

NEGOTIATING PARENT CARE AMONG SIBLINGS

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I certify that this thesis satisfies all the requirements as a thesis for the degree of Master of Science.

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This is to certify that we have read this thesis and that in our opinion it is fully adequate, in scope and quality, as a thesis for the degree of Master of Science.

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## ABSTRACT

### NEGOTIATING PARENT CARE AMONG SIBLINGS

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This study aims to examine the arrangements of parent care by adult children. To understand how adult children divide and negotiate parent care tasks and responsibilities among themselves, an analysis based on not only interactions among siblings but also on some structural factors such as gender, socioeconomic status (SES) and family composition is employed. The care arrangements are expected to vary in different sibling groups depending on SES and family composition differences. In line with this expectation, sister-sister, sister-brother and brother-brother sibling dyads from low and middle SES groups were selected for in-depth interviews. As a result of this qualitative study, it is noted that SES and gender composition of sibling groups create great impact on both negotiation and division of parent care among siblings. In addition, ‘transformation’ of parent care arrangements is observed to be taking place in both low and middle SES groups. This study has concluded that parent care arrangement is an outcome of complex process including both structural and interactional dynamics, also subject to change over life course.

**Keywords:** Aging, parent care, filial responsibility, negotiation, life course

## ÖZ

### KARDEŞLER ARASI EBEVEYN BAKIMI MÜZAKERESİ

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Bu çalışma yetişkin çocuklar tarafından verilen ebeveyn bakımı düzenlemelerini incelemeyi amaçlamaktadır. Yetişkin çocukların ebeveyn bakımı görev ve sorumluluklarını nasıl bölüştükleri ve müzakere ettiklerini anlayabilmek için, sadece kardeşler arası etkileşimlerin değil aynı zamanda toplumsal cinsiyet, sosyo ekonomik statü (SES) ve aile kompozisyonu gibi yapısal etmenlerin de üstünde temellenen bir analiz kullanılmaktadır. Bakım düzenlemelerinin, farklı kardeş gruplarında, SES ve aile kompozisyon farklılıklarına göre çeşitlenmesi beklenmektedir. Bu beklentiye uygun olarak, düşük ve orta SES kız-kız, kız-erkek ve erkek-erkek kardeş çiftleri derinlemesine görüşmeler için seçilmiştir. Bu niteliksel çalışmanın bir sonucu olarak, kardeş gruplarının SES ve toplumsal cinsiyet kompozisyonlarının ebeveyn bakımının kardeşler arasındaki hem müzakeresi hem de bölüşümüne büyük bir etkisi olduğu farkedilmiştir. Ek olarak, ebeveyn bakım düzenlemelerinin hem düşük hem de orta SES gruplarında dönüşümden geçtiği gözlemlenmiştir. Bu çalışmanın sonucunda, ebeveyn bakımı düzenlemesinin, hem yapısal hem de etkileşimsel dinamikleri içeren karmaşık bir sürecin sonucu olduğu ve ayrıca yaşam döngüsü içerisinde değişime açık olduğu savına varılmıştır.

**Anahtar Kelimeler:** Yaşlılık, ebeveyn bakımı, evlat sorumluluğu, müzakere, yaşam döngüsü

To my beloved grandparents ...

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Historical Footnote: Towards the end of the writing process of this thesis, there were protests for protecting Gezi Park, later extended to quest for democracy going on in almost all over Turkey. Being a part of this group of people who were fighting against the increasing violations of their rights by the existing government was an invaluable experience. Writing a thesis while people were peacefully protesting but dying, getting injured and getting arrested was a very difficult process. Nevertheless, the greatest thanks go to every individual who in some way participated in the resistance and showed their faith in the rightfulness and sustainability of it.

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## **LIST OF ABBREVIATIONS**

SES	Socioeconomic Status
UN	United Nations
TUIK	Turkish Statistical Institute
AKP	Adalet ve Kalkınma Partisi
ADL	Activities of Daily Living
IADL	Instrumental Activities of Daily Living
MFSP	Ministry of Family and Social Policy
TDHS	Turkey Demography and Health Survey

## **CHAPTER I**

### **INTRODUCTION**

The characteristics, needs, rights and problems elderly population have started to get more attention in our period due to ‘population aging’, which is considered as one of the most challenging phenomenon of today’s world, taking place in many countries – both developed and developing ones. The phenomenon of population aging brings about many challenges and these challenges result in greater concern at global, national and local levels. The increase in both the numbers and proportion of the elderly population creates huge burdens on each country’s economic, political and social structure. This fast growing population of the elderly creates concerns about its impact on issues ranging from economic growth to the financing and operation of health care and pension systems (Bloom et al., 2011), from care needs of the elderly to urban planning according to needs of the elderly.

The definition of population aging is given as ‘the process by which older individuals become a proportionally larger share of the total population’ (UN Population Division, 2009). In the contemporary global world, the population 65+ constitutes a considerable percent (11 %) of the total population (Bloom et. al, 2011). More important than that, according to the population projections of the UN, it will continue to increase faster than any other age group.

Specifically two underlying reasons can be stated for the increase of the proportion of older population within almost all countries in the world, at different paces. First of all, people started to live longer compared to previous decades due to the advancement in medicine and hygiene which also resulted

in decreased mortality rates. Global life expectancy at birth rose from 47 years in 1950-1955 to 69 years in 2005-10 (UN, 2013). Secondly, the dramatic decrease in the fertility rates globally causes the proportion of young population to decrease. Currently, global fertility rate is 2.5, almost half of the fertility rate in 1950 which was 5 children per woman (UN, 2011). Fertility rate in some more developed countries fell even behind the replacement level (2.1 children), resulting in negative population growth.

These concerns also exist in Turkey although it still has a relatively young population. However, data from TUIK points to the fact that Turkey is currently aging and will have an aged population in the future<sup>1</sup>. In line with this situation, within the AKP period (2002 -), attention was drawn to population aging and some reforms were made within the country's social security<sup>2</sup> and health care systems<sup>3</sup>, also new elderly care options (ranging from home care to daily care services) are also being introduced. These reforms and new regulations are all in accordance with the neoliberal understanding. This neoliberal understanding is dominant both in the global and national levels and result in privatization and informalization. This neoliberal understanding is apparent as well in the social policy arena in Turkey and leads the way to a shrinking already immature welfare state.

Elderly care is especially given greater concern within the social policy provision of the AKP government. Although there are some steps taken to ameliorate the conditions of formal elderly care services, they are still insufficient and inadequate in terms of meeting the needs of elderly population. Indeed, the family is pointed as the institution where elderly care is expected to be performed by family members. This familialisation of elderly care and also care of the disabled and children is forming the AKP's main orientation in line

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<sup>1</sup> Detailed information about population projections in Turkey will be given in Chapter IV.

<sup>2</sup> This reform has been made in 2008.

<sup>3</sup> A sequence of reforms was made on health care system in Turkey between 2003 and 2008.

with its neoliberal and conservative social policy understanding. The current government introduced new social policy provision in the form of financial help to families in which elderly and disabled care is performed.

Apart from the increasing elderly population and the overemphasis on family within AKP's social policy orientation, family has always been a strong institution in providing welfare to its members. In elderly care as well, the family is the most common care unit for its elderly members in Turkey. It is both the preference of the elderly people and their children that elderly people should be taken care of within their family context. Aging within one's own family is given importance due to these preferences, in National Action Plan on Aging (2007) in line with its international counterpart (2002).

As the population is aging though, the number of older people in need of care is expected to increase. Elderly care might be performed by different family members such as spouses, adult children, grandchildren and other relatives. In addition to older people's spouses, their adult children are an important informal source of care. The role of adult children in parent care is also guided by existing norms of filial responsibility. These norms are based on the basic idea that adult children should take care of their elderly parents in need and these norms have crucial impact on adult children's involvement in their elderly parents' care.

As a result of the increase in life expectancy, adult children are likely to provide care to their parents for a longer period of time. On the other hand, declining fertility rates in Turkey mean that adult children will have fewer siblings to share parent care with. This would eventually increase their burdens and some formal or informal help from outside the family may be considered at this point.

The decreasing capability of families to continue performing the caregiving role to dependent members despite an increasing need and demand of the



elderly population is widely concerned and discussed in Turkey as well as in the world at large. This decreasing capability of the family is due to many reasons; some of them could be changes in the structure of the family, the increase in female labor force participation, economic crisis, downsizing of the houses in urban areas. There is a growing concern on this situation of the family in Turkey, leading only to new social policy provisions in order to support the family both ideologically and financially but also to increasing importance given to this issue in the academia as well.

In Turkey, studies on the elderly population or on the topic of aging are very limited in both number and scope. The existing studies are overwhelmingly focusing on the topic of elderly care, preferences of the elderly about care or attitudes towards institutional care. Although family is the main unit of care for the elderly, comprehensive studies on family caregiving for elderly are also very few. Resembling the situation in Western academia, there is a substantial amount of studies on primary family caregivers of the elderly in Turkish academia as well. However, rather than concentrating on care receiver-caregiver dyad, Keith (1995) suggested that caregiving to elderly people would be better understood by another approach; by including other family members than just the primary caregiver, thus examining the organization of care among these multiple actors. This suggestion is significant in the sense that in multiple-child families, any kind of parent-child relation is embedded within the entire family relations and affected by siblings as well. To focus on one adult child as the sole caregiver to his/her elderly parents would result in neglecting the importance of the whole sibling network as forming the family care system for the elderly.

This study aims to contribute to the relatively new area of aging studies in Turkey by providing a new approach to family caregiving of the elderly. This new approach is to include more family members other than just the primary caregivers of the elderly. In this way, a new understanding which draws

attention to family as a ‘system of care’ in which any contributions or even non-contributions of each family member regarded as crucial is suggested to be employed in further studies in Turkish academia on the topic of elderly care in the family context.

For this thesis, the topic of family caregiving of the elderly has been selected since there is an increasing concern on the question of who will care for rapidly increasing population of the elderly in Turkey. I aim to narrow my attention to the part where adult children are the caregivers of their elderly parents. Instead of focusing on sole adult child as the caregiver to the elderly parent(s), I chose to study the entire sibling network in parent care. While narrowing my focus to this specific part, I formulated my research problem as ‘how adult children negotiate and divide elderly parent care responsibilities and tasks among themselves’. Studying this negotiation of parent care among siblings brings about other questions like how structural characteristics – the number and gender composition and socioeconomic status (SES) of sibling groups affect the ways in which adult children organize the care arrangements for their parents. Another question asked within this study is how interactions among siblings and also other family members shape the division of parent care among adult children.

Within the scope of this study, the main argument is that the outcome of an arrangement of parent care among siblings is reached through interactions between different family members, in this case primarily among siblings. Decisions about the arrangements of parent care are expected to involve negotiations of one’s own and other siblings’ filial responsibilities towards their elderly parents. However, division of responsibilities is expected to be affected by certain variables such as family composition – number and gender composition of siblings and SES of the sibling groups. In this study, the aim is also to reveal the differences in the involvement of siblings based on their gender.

In the second chapter, information about the methodology of the study conducted for this thesis is presented. I will provide the characteristics of the research sample and the details of the fieldwork. The fieldwork experiences during this study will also be mentioned since these experiences might guide the future studies on the same topic. Limitations of the study will be put as well within the second chapter. Lastly, definitions of specific concepts are given.

In the third chapter, I will try to present the theoretical framework of the elderly parent care by adult children. This chapter will start with theoretical discussions on elderly care, family and intergenerational relations in which the place of adult children in parent care will be emphasized. Later, the existing theoretical models on filial responsibility as the normative basis of parent care will be given. After mentioning the limits and conditionality of parent care, different approaches on division of parent care among adult children will be presented.

The fourth chapter deals with the current situation of old age and family in Turkey. General information about the country's elderly population will be given at the beginning of the chapter with the aim of showing the general characteristics of this specific age group. The welfare understanding dominant in Turkey will also be analyzed within the context of social policies for the elderly. After mentioning the current situation of elderly care in Turkey, the relation between elderly and family will be also discussed through existing studies.

The chapter on the results from the field work on parent care dynamics and negotiations among siblings is the fifth chapter. This chapter will give comprehensive and detailed information from the results of the study and will show how a specific sort of division of parent care among siblings is realized through a process of interactions with each other but also affected by some factors like composition of the extended family and SES. The chapter will be constructed around the analysis of inner dynamics of parent care within the

family context, regarding the differences based on SES and gender. In this chapter, an emphasis will be made on negotiations of the responsibilities towards parents taking place among siblings with significant impact of other family members as well.

The sixth and last chapter, which is the concluding chapter, will be composed of a short summary of the study and the presentation of key findings. However, in addition to the analysis of these findings, some arguments and critiques about filial responsibility and dynamics of parent care by adult children will be made as derived from the findings.

## CHAPTER II

### METHODOLOGY

#### 2.1. Research Problem

This thesis tries to understand the care arrangements by adult children to meet their aging parents' needs, negotiations on and division of parent care tasks and responsibilities among adult siblings. The research problem of this study is formulated as how adult children negotiate and divide parent care responsibilities and tasks among themselves. To study this problem, in this thesis a sociological analysis around the key concepts of gender, SES, family composition and human interactions is employed. In this sense, this thesis tries to examine the effects of these independent variables on the parent care system among the adult children within the family. While doing this, it uses some specific concepts which deserve to be explained and narrowed in definition.

#### 2.2. Definition of Specific Concepts

The term '*filial*', as will be used in the concept of filial responsibility, means son-like or daughterly (Matthews, 2002). The concept of filial responsibility, thus, refers to responsibilities of adult children towards their parents.

*Care* will be used in this thesis to cover the activities ranging from emotional support, anticipatory care (things done prior to health problems), health care, financial assistance, transportation, assistance with household chores, home repair, regular monitoring, as well as hands-on physical care (Pyke & Bengtson, 1996). However, visiting and contact through phone or other communication devices are not solely considered as care provision to the elderly.

### **2.3. Research Method**

In this study, exploratory research was conducted to understand inter-family organizations mainly within the sibling subsystem in order to meet the care needs of the elderly parents.

To better analyze this topic, I chose to use qualitative methods. Qualitative methods are regarded to be particularly suitable for this study due to two reasons. First, the subject requires focusing on the interrelationships between family members. Thus, open-ended questions characteristic of qualitative studies enable the interviewees to talk about their interdependent relations within the family. Matthews (1993, p. 160) also asserts that qualitative research “allows people to tell how they are taking one another into account.” Second, the studies on sibling network and their cooperation are relatively new and still limited. In this sense, qualitative methods are useful for the discovery of these new dimensions (Dey, 1999; McCracken, 1988) which are explored within this study.

In-depth interviews were conducted within this study in order to attain people’s own explanations and ideas about their own situations within a detailed manner. The questions are all open ended and during the interviews, questions regarding these topics were asked to the participants: demographic questions about the family of origin and family of procreation, the health status and conditions of the parent(s) alive, the relations with the parent(s) in a life course, the relations with other siblings in a life course, current division of responsibilities among siblings. In total, 50 questions are asked to the interviewees.

### **2.4. Research Field and Sample**

The field research of this study is conducted within the city center of Ankara. Participants were recruited through purposive snowball sampling among the acquaintances of the already interviewed participants. The sample, as

qualitative method is employed, is not aimed to be representative. However, within the sample, equal distribution of both gender and SES differences is regarded.

The universe of the study is defined to be the adult children who have at least one living parent above the age of 65 and a living sibling as well. The health status of the elderly is not controlled since the reason for adult children to take care of their elderly parents is not solely the dependency in this sense. It is accepted that even widowhood solely is a valid reason for adult children to organize to meet the needs of this widowed parent.

It is also hypothesized that dynamics of parent care by adult children would show differences within different SES groups. Studies regarding the class differences are rare in literature and might not be relevant to Turkish context. Existing studies showing the impact of family composition on parent care provide somehow meaningful accounts only for middle SES groups within the sample. The situation in low SES sibling groups is providing a distinct picture which should be analyzed regarding its cultural context.

To reduce the bias of exploring the conditions of an almost homogenous group of people and to increase the diversity, interviewees are selected from different socio-economic status (SES) groups. SES, in this thesis, is employed in accordance with the definition and conceptualization used in the work done by Kalaycıoğlu et al. (2010) in Ankara, except solely focusing on one's education, occupation and employment status<sup>4</sup>. Since this study is also based on the sample from the city center of Ankara, it is found appropriate to use this study's categorizations in this thesis.

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<sup>4</sup> The decision not to include income levels is due to the reason that other siblings' information are taken from the siblings interviewed, so that the reliance on the information about income level of someone by someone else would not be appropriate.

As demographic information about each sibling and parent is taken from each interviewee, SES of other siblings who are not interviewed and also of parents is also determined through the information given by the interviewees. Within the sample of this study, there were little variations of SES among siblings (in one family, elder brother was showing characteristics of having middle SES, while others have apparently low SES; in another one, brother was showing low SES characteristics while his sisters have middle SES characteristics).

Different socio-economic status groups are reached within different neighborhoods of Ankara. The interviewees from middle SES groups were recruited from the neighborhood of Çankaya while the ones from low SES groups are recruited from the squatter house areas of Mamak and Yenimahalle.

The informants for this research are pairs of siblings, 11 sister-brother dyads from mixed gender sibling groups, 2 sister-sister dyads from all sisters sibling groups and 2 brother-brother dyads from all brothers sibling groups. In total, 15 sibling groups that range in size from two to seven and 30 participants were interviewed for the study of this thesis. 7 sibling dyads from low SES neighborhoods and 8 from middle SES ones were interviewed.

The demographic characteristics<sup>5</sup> of these adult children are such as: except two unmarried and one divorced child, all of them are married and all married ones have children. The interviewed children's ages range from 39 to 68; while alive parent(s)'s ages range from 66 to 92. Except one respondent from İzmir (interviewed through Skype), all of the respondents reside in Ankara, although only two families are originally from Ankara. Only in four sibling dyads, both parents are alive and mothers are in a dependent condition. Other than one sibling dyad with a living widowed father, the remaining 10 sibling dyads have widowed mothers to whom they provide care. Only one of the parents within this sample has Alzheimer's disease, two of them have severe health problems

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<sup>5</sup> For further information on demographics of interviewees and their families, please see Appendix A.



leading to their total dependencies. The rest are experiencing a wide range of diseases at different levels or problems limiting their functionality in autonomous living and necessitating some sorts of assistance in daily activities (ADL) or in instrumental daily activities (IADL)<sup>6</sup>.

The field work of this study is done within three months starting in February and ending in April, 2013. Two pilot interviews, with one sister and her brother, were performed prior to formal data collection. The in-depth interviews were semi-structured and all interviews were conducted with the permission of the interviewees. The interviews were conducted either at homes of the interviewees or at some public places like cafes. Some interviewees proffered to come to METU so that I have conducted the interview at several places within the campus. I tried to interview the siblings from the same family immediately following each other. In some cases though, this was not possible due to the schedule of some respondents.

The duration of the interviews were ranging from 30 minutes up to 70 minutes depending on the answers the interviewees were providing. All of the interviews were tape-recorded after getting the permission of the interviewees by ensuring them about the privacy of their personal information. During almost all interviews, there was another person, an undergraduate student, other than me and this person was taking notes. These notes were useful in the sense that after the interviews, some details were checked by us together to make a general analysis of the sibling dyad.

## **2.5. Field Experiences**

During the field research, I encountered some difficulties and also interesting situations which in turn contributed to my experiences as a researcher. For example, while the interviewees were well informed about the purpose of the

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<sup>6</sup> ADL are self-care activities such as bathing, dressing, feeding, personal hygiene and toilet hygiene. IADL include housework, managing money, transportation, home establishment and maintenance, and so on.

study and ethical standards, some of them were reluctant to direct us to another sibling of theirs. Actually, one of the interviews is not included within this study since the interviewee did not give us the contact information of any of her siblings.

On the other hand, the interviewees, especially from the low SES neighborhoods were very willing to direct us to other families who would also want to participate in this study. This great and growing interest in us within these neighborhoods created some differences for the proper conduct of the interviews. During the interviews taking place in Mamak, for instance, people from other houses came to see us and this created a problem for creating privacy for the interview.

Being a female researcher helped me in this study in the sense that I easily entered almost every house and none of the household members seemed to be disturbed by my presence. One of the interviewers from low SES neighborhoods accepted my request of the contact information of his sister only because 'I am a woman'. He also warned me not to bring any man with me to the interview with his sister.

The difficulty of talking with a strange person about his/her intimate relationships with siblings and parent(s) has been overcome through sharing my mother's own experience with a similar situation to theirs. Some of the interviewers talked more openly after learning this information and they told me that now they could understand why I am doing research on this specific topic.

## **2.6. Limitations of the Study**

As present in all studies, there are certain limitations of the study in this thesis as well. Due to limitations on time and resources used for the study of this thesis, the sample had to be small in size and the field work done in Ankara. Other than that, only two siblings (not all the siblings) from each family were

interviewed. This is mainly due to the fact that there are families with six children in this sample and having more children is considered to be an important factor of impact on parent care. Nevertheless, talking with all these siblings was impossible due to the geographical dispersion of siblings, availability or willingness of each sibling to participate in this study and also time and resource restraints.

This impossibility of talking to all siblings is also related to the fact that initially one sibling would accept our request for participation and then, she/he gives us the contact information of his/her any other sibling if there is more than one. This situation also created another limitation to the study that, in most cases, the adult child preferred to only give the contact information of his/her sibling with whom he/she is on good terms. In addition, siblings who are disassociated from the parent care system could not be included in this study since the first interviewed child did not think about nor want him/her as the first sibling to participate in the research. Siblings in other cities, except one, were not also interviewed since there was almost no possibility of conducting face to face interview.

Although children-in-law are also found to be included into the parent care system, they are not directly interviewed. Since this study bases itself on the dynamics of parent care among siblings, only siblings with blood ties are targeted. This situation creates a limitation for the study because all the information about the involvements of children-in-law are received from the children and also the demographic information about all children-in-law are not acquired – except the ones married to the interviewed children.

Elderly parents are not included in the sample with a reason. Although they have an incredible impact on whole arrangement of parent care, references to their preferences by their children are regarded as sufficient. This is mainly due to the deteriorated health status of some parents, as Alzheimer and dementia, or just the advanced age of some create many problems in continuing a healthy

interview with them. As my experiences from my previous studies with the elderly showed, it is difficult to get the attention of the elderly concerning the topic.

Lastly, since the fieldwork of this study is done in an urban setting, it is possible to argue that the situation of the elderly care in rural areas would show a totally different picture. Although SES differences are regarded, ethnicity as another independent variable which can be expected to have significant impact is not examined within the scope of this thesis as well.

Still, in further studies, I suggest and also have my own research with a broader analysis by the inclusion of other actors such as parent(s), other siblings and even sons-in-law, daughters-in-law and grandchildren to attain a better understanding of the family care system for the elderly.

## **CHAPTER III**

### **THEORETICAL FRAMEWORK OF ELDERLY PARENT CARE BY ADULT CHILDREN**

Care is a subject matter of an interdisciplinary area including research from social sciences, social policy, social services and also bio-medical sciences. Any attempt to approach this topic from the perspective of a specific field encounters with the problem of drawing boundaries between somehow intertwined arguments, discussions and assumptions originating from several fields. Nonetheless, in this thesis, sociological explanations are sought to the question of how adult children divide parent care tasks and responsibilities among themselves.

In this thesis, the conceptualization of elderly parent care by adult children as having its basis on the societal expectations of filial responsibility and a support mechanism within the intergenerational relations is employed from a sociological approach. This is why I am trying to understand how decisions about care arrangements are made within a family network to study the division of elderly parent care among adult children. Before passing to the basis of elderly parent care, limits and conditionality of parent care and division of parent care among siblings, brief information about family, intergenerational relations and elderly care will be given in the upcoming part.

#### **3.1. Family, Intergenerational Relations and Elderly Care**

Family is considered to be a primary unit of service throughout the phase of life cycle as Brody (1978) points out. Numerous studies have shown that

family is the first source of support for their elderly members. The importance of the extended family members for the well-being of people in their old age period has also been frequently stated.

The myth of a past when the extended families were more common and intergenerational relations were stronger compared to today, is proved to be groundless by historical studies of many family sociologists. In line with this myth, reports of the decreasing importance of the extended family are also widely accepted as premature. Family sociologists have shown that the contemporary 'modified extended family' system (Greven, 1970) maintains the intergenerational relations in contact and cooperation (Hareven, 1995). This modified extended family means that even though generations do not prefer to live together anymore, multiple generations provide assistance to each other whenever needed.

In the long history of family research, solidarity and conflict theories are widely used to understand the intergenerational relationships within the families. While the supporters of the solidarity model try to explain the personal relations between the generations from a more harmonious and peaceful perspective, others criticized this model because it neglects the conflictual nature of these relations. Although Bengtson et al. (2002, p. 571) makes it clear that solidarity model 'is not only focusing on the positive aspects of family relationships but provide a dialectical understanding'; this model does not focus on the conflicts within the intergenerational relations as the conflict model does.

Connidis (2001) argues that the potential for conflicts is higher for the families today not due to decreased love and understanding for family members but because the demands and expectations got higher compared to yesterday. A third model on intergenerational relations arises from this aspect of the current families. Lüscher and Pillemer (1998) argues that intergenerational relations can be better conceptualized as their ambivalent character due to coexistence of

opposite sentiments and competing demands characterizing the relations today. In this sense, conflict and solidarity take place together in the existing intergenerational relations (Connidis & McMullin, 2000; Lüscher & Pillemer, 1998).

These intergenerational relations, in whatever form they are, are becoming increasingly important in the lives of people due to longer longevity. As a result of demographic changes, the ‘verticalisation’ of family structures (Bengtson, et al., 1990) which means the prevalence of families with at least three, sometimes four and even five living generations is increased.. From the life course perspective, the intergenerational relations in the elderly people’s family are seen as a culmination of lifelong patterns of exchange (Bengtson & Allen, 1993). Although these exchange patterns are acknowledged to take place between generations, the main focus in the old age period is often on the side of what adult children do for their parents. Children actually provide a broad range of help to their older parents, from emotional support to extensive, long term hands on care. The reciprocity model assumes that children’s support to their elderly parents is a pay back to parents’ past sacrifices. This idea is supported by the norms of filial responsibility (which is going to be discussed below).

No matter how ambivalent the intergenerational relations become in contemporary families, studies revealed that adult children continue their contact and relationships with their elderly parents, also provide assistance to them despite the geographical distances (Lin & Rogerson, 1995). Adult children as providers of any form of support to their elderly parents are important actors in the lives of elderly people. In terms of intergenerational support in the form of elderly care, the *hierarchical compensatory model* (Cantor, 1975) points to the fact that the caregivers of older people are expected to be the spouses first and then comes the adult children – daughters more likely than sons – and children-in-law.

