COHORT VULNERABILITY TO LACK OF EXTENDED FAMILY SUPPORT: THE IMPLICATIONS FOR SOCIAL POLICY

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Abstract
Recent decades in New Zealand and other Western countries have seen a move away from state support to increasing reliance on family and oneself. This paper presents a cohort analysis of the potential supply of and demand for extended family support. The four cohorts examined are: (1) those born 1912–16, aged 80–84 in 1996; (2) those born 1932–36, aged 60–64 in 1996; (3) those born 1952–56, aged 40–44 in 1996; (4) those born 1972–76, aged 20–24 in 1996. Family supply variables include average number of children and siblings, marital status, mother:daughter ratio and daughters’ labour force participation. Demand for support includes life expectancy at 65 years, proportions of cohort aged over 65 and over 80, and simultaneous child and parent dependency. Analysis of cohort vulnerability to lack of extended family support is then compared to cohort vulnerability to lack of income support from the state and economic demographic compression. The same cohorts are found to be advantaged or disadvantaged across the different areas of vulnerability. The implications for social policy are then considered in terms of which cohorts are likely to be most in need of support beyond the extended family, and which sector of a mixed economy of welfare is most appropriate to provide this.

INTRODUCTION
Towards the end of the 20th century in New Zealand there was a move away from state support towards increasing reliance on family, including the extended family, and oneself. My recent research based on census data, a random sample survey based in Palmerston North and a review of other research in New Zealand and overseas has investigated the capacity and willingness of extended family to provide support to their members, given changing family structures, increased mobility and changing social attitudes, such as towards the traditional role of women within the family (McPherson 1999, 2000a, 2000b).
For the purposes of this research the extended family was defined as family beyond the nuclear family household of spouses and non-adult children. It involves any biological kin or relatives by marriage, aged 18 years and over. “Social” kin such as adoptees and relatives resulting from de facto relationships were also included where respondents regarded them as family. The types of support investigated included:

- caregiving of children, dependent elderly and chronically ill or injured people
- financial support
- help with household tasks
- social-emotional support.

Using New Zealand census and vital registration data, this paper presents a cohort analysis of the potential supply of and demand for extended family support. The four cohorts examined are: (1) those born 1912–16, aged 80–84 in 1996; (2) those born 1932–36, aged 60–64 in 1996; (3) those born 1952–56, aged 40–44 in 1996; (4) those born 1972–76, aged 20–24 in 1996. Family supply variables include average number of children and siblings, marital status, mother:daughter ratio and daughters’ labour force participation. Demand for support includes life expectancy at 65 years, proportions of cohorts aged 65 years and over and 80 years and over, and simultaneous child and parent dependency.

Analysis of cohort vulnerability to lack of extended family support is then compared to cohort vulnerability to lack of income support from the state, as analysed by Thomson (1991), and economic demographic compression, as per Jackson (1998). The implications for social policy are then considered in terms of which cohorts are likely to be most in need of support beyond the extended family, and which sector of a mixed economy of welfare is most appropriate to provide this.

BACKGROUND

Evidence of government intention to move from state support to increased reliance on oneself or one’s family can be found in various policy documents in the areas of welfare (Children Young Persons and Their Families Act 1989, Shipley et al. 1991, Department of Social Welfare 1996a, 1996b), health (Upton 1991, Shipley and Upton 1992) and education (Education [Student Allowances] Notice, New Zealand Regulations 1997/51), and in commentaries on these changes (Kelsey 1993, Cheyne et al. 1997, Boston 1999a, 1999b, Pool 2000, New Zealand Treasury and Richardson 1991).

For example, in 1991 the Ministers of Social Welfare, Health, Housing and Education in a joint document stated that a major element of their new policy initiatives was “to encourage people to move from state dependence to personal and family self-reliance” (Shipley et al. 1991:17), including, for instance, the continuance of family income testing for single students aged up to 25 years. The 1996 post-election briefing papers on
“strengthening families” and the Children Young Persons and Their Families Act 1989 include the extended family or kinship groups in their concept of family that should be providing support.2

Such policies rely on assumptions about the nature and operation of families that may not be based on the reality of family structures today, or be in keeping with the belief systems of members of our society about the role of the family. These issues are elaborated on in McPherson (1999). While extended families in New Zealand and other Western societies do still function as mutual support systems in post-industrial society, this help is selective rather than automatic (McPherson 2000b). There needs to be more sustained investigation into whether our extended families are able to fulfil their role of support to members in need.

