Where were the Children when Humpty-Dumpty had A Great Fall? Indian Elderly's Perception about the Quality of Familial Care

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Discussion points

This paper examines the support that older adults receive from their parents in India using a rich and underutilized dataset. This is an important topic given the magnitude of the world's population to which the study pertains, now and in the future. I enjoyed reading this paper and have provided a few comments and points of discussion.

Introduction and Background

The underlying argument of the paper is that older adults may be less able to rely on their children for support than they did in the past. It would be interesting to add more complexity to the issue of intergenerational support in the context of India for this paper. Specifically, there is some evidence that the idea that the direction of flows between parents and children reverses at some point in the lifecourse, with parents going from being providers to being recipients, may not be true to reality – it may be that parents are always net givers, but that they count on their kids to help them out as needed at older ages. See our recent paper and some of the studies cited there (Cunningham, Solveig A, Kathryn M. Yount, Michal Engelman and Emily Agree. (2013) Returns on Lifetime Investments in Children in Egypt. *Demography*. 50(2):699-724).

It will improve the impact of the literature review to structure it in terms of sub-headings, each addressing one of the main pieces of your research questions – these could include, for example, 1. Theory and empirical evidence about transfers between adult children and their parents; 2. Challenges of aging and how these can be mitigated by intergenerational support; 3. Socio-cultural norms about support to older parents in India; 4. Expectations and reality about support between adult children and their parents; 5. Implications of son preference for intergenerational transfers.

You touch on son preference in the background, and this is clearly a very important issue in this context, but then remain fairly silent on the issue of gender throughout the analysis. This seems like an important issue to address throughout... or at least argue why it is not addressed. It would be important to discuss the role of non-family care in this context, including institutional and informal care. In many settings, this is expect to be the future of care for the elderly – to what extent is this an option for adult children and elderly adults to consider?

<u>Data</u>

It sounds like the data are designed to be nationally representative, but please indicate if this is the case.

Results and Discussion

It would be helpful to focus on summarizing the results in this section, and compile the interpretation of these results in the Discussion section.

In Tables 1-4, please indicate which differences are statistically significant.

In Table 1, because most people report being comfortable and fewest being uncomfortable, the trends are hard to find just by looking at those percentages – if you sum the distribution by column within variable rather than across rows, it will be more informative (I know this is confusing to explain, but try to think through what I'm getting at – we'd want to know for example whether men vs. women are more often comfortable and this is harder to see the way you've summed across rather than down.) Same comment holds for Tables 2 to 4.

It would be good to tone down the personal interpretation/reaction to the findings throughout the paper. Just one example - on page 9, you say "this describes the picture of woeful social care provided by children". I'm not sure what this refers to, as the previous sentence is talking about differences between religions. In any case, it is our job as social scientists to quantify the magnitude of associations – whether these are good or bad in a social or moral or philosophical sense is another matter. If you want to discuss whether the levels you are seeing are good or bad, you must state relative to what – relative to what is necessary? Relative to what is ideal? Relative to the level in another country or in another ethnic group?

Along the same lines, it is important to remain cognizant of the fact that your measures of support are based on the older adults' perceptions. You are right to note early on that for wellbeing perception is extremely important. At the same time, it is also important to write about the results with the understanding that these are not quantifiable measures of actual care provided, like number of visits, amount of money provided, etc. Further, the older adults of different groups may have different interpretations of what a good amount is – so if parents in groups X and Y each receive 5 visits per week from their son, but people in group X expect to receive 7 visits and people in group Y expect to receive 3 visits, there will be systematic differences in reported level of care even if the actual care is the same – this issue needs to be carefully addressed.

Another related point is that while there is some information about older adults' perceptions of the present vs. the past, you are not actually measuring change and should be clear about this through the manuscript.

A final note – there is a lot going on in this paper – from the table numbering it looks like you may have combined 2 dissertation chapters. I would suggest cutting this into 2 separate papers, and

giving to each a better level of detail and interpretation rather than rushing through the conceptual framework and methods to show lots of tables.