Although expectations and statistics are clearly pointing the adult children second most likely caregivers of the older people, the foundation of parent care by adult children will be examined theoretically next. In this part of the thesis, I will try to discuss the normative basis, motivations and circumstances of parent care and approaches on the division of parent care responsibilities among the adult children.

### **3.2. Norms of Filial Responsibility<sup>7</sup> as the basis of Parent Care by Adult Children**

For several decades, social scientists have been concerned with the topic of ‘filial responsibility’. There is wide range of reasons for their interests in the topic depending on the discipline in which it is discussed. Still, the underlying reason behind the interest on filial responsibility comes from the concerns about the declining importance of traditional norms and values within the new generations, especially in societies which are subject to radical change (Herlefson et al., 2011). This change is seen as also a potential of affecting the perception of young generation about their duties towards their aging parents.

*Filial responsibility* is a term defined as the combination of obligations or duties to protect, care for and support aging parents by the adult children (Schorr, 1980). These filial responsibilities are named by Burr and Mutchler (1999) as ‘duty to one's parents and one's children to provide financial support, engage in personal contact, share living arrangements, help with household tasks, and provide assistance with meeting daily needs’. It has a normative basis which also connotes that it is formed on the basis of an expectation of being assisted by the adult children at older ages. Normative basis of filial responsibility is actually seen as originating from the broader concept of ‘familism’ (Parrott & Bengtson, 1999). Familism is seen as a form of

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<sup>7</sup> In the literature, one can come up with a bunch of work on ‘filial obligation’ or ‘filial duty’ used as equivalents of ‘filial responsibility’. To avoid any kind of confusion, I will use the term ‘filial responsibility’ throughout this thesis.



understanding in which the interests of the individual are subordinated to the interests of the family group and they are obliged to construct long lasting ties with their families (Heller, 1970; Steidel & Contreras, 2003).

Filial responsibility norms are culturally variable – as in some societies, the duty is attributed also to other relatives than the children – and also subject to change through time (Keller, 2006). Throughout different societies, what is exactly expected from the adult children as their duties towards their elderly parents differs in terms of content but also in terms of its implication in this specific society. In some countries, there are filial responsibility laws which mostly have civil enforcement but some of the applications include even criminal penalties for adult children<sup>8</sup>. These modern laws originated from the Elizabethan Poor Laws from 1597 to 1601, but the understanding of the responsibility can be traced back to the third century (Byrd, 1988).

The moral basis of this responsibility exists in almost all societies' moral and religious codes ranging from Christian to Islamic, from Judaism to Confucian (Aboderin, 2005). The moral imperative of filial responsibility puts on the adult children an obligation to respect and honor their elders through regarding their welfare till their death.

Filial responsibility as a norm has been subjected to theoretical discussions in which answers for the question of what forms the basis of the obligations towards parents by the children are sought. These discussions led to several theoretical models which are to be analyzed in the next section.

### **3.2.1. Theoretical Models on Filial Responsibility**

The first theoretical model on filial responsibility is based on the understanding of *reciprocity* (Blieszner & Hamon, 1992). Within this model, why children

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<sup>8</sup> The last example of these criminal penalties comes from Pennsylvania, U.S. See the news for the Pittas case [http://abcnews.go.com/Business/pennsylvania-son-stuck-moms-93000-nursing-home\\_bill/story?id=16405807#.UZ3k-rX0FMQ](http://abcnews.go.com/Business/pennsylvania-son-stuck-moms-93000-nursing-home_bill/story?id=16405807#.UZ3k-rX0FMQ)

have obligations toward their parents is explained by the idea that parents have done so much for their children throughout their lives. From the childhood on, parents have provided from nurturance to education, from material to immaterial means in life to their offspring. In return, based on the idea of reciprocity, children have to do something for their parents. This argument of owing something to the parents in return of their past sacrifices is argued to be a moral belief “that is entrenched in our moral framework and has been passed on through generations” (Van den Hoven, 2006, p. 44).

The argument of indebtedness of adult children to their parents as the basis of filial obligation also leads this framework to be named as *debt theory* (Keller, 2006). Since adult children are expected to do something in return of their parents’ past sacrifices, they are pictured as debtors. As debtors, the adult children are put in a position of taking loans from their parents till the age when the parents need the payment back. The payment, then, has to be equivalent of what is given before so that the debt is discharged.

The view of filial obligations based on reciprocity is subjected to many criticisms from several scholars (e.g. English, 1979; Wicclair, 1990; Keller, 2006; Schinkel, 2012). Firstly, as English (1979) puts it, the prerequisite of a debt is a requested favor from someone and to discharge a debt, debtor has to return the favor with an equal one. Past parental sacrifices cannot be formulated as requested favor and it is difficult for children to respond to these sacrifices in an equal manner. Wicclair (1990), on the other hand, sees the problem of this model as the unpredictability of when the debt would be regarded as discharged. He, instead, claims that what children owe to their parents is not a debt but a gratitude which is not based on the determinacy of how much received but on the needs of the receiver.

Keller (2006), in response to Wicclair, points to the problematic nature of owing gratitude. He claims that filial obligations require more than the feeling of gratitude since feeling does not necessarily turns into a form of action. As

stated “filial duties are direct duties to help, respect, please or benefit parents” (Keller 2006, p. 259) while the feeling of gratitude only requires to be shown as appropriately in return of a benefit.

Schinkel (2012) points to the voluntary basis of the parental past sacrifices which cannot be the equivalent of what adult children would do in return since a child does not have a chance to choose. He indicates the existence of choice in parental obligation since the parents accept to fulfill the needs of the child when they decide on giving birth. On the contrary, the child does not have a word on being born. The reciprocity paradigm fails in this sense since the child does not voluntarily sign for filial obligation (Schinkel, 2012).

One of the other criticisms of reciprocity model is that the actual needs of parents in advanced ages are seen by this model as no different than what children owe them in return of their fulfilled needs (Collingridge & Miller, 2007). As there is a high probability of parents facing severe conditions of health problems and economic difficulties in their old age, it puts higher burden on children to fulfill their needs. Equivalence of what is given and taken is broken in this situation which puts the basic idea of reciprocity into danger. Returning back what you get from your parents is also problematic in the sense that even if you got less from your parents during your childhood and adulthood, your filial obligation would not diminish. In the case of poor parents, this is seen obviously that although they were able to give little to their children, in their old ages, they need a lot of assistance and the children mostly take care of their needs since the parents cannot afford to buy services from the market (Goodin, 1985).

The second explanation on the roots of obligations of adult children to their parents emanates from *friendship* model. In her critique of the idea of ‘indebtedness’ within in the reciprocity model, English (1990) claims that children do not feel obligated to their parents on the basis of a duty to pay their debts back but on the basis of love and concern about the other’s well-being

like in friendship. In this model of hers, she focuses on the current relationship between the parent and the child, not on the past sacrifices. Still, she also accepts the idea that current friendship between the adult children and their parents also stems from the past sacrifices of parents (English, 1990).

Dixon (1995) criticizes the model of friendship by acknowledging that children experience the feeling of obligation to parents even when their current relationship is not based on love and concern – not very friendly in that sense. He tries to extend the argument of friendship model by saying that people have some duties even to the former friends and for the sake of old times, adult children may still have the feeling of being obligated toward their parents.

The friendship model is accused of missing the distinct nature of the relationship between children and parents by equating it to friendship (Stuifbergen & Van Delden, 2011). The most stated difference is that in friendship, two persons engage in a relationship voluntarily while in parent-child relationship, this is not the case. In addition to the nonexistence of choice in parent-child relationship, the parties in this relation do not stand as equals as friends and do not have the independence as they have in a friendship (Collingridge & Miller, 1997).

A reply to this criticism comes from Dixon (1995) again. His claim is that the friendship model does not see parent-child relationships as friendships; what the model actually asserts is that both relationships bring about similar duties in their moral dimension. Dixon (1995) emphasizes the importance to “recognize a multiplicity of types of friendship”, which enables to see the parent-child relations as “genuine friendships nonetheless” (pp. 81–82).

Secondly, as Keller (2006) puts it, the relationship with friends depends on the choices both parties make and also these choices change through time. So since the friendship is a dynamic relationship open to change, so do the duties emerging from it. However, although parent-child relationship is also open to

change, the filial duties do not disappear at all for the children as Dixon (1995) also accepts. Although one can get out of a friendship with someone else and resign from the duties to him/her, resigning from the filial duties is not as simple and unproblematic at all.

Different from the previous models which focus on the nature of the parent-child relation to explain filial obligations, third model approaches filial obligation as stemming from *the needs* of the parents. While Goodin (1985) introduces the principle of helping the vulnerable, Miller (2003) builds his reinterpretation of Kant's principle, 'beneficence'<sup>9</sup>.

To start with Goodin's vulnerability, he shows the roots of special obligations of adult children to their parents in their vulnerable situation, "precisely because their parents are most vulnerable to them; and the most important component of their vulnerability is emotional rather than material" (Goodin 1985, pp. 88–89). Kittay (1999) objects to the principle of vulnerability since a third person may also be vulnerable to someone's action but it did not put someone in a position to fulfill the needs of this third person.

Miller's (2003) argument focuses on the issue that the need of elderly parents puts the adult children into an obligation to act on the duty of beneficence. This view is objected because Kant's duty of beneficence applies to anyone in need since all people are morally equal, so this does not explain the special nature of obligations to parents. In response, he makes the difference between the needs of anyone and needs of parents by saying that the parents' needs are more present than any other one's needs to individuals (Miller, 2003).

The needs-based model is mainly criticized because of the fact that the existence of a need of parents does not necessarily address the adult children as the ones who have to fulfill these needs (Collingridge & Miller, 1997).

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<sup>9</sup> See Kant, I. (1971) *The Doctrine of Virtue. Part II of the Metaphysic of Morals*. Translated with an introduction and notes by Mary J. Gregor. Philadelphia, University of Pennsylvania Press

Although, the needs of parents would be meaningful to their adult children and children would feel an obligation to fulfill these needs, still the question of why they would do so is left unanswered within this model.

The fourth theoretical model is *conventionalist* model which makes a resemblance between the character of filial obligation and a special obligation arising from the ‘promise’ (Sommers, 1986). Sommers (1986) starts with criticizing the deontological and utilitarian theories of reciprocity and needs-based models on their inability to accommodate the special duties as filial ones into their explanation. She also accuses the friendship model as being sentimentalist and neglecting the impersonal nature of the expectations of filial obligations.

She, instead, sees special positive obligations, such as filial obligations, as arising from a moral domain where there is an interaction between a moral agent and moral patient<sup>10</sup>, like in the case of a transaction between promising and being promised. This type of interaction gives way to conventional expectations such as the promise will be kept (Sommers, 1986). In her understanding the promise within the parent-child relationship is that adult children would be “grateful, loyal, attentive, respectful and deferential to parents” (Sommers, 1986, p. 447).

The first critique of the conventionalist model problematizes Sommers’ efforts for equating the obliging nature of the promises with the conventional expectations. The assumption as children returning back the past favors of their parents on the basis of expectations is also criticized. It is claimed that children feel obligated to their parents not because of the expectations of parents but because of what parents had actually done (Stuifbergen & Van Delden, 2011).

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<sup>10</sup> She uses Warnock’s terms. See Warnock, Geoffrey J. 1971. *The object of morality*. London: Methuen.

Another point of criticism on conventionalist model comes from Collingridge and Miller, on the ground that this model ‘confuses *special institutional* duties with *agent-relative* duties’ (1997, p. 127). They accept the fact that the role of parent, like other institutional roles, gives way to special institutional duties. According to them, although the conventionalist model makes a great attempt to understand these special institutional duties – which cannot be accommodated in the reciprocity and needs-based models – still, it fails to acknowledge the fact that in parent-child relations, obligations are between particulars. Unlike an obligation of any other institutional role, like a teacher to student, filial obligations have a personal character that the conventionalist model misses in its explanations (Collingridge & Miller, 1997).

According to the last theoretical model, filial obligations are seen as stemming from the *special good* of parent-child relations (Mills, 2003; Keller, 2006). Apart from the previous four theoretical models which are widely discussed in the literature, the special goods model is relatively a new one. This model considers an intrinsic value within the parent-child relation and forms the basis of its arguments on filial obligation on this intrinsic value. This model takes a different stand from the other ones in a sense as Keller comments:

One of the reasons why the prevailing accounts of filial duty fail (...), is that they try to explain it by analogy, saying that being someone’s grown child is just like being in someone’s debt, or the recipient of someone’s benevolence, or someone’s friend. But being someone’s child is not really like any of these things (Keller, 2006, p. 264).

This ‘special goods’ model bases its argumentation on the unchosen nature of all family relationships including the parent-child one. Although in the criticism of friendship model, it has been stated that the children cannot chose their own parents, this model sees this situation as current for the parents too. Mills (2003) explains it as parents mostly make the decision of having a child, however, they cannot decide on to whom they will be parents. No matter who

this child turns out to be, whatever character s(he) attains, parents still love the child just because s(he) is their child. Therefore, the unconditional love stemming just out of the relation of a parent to child and also of child to parent regardless of their choices and characters distinguishes this relationship from any other (Mills, 2003).

Both Mills and Keller's formulations of filial obligation focus on two goods (Keller) or two ends (Mills) that arise from this specific relationship. Keller's (2006) distinction of these two goods is as: the generic ones are those which can also be attained from other relationships of a person while the special ones can only be obtained within the specific relationship. The special goods of parent-child relationship are defined as the sense of belonging to a family, the value of having a child or a parent, having a connection to a wider family network of other relatives (Stuifbergen & Van Delden, 2011). According to Mills (2003), since these special goods can be obtained only within this relation and nowhere else, both parties have to continue providing these goods to each other. These goods, then, within this model are conceptualized as immaterial ones as contact and interest to each other. Still, it fails to explain the material exchanges within the definition of filial obligation.

### **3.2.2. Commitment to Filial Responsibility**

Filial responsibility, as a social norm, is accepted to denote the general expectation about children supporting their older parents in need (Cicirelli, 1990). Norms of filial responsibility do not directly refer to the expectations of a specific child's behavior, rather specifies duties and obligations as a part of the social role adult children hold with respect to their aging parents (Silverstein et al., 2006). In this sense, norms of filial responsibility could not by themselves predict the actual support adult children provide to their parents. There are some studies which show that the expressed norms can be predictive of both intentions to provide support and actual support (Bromley & Blieszner, 1997; Silverstein & Litwak, 1993). However, actual support by the adult



children to the older parents is more related to a child's feeling of obligation to a parent rather than by normative filial responsibility expectations (Stein et al., 1998).

Felt obligation is conceptualized within a relational approach in a sense that adult children must exert the norms of filial responsibility in the context of their own relationship with their parents (Finch, 1989; Stein, 1992). Therefore, the concept of filial obligation is more open to negotiation of commitments which emerge from the context of family and gives the adult children more autonomy to decide what things they do and do not in their relationships with their parents (Stein et al., 1998). In addition, felt obligation is seen as associated with the other constructs of the parent-child relationship than the filial responsibility is. The experiences within parent-child relationship are commonly cited as another relational concept affecting the level of felt obligation for the adult children.

Although personal report of felt obligation is stated as more important than the normative filial responsibility expectations, it is also accepted that through *socialization*, the personal motivation is derived from the general norms (Stuifbergen, 2011). Development of both expectations and attitudes about the obligations is discussed to take place in the socialization process and through life-long personal experiences they face with little change only due to some situational circumstances (Goldscheider & Lawton, 1998).

Adult children's personal statement of commitment to the obligations is found to be related to the provision of certain types of support. Silverstein and Litwak (1993) stated that there is a stronger connection between higher levels of filial obligation and the likelihood of the provision of instrumental support rather than emotional support by the children to their elderly parents.

The main factors affecting the development of commitment of a specific child are found to be varied by gender of the child and who the recipient is (Finley et

al., 1988). Children report stronger feelings of obligation to give assistance to their parents than parents-in-law or stepparents (Finley et al., 1988; Lawton et al., 1994; Lee et al., 1998). Stein's (1992) findings show that women report higher levels of felt obligation than men. Differences in the levels of felt obligation are also on the basis of ethnicity (Freeberg & Stein, 1996) but not on the basis of social class (Stein, 1992). Levels of felt obligation by the adult children are in the same time connected to the marital status of the parents. For example, adult children with widowed parents feel more obligated to them while obligation is lower for the still married parents (Stein et al., 1998).

Adult children already providing assistance to their elderly parents are observed to have a stronger sense of obligation than those who are not in such a position (e.g., Bromley & Blieszner, 1997; Rossi & Rossi, 1990). This situation is explained as stemming from an effort of creating conformity between one's behaviors and perceptions (Finley et al., 1988). In the same respect, whenever the actual provision of support to the elderly parents cannot be realized due to some limitations, children lower their perceptions of felt obligation (Bromley & Blieszner, 1997).

Expectation of inheritance is also cited as a reason for certain adult children in their commitments to filial responsibility. Quite contrary to the obligation based on the past sacrifices of parents, expectation of inheritance inhibits the idea of financial reward as a reciprocal answer by parents to children's provision of assistance.

Some scholars approach children's expectation of inheritance as a response to their caregiving efforts within the understanding of 'reciprocity' (Sussman et al., 1970). Economists go further and claim that parents use inheritance as a strategy for making their children's assistance certain (Cox & Rank, 1992; Cremer et al., 1992). In some societies actually, which child will get the inheritance is clear to all members of the family that inheritance as a future reward puts the responsibility of taking care of the elderly parents to this

specific child but not others. Karlikoff and Spivak (1981) accept this contractual nature of inheritance as certainly guaranteeing the provision of care by the children.

Silverstein and his colleagues (1995) found some differences between daughters and sons in levels of their motivation by the expectation of inheritance in the case of parent support. Their findings show that expectation of inheritance does not predict support from daughters while for sons, inheritance is a strong motivator for supporting their fathers. These differences are explained in terms of sons' inclination towards utilitarian aspects of caregiving compared to daughters' inclination towards altruistic nature of the act. This kind of essentialist explanation may be impartial in understanding the structural factors behind gender differences. In patriarchal societies sons are more likely to be assigned as heir of inheritance than the daughters and this assignment may leave the daughters no choice but to accept it and the motivation from the expectation of inheritance would not even be an option for the daughters. Still, there is a need for more culturally comparative studies on this topic.

### **3.3. Limits and Conditionality of Parent Care by Adult Children**

#### **3.3.1. Characteristics of Adult Children and Elderly Parent(s)**

There are some characteristics of the children which influence their likelihood of providing care to their parents. Marital status and geographical proximity are the ones which are mostly counted within these characteristics (Himes et al., 1996).

The marital status of adult children has been listed as an important factor on providing assistance to the elderly parent (Brody, 1981; Stoller, 1983). Some studies suggested that formerly married or never married children are more likely to undertake caregiving responsibilities (Ikels, 1983; Stoller, 1983).

Others have indicated the reason why never married children participate more in caregiving activities is that they are more likely to co-reside with parents and co-residence puts them in a position of higher levels of participation (Soldo & Myllyluoma, 1983).

In the existing family caregiving literature, geographical proximity has been identified as a primary predictor of parent care (Litwak & Kulis, 1987). Finley and her colleagues (1988) found that just by living far away from the parents, sense of filial obligation diminishes. It is not only practical assistance or help with daily activities that are affected by the proximity. Similarly, Walker & Thompson (1983) asserted that contact is also diminishing since the intimacy between the adult children and parents is mostly affected by the geographical distances. Although predictable, since the most proximate children are the ones who co-reside with their parents, co-residence increases the amount of personal care given by the children compared to other siblings living elsewhere (Soldo & Myllyluoma, 1983). Certain forms of assistance like the financial one is less sensitive to geographical distance (Lee, 1979; Litwak & Kulis, 1987; Rossi & Rossi, 1990). However, it is suggested that in times of crisis or severe health problems of parents, geographical distance does not prevent children to be involved into intense care. Still, these situations are less than regular care arrangements which are definitely affected by the geographical dispersion of each child.

In addition to the characteristics of children, some of the characteristics of parents may be also relevant in predicting certain aspects of caregiving to parent(s) (Lee et al., 1993). These characteristics primarily include marital status, socioeconomic status, dependency level and health status of parents.

In accordance with the hierarchical compensatory model, it is firstly the spouses from whom assistance is expected in old age. This explains the situation that married elder people are less likely to receive assistance from their children, both financial and psychical. In some cases, when spouses are

also in need of assistance, children may get involved into the care provision to the married elder parent. However, women are more likely to be widowed because of their longer life chances than men, so widowed women are more dependent on their children and receive more help from them (Hess & Soldo, 1985). Even when they do not need intense care, adult children keep an eye on their mothers just due to their solitude.

The socioeconomic status of the elder parents also creates huge impact on the receipt of care from their children. Riley and his colleagues (1968) argue that elders at higher socioeconomic status prefer to live an autonomous life and be fewer burdens on their children. This in turn decreases the assistance they receive from their adult children. They are also more likely to look for formal assistance or other arrangements for meeting their needs.

Lastly but most importantly, the health situation and dependency level of the elder parents affect both the likelihood and amount of assistance they receive from their adult children (Cicirelli, 1981; Stoller, 1983). The amount of impairment and dependency increases the amount of practical assistance and assistance with the daily activities from the adult children. But since poor health brings about many financial constraints too, financial assistance is also more likely to be received from adult children.

### **3.3.2. External Resources of Adult Children**

External resources of adult children like income and support from partners and children have been also influencing the amount and type of care they provide to their parents.

Although income of the adult children is found to have little effect on the decision of providing different types of care, Gerstel and Gallagher (1994) assert that higher wages of adult children give them the flexibility of reducing their work hours in order to separate more time for their elder parents. In

addition, higher household income gives the household members the option of choosing between reducing the hours of their paid work or purchasing care from the private market (Henz, 2006). It is predictable that greater socioeconomic status of the adult children means greater flows of material resources towards their parents (Goldscheider & Goldscheider, 1989). Mostly among the siblings, it is the well-off one who is mostly in charge of the financial well-being of the elderly parents in need. Lastly, higher income reduces the burdens of assistance to the parents on adult children, since they can afford some services like home maintenance and transportation from the market.

Support from other members of the family, especially from partners but in some cases also from children counts as resources adult children have. This support is positively related to the adult children's provision of care to parent(s). This support can be both direct and indirect in the sense that other family members can directly help the adult children in the care provision to the elderly or indirectly help the caregiver adult children to decrease their burdens (Bass et al., 1988; Stoller & Pugliesi, 1989). In the case of female adult children, it is important to get their husbands' support, at least emotional and indirect, to be able to continue assistance to the parents. Also the grandchildren may facilitate their parents' provision of care to their grandparents by back-up assistance especially within the household chores. In the case of sons, direct support from the wives helps them undertake the full caregiving responsibility of the parents, especially in assistance to the daily activities. Sons are more likely to rely on the support of their own spouses when providing care (Horowitz, 1985).

### **3.3.3. Competing Obligations of Adult Children**

Diverse roles of individuals may conflict with each other when the demands from any one of them inhibit the efficiency in another role. Since most of the adult children are within their mid-life at the time their parents are in need of

assistance, the role conflict has a high probability to occur. Other obligations competing with filial obligations are found to be coming either from child's family of procreation or from employment. The reactions to the conflictual nature of competing obligations from different domains of life vary also regarding the gender of the child. These competing obligations are also found to be used as legitimate excuses during the negotiation of responsibilities among the siblings (Finch & Mason, 1993; Connidis & Kemp, 2008)

Sandwich generation (Miller, 1981) is a term which refers to the middle-aged adults who are caught between the obligations towards the family members both from younger and older generation. Delayed childbearing among the new generations will probably increase the likelihood of being 'in the middle' (Brody, 1981) when they are at their middle ages. Although men and women are equally likely to be members of the sandwich generation, most of the studies focus on 'sandwich' women rather than men since intensive care to both parents and children are mostly performed by women. As a result, being caught between the demands of both generations is more likely to be experienced by women rather than men.

Provision of sufficient time and equivalent amount of resources to both generations is a very compelling situation for the middle-aged adults. Whenever there is limited time and resources, middle-aged adults mostly make a decision of assisting only one generation. From the previous research by Wolf and his colleagues (1999), it is found that old generation is less likely to be favored compared to young, since norms of filial responsibility to children are more strict and clear than norms of filial obligation towards aging parents. Still, prioritizing the young generation depends on factors like the age of the children and their dependency levels both psychically and financially. Otherwise, when the demands coming from the children decline as their age increases, middle-aged adults are more inclined to canalize their resources to their aging parents.

Family solidarity theory proposes an alternative scenario by claiming that there are differences among families in terms of commitment to intergenerational exchange and solidarity. Stronger solidarity patterns within some families result in providing assistance to both generations rather than deciding to favor only one of them (Silverstein et al., 1995). These families manage their time and resources in a way that the obligations towards both generations do not compete with each other. One way of doing this is co-residence with the aging parent(s) so that time management is easier and resources are divided equally among the members of the extended family.

Another competing obligation situation is experienced by the adult children when both parents and parents-in-law are in need of assistance at the same time. Rossi and Rossi (1990) emphasize the importance of this situation as:

Far more prevalent than coping simultaneously with help to elderly parents and children among middle-aged couples may be coping with crises in the lives of both sets of parents...or the widowed mothers of both the wife and the husband (p. 503).

On this issue of competing obligations for both sets of parents, there are two hypotheses on the outcome of this conflictual situation. The assumption of the *kin hierarchy hypothesis* is that, since the parents are higher in the kin hierarchy, having parents-in-law in need will not detract the adult child from being involved into the support network of parents. On the other hand, the *juggling hypothesis* suggests that, although priority is always given to one's own parents, there will be circumstances in which competition in both directions exist (Lee et al., 2003). It could be argued that there are several factors – like cultural values, socioeconomic status of the family – affecting which of these scenarios would be more appropriate when demands of assistance come from both sides.



