

New forms of family care in cultural and institutional contexts: Introduction to the Special Collection

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Abstract

Objective: This special collection aims to contribute to theory and research on the cultural and institutional contexts of care and on the relationship between care policies, gender and the family.

Background: Since the 1990s, many European welfare states have not only extended social rights and infrastructure related to extra-familial care, but have also expanded support for care by family members. So far, research on family care in the context of contemporary care policies remains scarce.

Method: The special collection's seven articles present theoretical debates related to family care and apply research on cross-national differences and intergroup differences using a variety of quantitative and qualitative methods.

Results: By taking a multidimensional perspective on family care for older people, the special collection offers new insights into institutional and cultural family care contexts, the social risks and scope of action connected with family care and the consequences of the development of care policies for the relationship between family, gender and care.

Conclusion: The special collection demonstrates that the systematic analysis of the development of family care in its institutional and cultural contexts, as well as the consequences for the development of social risks and scope of action connected with family care, enhances our understanding of the changing relationship between family, gender and care.

Key words: family care, care policies for older people, culture, gender, well-being, social risks



1. Introduction

In the era of industrial societies, care for older people was mainly provided within the family, mostly by women, on an unpaid, informal basis. According to the feminist debate, women's provision of family care is a significant reason for their marginalisation in the labour market and for gender inequality (Anttonen & Zechner, 2011; Daly, 2011; England, 2005). Since the 1990s, in reaction to the "greying of society," the increase in women's integration into the labour market and the trend towards more egalitarian gender cultures, many post-industrial welfare states have supported the extension of publicly financed extra-familial care (Pfau-Effinger, 2005). Consequently, in many of these societies, substantial parts of the care for older people have since been provided by professional or semi-professional care workers formally employed by care agencies or in residential care homes (León et al., 2014; Ranci & Pavolini, 2013).

Nevertheless, family members remain the primary source of care provision for older care-dependent people in many post-industrial societies (Spasova et al., 2018). Previous research shows that there are different reasons why family members take on an (unpaid) caregiver role for older people in need of care, and these might vary in different societal contexts. Such a decision may be grounded in a lack of options in terms of public or publicly financed extra-familial care services for older people. It can also be based on cultural values and, for instance, on the idea that female family members are morally obliged to care for older relatives (Eichler & Pfau-Effinger, 2009; Haberkern et al., 2015; Hess et al., 2020; Jolanki, 2015; Kadi et al., 2022).

Family care work is often connected with substantial social risks for family carers. A main reason for this is that the "dual-earner" family's modern lifestyle is reliant on two incomes from formal employment, which potentially conflicts with additional engagement in familial care provision. Moreover, financial independence and social security rights, such as pension entitlements, are often attached to labour market participation (Eggers & Grages, 2023; Frericks, 2023; Lewis & Guillari, 2005; Orloff, 2009). A family member's decision to undertake care for an older relative may entail a part-time or full-time exit from the labour market. This, in turn, can result in a loss of income and a reduction in social security entitlements and may, thus, threaten the individual's and the family's well-being (Brandt et al., 2022). For this reason, Bonoli (2005: 431) has characterised the risks related to work-family reconciliation as a type of "new social risk." Since women remain the primary family caregivers in all post-industrial societies, it is likely that the persistence of family care and insufficient welfare state support thereof will perpetuate traditional gender inequality structures and, thereby, the related social risks, such as dependence on one's partner's income and lower pension entitlements (e.g. Daly, 2011; Leitner, 2003; Rummery, 2009; Theobald, 2020).

In order to compensate for these new social risks and, to some extent, promote gender equality, many welfare states have, since the 1990s, established new instruments in their care policies to support family members in their caregiving roles (in short, family care policies). These are policies that frame care by family members on the basis of institutional regulation and the provision of resources. Their instruments include pay for the care work and elements of social security for the carers, care leave programs with income substitutes for employed family carers, respite care and the public provision of training for family carers (Bouget et al., 2016; Brimblecombe et al., 2018; Courtin et al., 2014; Eggers et al., 2020; Geissler & Pfau-Effinger, 2005; Le Bihan et al., 2019; Ungerson & Yeandle, 2007).

As a consequence of these reforms, the unpaid, informal care provided by the (mostly female) spouses or adult children of care-dependent older persons has been partially transformed into a form of publicly co-paid family care (Da Roit & Le Bihan, 2019; Eggers et al., 2024; Frericks et al., 2014; Leitner, 2003). Geissler and Pfau-Effinger (2005) argue that these policies have led to a "semi-formalisation" of family care. The informal and unpaid nature of family care has been a central subject of care theory and research (e.g., England, 2005), whereas the new forms of paid family care have so far received less attention in the scientific discourse about care.

This special issue offers a new contribution to the scientific debate about care in that it systematically includes the new policies supporting family care for older people, especially new forms of paid family care, in care theory and research. It shows that taking the policies promoting family care into consideration has substantial consequences for our theoretical approaches to care, for the analysis of care policies and their social consequences and for our understanding of changes in the relationship between the family, gender and care.

