

Care arrangements for older adults: exploring the intergenerational contract in emigrant households of Goa, India

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Introduction

Demographic ageing and the associated changes in population health are necessitating a complex reorientation of health systems, public spending, social security and living arrangements of older adults in developing countries (Bloom *et al*, 2015; Goodman and Harper, 2013; Lamb, 2013). In countries such as India, the consequences of ageing are far more severe because insufficient social security systems make families the main providers of support to older adults (Bloom *et al*, 2010). Changing demographic circumstances, such as the increased mobility of adult children, fewer siblings and increased longevity of parents, are influencing care arrangements in Indian households (Croll, 2006; Dhillon *et al*, 2016). The BKPAI (2011) study on the elderly in India reports that 6.2 per cent of older adults live alone, 14.9 per cent live exclusively with their spouse and 78.9 per cent of them live with children and other family members respectively, and importantly, the proportion of older adult women who live alone is nearly four times in comparison to older adult men (Ugargol *et al*, 2016). The traditional Indian family is in transition and the *modified extended family* where parents, children and other relatives do not necessarily live under one roof or share a hearth is now becoming common (Rajan and Kumar, 2003; Medora, 2007). Simultaneously, a cultural norm exists in India that older adults will continue to live with and receive their care from family members (Bongaarts and Zimmer, 2002; Ruggles and Heggeness, 2008) and living alone or in old age homes is interpreted as a sign of breakdown of traditional Indian values in public discourses (Medora, 2007; Lamb, 2013).

Though migration of adult children is considered one of the most effective poverty reduction strategies for families in the developing world (Stark and Lucas, 1988; Clemens, 2011) and increased incomes from migration

can provide support for parents left behind, often the physical presence of a caregiver is the most desired but missing element (Bohme et al, 2015; Dobrina et al, 2015). Miltiades (2002) found from her study of left-behind Indian older parents that migration of adult children changes household dynamics and leaves families, mainly older adults, in disarray. Migration, whether in-country or overseas, tends to create nuclear family units and more often the older family members are left behind (Miltiades, 2002; Varghese and Patel, 2004; Ugargol et al, 2016; Ugargol and Bailey, 2020). In lower- and middle-income countries such as India, the care needs of older adults are invariably managed by family members in the absence of state-supported services (Brinda et al, 2014; Ugargol et al, 2016) (see Chapter 11 for a list of programmes for older adults in India). When adult children move away for employment or post marriage to set up a separate household, older couples who are left behind often reside independently for longer periods until the loss of spouse leads to the widowed parent either living alone or being incorporated into one of the adult child's family (Croll, 2006; Ha and Ingersoll-Dayton, 2008). It is, however, interesting to note that adult children and their older parents, though living in separate households, make efforts to live in close proximity to each other so that care and support exchanges are easy to provide and receive (Croll, 2006; Mulder and van der Meer, 2009) under the intergenerational contract. On the other hand, Kochar (2002) and Azariadis and Lambertini (2003) have argued that despite the inability to commit to the intergenerational contract through co-residence, exchanges are clearly visible and continue through the life cycle between generations.

The goal of this chapter is to explore the evolving nature of care frameworks for older adults in the Indian context through examining the changing household living arrangements and complexities that exist in identifying caregiving motives and primary caregivers to older adults, especially in an emigration context where older adults are left behind. With this motive, we focus on Goa, a known emigration pocket in India and try to understand how migration affects family caregiving patterns and the dynamics that influence care arrangements for older adults in emigrant households. The findings from this study contribute to theory on co-residence, acknowledge reciprocity in the caregiving process and reflect on the cultural influences that guide adaptive intergenerational care arrangements (Johar et al, 2015; Isherwood et al, 2016), especially in an emigration context. The accounts of caregivers and older adults are 'situated' according to the status of the interactants and are standardised within the cultural context; hence reflecting routinely expected behaviours (Scott and Lyman, 1968) while capitalising and treating the relationship as a reciprocal one (Sykes and Matza, 2002; Ugargol and Bailey, 2021).

Evidence indicates that care and support from children is obtained in return for intergenerational transfers and exchanges from the older

adult. Older adults offer their material wealth as an incentive in order to earn reciprocation through co-residence or receive support through intergenerational care arrangements (Johar et al, 2015; Isherwood et al, 2016). However, co-residence with adult children might not always be beneficial for older adults even after they have carefully selected one among their children to live with. There are also instances of older adults being neglected by adult children who received their property and intergenerational wealth but failed to provide care and support in return (Skirbekk and James, 2014). To address such issues of neglect and abuse, the Maintenance and Welfare of Parents and Senior Citizens Act (Government of India, 2007) provides for legislative and legal support to older parents and senior citizens in India. Not only can the older parent now claim maintenance from the children to whom he had given the property by way of gift or otherwise but can also reclaim his property from the transferee in case of neglect and abuse. Though parents do not have much choice in determining who will receive a share in the property in cases of ancestral property, it was however observed that parents *gifted* their share of land to their sons, who are culturally expected to care for their parents, in order to circumvent the law (Deininger et al, 2013). Daughters were often compensated for this disinheritance through alternative transfers in the form of either higher dowries or more education (Roy, 2015).

Care for older adults is understood to be shared by a complex but cooperative array of caretakers (Brijnath, 2012) as individual family members are finding it difficult to provide care individually owing to increasing mobility, urbanisation and development of nuclear households (Dhillon et al, 2016). Apart from co-residence and close-proximity residence, even separate nuclear households in which older and younger family members reside separated by geographical distance are enmeshed in complex webs of intergenerational exchanges, and are termed *embedded* households (Whyte, 2003; Croll, 2006). Attempts by older adults and their adult children to retain traditional kinship ties and functional reciprocal exchanges in the backdrop of modernisation are visible through the formation of adaptive intergenerational living arrangements (Smith and Whitlock, 2004; Croll, 2006). We term these adaptive living arrangements as *intergenerational care arrangements* that encompass all forms of negotiated support arrangements for older adults either through co-residence or various forms of non-co-resident care arrangements such as close-proximity residence and distant but ‘embedded’ households – the ultimate aim being to enable and sustain intergenerational resource flows between children and their older parents.

In this chapter we examine how the contract of intergenerational reciprocity is maintained between older adults and their adult children through the formation of adaptive intergenerational care arrangements.