Conclusion of research by Spitze et al., (1994) is on the side of biological parents as being more likely than in-laws to receive support from the adult children. Still, many other studies show that daughters and daughters-in-law are providing same amounts of assistance with activities of daily living of the elderly (Merrill, 1993; Long et al., 2009). Still, Brody (1990) states that daughters-in-law are mostly becoming the caregivers of their in-laws based on a sense of obligation to their husbands, not based on an emotional bond with them. Shuey & Hardy (2003) consider the importance of women as primary caregivers in deciding which side's parents will be cared. In their explanation, since it is mostly women who perform care, it will be the women's lineage which would benefit from the family's resources. However, they still acknowledge the fact that women are not sole decision makers on this issue. If the husbands are active participants in the planning of support provision and if they decide on giving support to their parents, the women more occasionally end in assisting both their parents and parents-in-law (Shuey & Hardy, 2003). It can be argued that it is mostly a situation of competing obligations for women rather than men, still which obligation will override the other is not an individually made decision, couples both have a say on it instead.

Conflicting nature of labor force participation and care given to the elderly parents, especially for the case of women, is abundantly documented in the literature (Barr et al., 1992; Pavalko & Artis, 1997; Scharlach & Boyd, 1989; Wolf & Soldo, 1994). These studies mostly focused on the effects of caregiving on employment in the form of absenteeism, unpaid leaves or quits. Whether employment affects the likelihood of giving assistance to the parents is a topic less studied within the literature. Those which focused on this topic reached to the conclusion that employment, in and of it, do not appear to diminish caregiving (Moen et al., 1994; Scharlach 1994). This impact of employment on caregiving varied based on gender of the child. While employment creates negative effect on the amount of time men spend on parent

care, in the case of women, the negative effect diminishes (Spitze & Logan, 1990).

Duties of employment as competing with the parent care are forming a controversial issue also based on the type of the employment concerned. Time and effort consuming jobs like manual ones, with fixed schedule put children in a position of either not being able to provide intensive assistance to their parents or quitting their paid work to be able to perform their duties. Other options are to reduce the hours of work, take unpaid leave or rearrange work schedules (Stone & Short, 1990). However, more flexibility as in part-time employment or self-employment enables the children to make arrangements to assist their parents.

The gender of the child makes a big difference in the context of employment. Women are found to report their employment as a 'legitimate excuse' of not being able to provide assistance to their parents less than men do. Employed women are found to provide as much as assistance as non-employed women (Stoller, 2002). Women are more likely than men to rearrange or reduce hours of work or take unpaid and paid leave to be able to provide assistance to their parents.

Although all these competing demands create some constraints on the ability and willingness of adult children for provision of care to their parents, there is also some evidence suggesting that children provide assistance regardless of their competing commitments such as employment, children at home or marital obligations (Abel, 1986; Spitze & Logan, 1990).

### **3.4. Division of Parent Care Among Siblings**

In the literature on parent care by the adult children, most of the studies have often focused on one adult child as the sole provider of care to elder parent(s) and have neglected the bigger family context of this caregiving process. As

opposed to this situation, it is also argued that it is more appropriate to take family as a care system since several family members are involved into the caregiving activities (Keith, 1995). Several researchers argue the importance of the research on the provision of parent care to examine the role of all adult siblings of an old parent(s), namely the sibling sub-system within the family (Schvaneveldt & Ihinger, 1979).

This model of sibling sub-system of care starts with an assumption that care decisions are made within the context of an extended family; each sibling does not only take into account the parent's needs and his/her own circumstances but also actual care behaviors and characteristics of other siblings (Wolf et al., 1997). Troll (1994) points to the situation that even when it is one child who takes the whole responsibility, there are other siblings who have an input on decisions and always involved in the caregiving process by blaming or praising the caregiver's acts.

Adult children provide parent care in various forms. In some families, this is done via a 'sibling network' in which more than one adult child share the responsibilities while in some other families one adult child takes almost all responsibilities on his/her own. Merrill (1997) warns that network does not necessarily means that the share has to be equal as each child taking equal amount of work; instead there are mostly great variations among siblings in terms of their contributions.

Matthews & Rosner (1988) identified five different styles of sibling participation based on their qualitative research on provision of parent care by siblings. These five different styles are routine, back-up, circumscribed, sporadic and disassociation. *Routine style* is a regular assistance to the elderly parents as incorporated into the child's ongoing activities. *Back-up style* denotes the type of regular assistance given when the sibling providing the routine assistance asks for. *Circumscribed style* is participation which is regular and predictable but bounded. *Sporadic style* is the kind of assistance

based on child's own convenience. *Disassociation*, lastly, is total absence from the undertaking the filial responsibility.

Matthews (1987) examined how siblings divide the labor of parent care among themselves and she came up with four different patterns: no one helping; all helping equally; unevenly divided, with all helping; unevenly divided with not at all helping. These different patterns are found to be related to the family composition, especially the gender composition of the siblings and the number of siblings. Matthews (1987) also found that the presence of some siblings not providing any help or only providing back-up care is related to the larger family size and presence of male siblings within the family. Matthews & Rosner (1988) also observed that the joint participation only takes place within sister dyads.

Keith (1995) also suggested a typology of this time three sibling caregiving types. The *primary sibling caregiving system* is the one in which one sibling takes almost all responsibility with minimal collaboration among sibling. In *partnership type*, at least two siblings contribute equitably in the parent care responsibilities. Last one, *team approach*, requires participation of multiple siblings in the parent care system. These differences are due to the family values according to Keith (1995). She asserts that siblings who collaborated in parent care valued equity more than others.

Apart from these structural explanations, there are several approaches on the division of parent care responsibilities among adult children. In this thesis, three approaches are taken into consideration: feminist approach, interactional approach and life course approach.

### **3.4.1. Feminist Approach to Division of Parent Care**

The division of parent care responsibilities among siblings is obviously gender-based. Siblings are observed to use gender as a criterion to divide parent care

among themselves (Hequembourg & Brallier, 2005). There are a lot of studies in the literature showing that female adult children are more likely than their male counterparts to spend more time and provide emotional, psychical and personal care to their parents. Men mostly step into undertake especially the personal hands-on care responsibilities when no female relative is available (Hooyman & Gonyea, 2008). This gendered nature of the division of family care is forming one of the significant feminist discussions on care. In this part, while it is used as feminist approach, socialist feminist perspective is referred to.

Carework is regarded as a gendered work not only because it is mostly performed by women but also the construction of it is realized around gender (Twigg, 2004). Division of parent care among siblings is influenced by the same cultural understanding of how the division of household tasks among husbands and wives should be realized. In this sense parent care is seen as a 'family labor' to be divided along gender lines among different family members. This division of labor in the form of parent care is regarded to be in accordance with the traditional gender roles (Hequembourg & Brallier, 2005). In this sense, division of parent care is another case where gender creates 'socially constructed structural, relational, and symbolic differentiation between men and women' (Hooyman & Gonyea, 2008, p. 152).

Feminists scholars see the roots of gendered division of family care within 'the cultural assignment of unpaid domestic production to women that emerged historically from the relationship between capitalism and patriarchy' (Stoller, 2002, p. 59). Gerontologists who focus on the gender differences in division of parent care miss these power relations inherent in this activity as well. They rather try to understand the reasons behind women's 'choice' to become the primary caregiver in most cases. They mostly come up with 'de facto' selection of women for the caregiving role which basically shows that women seldom become caregivers out of their own choices. This decision is an outcome of

interplay of power relations based on gender among family members as well. For instance, while men's employment might be easily seen as a constraining factor on his involvement in care, women are mostly expected to quit their jobs or arrange their working conditions to be able to perform care. While women's productivity in the labor force is seen as less valuable compared to men's, their direct assignment to unpaid domestic production is realized regardless of their inclusion into production outside the home.

Feminists see it as important to take care as unpaid work in understanding the gendered division of family care. They offer redefining the traditional concepts of the work so that the nurturing and caretaking activities of women become more visible (Hooyman, 1989). If we do not take care as unpaid work, the efforts and time spent by women in care activities towards any family member are becoming insignificant.

Although women have started to participate in the labor market in higher levels than ever before with industrialization, changes within the structural division of labor within the family pointing women as the provider of care to family members face some obstacles from work organization. Occupational segregation and wage discrimination also reinforce the existing care arrangements between men and women. The differences between the sexes in terms of wage levels and occupations, in turn, affect the 'choices' of men and women in terms of allocating the paid and unpaid work among them (Stoller, 1994). They do not see these choices as free from the structural constraints coming from the labor market and also from the patriarchal structure.

In feminist approach, it is also acknowledged that with increased life expectancy, there will be almost no stage for women where they would be free of potential caregiving demands coming either from their own children or elderly parents (Hooyman & Gonyea, 1995). These never ending demands on women throughout their life span, in turn, result in deterioration of their health and economic status gradually. Gender-based inequities in care arrangements

prevent women from acquiring their economic independence and also results in higher risks of poverty across their life course but especially in their old age (Arber & Ginn, 1995; Calassanti & Hendricks, 1993). In this sense, gendered nature of division of care causes women to be more dependent in their old age particularly on their family members, who are mostly women and this situation creates a vicious circle of both caregiver and care receiver to be women again.

Gender-based inequities in care arrangements causing women to be left outside the labor force are clearly related to the role of welfare state and social policy. As Kandiyoti (1995) states, the role of women as caregivers to children, sick and elderly family members is perpetuated by the absence or insufficiency of public welfare provisions. In countries where public welfare provisions are weak or absent or existing social policy orientation is based on 'familialisation' of formal services including care services, the gender inequality is perpetuated by the role of the state. Rather, social policies which would encourage the responsibilities to be shared between men and women equally and which would promote female employment with equal conditions to male employment (Minguez, 2012) are needed to decrease gender inequality in both public and private sphere. Especially, the significance of family policies is undeniable in this sense. Moreover, care services for children, disabled and elderly have to be provided in order to emancipate women from its caregiver role and competing obligations of family and work.

Feminist approach criticizes the dualistic approach of socialization on gendered nature of division of parent care by showing the inappropriateness of using dichotomies as women's expressiveness versus men's instrumentality (Stoller, 2002). As it is argued, the invisibility of men in the domain of family care is neither a reflection of their 'natural' emotional distance from other people nor the result of their preferences arising from socialization. It is rather cultural gender based expectations within the society, directing men to refrain from any type of activity considered as 'women's job' as in the case of care. As a result,

the division of parent care among siblings is done through assigning tasks which are defined to be more 'feminine' like personal care or emotional care to women, while more 'masculine' tasks like home maintenance or financial care.

Socialist feminists also accuse psychoanalysis feminists for providing the ideology for reinforcing the inequitable division of family labor in the form of defining caring as women's natural task related to their attachment and empathy for others before themselves. Williams explains this as:

Domesticity not only bifurcated the work of adults into a women's sphere of the home and men's market out of it; it justified that reorganization through new descriptions of the 'true natures' of men and women (Williams, 2000, p. 23).

Although socialist feminists accept the fact that different types of motivations towards care by women and men are internalized, they acknowledge that there is a belief system which gives way to these motivations in order to justify structural inequalities based on gender (Stoller, 2002). In this way, structural inequalities causing women to be predominantly visible in care activities become less visible. Women mostly become a caregiver or take the most part of the tasks in the division of care out of a choice and see the reason behind this division as their different motivations compared to their brothers.

Socialist feminist perspective is criticized on the basis of overemphasizing the structural impact on actions, either as constraints or facilitators (Risman, 1998). These structural analyses of gender are found to be over deterministic. This perspective is criticized as missing the point how men and women create and produce these structures, they are accused of their argument as if these structures are 'given' and unchangeable.



### **3.4.2. Interactional Approach to Division of Parent Care**

In response to more structural explanations of feminist approach for the division of filial responsibilities among siblings, interactional approach concentrates on human interactions. In this sense, this approach provides what is missing and criticized in feminist approach – how human interactions also produce the structures. By Connidis and Kemp (2008), negotiations taking place in human interactions are seen to be a product of the relationship between individual agency and social structure.

According to interactional approach, the autonomy of defining the situation and attributing some subjective meanings to it enables the individual to negotiate the values and norms which are seen as stable and deriving from socialization. Rather, there are social processes in which individuals create temporary and socially constructed relations which are more open to change and negotiation (Mutran & Reitzes, 1984). In this approach, each individual is regarded as active in determining his/her own action with reference to other people's reactions. As a result, through human interaction, these individuals reach to a common understanding about what a particular action of others and of themselves would mean. In this sense, since the division of parent care tasks and responsibilities among siblings involve interaction among family members, interactional approach is crucial to understand how siblings reach to an outcome of a specific care arrangement through interactions with each other and to analyze how these interactions would mean to each other.

There are still very limited studies which employ interactional approach to understand the topic of elderly parent care by the children. An interactional approach to this topic would be useful in understanding how adult children deal with their responsibilities towards their elderly parents and how they negotiate their role expectations (Mutran & Reitzes, 1984). The caregiver role acquisition is a result of interactions between the caregiver and care recipient but also with other members of the family. Thus, caregiver role acquisition

process involves attribution of different meanings to expectations and roles of the adult children and of the elderly parent and also negotiation of these meanings, responsibilities, commitments and possible outcomes. Thus, the variations in the experiences of individuals with the acquisition of caregiving role can be understood within the interactional approach since it better conceptualizes about the importance of interactions and negotiations of individuals with other members of family.

Interactional approach also helps us to understand that meaning and distinctiveness of each role are acquired through the interplay with other roles played by the individual, thus any role does not come with predetermined rights and costs in itself (Lindesmith & Strauss, 1956; Merton, 1957; Turner & Shosid, 1976). This would be a good explanation about why some adult children report higher levels of burden resulting from primary caregiver role for the parent, their counter roles to caregiving role may affect their definition of the situation and meanings they attribute to their roles. Siblings' perception about each other's contributions is also based on these meanings attributed to the roles and also expectations from each other. Still, these meanings and expectations are also open to discussion which forms the part of negotiations of commitments among siblings as Finch and Mason (1993) draws their arguments on.

Each sibling gives different meanings to caregiving tasks ranging from helping the household chores to practical assistance to the elderly, from emotional support to financial one. Experience of providing care to elderly parents is based on the symbolic meanings attributed to these tasks (Stoller, 2002). These meanings would enable or prevent any sibling from doing it. For example, the meaning attributed to doing household chores may prevent sons from performing it. Importantly, there are arguments within the literature that lower presence of men's involvement in parent care is due to the feminine definition of what counts to be caregiving (Matthews & Heidorn, 1998). Since the

threshold of women's contributions is so high, any contribution of men is regarded as almost nothing. But studies still prove that sons are doing less than daughters even when their contributions are also counted. In addition, meanings attributed to the relationship with parents, their needs and self-definition of one's own responsibilities have great impact on what an adult child does and what s(he) does not. Sons' approach to parent's situation is mostly about maintaining their independence and autonomy (Matthews & Heidorn, 1998). As long as the parent is able to continue his/her life autonomously, although precariously, sons feel no need to intervene. This different approach to the needs of parents, the definition of the needs and understanding of when a child should intervene also create the gender-based differences within the division of parental care responsibilities among adult children.

Within the scope of this approach, it is asserted that care arrangements among siblings are a result of continued negotiations about the responsibilities of each sibling. As Silverstein et al. (2008) argues,

Most studies that examine division of labor in caregiving do not consider the perspectives of those who actually divide and provide care and consequently, cannot directly consider the interpersonal dynamics that underlie negotiations among adult children (p. 73).

As Finch (1989) and Finch & Mason (1993) uses in their studies, the concept of 'negotiation' is drawn from symbolic interactionist view in the sense that the actions regarding the responsibilities emerge from interactions among the members of the family. They argue that,

People's behavior cannot be explained by saying that someone is following a set of pre-ordained social rules... (*nor*) by the position which he or she occupies in the social world. Explanations which rely on the idea of following rules, or on the idea that action is determined by structural position in a rigid sense, leave little room for manoeuvre by individuals (Finch & Mason, 1993, p. 60).

Siblings do not only negotiate their own responsibilities towards their parents but also other siblings' responsibilities. The negotiation process of the responsibilities towards elderly parents with other siblings would be seen as a result of ambiguous and fluid nature of term 'filial obligation'. Norms of filial responsibility only provide an understanding of what adult children should do for their elderly parents and parents' expectations from their adult children. There is almost no clear guidance for the adult children on how to divide these filial responsibilities towards parents among themselves. This situation puts adult children to constantly negotiate their own and other siblings' responsibilities towards their parents in addition to their other responsibilities in other domains.

The form of negotiation is stated to be both explicit and implicit. While explicit negotiation is in the form of open discussions among family members, especially at a moment when a specific change occurred in the circumstances like health or economic crisis. On the other hand, implicit negotiations are defined to be less direct ways of communication among family members about the kinds of responsibilities seen as reasonable for both themselves and for other people (Finch & Mason, 1993). Through these negotiations, family members are coming up with excuses for their less or non-involvement in the share of responsibilities. It is argued that people do not want to be seen as unwilling to show conformity with their duties, rather they would like to show that they are unable to do so. These excuses they come up with 'are really meanings which are getting constructed and deployed within negotiation process' (Finch & Mason, 1993, p. 97). Other family members have the right to accept these excuses as legitimate or not. In this sense, getting a particular excuse accepted as legitimate depends both in the content of the excuse and the person who made it. This clearly shows that decision making process might involve power dynamics among siblings which would directly create serious conflicts in return.

This interactional approach to division of filial responsibilities among siblings as emerging out of interactions among the parties involved also points to the fact that these interactions are taking over a process which continuously shape and redefine both commitments and the division. Commitments of adult children to filial responsibilities are developed through a process of negotiations as stated by Finch and Mason (1993), "negotiations about who will acknowledge what responsibilities, and towards whom, take place...over the whole life-time of the relevant parties" (p. 61).

Related to the life course approach, Connidis claims (2003) that individual life transitions affect the lives of people in the family thus require negotiation. Since the anticipated or actual care needs of aging parents is a key life transition affecting both the lives of all siblings, the negotiation of sibling ties and parent-adult child relations do also take place with this transition (Connidis, 2001; Merrill, 1997).

### **3.4.3. Life Course Approach to Division of Parent Care**

The term 'life course', as used by sociologists, denotes 'the sequence of activities or states and events in various life domains which span from birth to death' (Mayer, 2002, p. 2). For Mayer (2002) life course means that, through taking specific social roles and positions in accordance with the membership in specific social institutions, individual lives are situated within the social structures with respect to historical developments. There is three-dimensional time conceptualization within life course understanding. Hareven (1994) states that synchronization of 'individual time', 'generational time' and 'historical time' connotes the essence of life course approach. The advantage of using life course approach comes from its ability to explain and describe this synchronic distribution of individuals into their social positions through their lifetimes (Mayer, 2002). It also gives us hints about the historical and individual variations among the entering time to and duration in specific life transitions or events like parenthood, education, marriage and grandparenthood.

Mayer (2002) defines four characteristics of life course. Firstly, individual life courses are both a part and product of broader societal and historical processes and in this sense life course denotes a *multi-level process*. Individual life courses are closely tied to the life courses of other people, especially those who are also in the same social groups with this individual, like family or work groups. Secondly, life course is *multi-dimensional* in the sense that it takes different domains of life like family and work into consideration and looks at the interlinkages of different domains in shaping the individual life courses. Thirdly, life courses are *self-referential* because each individual acts on the basis of his/her past experiences. In this sense, birth cohorts are tied in terms of their life courses since they have been experiencing same kind of historical development. The society is then composed of different age groups living in the same present with different prior experiences shaping their presents. Lastly, by living and shaping their own individual life courses, people *reshape and change the social structures* which they are part of.

Life course approach is used in sociological theories in understanding not only aging but also other subjects like education, poverty and stratification. However, in the particular focus on explaining the relationship of the old age group of people to the rest of the society, life course approach provides more relational perspective rather than the developmental theories on aging. While these developmental theories only focus on the age-related changes, life course approach relates individual changes to the familial, cultural and historical contexts which may have impact on the older people's lives (Wolf et al., 1999).

Application of life course approach to families brings the advantage of understanding how individual life courses are tied to the life courses of other family members. Individual times are closely related to the generational time within the families in the sense that inclusion of a new generation or death from the old generation brings about great changes for the life course patterns of individuals, in turn for the family behavior (Bengtson & Allen, 1993). As

Elder (1985) puts it, 'each generation is bound to fateful decisions and events in the other's life course' (p. 40). Life course transitions of a specific individual are affected by the collective family transitions like getting married and having child. Synchronization of individual transitions with the familial ones would create crisis at times when individual goals conflict with the family values (Hareven, 1994). For example, an individual may be forced to retire just because his/her mother needs assistance in daily activities, this synchronization of individual transition with the transition of mother to dependency would create conflictual situation for the individual who seek for a lifelong career in his/her job.

Also the differentiation of 'cohort' and 'generation' within life course approach is seen as its strength for understanding the differences of values and norms within the same generation. Because in studying the generation of grandparents across different families in the same society does not give us a coherent picture because of different birth cohorts within the same generation. For example, Hareven & Adams (1994) found within their research that siblings within the same family and same generation but from different birth cohorts show different attitudes towards support to their aging parents. Since younger and older siblings have experienced different historical developments which shaped their values and norms differently resulted in different attitudes to generational support. Because of this, Hareven (1994) warns scholars to take birth cohorts rather than generations into their analysis of study to see change of intergenerational support over time.

It is important to employ life course approach to understand the intergenerational support mechanisms because this approach provides historical development analysis to the complex dynamics of this process. Earlier experiences and cultural heritage of both older adults and their children shape their expectations from and preferences about the kin support, family values and also their attitudes towards formal support mechanisms (Hareven,

1981; Hogan et al., 1993). In addition to that, within the studies which employed life course approach, it is understood that historical circumstances like wars, migration and economic crisis – both local and global – have great impacts on the relations of mutual support.

Merrill (1997) points to the relevance of life course approach for the studies on how parent care is divided among the siblings. Since the life course approach emphasizes the interdependence of family members' life courses to each individual's, the timing of events in one sibling's life would affect the caregiving career of another sibling. Within the same family some siblings may be found inappropriate for taking the role of caregiver for the parents because of the life stage they are at within their life courses. While some of them may be found too young, like the ones still in education; others may be found too old to take the responsibilities of the older parents since they also have health problems and needs. In addition, some siblings – due to the stage they are at within their life courses – may be already caring for a dependent spouse or a dependent child. This situation may leave them out of the consideration within the decision making process about the division of parent care among siblings. Family histories also play important role in the sense that previous family relationships among the siblings may prevent collaboration between them. Another case may be that previous parental favoritism towards one child over others may put some siblings into the consideration that this sibling has to take the full responsibility towards the aging parents.

Life course approach, compared to previous approaches, provide comprehensive understanding for the division of parent care responsibilities among siblings since it takes social norms – based on historical, cultural and familial contexts – shaping the preferences and expectations, timing of particular events in each siblings' lives enabling or disabling their willingness and ability but also historical developments within the societies affecting all the circumstances for care opportunities altogether into consideration.



## CHAPTER IV

### OLD AGE AND FAMILY IN TURKEY

To understand the situation of elderly people within a country, it is important to know both the country's population dynamics and the dominant social policy orientation. Although regardless of the proportion of the elderly population in a specific country, the rights and needs of this group of people with any other age group *could and should be* addressed, it is well seen from the current situation in the world and also in Turkey that the higher percentage of the elderly population leads to increased importance given to the situation of old people. Still, this importance given to the situation of old people is very much shaped by the specific understanding of welfare current in the country. This is why in this part of the thesis, some general information about the population dynamics and welfare state in Turkey will be given.

#### 4.1. Elderly Population in Turkey

The elderly population in Turkey is currently 5.7 million with a proportion of 7.5% of the total population (TUIK, 2013). The UN only considers those countries with older populations above the proportion of 15% as having 'aged population'. Both because of the small proportion of the elderly population and the median age of the country as 30.1, Turkey is still considered as having a young population. Current population projections estimate that the elderly population will increase to 10.2% in 2023 and 20.8% in 2050, only in between

those years Turkey will be categorized as an ‘aged country’<sup>11</sup>. Furthermore, the growth of the elderly population, with 3.88 percent, outpaced the growth of both youth and total population, with 1.45 and 2.43 percentage points respectively (TUIK, 2009). These figures indicate that Turkey has already started to age significantly, following the aging trends that many developed countries have experienced.

Currently, life expectancy at the age of 60 is 18 years for men and 21 years for women in Turkey (UN, 2012). This means that people in Turkey are and will be spending a great amount of time in old age, with a possibility of experiencing chronic diseases, dependency and economic problems. The percentage of participation in the labor force for people above 60 is 28 for men while only 9 for women. Data from the UN Population Division show that in Turkey people above the age of 60 are passing their old age period in dependent circumstances. Only 38% of elderly Turkish men are living independently while this percentage falls to 35% for women.

The current amount of old people with their needs and circumstances in Turkey puts great pressure on not only the health care and social security system of the country but also on institutions like family which is considered to be the first unit in fulfilling the needs of its elderly members. This situation leads to the necessity of urgent changes in both the country’s social policy approach and welfare provision to its elderly population.

#### **4.2. Welfare State in Contemporary Turkey**

The Turkish welfare state is regarded as an immature one, just like other welfare states in developing countries. There are ongoing arguments as to which welfare typology of Esping-Andersen (1990) Turkey fits in. While the

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<sup>11</sup> Özbay (2009) asserts the fact that these population projections do not involve the figures of international migration. According to her, since Turkey is both giving and receiving international migration, demographic estimations on its population might not be able reflect the possible situation in the future.

social security system before the relatively new reform in 2008 is a reason for some authors to categorize Turkey into the corporatist welfare regime, new discussions<sup>12</sup> mostly focus on its characteristics as more resembling the Southern European Model (Ferrera, 1996). Buğra (2012) states that Turkey can be better situated in this last welfare typology as a result of its strong emphasis on the family within welfare provision, but also on the importance of other informal networks in coordination with the state or in absence of it.

In line with the neoliberal tendencies in the world, welfare state in Turkey has also passed through a transformation. Although still emphasizing the importance of family and informal networks, this transformation is towards the state-private sector partnership with important contributions from civil society initiatives, namely a move towards ‘welfare mix’<sup>13</sup>.

Since 2002, the AKP has run the government and has its own peculiar welfare understanding. Buğra and Keyder (2006) describe this peculiar social policy orientation of AKP government as ‘amalgam of neoliberalism with social conservatism’ (p. 222). It is not the first political party in the world to combine these two seemingly contradictory orientations within its politics. In fact, according to Çelik (2010), there is no inconsistency within AKP’s political orientation as being market-oriented economically but also as being ‘benevolent-philanthropic’ socially. Çelik (2010) argues that combining these two orientations is regarded as necessary in the neoliberal era. Benevolent-philanthropic oriented social policies provide short term reliefs for the victims of market-oriented economic policies which result in repercussions like poverty and unemployment.