This special collection aims to answer the following questions:

- What are the consequences of including the new policies promoting paid family care for our theorising of and research about the relationship between care policies and gender?
- How do welfare state policies concerning family care differ with regard to social risks and the space of action related to family care, and how can these cross-national differences be explained?
- To what extent is family care covered by European welfare states' social rights, and how can cross-national differences be explained?
- What is the role of cultural ideas in people's family care/extra-familial care preferences?
- What are the main factors affecting the well-being of family carers?
- How do older people in need of care and their relatives perceive their agency in different types of individual care arrangements?

2. Content of this Special Issue

The present section offers an overview of the seven articles in this special collection and of how they contribute to answering these research questions.

The article, [*Gender and policies for paid family care for older people: Overview of debate and theoretical reflections*](#), by Thurid Eggers, Christopher Grages and Birgit Pfau-Effinger (2024) reflects on the implications of including new policies promoting paid family care in the concept of care policy for older people for the theoretical link between care policy and gender inequality. The article shows that many welfare state researchers agree that policies that support extra-familial care can reduce gender inequality. The role of policies concerning family care in gender inequality remains contested. Some authors stress the argument that gender equality can only be achieved if women, like men, participate fully in formal and gainful employment. Others criticise a perspective on gender equality that has its main focus on women's labour market participation, with the argument that it might perpetuate the devaluation of informal family care work vis-à-vis paid employment. These authors suggest a revaluation of family care. The paper contributes to this debate in that it argues that, to some degree and under specific conditions, the new policies that promote paid family care have the potential to reduce gender inequality. It thus offers a new contribution to theory about the relationship between care policies, gender and the family.

In [*Social risks of family carers in the context of welfare state policies*](#), Thurid Eggers and Christopher Grages (2023) ask how European care policies for older people differ in terms of their potential social risks to family carers and to what extent these differences can be explained by differences in the types of welfare and care regimes. It is often assumed that welfare state support for family care entails high social risks, such as the loss of employment income and social security rights, for the carer. This paper challenges these assumptions and argues that care policies that generously support family carers through pay, elements of social security and work-related rights might alleviate some of the social risks related to family care. The article introduces an innovative approach to systematically measuring the generosity of policies that support family carers. It applies this approach to a comparative study of five European welfare states based on analyses of policy documents, experts' policy reports and comparative social policy databases. The findings reveal that cross-national differences regarding social risks related to family care only partly correspond with assumptions based on welfare and care regime affiliation according to classic regime typologies. The article sheds new light on the ways in which welfare states design their policies for family carers and on the extent to which these policies entail social risks.

In [*Family-provided long-term care and its coverage in European pension systems*](#), Patricia Frericks (2023) asks to what extent family care work is covered by European welfare states' social rights. The main focus is on pension entitlements for family caregivers to older people in need of care. Old-age pensions are the primary redistributive system of present-day societies, but according to the scientific discourse on pension systems, pension rights are mainly based on paid employment. The article argues that this discourse neglects the role of family care work as the basis of pensions. It introduces the findings of an empirical study that systematically analyses and quantifies current pension entitlements for family-provided long-term care in ten European countries – and the ways in which they have changed – based on the method for systematic comparison of qualitative data (SCQual). In light of the results, the article evaluates theoretical assumptions drawn from the most relevant research strands in the field. It finds that pension entitlements for family-provided long-term care are characteristic of most of the studied countries. Moreover, the study's empirical

findings refute the literature's main assumptions regarding both cross-national variation and change in entitlements. The article offers a new contribution to the conceptual challenges of comparative welfare state research in general, along with a concrete analysis of social rights entitlements, in that its analysis demonstrates the role of family care in the entitlements.

Moritz Hess, Wiebke Schmitz, Laura Naegele and Philipp Stiemke's (2023) article, [You will take care of me when I am old: Norms on children's caregiver obligations – An analysis with data from the European Values Study](#), investigates differences in norms and values related to family care. Its main focus is on gender differences in supporting the norm that adult children are obliged to provide care for their parents in European welfare states. The article aims to determine which individual- and country-level factors affect this norm. The quantitative study is based on data from the Fifth Wave of the European Values Study and uses multilevel regression techniques. The explanatory variables at the individual level are gender and other socio-demographic variables. At the country level, the paper analyses the role of social expenditures on health care as well as the female labour force participation rate. The findings show that women and people living in countries with high health care expenditure and high female labour force participation rates are less supportive of the norm that children have an obligation to provide care for their parents. The authors conclude that norms and values regarding family care are variable and can differ between social groups.

Martina Brandt, Christian Deindl, Ginevra Floridi, Robert Heidemann, Judith Kaschowitz, Nekehia Quashie, Ellen Verbakel and Melanie Wagner's (2023) contribution, [Social inequalities and the wellbeing of family caregivers across European care regimes](#), focuses on the interconnection between family care and family caregivers' well-being. Although family care remains a major source of care provision in European welfare states, little is known about social inequalities in family caregiving and their impacts on caregivers' well-being. The empirical study applied regression analysis to data from the Survey of Health, Ageing and Retirement in Europe and the English Longitudinal Study of Ageing and estimated fixed-effects models. Its findings show a socio-economic gradient in family care and well-being. However, it found no evidence that differences in socio-economic background influenced the effect of caregiving on caregivers' well-being across European welfare states with different care policies. The study's results also indicate that different care arrangements and different care regimes (e.g., family vs service-based) affect the gender differences in the relationship between caregiving and older caregivers' well-being. On this basis, the study demonstrates that gender remains the central dimension of inequality in family caregiving; this is related to various other dimensions of inequality and depends on the family care context.

