

Family Supports Between Older Parents and Adult Children in Thailand

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Abstract

The main purpose of the paper was to investigate the manifest family solidarity of older persons in Thailand and to analyze the typology of support between older parents and their adult children using the Latent Class Analysis (LCA). The data from Wave 2 (2017) of the longitudinal panel household survey on Health, Aging, and Retirement in Thailand (HART) were employed for the cross-section analysis.

Results: Three aspects of solidarity revealed that when parents were advanced in age, the solidarity in each aspect or the interrelationship with adult children would tend to increase, in terms of co-residence with children, frequency in contact with children, or the role of sole “recipients” of resource assistance from children. The solidarity indicators had a higher share with the oldest-old parents compared with the young-old and the mid-old parents.

The analysis of LCA revealed the four types of support between older parents and adult children in Thailand were “Detached” “Sociable” “Tight knit” and “Normative.” Overall, filial gratitude towards parents still existed in the Thai society. But behavior might change from the old pattern of children’s assistance and support both in cash and in kind to parents to at least in regular contact with parents or to parents exchanged assistance in kind. This changing behavior reflected the adaptation to the changing society, while familial support to older persons tended to become long-term care. As older persons might relate to many generations of family members, closing the gap between generations should be a policy suggestion.

Keywords: Family Solidarity, Intergenerational Transfers, Older Persons, Thailand

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Introduction

To improve the wellbeing of older persons under the rapidly increased number and share of older population globally and in Thailand are a crucial policy challenge in the 21st Century. Related to the ageing population, the Sustainable Development Agenda of the United Nations with the 17 Sustainable Development Goals (SDGs) indicates that the preparing for ageing population is essential to the achievement of the integrated 2030 Agenda since ageing cutting across the goals on poverty eradication, good health, gender equality, economic growth, decent employment, and sustainable cities and communities (United Nations, 2015, 2017). In the implementation of the agenda in order to achieve truly transformative, inclusive, and sustainable development outcomes, it is important to recognize older persons as the active agents of social development beyond treating them as a vulnerable group. (United Nations Development Programme, 2017).

One important recommendation for the recognition of older persons as such by the UN Madrid International Plan of Action on Ageing (MIPAA) for handling the issue of ageing in the 21st-century and for building a society for all ages was a solidarity of people of different generations and ages in all levels, as well as participation in sustainable development, which would form a foundation leading to the society of people of all ages and resulting in social cohesion. The interaction and support between people of different generations must start at the family level. Likewise, the relationship both formal and informal, between older persons and their surrounding people (e.g., family members, neighbors and friends, and services providers) was one major component to ensure healthy ageing and well-being of older persons to achieve the UN Decade of Healthy Ageing (2020 – 2030) (World Health Organization, 2019).

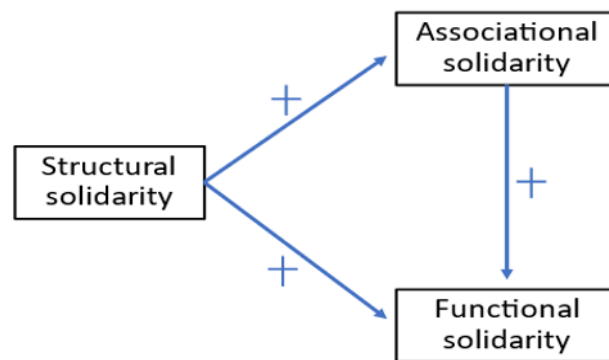
The research study on aging population and generational economy in 17 countries by Lee & Mason (2011) identified three supporting sources of capital for older persons (aged over 65 years), i.e., public transfers, private transfers (family transfers), and asset-based allocations of the older persons themselves. As for Thailand, the main resource for the support of the older persons is family transfers, followed by asset-based allocations. The public transfers constitute a small share.

Based on such reasons, the paper is to investigate the family support system of Thai older persons. The strength of this type of support system was based on the foundation of close relationship or solidarity of the members in the same family which constituted intergenerational relationship. Such a relationship between older parents and adult children was complicated and multi-faceted as there were various theories used to explain the relationship. The paper consisted of two objectives: (1) to investigate the solidarity of the older persons' family in Thailand especially the concrete dimension such as structural solidarity, associational solidarity, and functional solidarity and (2) to analyze the typology of support between older parents and their adult children in Thailand. To accomplish the objectives, the comparison among the young-old (aged between 60 - 69 years old), the mid-old (aged between 70 -79 years old), and the oldest-old (aged 80 years old or over) was conducted.