We qualitatively explore how older adults and their caregivers recognise, negotiate and interpret reciprocal support motives that influence and result in adaptive reciprocal intergenerational care arrangements and caregiving decisions relying on in-depth interviews of older adults and their family caregivers from emigrant households of Goa.

Background and concepts

Intergenerational care arrangements

Though the intergenerational filial contract is clearly visible even today, there seems to be a reinterpretation and renegotiation of the intergenerational living arrangement (Croll, 2006; Brijnath, 2012). What hitherto resulted chiefly in co-residence is now increasingly depicted through other newer forms of adaptive living and care arrangements. Firstly, when we look at co-residence as a type of intergenerational care arrangement, there are two ways in which this can be established. Either the younger generation continues to reside with older parents after marriage or alternatively the younger generation establishes a separate household at the time of marriage, birth of children or when there is a household division into which widowed parents are later incorporated. The second possibility is that even when adult children do not co-reside with their parents, they try to remain in close proximity so that there is in essence no real breakdown in intergenerational resource flows. Thirdly, even when generations live in separate households geographically dispersed due to occupational mobility or migration, they rely on the greater ease of communication and transport that facilitate intergenerational resource flows across the distance through what are called 'embedded' or 'enmeshed' households (Whyte, 2003; Croll, 2006). We, therefore, build on the work of Croll (2006), Brijnath (2012) and Whyte (2003) and consider *intergenerational care arrangements* as all forms of care arrangements that enable continued intergenerational resource flows between children and older parents irrespective of whether they co-reside, reside nearby (proximate residence) or are geographically dispersed (distant).

Reciprocal motives in the formation of intergenerational care arrangements

Reciprocity has been recognised as an abiding norm that directs support exchanges between parents and their children across the life course and is a central tenet of both equity and social exchange theory (Silverstein et al, 2002; Lowenstein et al, 2007; Leopold and Raab, 2013; Ugargol and Bailey, 2021). Though co-residence can be regarded as a form of reciprocation for parental investment (Croll, 2006; Johar et al, 2015; Isherwood et al,

2016), the motives to co-reside, reside close to the older parents or to remain connected through embedded households are driven by reciprocal calculations. These filial notions of obligation are embedded within a context of indebtedness due to parents in return for early care during childhood (Croll, 2006; Sharma and Kemp, 2012) and children who have received greater investments from their parents in terms of time, money and affection are more likely than other siblings to similarly reciprocate when the parent experiences challenges in later life such as widowhood or health concerns (Silverstein et al, 2006b; Johar et al, 2015; Ugargol and Bailey, 2021) through co-residence and giving time (Johar et al, 2015; Isherwood et al, 2016).

With adult child migration, mobility and other factors, care and support exchange for older parents through non-co-residence is also increasingly visible in the Indian context (Vera-Sanso, 1999; Desai and Banerji, 2008). Living apart from children does not necessary preclude exchanges of support between generations just as co-residence does not automatically guarantee support for the older adult (Antonucci et al, 2011). Since provision of care needs personal contact, greater direct costs as well as opportunity costs of caregiving rise for those who live far from the parental home (Pillemer and Suito, 2014; Ugargol and Bailey, 2021) and children who live in closer proximity are more likely to become caregivers for their parents (Mulder and van der Meer, 2009). Adult children who live abroad contribute remittances to their older parents in exchange for the custodial care of grandchildren and maintaining the family property (Antonucci et al, 1990; Silverstein et al, 2006a; Roff et al, 2007; Singh et al, 2010; Ugargol and Bailey, 2021) and provide emotional support exchanges through regular communication (Ingersoll-Dayton et al, 2001). While poor health, disability and loss of spouse are key triggers which motivate adaptive intergenerational care arrangements between older parents and adult children (Sengupta and Agree, 2002; Medora, 2007; Li et al, 2009), on the other hand, adult children could also be motivated to seek co-residence with parents when they need assistance from their parents, including financial support, childcare and as a mechanism to offset the rising costs of housing (Forrest Zhang, 2004; Croll, 2006; Goodman and Harper, 2013).

Culture, gender and intergenerational care arrangements

Though traditional multi-generational joint family households are decreasing in India together with a rise in the number of nuclear households (Croll, 2006; Dhillon et al, 2016), there is still a substantially high rate of intergenerational co-residence (see Chapters 3, 4 and 5 for the changing nature of co-residence) compared to the developed world (Croll, 2006; Bawdekar and Ladusingh, 2012). However, a paradox exists between

traditional expectations for assisting parents and actual support available when it comes to older parent–adult child relationships. Gender assumes significance in intergenerational care arrangements as greater numbers of women are widowed compared to men (Sengupta and Agree, 2002; Ugargol et al, 2016) and culturally older women seek support and co-residence with their son/sons in exchange for property and assets (Medora, 2007; Brijnath, 2012; Ugargol and Bailey, 2021). Co-residence seems to help integrate widowed older women into the sociocultural nucleus of the family (Wells and Kendig, 1997; Knodel and Saengtienchai, 1999; Lamb, 2013), provides them a sense of belonging and purpose (Van Willigan and Chaddha, 1999) and is associated with improved health outcomes (Sengupta and Agree, 2002). After the death of the spouse when the headship of the household is transferred to the oldest son (Sengupta and Agree, 2002), older women find protection in co-residing with their sons and it is assumed that the property and assets will transfer to the oldest son (Brijnath, 2012; Ugargol and Bailey, 2021).

In India where sons are culturally responsible for parent care, the actual caregiving role is most often handled by their wives, that is, daughters-in-law of the older adult (Jamuna and Ramamurti, 1999; Kadoya and Khan, 2015; Ugargol and Bailey, 2018, 2021) and the relationship between the parent-in-law and the daughter-in-law often dictates the course and type of intergenerational care arrangement (Jamuna and Ramamurti, 1999; Vera-Sanso, 1999; Allendorf, 2015; Ugargol and Bailey, 2018, 2021). The preference to co-reside with sons rather than daughters becomes clearer when we understand the context of Indian marriage customs and kinship system in which daughters are considered as lost into the natal family after marriage (Medora, 2007). Older women have strong ties with daughters; however, there is also equal antipathy towards co-residing with daughters (Bhat and Dhruvarajan, 2001; Kalavar and Jamuna, 2011). In the physical absence of the emigrant son, however, the responsibility of care provision is perceived by older adults to be shared among the other children, including the daughters (Dharmalingam, 1994; Miltiades, 2002; Ugargol and Bailey, 2018).

