

Childless older adults

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Abstract

Current older adults have historically low levels of childlessness. There has been a tendency to view childless older adults as a problem group, but findings show they are not more prone to poor psychological well-being and social isolation than older parents. At the end of life, however, nonparents are more likely to enter institutional care than parents. To understand the consequences of childlessness for later life it is critical to unravel the interplay of parenthood history, marital history, and gender.

Main Text

Trends in childlessness

Recent decades have shown an increase in the proportion of permanently childless adults across developed countries, but levels differ (Organisation for Economic Co-operation and Development, 2012). At above 18% on average for women born in the early 1960s, the rates are highest in Austria, England and Wales, Finland, Germany, Ireland, Italy, and the Netherlands. Permanent childlessness is below 10% among women born in the early 1960s in Bulgaria, the Czech Republic, Hungary, Mexico, Portugal and Slovenia. Intermediate levels are observed in Greece, Poland, Romania, Spain, Sweden, and the United States of America (USA).

The increased childlessness rates are often presented as new and unprecedented. Nevertheless, it is more accurate to describe them as a return to earlier levels (Dykstra, 2009). Among women born between 1900 and 1910, childlessness rates over 20% were not uncommon. In the 1910 to 1930 cohorts' childlessness levels started to decline, reaching the lowest levels among women born in the 1930s and 1940s. Levels started to increase again among women born in 1950s and after. Virtually all developed countries show this U-shaped pattern in childlessness rates across birth cohorts.

Statistics on childlessness in older cohorts are generally available for women only. National birth registrations have long been largely restricted to women and often just to married women. Information on male fertility histories has come from surveys, but it suffers from biases associated with men's underreporting of nonmarital and previous-marriage births and sample underrepresentation of nonresident fathers (Rendall, 1999). Hence, there is a risk that childlessness among men is over-estimated. Research on male childlessness is underdeveloped,

partly due to the lack of accurate data, but also because fertility behavior has historically been considered the domain of women.

Recognizing the complexities of conceptualizing childlessness

Notwithstanding the lure of classifying childlessness into either a “voluntary” or “involuntary” decision, scholars agree that this distinction is too naive (Allen & Wise, 2013). The current consensus is that there is a continuum of childlessness. So-called “early deciders”, those who from the outset say they do not want to have children, are at the one end. Those who are infertile due to physical conditions are at the other end. In between is a group that ended up as nonparents because of disadvantageous circumstances such as divorcing early in life and not remarrying. There is also a group that drifted into childlessness because they never made a decision to actually have a child. Childlessness is then the outcome of following a particular life pattern rather than the result of an articulated decision.

The concept of being childless seems self-evident, meaning that a person has no children. Increasingly, the apparent simplicity of this concept is questioned. Until recently, there was little reflection in the literature on definitions of childlessness (Dykstra & Hagestad, 2007). Most studies on childless older adults started from a concern about the availability of supports in coping with frailty. Given this point of departure, it has been typical to assess current social resources, defining childlessness as having no living children while emphasizing the absence of biological offspring. Important distinctions have been glossed over, with insufficient recognition of the roles of adoptive, step, god, and foster children, and little attention for the difference between never having had children versus having outlived one’s children. Different research questions require bespoke definitions of childlessness and parental status. When assessing psychological well-being, it makes a difference whether the childless person has never had a child or has lost all children by death. To gain an understanding of the health consequences of a woman’s reproductive history, it is critical to focus on biological parenthood. Insight into the significance of parenting activities calls for the inclusion of “functional parents” (Allen & Wise, 2013), biologically childless people who are quite involved with other people’s children, whether partners’, siblings’ or friends’ offspring.

Progressively more studies are focusing on the links between life pathways and childlessness (e.g., Keizer, Dykstra, & Jansen, 2008). They consistently show strong gender differences in the drivers of childlessness, and the patterns are remarkably similar for older and younger cohorts. Among men, low educational attainment and poor employment prospects are strongly linked with remaining unpartnered, and remaining childless as a result. Among women, high educational attainment and good employment prospects increase the likelihood of remaining single and, by consequence, remaining childless. Gender differences in pathways to childlessness also emerge for those who have made the transition to a stable partnership. Among partnered men, high socioeconomic status decreases the likelihood of remaining childless, whereas among partnered women, high socioeconomic status increases the likelihood of remaining childless. To understand the consequences of childlessness Kohli and Albertini (2009) note that “*how* someone ends up without children may be more important than not having a child per se” (p. 1176).

Childlessness and late life outcomes

In the research literature it has been typical to view childless older adults as nonparents, implying they are a group of people who miss key gratifications in life: a critical source of support, an important marker of social status, and effortless connections with younger generations. The focus on what childless older people lack and need, taken together with findings underscoring the centrality of contacts with adult children for older adults' subjective well-being have led scholars to assume that childless older adults are a vulnerable group. Nonetheless the empirical evidence suggests that lifelong childless older adults do not generally fare worse than older parents in terms of their psychological well-being (Umberson, Pudrovska, & Reczek 2010). A recent cross-national study based on data from 15 European countries shows that this pattern holds for both men and women, as well as across birth cohorts, and does not vary systematically between countries (Hank & Wagner, 2013). Overall, marital status rather than parental status seems to be a more salient factor influencing psychological well-being in old age, with the married consistently performing better on a wide range of outcomes than the unmarried.

