Purpose: As Baby Boomers enter late life, relationships with family members gain importance. This review article highlights two aspects of their intergenerational relationships: (a) caregiving for aging parents and (b) interactions with adult children in the context of changing marital dynamics. Design and Methods: The researchers describe three studies: (a) the Within Family Differences Study (WFDS) of mothers aged 65–75 and their multiple grown children (primarily Baby Boomers) ongoing since 2001; (b) the Family Exchanges Study (FES) of Baby Boomers aged 42–60, their spouses, parents, and multiple grown children ongoing since 2008; and (c) the Longitudinal Study of Generations (LSoG) of 351 three-generation families started when the Baby Boomers were teenagers in 1971, with interviews every 3–5 years from 1985 to 2005. Results: These studies show that the Baby Boomers in midlife navigate complex intergenerational patterns. The WFDS finds aging parents differentiate among Baby Boomer children in midlife, favoring some more than others. The FES shows that the Baby Boomers are typically more involved with their children than with their aging parents; Boomers’ personal values, family members’ needs, and personal rewards shape decisions about support. The LSoG documents how divorce and remarriage dampen intergenerational obligations in some families. Moreover, loosening cultural norms have weakened family bonds in general. Implications: Reviews of these studies provide insights into how the Baby Boomers may negotiate caregiving for aging parents as well as the likelihood of family care they will receive when their own health declines in the future.

Key Words: Baby Boomer, Caregiving, Family, Intergenerational relationships, Parent, Social support
births (Haines, 2008). But the endurance of the Baby Boomers’ family ties is exceptional. In 1700, the infant mortality rate was 20%, deadly epidemics were common, and overall life expectancy remained below the age of 40. Dramatic shifts in life expectancy over the past century have precipitated accompanying changes in family ties. Baby Boomers in their mid-60s today are expected to live an additional 19.9 years on average and their younger peers may live even longer (Arias, 2011). Moreover, more than 85% of adults aged 40–50 years have a living parent (Swartz, 2009). The longevity of the Baby Boomers’ relationships to siblings and to aging parents is unprecedented. This review article describes key issues in the Baby Boomers’ long-enduring family ties as they enter old age, particularly their intergenerational ties.

A reciprocal interplay between Baby Boomers’ intergenerational ties and societal changes began in early life and continues into late life. The Baby Boomers’ relationships with their parents shaped cultural, educational, and economic experiences throughout their childhood (Fingerman & Dolbin-MacNab, 2006). In young adulthood, the Baby Boomers encountered remarkably different social circumstances than their parents did, including the women’s movement, the sexual revolution, rising divorce rates, and enhanced educational opportunities. Societal changes continue to shape their family ties. Increased use of technologies and a poor economy have led to disparities with their own grown children. Moreover, during the past half century, norms governing intergenerational relations have weakened; as Baby Boomers enter late life, they have limited societal guidance regarding their responsibilities for older parents or for grown children (Riley & Riley, 1994).

Two key features of the Baby Boomers’ intergenerational ties are the focus of this review. First, the Baby Boomers increasingly are in positions of providing care to aging parents, and they do so in the context of their original family ties. Throughout history, most humans have had siblings, but the Baby Boomers typically experienced larger sibships than did earlier or later cohorts over the last century. Moreover, they are the first cohort to enter midlife with so many sisters and brothers still alive. The implications of these sibling ties for their relationships with their aging parents and future parent care warrant consideration.

Second, Baby Boomers often find themselves of exchanging support with multiple generations. Throughout the 1980s and 1990s, scholars documented relatively few cases where middle-aged adults were in a “sandwich generation” of simultaneously providing care for aging parents and children younger than 15 years (Grundy & Henretta, 2006; Loomis & Booth, 1995). Indeed, data from the Long-Term Care Study of 1994 (when the oldest Baby Boomers were aged 48) revealed that only 9% of female primary caregivers and 6% of male primary caregivers also had children younger than 15 years. However, today, many Baby Boomers are torn between helping young adult children and aging parents (Attias-Donfut & Wolff, 2000; Fingerman, Pitzer, et al., 2011). Their aging parents incur chronic illnesses and disability, whereas their grown children face demands from economic downturns, prolonged education, and a slow transition to adulthood (Arnett, 2000). The Baby Boomers step in to provide assistance.