Therefore, intergenerational care arrangements for older adults in India assume special significance since support and care mechanisms are mutually negotiated between adult children and parents given the reliance on the family and not on the state to care for older adults (Medora, 2007; Brijnath, 2012; Ugargol et al, 2016). The intergenerational care contract between older parents and their adult children (Croll, 2006) continues to be the framework for filial and familial obligations albeit with changing needs and circumstances. In order to support more balanced and symmetrical resource flows, intergenerational living arrangements are being continuously adapted and adjusted to accommodate changes in parental needs as well as to suit

the availability, familiarity, motivation and preference of family caregivers. These accounts of older adults and their caregivers in reflecting on their care exchange relationships are situated in the cultural context and rely on the status of the interactants (Scott and Lyman, 1968). Through analysis of in-depth interviews of older adults and their family caregivers from emigrant households in Goa, we qualitatively explore how different forms of intergenerational care arrangements emerge as negotiated reciprocal contracts between adult children and their older adults to enable reciprocal support exchanges.

Ageing and migration in Goa: the context

Goa is the smallest state in India with an area of 3,702 km² and measures 105 km from north to south and 62 km from east to west. Goa has one of the best health and development indices among other Indian states (Patel and Prince, 2001; Mukherjee et al, 2016). The primary language in Goa is Konkani, though Marathi, Hindi and English are also commonly spoken (Newman, 1988). Sporadic migration from Goa, voluntary and forced, has been witnessed for centuries. Goa was a Portuguese colony for over four centuries until 1961 when it was liberated by the Indian army and became a Union Territory of India along with Daman and Diu. Goa eventually attained complete statehood in 1987 in the Indian Union (da Silva Gracias, 2000). Consequent to the formation of the new state of Goa, it was divided into two districts, North Goa and South Goa, with their headquarters at Panaji and Margao respectively.

Goans, have been migrating for centuries: before, during and after the colonial period. In the first phase that covers the sixteenth and seventeenth centuries, Goans migrated primarily to the neighbouring kingdoms of India. During the colonial times, when India was ruled by the British, Goans predominantly migrated to British India and Africa. In the last phase of migration, that is, the postcolonial phase, Goans migrated to the Gulf, the West (Europe, Canada, USA and Brazil) as well as to Australia and New Zealand. Since the oil-boom, Goans have been migrating to the Gulf, where conditions arising from the discovery of oil provided good job opportunities (da Silva Gracias, 2001). In recent years, many Goans have reclaimed their Portuguese nationality so that they can migrate to Europe, giving them an opportunity to work and settle across Europe. Portuguese nationality is available to any individual who can prove s/he was born in or has/had a parent or grandparent born in Portuguese India prior to 1961 and this has resulted in a new migration industry in Goa (da Silva Gracias, 2001).

Among Indian states, the proportion of older adults in Goa at 11.2 per cent of the total population is second only to the state of Kerala with

a proportion of 12.6 per cent and considerably higher than the Indian average of 8.6 per cent (General, I.R., 2011). The mean size of Goan households based on the 2011 census is 4.52 (Nayak and Behera, 2014) and parents usually live with their sons, son's wife and grandchildren. Migration and seafaring have been a traditional and historically documented occurrence in Goa, is male-dominated and women and children are notably left behind (Sampson, 2005; Government of India, 2008; Tumble, 2012). In emigrant households of Goa, 31 per cent of older adults lived with their spouses exclusively, while 46 per cent of them lived with either married sons or married daughters (Government of India, 2008). Emigration from Goa is predominantly seen among the Christian population (42 emigrants per 100 households) although they make up only a fourth of the state's population (Frenz, 2008; Government of India, 2008). While South Goa had a higher emigration rate of 22.8 emigrants per 100 households compared to 10.7 emigrants for North Goa, the Salcete taluk municipality (in South Goa) had the highest emigration index of 40.4 emigrants per 100 households (Government of India, 2008).

Prior research on intergenerational support exchanges from Goa's emigration context is scarce and reciprocal motivations to caregiving and care arrangements between emigrant/non-emigrant children and their parents have not been explored. The formation of adaptive intergenerational care arrangements that make it conducive for support exchanges between parents and adult children to exist and continue is also underexplored. Goa, being one of the most developed states in India, presents a compelling setting for examining the intergenerational care contract under the influence of modernisation and emigration of adult children.

Methods

Setting and participant profile

The study was conducted in Salcete taluk, a district of South Goa, which boasts of the highest emigration index among all taluks in the state of Goa. The field site for this study included the adjoining towns of Chinchinim, Navelim, Verna, Varca and Benaulin in Salcete taluk. Given the safety concerns and vulnerability of older adults, it was felt inappropriate to randomly knock on people's doors to ask about the composition of the family. Moreover, since there were no available lists that we could access which described the household composition, a snowball technique was employed to recruit the participants. The first group of participants were recruited during an interactive workshop organised for older adults by Caritas-Goa, a charitable society organization under the Archdiocese of Goa, at Panaji. The researcher

used this opportunity to briefly introduce his proposed research to the participants. Thereon, the researcher made contact with older adults and sought their consent to participate in the study. Using a snowball technique where each participant helped identify another left-behind older adult in the neighbourhood, 22 older adults, aged above 60 years, and their corresponding primary caregivers were approached and recruited for the study.

Table 6.1 describes the sample. Primary caregivers were identified by the older adults themselves. Caregivers were required to be primarily co-residing with the older adult. Criteria for older adults required that they had to be aged 60 years and above and have at least one emigrant adult child. Of the 22 caregivers, nine were daughters-in-law, five were female spousal caregivers (wives), there was one male spousal caregiver (husband), five daughter-caregivers and two sons as caregivers. Caregivers ranged from 35 to 78 years old, while older adults ranged in age from 60 to 102. Nine of the older adults were currently married while 13 were widowed. All participants were native to the region and spoke Konkani as well as English. The researcher employed the services of a local interpreter for the interviews that were carried out in Konkani. Twenty-three interviews were conducted in Konkani and 21 interviews in English based on the participants' preferences. Households that participated in the study represented the middle to lower socio-economic class of society and all families identified themselves as Catholic Christians. Many of the households reflected Portuguese cultural influence and many of these families had ties with family members who had chosen to move to Portugal. It is important to note that seafaring children would return home once or twice a year and spend a few months at home, while those working abroad on oil rigs, for example, would return home more frequently.

