et al.*, 2013). “Caring for” refers to hands-on care giving on a personal level, while “caring about” encompasses keeping contact and emotional support and refers to emotional functions related to sociability, advice, comfort and self-validation (Reynolds & Zontini, 2006; De Winter *et al.*, 2013). “Caring about” family members seems to assume crucial importance in the context of migration (Reynolds & Zontini, 2006). Thus, we include both the associational (frequency of contacts) and functional dimensions of solidarity as measures of caring relationships in transnational families.

These dimensions of solidarity are an important pillar for social policy makers in the countries of origin. Frequency of intergenerational contacts (*associational solidarity*) is an essential element of care relations and is often used as an indicator of the strength of intergenerational exchange and potential support for older people (Tomassini *et al.*, 2003). At the same time, lack of contacts may indicate tensions or ambivalent feelings in the family and may serve as an indicator of needs to receive care and support from non-familial networks. Functional solidarity indicates the actual flows of support or the lack of support within the family. Researchers recognize at least five types of informal support provision towards elderly parents: economic (financial and material); housing and practical assistance in the household; personal care; emotional support; and cognitive support (Attias-

Donfut, 2003). In this study we investigate two types of functional support which may be easily provided in transnational families—emotional and financial. In general, caring can be considered a core of the processes associated with “doing family” (Krzyżowski & Mucha, 2013) and transnational caregiving (the same as caregiving in any family) binds a family together into intergenerational networks of reciprocity (Baldassar & Merla, 2013).

**Hypotheses.** Considering the specific research question we raise several hypotheses. First, we expect that the level of normative solidarity will be lower in families where all children (or the only child) have migrated, compared to the families with both migrant and non-migrant adult children (H1). In other words, we expect that specific life course events (such as adult child migration) should affect parents’ expectations.

While adult child migration inevitably affects face-to-face contacts, the virtual contacts may be easily kept in transnational space. Thus, we expect no significant differences in terms of the frequency of virtual contacts between elderly parents and migrant/non-migrant children (H2).

Considering the cultural climate in Lithuania (familistic attitudes are rather strong), we expect that norms of filial expectations will be consistent with the actual flows of support received from migrant children (H3).

### 3. Methodology

This study is based on a representative survey of elderly parents (aged over 60) who have at least one migrant child. The survey was done in 2013 by the Baltic Surveys, Ltd. The survey sampling was based on data from a national representative survey (Omnibus, N=305), which identified the households of elderly parents with at least one migrant child (residing abroad for at least half a year). Subsequently, the quota sampling procedure was followed and the survey of elderly parents was conducted. Interviews were carried out with 305 elderly parents, of which 29.2 per cent were men and 70.8 per cent were women. More than half of the elderly parents (57.4 %) had the only child or all children living abroad; and the rest of respondents had both migrant and non-migrant children.

In order to measure the level of normative solidarity in transnational families, we have employed the scale of familism used in the *Generations and Gender Survey* (GGS). The scale includes 6 statements (dependent variables) measuring filial obligations (presented in Table 1).

Table 1. Attitudes of Lithuanian population and elderly parents towards filial responsibilities (mean scores and standard deviation)

|   | Attitudes of Lithuanian population* | Attitudes of elderly parents with migrant adult children |  |       |
|---|-------------------------------------|--|--|-------|
|   |                                     | Family type  |  | Total |
|   |                                     | Only migrant children (N=175)                            | Migrant + Non-migrant children (N=130) |       |
| Children should take responsibility for caring for their parents when parents are in need (A)                       | 2.14                                | 2.25   | 2.19                                   | 2.20  |
| Children should adjust their working hours to the needs of their parents (B)  | 3.33                                | 3.35   | 3.32                                   | 3.34  |
| When parents are in need, daughters should take more caring responsibility than sons (C)                            | 3.36                                | 3.31   | 3.24                                   | 3.26  |
| Children ought to provide financial help for their parents when their parents are having financial difficulties (D) | 2.36                                | 2.44   | 2.49                                   | 2.45  |
| Children should have their parents live with them when parents can no longer look after themselves (E)              | 2.34                                | 2.59   | 2.48                                   | 2.53  |
| Overall index   | <b>2.47</b>                         | <b>2.79</b>  | <b>2.74</b>                            | 2.76  |
| Standard deviation  | <b>0.5</b>                          | <b>0.82</b>  | <b>0.85</b>                            | 0.84  |