Solidarity model of intergenerational family members

The conceptual solidarity model in this study was based on the manifest solidarity reclassified by Silverstein & Bengtson (1997) from the original six dimension of the

relationship between intergenerational family members of McChesney & Bengtson (1988). The manifest solidarity was part of the behavior that involved interactions between intergenerational family members. It is composed of associational solidarity, functional solidarity, and structural solidarity. The **associational solidarity** involved pattern and frequency of communication between intergenerational family members, while the **functional solidarity** involved assistance of both givers and recipients between intergenerational family members and exchange of the assistance covering cash and in kind, daily activity care, and psychological support, and the **structural solidarity** involved physical closeness or co-residence of intergenerational family members which impact the opportunity of interactions between intergenerational family members. Figure 1 showed the relationship of the three aspects of solidarity (Rossi & Rossi, 1990).



Note: Revised from Rossi and Rossi, 1990.

Figure 1: Relationship among the three aspects of manifest solidarity

Study methods

The intergenerational relationship in the family solidarity model (shown in Figure 1) depended on the closeness of relationships in many aspects among members of different generations in the same family. The relationship was linked to the exchange of resources between younger family members and older family members. This study covered adult children aged 18 years old or over and older parents aged 60 years old or over. In terms of life-span developmental perspective, the exchange of resources or support between adult-older parent dyads could be both recipients and givers. Therefore, the support was bi-directionality and reciprocity.

To investigate the solidarity of the older persons' family in Thailand, five indicators were used to reflect two dimensions of associational solidarity and functional solidarity. Frequency of contact with children whether face-to-face meetings, telephone calls, or other communicative channels was the indicator for associational solidarity. Four indicators for functional solidarity were exchange of resources with children whether "in cash" or "in kind" and older parents as both "recipients" and "givers." These indicators were further used to analyze the typology of support between Thai older persons and adult children using the Latent Class Analysis (LCA). The analysis was also conducted on the typology of the support of the young-old, the middle-old, and the oldest-old parents.

Data sources

The study employed the available data from Wave 2 of the longitudinal panel household survey on Health, Aging, and Retirement in Thailand (HART)¹ for the cross-section analysis. The HART project involves a bi-annual survey starting with its baseline survey in 2015. The Wave 2 data was collected in 2017 (during January to June 2017). One household member aged from 45 and over from the baseline national representative household samples of 5,616 from 6 regions of Thailand, including Bangkok and vicinity, were interviewed. In Wave 2, the number of panel households or the total respondents interviewed was 3,708 with the response rate of 66.03% (Anantanasuwong, et al., 2018).

The data for analysis in the study were drawn from Part B of the HART database, “Family and Family Transfers: Wave 2 (2017)” and from the COVERSCREEN. The study focused on the data from the respondents aged 60 or over and who have at least one adult children (aged from 18 or over). Thus, the data were screened down to 2,739 eligible respondents with 1,079 respondents (39.40%) classified as the young old aged 60 - 69, 897 (32.75%), the mid-old aged 70 -79, and 763 (27.85%) the oldest old aged from 80 or over.

Study Findings

Family support from adult children to older parents in terms of the three aspects of manifest solidarity were described and the typology of family support yielded by LCA was presented.

Structural solidarity

Intergenerational solidarity is defined as physical closeness or co-residence between older parents and adult children. Whether the parents resided with their children or not would impact the opportunity of interactions and mutual support between members of the same household. The intergenerational solidarity, therefore, would benefit both older parents and their children.

From Table 1, more than half of the older persons co-resided with their children. This was in line with the findings from the Survey of Older Persons conducted by National Statistical Office. The Surveys also provided the trends of the co-residence between 1986 and 2011 decrease on a continuous basis (Knodel, et al., 2013). Compared to other countries in Asia, the share of older persons co-resided with their children would be more serious than that in Thailand. In 1998, 46.6% of the older persons in South Korea co-resided with their children (Park, et al, 2005). In 2006, 48% of the older persons in Taiwan co-resided with their children (Yi & Lin, 2009). In 2012, 37.8% of the older persons in China co-resided with their children (CHARLS Research Team, 2013).