Ethics

The study was submitted for ethical approval and was approved by the Institutional Ethics Review Board of the University of Groningen, the Netherlands. Participants were informed about the study objectives and explained the interview process. After obtaining written informed consent to conduct the interviews and to audio-record the conversations, interviews were conducted at the convenience of the participants. Privacy and anonymity were observed. Pseudonyms have been used to provide context but not to link the participant.

Data collection

Between October 2014 and March 2015, 44 in-depth interviews that involved 22 older adults and 22 caregivers were conducted in Salcete taluk, South Goa. Semi-structured in-depth interview guides were employed. The first author conducted

Care arrangements for older adults

Table 6.1: Description of older adults and their caregivers: Goa

Primary caregiver details				Details of older adult				Details of children		
Co-resident caregiver	Name	Age	Work history	Name	Marital status	Age	Gender	Emigrant children	Non-emigrant children	Co-resides with
Daughter-in-law	Andrea	55	Homemaker	Magdalene	Widowed	78	F	2 sons, both seafarers	Both daughters of older adult live in Goa	Elder daughter-in-law and grandchildren
	Monica	41	Homemaker	Elizabeth	Married	73	F	2 sons, both seafarers	Daughter lives in Goa	Spouse, elder daughter-in-law and grandchildren
	Rachel	45	Homemaker; had been employed	Mary	Widowed	84	F	1 son, worked in Dubai initially, now a seafarer	2 daughters live in Goa, 1 in Mumbai	Daughter-in-law and grandchildren
	Archangel	37	Homemaker; had worked earlier	Isabel	Married	75	F	1 son, seafarer	2 daughters live in Goa	Spouse, daughter-in-law and grandchildren
	Natalia	39	Homemaker; had been employed	Jennifer	Widowed	70	F	1 son, seafarer	2 daughters live in Goa	Daughter-in-law and grandchildren
	Ana	52	Homemaker; had been employed as a teacher	Peter	Widowed	102	M	2 sons, both seafarers	4 daughters live in Goa, 1 son lives in Mumbai	Wife of youngest son (daughter-in-law) and grandchildren

(continued)

Table 6.1: Description of older adults and their caregivers: Goa (continued)

Primary caregiver details				Details of older adult				Details of children		
Co-resident caregiver	Name	Age	Work history	Name	Marital status	Age	Gender	Emigrant children	Non-emigrant children	Co-resides with
	Lorna	45	Homemaker; gave up her nursing career	Patricia	Widowed	75	F	1 son, worked in Dubai initially, now a seafarer	2 sons and 3 daughters live in Goa	Wife of younger son (daughter-in-law) and grandchildren
	Rita	35	Homemaker	Joana	Widowed	72	M	1 son, seafarer	None	Daughter-in-law and grandchild
	Sabina	30	Currently homemaker; doctor by profession	Louisa	Widowed	88	F	3 sons, one each in USA, Australia and Canada; 1 daughter, works in USA.	1 son and 1 daughter live in Goa	Youngest son, daughter-in-law and grandchild
Wife	Lucy	60	Homemaker; had worked abroad	Rosario	Married	67	M	2 sons, both seafarers	Daughter lives in Goa	Spouse
	Rose	65	Homemaker	Anton	Married	75	M	1 son, seafarer	3 daughters live in Goa	Spouse, daughter-in-law and grandchildren
	Martha	61	Currently employed; had worked as nanny in Kuwait	Laurence	Married	60	M	Both sons, seafarers; daughter, working in Kuwait	None	Spouse

(continued)

Table 6.1: Description of older adults and their caregivers: Goa (continued)

Primary caregiver details				Details of older adult				Details of children		
Co-resident caregiver	Name	Age	Work history	Name	Marital status	Age	Gender	Emigrant children	Non-emigrant children	Co-resides with
	Agnes	68	Homemaker; had worked in fields	Paul	Married	81	M	1 daughter, working in United Kingdom	Son lives in Goa	Spouse, son, daughter-in-law and grandchildren
	Marianne	52	Homemaker; entrepreneur	Vincent	Married	68	M	1 daughter, works in USA as physiotherapist	1 daughter works in Mumbai, India	Spouse
Husband	Sebastian	78	Retired	Perpetua	Married	72	F	1 son, seafarer; 1 daughter, works in Muscat	1 son lives in Goa	Spouse
Daughter	Catherine	53	Homemaker; had worked abroad in Muscat	Margaret	Widowed	80	F	1 son, was a seafarer initially, now works in the Netherlands	2 sons and 3 daughters live in Goa	Youngest daughter and grandchild
	Sophie	51	Homemaker	Veronica	Widowed	82	F	1 son, seafarer; 1 daughter, works in Kuwait	2 daughters and 1 son live in Goa, 2 daughters live in Mumbai	Fourth daughter and grandchildren
	Teresa	35	Fisherwoman	Crescentia	Widowed	60	F	1 daughter, lives in United Kingdom	1 son and 1 daughter live in Goa	Son and daughter-in-law; although spent much the day time with daughter and son-in-law

(continued)

Table 6.1: Description of older adults and their caregivers: Goa (continued)

Primary caregiver details				Details of older adult				Details of children		
Co-resident caregiver	Name	Age	Work history	Name	Marital status	Age	Gender	Emigrant children	Non-emigrant children	Co-resides with
	Agatha	44	Homemaker; had worked in Dubai, returned to care for mother	Josephine	Widowed	80	F	1 daughter, works in Dubai	4 daughters are in India; 2 in Goa and 2 in Mumbai	Youngest daughter and grandchildren
	Lourdes	51	Fisherwoman	Hyacintha	Widowed	72	F	1 son and grandson, seafarers	1 son and 1 daughter live in Goa	Daughter and grandchildren
Son	Basil	38	Emigrant son; works in an oil rig abroad	Jacinta	Married	69	F	1 son, works in Africa	3 daughters live in Goa	Spouse, son, daughter-in-law and grandchild
	Leander	39	Entrepreneur; had worked abroad	Madeleine	Widowed	73	F	1 son and 1 daughter, both work in United Kingdom	1 son and 3 daughters live in Goa	Son, daughter-in-law and grandchildren

Note: All potential identifiers have been removed from the data. Pseudonyms have been used.

all interviews in the participants' homes at their convenience. Interviews ranged in duration from 45 minutes to 2 hours. Co-resident participants were interviewed separately based on their convenience. Interviews had to be rescheduled at times to provision for privacy. Confidentiality was maintained and answers provided by one were not shared with the other family member.