These demands from generations above and below are situated in relationships to romantic partners and changing marital dynamics. The Baby Boomers experienced greater acceptance of nonmarital romantic liaisons, divorce, remarriage, and cohabitation than was the case historically. Thus, they often confront complex emotional, legal, or financial demands from former romantic ties, cohabitating partners, and peripheral relatives (e.g., former in-laws or stepchildren). We consider the implications of romantic relationships for the Baby Boomers’ ties to their parents and children as they enter late life.

The researchers take two perspectives in addressing these issues, they consider: (a) the ways in which Baby Boomers’ ties are prototypical of family relationships in general (e.g., importance of intergenerational ties in late life) and (b) unique features that shape the Baby Boomers’ family ties as a cohort (e.g., increased life expectancy and social vicissitudes). The point of this article is not to provide a definitive review of Baby Boomers’ parent–child relations. Rather, the researchers describe key issues and three major studies of Boomers’ families to illuminate these issues.

**Multiple Siblings and Parent Care: The Within Family Differences Study**

As they traverse midlife and begin to enter late life, Baby Boomer siblings typically confront their parents’ present or future needs for care. One possible consequence of the Baby Boomers’ large sibships is a high degree of differentiation among parent–child dyads within families in adulthood. Some siblings may get along better with parents,
some receive more from parents, and some may give more back. A key question as they enter late life is which children in the family will provide parental care? Understanding whether and why parents differentiate among Baby Boomer siblings is a first step in answering this question.

Sibling differentiation is not new to the Baby Boomers in late life. A substantial body of work has demonstrated that parents’ relationships with their offspring differ considerably within the same family throughout childhood and adolescence (Suitor, Sechrist, Plikuhn, Pardo, & Pillemer, 2008), establishing patterns that might continue into adulthood. However, it is plausible that parents cease to engage in differentiation by the time the children reach midlife. The Baby Boomers separated from their parents in young adulthood both physically (by moving out of parental homes) and psychologically (by establishing autonomy), leaving fewer opportunities for parents to draw contrasts among their children.

**Within Family Differences Study Design**

The Within Family Differences Study (WFDS) was designed to explore these alternative scenarios in siblings’ relationships with their parents. The WFDS asks two key questions about the Baby Boomers: (a) Do aging parents differentiate among Baby Boomer siblings and, if so, (b) does such differentiation matter to the siblings involved? Moreover, this study is well suited to address questions regarding the parents’ future caregiving.

The WFDS began in 2001 with the selection of 566 mothers aged 65–75 years with two or more living children. At the end of each interview, the mothers were asked to provide contact information for their children. Approximately 63% of the mothers agreed to provide information, and approximately 70% of the children agreed to participate. Telephone interviews were completed with at least one child in 300 families, resulting in a sample of 773 adult children. One hundred twenty-nine fathers also participated.

**Does Differentiation Exist in Baby Boomer Families?**

The WFDS asked parents about relationships with their middle-aged children across a range of dimensions. Analyses revealed that most parents differentiated among their offspring across multiple relational domains, including closeness, confiding, preferences for care, and instrumental and emotional support (Pillemer & Suitor, 2006; Suitor, Pillemer, & Sechrist, 2006). For example, among mothers, 72% named a child whom they would prefer to care for them in times of illness or disability, 79% named a child to whom they would turn first in a crisis, 78% named a child to whom they would talk first when facing a personal problem, and 64% named a child to whom they were most emotionally close (Suitor & Pillemer, 2007). Furthermore, more than three quarters of the mothers differentiated among their children in providing emotional and instrumental support (Suitor et al., 2006).

Although one might expect these patterns to differ by gender or race of parent, this was not the case. Percentages of mothers and fathers who differentiated among their children were very similar (Suitor & Pillemer, in press); likewise, Black and White mothers were almost equally like to differentiate among their children (Suitor, Sechrist, & Pillemer, 2007a, 2007b).

Moreover, it was surprising that the adult children were relatively accurate in reporting whether their mothers currently differentiated among them (Suitor, Sechrist, Steinhour, & Pillemer, 2006). However, only about half of the adult children correctly identified which offspring the mothers favored.