¹ The HART data are kept in a data archive and can be requested from the websites of Center for Aging Society Research (CASR) <http://rc-demo.nida.ac.th/casr/> and NIDA Intelligence and Information Center (NIDA-IIC) http://iic.nida.ac.th/main/?page_id=564

Types of residence	Young-old (60 – 69 years old)	Mid-old (70 – 79 years old)	Oldest-old (80 years old or over)
Co-residence with children			
Resided with children	58.0	59.8	64.7
Did not reside with children	42.0	40.2	35.3
Types of family			
Single family	55.0	50.5	45.1
Extended family	39.9	44.0	51.0
No family/relative	5.2	5.5	3.9
Number of household members			
1	8.3	12.7	13.2
2	26.0	26.0	24.0
3	20.3	19.1	19.3
4	16.3	17.3	17.4
5	12.5	10.7	12.7
More than 5	16.6	14.2	13.3
Average number of household members	3.7	3.4	3.5

Table 1: Percentage of older parents distinguished by types of residence and age group.

However, the share of the older persons co-residing with their children increased with advanced age (shown in Table 1). Especially, the oldest-old parents who had limitations or health problems in terms of seeing, hearing, and moving, they needed assistance from their children, grandchildren, or caregivers in their daily activities of living. In extended family type, the share of living of the older persons increased according to the age groups whereas the share of living in single family decreased due to the death of their spouses, so they had to co-reside with their children and grandchildren instead. As for the number of household members of the older persons whatever age groups, the average members were approximately 3.5 persons. However, as the percentages of extended family tended to increase according to the older persons' more advanced age, and although the number of household members was stable, the composition or type of household members was different. This was in line with the findings from the Survey of Older Persons in 2014 (Knodel et al., 2015).

Associational solidarity

Associational solidarity between older parents and adult children who did not live together was measured through the indicator of frequency in contact and communication, whether visits, telephone calls, letters, email, or others. As shown in Table 2, almost half of the older persons or 41.9%, 42.5%, and 45.9% of the young-old, the mid-old, and the oldest-old parents, respectively, had contact with at least one child who did not live together every day or almost every day.

Contact	Young-old (60 – 69 years old)	Mid-old (70 – 79 years old)	Oldest-old (80 years old or over)
Number of times of contact with children a year			
Almost every day/every day	41.9	42.5	45.9
2 - 3 times a week	11.2	10.2	8.8
Once a week	12.2	10.1	9.9
13 - 51 times	8.1	6.3	6.5
Once a month	10.3	9.7	8.5
< 12 times	12.2	14.5	12.3
Never met	4.1	6.8	8.1
Locations of children's residence (compared with parents' residence)			
In the same subdistrict	12.1	17.4	22.8
In the same district	8.9	13.2	12.8
In the same province but in different district	15.5	16.2	19.1
In the different province	56.8	48.4	42.4
Others	6.9	4.8	3.0

Table 2: Percentage of the young-old, the mid-old, and the oldest-old parents with at least one child who did not co-reside with them distinguished by the frequency of contact and locations of residence

In terms of the distance from the parents' residence of the children who did not co-reside with them, from Table 2 the percentage of the older parents with at least one child who resided in the same subdistrict increased with the parents' advanced age.

Functional solidarity

The functional solidarity could broadly mean the level of exchange of services or assistance between intergenerational family members (Roberts, Richards & Bengtson, 1991). However, in this study, functional solidarity would specifically mean the mutual support between older parents and adult children. The mutual support would include both in cash and in kind, daily activity care, and psychological support. Moreover, from the life cycle perspective, the oldest-old parents who should be "recipients" after having performed main duties as "givers" was focused.

Based on Table 3, approximately 20% of older parents did not have any support with their adult children. The remaining 43-53% of them had mutual assistance with adult children. The share decreased with the parents' advanced age. Similarly, to the support as sole "givers" of the parents in their old age, the shares contributed to approximately 8%, 5%, and 4% of the parents aged 60-69 years old, 70-79 years old, and 80 years old and over, respectively. On the contrary, the parents who were sole "recipients" constituted approximately 18%, 25%, and 30% of the parents aged 60-69 years old, 70-79 years old, and 80 years old and over, respectively. The share of the sole "recipients" would increase with the parents' advanced age.