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<sup>12</sup> For these discussions please see: Grütjen, D. (2008) and Aybars, I. A. & Tsarouhas, D. (2010).

<sup>13</sup> A term first used by Esping-Andersen in his book *Social Foundations of Post-Industrial Economies* (1999).

Another benefit of the benevolent-philanthropic social policies is their utility for providing quick results visible and enjoyable for the electorate who are impatient to see the long term effects of the planned social policy provisions. AKP's orientation, defined as 'liberal-philanthropic' by Koray (2005: 55), is based on the kind of understanding of social policy which does not involve the discourse of rights, on the contrary which includes some kind of practices in accordance with the political initiatives of the authority and which brings a higher political return in terms of the satisfaction of the governed. The lack of rights-based social provision gives way to the strengthening of 'clientalist' and 'paternalistic' outlook within the Turkish welfare regime (Metin, 2011). The importance of personal and informal relations within the welfare understanding of the country is in line with the lack of state-sponsored provisions of rights and services on the universal basis including every citizen.

According to Esping-Andersen (2000, p. 157), we should take into account 'how state activities are interlocked with the market's and the family's role in social provision' in order to better evaluate the welfare regime of a specific country. With neoliberalism, the role of the state is changing from being a provider of public services to more of a funder position which supports the family and regulates services in the market. Especially within the care area, this changing role of the state becomes more visible. The new regulations change both state-market regulations by creating a care market and reformulate state-family relationships by integrating informal family care within a comprehensive care system (Theobald et al., 2007).

Buğra (2012) argues that even though budget cuts on public expenditures constitute an important part of AKP's social policy orientation, this government also introduced a series of social policies regarding the protection of groups under risk, including disabled and elderly. According to her, this overemphasis on disabled and elderly groups within new social policies can be understood as in line with the conservative understanding which regards social

policy provisions for those ‘who deserve them’. The main part of these provisions is about the care of this group of people and in meeting their needs, the current government made a preference to financially support family’s caregiving role while at the same time overwhelmingly disregarding making any contribution to institutional care which is not sufficient and inclusive.

The informalization and re-familialisation of elderly care within the neo-liberal era is the motto of the AKP government too. The official social policy discourse still takes family as the central welfare provider for its members and sees the role of government as provider of support to the family (Buğra & Keyder, 2006). The Former State Minister Responsible for Family and Women Affairs, Nimet Çubukçu gave the hints about ‘family based elderly care’ model at the very beginning of succession of reforms made in the area as such:

In the forthcoming period, we are developing a home-care model for the elderly as we did for the disabled. We are going to provide financial support to those families who are taking care of their elderly members. This provision is also expected to have an important place in our service model which centers the family (Yaşlısına Evde Bakanlara Maddi Destek, 2008).

As we can see from her speech, the emphasis is upon the family in this social policy provision. The AKP government ‘has a service model which is based primarily on the family’. Moreover, it places greater concern on providing financial support to the families for their continuation of caregiver role to their dependent members. Significantly, the government has a funder position rather than a provider of care.

This service model is compatible with the neoliberal politics and the Islamic conservatism within the social policy orientation of the AKP government. As also stated in their party program three years before the provision of this policy, “if Turkish society is still intact after so many problems recently

experienced, we largely owe it to our strong family structure” (Akparti, 2003, p. 15). This emphasis on the strength of the Turkish family structure is very crucial for their discourse in a sense that it supports their idealization of the intergenerational relations within Turkish society. A general claim, both in the public opinion and in the political arena, is that the Turkish family structure has its basis on harmony, solidarity and reciprocity. This is why the most suitable caregiver for the elderly is seen as his/her family members. Current Turkish government, especially in accordance with the neoliberal policies it adopted, tries to transfer both the economic and institutional burden of elderly care to other actors like family and the private sector. In this context, the family is especially supported both ideologically and financially by the current government.

In Turkey, the family has always been an important actor as a welfare provider to its individual members. Turkey is categorized as having the traditional welfare regime based on the solidarity within the family instead of formal state intervention (Buğra, 2001). But this kind of regime is experiencing some problems within itself. With rapid urbanization and industrialization, the reliance on the family as a welfare provider to its members became problematic because of the changes taking place in Turkish family structure which was the main site of care to the elderly, disabled and children. The Turkish family is also experiencing many troubles in continuing its role as the sole support to its members financially especially after the economic crises Turkey experienced since the last decade. These changes result in the increasing demand for the intervention programs which would help the family to continue its traditional responsibilities.

#### **4.3. Elderly Care in Turkey**

The elderly population significantly has distinct needs and demands which necessitate distinct forms of regulations within societies to address these needs and demands. Since long term care of the elderly population is regarded as the

biggest part of these needs by economists, politicians and also academicians, most of the regulations are taking place in this area. The regulations in the area of elderly care are in constant progress at the global level, but also very significantly yet insufficiently taking place in Turkey too. Elderly care is gaining more and more importance within the social policy arena of the country in line with the demographic transition Turkey is passing through. This situation brings with itself the negotiations about who will take care of the elderly. Since long term care of the elderly population is considered as the biggest economic burden Turkey is going to face in the upcoming years, the state mainly points family as the site of care for the elderly population.

The Constitution of 1982 states as: ‘The elderly is protected by the state. Public support to the elderly and provision of other rights and amenities are arranged by law’. Under the protection of law, provision of rights and services to the elderly is regarded as one of state’s duties.

Since June 2011, with the 60<sup>th</sup> government, the institution which is responsible for the social services provided to the elderly is the General Directorate of Elderly and Disabled Services functioning under the Ministry of Family and Social Policies (MFSP). Today, the Directorate provides public social services to the elderly and also regulates the private ones. Currently, the public care services provided to the elderly population are as follows: public institutional care services, home care services, elderly care and rehabilitation centers, elderly clubs (senior solidarity centers), senior daily care centers and Alzheimer centers.

Home care services in Turkey started to be provided to the elderly population relatively late compared to developed countries, since 2010 actually. These home care services can be both formal and informal, also for short or long terms. Local governments, private hospitals, private home care centers and home care units of public hospitals provide home care services. These home care services are currently almost fully paid by the elderly or his/her family.

Both Ministry of Health and MFSP provide financial support in the amount of two net minimum incomes to the ones who gets home care services from private home care centers on the basis of the condition that the elderly should be disabled and the payment is directly made to the private home care center. Private agencies are also encouraged to open home-care centers. Unfortunately, home care centers are still very rare and agglomerate mainly in the metropolitan areas. Also, the elderly – the main beneficiaries of these centers – are not very well informed about these daily care centers and home care centers.

The elderly care in Turkey has remained within the domestic sphere for a very long period. Only those who are in total despair and who does not have any relative have been the subject of the public social services. In addition to this limited definition of the subjects of care within the institutions, the traditional negative attitudes towards the care centers within the society also perpetuate the situation. These attitudes towards care institutions still persist within the Turkish society, the general orientation of the current government is towards ‘aging in the community’ or ‘aging in one’s own environment’ which can be realized through either formal or informal home care services to the elderly.

In the International Action Plan on Ageing (2002), the emphasis on family as care unit for the elderly is made as such: “for the elderly under the risk whose number is increasing, it is crucial to strengthen the family for enabling the care within the family. To do this, formal or informal social support systems should be developed including the long term support and services”. The National Action Plan on Ageing (2007) also gives concern to the importance of family as a site of care in line with the international one.

However, long term care of the old person becomes difficult for the family, both materially and morally. The family is also in a situation of not being able to perform its role as a care unit for its elderly or dependent members due to many factors in Turkey. The reciprocal bonds between the parents and their



offspring have been argued to lose its previous strength and as a result, elderly care might be left without a responsible institution in the absence of the family as a traditional site of care (Kalaycıoğlu & Con, 2012). Especially when the changes in the Turkish family structure and intergenerational relations are also taken into consideration, the deficiency of the policy orientation on long term care within the family context is better understood.

Kalaycıoğlu (2009) points to the fact that the family is unable to provide a supporting environment for the elderly all the time. On the part of the old person, the probability of dependence and the danger of being open to exploitation get stronger within the case of family care. Furthermore, despite the fact that Turkish culture is very family oriented, people consider social security as a constitutional right. In addition, the elderly, though not willing to be separated from their children and families, do not want to be dependent on them neither. Care policy based on the family is also problematic since it does not approach to the elderly as individuals with right to autonomous living and to make their own choices.

The difficulties family is experiencing in continuing its role as main provider of care to the elderly are stated to be as such: the existence of economic problems in line with the crises, increase in the female labor force participation, the changing attitudes of the young towards elderly care and also changes in the intergenerational support mechanisms, increase in the disease and dependency in old age period, increased geographical distances between elderly and children's household, the downsizing of the house sizes (Gönen & Hablemitoğlu, 1994; Coşkun, 1998).

Consequently, the family now needs support to be able to continue its care role for its dependent members (Judd et al., 1999). This is why current Turkish government introduced something new to the Turkish society such as the financial support to the family caregivers of the elderly. To enable the family members to continue their roles as caregivers of the elderly, a relatively new

policy of financial support to these family caregivers is realized in 2006. Primarily, this policy addresses and covers all disabled citizens no matter of their age. The elderly, who are disabled and in need, are also covered within the scope of this policy. Especially after 2008, more emphasis was given to the elderly population.

According to this legislation, the elderly is free to make a selection between getting care for free within a public institution or staying within the family and being a subject to care payment. If s(he) chooses to stay within the family, s(he) is free to select his/her own caregiver among his/her relatives, at least principally. Within the legislation, it is stated that the caregivers who have any kind of affinity with the disabled elderly and who take care of them for eight hours a day without the necessary requirement of cohabitation, are the targets of this financial support. But the eligibility for this financial support is based on the health status and also the amount of household income of the elderly. It is well put that the elderly has to prove that s(he) has 50 % of disability level with a health report from the Ministry of Health and the personal declaration of total income within the household has to be below two-third of the amount of current minimum wage. Only after this eligibility criteria met, experts also check for the financial situation of the caregiver to decide whether they are desperate enough to deserve this financial support.

In a fieldwork study done by Kalaycıoğlu and Con (2011) on the families who are providing care to their dependent elderly members and the beneficiaries of this financial support, the problems current to this social policy are analyzed through the experiences of the caregivers and the elderly. To start with, because the family caregivers are mostly women, this policy is a continuation of exploitation of women's unpaid labor in the family context. Furthermore, these women are not able to participate in the labor force due to their caregiving duties and this situation would lead them to have no security in their old age. Although some of the public officials introduced this financial support

as the creation of new employment opportunities of women, the caregiving of the disabled family members cannot be considered as an employment.

Other problems of the policy can be stated as the severe outcomes of the unprofessional caregiving on both the elderly and the caregiver, in terms of psychological burdens. Even though this financial support is regarded as a very big contribution to household income, it has been declared by the women that they give the money directly to their husbands and this money is mostly not used for the needs of the elderly. The dependency of the elderly on their children is also perpetuated by this policy since a single person is expected to take care of the elderly and this person is also becoming devoid of help mechanisms from other relatives.

Currently, the Ministry of Work and Social Security is working on a draft of new social security scheme for the informal caregivers of the disabled (Sabah, 2013). The social security premiums of those who are directly paid by the state or MFSP will be cut directly from their care payments. In this way, the assumption that the informal caregiving of the dependent members will be just like an employment is still problematic and open to many criticisms. Just to mention, social security premiums of these caregivers will be paid for a limited period of time, till the death of the care receiver. After that point, the caregiver is expected to continue paying his/her premiums so is assumed to be able to get employment in the labor force. Even if she/he gets employed, either it will be a formal job so that their premiums are directly paid by the employer or it will be an informal job and she/he will be able to pay premiums from the wage she/he earns. In the upcoming period, we will be able to see the outcomes of this new social security scheme if it will be put into practice like that.

#### **4.4. Family and Elderly in Turkey**

As mentioned above, family continues to be a very strong institution in the Turkish society. This is mainly due to the fact that commitment to norms of

familism is observed to be still very high in Turkey. In Turkish Family Values Research (2010), a very high percentage (96.8 %) of the respondents declared that family is very important to them. %90.3 of the respondents also reported that they 'can endure every difficulty for the sake of their family'.

In Turkey, according to the results of 2008 Turkey Demographic Health Survey (TDHS), 44 % of the living children of the elderly are cohabitating with their parents. The proportion of the elderly above the age of 85 who are cohabitating with their children increases to 57 %. So as the age increases, the responsibility of the comfort, health and needs of the elderly passes from themselves to their children (Koç et al., 2010). When co-residence takes place between parents and children as Aykan and Wolf (2000) reached to the conclusion, it is mostly with the husbands' parents in Turkey. The findings of TUIK's Family Structure Research (2011) show evidence supporting this statement. People above the age of 60 are asked about what would happen when they reach an advanced age that they are not able to take care of themselves. The answers are mostly pointing the co-residence with their children with a higher percentage of staying with sons (28.9%) compared to daughters (10.3%).

TUIK's research on Family Structure (2011) shows that in Turkey most of the families are in nuclear type, with an average of 3.59 members in it. Although extended families are in a limited percentage (10.1%), it is also stated that the existing extended families are temporary ones (6.7%), instead of patriarchal extended families. This means that the situation of elderly people living with their children is more observable than newly married children living with their parents.

Regarding the co-residence patterns with the sons, Baştuğ (2002) states that patrilineal patrilocal household structure was the most common structure in Turkish society but transition from patrilineal patrilocal household structure to bilateral neolocal one is almost completed except some examples of the first

one in the rural areas. This transition she mainly asserts to take place in Turkey may still be in progress, especially among the families who experienced rural-to-urban migration. This is why still, the expectation of the elderly but also the actual situation point to the fact that co-residence with the son is still present in Turkish society.

Meanwhile, limited coverage of social security schemes and inadequacy of social assistance mechanisms both make the elderly dependent to the family. The form of current living arrangements of the elderly with their adult children can be also seen as the result of preferences of the elderly to stay with their children and be taken care within the family instead of in a care institution.

The topic of attitudes of the elderly population towards institutional care is comprehensively and repeatedly studied by the Turkish researchers, within various disciplines ranging from sociology to public health. They all point to the negative perception of nursing homes by both the elderly population and their relatives. A quantitative research on the elderly people by Onat (2004) in Ankara shows that 91.7 % of the elderly does not prefer staying in the nursing homes. When asked about the reasons of this preference, almost half of them declared that they are happy staying with their family. One fifth of the participants from the research asserted that their children would not let them to stay in a nursing home. This reason when combined with the one claiming the social influence as the reason behind not preferring to stay at nursing home give us the hint about the cultural values and norms about the elderly care in Turkey. It is considered as a shame for the family members to send their elderly to the nursing homes.

However, as Bandırma (2006) also investigated the living arrangements of the elderly by using the data of 2003 TDHS, he found that 10% of the elderly live alone in Turkey. Likewise, Ünalın (2000) states that Turkish elderly people prefer to live by themselves in their own homes, but at the same continue to provide emotional support to their children by living geographically closer to

them. Reasons behind preferring to live in their own home range from not wanting to disturb the children to not feeling comfortable anywhere other than one's own home (Görgün-Baran, 2003). The situation of living in a close distance with one's elderly parent or one's children is interpreted as the continuation of strong ties between family members in Turkey although modernization has considerable impact on the traditions (Aykan & Wolf, 2000; Aytaç, 2002).

To understand the inner dynamics and future of elderly care by adult children, the results of a very important study should also be analyzed. In her 'Value of Children' study, Kağıtçıbaşı (2002) made a conclusion that there are two values attributed to the children – material and psychological. Material value of children is described as the importance given to the children on the basis of their potential material contributions to the family. In this value attachment case, the children are seen by their parents as 'old age security' and as a result of the understanding that people prefer to have more children. According to her, the salience of material value attributed to children in Turkey declined with urbanization and socioeconomic development in line with the assumptions of modernization theory.

Modernization theory was also based on the assumption of transition from interdependent family model to independent family model with the economic development and changes in the lifestyles of people in a specific country. However, Kağıtçıbaşı (2002) asserts that transition is not from interdependent to independent family model in Turkey; rather the form of interdependence has changed within families. She argues that while material interdependencies decline in Turkish family structure, psychological interdependencies survive. The psychological value of children is more important to their parents now, although with the persistence of material value of them in the case of some families. The children are expected to psychologically bond to their parents.

It would be possible to argue that Kağıtçıbaşı's conclusion has and will continue to have significant effects on the patterns of elderly care by adult children. Since the value attributed to the children is more of psychological rather than instrumental, the expectations of the elderly from their children might not be the unquestioned commitment to filial responsibility. The children might have greater autonomy of making their own decisions in providing care to their elderly parents rather than acting according to some norms. As stated by Kalaycıoğlu and Tılıç (2001), the elderly prefer to spend their income on their children to have good relationships with them rather than to use it as an inheritance for guaranteeing the commitment of their children to filial responsibilities.

Moreover, the fertility rates declined in line with the decaying understanding of having more children as old age security. According to TÜİK's research on Family Structure (2011), answers to the question of the number of children one family should have resulted in the average number of 2,4 kids per family while the fertility rate is 2,53 in Turkey. This situation can be interpreted that the pattern of declining fertility rates will continue in the future as well.<sup>14</sup>

Regarding the general attitudes toward filial responsibility, many studies are done in Turkey as well. In the research done by Subaşı and Öztekin (2004) in Ankara, 75 % of the respondents declared that older parents who are not able to take care of themselves should be supported by their children and the context of care should be the home of parents. However, only 57.7 % of the same respondents said that their own children should take the responsibility at the time they would be in need of care. This discrepancy in the reports of adherence to general norms of filial responsibility and expectations from next generation can also be seen in the results of TFVR (2010). 84.9 % of those who participated in the research agreed with the statement 'elderly family members

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<sup>14</sup> *Author's note:* This disparity might also be due to the differences in expectations and actual behaviors.

in need should be cared by their children within the family context'. On the other hand, the statement 'when I age, my children should take care of me' has got agreement from 74.5 % of the participants. Within the participants who disagreed with this statement, it can be seen that the proportion of the age group 35-54 is higher than the other age groups. The reason behind the prominence of this age group within the opposing participants might be the higher probability of participants between these ages being current caregivers of their own elderly parents and experiencing the burdens of care from the first hand. Since they know how difficult it is to fulfill this responsibility, they may be more likely not to expect it from their own children.

The disparities between the general adherence to the norms of filial responsibility and expectations from the next generation can be also interpreted as the declining trust in the young generation in terms of their potential commitment to the filial responsibility towards their parents. TUIK's Family Structure Research (2011) also shows the existence of this understanding, the elderly who declared that they would go to a nursing house in an advanced age, second highest answer is that 'my children might not want to live with me'. This distrust might be due to many reasons but the elderly or current middle aged generation seems to be also aware of the changing nature of the intergenerational relations and the lifestyles or preferences of younger generation in Turkey.

According to Kalaycıoğlu and Tılıç (2000), family is an important support mechanism in Turkey not only for the old generation but also for young generation as well. The flows of support are observed to be in both ways; while it takes the form of material support to the children, to the elderly it is more of emotional support. These support mechanisms are regarded as very crucial in dealing with the problems for both generations. On the basis of the results of this study, it is understood that the elderly is not in a position of dependency to



the succession generation. There is some sort of exchange, reciprocity or mutuality between generations in terms of support provision.

## **CHAPTER V**

### **DYNAMICS OF ELDERLY PARENT CARE AMONG SIBLINGS**

The issue of dynamics of elderly parent care among siblings is forming a specialized topic of analysis in sociology since the interactions between siblings, the interplay of gender, class, ethnicity and age all affect how this division takes place. For a division to take place though, adult children have to have a commitment to responsibility of taking care of their parents in the first place. Although these commitments vary among children and the reasons they show for their commitments seem more about their own feelings, the cultural, moral and societal constraints on these children to admit commitment to their ‘filial responsibilities’ can also be captured as a reason for commitments. Especially when evaluated within the Turkish context, the norms of filial responsibility seem so powerful that expectations from adult children to take care of their parents are sometimes internalized by adult children so deeply that non-commitment to these responsibilities result in experiencing ‘guilt’, ‘remorse’ as they express in this thesis. In the same way, feeling of obligation or duty towards parents and their relation to conscience show how strongly these expectations of filial responsibility are experienced and tried to be met by adult children in Turkey as will be shown with the examples from the sample of this thesis.

#### **5.1. Factors Influencing the Dynamics of Parent Care**

While it is reasonable to assume that siblings share somewhat similar attitudes towards filial duties as a result of having been reared in common home environments, it also is likely that siblings differ on

their unique experiences and social characteristics (Silverstein et al., 2008, p. 74).

As stated above by Silverstein and his colleagues, differences among siblings in their involvements and types of division of filial responsibilities among siblings are not solely related to the attitudes towards filial duties. There are many other factors affecting how siblings manage to meet the needs of their elderly parents. While in some families, siblings prefer and are able to create a 'sibling network' for addressing the needs of their parents; in other families, whole responsibility is burdened on one or two siblings. Even in sibling networks, there might be a possibility of some sort of collaboration among siblings and somewhat equal division of the tasks and responsibilities, however in other sibling networks this type of care arrangement might not be applied into practice.

#### **5.1.1. Commitment to Filial Responsibility Norms and Parent Care**

In this study, almost all of the children refer to the importance of general norms of filial responsibility for themselves and their families. Within the sample of this thesis, there is a great adherence to the general norm of duty to reciprocate what their parents have done for them in the past by giving assistance in return when needed. However, there is a wide variety of differences in terms of actual involvements to parent care among siblings. The basis of these differences does not simply occur at the level of adherence to general norms since all of the children show similar attitudes.

Provision of assistance to the elderly parents in need necessitates some sorts of commitments to filial responsibility. These commitments are motivated by some discretionary and obligatory motives not on a mutually exclusive basis (Walker et al., 1990). The explanations regarding the reasons behind the understanding 'it should be me providing care to my parents' show that

motives for parent care differ for adult children on the basis of gender, cultural context and socioeconomic status.

Since expressed norms about duties and responsibilities of children towards their elderly parents are distinct from both the behavior and intentions of a specific adult child, ‘felt obligation’ is a better predictor of the variations of commitments in practice (Stein et al., 1998). Felt obligation, contrary to general norms of filial obligations, is specific to one person in his/her own relationship with his/her own parents. It forms the basis of the understanding that ‘I should provide care to my parent(s)’ rather than the general statement of ‘adult children should provide care to their parents in need’.

Feeling of obligation towards parents as an obligatory motive for parent care is observed to be current within this study, among almost all adult children who are actively engaged in the parent care. The naming and the source of this feeling are shown differently between families and among siblings within the same families. For instance, daughters with middle SES constantly talked about ‘conscience’ as the most fundamental basis of parent care. Although a little bit more abstract in definition and culturally relevant to Turkish context, this reference to conscience somehow resembles what is called ‘felt obligation’ in the literature. As felt obligation guides a person to perform caregiving activities, conscience also leads people to fulfill one’s responsibility towards family in general, specifically parents.

I am going and taking her to my house, and then this keeps my head, my heart and my conscience at ease. Since it is like that, though I have times when I am overburdened or upset, I put my hand to my conscience and I feel myself happy again (Zara<sup>15</sup>, female, middle SES).

These women see conscience as something very powerful that if one does not perform one’s duties to one’s parent(s), there is a good probability of

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<sup>15</sup> All names of the interviewees are pseudonyms.

experiencing some sort of ‘guilt’ arising from not complying with one’s responsibilities. The words of Nilgün below may be interpreted as such: conscience is some sort of an internalized ‘discipline mechanism’ which leads the children to perform their responsibilities and to feel remorse when they do not accomplish these expected duties/ responsibilities.

I am able to do it, how happy it is that I can look after my mom and dad. There is also the case when you cannot. If you do not give them any help, feelings of remorse get higher for you. My physical weariness is excessive but I have a clean conscience. I feel incredibly tranquil regarding this issue. I am doing what an offspring ought to do; maybe a little bit more than that but I am fulfilling my filial responsibility (Nilgün, female, middle SES).

In addition to referring to conscience as something guiding actual behavior, some of these women also emphasize that everybody’s conscience is different from each other’s. Commitment to filial responsibilities or the extent of this commitment differs for every adult child. These differences then also serve as a foreground for the variations of actual help provision to parents among the siblings. Gülşen explains these differences between her and her brothers by using ‘conscience’ showing that this self-disciplining mechanism does not work in the same way for all children.

There are differences of conscience among the siblings. Everyone’s conscience is different. If I don’t get news from her in a day, I don’t feel good. My brothers are not like that (Gülşen, female, middle SES).

Complying with filial responsibilities might also originate from a very powerful obligation an adult child experience especially during his/her actual involvement in parent care. It has been noted and observed among the interviewees that already caregiving children have stronger feelings of filial obligation which motivate them to continue supporting their parents. Being one of six children in her family, Selma has been over-involved in parent care as declared by her brother and herself. She is trying to explain the source of her

over-involvement but she cannot even address it, owing that the obligation is so internalized that she uses a powerful word ‘serve’ for her motivation towards parent care.

My mother and my father... I don’t know I care about them so much. I am very sorry for them and I orient myself as if I have to serve them. I mean, somebody else may think like ‘why have I done this, why am I doing this’ but I can’t say that. For example, I feel restless if I do not visit them every weekend. Even before... Now my mother is really in need, but in the period when she was not, I remember, I was going to them in the semester break, in the summer break. I always thought that I have to serve them. I do not know why, I cannot understand what kind of feeling, what kind of understanding this is; but I am also unable to get rid of it (Selma, female, middle SES).

Another emphasis while talking about why they are providing care to their parents is on the basic fact that people in need are their parents, or as they name them – their ‘ancestors’. Obligatory sense of this motivation can be conceived from the sentence of Mesut as:

We are obliged to do it. They are our ancestors, we cannot throw them somewhere else (Mesut, male, middle SES).

In Mesut’s words, there is a reference to the unchosen nature of the parent-child relationship which is emphasized in the ‘special goods’ model (Mills, 2003; Keller, 2006) of filial responsibilities. In this sense, Döle also emphasizes that her helping behaviors are rooted on the obligations and unconditional love originating from this unchosen parent-child relationship.

Honestly I don’t know. I cannot get into anyone’s heart<sup>16</sup>. In my heart, I feel like whatever I do for my mom and dad is not enough. Since they are my ancestors, I am helping them a lot (Döle, female, low SES).

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<sup>16</sup> *Author’s note:* She is referring to the fact that what anyone feels cannot be obvious to others.