Demographic change means families are smaller and have been through a period of high marital disruption, and the population structure is aging (McPherson 1992, 1993). Geographic mobility is also an issue, physically distancing extended family members from one another. New Zealand research has shown that demands for extended family support are likely to increase at a time when the potential supply is decreasing (McPherson 1993, 2000).

Although the increasing proportion of elderly in the population is compensated for by a declining proportion of young (dependent) people, the nature of youth dependency is changing, resulting in increasing demands from this generation despite falling numbers. In addition, changing patterns of marital status will result in more people without immediate family to depend on and thus increased demands on the extended family (Millward 1997, 1998, Eggebeen 1992, White 1992, Marks 1995 cited in McPherson 2000b). Demand for support beyond the nuclear family may also be increased by increasing numbers in low socio-economic groups, because these families are more in need of support and less able to provide the support resources (Sussman 1988, Liu 1992, Hogan et al. 1993, Millward 1998, de Vaus and Qu 1998). Similarly, increasing income disparities as a result of a decline at the bottom of the scale and an increase at the top (Cheyne et al. 1997, Podder and Chatterjee 1998, Statistics New Zealand 1999a, 1999b) are likely to result in more families with less ability to provide financial support to members in need.

2 Although this coincided with and may have been based on consideration for traditional Māori concepts of whānau, it applied to non-Māori equally, who may neither share that custom nor accept it. Further, demographic changes for Māori (which are not considered separately in this paper) will also affect their ability to practise traditional whānau-based support.
On the supply side, as a result of increasing female labour force participation, it cannot be assumed that women are available to carry out the traditional familist role of caregiving. While increasing numbers of young elderly (aged 60–74 years) may be able to replace younger women in their family support role, they may not be available either if policies such as the proposed private provision of superannuation encourage them to remain in the labour force. The number of adult children that elderly parents can turn to will also decline, and there is likely to be greater geographic mobility, which will result in lack of proximity to family members and thus reduce their ability to provide some key types of support, such as caregiving.

The ethnic composition of the population is increasingly non-European, which according to the literature may result in less, rather than more, family support due to their over-representation in low socio-economic groups. This renders them unable to practise the support networks of their traditional strong familist norms so that they in fact give and receive less family support than European groups (Hogan et al. 1993, Cantor et al. 1994, de Vaus 1996, Roschelle 1997, Millward 1998, Batrouney and Stone 1998). This is also the case for many recent migrants in New Zealand (Rivera 1997, Henderson et al. 2001, North et al. 1999, Trlin et al. 1999, 2001) and elsewhere (Menjivar 1997, Roschelle 1997, Batrouney and Stone 1998, Millward 1998), who often do not have extended family nearby and have difficulty finding employment.

In the social policy arena these factors have implications, for example, for the implementation and outcomes of the Children Young Persons and Their Families Act 1989, which aims to place young people in need of care and protection with their extended family, or whānau. Such placements may need to be adequately fiscally resourced to enable families to provide the care.

COHORT ANALYSIS

Further analysis of trends in demographic variables related to the supply of and demand for extended family support identified variations in cohort vulnerability to high demand for and low supply of such support. The concept of demographic compression, which refers to the compression of major life-cycle events into a shorter period (Jackson 1998) is also useful in this analysis. Jackson shows how the changing timing of important life events is leading to an economic “demographic compression” in relation to family self-reliance for recent cohorts, whose later entry into the labour force and later age at childbearing result in there being few independent years between childrearing and retirement. Yet at the same time these cohorts have a longer life expectancy and thus a longer retirement period to provide for financially.
The demographic compression approach can also be applied in the extended family support area. This concept identifies the disjunction faced by families, particularly middle-aged women, in trying to meet the demands placed on them by different requirements, such as caring for dependent children, caring for elderly parents and, in response to changing implicit policy requirements over recent years, participating in the labour force to contribute financially to their own superannuation and health care, and to their children’s education and health care. This phenomenon was referred to in the 1980s as the “double dependency syndrome” (Menken 1985) and has also been referred to more recently as “the sandwich generation” (see, for example, Faulkner and Michelli 1988).