Directions of support/transfers	Young-old 60 – 69 years old	Mid-old 70 – 79 years old	Oldest-old 80 years old or over
One directionality	25.5	30.0	34.2
1. Parents were sole recipients	17.5	25.0	30.4
2. Parents were sole givers	8.0	5.0	3.9
Bi-directionality with parents as both recipients and givers	53.4	49.0	42.8
No support between parents and children	21.2	20.9	23.0
Total	100.0	100.0	100.0

Table 3 Percentage of the older parents distinguished by age groups and directions of support with children

The directions of support between older parents and adult children were distinguished by the indicators of the structural solidarity as detailed in Tables 4–6 for the young-old, the mid-old, and the oldest-old parents, respectively. The one directionality of the support would consider the perspective of the older parents, namely, “sole recipients” from adult children without giving to them.

For the young-old parents (Table 4), the directions of support distinguished by the number of living children revealed that the bi-directionality support between parents and children increased according to the number of the living children or increase from 51% (one child) to approximately 58% (more than five children) except for having four children. As for the case of no support, the lowest share was parents with two living children or 16.6% with the increase to approximately 20% in the case of having three children and increase to approximately 30% of the parents with four living children or more. The pattern of support between young-old parents and children was not vastly different between co-residence with children and without co-residence with children. Finally, with the division of types of family of the older residents, the share of the residents in extended family (55.8%) having the bi-directionality support with children was higher than the residents in single family (50.9%).

Indicators of structural solidarity	One directionality		Bi-directionality	No support	Total
	Sole recipients	Sole givers			
Number of living children					
1 child	14.4	10.6	51.0	24.0	100.0
2 children	19.6	10.1	53.7	16.6	100.0
3 children	17.2	6.4	56.4	20.1	100.0
4 children	21.0	3.7	45.7	29.6	100.0
5 children	7.9	5.3	55.3	31.6	100.0
More than 5 children	10.5	0.0	57.9	31.6	100.0
Co-residence with children					
Co-resided	17.7	8.3	50.6	23.4	100.0
Did not co-reside	17.4	7.8	54.9	19.9	100.0
Types of family					
Single family	18.2	8.6	50.9	22.3	100.0
Extended family	16.8	7.3	55.8	20.1	100.0
Total	17.5	8.0	53.4	21.2	100.0

Table 4 Percentage of the young-old parents (60 – 69 years old) distinguished by the directions of support and structural solidarity

Table 5 presented the directions of support of the mid-old parents. Considering the number of living children, the bi-directionality support between parents and children tended to increase according to the number of living children, similarly to young-old parents, but increased from approximately 42% (one child) to approximately 54% (three children and over five children) except the case of four and five children. As for the sole recipients of the parents of this age group, apart from the overview where the share was higher than the young-old parents, there was also more systematic change in the number of children or approximately 27% and 30% of the mid-old parents with one child and two children, respectively, who were sole recipients and approximately 21-25% of the parents with three children or more who were sole recipients. As in the case of no support, the pattern was similar to young-old parents. Approximately one-fourth of the older parents in both age groups had no support for children. The lowest share was the parents with two living children or 17.2% or the increase to approximately 21% in the case of having three and four children. However, the mid-old parents with one child had the highest share of no support with their child or 26%. As for the co-residence with children, approximately 28% of the mid-old parents co-residing with their children were sole recipients whereas 23.5% of those who did not co-reside with children were sole recipients. Finally, the share of those residing in extended family (50.6%) and having bi-directionality support with the children was higher than those residing in single family (47.3%). On the contrary, the older residents in extended family would have lower share of sole recipients than those residing in single family (23.6% and 26.6%, respectively).

Structural solidarity	One directionality		Bi-directionality	No support	Total
	Sole recipients	Sole givers			
Number of living children					
1 child	27.4	4.1	42.5	26.0	100.0
2 children	29.9	6.3	46.6	17.2	100.0
3 children	20.6	4.2	53.9	21.2	100.0
4 children	23.8	6.3	48.4	21.4	100.0
5 children	23.7	5.3	47.4	23.7	100.0
More than 5 children	24.6	1.5	53.8	20.0	100.0
Co-residence with children					
Co-resided with children	28.1	5.4	47.3	19.2	100.0
Did not co-reside with children	23.5	4.8	49.9	21.8	100.0
Types of family					
Single family	26.6	4.7	47.3	21.3	100.0
Extended family	23.6	5.3	50.6	20.6	100.0
Total	25.0	5.0	49.0	20.9	100.0