Apart from those obligatory motives, involvement in parent care is supposed to be also based on the affectionate relationship between the parent and the adult child. Adult children are found to be strongly motivated by both past and current positive relations with their parents and this discretionary motivation type is considered to be more effective than the obligatory motives (Cicirelli, 1983). In this sample, there are many accounts of adult children on their relationships with their parents as better or 'emotionally closer' than before, better relationship by itself does not serve as a sufficient reason for involvement in parent care. Interviewed children only declared that their parents would like to take care or be comfortable of being taking care of their offspring with whom they have relatively less problematic relationships. In all cases of good relations between children and parents, it is understood that sense of obligation rather than affectionate relationships motivate these children to perform their duties.

It is also shown that even though sometimes these elderly parent-adult children relationships are declared to be not so intimate, children continue to provide assistance. In almost all groups of siblings, including both middle and low SES, daughters reported that they had had better relationships with their fathers. They explain their relationships with their mothers in their childhood as emotionally distant and shaped by the 'authoritative' characteristics of moms. When these mothers got widowed and became somehow depended on their children, daughters mostly became the first source of support for them. Despite reporting feelings of alienation towards their mothers, these daughters continue offering help as a result of obligation they feel and they use it as a rationalization for their involvement (Leinonen, 2003).

My mother is a very old person for me. Of course in the end she is my mother. I am obligated to look after her. However, I cannot do things like hugging, kissing, smelling her. Now, I should explain it like this. It is 17 km. from Bartın to Amasra. Back then, people would have gone it like 57 km. This is why my mother was staying in the hospital

in Bartın while she was working at Bartın State Hospital. She was coming home once a month. We were all waiting delightfully for her in front of the door at the times she was coming home. My mother was directly hugging her sons when she arrives. This situation stings a person a lot. At advanced ages, you become a lot distanced and cold to each other. When my mother's attitude is like this, you become even more distanced. Right now, I am the one who is looking after her but we are not very intimate (Gülşen, female, middle SES).

Gülşen is demonstrating the best example of the continuation of caregiving role despite the alienated nature of the relationship with the care receiver. In this example, it is also observed that although provision of practical or personal care is not very much dependent on good relations with the parent(s), emotional support is very much related to the nature of the relationship. This situation is in line with Silverstein and Litwak's (1993) findings suggesting that filial obligation increases the likelihood of some types of care like instrumental or financial, but not emotional.

Sons both in low and middle SES sibling groups are favored by their parents. Both sisters and brothers acknowledge the persistence of value attributed to male children as distinct from the one attributed to female children. This parental favoritism of sons does not necessarily direct them to provide more assistance than their sisters do. As Gülşen's example shows, sons are being somehow more valued especially by their moms. It might be expected that these sons, in return, provide more support to their parents compared to their sisters. Even if sons are aware of the fact that they are favored, they do not see this fact as something very crucial and not necessarily as motivation. On the other hand, this favoritism of sons negatively affects the commitments of their sisters to their duties, as Mualla and Aslı explain in their accounts as,

My second eldest sister is out of our parent care system. She told my mom 'who you love the most should take care of you' and stopped helping her. She is talking about my youngest brother since my mom



gets pleased with any little thing he does although we, as daughters, do the most for her (Mualla, female, middle SES).

I guess we, daughters, are keener on mother; brothers are mostly more distanced from her. Still, even though they are distanced, the mother takes their side. We are emotionally closer to her, however sometimes we cannot please her (Aslı, female, middle SES).

Frequently, mostly among sons from low SES sibling groups, the reason behind the commitment to filial responsibilities is emphasized to be a kind of generational transmission of norms of filial responsibility. There is a concern about transmitting what they learn from their own parents to the next generation by performing their own duties. This motivation brings an expectation from one's own children to imitate what they are doing when they will get old and in need of care.

In time I will get older too, how my child will act, that's another issue. I am supporting my parents because if I don't, my child will not do the same for me (Döle, female, low SES).

You know we have an adage, 'whatever the big wolf does, the little wolf does the same'. I am carrying out what I have seen from my ancestors. We have looked after my beloved grandparents too. So I expect my sons to do the same (Ali, male, low SES).

As I am doing it for my mom and dad, my children will do the same for me since they see how I am acting. Since I show them how I look after my parents, I expect the same from them (Orhan, male, low SES).

Although nobody has explicitly named inheritance as a motive for involvement in parent care, some references of the interviewees imply that sons' motives for being involved in parent care is also related to the general acceptance of the sons' right to inheritance. This social norm seems to be still valid and persistent in some segments of Turkish society. The youngest sons are especially but not necessarily, expected not to leave their family homes. They would automatically hold the primary responsibility of the parents as a result of co-

residence (or at least residence in the same apartment). Even when they leave the family house, there is a possibility that since they might get the inheritance, they experience or are expected to experience a stronger obligation than their sisters towards their parents.

In this study, implicit references to inheritance are made especially within low SES sibling groups. In a family of five sons, Hasan has made it clear that the reason behind over involvement of his brother Nusret in his co-residing mother's care is the fact that Nusret is the eldest. When Nusret is asked whether the house is theirs or not, he said it is his father's. The eldest brother and his family reside in his father's house with his widowed mother and take the biggest part of the care – both practical and financial – of his mother.

These obligatory and discretionary motives are important in predicting the actual involvements of adult children in the parent care system. However, the division of filial responsibilities among siblings has to be analyzed in detail to understand how not only these commitments of each child but also limitations or constraints, mainly gender-based and cultural, on them are shaped within the interactions among family members. To analyze the division of filial responsibilities is important since it involves all siblings into the picture and takes into consideration 'the family as a whole' in influencing each sibling's actual behavior.

### **5.1.2. Family Composition and Parent Care**

The main reason behind different types of division is listed as the composition of the extended family – especially number and gender distribution of siblings (Matthews, 1987). On the importance of family structure, Bengtson et al. (1985) write that,

Characteristics of family structure... provide important information about the potential for mobilizing the family as an interpersonal

support system in old age. [It] describes the resource context of the family for the older person (p. 318).

In line with Bengtson's statement, in this sample, families with different compositions are purposively included to see how these differences reflect themselves in parent care arrangements by siblings. For example, the reason behind adding all brothers groups to the sample was to see how the absence of a sister would affect both the amount and content of different care types to parent(s). The number of siblings is controlled to vary within the sample to be able to see whether and how different larger sibling groups meet their parents' needs compared to smaller ones.

Having a sister is declared and observed to make a crucial difference on the division of parent care among siblings since reliance on sister(s) might result in less involvement of brothers in care tasks. This situation is valid for middle SES sibling groups, since daughters-in-law play as essential of roles as daughters in parent care. Çağrı's words are very important to see the significance of sisters within middle SES sibling groups.

If we had had a sister, she would have been support to mom. I would never have been concerned with anything, even if this sister was a married one. 'Now who will bring my mom to his own home?' this is my constant worry. But I would not have thought about that if I had had a sister. It does not mean that I would not have done anything; still I would have had peace of mind (Çağrı, male, middle SES).

Regarding the type of distribution of responsibilities, it is observed that there is no unproblematic and equally involved collaboration within any of the sibling groups. This is mainly due to the circumstances which disable the equal involvement of all siblings. These circumstances range from geographical distance to employment and to other family commitments. Other than that, there is also the situation that conflicts within the families led some siblings to leave the sibling network. Still, this could be said that among some sisters within this sample, some sort of collaboration takes place with the exclusion of

one or two siblings. The possibility of collaboration among siblings is higher within middle SES sibling groups. In low SES sibling groups, there is almost no possibility and necessity of collaboration since a particular son's responsibility to provide care to parent(s) is strictly accepted. However, in some low SES sibling groups, there is a gradual change of understanding towards collaboration and somehow equal division of responsibilities, at least in anticipations. This situation gives us the hint that there might be a 'transformation' within the understanding of division of responsibilities taking place in low SES families.

Collaboration sometimes takes the form of supplementation rather than cooperation. In middle SES sibling groups, there are some examples of this type of collaboration. Selma explains how she and her sisters divide the tasks among themselves while his brother is still absent from this division.

Willingly or unwillingly we ended up with having division of tasks. My vet sister's clinic is nearby to my mom's house and she comes every morning. She cooks for them, tidies up, meets all their needs and change my grandma's diapers, feeds and dresses her. My elder sister or my younger sister comes after work at nights. They come in turn, they all feed them, dress them they meet the needs of my grandmother; they also meet any requirements of my parents and then go to their homes. I go and stay during Saturday, Sunday and Monday My Mondays are free. In three days, I do all kind of things in details. I also stay there. I clean the house, I cook, if my grandma needs a bath I call my sisters and we give a bath to her together. I also give a bath to my mom. I even prepare the food they will eat during the week, wash and place them in the fridge; I kind of give a hand to whoever's turn for cooking the next day. I got my home absolutely shattered (Selma, female, middle SES).

In larger families with middle SES where the number of siblings involved in the care process increases, there might be a possibility of division of tasks on the basis of specialty of each sibling. While in some cases, the specialty might be much more related to the abilities or resources stemming from one's

occupation; in other ones, division is mostly based on the personalities or some other demographic characteristics of siblings. While Sami places emphasis on occupational specialties, Selma shows that specialized division of care might also be related to other factors.

There is also such thing, a bit occupational I guess... My elder sister is a doctor so if the issue is medical, she's called straight away. Some nephews/nieces of us are doctors so they may also be called but if it is about maintenance for instance mending or fixing any place then I am called for it (Sami, male, middle SES).

If there is a need of services, I am called. My sister is called when the issue is medical. If a guest comes impromptu, my elder sister is called since she is in a close distance. Whenever they need to go somewhere, my vet sister takes them (Selma, female, middle SES).

It is also noticed that with large numbers of siblings, the probabilities of absence of one sibling or of circumscribed and sporadic types of care styles are increasing. Almost in all families, there is one sibling, mostly a brother; either providing 'circumscribed' or 'sporadic' care as in Matthews and Rossner's (1988) caregiving typologies. The trust on other siblings, especially on sisters, might result in their less involvements or at least being in back-up assistance. These siblings might only respond to the demands from their siblings as in the case of Ahmet, being the only son in a sibling group of six.

It is like that. I feel responsible for my mom and dad on the one hand but since my siblings are very close to them, it's helpful, I am very relaxed. I am not worried about what they would do when I leave the city for work. They are all more interested than I am. My sisters really care about my parents. I am like more controlling what they do from the outside. Not so much is put on my shoulders. I am thankful to them. However, whenever I am needed, I have to arrange my work for it (Ahmet, male, middle SES).

Another noticeable situation within the scope of this sample is the total 'disassociation' of some siblings from the parent care system in many sibling

groups which are composed of both sisters and brothers. This disassociation is mostly due to the past conflicts between the siblings, with siblings-in-law or with the parent(s). In one family of six children, a daughter is totally absent from undertaking her filial responsibilities as a reaction to her mother's excessive favoritism of her brothers. In another one, the elder brother disassociated himself after a point, although not specified explicitly; his siblings attribute the reason of this disassociation to wives of their brothers. In a family of three siblings, the elder brother does not undertake his responsibilities anymore due to his dispute with his sister. Having siblings seems to give the opportunity of not undertaking one's filial responsibilities since one might always think that one has substitutes.

The health status and dependency level of parents are also observed to have a great impact on the types of care arrangements. The decreased health status of a parent better coordinate all siblings and increase their involvement to the parent care. Since adult children acknowledge the fact that burdens of caregiving for a dependent elderly parent would be higher, they significantly consider providing help to the previously primary caregiver sibling. Division of tasks in a rotation takes place to unburden a single sibling. Nevertheless, involvement of other sisters rather than brothers is a higher probability even in the case of increasing demands of the parent(s).

In middle SES sibling groups, the option of hiring someone to help in personal and practical care of the elderly takes place among the siblings with the case of increasing demands resulting from decreasing health of the parent. Nonetheless, this might not mean that adult children in this case are enjoying the opportunity of exempting themselves from their responsibilities. In four examples of help provided by a caregiver woman from outside the family, adult children are still somewhat included in the process as care managers, by providing back-up care or by holding the responsibility of financial assistance to the parent(s).

The division of filial responsibilities among siblings is found to be affected by co-residence of specific child(ren) with the elderly parent(s). Within this sample, in low SES sibling groups, co-residence of the son with elderly parents leads Keith's (1995) primary sibling caregiving system with relative contributions from other siblings. In middle SES sibling groups, there are only some cases where unmarried daughters and divorced sons co-reside with their widowed mothers but this co-residence has not disabled other siblings to be involved in the parent care, even though not as much as these unmarried and divorced adult children are.

### **5.1.3. Gendered Nature of Parent Care**

From the results of many previous studies and from the study of this thesis, it is obvious that the probability of women giving practical and personal support not only to their parents but also to other relatives is higher than the probability of men to do so. Daughters and daughters-in-law are also observed to spend more time and be involved in more diverse tasks compared to sons (Merrill, 1997). Sisters are acknowledged to be in charge even when brothers are also involved in parent care (Hequembourg & Brallier, 2005).

The gendered nature of the care work is becoming more apparent within the division of parent care among siblings in this thesis as well. It is commonly observed that in all these families, it is mostly a woman who gives assistance to parents with the daily activities. This woman may be a daughter or a daughter-in-law, and mostly hands-on-care is also included within these assistance types. Men, even when they hold the primary responsibility of providing care to their parents, are rarely involved in hands-on-care of the parent and would rather let his wife to do so or hire someone else from the market to do it. In return, sons prefer to provide financial assistance to their parents and cover their absence from other types of care.

Gender may also interact with other forms of inequality such as class and ethnicity; in this thesis, it interacts with SES. Involvements of daughters-in-law in care responsibilities towards their husbands' parents are higher compared to sons-in-law regardless of socioeconomic status. This situation is seen as a result of gendered division of parent care affecting not only the daughters but also daughters-in-law. Sons in both low and middle SES siblings groups are asking for and receiving support from their wives especially in personal and practical caregiving tasks towards parent(s). As mentioned before, this is due to the traditional understanding about the women as the main person responsible for care to parents and parents-in-law.

The reasons behind these gender differences have been abundantly studied and one of the conclusions reached is that they cannot be located at the level of commitment to the general norms of filial responsibility. It is well documented within the scope of this thesis that women and men show almost no difference in their levels of adherence to these general norms. Then this gendered nature of division of filial responsibilities has to be explained with some structural, cultural factors behind but also with gendered expectations about not only filial but all family obligations.

According to Finch and Mason (1993) gendered expectations about family obligations in general and also filial responsibilities in particular, in addition, the forces that modify or confirm them in practice account for the gendered division of responsibilities. In the explanation of Selma below, it becomes apparent how gendered the expectations are in Turkey, how these expectations are inherent to the patriarchal structure which places women into the domestic domain even when they are working and how persistent these expectations are. Despite the increasing rates of working women in the public realm, they cannot escape from the traditional roles attributed to and expected from them in the private realm. This situation leads women to experience double burden of their roles in both private and public realms.



In Turkey, we experience the guilt of being born as a woman. You are a woman; you have to do all these. You have to support your own house; you have to serve your parent, also your parents-in law. It changes regionally but as a result women are subjected to being exploited everywhere, or rather in Turkey they are confined to be exploited. To have economic independence or not does not matter. As long as you are unable to change that culture, that structure, woman is a slave even if she has achieved her economic independence. You work outside, you come home, and you work at home too. Nobody says 'sit down, you are tired'. Or your husband does not say 'let's do it together'. He did not see it from his family. In the past there was something such as men were going outside home to work, women were staying at home. In my opinion, this was not a bigger inequality or injustice. What was happening then? The man was coming from work as tired, his mind was full. The mother in law was always chatting 'he should eat, should sit, and should get rest'. When her daughter-in-law also works, she does not think like that for her. So what will happen? The masculine structure and understanding has to change. Also the mothers' attitude of mind should be changed because mothers raise them like that (Selma, female, middle SES).

Selma suggests that these expectations originating from patriarchy might only be changed once the mindset of people, especially of mothers' changes.

The gendered expectations could be also derived from the cultural understanding of women as 'normative caregivers' of the husband's family members. In this sense, daughters-in-law are expected to act as substitutes of their husbands' in the parent care. This substitution is not as acting while the husband is absent, but as undertaking husband's own responsibilities. As stated below, Nilgün gives an example of her situation which might be interpreted as a case where marriage serves as the basis of additional duties of women including the parent-in-law care.

How is it done in Turkey? Women are caregivers. Even if you are a daughter-in-law... Everything depends on you, meal, medicine, everything. My husband was helping his father only in bath and was chatting with him after work. Other than that, the whole responsibility

is yours because you are the wife of the house. My husband has two sisters. Their family is more like, since they are from Central Anatolia, you know they do not see it as a responsibility of the daughter. The son is expected to get more responsibility. Yes, this is a tradition in our family. If parents in law are in need of care or if they need to stay in their children's place, it has to be the son, they do not live in their daughters' house (Nilgün, female, middle SES).

During the interviews, the question of whether the division of parent care is seen as gendered got almost similar answers by sons from middle SES groups. They accept the fact that their sisters are doing the most part, while they make some kind of argumentation which would legitimize their less involvement in parent care. While they explain the gendered order within the house, they claim that women are the 'decision maker of the domestic realm'. This, in turn, leads to a conclusion that the blood ties between the caregiver and care receiver enable the latter to directly influence the caregiver and easily get involved in the decision making process. On the other hand, the situation might be controversial in the context of daughter-in-law caring for her parent-in-law. Both Duran's and Ahmet's explanations below verify the aforementioned argument.

There is a common saying in Turkey. When the man dies before the woman, this woman easily shelters in her daughter's house. This is because in our society the management of the household belongs to woman. Even though the man has the authority, the woman is the one who manages the family. The man yells and shouts but the woman knows what happens in the kitchen, woman runs the kitchen therefore the family and the house. This situation is valid for both the least and the most educated. Therefore, woman is the ruler of the house; man just wants to have comfort at home. Since it is like this in our society, people can go to a daughter's house more easily. Thus, it would be easier to go to daughter's house rather than daughter in-law's house because of the fact that a woman manages the house. Think about it, would not it be easier for you to go to your aunt's house rather than your uncle's house? Your aunt opens the door when you go to her,

but if you go to your uncle's your aunt-in law – a stranger – opens the door for you (Duran, male, middle SES).

A woman is the one who manages the house; she is the ruler of the house. For example, when my grandma stays with my aunt, my mother can easily go to her house and help her. Here, the husband of the sister is not very obvious because he comes home in the evening; he is out during most of the time. While he is at home, the woman is still the ruler of house. Therefore, my mom can be involved into decisions within my sister's house, but in our house, she may not be able to since the daughter-in-law is the master of this house (Ahmet, male, middle SES).

These statements show similar findings with the studies in the Western academia, declaring daughters as the first source of support for their parents. However, reasons behind this gender-based division of responsibilities given by these interviewees are very peculiar to the cultural context in Turkey.

Furthermore, women also think that they are better than their brothers especially at provision of emotional support to their parents (Aronson, 1992). This thought originated from women's acceptance and internalization of their 'so-called' socially constructed caregiving role. Men acknowledge this fact and use it as strategy to refrain themselves from caregiving activities. These circumstances reinforce the gendered division of labor in parent care.

Compassionate they are daughters. They look at events in a more companionable way. In our nature, in manhood, there is a condition; we pass over things. Women are positive and amiable; this is why I would say daughters would take care better than sons (Hamdi, male, low SES).

The truth is; sons do not care. They don't. I am not sure if this is due to their nature. They are not as sensitive as daughters. They are not mothering, they just pick up and put the foot for example, daughters care not to hurt the foot. For sons, hurting or not hurting does not matter at all (Hülya, female, low SES).

There is God; my sister would take care of them better than us. Before, since my wife was working back then, we were not able to give assistance to him here. How can I, as a man, look after him? My sister would do it better than me. While my wife was working, my father was in my sister's house more than he was here. My sister was at home all the time, she was like 'come dad, let's eat, the meal is ready, let's drink tea, tea is ready'. She was taking care of him better than us. However, my wife is at home now, not working so that she is also taking care of him as well as my sister did (Mehmet, male, low SES).

There is a persistent belief both among women and men that it is more natural for women to provide more physical types of care and this reflects in being better than men in 'doing family' (Matthews, 2002, p. 234). These two explanations, one by Serkan from all-brothers family and the other by Ayşe from all-sisters family are exactly referring to Matthews' term unintentionally. Both are persistently referring to the 'nurturing and kin-keeping' characters of women but Serkan does not miss the impact of socialization.

The instinct of holding the family together already exists in women's nature. Women like to live in crowd and manage, organize it. They are more responsible. They pay attention towards their close environment more than men do. Men's attention is totally towards themselves. Men are more selfish due to their nature. I believe that this also has to be with the childrearing attitude of parents to different sexes. It is also related to the roles that are attributed to the child while s(he) is growing (Serkan, male, middle SES).

Daughters are fonder of their parents, sons are not. You must be also aware of this fact. Since daughters are fonder of them, they are more inclined to respond to every need of them. In some way, they organize the family order, run and go, reach I mean. Both to mom and dad at the same time, she somehow manages to help (Ayşe, female, middle SES).

Explanations mentioned above might be interpreted differently. Socialist feminists, different than psychoanalysis feminists, accept the internalized motivations of women and men towards family care but do not see these

motivations as essential. They rather prefer to emphasize a ‘belief system’ which serves the basis of these motivations and also justifies structural inequalities based on gender (Stoller, 2002).

Conforming to traditional gender roles is very persistent among sons (Campbell & Martin-Matthews, 2000) and they may even feel a social constraint on themselves not to perform those tasks other than ‘masculine’ ones. From all brothers sibling group, Serkan’s statement shed light to sons’ preferences to get away from so called ‘feminine’ activities such as giving bath. In the case of low SES groups, sons expect their wives to perform such activities. Differently, in the case of middle SES groups, this expectation is directed to sisters or to a hired caregiver woman.

My mother does not have a physical need right now. If she will have, I don’t think that someone from the family would be able to give her a bath. I guess we have to get professional assistance in this case. Likewise, I am not sure whether my mom would like to get this kind of assistance from us or not (Serkan, male, middle SES).

Matthews (2002) found that daughters are employing a more proactive approach to parent care compared to sons. Different than sons, daughters in this sample made it clear that they do not always wait for their parents to ask help of any kind. They sometimes even support their parents in some daily activities with the anticipation that they would not be able to do these things by themselves. When asked about the ability of parent(s) in performing especially instrumental daily activities, daughters provide answers which show how they act even when the parent is not having any problem of inability. As Hülya points, she and her sister have the anxiety that their parent would have problems without them in certain activities.

Normally, she is able to have her bath by herself. Nevertheless, we do not leave her alone in the bathroom. She may get cold, or the bath may take longer, she may keep the water so hot which would not be ok for her since she has hypertension (Hülya, female, middle SES).

Contrary to bossy or controlling behaviors of daughters, sons in middle SES groups pay great attention to let their parent live independently as long as possible. This respect for the parent's autonomy does also contribute to preserving their own autonomy as in the case of Serkan.

My mom and I have our own personal spaces at home. Therefore we do not interfere with each other's personal life. However at times we want to be together, we go shopping, we have some entertainments together. Thus we see each other when we want to see each other. My mom is a very sociable person. Her relations with her neighbors are great. She is able to continue her own life without feeling a need to be with me (Serkan, male, middle SES).

These gender differences of approaches to parent's autonomy make women's activities more visible than men's activities. The visibility of women's activities or more proactive approach of women perpetuates the acknowledgement of parent care division as gendered in the eyes of both men and women.

#### **5.1.4. SES and Arrangements of Parent Care**

As mentioned before, it is realized that the impact of family composition shows variations among different SES groups. For instance, in the literature, having no daughter is stated to directly cause decreased levels of care a parent gets; however, in this study, none of the parents from low SES groups experience this problem since the main responsibility is expected from son and his wife. The number of siblings also creates relatively little difference among low SES groups since the parent care is mostly understood to be the sole responsibility of a specific child – mostly the youngest son, only with contributions of back-up care or limited financial support by other sons and their wives.

Related to above assumption, some scholars (Brubaker & Brubaker, 1989; Gubrium, 1991) focus on the ethos and traditions regarding dependencies and care different in every family rather than merely on the family composition.

They believe that these traditions and ethos also account for the differences in the ways families respond to the needs of their elderly members. This in general gives us how families react to formal and informal help mechanisms but might also be related to the different ways of coordination of parent care within the family.

As it is observed from most of the cases in low SES sibling groups within the sample of this thesis, the traditional cultural expectation<sup>17</sup> of sons to hold the primary responsibility towards elderly parents and provide care to them is still persistent and applied into practice. This traditional cultural expectation is shared by parents and all siblings. In this sense, this expectation shows us the existence of ‘patrilineal patrilocal’ household formation within these cases. In this household type, the son and his family co-reside with the elderly parents in need and the takes care of the son’s parent only. Son and his wife provide almost all types of care, including instrumental, financial and emotional with only emotional and sometimes back up assistance coming from other sons and their wives. In this particular family arrangement, the son is considered to be the head of the household especially in decision making processes due to advanced age or death of his father. The elderly parents still hold very powerful positions concerning issues related to household through their influence on sons. In this case, daughters-in-law are expected to conform to the ‘normative caregiver’ role for their parents-in-law out of a duty towards their husbands.

Existence of this kind of traditional expectation has fundamental impact on the involvement of other siblings into the parent care. Although other sons, if there are, might be expected to contribute to parent care in some ways with the help of their wives; daughters most probably would be expected to be absent from the care system of their own parents This difference of expectation might arise from the general understanding that daughters are becoming part of their

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<sup>17</sup> This expectation might have its basis in inheritance issues. To read more on the expectation of youngest son to stay with parents and take care of them in different context, please look at Bourdieu’s *The Bachelor’s Ball* (2007, the University of Chicago Press).

husbands' family with marriage and exempted from their responsibilities towards their own parents. Brothers-in-law might also contribute to this situation by expecting their wives to take part in their own parents' care<sup>18</sup> and also expecting his wife's brothers to take care of their own parents as well.

On the other hand, in middle SES sibling groups, this traditional cultural expectation is still shared especially by parents but is not necessarily adhered by the adult children or cannot be easily put into practice. Rather than having the household formation mentioned above, in these middle SES siblings' families, transition to 'bilateral neolocal' households seems to be completed as predicted by Baştuğ (2002). In this kind of kinship system, adult children are not co-residing with their parents but in their own separate households. Some of the elderly parents with middle SES also prefer to live autonomously in their own place. This preferences of both siblings and parents lead to decreased possibility of co-residence patterns. The major exceptions are only the cases where elderly widowed mother living with unmarried or divorced adult children. The cases of co-residence do only result in over-involvement of these unmarried or divorced children in parent care.