The model can also be extended to cohort patterns in family support variables. Tables 2 and 3 show cohort variations in the simultaneous demands placed on them, and their family support resources in terms of marital status and children, for four cohorts in New Zealand: those born 1912–16, 1932–36, 1952–56 and 1972–76. In 1996 these cohorts were aged 80–84, 60–64, 40–44 and 20–24, respectively. Table 1 shows the relative sizes (projected for cohorts 2, 3 and 4) of these cohorts at age 80–84 years. The different cohorts are advantaged and disadvantaged in different ways.

**Table 1  Relative Sizes of Cohorts in this Analysis at Ages 80–84 Years**

<table>
<thead>
<tr>
<th>Cohort number</th>
<th>% of total population</th>
</tr>
</thead>
<tbody>
<tr>
<td>C1 born 1912–1916</td>
<td>1.5</td>
</tr>
<tr>
<td>Aged 80–84 in 1996</td>
<td>56,400</td>
</tr>
<tr>
<td>C2 born 1932–1936</td>
<td>1.8</td>
</tr>
<tr>
<td>Aged 80–84 in 2016</td>
<td>72,500</td>
</tr>
<tr>
<td>C3 born 1952–1956</td>
<td>3.4</td>
</tr>
<tr>
<td>Aged 80–84 in 2036</td>
<td>154,500</td>
</tr>
<tr>
<td>C4 born 1972–1976</td>
<td>4.2</td>
</tr>
<tr>
<td>Aged 80–84 in 2056</td>
<td>189,700</td>
</tr>
</tbody>
</table>

The data on which this analysis were based was taken from the New Zealand Census of Population and Dwellings (various years) and fertility data on total fertility rate, completed family size and age of peak childbearing published in Statistics New Zealand’s *Demographic Trends*. The methodology for calculating mother:daughter ratios and percentage of daughters in labour force when mothers are aged 75–89 years is described in McPherson (1993).

**The first cohort** in the analysis, born 1912–16 and aged 80–84 in 1996, represents those who were very elderly at the end of the 20th century. The economic advantages this cohort enjoyed were relatively good. Its members experienced good employment opportunities after the 1930s depression, which affected them in their 20s. As their children became independent at a young age through early labour force entry, this cohort had a long period free of dependent children in which to prepare for retirement, which was relatively short as their life expectancy at birth was, relative to later cohorts, not high. They were also part of a comparatively small group of elderly making low demands on both state and family for support.

In terms of potential extended family support this cohort rates mid-range compared to the other cohorts. To their advantage they had many siblings and low rates of divorce, but on the negative side they had low rates of marriage and high levels of childlessness. As they experienced late childbearing they have a relatively large intergenerational age gap, and thus when they are elderly their daughters are likely to be still of labour force age. As a result, although they have a low mother:daughter ratio, they have a high mother:daughters-not-in-labour force ratio (that is, low potential availability of support). In terms of the demands made on them for family support, while they had few elderly parents and not for long, they were likely to have suffered the “sandwich” situation, with elderly parents coinciding with dependent children, as they had their children relatively late and the age of old-age dependency set in earlier for older cohorts.
Table 2  Timing and Intensity of Key Life Cycle Events, by Cohort

<table>
<thead>
<tr>
<th>Cohort born (age in 1996)</th>
<th>Age enter labour force</th>
<th>Unemployment by age</th>
<th>Peak childbearing years</th>
<th>Age of cohort's parents when cohort's children dependent</th>
<th>Age reach empty nest</th>
<th>Age when exit labour force</th>
<th>Life expectancy after retire</th>
<th>% of cohort aged 65+ when reach 65 years</th>
<th>% of cohort aged 80+ when reach 80 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>1912–16 (80–84)</td>
<td>15</td>
<td>high in 20s</td>
<td>25–34</td>
<td>50–83</td>
<td>40–49</td>
<td>60–65</td>
<td>M:77</td>
<td>9</td>
<td>3</td>
</tr>
<tr>
<td>1932–36 (60–64)</td>
<td>15</td>
<td>high in 50s</td>
<td>23–30</td>
<td>48–79</td>
<td>38–47</td>
<td>60</td>
<td>M:78–79</td>
<td>12</td>
<td>4</td>
</tr>
<tr>
<td>1952–56 (40–44)</td>
<td>15–17</td>
<td>high in 30s, 40s, 50s</td>
<td>22–30</td>
<td>46–77</td>
<td>39–50</td>
<td>63–65</td>
<td>Incr.</td>
<td>16</td>
<td>6</td>
</tr>
</tbody>
</table>