Table 5 Percentage of the mid-old parents distinguished by the directions of support and structural solidarity

From Table 6, considering the directions of support classified by the number of living children of the oldest-old parents, the trend of support of bi-directionality between parents and children decreased according to the number of living children which was contrary to the young-old and the mid-old parents. One important remark was that 26.5% of the oldest-old parents with one child, had bi-directionality support. The share of which was considered extremely low, whether compared with the oldest-old parents with more than one child or compared with the young-old and the mid-old parents with one child (51% and 42.5%, respectively). Moreover, for those with only one child, the no support from the child would be noticeably clear in the case of the oldest-old parents or approximately 37% of the oldest-old parents compared with 24% of the young-old parents and 26% of the mid-old parents. As for the sole recipients of the oldest-old parents, the trend increased with the number of living children except the case with two children. Finally, the support with children of the oldest-old parents did not depend on the co-residence with their children or the type of family.

Indicators of structural solidarity	One directionality		Bi-directionality	No support	Total
	Sole recipients	Sole givers			
Number of living children					
1 child	28.6	8.2	26.5	36.7	100.0
2 children	21.9	3.1	50.0	25.0	100.0
3 children	28.6	4.5	46.4	20.5	100.0
4 children	39.0	4.0	41.0	16.0	100.0
5 children	33.0	4.3	41.5	21.3	100.0
More than 5 children	30.3	2.1	42.8	24.8	100.0
Co-residence with children					
Co-resided with children	27.6	4.9	44.2	23.3	100.0
Did not co-reside with children	31.4	3.5	42.3	22.9	100.0
Types of family					
Single family	28.3	4.7	43.7	23.2	100.0
Extended family	31.9	3.2	42.1	22.8	100.0
Total	30.4	3.9	42.8	23.0	100.0

Table 6 Percentage of the oldest-old parents (aged 80 years old or over) distinguished by the directions of support and structural solidarity

The types of assistance that the older parents received from and gave to their adult children as shown in Table 7 revealed that whether the parents were the young-old parents, the mid-old parents, or the oldest-old parents, almost half or 45.0%, 45.1%, and 46.5%, respectively, received assistance from their adult children both in cash and in kind. The type of assistance received with lower share (14.2% - 16.9%) was in kind only. The lowest share (7.7% - 10.5%) was in cash only. Moreover, approximately one-third of the older parents did not receive any assistance from their adult children during the one year before the survey.

Types of assistance	60 – 69 years old	70 – 79 years old	80 years old or over
Parents were “recipients” of assistance			
In cash	10.5	9.9	7.7
In kind	14.2	16.9	16.4
Both in cash and in kind	45.0	45.1	46.5
Did not receive assistance	30.3	28.1	29.4
Total	100.0	100.0	100.0
Parents were “givers” of assistance			
In cash	4.3	5.7	3.7
In kind	36.0	35.1	36.1
Both in cash and in kind	19.8	12.5	5.4
Did not give assistance	39.9	46.7	54.9
Total	100.0	100.0	100.0

Table 7 Percentage of the older parents who were “givers” and “recipients” distinguished by age groups and types of assistance

In terms of assistance that the older parents provided to their adult children, in the year before the survey, approximately 40% of the young-old parents did not give assistance to their adult children. This share increased to approximately 47% of the mid-old parents and

approximately 55% of the oldest-old parents. The parents of the three age groups gave the assistance with similar shares or 35% – 36% to their adult children in kind only, and approximately 4 – 6% in cash only. The rest provided assistance to the children both in cash and in kind with the shares rapidly decreasing with the parents’ advanced age or approximately 20% of the young-old parents, 12.5% of the mid-old parents, and 5.4% of the oldest-old parents.

Types of support between older parents and adult children

To classify the types of support between older parents and adult children, the five indicators reflecting the two dimensions of solidarity in the older person’s family were used to analyze the typology of support by LCA. The LCA results for the overview of the support of the Thai older persons (n = 2,739) were classified into 4 types of support. Table 8 presented the latent class probability and the conditional probability² of the latent class models that divided the support between older parents and adult children into four types as summarized in Table 9.