Older adults were asked to reflect on their care needs, the caregiving relationship, impact of emigration on the household, evaluation of care options, linked lives with their family members, cultural beliefs and expectations, perceived reciprocity in the care exchange process and caregiving contributions from children, children-in-law and other family members. Caregivers were asked to speak about their caregiving relationship, understanding of the needs of the older adult, motivation to providing care, perceived reciprocity in the care exchange process, support received from other family members and caregiving contributions of siblings or children-in-law. Interviews were conducted up to the point of data saturation.

Data analysis

Qualitative data used for analytical purposes were derived from both interview transcriptions and the researcher's field notes. All interviews were typed and transcribed verbatim. Interviews carried out in Konkani were transcribed into Konkani and then translated into English for textual analysis. The text was coded using Atlas.Ti Version 7.5.10 computer software. Specifically, we have followed these steps in data analysis: transcribing raw data verbatim, translating from Konkani to English, immersion in the data, importing data into Atlas.Ti, open coding, detailed line-by-line coding, identify concepts, axial coding, reassembling open codes into subcategories, selective coding and integrating theories and literature (social exchange). Refined codes and categories came up after multiple readings and re-examination of coded transcripts. From the primary codes that emerged we developed secondary codes such as 'expectations of care', 'care received from family', 'care options', 'caregiver perceptions', 'reciprocity', 'linked lives', 'perceptions of older adults' and 'gender'.

Intergenerational care arrangements: findings

The following themes emerged from analysis of in-depth interviews of caregivers and older adults and reflect how intergenerational co-residence and intergenerational care arrangements across households evolved as negotiated contracts and how reciprocity was effected through cultural norms, sharing of resources, recognising parental needs, care and support exchanges, sharing of caregiving responsibilities and practical negotiation of family obligations between older adults and their younger family members.

The themes that emerged are: (A) transition events and reciprocity in the formation of intergenerational co-residence; (B) exchange of care through intergenerational co-residence; (C) exchange of intergenerational care in close proximity households; and (D) exchange of intergenerational care through 'embedded' or 'enmeshed' separate nuclear households.

Transition events and reciprocity in the formation of intergenerational co-residence

Transition events such as widowhood, birth of a grandchild, increased parental care needs and emigration are known to direct adult children and older adults into incorporating either one into their household to co-reside. The reciprocal support exchanges that guide these patterns of co-residence and support and the ensuing resource flows come forth in this theme.

Perpetua lives with her husband Sebastian in a large house. Since Perpetua has been diagnosed with a type of cancer and is undergoing chemotherapy for it, she depends on her husband for care and support. Perpetua is quite relieved to note that she is able to co-reside with her husband until now and feels co-residing with her non-emigrant son would have meant tolerating the daughter-in-law with whom she did not share a particularly good relationship:

'younger fellow (son) also, he's a captain on the ship (paused) he has a flat in Bombay (paused) he stays in Bombay (*paused*) like that you know, he will (paused) I feel having such a big house (paused) built this house before they got married (paused) of course daughter was married, but then one way I feel, I'm thankful that God has not kept them here (paused) because that daughter-in-law, they come once in a while (smiles), where they do all the mischief (fights), (*paused*) they come sometime and they go.' (Perpetua, older adult, 72 years, Chinchinim)

Transition events such as the emigration of children often led older couples or widowed parents to co-reside with one of their adult children (often the daughter-in-law when the adult child had emigrated) either by being incorporated into their child's household or by incorporating the adult child into their household. Hyacintha, a widowed older adult, narrates how she moved into her daughter's household after the loss of her spouse and due to her health needs:

'at first I used to stay at my husband's place with my 3 children (*paused*), after he died (*paused*) then I fell sick and then my daughter brought

me here, before that I used to stay at my sister's place (*paused*), she got (suffered) a heart attack and expired.' (Hyacintha, older female, 72 years, Varca)

Lorna is the wife of Patricia's youngest son. Lorna currently co-resides with her mother-in-law, Patricia, and looks after her. Lorna's husband contributed his earnings (remittances) to demolish and restore the house and hence it was mutually understood that the house would be bequeathed to her husband:

'from the time I got married, I was here and this was her (mother-in-law's) house so I was brought here (*paused*) this was the old house (*paused*) so they (sisters-in-law) went separately (*paused*), my husband did not go because she did not want him to go. He was a mother's boy (*paused*) so she wanted him always to be with her (*paused*) first we use to stay in the old house. We demolished that and built this new one. Since we are staying here. I take care of all in the house. I take care of my mother-in-law.' (Lorna, daughter-in-law caregiver, 51 years, Verna)

This theme informs us how spouses tend to depend on each other as long as they are able to co-reside and manage on their own until events such as widowhood, emigration of an adult child or increased care needs necessitate them to either incorporate their children or children-in-law into their households or lead them to move into their children's households for care and security. Older adults who perceived that their care needs had increased often invited adult children, especially daughters, who were residing in close proximity, to move into their residence. This was often mutually beneficial as children who did not own a home found recourse to the parental home and the older adult benefitted from co-residence through care provision and security from the adult child. In other instances, adult children who had remained with their parents even after marriage and had contributed to the older adult's household through financial support, often remittances (if emigrant) and were on course to inherit the assets of the older adult in reciprocation.

Intergenerational care through co-residence

The motives and expectations that guided co-residence patterns between older parents and their adult children are described under this theme. The sub-themes below provide insights into how adults' decisions to co-reside with their sons, daughters-in-law or daughters were indicative of the reciprocal support exchanges perceived in their care relationships and the mutual aim to adapt and accommodate to the changing needs and circumstances in order to keep mutual resource flows going.