a. Calculated from ages at which 25% and 75% of childbearing is completed (Statistics New Zealand 1999a).
b. Estimated using peak childbearing years of both cohort and cohort’s mother cohort (Statistics New Zealand 1999a), and using age 15 years as upper limit of dependent children because I am concerned more with caregiving than with the economic dependency of children. Thus the cohort born 1952–56 had dependent children from age 22–45 years. When this cohort was born their mothers’ cohort (born 1926–31) were aged 24–31 during peak childbearing years. Thus when this cohort’s children are dependent, the cohort’s mothers are aged 46–77 years (22–45 + 24–32).
c. Calculated from age at peak childbearing plus age child enters labour force.
d. Calculated by taking life expectancy at age 60–65 (Statistics New Zealand 1999a) and adding to age 60–65.
### Table 3: Potential Family Support, by Cohort

<table>
<thead>
<tr>
<th>Cohort born (age in 1996)</th>
<th>% divorced in 40s</th>
<th>% of parents divorced in 40s</th>
<th>% never married by 40s</th>
<th>% not married in 40s</th>
<th>% childless</th>
<th>Average number of children</th>
<th>Average number of siblings</th>
<th>Total children + siblings</th>
<th>Mother: daughter ratio (M:D)</th>
<th>Age of daughters when M age 75–89</th>
<th>% of daughters in labour force</th>
<th>Ratio M:DNLF&lt;sup&gt;a&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td>1912–16 (80–84)</td>
<td>2</td>
<td>Low</td>
<td>9</td>
<td>16</td>
<td>16</td>
<td>2.8</td>
<td>3+</td>
<td>5.8+</td>
<td>0.63</td>
<td>43–64</td>
<td>67</td>
<td>1.9</td>
</tr>
<tr>
<td>1932–36 (60–64)</td>
<td>2</td>
<td>Low</td>
<td>6</td>
<td>12</td>
<td>8</td>
<td>3.5</td>
<td>2.6</td>
<td>6.1</td>
<td>0.59</td>
<td>45–65</td>
<td>57</td>
<td>1.4</td>
</tr>
<tr>
<td>1952–56 (40–44)</td>
<td>11</td>
<td>10</td>
<td>17</td>
<td>11</td>
<td>11</td>
<td>2.4</td>
<td>3.4</td>
<td>5.8</td>
<td>0.78</td>
<td>45–69</td>
<td>49</td>
<td>1.5</td>
</tr>
</tbody>
</table>

Source: derived from McPherson (1992, 1993) and extended using Statistics New Zealand (1999a) and Census of Population and dwellings, various years.

<sup>a</sup> DNLF = daughters not in labour force.

<sup>b</sup> Youngest cohort too young for comparable marital and childless data, so projected trends are reported.
The second cohort, born 1932–36, represents the young elderly aged 60–64 in 1996. This is a generally advantaged cohort in terms of both economic experience and potential extended family support network. Its members experienced a good employment opportunity history until their 50s, retired early, and there are not too many elderly making demands on the state or family when they themselves are elderly. They also have the highest potential extended family support network of the four cohorts, as they experienced low divorce and high marriage rates, a large number of children and low childlessness. They are unlikely to experience elderly parents and dependent children simultaneously, as both generations had early childbearing and thus small intergenerational age gaps. However, this means they are likely to be young elderly themselves when their parents are elderly, which may affect their physical capacity to provide support to elderly parents.

The third cohort represents the early baby-boomers, born 1952–56 and middle-aged at 40–44 years in 1996. The large size of this cohort has been seen as a future problem in terms of its demand for state and family support, but while its members are not as advantaged as the second cohort in this analysis, nor are they as disadvantaged as the younger cohort succeeding them. Economically they had a good employment opportunity history in their entry years, but some of them will have experienced the high unemployment of the 1980s and 1990s during their mid-life years. Although their retirement will be long, they will have a good empty nest period in which to prepare for it, as they mostly had their children young.