Indicators	Types			
	1 n = 1115 41%	2 n = 170 6%	3 n = 792 29%	4 n = 663 24%
Meetings				
Never/rarely	0.322	0.060	0.037	0.036
Often	0.678	0.940	0.963	0.965
Parents gave to children: in cash				
Yes	0	0.459	0.272	0.101
No	1	0.541	0.728	0.899
Parents gave to children: in kind				
Yes	0	0.483	1	0.186
No	1	0.517	0	0.814
Parents received from children: in cash				
Yes	0.022	0.279	0.784	0.670
No	0.978	0.721	0.216	0.330
Parents received from children: in kind				
Yes	0	0	1	0.716
No	1	1	0	0.284

Note: The Conditional probability which exceeded 0.6 were selected to represent the support of each type

Table 8 Results of the analysis of Latent Class Models with four classes: Overview

² The “latent class probability” was similar to prevalence, meaning the share of the elderly with distribution across types/classes of the support. For example, 41% of the total of 2,739 elderly persons had support in the first type. The “conditional probability” reflected the distribution within each class similarly to the factor loading which showed the relationship between the manifest indicator and the Latent class which would be given the “Label.” The support of each type was based on this conditional probability, by interpreting only the conditional probability which exceeded 0.6.

Types of support	%	Definition of Support (Perspective of older parents)
1. Detached	41	Infrequent meetings with children, if at all. No support with children both in cash and in kind (i.e., the older parents were neither “givers” nor “recipients”)
2. Sociable	6	Meetings with adult children occur often. The older parents are “givers” in the relationship and do not receive either cash or in-kind support from their children.
3. Tight-knit	29	Meetings with adult children occur often. The role of the “recipients” of support from children both in cash and in kind; as for the role of the “givers,” assistance provided in kind only.
4. Normative	24	Meetings with adult children occur often. Older parents are “recipients” of support from adult children, both in cash and in-kind. They are no longer “givers” to their adult children.

Table 9 Types and definition of support between the older parents and adult children

From Tables 8 and 9 the type 1 “**Detached**” (the highest number of older people or 41%): The characteristic of the parents in this type was that there were few interactions with their adult children in terms of contact, transfer, or exchange of resources. The type 2 “**Sociable**” (the lowest share or 6% of older parents): The parents in this type would not receive assistance both in cash and in kind from their adult children. On the contrary, the opportunity to give money to adult children was higher than the older parents in other types. The type 3 “**Tight-knit**” (the share of 29% of older parents with adult children): The characteristic of the relationship was that the older parents received assistance both in cash and in kind from their adult children and that the older parents provided their assistance in kind to their adult children. Finally, the type 4 “**Normative**” (constituted 24%): The transfer of resources from adult children upward to older parents with adult children as guarantee in parents’ old age.

The results of the LCA revealed that the model of the four types of support fit the empirical data most. However, the types of support for each age-group of the older parents were different as shown in Table 10.

Older groups	Types of support			
	Detached	Sociable/ Children who refused to grow up	Tight-knit	Normative
Young-old	46	5	28	21
Middle-old	31	27	42	
Oldest-old		46	54	
Total (Overview)	41	6	29	24

Table 10 Percentage of the older parents in each age-group distinguished by the types of support with adult children

- 1) For the young-old parents, the important characteristics of the relationship between the young-old parents and their adult children in the four types were similar as found

in the overall situation except for the “**Sociable**” type. The young-old parents did not receive any assistance from the adult children, they had to give assistance both in cash and in kind to their children even if they were adults. So, this type of support was called “**children who refused to grow up.**”

- 2) For the mid-old parents, the characteristics of the three types of support namely the support of “**Detached**” type with 31%, the “**Sociable**” type with 27%, and the “**Tight-knit**” type with 42%. For the first and the last types, there were similarities in the overall aspect and in the young-old parents. As for the “**Sociable**” type in the mid-old parents, the parents would not receive assistance both in cash or in kind from children similarly to the overall situation and the young-old parents. The difference was in the “givers” whereby the share of the mid-old parents who did not give assistance in cash or any other assistance to their adult children was higher than in the overall situation.
- 3) Finally, for the oldest-old parents, the major characteristics of support were only two types, i.e., the “**Sociable**” type (46% of the older parents) and the “**Tight-knit**” type (54%). The percentage of the last type of support was slightly higher than the first type.

