

## **Reciprocity and the provision of personal care by adult children to their elderly parents in Mexico.**

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While many elderly parents are able to care for themselves well into late life, most will eventually become needy of personal assistance and rely on help from others. Adult children have traditionally assumed this responsibility, particularly when elderly parents are spouseless. In Mexico, where the infrastructure for public transfers to assist the elderly is lacking, adult children represent an essential support system for frail parents, which makes understanding the determinants of their helping behavior particularly important.

A large body of literature, based primarily on data from developed nations, has considered the factors associated with the care-giving behaviors of adult children. This research documents that patterns and intensity of care-giving depend on a wide range of factors, including health, socioeconomic, cultural, and life-stage attributes of adult child donors and parent recipients. In contrast we know relatively less about the role of reciprocity as a determinant of adult children's helping behavior. This paper extends research on care-giving to frail elderly in developing countries by considering the effects of parental transfers of money and time that took place prior to the provision of help. The second aim of this paper is to consider the possibility that frail elderly parents may themselves be reciprocating the help they have received by providing time or money to the children who previously assisted them.

There are strong theoretical grounds to believe that recipients of prior transfers will be more likely to provide personal care to a frail parent and that parents who have received help, will be more likely to themselves reciprocate to the providers of that assistance. Sociologists and psychologists have underscored the importance of reciprocity in family relations by pointing out that acceptance of inter-vivos transfers creates indebtedness towards the provider and obligations for the recipient. Economists go so far as to imply that the implicit understanding of repayment constitutes a primary motivation for engaging in inter-vivos transfers. Because parental transfers are usually not directed at all their children and because all siblings are not typically involved in care-giving to their frail parents, it is possible to test for the importance of reciprocity in the dynamics of care-giving by adult children to their frail parents.

The idea of reciprocity underlies one of oldest hypotheses for understanding the motivations for intergenerational transfers in developing countries: the parental repayment hypothesis. In a context where there are typically few outlets for saving for later life, the argument emphasizes individual's reliance on transfers from their children

for old-age security received in exchange for their prior investments in their child's education. In Malaysia for instance, the probability that a parent receives money, food or other goods, personal assistance or help with household chores increases with their children's educational attainment. The focus on the effects of parental investment in a child's education likely reflects the fact that they typically represent an important share of parent's incomes in developing countries. However, it has lead researchers to largely ignore the importance of other types of transfer, including the provision of relatively small financial or in-kind support and the provision of time in determining later transfers from adult children to parents in general, and care-giving to frail parents in particular. In addition, the parental repayment hypothesis emphasizes transfers from parents to children that took place *prior* to the transfer from the adult child to the elderly parent, thus ignoring the possibility that parents may be reciprocating for a transfer from an adult child after they have received it.

In developed countries, research on the effects of prior parental transfers on care-giving by adult children has primarily focused on prior *financial* transfers, thus reducing to a single dimension the multiplicity of currencies through which reciprocity of family exchanges can manifest itself. In general, perceived obligations to a parent for past financial sacrifices is associated with a strong increased involvement of an adult child in a frail parent's care.

This study uses data from the first two waves (2001 and 2003) of the Mexican Health and Aging Study (MHAS), a prospective panel study, nationally representative of Mexicans aged 50 and over at the baseline. Spouses or partners were also interviewed regardless of their age and detailed information was collected on all children of the respondent and of the spouse, regardless whether the child was a co-resident of the parent. Because the focus of MHAS is on health and aging in Mexico, detailed information was gathered on whether or not respondents experienced any difficulty with activities of daily living (ADL) and instrumental activities of daily living (IADL). The eligible sample of parents for this study is comprised of individuals 50 and over, with at least one surviving child, who reported at least one ADL or IADL difficulty in the first wave of the survey, and who were still alive in 2003 (N=1,648). Since the focus of this research is on care-giving transfers between adult children and parents, all of their children who were still surviving by 2003 were retained as the eligible sample of children (N=9,101). Parents who had declared being needy of assistance with ADLs or IADLs in 2001 were then asked to identify the individuals who provided them with assistance, if any. It is thus possible to link a child identified as helping with either or both ADL and IADL difficulties in the first wave of MHAS to its' socio-economic attributes.

In addition, MHAS also recorded a rich set of information on transfers of money (both large and small amounts) and of time (at least one hour a week) from parents to adult children before 2001 and between waves. Individual children's care-giving could them be related to whether or not they had received a financial gift or a time gift from a parent prior to the first wave and during the two years between MHAS waves.

I use 2-level hierarchical fixed effect logit models which recognizes both attributes of the parent and of the child. The hierarchical models take into account the fact that children's behaviors are subject to the influence of being grouped within families, with children of a given parent being more alike than children of another parent. The levels correspond to attributes of the child and family traits shared by all children (i.e. attributes of the parent). In the multivariate models, only the intercept is allowed to vary across parents. Since the number of level 2 observations (children) in each level 1 (parent) is relatively small, the parameter coefficients are assumed to be fixed.

Results show that, controlling for whether or not a child co-resided with their parent, the receipt of financial assistance prior to 2001 was associated with an increase in the probability of providing personal care to a frail parent. Adult children were also found to reciprocate for the prior receipt of time from a parent, by engaging in care-giving. However, the magnitude of this latter effect was only about half that of the effect of receiving a financial transfer. On the other hand, parents were not found to reciprocate for the prior receipt of personal care: children who had provided care in 2001 were not found to have increased probabilities of receiving a transfer of money or a transfer of time in the two years following their care-giving. These results indicate that the receipt of personal care by parents does not imply a repayment to the children having provided it, at least not in the years immediately following.