Sons might be still expected to take care of their parents but this expectation is not as powerful as it is in some low SES groups. Furthermore, actualization of this expectation depends on the commitment of daughters-in-law to their role as parents-in-law's caregivers. Daughters-in-law would have a say on accepting or denying this role, not performing this role out of a duty towards their husbands. Even in some cases, they might have an influence on their husbands' involvement in parent care.

In these middle SES sibling groups, involvement of daughters is not problematic since they mostly have their economic independence and are not subjugated to their husbands' decisions. In fact, daughters are more involved in

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<sup>18</sup> Kandiyoti defines this situation as 'appropriation of women's labor and reproductive capacities by the patrilineage' inherent in patriarchy (Kandiyoti, 1995, p. 309).



their parents' care compared to the sons, as observed from the cases in this sample. The term 'bilateral' as the fact that both patrilineal and matrilineal parents would get care from their children depending on the joint decisions of spouses is more appropriate to the understanding of familism in middle SES groups. Daughters might still be involved in their parents-in-law's care but this situation would not serve as a moral constraint on their involvement in their own parents' care. Sons-in-law might be either supportive to or not interested in their wives' filial responsibilities and daughters would mostly have the power of deciding to be involved or not in their parent's care.

As observed in some examples of sibling groups with low SES, it might be argued that there are some families who are still in the process of transition from 'patrilineal patrilocal' to 'bilateral neolocal'. For instance, co-residence patterns are low in these families, but rather living within the same apartment complex with the parent observed. Thus, the over-involvement of a specific child might only result from this proximity to the parent. Involvement of daughters in the parent care and the loosening impact of expectation from sons to take care of their parents are in progress due to this transition. This transition also has an influence on the increased accounts of expectation of collaboration among siblings and also on the involvement of sons-in-law and daughters-in-law in parent care system. The cases of inclusion of daughters-in-law in parent care not through some normative role attributed to them but through their own decisions and consent are observed in these cases (although facing some objections from other family members, especially parents). Still, sibling groups with different SES are observed to show differences in terms of arrangements of parent care and some kind of transformation of the current care arrangements is taking place in both SES groups. It might be argued that this transformation does not need to lead low SES groups eventually to the current arrangements taking place in middle SES groups, this kind of linear transition cannot be expected since middle SES groups are also objected to this transformation process.

#### **5.1.4.1. Involvement of Sons-in-law and Daughters-in-law in Parent Care**

The literature on parent care by adult children pays significant attention to the involvements and roles of children-in-law too. There are many studies investigating whether sons-in-law and daughters-in-law are involved as much as their partners to the parent care system, what their contributions are, whether they provide support to their partners in care provision, etc. In this study, it is found that the roles of children-in-law change due to gender and also socioeconomic status. As the actual care provider or as the supporter of primary caregiver partner, children-in-law have crucial importance in the parent care system.

In low SES siblings groups, brothers-in-law are treated as total strangers who cannot be trusted when it comes to the issue of one's own parent care. This lack of trust might be originating from a general social expectation leading adult children, especially the sons in Turkish traditional context, to be responsible for taking care of their own parents. Due to this expectation, sons-in-law are expected to give priority to their own parents and they also expect their brothers-in-law rather than themselves to hold primary responsibility in care of parents-in-law. The most apparent case of this 'distrust' is coming from Mehmet's explanation. Primarily, these concerns about the so-called 'inappropriateness' of sons-in-law to be in charge of care of parents-in-law are explained within the context of parent care with co-residency. These sons with low SES seem not preferring their parent(s) to be both physically and financially dependent on sons-in-law.

We would take care of my father better as long as my wife does not go to work. You know, since I am the only son, he is closer to me. In my sister's house, there is a stranger (elođlu) there. Even though my brother-in-law is my cousin, still he cannot be like me. I cannot even think about sending him to their house (Mehmet, male, low SES).

If my mother has a health problem in the future, we would like her to go sons' house. We do not like her to go to houses of brothers-in-law. Since we are from Kızılcahamam, if she has to stay with her child, this has to be me, my elder or younger brothers, nowhere else (Abdullah, male, low SES).

These negative attitudes of sons from low SES groups towards their brothers-in-law are also supported by the explanations of their sisters concerning their own husbands. Daughters from low SES groups explain the reasons behind their less involvement in parent care responsibilities as originating from their husbands' attitudes and constraints on them. Esmâ puts these constraints by relating them to her husband's attitudes towards parents-in-law care.

You are bounded, you know. You cannot do it if he (the husband) is not willing to. He is ok with my mom but still we do not give my mother enough assistance. For example, when she needs anything, we cannot give it to her. He says that 'Until it comes to me to look after her, she has her sons; I am the son-in-law' (Esmâ, female, low SES).

Reluctance of sons-in-law about being involved into the care process of their parents-in-law might severely affect the actual involvements of daughters from low SES groups due to the fact that these daughters are mostly dependent on their husbands both in financial terms and also in decisions of the distribution of resources. In the decision process of which lineage to transfer the resources of the family, husbands are mostly more influential than their wives in these low SES groups. When the parents of their husbands are also in need, these women are expected to provide personal care to their parents-in-law instead of their own parents. However, as mentioned above, there is a gradual transformation taking place within these families which would possibly lessen the objections or complaints of sons-in-law to their wives' commitments to responsibilities.

Even when husbands are not constraining daughters from being involved in tasks of care to their own parents, parents-in-law might also be involved into

the process in low SES groups. In Sibel's case, the expectation of women to direct their efforts and concerns to their husbands' family seems to be shared also by her parents-in-law.

My husband would not say anything to the idea of my mother staying with us but my parents-in-law would say. They would not want that. They are jealous of my mom. They are in good relation with my mom but they don't give their consent to the co-residence of my mom with us (Sibel, female, low SES).

On the other hand, husbands are depicted as supportive or disinterested by women in middle SES groups. Having a supportive husband might be one of the most important resources a woman has, to be able to provide care to parent(s). The range of support from husbands varies from direct help to financial or personal care to indirect support by helping wives in household chores or other family responsibilities. Within this thesis, no woman has mentioned any type of direct support; husbands seem not to be directly involved in care responsibilities towards their parents-in-law. This is in line with previous studies showing that daughters are less likely to get support from their spouses than are sons (Henz, 2009; Horowitz, 1985).

Husbands with middle SES make few contributions in sharing the responsibilities related to their own children or household chores in order to lessen the burdens of their wives. Although not in substantial amounts, any contribution from their husbands is highly valued by these women. Abel (1989) points to the fact that even though husbands share little of their wives responsibilities towards their own parents or parents-in-law, they are appreciated for not making any objections. This fact is mostly valid for the case of daughters with middle SES except Zara. Zara is explaining how important her husband's good relation with his mother-in-law. This good relation between the husband and the mother increases the possibility of demanding assistance from husband when needed.

They have an incredible relationship, my mom and my husband. I am saying this sincerely, my husband is a wonderful person. Every day he tells her ‘mom, have a good day, I am leaving, do you have any request?’ when he leaves the home and every evening when he comes he asks ‘how are you mom, are you ok?’ He does this orderly every single day. Therefore, she loves my husband a lot. My husband loves her too; we have never seen his rudeness or disrespect, never. When she calls us, if I am not able to go and get her, he does this (Zara, female, middle SES).

Brody (1990) asserts that daughters-in-law are performing as primary caregivers of their parents-in-law only out of a sense of duty to their husbands, not on the basis of an emotional bond they have with their parents-in-law. Daughters-in-law have been the caregivers due to this normative commitment and the condition of caregiving is significantly co-residence. Other family members, due to this co-residence and normative basis of caregiving, do not see any need for discussion, negotiation of filial responsibilities and rarely provide assistance to daughters-in-law. Long et al. (1999) argue that in this situation, caregiving role of these women is not a consciously made choice but an extension of the already given role as ‘daughters-in-law’.

One of the differences between daughters-in-law in middle and low SES groups is that while within the first group these daughters-in-law have more freedom to deny their responsibilities towards their parents-in-law; for the second group, there is little room for denial if the husband is expected to hold the primary responsibility for his parent(s). While the duty towards husband and his family members is more apparent and powerfully enforced upon the daughters-in-law from low SES groups, their counterparts from middle SES groups are more open to negotiate this duty too. Sons from middle SES groups are indicating that it is up to their wives’ own decision to get involved into the parent care. Ahmet explains how the approach of daughters-in-law depends on mutual concern to each other’s parents among spouses.

My sisters' attitudes to their own mothers-in-law are the same. This is the result of the education we get from our parents. We have a tradition of showing respect to parents, elderly and even to the ones who are not relatives. There is always this thing... How you behave to your parents-in-law also affects your wife's behavior to her parents-in-law. We as life partners get into a path together. When my sisters have some concerns with their own parents, my brothers-in-law also show interest and respect. Therefore they also behave the same to their parents-in-law (Ahmet, male, middle SES).

In the sample, only some of the daughters-in-law are involved and their involvement is seen as relatively less by daughters.

It is also observed that daughters-in-law from middle SES groups mostly prefer to provide care to their own parents and direct their attention and resources to them instead of their parents-in-law. Still some of them were also involved in their parents-in-law's care since their husbands were the primary caregivers of their parents.

Some of the daughters from middle SES groups see their sisters-in-law as the reasons behind the less involvement of their brothers. They see their sisters-in-law as powerful enough to affect the decisions of their brothers.

My elder brother is the least involved one. I suspect that his wife is preventing him. We were in better relationship with her before but during my mother's sickness I have seen her true face (Gülşen, female, middle SES).

It is important to note that Gülşen takes her sister-in-law to be originally not supportive by saying that 'her true face' is the one where she created tensions during the mother's sickness period. This shows that in middle SES groups, daughters-in-law are not seen anymore as the trusted allies, especially in the eyes of daughters, in the context of parent care.

## 5.2. Negotiating the Parent Care Responsibilities

Family responsibilities including the filial one are seen as a matter of negotiation among individuals, not simply the result of following normative rules or acting according to some structural factors<sup>19</sup>. Adult children negotiate their own and siblings' responsibilities before committing to a particular responsibility. This particular responsibility may be assigned to them due to many factors; still they always have room for denying, shaping and reformulating these responsibilities or showing excuses for being unable to perform them. The negotiation of family responsibilities might also be seen as a product of the relationship between individual agency and social structure (Connidis & Kemp, 2008).

Parent care involves numerous individual and joint-family decisions by family members who have different preferences, circumstances and constraints affecting these decisions (Pezzin et al., 2007). Adult children provide care to their parents by also taking their siblings' contributions into account. Thus parent care as a system involves not only the primary caregiver and the parent but also all siblings who are actively involved or not. Even non participation of a sibling might have an impact on the actual behavior of an adult child regarding parent care. As Connidis and Kemp (2008) put it, negotiating and planning parent care are affected by the relationships of adult children with their parent(s) and sibling(s).

This study showed that the importance of negotiation of responsibilities is relatively higher for middle SES sibling groups. In low SES groups, both parents' and adult children's expectations on filial responsibilities might not be open to discussions.

According to Finch and Mason (1993), negotiation of responsibilities among relatives includes both implicit and explicit elements, not in a mutually

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<sup>19</sup> For further arguments on this issue, see Finch, 1987; 1989.

exclusive sense though. Overt negotiations rarely take place until the situation of the parent gets really severe and the burdens of care exceed the capabilities of children. It has been understood from many families in this sample that even when this kind of transition happens, overt negotiation might be a very rare occasion. Instead of seeing the current arrangement as an outcome of open discussion among siblings, most of the children take it as the only possible option 'naturally' arising and necessitating almost no negotiation.

Overt negotiations before or within the process of caregiving among siblings are not very common within the sample of this study. Although there is an expectation by some siblings from middle SES groups that there should be open discussions, they also admit that they lack the preconditions for this type of negotiation. Gülşen explains that instead of openly negotiating the responsibilities, her brothers are waiting for her to demand any type of contribution.

Where is this civilization! When we were at hospital, the idea of hiring a caregiver just aroused out of necessity. Only, my little brother told me that he can take my mom, but I did not want it. Afterwards, I wanted to bring her with me to Ankara; therefore, I now hold the whole responsibility. However, they do not do anything unless I ask for it (Gülşen, female, middle SES).

Although Gülşen sees the current division of filial responsibilities among siblings as not explicitly negotiated, her brother Harun considers same division as an outcome of an open discussion among all siblings.

My mom was discharged from the hospital; consequently three of us came together and decided to take my mom to Ankara. In the past we said that we would look after my mom but my elder sister did not accept it. She said 'you will get tired; you also have your own routine you could not look after mom at home'. Initially we did offer them this idea. In fact I did not tell them, my spouse offered them and said 'if this is the case... I will receive her salary and in return I will look after her'. My elder sister seemed to be convinced at first, and then



she changed her mind and said ‘no you are not able to do it. We will find someone and try her. My elder brother suggested to us to look after her in a rotation of 10-15 days or 1 month, but my elder sister also refused this idea too. Of course we sit and talk ... (Harun, male, middle SES).

This difference of perception might be explained as such; an open discussion somehow points to a democratic process and some siblings are proud of having these open discussions. Harun might want to overemphasize that they have a democratic atmosphere where they take decisions together.

Attributing the ‘guilt’ of not having open discussion to other siblings, as Gülşen does, is one way of explaining the situation. For instance, some siblings question themselves whether there might also be the possibility that they do not let this negotiation take place. Questioning her role in the lack of open discussion among siblings, Nilgün does not see any attempt from her siblings to reverse the situation.

We have never discussed about the division of labor such as ‘should we do that or how should we do it’. Maybe there is selfishness in me; I mean maybe they also want to be involved. However, I cannot see any kind of demand, a hint, or an attitude on their side. If they would say something as ‘sister, should we do it like that?’... They always accept whatever (Nilgün, female, middle SES).

Contrary to cases of middle SES sibling groups, there is almost no overt negotiation taking place among siblings in low SES groups. It also seems like these siblings are proud of having no discussion like that. This difference between families from low and middle SES groups might be originating from different meanings attributed to the ways families work.

We did not have this kind of conversation; we did not feel a need for it. My brothers do it voluntarily (Esmâ, female, low SES).

Finch (1989) comes up with the concept of “legitimate excuses” which refers to socially acceptable reasons family members provide for not being able to

fulfill their expected responsibilities. These legitimate excuses are fundamental in negotiation of filial responsibilities towards elderly parents among siblings. As Aboderin (2005) asserts adult children are obliged to provide care to their elderly parents only to the extent they are able to do so. Nevertheless, Finch and Mason (1993) state that it is important for people to show that they are unable rather than unwilling to have actual involvements in parent care system among siblings. Those who are named as having no excuse of inability but they do not do just because they are unwilling are mostly blamed for not performing their filial obligations. Making excuse does not work for being exempted from one's filial responsibilities, according to these two scholar, these excuses should also be seen as 'legitimate' by other family members.

Within the interactions among family members, some excuses of some siblings might be accepted as legitimate enough while others might be harshly criticized by siblings. An excuse made by a specific child to be regarded as legitimate by siblings is dependent on both the excuse itself and the person who uses it. Zara is explaining why some excuses of her sisters are not legitimate for her while others seem acceptable.

Their excuses are reasonable when you look from their point of view. This is a defense mechanism as 'if we were also in Ankara, we would have been doing it'. My elder sister is working, right, but she also has long leaves from work. She can use all this time but she does not. She prefers to use this time for other things. My younger sister is not working. She can come here and she can give me support in caring for our mom. She has her own reasons. She says that she has a son who is studying over there, a husband who is working. She claims that she cannot leave the house since there is cooking, dishes and laundry and they cannot do this housework (Zara, female, middle SES).

Most used legitimate excuses are categorized as employment, competence, other family commitments, geographical distance and lack of resources by Finch and Mason (1993) in their study. Although authors acknowledge the fact

that there might be other excuses or these excuses might not be used within different contexts, interviewees within this thesis gave almost similar excuses for their inability of being involved in parent care. Still, either anticipating or overtly negotiating who is likely to provide which type of support to parents, siblings may vary in their ability to realize a particular outcome based on such socially structured relations as gender and class (Connidis & Kemp, 2008).

Within the families, geographical distance is one of the most stated excuses both for their own inabilities and their siblings'. Still, the perception of distance is somehow different for low and middle SES groups of siblings. While in middle SES groups, adult children take the excuses of their siblings who reside in another city as legitimate, in low SES families, living in another but very close neighborhood is also seen as a legitimate excuse for not being involved in care activities or for not being able to visit parent(s) frequently. This difference of perception might be explained related to opportunities as having cars and other financial means or lack of them in different SES groups.

In addition to SES differences for the legitimacy of excuses, there are gender-based differences too. In this thesis, sons are more frequently providing their employment as an excuse for not being able to spare time for parent care. Employment is not given as an excuse by daughters within this study. Daughters who are employed prefer to arrange their working hours according to the needs of their parents.

I was obligated to arrange my work according to my mother's needs. Since I am in the private sector, it is easier and I am able to do so. I told my employer that my mom is sick and I have to give her medicine every morning and also she needs to see me every evening. Since he does not want to lose you as an employee, he does not object to that. Before having this last caregiver woman, I had many troubles about settling one. This situation created clashes with my job, however now I am better. Since last month, I manage to work according to my schedule (Gülşen, female, middle SES).

This is made possible since those employed daughters who are actively involved in parent care have jobs in which they have autonomy to decide their schedules. In some low SES groups, sons mentioned that the least involvement of their employed sisters can be understandable due to the fact that they do not have enough time to be concerned with their parents. These employed women from low SES groups have more demanding jobs in which they may not be able to make lots of time arrangement. This situation leads these women to quit their jobs whenever their labor is needed in parent care.

Sons' excuse for their absence from performing practical or personal types of care is not related to employment but to their inability to do as well as their sisters do. They see that they are unable to give baths to their mothers as sisters for example; they name daughters or daughters-in-law as more appropriate for these tasks. This kind of excuse is related to the term 'competence' as used by Finch and Mason (1993). In Ahmet's explanation, it can be understandable that daughters are seen as having some kind of 'natural' aptitude for providing these types of care to parents.

I cannot do what my sisters do. Even if I want, or try hard, this is a kind of ability to care for or provide services. Yes, you do a lot in terms of financial assistance but in terms of physical assistance I cannot do what they do. Of course, if I would be in such a position where I have to, I would but still not as they do without hurting. I do not only mean physically hurting, but also emotionally. In this sense, the kind of responsibility incumbent on them is very different (Ahmet, male, middle SES).

Lack of resources has not been declared as an excuse among the children from high SES groups. This might not be only due to their comparative financial well-being but also due to their parents' own economic independence. Most of the children declared that their parents do not have a need of financial assistance; they still continue to ask and help when needed though.

In low SES sibling groups, lack of resources is most frequently stated as a problem but they do not or cannot use this as an excuse since their siblings do also have similar conditions. If there are disparities in terms of economic well-being among siblings, relative lack of resources are sometimes used as excuses for not providing assistance to their parents as much as other siblings who are well-off.

There was no such a division of labor. Whenever any kind of need is a concern, my elder brother is the arbiter. My younger brother also helps him. This is because their financial situation is better. They have cars and everything. They support my mom more than any of us (Abdullah, male, low SES).

In some low SES sibling groups, it has not been explicitly declared but understood through other questions that there might happen a situation as one son taking care of parents while other siblings in some way support this sibling financially. Ali gives the example that his brother in Germany bought the house they live in so that he could afford taking care of his parents since he is not paying rent. Daughters are almost not expected to make any financial contribution to their parents in low SES sibling groups, since sons-in-law are seldom expected to use the resources they have for their parents-in-law.

In the existing literature on negotiations of other family responsibilities, other family commitments are frequently provided as excuses for not being involved in parent care; in this study however, there are only some exceptional cases. Mostly it is the women whose other family commitments are seen as factors preventing their ability to perform their duties towards their parents. Men do not even talk about their children, parents-in-law or household chores as excuses for their less involvements in parent care.

In addition to gender differences, there are also socioeconomic status differences in the possibility of providing other family commitments as excuses. In low SES sibling groups, dependent young children are not seen as

reasons for not performing the filial responsibilities. Taking care of parents-in-law does not form an excuse since it is the responsibility of the daughters-in-law to take care of their parents-in-law so they are already exempted from their duties towards their own parents.

In the middle SES sibling groups, it is seen that most frequently addressed excuse stemming from other family commitments is the care needs of spouses, especially for some daughters. In larger sibling groups, the eldest sisters reached an advanced age where they are taking care of their husbands, Alzheimer in one case. There is no case of daughters taking care of their parents-in-law because they are already either dead or are taken care of by their own daughters. Also the advanced age of some siblings enable them to canalize all their time and efforts to their parents since there is no commitment required from other family members.

My three big sisters are mostly sharing the care among themselves, according to their own programs. Their children are all grown up. In this sense, they do not have anyone else to look after except their husbands. Only my mom, they are taking care of her in turns (Sami, male, middle SES).

Within middle SES groups, the only case of other family commitments to be a legitimate excuse is the young children who are still dependent on their parents. Gender plays again an important role in the provision of family commitments as legitimate excuses. Women from middle SES sibling groups, emphasize how they manage to balance their competing obligations toward both younger and older generations instead of showing their commitments to the young generation as an excuse. However, in Selma's case, it is obvious that she is not able to manage her commitments to both generations, resulting in the neglect of her children and also distress.

'Mom I miss you so much. Mom when will you come home? Mom when are you going to stay at our home for good?' My daughter keeps talking like that. I feel very uncomfortable, to be honest. My

conscience is not clear if I don't go to my parents. I feel unease. If I go, I still feel anxious too. On the other hand I neglect my children. All these events cause psychological pressure on me and I just feel like I am already depressed or so close to be (Selma, female, middle SES).

Zara, somehow opposite to Selma, places the priority on her daughter. Still, it is understood that this priority does not directly exclude her mother from her concern too. She just talks about balancing the demands of both sides by explaining the situation to her daughter

I am always trying to keep this situation in balance. My daughter always has a priority in my life. Still, I am always explaining her as 'if something happens to your grandma, we would be very sad, you would be very sad and I would be very sad too'. This is why she can understand that now we are getting involved with her grandma, but later we will do whatever she wants. This way, I am trying not to lose this balance (Zara, female, middle SES).

Gender of a child is not noted as a possible legitimate excuse in the existing literature on negotiations of responsibilities. In this study, however, daughters from low SES groups simply put that they are not able to be involved in parent care as much as they want just because they are 'daughters'. Esma's words also give a hint of some kind of similarity to the excuse of 'competence' since being daughter limits their competence in providing help as sons do to their own parents. In low SES families, daughters are exempted from both the resources and responsibilities of the family of origin and are seen totally as a part of family of procreation. This, in turn, also affects the sons' acknowledgement of their sisters' lesser involvement as no problem but something naturally derived.

Now naturally since they are sons, they are able to do whatever my mom wants, they take her wherever she wants to go to. We, as daughters, are not able to do these things. What can I do if my husband does not let me? (Esma, female, low SES).

Adult children do not only talk about legitimate excuses of their own, they sometimes refer to other siblings' excuses as well. It has been stated that siblings with closer ties, place greater emphasis on legitimate excuses of other siblings and assume the responsibility by themselves consequently (Connidis & Kemp, 2008). Also reversible, more distant ties among sibling result in making legitimate excuses for one before others. In the sample of this thesis, Hilal from all sisters' sibling groups provides employment of his elder sister as a legitimate excuse and assume the responsibilities toward the elderly widowed mother even though she herself is also employed. Nilgün, in the same sense, says that her brother is not able to provide care to their parents because he has young children of his own. However, she is the care manager of her disabled mother even though she has a family and employment. It might be argued that the same commitments do not work as 'legitimate' excuses for every child even in the eyes of themselves.

As stated above, concern for one's siblings might lead one to concentrate on their excuses and to consider these excuses as legitimate even before concentrating on one's own circumstances. These siblings with greater concern for each other consider that other siblings would all contribute to the parent care if they were able to. This belief leads them to make legitimate excuses for their siblings' relatively lesser involvement and justify their own over-involvement.

My other siblings... My little brother was in Istanbul, it would have been different if he had been living here... As for my sisters, since one is working and the other lives further away... So since we are living closer to my mom, we did take care of everything and looked after my mom. However, if they had been closer they would also have done their duties (Orhan, male, low SES).

I am not blaming them so much. Everybody has his/her own home. Everybody has a child, something to do, a job. Everybody also needs to have some spare time. Just because I am not able to have this time,



it would be wrong to expect them to be like me too (Selma, female, middle SES).

My sister does not have means to take care of my parents. She is the only worker of her family, she is a widow. She does not have time and means to look after them. My brother in Germany tells me sometimes that he would like to be able to help. He does not have the opportunity to do so, he is sick too. Since he is not able to work due to this illness, he has financial problems too (Ali, male, low SES).

Apart from all these legitimate excuses made for oneself or one's siblings, the importance of making excuses and making other family members to accept the legitimacy of these excuses might be criticized. Differences among adult children might be expected in terms of importance given to this part of negotiations.

Lastly, adult children's perceptions of division of elderly parent care among siblings are as fair and just serve as a crucial point in directing the negotiations. In many studies, siblings' expectations of equal division of care have been frequently mentioned (Connidis 2001; Ingersoll-Dayton et al. 2003). Meeting these expectations is relevant to the understanding of 'distributive justice' within the parent care. The meanings attributed to the actual division of care as 'fair', 'just', or 'unjust' depend on the interactions among siblings and affect the presence and types of negotiations.

In families where siblings have closer ties and are in solidarity with each other might be more inclined to describe even obviously unequal distribution of responsibilities towards parents as fair. In contrast, more distant and loose relations among siblings might increase the probability of naming the existing distribution as unfair and unjust. Gülşen describes her relations with her brothers not as closer as they were in the past, this in turn affects her perception of the division as unfair and she also has some plans in her mind to make the division fair again.

If at least I am paying the rent of my mom's house, they can stay at this house with their wives in two or three days a week. They can come and please my mom; this situation would have been arranged in rotation for four month periods. Each sibling stays with her two days a week for four months, would not it be good? If they had helped their mom a little bit, my burdens would be lessened too, this would be great (Gülşen, female, middle SES).

Especially in some families, perception of the division of care as equal depends on the solidarity among the siblings. Hülya and Nurten define that all three sisters are very willing to do their best not to create an unfair situation for anyone. They manage to do it by paying attention to each other's needs, going to vacation in separate times, arranging their working hours according to each other's schedules. Judging unequal contributions to parental caring as equitable is found to involve viewing each sibling as providing support in proportion to his or her socially defined ability to do so (Connidis & Kemp, 2008).