In sum, with parents’ more advanced age, the types of support would decrease from the four types of the young-old parents to the three types of the mid-old parents and to the two types from the oldest-old parents. Two issues were noted. Firstly, the support of the “**Normative**” type in which the older parents were sole “**recipients**” appeared only in the youngest-old parents or 21% of them received support. Compared with the mid-old and the oldest-old parents, the young-old parents should have fewer needs than other ages. Finally, the “**Detached**” type with no mutual support between the older parents and adult children existed in the current Thai society, or almost half of the young-old parents and approximately one-third of the mid-old parents. As for the oldest-old parents, although without the “**Detached**” type, the “**Sociable**” type that the parents were “**givers**” in the relationship without receiving either cash or in-kind support from their children was similar. Only the latter “**Tight-knit**” type constituted more contact with the children.

Conclusion and Discussions

The study used the information from the HART project collected at the end of 2016 to the mid 2017 to analyze the manifest solidarity of the Thai older persons’ families, as well as analysis of the types of the support between older parents and adult children by using the statistical technique of LAC. This analysis divided the sample into 2,739 parents into three age groups.

The findings from the three aspects of solidarity indicated when more parents were advanced in age, the solidarity in each aspect would tend to increase, including the issue of co-residence with children, frequency in contact with children, or the role of sole “**recipients**” of resource assistance from children. The indicators of these aspects of solidarity had higher share with the oldest-old parents compared with the young-old and the mid-old parents. It could be interpreted that with parents’ more advanced age, the status of self-reliance would change to reliance on others especially on children in terms of economic, social, and health aspects. With the physical and mental degradation, needs of assistance and care would increase.

However, from the demographic perspective, the fertility rate in Thailand continuously and rapidly declined after the government's policy of birth control promotion in 1970. So, there might be argument that the oldest-old parents were in reproductive age before the period when the fertility level declined. Therefore, the Total Fertility Rate (TFR) meant the number of children that a woman had during her reproductive age (TFR \geq 6 persons) would be higher than the young-old (TFR \leq 3 persons) and the mid-old (TFR \cong 4 - 6 persons) (Prasartkul, et al., 2011). Therefore, it resulted in higher interaction or support with children due to the higher turnover rate of children. But in considering the directions of support between older parents and adult children namely one directionality, bi-directionality, and no support and by comparing between the older parents of the three age groups with the same number of living adult children as shown in Table 11, it was found as follows.

Number of living children	One directionality		Bi-directionality	No support	Total
	Sole recipients	Sole givers			
1 child	14.4	10.6	51.0	24.0	100.0
	27.4	4.1	42.5	26.0	
	28.6	8.2	26.5	36.7	
2 children	19.6	10.1	53.7	16.6	100.0
	29.9	6.3	46.6	17.2	
	21.9	3.1	50.0	25.0	
3 children	17.2	6.4	56.4	20.1	100.0
	20.6	4.2	53.9	21.2	
	28.6	4.5	46.4	20.5	
4 children	21.0	3.7	45.7	29.6	100.0
	23.8	6.3	48.4	21.4	
	39.0	4.0	41.0	16.0	
5 children	7.9	5.3	55.3	31.6	100.0
	23.7	5.3	47.4	23.7	
	33.0	4.3	41.5	21.3	
More than 5 children	10.5	0.0	57.9	31.6	100.0
	24.6	1.5	53.8	20.0	
	30.3	2.1	42.8	24.8	
Total	17.5	8.0	53.4	21.2	100.0
	25.0	5.0	49.0	20.9	
	30.4	3.9	42.8	23.0	

Note: In each cell, the figures on the first row showed the young-old parents, the following row the mid-old parents, and the last row the oldest-old parents.

Table 11 Percentage of the young-old, the mid-old, and the oldest-old parents distinguished by the directions of support and the number of living children

- 1) With the same number of living children and with the parents' more advanced age, the parents' sole status of "**recipients**" tended to increase and the support of the "**Bi-directionality**" tended to decrease.
- 2) As for the overview of all age groups of older parents, the tendency of the parents' sole status of "**recipients**" did not increase according to the number of living children.
- 3) As in the case of "**no support**" between older parents and adult children, if there was only one living child, the share of the parents with no support with children tended to increase with their advanced age. Moreover, there was a higher risk that there would be no support with the child than older parents with more than one living adult child.
- 4) Finally, for the case of older parents with more than one living adult child, the share of parents with "**no support**" with adult children increased following the number of the living children.