Older adults co-residing with adult sons

Many older adults who were co-residing with their adult sons were actually living in their own home which the adult son had not left even after his marriage. Expectations of support from children, realisation of support received and the role of daughters-in-law in this reciprocal arrangement who often continued to co-reside with the older adult even after their husbands emigrated is explained in this section.

Madeleine was widowed several years ago and continued to stay in her house alone. Her youngest son, Leander, decided to return from abroad to co-reside with her, along with his wife and children. Madeleine's eldest son and the eldest daughter have emigrated to the United Kingdom, while her other three daughters are married and live in Goa.

'Sometimes, those who are in Goa (*daughters*), they come and visit me. The one in Neura, she come every Saturday for mass, comes here for coffee, she is also a teacher, the other one also comes. I live here with Leander, his wife and his 2 sons and the servant. He has a factory there and all the people of the factory also stay here. My thinking is like that (*paused*), we have to put in your children's mind to do all those things when they are young to look after the elderly people.' (Madeleine, older female, 73 years, Benaulin)

Co-residence with an adult son, however, was not always mutually reciprocal or beneficial as there were instances where parents perceived neglect and felt disconnected in the co-residential relationship. Crescentia's daughter had emigrated and although she co-resided with her son and daughter-in-law in her own home, she perceived no care and support from her son although the house belonged to her. She felt neglected and would end up at her daughter's doorstep (who lived nearby) every day for care and support:

'he is not supporting me like how a son should be with his mother (*paused*), my son only has to do this (care for me) now because my daughters have got married and he is at home. He is not looking after me that's why I am coming here (daughter's house).' (Crescentia, older female, 60 years, Navelim)

Basil works on an oil rig offshore in Africa and returns home every second month for a few days. His mother Jacinta is 69 years old and lives with her husband, daughter-in-law (Basil's wife) and grandchild. Jacinta identified Basil as her primary caregiver and his temporary absence from the household does not seem to affect the caregiving role that she identifies with Basil.

Basil felt caregiving was an extension of his relationship with the co-residing mother:

‘Ya, as I said, it is not one person (not only me) who looks after her. I have an old dad also, basically she needs some extra care that is the only thing, otherwise duties are the same.’ (Basil, emigrant son, 38 years, Verna)

In co-residing with their adult sons, older adults would select one among their children for the role and expected to receive care and support from their children and daughters-in-law in return for bequeathing ownership to the house and property. This pattern of co-residence is interesting to note since one among the many children is selected into this role and he or she continues to live with the parent while other children emigrate or move away to setup their families. Even when these adult sons emigrate, they leave behind their spouses to continue the reciprocal relationships in their absence. However, not all older parents who decided to co-reside with their sons realised their expectations and a few of them perceived neglect and felt constrained in the relationship forcing them to reach out to other children who lived nearby hence relying on care arrangements beyond co-residence.

Older adults co-residing with daughter-in-law

This sub-theme brings forth the reciprocal motives and circumstances that lead older adults to co-reside with their daughters-in-law. Usually what starts as co-residence with the adult son ends up being co-residence with the daughter-in-law and grandchildren when the son emigrates leaving behind his family.

Joana, a widowed older adult, had been co-residing with her only son in her own home. Even after the son became a seafarer, Joana continued to live with her daughter-in-law, Rita, and her grandchild in the same home. Since her support came from her son through her daughter-in-law, she was appreciate of the care she was receiving and recognized the mutual support exchange with her daughter-in-law:

‘this girl (daughter-in-law) has my responsibility (*paused*) she only does (*paused*) everything is on her, and sister-in law and brother also ... yes more, responsibility is on her (*paused*) I am free with her (*paused*) because she is there at home all the time (*paused*) ya she is at home with me.’ (Joana, older female, 72 years, Benaulin)

Lorna is Patricia’s daughter-in-law and co-resides with her. Lorna narrates how Patricia feels free and independent in her own house. Patricia had

decided to co-reside with her and daughter-in-law, Lorna, as she felt comfortable with them as compared to her other children:

'Because it is her house, so she can do anything, she can jump, she can shout, she can yell, she can (*paused*) means she feels very comfortable. After all its her house no she means (*paused*) earlier when she was okay (in better health), whatever used to happen she used to tell me ... she used to go there (children's homes). She will do everything (help the other children) but she will never stay there, only sometimes in emergency (when her help was required) she used to stay there, otherwise she always used to come back to stay here.' (Lorna, daughter-in-law caregiver, 51 years, Verna)

Older parents who co-resided with their daughters-in-law usually owned the house and the now emigrant son had continued to live with his parents even after marriage. Thus, older parents and their daughters-in-law shared a relationship that is marked by a joint internalization of the emigrant event with both longing for the same individual. Married older spouses tended to provide care for the partner and counted on the daughter-in-law only when the primary caregiver had to go out of the household for certain errands. Widowed older parents who were co-residing with the adult son even before he emigrated continued to co-reside with the daughter-in-law. The emigrant son and his left-behind wife were naturally selected not only to co-reside and provide care but would benefit from intergenerational transfers in time to come.

Older adults co-residing with daughters

Though daughters were not expected or obliged to care for the parents after they get married when they assume caregiving duties in their husband's household, a few older adults did obtain care from their daughters through co-residence. This theme describes how daughters responded to the needs of the older parent, usually widowhood or increased care needs, and had decided to co-reside to provide care to the parent.

Agatha's mother Josephine was living alone after the loss of her spouse. Soon afterwards, since she suffered a paralytic stroke that required intensive care and rehabilitation, her youngest daughter Agatha returned home from Dubai along with her children to co-reside with her while her spouse continued to work in Dubai:

'I am staying here, I think it is 3 years became since I have come down. After my dad's death, there was nobody in the house, so I had to come back. I had to leave my job. I was working in Dubai actually,

so I had to leave my job and come here.’ (Agatha, daughter caregiver, 44 years, Chinchinim)

Sophie was the fourth daughter to her widowed mother, Veronica. She lived in her mother’s home along with her grandchildren even though her husband was away in the adjacent town. While some of her siblings chose to emigrate and the rest lived in Goa, she could not see her mother living alone, especially after an injury to her hand, and decided to come in and co-reside with her mother:

‘See, I am her daughter and she is my mother. As she was alone, it was my responsibility to take her care. Somebody has to take care of her.’ (Sophie, daughter caregiver, 51 years, Varca)

Daughters had responded to the increased care needs of the older adult, the absence of other siblings around and some had even sacrificed their careers to return back home in order to provide care to their parent. It is quite rare to imagine in an Indian context that daughters return back to their parental home to provide care and this indicates to us how caregiver selection happens. Relationships between siblings and the older parent, motives of obtaining intergenerational transfers through provision of care along and parental selection seem to direct daughters to take up primary roles of caregiving through co-residence. Thus, while older adults can benefit through investing in their children and building up beneficence, the younger generation is recognising their parents as more of a resource rather than a burden and hence filial obligations through co-residence continue in word and deed.