In terms of extended family support the early baby-boomers are not as disadvantaged as would be supposed if only considering their high numbers in relation to their children. While they had relatively small numbers of children and increasing childlessness, their level of childlessness is not as high as that of the first cohort, and they have a large number of siblings to expand their extended family network. They have high divorce levels, and an increasing proportion not marrying, but similar to the marriage levels of the first cohort. Rather than the marriage and fertility patterns of this 1952–1956 cohort being something new, they are just reverting to the norm that applied prior to the aberration of the intervening cohorts. Although when they are old they will have a high proportion of elderly in relation to their children, those children will be relatively free of labour force commitments due to the low intergenerational age gap resulting from having their children when young. Nor are they likely to experience the “sandwich” effect when their own parents are old, as they both have had their children young, so the baby-boomers’ parents will not be old when the baby-boomers children are still dependent. In fact, their parents will be young elderly at this stage and potentially available to provide support (for example, childcare).

The final cohort is the post-baby-boomer young adults born 1972–76 and aged 20–24 in 1996. This is the most disadvantaged cohort of all in terms of both economic experience
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and family support. They have experienced high unemployment during their labour force entry years, which has not abated as quickly as it did in the 1930s. They are also undertaking longer and more costly education. Together these extend their period of economic dependency and delay their ability to set up homes and start families.

In addition, members of this post-baby-boomer cohort have a relatively small potential extended family support network, due to high parental divorce, low rates of marriage, low numbers of siblings and trends towards small numbers of children, increasing childlessness and delayed childbearing. Thus they will have a large intergenerational age gap with their children, so that when this cohort is elderly their children are likely to still be in the labour force. Moreover, when they are elderly, with a long life expectancy and thus long retirement period ahead of them, there will also be an unprecedentedly large proportion of elderly making demands on both family and state.

On the positive side, the 1972–76 cohort members are not likely to experience much “sandwich” effect as they have a relatively small intergenerational age gap with their parents. As with the early baby-boomer cohort, their parents are more likely to be young elderly at this stage and potentially available to provide support, such as childcare. However, their parents also have high life expectancy so they may need support for a long time, and there are large numbers of them, although these elderly parents (being the baby-boomers) do also have a network of siblings for support, not just their children.

DISCUSSION AND POLICY IMPLICATIONS

These advantaged and disadvantaged cohorts fit the same patterns as those described by Jackson (1998), Thomson (1991) and McPherson (1992). The young elderly cohort of 1996 (born 1932–36) has benefited from the state (Thomson 1991) and is also low in the economic effects of demographic compression on family self-reliance (Jackson 1998) and high in terms of potential extended family support, as shown above. Conversely the current young generation (born 1972–76) has received little from the state, will have high levels of economic effects of demographic compression on family self-reliance (Jackson 1998) and has a small potential extended family support network.

Thus, the most vulnerable cohort, in both economic and family support terms, is likely to be the post-baby-boom cohort (born 1972–76) aged 20–24 in 1996, not the baby-

3 While Thomson (1991, 1999) does not take his analysis as far as the cohort born 1972-76, this does fit with the general pattern he identifies for younger cohorts compared to earlier birth cohorts, and is also supported by other analyses of cohort shifts, generational pressures and competing dependencies in relation to economic restructuring and education policies which have adversely affected the younger generation (Pool et al. 1993, Pool 1997).
boom. Those who were very elderly in 1996 have levels of disadvantage similar to the baby-boomers in terms of extended family support. The most advantaged in terms of extended family support is the cohort of young elderly in 1996 (born 1932–36).

While the size of extended family networks does not equate directly with whether support will be provided, it is an important factor. Without extended family nearby many types of support, such as caregiving and practical assistance, cannot be provided. Multivariate analysis presented in a previous paper found contact was the prime factor for whether extended family help was provided; this contact was reliant on proximity, which in turn was reliant on number of first-degree relatives (McPherson 2000a). Whether support will be provided when extended family are available is the subject of an earlier paper (McPherson 1999).