Therefore, parents had more interactions with adult children with their advanced age due to the parents' physical necessity and/or economic reasons more than the fact that oldest-old parents had more children than mid-old parents or mid-old parents had more children than young-old parents. Moreover, the information from HART project in Wave 2 pointed out that considering the support that parents were sole "**recipients**" or in the case of both givers and recipients of "**Bi-directionality**" support, the number of two living children or more did not make any difference in the guarantee of security to the parents in their old age. On the contrary, if there was one living child, the security in old age would reduce. There was also a higher risk of no support with the child than the parents with more than one child. However, this study covered familial solidarity only in physical and concrete aspects of family solidarity.

The analysis of LCA revealed the four types of support between older parents and adult children in Thailand. The quality of intergenerational relationship between parents and children, which reflected the quality of children as well, could be ranked from low to high, namely "**Detached**" "**Sociable**" "**Tight knit**" and finally "**Normative.**" Each type had the shares of the older parents as follows: 41%, 6%, 29%, and 24%. When compared with the study by Silverstein and Bengtson (1997), five types of support were concluded. These were (1) Tight-knit: Adult children had close relationship with parents in all studied aspects, (2) Sociable: Similarly to the first type except performing duties, i.e., no giving to parents or receiving assistance from them in kind, (3) Obligatory: Adult children regularly met with their parents but no close emotions or feelings, with adult children performed their duties, both giving to and receiving assistance from parents, (4) Intimate but distant: Adult children were spiritually close but other relationships were little, and (5) Detached: Contrary to the first type, low level of relationship in all studied aspects. Another study of Yi and Lin (2009) conducted in Taiwan showed five types of support similarly to the study of Silverstein and Bengtson, but with different indicators used in analyzing by the LCA. Firstly, the indicator of solidarity on social norm was added. Secondly, performing duties covered both in cash and in kind. So, the third type was called Normative replacing Obligatory. The other types were similarly called due to their similar characteristics.

There were two differences between this study and the two mentioned studies. Firstly, this study used less solidarity indicators, but the two aspects covered by this study were particularly important and the behavior could be objectively measured. Secondly, the division of the types of support was conducted from the perspective of the older parents. But the two studies were conducted from the perspective of adult children. However, when comparing the types of familial relationship or support between older parents and adult children, similarity could be seen, especially in Taiwan, related as Tight-knit, Normative, and Detached. Although 'Intimate but distant' was an important characteristic due to spiritual closeness, this study did not have the indicator in this aspect.

Moreover, the types of family relationship of older parents in each age group were different. This was an important proof that during our life span, the intergenerational interaction was a dynamic process, depending on resources of children and needs of parents which were different in each age group of the interactive pair, as well as external limitations. These factors were determinants of the transfer of resources between each other. For example, when parents entered the young-old age, children were still at working age with income while parents did not have much need as they could still rely on themselves. The spouses were also alive so they could depend on each other. But if the parents were the oldest-old and the children started to become the young-old who were mostly retired with no income and must

depend on their own children as well, therefore they lacked potential resources to support their parents whereas the parents had more needs as most entered the phase of complete dependence on others. Due to the conditions of children's resources and parents' needs, the intergenerational relationship between the oldest-old parents and children (the young-old) was limited to only two types namely "Sociable" and "Tight-knit." The reason might be because most of the oldest-old were widowed and could not help themselves and so had to live with their children and grandchildren. So heavy burden might rest on the grandchild who had to take care of at least two older persons of two generations, those of parents and grandparents. In the future, the characteristics of the Thai family would increasingly be the Bean pole (many generations living in the same household and family would extend vertically more than horizontally). It is forecast that for the Thai population between 2010-2040, the number and share of the oldest-old per the older people aged 60 years old and over would increase from approximately 1 million or 13% of the total elderly population in 2010 to almost 4 million or 19% in 2040 according to the National Economic and Social Development Council (NESDC). At the same time, the Thais would live longer with increased numbers of dependency resulting in the need of long-term care. Therefore, intergenerational support in family should be considered in a wider perspective, not only between parents and children but also support between grandparents and grandchildren. As older people might relate to many generations of family members, preventions should be made to close the gap between generations.

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