The mean scores were calculated on a scale of 1 to 5, where 1 means “totally agree” and 5 “totally disagree”. The lower mean scores illustrate higher agreement on a certain responsibility. Lower standard deviation means that attitudes towards filial responsibilities might be considered a social norm.

\* Based on the second wave of the GGS, N=5730 (Kraniauskienė, 2013).

Attitudes were being evaluated by measuring the agreement with these statements within the scale from 1 (“totally agree”) to 5 (“totally disagree”). The lower mean score demonstrates higher level of normative solidarity and at the same time, familism. Based on the methodology suggested by Herlofson and others (2011), we have calculated an overall index of the normative solidarity in transnational families. In Lithuania this methodology was first applied by the sociologist S. Kraniauskienė (2013). This approach allowed us to determine whether normative attitudes in transnational families are different from the

general normative “climate” in Lithuania. Moreover, the methodology was useful to evaluate the level of normativity. Lower scores of standard deviation demonstrate that there is a consensus on intergenerational responsibilities and we can consider them as norms, while higher scores reflect rather personal attitudes. Considering that elderly parents with all of their children (or the only child) in migration might have different normative attitudes, compared to parents with both migrant and non-migrant children, we juxtapose the normative scale between the two family types.

The dependent variables measuring actual support flows were recorded for each adult child, migrant or non-migrant (up to 8 children). Questions for the measurement of these variables are presented in the footnotes. Associational dimension of solidarity included the frequency of face-to-face contacts,<sup>1</sup> frequency of virtual contacts,<sup>2</sup> and willingness to have more frequent contacts.<sup>3</sup> Functional dimension of solidarity was measured by the following variables: received financial support,<sup>4</sup> provided financial support,<sup>5</sup> received emotional support,<sup>6</sup> provided emotional support.<sup>7</sup> Also, the general attitude about the effects of adult children migration on elderly parents<sup>8</sup> was measured.

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<sup>1</sup> How often do you meet your children? (1 – at least once per week or more often, 2 – a few times per month, 3 – once per month, 4 – once per 3 months, 5 – once per 6 months, 6 – once per year or less often, 7 – do not meet).

<sup>2</sup> How often do you contact your children by the above mentioned means of communication? (1 – every day, 2 – few times per week, 3 – once per week, 4 – a few times per month, 5 – once per month, 6 – once per 3 months, 7 – more rarely).

<sup>3</sup> Would you like to have more frequent contacts with him/ her? (1 – yes, 2 – no, 9 – do not know, no answer).

<sup>4</sup> Have you or your partner/spouse received financial support (in cash or in other way) from your children over the last 12 months? If yes, how often? (1 – never over the last 12 months, 2 – regularly (monthly, every other month), 2 – few times per year, 3 – once per year, 9 – do not know, no answer).

<sup>5</sup> Have you or your partner/spouse provided financial support (in cash or in other form) to your children (including support for grandchildren) over the last 12 months? If yes, how often? (1 – never over the last 12 months, 2 – regularly (monthly; every other month), 3 – a few times per year, 4 – once per year, 9 – do not know, no answer).

<sup>6</sup> Over the last 12 months, have you talked with him/ her about your personal experiences and feelings? If yes, how often? (1 – never, 2 – often, 3 – sometimes, 4 – rarely).

<sup>7</sup> Over the last 12 months, have your children talked with you about their personal experiences and feelings? If yes, how often? (1 – never, 2 – often, 3 – sometimes, 4 – rarely).