While an increasing number of labour migrants in Europe are currently entering old age and research on the intersection between immigration and aging is growing, we still know little about the ways in which older immigrants receive care. Anika Liversage's (2023) article, [A challenging responsibility: Care for older parents in Turkish immigrant families](#), analyses the role of family care for older immigrants from Turkey in the Danish welfare state, which offers generous support for extra-familial care as well as for family care. It introduces the findings of an empirical study based on in-depth interviews with older parents, children and grandchildren from 22 families. The findings show that most of the interviewees believe family care is the "best" form of care. In addition, older Turkish immigrants commonly use family care because they often have limited command of the Danish language, which causes communication problems with Danish care workers. Some older family members even refuse public care provision, thereby increasing the need for support from their next of kin. The family carers are often female, and the provision of family care, even if it is generously supported in the Danish welfare state, may further marginalise women who are already precariously positioned in Danish society.

The number of older people suffering from memory illnesses, such as dementia, is growing in most welfare states. However, there is little research offering an in-depth perspective on the perceptions of people with memory illnesses and their partners of their individual care arrangements. In [People with memory illnesses and their spouses as actors in the hybrid care model](#), Outi Jolanki, Päivi Eskola and Mari Aaltonen (2023) investigate the extent to which people with memory illnesses position themselves and others as actors in organising their care support in the context of the Finnish long-term care system. The study is based on 10 in-depth, semi-structured interviews with older people who have memory illnesses and their spouses. It focuses on how the interviewees act on and experience their individual care arrangements. On this basis, the study demonstrates that people with memory illnesses mainly position themselves together with their partners as active, knowledgeable and reflective users or consumers of social and health care services who are by and large satisfied with their service provision. By showing persons with memory illnesses as self-reflexive

agents, the study makes a case for recognising these individuals' agency and highlights the need for more research on their perceptions and experiences.

3. Conclusion

This special collection offers a new contribution to the scientific debate about care in that it systematically includes family care and the new forms of paid family care, as well as their cultural and institutional contexts, in theorising and conducting research about care. The special collection's central focus is related to older people in need of care and their family carers' social risks and scope for action in relation to policies promoting new forms of paid family care. Its contributions include analyses of cultural ideas related to family care as well as of the role of care policies and cultural ideas in older people's care use and family members' willingness to provide care for their relatives. The contributions analyse both cross-national differences and differences between social groups on the basis of gender and ethnicity. Altogether, the special collection demonstrates that family care and its cultural and institutional contexts are opening up a very interesting and important research field and that we can gain from considering welfare state policies promoting new forms of family care in our theorising and research about care policies, gender and the family.

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Information in German

Deutscher Titel

Neue Formen der familialen Pflege im kulturellen und institutionellen Kontext – Einleitung zur Special Collection

Zusammenfassung

Fragestellung: Ziel der Special Collection ist es, zur Theorieentwicklung und Forschung zum kulturellen und institutionellen Kontext der Pflege und zum Verhältnis von Pflege, Gender und Familie beizutragen.

Hintergrund: Seit den 1990er Jahren haben viele Wohlfahrtsstaaten in Europa nicht nur soziale Rechte und Infrastruktur für die extra-familiale Pflege ausgeweitet, sondern auch die familiäre Pflege verstärkt gefördert. Bisher gibt es erst vergleichsweise wenig Studien, die die familiäre Pflege im Kontext der gegenwärtigen Pflegepolitiken untersuchen.

Methode: Die sieben Artikel der Special Collection präsentieren theoretische Debatten zur familialen Pflege sowie empirische Studien, die auf international vergleichenden Analysen und Vergleichen zwischen sozialen Gruppen beruhen. Dabei werden quantitative und qualitative Methoden eingesetzt.

Ergebnisse: Auf der Basis einer multi-dimensionalen Perspektive auf die familiäre Pflege bietet die Special Collection neue Erkenntnisse über die institutionellen und kulturellen Rahmenbedingungen der familialen Pflege, über soziale Risiken und Handlungsspielräume, die an die familiäre Pflege geknüpft sind, und über die Konsequenzen des Wandels der Pflegepolitiken für das Verhältnis von Familie, Gender und Pflege.

Schlussfolgerung: Die Ergebnisse zeigen, dass die Erforschung der Entwicklung der familialen Pflege im Kontext von Kultur und Pflegepolitiken und die Analyse der sozialen Risiken und Handlungsspielräume, die mit der familialen Pflege verbunden sind, unser Verständnis für den Wandel der Verhältnisse von Familie, Gender und Care erhöhen.

Schlagwörter: familiäre Pflege, Pflegepolitik, Kultur, Gender, Wohlbefinden, soziale Risiken

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