Ahmet sees the process of distribution of responsibilities as both democratic and fair even though her sister Selma states an unequal distribution. It is possible to say that what Ahmet sees among his sisters as fair might be related to his relatively less involvement into the actual care provision and negotiations of the responsibilities.

We are in a constant communication. We are trying to solve it democratically. None of us overburdens another. If one of us says that s(he) is not able to do, another fills his/her place easily. When someone says that s(he) has things to do, or say that s(he) is busy, others do it right away. (Ahmet, male, middle SES).

As mentioned before, even in some low SES sibling groups, there is an expectation and anticipation of having a fair and equal division of filial responsibilities. Sibel points to a situation that this equal division of care in the future might only be realized through discussions – though not taking place yet – among siblings.

No discussion is being made yet. However, we say that we are going to take care of her in rotation when she gets dependent. Not to burden a single person with her, you know. I hope that she won't be dependent, but if she will, we will take care of her for a month or two one by one (Sibel, female, low SES).

In most of the families, even though children see the division of parent care among siblings as unequal, they mostly accept it as it is. This acceptance of the situation as fatalistic and not possibly changing in the close future also leads these children not to negotiate further this unfair nature of the division. Although some of them like Selma tried to change things, after a while they experience helplessness and fatigue which lead them not to negotiate with their siblings anymore. This attitude in turn perpetuates the unequal distribution of tasks since one sibling does almost everything without demanding others to share.

I say 'do that', my sister does not even hear what I am saying. The other one is the same. I say it. But later I shut up not to start a fight. I say it once, I say it twice and then I just do it by myself since I do not want to spend time on dealing with them (Selma, female, middle SES).

He has to do it willingly. It does not happen just by me telling him to, he has to be willing. I actually said once or twice. I told him that he is the son and son takes care of parents (Döle, female, low SES).

### **5.2.1. Elderly Parents' Preferences**

Negotiation of responsibilities does also include elderly parents. Their preferences are taken into account when actual care arrangements are made. However, there are some changes due to SES in terms of the preferences of the elderly, to what extent elderly parents talk about these preferences. Furthermore, respect for the elderly parents' preferences change with the number of children involved in a caregiving process since siblings provide

checks and balances on each other in terms of preventing ‘bossy’ or ‘controlling’ attitudes towards their parents (Cicirelli, 1995).

In middle SES groups, parents have more influence on the care arrangements made by the children. Adult children try to find the arrangement which best suits to their parents’ needs and preferences. The children are also respectful to their parents’ preferences and always leave the last word to be theirs. It is not always due to thoughtfulness of children but also because of the fact that the parent is resistant on not accepting any kind of suggestion which does not suit his/her own will. Sami defines this situation regarding his mother’s preferences as:

Even if we consider the idea of evaluating various options, the final decision belongs to my mom. We cannot get her to do anything that she is not willing to. We sit and talk, when she says ‘no I am staying here and am going nowhere’... For instance, she used to refuse a caregiver too (Sami, male, middle SES).

On the other hand, in low SES groups, preferences of parents are not directly referred by the adult children. This situation may be due to the fact that there is less negotiation among the family members in low SES groups as asserted earlier. These children only assert explicitly that it is also the parents’ preference to stay with the son rather than to stay with the daughter. Some of them claim that their parents do not and cannot have comfort in their daughters’ house, since there is a stranger (*elođlu*) over there. This preference of the elderly is also accepted by the daughters as Hatice says.

No no, it totally depends on my father’s wish... Wherever he wants to stay, we give our ok to it (Hatice, female, low SES).

Elderly parents, in their minds, might also have a child from whom they prefer to get some types of care. For instance, in one family, both the son and daughter declared that their mother wants their eldest sister to be with her all the time and she expects most personal types of care like giving a bath to her.

In other families, it seems like moms have clear preferences regarding from which child she can ask financial help or from which child she can get medical advice.

In the cases where children decided to hire a woman to provide personal and practical assistance to their parents, it is frequently stated that a period of resistance to this woman by the parent(s) – mostly mothers – takes place. Mothers could not easily adapt themselves to the idea of getting help from someone outside the family. According to adult children, their mothers feel more dependent and needy when this woman intervenes with their regular tasks like cooking and cleaning. They may see this kind of arrangement as a violation of their autonomy and self-dependency. Getting assistance from children and from a stranger are realized as different from each other, the first one is not regarded as problematic as the second.

Some studies show that protecting parental autonomy is regarded by adult children as part of their understanding of filial responsibility (Caron & Bowers, 2003; Piercy, 1998). This understanding is found to be related to individualism which gives importance to ‘sense of self’ and empowerment of the elderly (Funk, 2010). In this sample, some children from middle SES groups reported that their parents’ autonomy is essential in their care arrangements. The most fundamental part of protecting this autonomy of their parents’ is asserted as enabling them to live at their own place. This attention to create a place where parent(s) can continue to have an autonomous and private life is seen from Ahmet’s account:

In my mind, I always see it that they need to stay in a separate place where they can welcome their own guests. They need a place which they can call ‘mine’. Whenever they get angry at us, they should be able to shut their doors to us. Also in this place they can live without being in need of us, this is the most important part (Ahmet, male, middle SES).

The most frequently asserted preference of elderly parents from middle SES groups is to age in their own place. They are strictly against leaving their home where they have lived for most of their lives. As long as they are able to live autonomously in their own homes, these parents do not want to move to their children's house and become dependent on them.

My mom would not like to leave her home. Especially she would prefer not to go to her other daughters, to İzmir. Her first choice would be her own home but second one would be here, my house (Zara, female, middle SES).

She decides what should be done. She is not the type of person who would do what other people decide for her. She would not do anything just because we want her to. A lot of persuasion is needed in her case. She has everything in her current house; she has her garden, lots of trees. She has really good neighbors, a very peaceful community. This is why I think in the future it would be really hard to bring her to our home (Çağrı, male, middle SES).

These preferences of elderly parents mainly from middle SES groups but also seldom observable in low SES groups to age in their own place are the most respected rights within international and national action plans on aging.

Another preference of some parents in both low and middle SES groups is to spend the summers in the village or hometown as soon as they have the ability to do so. This fact is related also to the migrant character of the families. None of the families in the study is originally from Ankara and some of them still continue their bonds with their place of origin, especially the elderly parents prefer not to cut these bonds. Some of them still have places in these hometowns and spend their summers over there.

He likes the village more; he could spend his time more efficiently over there. He does not stop, goes to the field and create some job for himself. Here, he does not have this option, only goes to the mosque. He does not like staying at home all day long. Maybe he gets bored because he feels useless here. Still we have concerns when he goes to

the village. Although he is free there, he has many troubles due to loneliness. He does not have anyone who would cook for him, he has to do it but he cannot. We prepare meals for him and send them to the village. When someone comes from the village to the city, we give him/her food and send it to my dad. We are trying to handle this situation like that. In every two months, on Sundays, we definitely visit the village too (Mehmet, male, low SES).

My mom feels comfortable and safe in that house in Bartın. This is why it is not a problem for her to stay with the woman there. Sitting behind that window looking at the sea comforts her, makes her feel safe. She does not even look for me over there (Gülşen, female, middle SES).

Parental autonomy is not always welcomed by the adult children. Some children may not be able to value this preference of their parents and sometimes object to it. The choice of preserving parent's autonomy may also interfere with children's preferences and put them into difficult positions within their own private lives and choices. In the quotes below, Orhan says how his wife got upset as a result of her parents-in-law's preference to stay in their own place. It also gives the hint about how this kind of preference puts higher burdens on the son and his wife in providing constant care and affects their order of life. Sami, on the other hand, explains how they could not leave the apartment where they are living due to his mother's preferences. The preferences of the elderly may inhibit their children's preferences as proved by these examples.

The elderly are used to stay alone, I don't know why. After the surgery of my mom for instance, my wife wanted her to stay with us so that it would have been easier for caring. My mom did not want to come downstairs and preferred to stay at her own home. My wife got upset a little bit. I told her that there is no need to get upset, we could get upstairs during the day and come back to our own home during the evening. She understood that there is no need to get upset. We moved back and forth between upstairs and downstairs for two months. We had our dinners over there. We had the cleaning of their

flat, we had washed the dishes. My wife welcomed all the guests coming for my mom after the surgery (Orhan, male, low SES).

We could have moved to another house, we could have left this one. For years, we have been living here due to the fact that this is our home place. She does not accept this kind of thing. She does not accept moving from this home, getting into any of her children's houses. We could also have been rented another house for her in another neighborhood. However, are they called as old stager (eski toprak)? Maybe because of that, she is going to live there and won't leave that house. Due to her, we also continue living in that apartment and that neighborhood (Sami, male, middle SES).

This kind of constant contradiction between parents' and children's preferences may put both parties into a conflictual relationship. These situations connote the ambivalent character of intergenerational relations in the sense that adult children are stuck between preserving and respecting parental autonomy and protecting their own autonomy and private lives.

### **5.2.2. Tensions and Conflicts**

Parent care is seen as a distinct experience for siblings where they reassert their identities towards both their parents and other siblings (Harris 1998; Lashewicz et al. 2007). While making this, there occur tensions and conflicts, especially during negotiations of each other's commitments to their filial responsibilities. Criticizing the absence of a sibling in the division of responsibilities or the quality of care given by another sibling all result in tensions among the family members. One source of conflict among siblings is considered to be the lack of guiding principles about how caregiving responsibilities should be distributed (Connidis & Kemp, 2008). Another source of conflict among siblings arises from the requests for assistance and the necessity of negotiating the delegation of caregiving responsibilities. These negotiations might most probably end in disagreements and dissonance not only among siblings but among all family members. Brody's (1985) definition of caregiving as 'normative family stress'



hints that the tensions and conflicts are intrinsic to the parent care dynamics as well.

Other than the inherent tensions within the caregiving process, parent care by siblings also encloses the conflictual nature of sibling relationships in adulthood. Sibling relationships, even though having different facets, are characterized by the ambivalence between being intimate due to the special bond they have and conflicts arising from asserting their independent identities and distinction from each other (Apter 2007; Hequembourg & Brallier 2005). This ambivalent character of sibling relationships is becoming particularly sharp within the negotiations about filial responsibilities towards parents.

While fulfilling the needs of the parents is regarded as a must for each child in the families, they also consider what each other does in this fulfillment and whether there is equity in the distribution. Due to the idealization of equal involvement by all siblings in the caregiving process, tensions and conflicts arise when there are disparities among the siblings in terms of their contributions. The possibility and frequency of tensions and conflicts increase in the cases where there is no collaboration among the siblings. Whenever one sibling feels like s(he) undertakes the most part of the responsibilities, s(he) mostly feels that there is an unjust situation and sometimes prefers to reflect his/her resentments and concerns to the others.

Unequal distribution of care activities results in frustration of over-involved siblings and they eventually reflect this frustration towards their siblings. In parent care by adult children, different than spousal caregiving, these children are more likely to ask help from their siblings which increases the possibility of conflicts (Merrill, 1996; Strawbridge & Wallhagen, 1991). Gülşen, as being an over-involved sibling with almost no help from her elder brother and only back-up assistance from her younger brother, explains how this unequal distribution led her preventing the access of her siblings to their mom.

I had not given the address of my mom's house to my brothers when I took her to Ankara. I did not tell them. I was so angry at them back then; this is why I did that. I told them on the phone 'you do not deserve your mom'. If they deserved their mom, I would have given them the address. I have told that to both my brothers (Gülşen, female, middle SES).

Situated acceptance of siblings' contributions as less than one's own contributions (Lerner et al., 1991) also leads to further conflicts within the family. In addition to perceiving other siblings as contributing less, there is also an issue that siblings may see each other's efforts not as good as theirs no matter the level of their contributions. Harun gives an example of a dispute between his brother and sister originating from their arguments about each other's contributions.

Temporarily it happened, especially during the illness of my mother. While we were in the hospital... We were visiting her in turn at the hospital. In rotation, each of us was spending one night with her. In this period, my brother and my sister had a dispute. I was outside the hospital at that time. Later on, the tension between them also spread to us. There was gossip and talk. They were like 'you took good care of mother; you took bad care of her' (Harun, male, middle SES).

This severe example of disputes from the sibling group of Harun and Gülşen shows that lack of collaboration has a detrimental effect on the relationships among the siblings (Merrill, 1997). These disputes seem to have long-lasting impact on Gülşen's relationships with her brothers since she declared that she does not talk with her elder brother at all and has very limited contact with the younger one.

According to the results of a study done by Suito and Pillemer (1996), siblings who are taking the most part of the caregiving tasks are particularly showing their reactions toward their less involved siblings or those who are criticizing their efforts. Ali, as being almost the sole provider of all types of care to both

his parents, is resentful to his siblings, as might be clearly captured from his sayings below.

Of course a person gets disheartened, is it easy? You do not provide any emotional support, at least provide financial support but they are not doing it either. Then, at least do not gossip about that matter. It is really hard to look after an elderly person, we are not running away from it but at least you should not be against this one who cares (Ali, male, low SES).

The tensions increase when the needs of the elderly increase with further dependency and illness. Since any severe condition of the parent would require increased efforts, patience and time spending from the adult children, tensions increase too. In high SES groups, the occurrence of conflicts is mostly due to burdens of caregiving, especially of personal care and the time consuming side of the process. The adult children from middle SES groups mostly talk about problems emerging from siblings' lesser concerns about each other's need for some personal quality time which becomes reasonably impossible due to the lack of collaboration or unequal division. It can be understood that these adult children see parent care as mostly affecting their lifestyles, more than anything else.

On the other hand, in low SES groups, tensions are more related to the financial concerns. These financial concerns range from inheritance matters to financial burdens originating from medical needs of the parents. In one or two caregiving families from low SES groups, caregiving tasks, especially personal ones, prevent one or two family members from having employment and this situation leads to less money coming to the household. This creates tensions among the siblings since whoever takes the primary responsibility of the parents also accepts the declining financial well-being of their own families.

In low SES groups, conflicts between children-in-law and their parents-in-law, especially within the relationship between daughter-in-law and mother-in-law,

are forming an important part of conflicts. These conflicts are not necessarily arising from the issues of parent care but are perpetuated by co-residence and total dependency of the parent(s). Disagreements about the management of domestic issues also take place between these two groups of women for gaining the dominance in the decision-making process.

Tensions also take place among adult children and their siblings-in-law. In middle SES groups, since daughters-in-law are less involved in parent care, daughters mostly accuse them for not being involved but also for affecting the involvement of their husbands, namely the brothers. It has been noted that almost all daughters have some kind of problem with their sisters-in-law, these problems may be originating from something else other than parent care, but still they also mention conflicts as arising from the negotiations of responsibilities. On the other hand, in low SES groups, this time, primary caregiver daughters-in-law are showing their resentments toward the less involvement of daughters. However, conflicts are not occurring between adult children and their siblings-in-law among low SES groups as much as they occur among middle SES groups. This difference may be due to somehow clearer guidelines defining the responsibilities of children and children-in-law in low SES groups compared to the middle ones.

Conflicts are not taking place only among siblings, but also between the adult children and their parents. Some adult children confess that it is hard to take care of an adult person compared to taking care of a child. Adult children perceive parent care as peculiar to itself since parents have to be respected no matter what and their demands have to be met immediately since they are the elderly. This situation puts higher burdens and stress on the adult children.

We are trying to show patience by really forcing our limits. I mean there are some moments you could just grab her ear and say 'don't do it' if she was a child. There is no possibility of threatening such as 'I will tell this to your dad'. She is as if playing with us as some puppets, she has our strings. Her requests and desires are met straight

away. If not, she sulks. We cannot resist her sulks (Hülya, female, middle SES).

Furthermore, expectation of gratitude from the parent is also current among the children. When the parent does not show his/her gratitude, this may create tensions between the elderly parent and the adult child.

We are better than before in terms of our relationship with mom. She is a little bit of a dissatisfied person. You buy a sweater for her, she is always ‘why did you buy it?’ She would never thank you. Always ‘why did you buy it daughter, I have one’. Maybe she gets happy but she does not show it, you know old people (Ayşe, female, middle SES).

The constant relationship between the parent and primary caregiver child increases the likelihood of conflicts or at least tensions among the two. Sharing the same household perpetuates these tensions especially since there is a higher possibility of having both negative and positive experiences together. These tensions, in turn, result in comparably less favorable relationships between the elderly parent and the adult child who is spending the most time with the parent as in the case of Serkan.

Being constantly with her damages our relationship. We are sharing both our happy moments and stressful moments. Therefore, she has negative experiences in her relation with me even though she has all good memories with other boys. This situation sometimes results in seeing them as better than me from her point of view. For example, she sees Burak rarely; therefore she misses him a lot. As a result, her time with him passes well (Serkan, male, middle SES).

Apart from all these cases of conflicts considering parent care among family members, Ahmet points to a fact that there sometimes exist checks and balances for avoiding further arguments. Parents act as mediators whenever tensions increase and they obviously do not want to be the subject matter of conflict among their children.

There has never been a big argument among us. My parents would not allow something like that. They would say, 'if you are fighting with each other because of me, do not help me'. They have this kind of interesting attitude. They would act as if they do not need us. They have this pride, you know. My father automatically says 'if you do not want to, don't help me' whenever you say something negative. He has this personality (Ahmet, male, middle SES).

### **5.3. Dynamic Nature of Parent Care in Life Course**

It has been observed, within this study too, that distribution of filial responsibilities among siblings is not static over time (Stuifbergen, 2011). Care arrangements for parents among adult children are open to change through time in regard with the changing needs of the parent(s) and changing circumstances of the children. Connidis (2001) argues that since most of the studies on caregiving are cross-sectional examining the process at a specific point in time, the dynamics of the caregiving process including the flows of involvement by different family members over time cannot be captured. Although this study is cross-sectional as well, retrospective questions and family histories helped to reveal this dynamic nature. The dynamic nature of parent care will be shown through some distinct cases from the scope of this thesis.

There are some cases when the needs of parent(s) exceed the capabilities of children to continue personal caregiving by themselves, adult children prefer hiring someone to perform these demanding activities. Hiring someone can only be realized in families which can afford this kind of help from outside. In one of the middle SES families, both Sami and Mualla declared that when their unmarried sister co-residing with their widowed mother died, they hired a woman to be in charge of their mother's care instead of moving her from her own house. They explained that the death of their sister created a totally different situation where they had to rearrange everything. Although this woman was providing assistance to their mother in ADL, they still visit their

mom and help her in rotation with IADL which were mostly handled by their late sister.

There are also some cases where depending on the changing situations regarding geographical proximity, marital status and living arrangements, siblings had been in a situation to change their already existing division of parent care. One example of these changing circumstances come from Serkan and Çağrı such as before getting married, Çağrı was the one living with her mother. Almost in a very close period of time, he got married and his elder brother Serkan got divorced so that Serkan started to live with his mother. This change in living arrangements is almost automatically reflected to the distribution of roles concerning their mother. Çağrı explains the situation as:

I can say that it is my brother who holds the most responsibility towards my mother since he is the one living with her now. He does her shopping, he gets involved into medical stuff and he takes her almost everywhere. I can imagine his burden because I was doing all these things before getting married and leaving the house. It does not mean that we are not helping our mother but still the one who co-resides with mom holds the main responsibility (Çağrı, male, middle SES).

Sometimes moving to distant places also change the whole division of responsibilities each sibling performs to his/her parent(s). Ayşe was living in Bolu with her own family, living in a place very close to her parents. She declares that she took care of her parents for ten years, including the period when her father was in the hospital before his death. When they had to move to İzmir as her husband found a job over there, they had to leave the widowed mom alone behind. After this moment, her sister, Zara who resides in Ankara became the one who took the main responsibility of their mother. Although Ayşe is still involved with her mother's care by taking her to İzmir for two months a year, Zara replaced Ayşe due to her geographical proximity.

This dynamic nature of caregiving is in accordance with the life course approach. It is seen from the cases of many families that the transitions one family member experiences have great impact on other members' lives and also affect the division of care given. As Ayşe moved to somewhere else, leaving Zara as the primary caregiver to their mom, Zara's transition to parenthood also impacted and in some sense facilitated her way of providing care to her mother.

Now as I said, right after the death of my father, I gave birth to my baby and because of that we thought it would be appropriate to bring my mom to us. I was working back then; I needed someone to be with my baby at home. I was going to work but someone had to look after my baby, you know. In this period my mother was in an emotional situation because of her loss, her loneliness. Being at home by herself left her in a deep void. I talked with my husband and reached to a conclusion that we cannot trust someone else but my mother. This was the reason I brought and took care of my mother at my home (Zara, female, middle SES).

In the case of Gülşen and Harun, the mother in need changes place due to her medical needs and this change of place ultimately affected already existing care arrangements. Although she was living in her hometown and her own house with a caregiver, Harun was still visiting his mom frequently, solving problems related to the caregiver and dealing with her medical issues since he was living in the same apartment with her. After a while, the mother's health status deteriorated and Gülşen decided to take her to Ankara where she would be able to get better medical treatment due to better accessibility to hospitals in the capital city. As a result of change of location, she became the care manager for her mother, since the mom was placed in a separate house with a hired caregiver woman. Now main responsibility shifted to Gülşen and Harun's involvement in caregiving decreased a lot. This change in the division of responsibilities is, contrary to the last example, not directly related to the changing circumstances of children but changing needs of the parent.



In addition to the already experienced changes in the actual caregiving process, anticipations about the future needs of parent(s) show that some families do not think about continuing with the same care arrangements and distribution of roles. Adult children anticipate about the long term care of their parent(s) and some have concerns about not being able to continue caregiving by the coordination of siblings due to many inabilities they also anticipate about themselves and their siblings. For instance, Saim's concern about his sisters' advanced ages and experiences of diseases or disabilities lead him to envisage the future plan as hiring a live-in caregiver for their mother or taking her to his own house since her sisters may not be able to contribute to the parent care anymore.

Apprehension about the increasing demands from parents due to their declining health leads almost all sibling groups to consider hiring someone to share the burdens of care, especially the instrumental type of care. Even among low SES families, some children talked about putting all money together and hiring someone outside the family. Even supposing this as not affordable for all families in the study, these frequent statements are good examples of the fact that performance of filial responsibilities is not static over time. Not many changes are predicted in some cases within low SES sibling groups other than anticipating making new modifications or considering new options when the circumstances worsen.

All these case examples show that care arrangements are dynamic and change in response to individual, familial and social circumstances in line with the arguments of life course approach.

#### **5.4. Anticipations about the Prospective Parent Care Arrangements**

Adult children are aware that the current circumstances of both their parents and themselves might change and there might be a need for new care arrangements. Connidis and Kemp (2008) argue that siblings' anticipations

about care arrangements are also based on past negotiations which are reinterpreted according to present and expected life conditions. When asked about what would happen in the future, it is understood that they have not thoroughly thought about or talked yet with their siblings about the future plans. They give answers which reflect their own expectations while not undermining both of their own and siblings' circumstances.

Both stepchildren and her own children will decide. However, I guess that her own son and daughter would not even let us care for her. This is my thought though (Fatma, female, low SES).

One of the general answers shows that if the conditions get more severe in the future in terms of dependency and chronic illness of the parent and more substantial care is needed, almost all of the children from middle SES groups and even some in low SES groups think about hiring a caregiver from the market. Even though this option is emphasized frequently, it does not mean that they envision a future care arrangement where they are not involved. It is clear that they will continue to be a part of the parent care system at least as 'care manager'. Zara talks about almost all possible plans but especially indicating that there would be a type of care arrangement where her burdens would be shared either by a caregiver woman or – if possible – by her sisters.

What could it be? The option is explicit when she/ he becomes worse... You would either find a caregiver and let her live in her house or you would get and bring her to your house. For instance, I will take her to my home probably, this is how it is going to happen and I will hire someone to look after her in my home. I could not cope with all these responsibilities by myself but with a caregiver, I could do it. If my sisters also suggest looking after her, in time I mean I will have this chance, she could also be taken to their houses. I will also tell them 'please take her to your house and share this responsibility and help me' (Zara, female, middle SES).

The fact that there is a limit for holding the responsibility by oneself is apparent in these previous quotes. Adult children negotiate their

responsibilities towards their parent(s) both within present arrangements and for future anticipations.

Some children have apprehension about the future circumstances. Although they do not make clear long term care planning, they have the expectation that the current situation of their parent(s) does not get worse. Admitting they are not ready for this kind of situation, they also acknowledge any worsening scenario would put incredible amounts of burden on them and also their families. Ali talks about what would happen if his father also would also be dependent just like his mother.

I cannot even imagine what would occur when that situation comes to be a reality; I do not want to think about it. If it does happen, I will not work and wait at his corner or I will continue working but I will leave one son with my wife at home. We will have problems with surviving financially since one son will not be working but what can we do? (Ali, male, low SES)

If it goes like that, then it will go like that. At least I am saying ‘May God give my mom a life without deteriorated health status in her remaining days’. I wish she would not be totally dependent or disabled (Gülşen, female, middle SES).

Adult children who are not currently providing help are highly motivated to do whatever it takes for their parents. The norms of filial responsibility are more emphasized in this situation, as can be captured from the quotes of Orhan. He refers to the understanding of reciprocity as the basis of filial responsibility. This argument of owing something to the parents in return of their past sacrifices is a moral belief which forms the basis of the theoretical model of ‘reciprocity’ on filial responsibility (Gouldner, 1960). As seen from the anticipations of Orhan, this reciprocal obligation does not merely exist as a norm but is also expected to be applied at a practical level (Aboderin, 2005).

We will be helpful when the time comes. We will do whatever we could do. They are our father and mother. Thanks to them, we are

living these good lives. This is why we should help them as much as we can both my spouse and children including me. I never let anyone behave disrespectfully to them, they never actually behaved disrespectfully. We will see when that time comes (Orhan, male, low SES).

Long term care planning does not take place among any of sibling group and they mostly emphasize that things will be decided whenever the time comes. Still, they have more determined attitudes to the option of institutional care. In none of the families, placing parent(s) in an institutional care center is seen as an option<sup>20</sup>. There are mainly two different explanations for total objection of nursing homes: their own attitudes and feelings or parent(s)' preferences and concerns. Sometimes these two explanations are provided together in a mixture.

My mom cannot live there; she cannot because she has not grown up with this kind of understanding. If she had thought about it while she was my age, she would have regarded this idea as normal. But she is traditional in every sense. For example, when we go to our hometown, we cannot wear miniskirts or tight jeans. She would directly react as 'what would people say!' If I put her in a nursing home, she would again say 'don't you get ashamed of people calling you as shameless children, putting your mom into a nursing home?' Therefore, she cannot do that (Ayşe, female, middle SES).