<sup>8</sup> How the migration of your child(ren) has affected you personally? (1 – difficulties related to personal care have emerged, 2 – financial situation has worsened, 3 – financial situation has improved, 4 – relationships with migrant child(ren) have worsened, 5 – relationships with migrant child(ren) have improved, 6 – other (please indicate), 9 – did not answer).

The respondents were recording data about each of their children, thus the function *Varstocases* was used. This allowed us to convert the data from “wide” to “long”. The outcome (N=663 children) enabled the comparison of different dimensions of the elderly parents’ solidarity among three groups of children: migrant children and non-migrant children, living in a distant or close proximity in Lithuania. Adult children living in another city/municipality were grouped under the “distant proximity” category (17.4% of children, N=106), while children living in the same municipality were assigned to the “close proximity” category (17.1% of children, N=104). Migrant children comprised 65.5 per cent (N=398) of the sample. Children living in the same household with elderly parents (N=55) were excluded from the analysis. Thus the total number of cases included in the analysis was 608. Pearson’s chi-square test was used to evaluate if the differences in cross tabulations were significant between the three groups.

## 4. Results

### 4.1 Normative attitudes towards filial responsibilities in transnational families

**Attitudes towards filial responsibilities.** The data results suggest a high level of filial expectations in transnational families (Table 1). The highest agreement was found on a general responsibility of adult children for caring of elderly parents (Statement A). Parents with all of their children (or the only child) in migration slightly less agree with this responsibility, compared with parents who have both migrant and non-migrant children, although the difference is not statistically significant. The majority of parents also tend to agree on children’s responsibility to provide financial help for their parents (Statement D). This type of support can be easily provided over the distance, which might be the reason why the level of agreement is high in both types of families. Other types of support—such as having parents live together when parents can no longer look after themselves—would be more difficult to realize in transnational space. This might be the reason why parents with all of their children (or the only child) in migration tend to have slightly less positive attitudes on this type of support. Much less agreement was found on the attitudes on division of responsibilities between work and care for family members (Statement C) and on gender roles in elderly care (Statements B).

Although there are some differences between both types of transnational families, they are not statistically significant. Thus we have not found any solid evidence allowing to verify the first hypothesis on a lower level of normative



solidarity in families with all migrant children. Compared to the general attitudes of Lithuanian population towards filial responsibilities, the indexes of normative solidarity are higher in transnational families (the agreement with filial responsibilities in these families is slightly lower). The standard deviation is found to be higher when the attitudes towards filial responsibilities are measured in transnational families, suggesting a lower level of normativity. These findings suggest that in transnational families encountering the structural barriers to realize filial responsibilities actually, the intergenerational expectations are being reconsidered by elderly parents.

**Attitudes towards personal care models.** Even if the data analysis presented above reveals that filial expectations are being reconsidered in transnational families, the most appropriate care models<sup>9</sup> for the elderly parents are care provided by their children at parents' home or at children's home (Table 2).

Table 2. *The attitudes of elderly parents towards care models, %*

|   | Type of transnational family |  | Total |
|---|------------------------------|--|-------|
|   | Only migrant (N=175)         | Migrant + non-migrant children (N=130) |       |
| Care provided by children at respondent's home                        | 70.1                         | 80.0                                   | 75.1  |
| Care provided by children at children's home                          | 51.7                         | 61.0                                   | 56.4  |
| Care provided by other relatives at respondent's home                 | 43.7                         | 50.0                                   | 46.9  |
| Care provided by privately hired caregivers at respondent's home      | 45.7                         | 47.9                                   | 46.8  |
| Care provided by social workers at respondent's home (state services) | 47.4                         | 46.7                                   | 47.1  |
| Care received at day-care centre                                      | 21.1                         | 20.6                                   | 20.9  |
| Care received at elderly residential care institution                 | 26.3                         | 26.7                                   | 26.5  |

<sup>9</sup> Measured by means of the question: "There are many ways to provide care for the elderly when needed. If you would need a constant care, which way would be the most appropriate and the least appropriate?" (Categories of answers are presented in Table 2).