Careful examinations of the interplay between parenthood and marital status reveal that childlessness has costs for psychological well-being only for specific groups of older adults. For example, Zhang and Hayward (2001) found that among married men and women in the United States, levels of loneliness and depression did not differ between those with and those without children. Among the previously married, childless men were much more likely to feel lonely and depressed than women in comparable circumstances. Childless spouses tend to be heavily dependent on each other socially and emotionally, and for childless men in particular, marital disruption appears to create a void that is hard to fill.

To understand differences in psychological well-being, it not only helps to tease out the effects of parenthood, marital status, and gender, but also to distinguish lifelong childlessness from outliving one's children. It is important to note that losing all children by death is a rare occurrence. Murphy, Martikainen and Pennek (2006), using British, Finnish, and French fertility and mortality data show, for the 1920–1960 birth cohorts, that the proportion of women who are childless rises by approximately one percentage point between the ages of 80 and 90 due to outliving one's children. Few surveys have sufficiently large sample sizes for meaningful analyses. The studies that have been carried out (e.g., Bures, Koropecj-Cox, & Loree, 2009) consistently show that older parents who have outlived their children are particularly prone to depression and loneliness, and women more strongly so than men.

A challenge in research examining the links between childlessness and psychological well-being is to establish causality, that is, to determine whether childlessness actually leads to a particular outcome or whether particular kinds of people are more likely to remain single or to remain childless in marriage. One of the few examples where selection into parenthood is in fact addressed is a study carried out by Kohler, Behrman and Skytthe (2005). They used Danish data on twins to unravel the effects of genetic endowment and family background on both subjective well-being and the likelihood of forming a partnership and becoming a parent. Their findings suggest a minor contribution of genetic dispositions to variation in life satisfaction and a minor contribution of shared influences resulting from shared socialization experiences. More

importantly, the authors show that having had children does not significantly affect the life satisfaction of older men or women, over and above genetic endowment and family background.

Childless people are less likely than parents to be targets of informal social control, and this can have negative implications for their health. They are not admonished in the way that parents are to act responsibly, to be caring and to be good role models. Not surprisingly, childless older people are more often smokers, less likely to refrain from drinking, and less likely to engage in physical exercise (Kendig, Dykstra, Van Gaalen, & Melkas, 2007). The accumulated effects of these behavioral patterns might be one explanation for the lower life expectancy of childless persons (Grundy & Kravdal, 2008).

Children are sources of social capital for their parents (Offer & Schneider, 2007), serving as bridges to younger generations, neighborhood residents and community services. Not surprisingly, strategies aimed at forging social networks have been a strong theme in writing on the childless. Research reveals that the support networks of childless older adults, and the never married in particular, are more diverse than those of parents and are characterized by stronger links with neighbors and friends, family members such as siblings, nieces and nephews, and community members (e.g., Albertini & Kohli, 2009). Childlessness does not appear to make older adults more vulnerable to social isolation in everyday life, but in the event of increasing frailty, childless older adults are at risk of not having adequate supports. Often, their networks are not composed of a sufficiently wide range of close ties and many of their intimates lack strong normatively binding commitments to provide care over an extended period of time.

The literature presents competing ideas about childless older adults' reliance on formal care services. Some argue that childlessness reduces the likelihood of using home help and nursing home services. One reason is that childless older adults place a high value on independence (Wenger, 2009). Another is that childless older adults lack advocates who might negotiate access to social services. The most common view is that childlessness creates greater demands for formal care arrangements. The argument is that childless older adults, particularly those who are single, turn to professionals for the fulfilment of their care needs because they lack network members who can step in to provide intensive and prolonged help. Research consistently shows that childless older adults have a higher risk of entering institutional care (e.g., Grundy & Jitlal, 2007) but findings regarding differences between older parents and nonparents in home help utilization are mixed. For example, Australian findings show that compared with married women with children, never-married childless women make higher use of formal services such as home maintenance and meal services (Cwikel, Gramotnev, & Lee, 2006). An American study shows that childlessness, controlling for marital status, makes no difference for home health care use (Aykan, 2003). The kinds of home help that are considered differ across studies and this might account for the lack of consistency in findings.

Conclusion

Current older adults have historically low levels of childlessness. Overall, there is little evidence to suggest that they are problem cases. To understand the consequences of childlessness for later life it is critical to recognize its links with gender, partnership history and the social divisions of education, occupational status, and income.

SEE ALSO: Parent-child relationships; Singlehood; Marital trajectories; Intergenerational and family ties of baby boomers; Subjective well-being; End-of-Life Care

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Author Mini-Biography:

Pearl Dykstra was appointed chair of Empirical Sociology at Erasmus University Rotterdam in 2009. Previously she had a chair in Kinship Demography at Utrecht University and was a senior scientist at the Netherlands Interdisciplinary Demographic Institute in The Hague. She is an internationally regarded specialist on ageing societies, changes in family constellations, and intergenerational solidarity. She is an elected member of the Netherlands Royal Academy of Arts and Sciences (KNAW, 2004), and elected fellow of the Gerontological Society of America (2010).

Key Words

Childlessness, parenthood, life course, gender, marital history, well-being, social isolation, formal care