Intergenerational care through close-proximity households

This theme describes exchange of care between older parents and their children or children-in-law through living in close proximity, for example, within the same city, village, sometimes sharing the same courtyard such that there is ease of contact and support between adult children and their parents. This arrangement also facilitated sharing of filial roles between non-emigrant adult children and also between non-emigrant and emigrant siblings.

Margaret lived in her own house along with her daughter Catherine, who was widowed. Margaret had lost her spouse many years ago and had been living alone after the loss of her spouse. Margaret had planned and divided the property among all the sons in such a way that she expected the sons to live in the same courtyard in separate units even after they got married:

'I have got three sons, so I constructed these units separately, for all the sons it is separate, this portion is actually for the son, Alistair (who emigrated to Netherlands).' (Margaret, older female, 80 years, Varca)

Catherine, Margaret's daughter, considers it a blessing for her mother that the non-emigrant sons are living in the same courtyard, which is allowing for the pooling of support, assistance and reciprocal care within the family:

'For her, it is very nice because she has got all of her sons close by and they are married and they staying all together. So, in terms of somebody looking after her when it is required, all of them are here. That is a big blessing because nowadays, it doesn't happen that way (*paused*), her children I think are her assets. Children are the main thing for her at this stage. That she has she got all her grandchildren there.' (Catherine, co-residing daughter caregiver, 53 years, Varca)

Madeleine is 73 years old and lives with her son Leander and his family. She received frequent visits and support exchanges from her two daughters who live nearby in Goa and also from her other daughter who lives in Bengaluru, India. Madeleine had told this daughter to stay back with her as the house was large enough and the assets could be shared between her and Leander, her co-resident son:

'Sometimes, those who are in Goa, they come and visit me. The one in Neura (a village in Goa), she comes every Saturday for mass (church), after mass she comes here for coffee, she is also a teacher, the other one also comes (*paused*), the son (who emigrated to United Kingdom) comes once in a year for Christmas (*paused*), but he calls often. Even my daughters, they are like my sisters now. One is in Bengaluru, two are in Goa. Even the Bangalore one used to come here. When I was sick, she came here. This one (Leander) was on the ship, so she came down and then I told her not to go (*paused*), we have enough (assets and house to share) here, that is what I said to her.' (Madeleine, older female, 73 years, Benaulin)

There were also instances where siblings were competing for assets and wealth of the older adult and hence a lot of mistrust and disconnect existed between them. In this case, cooperation and sharing of caregiving duties and support exchanges among siblings is absent and the daughter-in-law who co-resided with the older adult felt pained by the experience.

'I wanted their (sisters-in-law) help otherwise I had never asked with them I always manage it because they I know what is their this

like, and it is no point in telling them forcing them but only when I was pregnant and bed ridden means bed rest (*paused*) so that time my husband requested them to take her (mother-in-law); now that government pension that my mother-in-law gets, the elder one (daughter), she comes to take the pension, because she (Jennifer) has already done the signatures on the cheques.' (Natalia, daughter-in-law caregiver, 39 years, Chinchinim)

Through this theme, perspectives of how older adults and their adult children negotiated care needs, careers, likes and dislikes for each other, widowhood, emigration and relations with and between children-in-law and among siblings to form close proximity nuclear residence with support exchanges and transfer of material and non-material exchanges between households are visible. We see instances where older parents invested in keeping adult children in close proximity through providing them residences within the same courtyard, done usually through partitioning the existing large property. This provided an opportunity for closer, regular and almost routine exchange of material and non-material transfers between these households usually directed through the co-residing primary caregiving child and aided siblings to share and cooperate together in care provision. In other instances we see how children living in close proximity would visit, enquire and share their concern and provide care to the older adult although difficulties arose when daughters-in-law had to now cooperate and share caregiving roles with other sisters-in-law who were competing for the assets and wealth of the older adult.

Intergenerational care through 'embedded' or 'enmeshed' separate nuclear households

This theme reflects an attempt to adapt and retain traditional kinship ties through functional support exchanges even though older parents and their adult children lived in separate nuclear households. These households were closely connected, spatially or remotely, through a complex web of intergenerational exchanges. These were characteristic of adult children living in separate nuclear households but where resource flows were not constrained by physical boundaries of separate households or on account of being away from the older adult and there was significant cooperation among the households.

Children living abroad were connected and available to interact with their parents and siblings making use of technology that helped overcome the distance. Margaret, who co-resides with her daughter Catherine, describes how she is able to maintain regular communication with her other children apart from those who live in the same courtyard with her:

‘My elder son has Skype, so we watch him on Skype, and he calls regularly every Sunday. He sends money also. All the time he asks, “you have got money, right?” Don’t stop going to the doctor because of money, like that, he is concerned. Even other sons are also the same, but since I am getting pension, so I told them, if I need money, I will ask them. Even the other two also, they send me some money. I tell them, see I don’t need money at the moment; I can manage with my own. If I need, I will ask.’ (Margaret, older female, 80 years, Varca)

Louisa is 88 years old and lives with her youngest son, daughter-in-law and grandchild in Goa. Three of her sons and one of her daughters have emigrated while one of her daughters lives nearby in Goa. Louisa describes how all her children, though living in separate nuclear households, are closely connected and resource flows go back and forth between these households. Louisa also describes how her children keep in touch over the phone or through the internet and check on her everyday:

‘All the children share the responsibility; when they come down they all sit and discuss the needs I have. They phone my daughter-in-law and ask her, they order and directly send (things) to me. They talk to my doctors. All the children do the work (*paused*) I prefer to read newspaper on my iPad; I get my serials on my iPad. I read messages on my iPad. All my children contact me every day on my iPad. Even now just before you came my son from America was talking to me. He said he will phone tomorrow again. My daughter phones me every day.’ (Louisa, older adult, 88 years, Navelim)

This section on embedded families illustrates how geographic distance did not play a role in the continuance and robustness of the inter-household caregiving process. We see that adult children who lived farther away from their parents as well as those who lived abroad attempted to keep in constant touch, use newer modes of communication and regularly enquire and provide care and attention. This highlights the spatially or remotely extended family which continues to provide mutual help and cooperation albeit between separate nuclear households. This form of reciprocal support exchange also brings into focus the nuclear-extended family which emphasises the relations, exchanges and connections between separate but close kin-related nuclear households. Thus, reciprocal resource flows which are usually associated with co-residence are not constrained by the physical boundaries of separate households, and that living farther away as opposed to living with children, does not necessarily mean that there are fewer reciprocal resource flows between the generations.

Discussion

The importance of studying family response to emigration and exploring the reciprocal intentions and motivations that guide the formation of adaptive intergenerational care arrangements are highlighted in this paper. In order that mutually supportive exchanges between older parents and their adult children continue, the efforts, assumptions and actions of co-resident and non-co-resident adult children and their older parents within the context of emigration has been explored here. This chapter serves to initiate dialogue on the negotiated intergenerational contract (Croll, 2006) that seems to have evolved in the background of changing family situations and modernisation, however, serves to still makes possible reciprocal support exchanges between older adults and their adult children. Findings from our study indicate that adult children from emigrant households are responsive to parental needs of support and finds way to effect supportive exchanges as found across intergenerational reciprocity literature (Grundy, 2005; Quashie and Zimmer, 2013). Although adult children subscribe to the notion of repayment or reciprocity for past care, there were few indications of feeling indebted but more motivations of mutual need, mutual interdependence and mutual support for two-way exchanges of support and care. This growing emphasis on mutual care, reciprocal exchanges and interdependence seems to have somewhat broken down hierarchical intra-family relations too (Ugargol and Bailey, 2021). Older adults are increasingly being viewed as important in passing on family values to grandchildren and their non-monetary time-related support through childcare is being increasingly recognised and sought (Silverstein et al, 2006a; Yamada, 2006) either through co-residence, close proximity residence or by retaining contact through remote but 'embedded' households.

Adult children (both emigrant and non-emigrant), their spouses and older adults have positioned themselves and their behaviour as driven by certain motives while they attempt to construct new identities as caregivers and care receivers (Mills, 1940; Scott and Lyman, 1968). The motive to provide care can hinge on reciprocal expectations and the possibility of intergenerational transfers (Johar et al, 2015; Isherwood et al, 2016). The way in which these participants talked about their transition to caregiver and care receiver roles tell us about how people account for taking on a new identity. The findings also inform us how care arrangements evolve between the family members and how each one relates to an identity in action. Researchers who have been working in the Asian context tend to agree that unless mutual need, reciprocal interests and inter-dependence are perceived by older parents and their younger family members, there would have been no need for both generations to adapt, adjust and mutually accommodate changing needs and circumstances (Sokolovsky, 2000; Croll, 2006; Ugargol and Bailey,

2021) through intergenerational care arrangements. India's National Policy for Senior Citizens ([Government of India, 2011](#)), for example, encourages filial obligation, continuing and renewed investment in the intergenerational relationship as the primary source of mutual care, support and services. While many researchers had predicted the downfall of filial norms with the simultaneous decrease in rates of co-residence in most Asian societies, we are actually witnessing the resilience of a renewed intergenerational contract with simultaneous and shorter cyclical resource flows that is enabling older parents and adult children to reinvent ways to support each other through adaptive forms of co-residence, proximate residence and distant but 'connected' residences.

Our results corroborate evidence from Asia that points that emigrant children support their older parents financially and emotionally – financially through remittances and emotionally by maintaining frequent contact via telephone or return visits ([Silverstein et al, 2006a](#); [Singh et al, 2010](#)). Even households in which older parents lived separately or co-resided with one of their children with few or none proximate adult children households ([Zimmer and Korinek, 2008](#)) and maybe one or more distant adult children (who live far away due to occupational mobility or emigration) were all found to be enmeshed in complex grids of intergenerational exchanges, a family form which researchers have referred to as an 'embedded family' ([Croll, 2006](#)), a 'networked family' ([Whyte, 2003](#)), an 'aggregate family' ([Croll, 2006](#)) or a 'spatially extended family' ([Dube, 1997](#)). It is pertinent to note that many of the seafaring adult children from these households in Goa would visit their homes at least once a year and spend a few months while those working on oil rigs would visit more often, indicating more frequent interaction and less perception of them being permanently away. These terms illustrate the strong linkages and exchanges that characterise these related nuclear households. The threads that emerge reflect the strong linkage between ageing, social expectations and family norms that facilitate care provision for the elderly and are significant in contributing to ageing research in India. We are also now able to visualise the modified extended family which provides emotional and communication support, as evidenced by the frequency of social interaction either through telephone calls, visits or newer forms of technology such using computers and the internet between older adults and their children abroad.

These intergenerational care arrangements reflect the emigration event-led adaptation of family and household structure to retain traditional familial ties and enable mutually supportive exchanges between adult children and their parents. These findings have significant implications for those interested in the role of families in caregiving to older adults, for researchers who have been exploring reciprocal motivations to care and for policy makers concerned

about the provision and availability of family support for older adults in a rapidly evolving society such as India (Dey, 2017). It is very unlikely that governments in developing countries will offer any alternatives to family-based intergenerational care in the near future and will indirectly encourage and support families to care for older adults either through incentivising caregivers, penalising adult children who evade responsibility or merely taking moral stands (Medora, 2007; Brijnath, 2012). Given that older adults are more likely to be dependent, fragile and less equipped to reciprocate for care received from their children or other family members, non-family-based care provision needs to be explored in the Indian context (Ugargol et al, 2016; Datta, 2017). It is clear that re-emphasising existing legislative provision and encouraging intergenerational care practices is unlikely to lead to reciprocal intergenerational care arrangements unless these arrangements evolve based on reciprocal motives and interdependence between older parents and their children.

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