Interestingly enough, these models of care are chosen as the most appropriate both for parents with all of their children (or the only child) in migration and for parents who have both migrant and non-migrant children. This way, most probably, the “ideal type” of care is expressed. However, the proportions of elderly parents who have opted these types of care are a bit lower between parents who have only migrant children (in comparison with parents who have both non-migrant and migrant children).

Care received from other relatives and non-familial network at home are also acceptable models. The least acceptable models of care are institutional care provided at day-care centre or at residential care institution. This might be related to the deficiencies of the care system for the elderly provided by the state. Even if the network of organizations providing care services for the elderly on community level and private residential care institutions is expanding, most often care is provided at state residential care institutions (Žalimienė & Lazutka, 2009). However, neither the demands for long-term institutional care services are being met, nor is the quality of the services in these institutions sufficient (Žalimienė, 2007).

## **4.2. Associational solidarity in transnational families**

The geographies of the migrant children from our sample coincide with the most common destination countries indicated by the official statistics. The highest percentage of the migrant children lives in the UK (38.9%), Ireland (16.3%), Norway (11.6%), and Germany (7.0%)<sup>10</sup>. These countries are not difficult to reach due to availability of cheap and short flights. However, the data shows significant differences in face-to-face contacts among non-migrant living in close, distant proximity and migrant children (Table 3). The highest proportion of the elderly parents have very frequent (daily or a few times per week) contacts with non-migrant children living in a close proximity. Geographic distance obviously reduces the possibility of frequent contacts and parents have significantly less frequent face-to-face contacts both with non-migrant children living in a distant proximity (other municipality) and migrant children. The contacts with migrant children are the least frequent among the three groups.

Even if face-to-face contacts are limited while living across the borders, some researchers argue that modern technologies mean the “death of distance” (Baldassar *et al.*, 2007), and distance and time no longer seem to be major

<sup>10</sup> The rest of the children live in other European (19.6%) and non-European (6.5%) countries.

constraints on interaction. However, the results on the frequency of virtual contacts are contradicting this hypothesis (Table 4). More frequent are the virtual contacts with non-migrant children, especially with those living in close proximity<sup>11</sup>. The cost of international telephone calls, the flexibility of children and parents and other factors most probably create a barrier to communication within transnational families. The results show a great need of the elderly for more frequent contacts with their migrant children. As many as 74.8 per cent of the elderly parents would like to have more frequent contacts with their migrant children.

Table 3. Frequency of face-to-face contacts with migrant and non-migrant children, %

| Non-migrant children                     |                 |                   | Migrant children                  |      |
|--|-----------------|-------------------|-----------------------------------|------|
|  | Close proximity | Distant proximity |                                   |      |
| Total* (N)                               | 105             | 104               | Total (N)                         | 398  |
| Every day                                | 61.9            | 5.8               | Once per month or less frequently | 3.6  |
| A few times per week                     | 26.7            | 33.7              | Once per 3 months                 | 10.7 |
| Once per week                            | 7.6             | 35.6              | Once per 6 months                 | 38.3 |
| A few times per month or less frequently | 3.8             | 25.0              | Once per year or less frequently  | 47.4 |

\* Pearson's chi-square < 0.001 (between close proximity and distant proximity)

Table 4. Frequency of virtual contacts with migrant and non-migrant children, %

| Non-migrant children                     |                 |                   | Migrant children | Total |
|--|-----------------|-------------------|------------------|-------|
|  | Close proximity | Distant proximity |                  |       |
| Total (N)                                | 105             | 103               | 398              | 604   |
| Every day                                | 43.8            | 15.5              | 6.7              | 18.2  |
| A few times per week                     | 39.0            | 46.6              | 28.1             | 35.5  |
| Once per week                            | 8.6             | 24.3              | 27.6             | 22    |
| A few times per month or less frequently | 8.6             | 13.6              | 37.6             | 24.4  |

Pearson's chi-square < 0.001

<sup>11</sup> The largest proportion of elderly parents have daily virtual contacts with their non-migrant children living in close proximity and a few times per week contacts with children residing in distant proximity. With migrant children, the most common frequency of communication is a few times per month or less frequently.