These changing demographic patterns clearly have implications for social policies that rely on families to provide a high proportion of support to their members. In turn, the potentially interactive effects of multiple policy areas – such as the need to be in the labour force to provide for superannuation, education and health care – may affect the ability of families to provide support to their members.

While older siblings and the young elderly may substitute for the decline in the availability of adult children and women as providers of family support in the near future, when the post-baby-boom cohort ages the shortage of both adult children and siblings is likely to result in overall lack of numbers available for family caregiving support. This is also the cohort where both mother and daughter are likely to have late childbearing, therefore creating increased possibility of the sandwich effect for their children, where adult children are caring for both the older and younger generation simultaneously. Thus, there is likely to be a need for state services to complement and support the care that the family is able to provide. In addition, the younger cohort is the most disadvantaged in terms of both state and potential extended family support network, so future support for this group may need to come from the state, as they are not likely to have the potential extended family support capacity to meet any increased demand. This will only increase as this current cohort of young adults moves through the life cycle.

The current younger generation have experienced high rates of unemployment and are dependent for longer than previous generations due to increased length of education (Statistics New Zealand 1998) which, together with student debts (Controller and Auditor General 2000), makes them the least able to be economically independent, to own their own home, support a family, and so on (Cooney 1993, Pool et al. 1993, Davey 1998, Schneider 1998, Stone 1998). According to Thomson (1999), Pool (1997) and Pool et al. (1993) they have also received the least from the state/society in terms of income transfers, as have the young families age group.
It is not surprising, then, that at the micro-level of the family, help is found to be so top-down: from the older generation to the middle and younger generations (McPherson 2000a, 2000b). The macro-level imbalance towards the older generation found by Thomson (1991) may be redistributed from the older generation towards the younger at the micro-level. The increasing reliance at the micro-level of the young on the older generation due to divorce, unemployment, etc. may actually be off-setting the macro-level imbalance towards the elderly (see Table 4).

Table 4  Relative Amounts of Help Received from Family (Micro-level) and State (Macro-level), by Older and Younger Age Groups

<table>
<thead>
<tr>
<th>Age Group (micro-level)</th>
<th>Family (micro-level)</th>
<th>State (macro-level)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Young</td>
<td>high</td>
<td>low</td>
</tr>
<tr>
<td>Old</td>
<td>low</td>
<td>high</td>
</tr>
</tbody>
</table>

Attitudinal findings in my study and others support this. McPherson (2000b) found no major attitudinal differences by age, except that the youngest age group has less preference for privately purchased support than older age groups and a higher preference for both family and government as sources of support. In addition, the 1997 ISSP New Zealand survey on the role of government presented in Table 5 shows across-age-group support for increased taxes for health (which primarily benefits the older generation) and education (which primarily benefits the younger generation) and maintaining the level of the old-age pension. These findings do not suggest inter-generational self-interest and conflict. While there may be some caution in the validity of these findings in that the young are under-represented in both surveys, and this may cause bias, the findings are supported by findings from Australia (de Vaus 1996) and the United States (Rossi and Rossi 1990).

Table 5  Attitudes to Government Spending, by Age Group

<table>
<thead>
<tr>
<th>Attitude</th>
<th>18–30</th>
<th>31–44</th>
<th>45–59</th>
<th>60+</th>
<th>gamma</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health: increase spending</td>
<td>83</td>
<td>85</td>
<td>88</td>
<td>93</td>
<td>-0.11*</td>
</tr>
<tr>
<td>Old-age pensions: maintain or increase spending</td>
<td>86</td>
<td>93</td>
<td>95</td>
<td>99</td>
<td>-0.18*</td>
</tr>
<tr>
<td>Education: increase spending</td>
<td>83</td>
<td>84</td>
<td>81</td>
<td>81</td>
<td>0.02 (n.s.)</td>
</tr>
</tbody>
</table>

* p < 0.01, n.s. = not statistically significant
Source: Data from International Social Survey Program on the Role of Government collected by Department of Marketing, Massey University, 1997.
An individualist ethic may have increased at government level as seen in social policies towards the end of the 20th century, but this is not so clear at the micro-level of the family or in the views of individuals. Most people in my study (nearly 90%) thought that, in general, families should help one another, but for many types of help and circumstances this was qualified by “if they are able to”, and “if they choose to” (McPherson 1999). While there is an increasing sense of individual rights within families, especially for women, there is still a strong sense of family obligation, but with a need for state support because the demands on family go beyond their capacity to provide, given their competing commitments to work and the nuclear family, and their own physical and mental capacities (Qureshi 1996, McPherson 2000).