**Why Does Differentiation Occur and Does it Matter?**

Although differentiation in young families reflects both parents’ and children’s circumstances and characteristics, differentiation when children are adults is fueled primarily by characteristics of the offspring (Suitor et al., 2007a). In particular, parents are substantially more likely to favor daughters; children who share their values and with whom they have a history of supportive exchanges; and, in the case of closeness, last-born children (Pillemer & Suitor, 2006; Suitor & Pillemer, 2006). In contrast, parents’ characteristics play no role in when differentiation occurs or which children are favored (Suitor et al., 2007a).

The implications of this differentiation were evident with regard to offspring’s well-being. WFDS analyses showed that parental differentiation has a major impact on adult children. When children perceived their mothers as differentiating among offspring or recall mothers “playing favorites” in childhood, they reported more problematic relationships with their siblings and higher depressive symptoms (Pillemer, Suitor, Pardo, & Henderson, 2010; Suitor et al., 2009). The question remains as to whether differentiation matters for parents as well.
Differentiation and Parental Caregiving in Late Life

There is a reason to expect that parental favoritism will play a role in caregiving as parents age and require greater assistance. The WFDS findings suggest that expectations regarding care are established long before parents are in need of such assistance. In fact, the study found that more than three quarters of the mothers in the WFDS named a specific child as the one most likely to care for them when they became ill or disabled (Pillemer & Suitor, 2006). Mothers typically expected that this role would be filled by daughters and by children who shared their values, lived a short distance away, had provided support in the past year, and to whom they felt high levels of emotional closeness. Surprisingly, indicators of a child’s availability—including children’s competing marital or parental roles and responsibilities, education, or children’s problems—were not related to which child the mother viewed as the likely caregiver.

These results suggest that mothers are heavily influenced in their preferences and expectations regarding their future caregiver by factors that represent comfort, trust, and reliability in interpersonal relations such as gender and attitudinal similarity, emotional closeness, and a history of having been provided support by the child in the past. They also call into question the importance of instrumental and contextual factors, including competing family roles or serious life problems that might appear to make a child a less appropriate caregiver.

Such clear expectations regarding caregiving are likely to have consequences when assistance becomes necessary. Theory and research suggest that consistency between expectations for care and actual patterns of care will have a major impact on outcomes, including psychological well-being of both parents and children. This pattern may be especially important in the case of family caregivers. Assuming the role of family caregiver to an impaired older person represents a major transition that typically has consequences for the caregiver’s physical, mental, and social well-being (Pavalko, 2011); day-to-day demands are both highly stressful and unfamiliar to most individuals before assuming this position themselves (Gaugler, Mendiondo, Smith, & Schmitt, 2003).

Specific expectations regarding which the child will become the primary caregiver in the family also introduce the possibility of violated expectations, which have been shown to produce psychological distress and tension in the relationship (MacDermid, Huston, & McHale, 1990). For Baby Boomers and their parents, violations of expectations may create anxiety on the part of parents and conflict among siblings as well. These issues may be further confounded if the Baby Boomer simultaneously is supporting grown children.

Interactions with Grown Children: The Family Exchanges Study

The Baby Boomers also engage in support exchanges with generations below as well as from above; many Baby Boomers find themselves juggling help to grown children as well as aging parents. Moreover, Baby Boomers pivot between not just two generational rungs, but multiple parents and grown children on each rung. The Baby Boomers have received assistance from their parents throughout their life and many continue to do so in midlife (Zarit & Eggebeen, 2002). Notwithstanding, as the Baby Boomers enter late life, they face greater demands from aging parents confronting health declines and grown children experiencing economic difficulties. Thus, a second key question as the Baby Boomers enter late life is when and why they provide assistance to their grown children and when and why they funnel aid to parents.

Consistent with prior cohorts, the Baby Boomers typically value relationships with their grown children more than relationships with their parents (Giarrusso, Feng, & Bengtson, 2005). Yet, the circumstances of their relationships are distinct when compared with prior cohorts. The Baby Boomers’ parents have survived longer with chronic diseases hitting later than in the past (Schoeni, Freedman, & Martin, 2008). Their children have encountered economic downturns, high demands for education, and uncertainties in finding a stable mate (Furstenberg, 2010). Both generations incur needs that draw on the Baby Boomers. The Family Exchanges Study (FES) was designed to examine Baby Boomers’ interactions with multiple generational partners.