### 4.3. Functional solidarity in transnational families

We analyze two types of functional support in transnational families—received/provided emotional<sup>12</sup> (Table 5) and financial (Table 6) support. A higher proportion of elderly parents reported having frequently received and provided emotional support from/for their migrant children, compared to non-migrant children (Table 5). However, the differences are not statistically significant. In general, about one third of the respondents indicated having frequently received/provided emotional support; less than half received and provided this kind of support rarely or sometimes. The analysis revealed no clearly evident asymmetries between the shares of provided/received emotional support. The fact that almost half of the elderly parents received and provided emotional support rarely or sometimes implies that other networks are preferred for sharing personal experiences and feelings. The results of the first wave of GGS provide evidence of a tendency to derive emotional support from partners (when respondents have partners) and friends (when respondents do not have partners) (Gedvilaitė-Kordušienė, 2011).

*Table 5. Emotional support received and provided by elderly parents and their adult children, %*

| Received emotional support |                 |                   |          |           | Provided emotional support |                   |          |           |
|----------------------------|-----------------|-------------------|----------|-----------|----------------------------|-------------------|----------|-----------|
|                            | Non-migrant     |                   | Mig-rant | Total (N) | Non-migrant                |                   | Mig-rant | Total (N) |
|                            | Close proximity | Distant proximity |          |           | Close proximity            | Distant proximity |          |           |
| <i>Total (N)</i>           | 92              | 97                | 354      | 543       | 92                         | 97                | 354      | 543       |
| Frequently                 | 32.6            | 26.8              | 33.9     | 32.4      | 32.6                       | 26.8              | 33.9     | 32.4      |
| Sometimes                  | 42.4            | 38.1              | 41.8     | 41.3      | 42.4                       | 38.1              | 41.8     | 41.3      |
| Rarely                     | 25.0            | 35.1              | 24.3     | 26.3      | 25.0                       | 35.1              | 24.3     | 26.3      |

*Pearson's chi-square is not significant*

<sup>12</sup> A small share of respondents reported not having received (9%) or provided (11.4%) any emotional support from or to their migrant and non-migrant children. As the number of these respondents was too low to compare between the groups of non-migrant and migrant children, we excluded these cases from the analysis and focused only on the frequency of received/provided emotional support. This explains why the numbers of respondents in Tables 6 and 7 are smaller than those presented above.

Table 6. Financial support received and provided by elderly parents and their adult children, %

|                      | Received financial support* |         |       | Provided financial support** |         |       |
|----------------------|-----------------------------|---------|-------|------------------------------|---------|-------|
|                      | Non-migrant                 | Migrant | Total | Non-migrant                  | Migrant | Total |
| Total                | 200                         | 387     | 587   | 204                          | 388     | 592   |
| Never                | 69.0                        | 42.1    | 51.3  | 58.8                         | 76.0    | 70.1  |
| Regularly            | 6.5                         | 13.2    | 6.5   | 7.8                          | 1.5     | 3.7   |
| A few times per year | 17.5                        | 31.0    | 26.4  | 27.0                         | 10.8    | 16.4  |
| Once per year        | 7.0                         | 13.7    | 11.4  | 6.4                          | 11.6    | 9.8   |

\* Pearson's chi-square < 0.001

\*\* Pearson's chi-square < 0.001

A rather different picture was revealed in the analysis of financial support. A higher proportion of elderly parents reported regularly or irregularly (a few times per year or once per year) received<sup>13</sup> financial support from their migrant children (Table 6). On the contrary, a higher proportion of elderly parents indicated having provided financial support to their non-migrant children regularly or a few times per year.