But what will happen to this sense of obligation if policies make it more difficult for the older generation to provide that support at the micro-level of the family – through user-pays superannuation schemes for instance – which will reduce their capacity to support their adult children? As shown above, the younger cohort (aged 18–24 years) already has the least potential family support as it moves through the life course. Policy aims may need to incorporate a shift of some of the responsibility for the young away from the micro-family level and back to the macro-state level. However, any counter policy moves to shift more responsibility for the older generation on to the family are likely to upset the balance shown in Table 4, and thus create intergenerational conflict, which, in turn, will have a negative impact on social cohesion. Walker (1993, 1996) describes the demographic imperative argument for reduction of state support as an invalid cover for neo-liberal ideological reasons, and sees it resulting in an increasing burden on women and families, which they will not be able to meet. This, he argues, will cause inter-generational conflict at the micro-level of the family. If that happens, then the inter-generational social contract4 is in jeopardy.

Most Western societies today practise a mixed economy of welfare, which includes roles for the private sector and the community, as well as state and family. In McPherson (2000b) I concluded, however, that the mixed economy model of welfare as the current model for social policy – whereby state assistance is reduced and the roles of families, communities and the market increased – is not likely to be viable. Recent social policies in New Zealand have been based on assumptions of increased family support, but my research has shown that increased levels of family support are neither available nor acceptable to New Zealanders (McPherson 2000b). The general conclusion of this study

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4 Thomson (1993) and Johnson (1995) argue that the principal ingredients of the generational social contract are trust and consent. Trust refers to the confidence that if you provide now, you will receive in turn when the need arises. At the micro-level of the family the inter-generational contract is built on this trust-based reciprocity, plus familial affection. At the macro-level of society this applies to the support of the young by the adult population who trust that this support will be reciprocated when they become elderly.
was that families cannot meet the needs of their members on their own; families are already doing what they are able and willing to do and government assistance is needed in addition to what families can provide. In particular, the younger generation is the most disadvantaged in terms of both state and potential family support network, so future support for this group must come from the state, as they do not have the potential family support capacity to meet any increased demand.

Community care policies have become care by the community rather than care in the community, with formal state-provided or state-funded services providing a minority of support compared to family (McPherson 2000b). Assumptions that there is a community out there to care have been shown to be erroneous, as community care has translated into family care, mainly by women, and the assumptions that families and women are able or willing to increase their role have been shown in my research to be incorrect (McPherson 1999).

The community alternatives to family are also lacking. Neither the private sector nor other sectors of the community are able to replace the state in providing care where families cannot do so. Numbers available for work in the voluntary sector will decline (Zodgekar 2000), and McPherson (2000b) found very low preference for community groups as a source of support.

Nor is the market or private sector a valid alternative to state services or family support, because, for many, market-based services are unaffordable, and this leads to inequality of access. A New Zealand study of women in the reproductive ages found that extended families are the key providers of childcare (Hope 1997), but McPherson (2000b) showed they are not the preferred source of care. People see regular childcare as too much of an imposition for family, and they want professional, skilled care. They report a preference for private care over family, yet a report on childcare in New Zealand shows that it is too expensive, especially for those most in need (Department of Labour and Statistics New Zealand 1999). This is why the private sector is not a realistic alternative to the state. State funding, if not direct provision, is still needed to provide equity of access to services such as childcare by those who need them.

Thus it is concluded, in line with d’Abbs (1991) in Australia and Graham (1999) in the United Kingdom, that there is a need for adequate community resourcing by the state to fill the gap where the family, the community and the private sector cannot provide. The findings of this study echo those of d’Abbs (1991:128) that “caring about kin does not remove the need for a strong public social services sector”, as the informal sector complements rather than replaces the formal sector due to limited family capacity. Families are not an underutilised reservoir of potential support.
REFERENCES