My mom has the cultural understanding dominant in the Turkish context. She would not be happy in a nursing home. I am also negative about them. If we put her in one of them, I feel like, we would be bad children. Living in such a place would kill her despite the fact that sometimes she says she would like to live in a nursing home (Serkan, male, middle SES).

She definitely objects to the nursing centers. Whenever she hears the word, her blood tension escalates, she starts crying. She says really harsh things to us whenever we talk about these centers. She gets crazy; she says she would not forgive us. Thus, sending her to a

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<sup>20</sup> *Author's note:* These negative attitudes may also be related to the insufficient and inadequate formal institutional care options in Turkey.

nursing center is not even a consideration for us (Mualla, female, middle SES).

Adult children have some traditionally negative attitudes similar to their parents' towards nursing homes. Negative attitudes towards nursing homes are more common among the adult children from low SES groups. Their strict adherence to the norms of filial responsibility prevents them from considering institutional care as an option. Filial responsibility as originating from the idea of 'reciprocity' is very obvious in their explanations about not preferring nursing homes for their parents.

No, dropping them in a nursing home is like putting them into a grave before they die, crossing them out from life. Therefore, we are going to look after them as a family with my siblings (Mesut, male, middle SES).

I do not see nursing homes as good because they are not. We are going to be aged, we are going to be in the same situation as them, and we are going to experience the same thing. I have to look after him/her just because s(he) has looked after me during my childhood. I will do my best with my wife. I will tell her without yelling at her. If you tell your wife that she has to do it, maybe she won't. However if you sit and talk peacefully, she would. We are relatives, my wife and me. I will not send my mom a nursing home and take care of her within my house as long as possible (Orhan, male, low SES).

Although all adult children interviewed have the clear intention to continue holding their filial responsibilities as long as their parents need them, they do not anticipate same commitment from their own children in their own old age. In low SES groups, even though one of their motives behind performing the duties towards parents was the generational transmission of general norms of filial responsibility as the expectation of their children to imitate them, there is some sort of distrust to their successors in terms of commitment to these norms.

I do not really trust the current generation, they cannot scratch their heads even when they have nails to do so. What can you do, you look after their material needs, and they take care of you in return. Still you are not able to know what will happen in those circumstances. It is hard to predict, you do not know. Let's live up to that time, God is great. We'll live and see (Ali, male, low SES).

I think like that, if they look after me, they do. If they do not, they should send me to a nursing home. What are you going to do? Instead of being in a bad relationship with them and getting sad about it, I would go to a nursing home. I would think of this option for myself because I do not really expect much from my own sons. I do not expect anything from any child of today (Fatma, female, low SES).

In high SES groups, the expectation from the younger generation is not based on obligations but on the choices of the young. This kind of expectation is in line with new understanding of childrearing which places higher importance on psychological rather than instrumental value of children for parents (Kağıtçıbaşı, 2002). The middle age generation with middle SES prepare themselves for their old age without reliance on the expectation from their children to reciprocate their parental sacrifices.

The breakdown of intergenerational solidarity is expected to come with the next generation according to the accounts of current the middle aged generation. Although they report better relationships with their children compared to their parents' relationships with them during their childhood, they still do not trust their children in terms of their willingness in providing assistance during their senior years. This distrust is more common among low SES groups, while middle SES groups declare almost no expectation from their children and prepare their own circumstances in old age.

From the arguments presented above, it may be concluded that SES and gender play important role in the division of parent care among siblings. The impact of the structure of extended family is understood to be affected by SES as well. The data from this sample also proved that the division of parent care among

sibling is shaped by the interactions between family members. These interactions in the form of negotiation also lead to conflicts and tensions related to parent care within the families.

## **CHAPTER VI**

### **CONCLUSION**

Elderly care is gaining importance as a result of the increase in the numbers and proportion of elderly population in the country and in the world. In line with this situation, this thesis focused on the topic of elderly care within the family context, performed by adult children. I have discussed and presented how adult children organize to meet the care needs of their elderly parents and reach to some sort of division of labor among themselves. This process of division of parent care among siblings is not only studied as an outcome of some structural factors but also of interactions among family members through a period of time. Division of parent care among siblings is analyzed by using the variable of the family structure of the extended family, gender and SES.

The study of this thesis supports the statement that commitment to norms of filial responsibility is a very important reason for the involvement of a specific child in the parent care. The levels and self-explanations of commitment to filial responsibility showed variations by gender and SES of adult children, still the great adherence to the responsibilities point to the fact that in Turkish society, these norms are still powerful and in practice. The internalization of these norms by some adult children orients them to continue their caregiving role at the expense of experiencing ambivalence between their independence and filial obligations.

It has been clearly inferred from the experiences of adult children within the context of parent care that the cultural expectations and demands arising from



norms of filial responsibilities create a great constraint on their lives. They experience the ‘ambivalence’ of meeting the demands/needs of their parents and their own sense of ‘competence’ in their own lives. Traphagan (2003) attributes this experience of ambivalence to the idea intrinsic to ‘filial responsibility’ as one ought to organize his/her life around the needs and demands of their parents. There is also an assumption inherent to filial responsibility that kin duties would matter to the adults in the case of having elderly parents in need. The societal expectation that older parents having a right to be taken care by their adult children further perpetuates the constraints of filial responsibility on adult children. These societal expectations are so powerfully internalized among some of the adult children in this study that not fulfilling their duties towards their parents may cause strong feelings of guilt, incompetence and remorse.

The division of parent care among siblings is obviously organized alongside SES and gender differences. At the beginning of conducting this research, the differences between two different socioeconomic status groups were expected to be present, however not that obvious. SES is found to create huge differences in a variety of whole subtopics ranging from the reasons behind the commitments to filial responsibility as declared by participants, the whole organization of parent care among siblings, inclusion and exclusion of children-in-law to parent care and also the negotiation process among family members. The different expectations of filial responsibility from sons and daughters in low SES groups are creating significant impact on arrangements of parent care among siblings. In middle SES groups, in comparison, the expectations from sons and daughters are not this disparate so that care arrangements are more open to other factors than being a son or a daughter.

This significant impact of SES on parent care arrangements made by siblings might be explained through the situation of woman in relation to their education levels and employment status. It may be argued that change in the

circumstances of women would influence the dynamics of parent care by adult children. Therefore SES differences make sense especially when SES of daughters and daughters-in-law is considered.

In addition to SES differences, the examples of families in a kind of ‘transformation’ might be presented as the most peculiar part of this study. Since these families show resemblance to characteristics of arrangement of parent care existing in two different SES groups, these examples might be described as the most unexpected finding of this thesis. The reasons behind this transformation should be addressed in deeper analysis, maybe in a future study with a larger sample on the same topic. Although the reasons behind this transformation are waiting to be discovered, it would be more appropriate to say that this transformation is affecting both low and middle SES groups. This is why the roots of this transformation should be searched in both groups. An assumption could be made here by saying that the reasons of transformation are somehow related to the education and employment levels of women – both daughters and daughters-in-law.

The gender dimension of division of parent care among siblings is displayed within every account of the participants. Parent care as a type of family labor is organized alongside gender lines as in accordance with the arguments of the feminist approach. However, it might also be claimed that rather than focusing on gender as a separate variable, intersectionality of gender and SES would be a better predictor of variations of the division of parent care between different sibling groups. While siblings are forming the universe of this study, parent care is realized to involve other actors than just adult children. Involvement of other actors, especially of children-in-law is also gender-based. Daughters-in-law are as involved as daughters to the parent care, so this situation points to the necessity of extending the analysis of parent care to other family members too. As the findings of this study suggest, gender is not only a characteristic of

individuals but a 'structural process that shapes the lived experience of people a social construction based on power differentials' (Calasanti, 1992, p.280).

These gender differences apparent in parent care arrangements create a condition where women are exploited either by their husbands or by their brothers. While in low SES families, women are acting as the major caregivers of their parents-in-law, they are somehow exploited by their husbands. In middle SES families, women have independence from their husbands and may exempt themselves from the care of their parents-in-law. In this case then, they are more involved in their parents' care and find themselves in an unequal division where their brothers somehow exploit their labor. In any case, women do the task of care by themselves even as a care manager and cannot escape from the gender inequality either through their husbands or brothers. Men, on the other hand, prefer to make others do the task, via their wives in low SES or via their sisters or professional help in middle SES.

In this thesis, new approaches to the topic of elderly parent care by adult children are employed. The contribution of the interactional approach was to acknowledge how negotiation of one's own and also siblings' responsibilities towards parent(s) is an essential part of the division of parent care among siblings. Although SES differences are observed to have an impact on the importance and existence of negotiation of responsibilities for the family members, interactions among different family members, regardless of SES, play a significant role in the organization of parent care. It is also understood that adult children do not directly act upon the guideline of filial responsibilities or their social positions; rather there is room for individual agency through negotiation. Moreover, multiple actors are involved in the decision making process since this negotiation process does not only involve adult children but also children-in-law and parents.

The power dynamics are significantly embodied within the process of negotiating the responsibilities among siblings and other family members.

Traphagan (2006) points to the fact that the discourse of filial responsibility is shaped and reshaped within the power dynamics in the family. The parties negotiating the responsibilities and division of these responsibilities are constantly exercising their relatively 'superior' positions in power structure of the family on each other in order to reach to the outcomes which best suit their own circumstances. The power structure of the family is found to be hierarchized according to gender, age and social position in the kinship system. Negotiating the responsibilities is also found to be open to tensions and conflicts as a result of these power dynamics inherent to relations between family members in the case of parent care.

Employing the life course approach to this topic enabled me to see the dynamic nature of parent care over time. In this sense, involvement of each child in the parent care is not static over time; it shows variations over time in line with the individual and familial life transitions. The life transition of a specific sibling and/or the changes in the condition of parent(s) is discovered to affect the whole organization of parent care. Siblings reorganize to meet the needs of their parents under new circumstances, renegotiating their own and siblings' responsibilities and they experience new conflicts. These dynamics of parent care proved the involvement of more than one sibling in parent care.

The dynamic nature of parent care is one of the most fundamental findings of this study since in many studies on parent caregiving; the filial responsibilities are taken as static, showing no change through time. This kind of understanding is intrinsic to the current social policies which address a singular caregiver for the elderly throughout the whole period. In the form of financial support to the family caregivers of the elderly, one of the criteria of eligibility is to take care of the parent all the time within the same family. This eligibility criterion deprives the caregiver from the network of help from other family members and assumes a static care arrangement.

The study of this thesis, in line with the findings of the Turkish Family Values Study (2010), shows that there is an anticipation of decreasing commitment to norms of filial responsibility by the younger generations. Actually, the expectation from the younger generations to take care of their parents when they are in need is still current. While this expectation is higher among low SES groups, there is also a distrust of these middle aged people for their offspring. This distrust might not be groundless since the needs of the elderly are changing, lifestyles and preferences of the younger generation are also apparently different than their parents. In the middle SES groups, the expectations from the young generations are lower or commitment to filial responsibility if left to the choice of the young children.

As mentioned above, the inherent tension between filial responsibility and independence is already experienced by the current caregiver adult children. It might be argued that in the future, to overcome this tension, children would either resign from their duties towards their parents or freely decide what their duties towards their parents should be. In any of these scenarios, other care options for the elderly will be expected to be introduced. As more and more elderly parents prefer to live autonomously and as children prefer to have an independent life rather than organizing one to parents' needs, family care might become difficult to be generated.

Difficulties of parent care in the future may also be a result of the changing nature of caregiving. Needs of the elderly are changing and since their preferences are more significant, so does the meaning of elderly care changes. For example, elderly care today is far more expensive, especially as a result of medical expenses, compared to its past form. Financial problems faced by young generations might put them into a situation of thinking about resigning from their filial responsibilities. However, these financial problems might also bring different generations into sharing the same household in order to gather the resources.

Different types of parent care arrangements are observed within the scope of this study. The characteristics of the parents have also impact on the selection of most appropriate type of care arrangement. It might be argued that rotation type of care arrangement is preferred among some sibling groups although this type is not suitable to the needs and circumstances of some groups of the elderly, especially the ones with Alzheimer's disease. The health status, dependency and preferences of elderly parents have great influence on the care arrangements organized by the adult children.

Another important factor creating huge difference in terms of parent care is demographic one. It should be always taken into consideration that parent care might be more difficult in the future with the increasing probability of one child or childless families in the future. Having no children might put the elderly in a situation where they lack intergenerational support and they may turn to other relatives to get care from. In the case of one child families, having no sibling to rely on might create more burdens on the child. Having one child might also increase the probability of not receiving care from children in the aging period.

A new understanding of filial responsibility might be more accepted and become widespread among families with the new childrearing practices they are adopting. Moody (1993) states,

No matter what the older generation has done for the younger, each generation's primary obligation is transitive. That is, we 'repay' the generosity of the preceding generation by giving in turn to our successors. We return the benefits in turn to our children. Whatever claims older people may have are limited by this overriding transitive obligation across the chain of generations (p. 229).

This understanding of filial responsibility seems to be already taking place in many societies, as studies showed that the younger generations benefit from the resources of the adult children when competing obligations towards both young

and old generations are experienced. Also psychological value of children is becoming more important than material value of children in Turkish families. As the expectations of the old generation might decrease and as the elderly would respect that their adult children have their own families to look after, the younger generations might be valued more than the older generations in Turkey too. In the past, taking care of the elderly and the young within the same household was supposed to be easier than the current situation. Moreover, since the lifestyles of the elderly also changed, their needs also changed in content and also in amount. The upcoming young generations might not be able or willing to address the needs of both generation but prefer their successors to benefit from the resources. This would not necessarily result in the breakdown of intergenerational relations but a modification of the understanding of filial responsibility.

In this case, the elderly care in the future might go through a crisis, if the public and private care services continue to be insufficient and not suitable to the needs and preferences of the elderly. As strongly recommended by international action plans on aging, active aging seems to be the only option left to the elderly in the future not to become dependent on others.

For any future research on this particular topic, focusing on the contributions and involvements of daughters-in-law more directly would make great contribution to the understanding of parent care in Turkey. In addition to that, involvements and contributions of sons could be analyzed in details to see the significance of their role in parent care and also to erase the bias of taking them as inactive or useless.

Within the sample of this study, it is observed that there is a more egalitarian kind of division considering the parent care responsibilities and tasks is taking place especially in same sex sibling groups. Although the difference is obvious compared to other sibling groups, the small sample of this study prevents me from making any general statement about the reasons behind this significant

fact. In future studies, focusing on the dynamics of parent care within same sex sibling groups would help us understand the situation better.

In a future research with a larger sample, it would be possible to focus on the differences of the elderly as affecting the care arrangements by their adult children. Although it is acknowledged that the elderly is not a homogenous group of people with similar needs, preferences and problems, this study could not elaborate these differences within the small sample. Especially SES differences of the parents would be taken into account since these differences are expected to create significant impact on the arrangement made.

Also seen in this study, elderly parents are also helping their adult children in many different ways. It is clear that intergenerational support mechanisms are reciprocal even in the aged years of the parents, though the form of support depends on many factors like SES and health status of the parents. Parents in good health conditions help their adult children in activities like childcare or financially better off parents contribute to the household income of their children in turn of the care they receive. In the future research, these reciprocal support mechanisms should be also taken into account to better understand the topic of elderly care in the family context.

Lastly, the current social policies in Turkey directly influence the parent care arrangements by the adult children. Especially the financial support to family caregivers of the elderly aims to lead family members continue their caregiver roles. In this sense, though there is an anticipation of decrease in the commitment to filial responsibilities by the young generation, this financial support might lead them to direct adult children to be a part of their parents' care again. Therefore, it would be appropriate that further analysis on elderly parent care to take the impact of current social policies into consideration.



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**APPENDIX A: DEMOGRAPHIC INFORMATION ABOUT INTERVIEWEES**

**Table I. Demographic Information about High SES Interviewees**

	Age	Gender	Education level	Occupation	Employment status
<b>1<sup>st</sup> Family</b>					
Mother	85	Female	Vocational health school	Nurse	Semi credentialed civil servant
Father	Deceased	Male	Vocational health school	Health personnel	Semi credentialed civil servant
1 <sup>st</sup> child	62	Male	High school	Bank employee	White collar, semi skilled worker
<b>2<sup>nd</sup> child (Gülşen)</b>	58	Female	Vocational technical higher education	Child development expert	Self-employed professional
<b>3<sup>rd</sup> child (Harun)</b>	55	Male	High school	Merchant	Self-employed small trader
<b>2<sup>nd</sup> Family</b>					
Mother	92	Female	Elementary school	Housewife	-
Father	Deceased	Male	Vocational high school	Teacher	Civil servant teacher
1 <sup>st</sup> child	73	Female	Vocational high school	Teacher	Civil servant teacher
2 <sup>nd</sup> child	70	Female	Vocational high school	Teacher	Civil servant teacher



**Table I. Continued**

3 <sup>rd</sup> child	68	Male	University	Lawyer	White collar high skilled
4th child	Deceased	Female	University	Lawyer	White collar high skilled worker
<b>5th child (Mualla)</b>	60	Female	University	Doctor	Credentialed civil servant
<b>6th child (Sami)</b>	55	Male	University	Agriculture Engineer	Self-employed professional
<b>3<sup>rd</sup> Family</b>					
Mother	80	Female	Elementary school	Housewife	-
Father	Deceased	Male	High school	Civil Registry Manager	Semi credentialed civil servant
<b>1st child (Duran)</b>	63	Male	University	Agriculture engineer	Credentialed civil servant
<b>2nd child</b>	60	Female	University	Lawyer	Self-employed professional
3rd child	58	Female	High school	Bank employee	White collar semi skilled worker
<b>4th child (Asli)</b>	55	Female	University	Teacher	Civil servant teacher
5th child	53	Male	University	Doctor	White collar high skilled worker
6th child	50	Male	University	Teacher	Civil servant teacher

**Table I. Continued**

<b>4<sup>th</sup> Family</b>	<b>Age</b>	<b>Gender</b>	<b>Education Level</b>	<b>Occupation</b>	<b>Employment Status</b>
Mother	69	Female	High school	Civil servant	Semi credentialed civil servant
Father	Deceased	Male	Vocational technical higher education	Civil servant	Semi credentialed civil servant
<b>1st child (Serkan)</b>	44	Male	University	Consultant	Self-employed professional
<b>2nd child (Çağrı)</b>	41	Male	University	Food Engineer	Credentialed civil servant
3rd child	39	Male	University	Doctor	White collar high skilled
<b>5<sup>th</sup> Family</b>					
Mother	72	Female	Elementary school	Housewife	-
Father	79	Male	High school	Prayer leader	Semi credentialed civil servant
1st child	55	Female	Open University	Civil Servant	Semi credentialed civil servant
<b>2nd child (Selma)</b>	52	Female	University	Teacher	Civil servant teacher
3rd child	49	Female	University	Press Counsellor	Credentialed civil servant
4th child	43	Female	University	Veterinary	Self-employed professional

**Table I. Continued**

	Age	Gender	Education Level	Occupation	Employment Status
<b>5th child (Ahmet)</b>	40	Male	University	Mechanical Engineer	Self-employed professional
6th child	37	Female	University	Economist	Credentialed civil servant
<b>6<sup>th</sup> Family</b>					
Mother	86	Female	Elementary school	Housewife	-
Father	Deceased	Male	High school	Bank employee	Semi credentialed civil servant
<b>1st child (Nurten)</b>	68	Female	University	Civil servant	Credentialed civil servant
2nd child	65	Female	University	Bank employee	Semi credentialed civil servant
<b>3rd child (Hülya)</b>	58	Female	University	Teacher	Civil servant teacher
<b>7<sup>th</sup> Family</b>					
Mother	70	Female	Elementary school	Housewife	-
Father	70	Male	High school	Merchant	Self-employed small trader
1st child	50	Female	Elementary school	Housewife	-
<b>2nd child (Nilgün)</b>	45	Female	University	Teacher	Civil servant teacher
<b>3rd child (Mesut)</b>	40	Male	High school	Worker	White collar semi skilled

**Table I. Continued**

<b>8<sup>th</sup> Family</b>	<b>Age</b>	<b>Gender</b>	<b>Education Level</b>	<b>Occupation</b>	<b>Employment Status</b>
Mother	83	Female	Elementary school	Housewife	-
Father	Deceased	Male	High school	Bank employee	Semi credentialed civil servant
1 <sup>st</sup> child	52	Female	Vocational technical higher education	Nurse	Semi credentialed civil servant
<b>2<sup>nd</sup> child (Zara)</b>	50	Female	Vocational technical higher education	Civil servant	Semi credentialed civil servant
<b>3<sup>rd</sup> child (Ayşe)</b>	49	Female	High school	Housewife	-

**Table II. Demographic Information about Low SES Interviewees**

<b>9<sup>th</sup> Family</b>	<b>Age</b>	<b>Gender</b>	<b>Education Level</b>	<b>Occupation</b>	<b>Employment Status</b>
Mother	79	Female	Elementary school	Housewife	-
Father	82	Male	-	Manual worker	Casual temporary worker
<b>1st child</b>	54	Male	Elementary school	Contractor	Blue collar unskilled worker
2nd child	50	Male	Elementary school	Furnisher	Self-employed craftsman

**Table II. Continued**

	<b>Age</b>	<b>Gender</b>	<b>Education Level</b>	<b>Occupation</b>	<b>Employment Status</b>
<b>3rd child (Döle)</b>	50	Female	Elementary school	Housekeeper	Casual temporary worker
<b>4<sup>th</sup> child (Ali)</b>	44	Male	Secondary school	Contractor	Self-employed marginal worker
<b>10<sup>th</sup> Family</b>					
Mother	Deceased	Female	Elementary school	Housewife	-
Father	72	Male	Elementary school	Contractor	Casual temporary worker
<b>1st child (Mehmet)</b>	42	Female	Elementary school	Housewife	-
<b>2nd child (Hatice)</b>	39	Male	Elementary school	Doorkeeper	Blue collar unskilled
<b>11<sup>th</sup> Family</b>					
Mother	74	Female	Elementary school	Housewife	-
Father	Deceased	Male	Elementary school	Shoemender	Self employed craftsman
1st child	53	Male	Vocational technical higher education	Electrical technician	Self-employed craftsman

**Table II. Continued**

	Age	Gender	Education Level	Occupation	Employment Status
<b>2nd child (Esma)</b>	49	Female	Secondary school	Housewife	-
<b>3rd child (Abdullah)</b>	47	Male	High school	Work tracker	Blue collar semi-skilled worker
4th child	45	Female	Secondary school	Housewife	-
5th child	41	Male	Elementary school	Auto painter	Blue collar unskilled worker
<b>12<sup>th</sup> Family</b>					
Mother	68	Female	No education	Housewife	-
Father	Deceased	Male	No education	Chef	Blue collar semi-skilled worker
1st child	56	Male	High school	Civil servant	Uncredentialed civil servant
<b>2nd child (Mahmut)</b>	54	Male	Elementary school	Driver	Self-employed small trader
3 <sup>rd</sup> child	52	Male	High school	Driver	Self-employed small trader
<b>4<sup>th</sup> child (Fatma)</b>	45	Female	High school	Housewife	-
<b>13<sup>th</sup> Family</b>					
Mother	66	Female	No education	Housewife	-
Father	66	Male	Left elementary school	Janitor	Uncredentialed civil servant

**Table II. Continued**

	<b>Age</b>	<b>Gender</b>	<b>Education Level</b>	<b>Occupation</b>	<b>Employment Status</b>
<b>1st child (Orhan)</b>	46	Male	Elementary school	Worker	Blue collar unskilled worker
<b>2nd child (Gülen)</b>	44	Female	Elementary school	Housewife	-
3 <sup>rd</sup> child	40	Female	Left elementary school	Housekeeper	Casual temporary worker
4 <sup>th</sup> child	38	Male	Elementary school	Chef	Blue collar semi skilled worker
<b>14<sup>th</sup> Family</b>					
Mother	70	Female	No education	Housewife	-
Father	Deceased	Male	Left elementary school	Janitor	Uncredentialed civil servant
1st child	56	Female	Elementary school	Housewife	-
<b>2nd child (Kemal)</b>	50	Male	Left elementary school	Tiler	Self-employed marginal worker
3 <sup>rd</sup> child	46	Male	Left elementary school	Tiler	Self-employed marginal worker
4 <sup>th</sup> child	44	Female	Left elementary school	Worker	Blue collar unskilled worker
<b>5<sup>th</sup> child (Sibel)</b>	41	Female	Elementary school	Housewife	-

**Table II. Continued**

<b>15<sup>th</sup> Family</b>	<b>Age</b>	<b>Gender</b>	<b>Education Level</b>	<b>Occupation</b>	<b>Employment Status</b>
Mother	68	Female	No education	Housewife	-
Father	Deceased	Male	No education	Farmer	Farmer
<b>1st child (Nusret)</b>	48	Male	Elementary school	Civil servant	Uncredentialed civil servant
<b>2nd child (Hasan)</b>	44	Male	Elementary school	Driver	Self-employed small trader
3 <sup>rd</sup> child	41	Male	Elementary shool	Wall- painter	Self-employed marginal worker
4 <sup>th</sup> child	38	Male	Elementary school	Worker	Blue collar unskilled worker



## APPENDIX B: TEZ FOTOKOPİ İZİN FORMU

### ENSTİTÜ

Fen Bilimleri Enstitüsü	<input type="checkbox"/>
Sosyal Bilimler Enstitüsü	<input checked="" type="checkbox"/>
Uygulamalı Matematik Enstitüsü	<input type="checkbox"/>
Enformatik Enstitüsü	<input type="checkbox"/>
Deniz Bilimleri Enstitüsü	<input type="checkbox"/>

### YAZARIN

Soyadı: Con  
Adı: Gülçin  
Bölümü: Sosyoloji A.B.D.

**TEZİN ADI** (İngilizce): Negotiating Parent Care Among Siblings

**TEZİN TÜRÜ:** Yüksek Lisans  Doktora

1. Tezimin tamamından kaynak gösterilmek şartıyla fotokopi alınabilir.
2. Tezimin içindekiler sayfası, özet, indeks sayfalarından ve/veya bir bölümünden kaynak gösterilmek şartıyla fotokopi alınabilir.
3. Tezimden bir bir (1) yıl süreyle fotokopi alınamaz.

**TEZİN KÜTÜPHANEYE TESLİM TARİHİ:**