Considering that an improved financial situation (as indicated by the respondents) is the most common effect of adult child migration<sup>14</sup>, it seems plausible that remittances are a considerable support for elderly parents. The subjective evaluation of their financial situation also implies the significance of received financial support. Almost half of the elderly parents belong to the group of an average financial status<sup>15</sup> and one third—to the group of a lower financial status<sup>16</sup>. Material well-being of the elderly is much lower compared with younger generations (Ivaškaitė-Tamošiūnienė & Lazutka, 2009) in Lithuania and old age pensions are far from being generous.

In sum, more than half of the elderly parents were receivers of remittances

<sup>13</sup> The numbers of received and provided financial support were too small to be compared between three groups thus the comparison was drawn between migrant and non-migrant children.

<sup>14</sup> Of the elderly parents, 39.7% indicated that their financial situation has improved, 21% said that their relationships with migrant children have improved, and less than 10% indicated other consequences of adult child migration.

<sup>15</sup> They have sufficient financial resources to buy food and clothes, and to build up some savings but they cannot afford more expensive goods (e.g., TV or refrigerator).

<sup>16</sup> They have enough money to buy food but can hardly afford clothes.

from their migrant children. Yet more than one third of the elderly parents were providers of financial support for their non-migrant children and, in smaller numbers, for their migrant children. Almost one third of the elderly parents (28.4%) who indicated having received financial support from their migrant children provided support for their non-migrant children. It shows how flows of support circulate among family members over distance and, likely, over time. Financial support, which we regard as “caring for”, may be a signifier of other types of support which cannot be provided over distance.

## **5. Conclusions**

The data analysis revealed that elderly parents who have migrant children tend to be in favor of familistic attitudes in regards to filial responsibilities for parents and personal care expectations. Surprisingly enough, we have not found any significant differences in the normative attitudes between two types of transnational families (elderly parents having only migrant children and those with both migrant and non-migrant children), thus the data do not verify the first hypothesis. This result implies a rather inconsiderable impact of adult children migration on the level of normative solidarity for those who stay behind. At the same time, the higher standard deviation of normative solidarity index implies lower consensus on filial responsibilities in transnational families compared to the general attitudes of the Lithuanian population. This finding may be a sign of the flexible nature of norms. Because of structural factors, there is more uncertainty in transnational families and filial responsibilities have to be reconsidered in transnational space. Further research encompassing larger sample and longitudinal data would contribute to the answer whether adult children migration in fact has a significant effect on the level of normative solidarity.

Along with the negative impact of migration on the frequency of face-to-face contacts, it also lowers the frequency of virtual contacts between children and their parents. Thus, the results do not verify the second hypothesis. The advantages offered by modern communication technologies cannot overcome the structural obstacles in Lithuania’s case. The measures compensating long distance calls or promoting the use of Internet in older groups of society, most probably would increase possibilities to sustain intergenerational contacts over the distance.

Even if we have found some negative differences between migrant and non-migrant groups of children in terms of associational solidarity (due to structural barriers), the results of functional dimension of solidarity are different. The data revealed no

significant differences in provided/received emotional support between migrant and non-migrant children. With regard to financial support, adult child migration seems to be advantageous for some elderly parents as it promotes their financial well-being. Thus, the results only partially verify the third hypothesis.

We can conclude that high normative expectations are not being met in terms of associational solidarity, but are being consistent in terms of functional solidarity (emotional and financial support) in Lithuanian transnational families. Furthermore, the results suggest that migration might be beneficial not only for elderly parent—migrant child dyads, but also for other family sub-groups. Some elderly parents who receive financial support are in turn providing financial support for their non-migrant children. This finding suggests that care is circulating in the transnational family sub-systems and provides evidence that elderly parents are not only receivers, but also providers of support.

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