The FES Design

The FES included families consisting of mid-aged Baby Boomers (n = 633), their spouses (i.e., other parent of offspring, n = 197), up to three grown offspring (n = 592), and each living parent (n = 337; total N = 1,759). Heavy recruiting in high-density minority neighborhoods yielded a sample that was 36% minority, particularly African American.
FES involved succinct questions in computer-assisted telephone interviews to garner participants’ perceptions of each family member. Middle-aged Baby Boomers provided information about each grown child (n = 1,384) and living parent (n = 860), regardless of whether those family members participated. Participating spouses (n = 197), grown children (n = 592), and parents (n = 337) completed similar surveys, providing a rich multiparty portrait of family life.

The FES applied theories of social support (Antonucci, 2001) to assess exchanges of advice, information, emotional support, technical help, and companionship as well as material and practical help (Fingerman, Pitzer, et al., 2011). The study also assessed contextual factors such as demographic characteristics (e.g., education, race), relationship qualities, and needs (e.g., disability, student status).

The Scope of Intergenerational Support

In FES, most Baby Boomers’ intergenerational relationships were thriving. As expected, most Boomers reported frequent contact and exchanges of support with both parents and grown children. Middle-aged Baby Boomers offered each child a listening ear and emotional support more than once a week, advice once a month, and practical and financial assistance from monthly to several times a year on average (Fingerman, Miller, Birditt, & Zarit, 2009). Baby Boomers were also involved in support of parents, particularly when parents incurred crises or disabilities that required help (Fingerman, Pitzer, et al., 2011; Fingerman, VanderDrifts, Dotterer, Birditt, & Zarit, 2011). These patterns are not surprising; intergenerational support transcends the Baby Boomer cohort and is common across history and cultural groups. Yet, U.S. Baby Boomers are much more involved with their own grown children than their parents were with them. This trend began in childhood. A national study of time use conducted from 1965 to 1998 revealed parents spent increasingly more time engaging with children from 1975 to 1998, when the Baby Boomers were likely to be raising young children (the oldest Baby Boomers were aged 29 in 1975 and the youngest Baby Boomers were aged 29 in 1975 and the youngest Baby Boomers were aged 34 in 1998; Sayer, Bianchi, & Robinson, 2004). Moreover, studies of involvement with grown children reveal similar findings. Many of the Baby Boomers’ children entered young adulthood in the early 2000s. Comparing data from the 2000s with data from the 1980s and 1990s, young adults report more frequent contact, receive more frequent support, and share more similar values with their parents than was the case in the prior decades (Bengtson, Biblarz, & Roberts, 2002; Fingerman, Cheng, Tighe, Birditt, & Zarit, in press). Data from the National Survey of Families and Households collected in 1988 revealed that fewer than half (46%) of parents gave advice to a grown child in the past month and only 31% provided any child practical assistance (Eggebeen, 1992). By contrast, in FES in 2008, 89% of parents gave advice to at least one child every month and 69% gave practical support (Fingerman et al., in press).

Increased parental involvement may be beneficial to Baby Boomers and their children. Educators and popular media lament “helicopter parents” who hover over their grown children. But complex economic and social demands make it difficult for the Baby Boomers’ children to gain a foothold in adulthood (Furstenberg, 2010) and parents may assist in these processes. In FES, more than 20% of grown children received multiple forms of support from Baby Boomer parents several times a week; more importantly, the grown children reported better adjustment and well-being from receiving such support (Fingerman, Cheng, et al., 2011).

Differentiation across Generations

Just as their parents differentiate among the Baby Boomers, similarly, the Baby Boomers do not support each child or parent comparably. The multidimensional intergenerational support model addresses factors underlying the Baby Boomers’ decisions to help each grown child or aging parent (Birditt, & Fingerman, in press; Fingerman & Birditt, 2011; Fingerman, Pitzer, et al., 2011). Baby Boomers make decisions about whether to help aging parents or grown children based on interrelated issues: resources they have, demands they face from multiple family members, each family member’s needs, and the Boomers’ own sense of reward from helping a given family member.

The role of resources warrants particular consideration. The Baby Boomers are heterogeneous economically and their ability to provide support clearly depends on what they have. Economic background and current conditions shape what Baby Boomers provide their grown children. Well-off parents may invest in their children’s education. By contrast, less well-off parents may assist children who are unemployed or have jobs with low wages, changing hours, and few benefits.
Similarly, needs vary by economic background; poorer Baby Boomers face greater demands from family members. Under increasing family demands, Baby Boomers often provide more time, effort, and money than when such demands are less (Fingerman et al., 2009; Lee, Zarit, Rovine, Birditt, & Fingerman, 2011). Grundy and Henretta (2006) described resource expansion when individuals stretch time and material resources to meet many family members’ needs.

A counter aspect of this model involves diminishing receipt of support. In FES, controlling for economic background, Baby Boomers with a greater number of children gave more support collectively to their children, but any given child received less support across a variety of domains (e.g., financial, practical, emotional; Fingerman et al., 2009). Similarly, married couples with a greater number of living parents expended more time and energy helping parents, but each parent received less support (Lee et al., 2011). On average, however, Baby Boomers have fewer children than their parents did, and many Baby Boomers have sufficient resources to provide support. Thus, a low balance of demands to resources may explain many Boomers’ high involvement with their children.

Moreover, Baby Boomers rally around a variety of family needs: (a) crises, (b) ongoing problems, (c) everyday needs, and (d) future success. Prior research has shown that middle-aged adults respond to aging parents’ health problems with direct aid (Silverstein, Gans, & Yang, 2006). Similarly, children who are least well off in a family typically receive the most support (Attias-Donfut & Wolff, 2000). But, in addition, to support in response to crises, the Baby Boomers acknowledge common everyday needs with support such as babysitting, running an errand, or offering advice to solve a problem, particularly for their grown children (Fingerman et al., in press).

Baby Boomers also allocate resources based on personal values. A study comparing intergenerational African American and White families attests to this premise (Fingerman, VanderDrift, et al., 2011). African American Baby Boomers gave more frequent support of all types to their aging parents than White Baby Boomers did, but this difference was not due to the parents’ disability or needs. Instead, beliefs that one should help parents and perceived rewards of helping parents explained the racial difference.

Finally, the Baby Boomers may consider their children as their legacy. In FES, the Baby Boomers helped children who had good relationships with them and whom they found it rewarding to help (Fingerman et al., in press). These Boomer parents also provided support to specific children they viewed as potentially successful (Fingerman et al., 2009). Even in their generosity, Baby Boomers may be less interdependent and more individual oriented; they give because it makes them feel good.

**Intergenerational Support as the Baby Boomers Grow Older**

As the Baby Boomers incur disability and other declines, the obvious question is who will attend to their needs? Their parents have served as a source of support throughout their lives. As they deal with the loss of their parents, Baby Boomers may increasingly turn to their own children.

Frequent involvement with grown children bodes well for a majority of the Baby Boomers. Prior studies have found children typically support aging parents if they received support in young adulthood (Silverstein, Conroy, Wang, Giarrusso, & Bengtson, 2002). Nonetheless, a proportion of Baby Boomers may languish in late life due to a lack of connection to their grown children. Changes in romantic patterns and marital disruptions may relegate some Baby Boomers (particularly men) to receive diminished support from grown children in late life.

**Marital Transitions and Intergenerational Ties: The Longitudinal Study of Generations**

Romantic ties often serve as a platform for ties to grown children, particularly for fathers. Baby Boomers have been the first generation to bear the brunt of the divorce revolution and its aftermath. Three explanations suggest that Baby Boomers who are not married may be at heightened risk for lack of support from grown children in late life, these factors include (a) a diminished sense of obligation, (b) poorer emotional bonds, and (c) a lack of parental investment in the child earlier in life. Thus, a final question regarding the Baby Boomers in late life is will the children and stepchildren of the divorce revolution provide care for their older parents?

In general, weakening norms of family obligation over the past half century may lessen the likelihood that Baby Boomers will receive support from grown children. This is particularly the case for nonmarried Boomers. Research suggests
children of divorce feel less filial obligation to assist older family members than those who have not experienced a marital disruption (Ganong & Coleman, 1999).

Furthermore, filial support available to older parents has its roots in early family experiences involving reciprocity and attachment. The principle of reciprocity implies that children who received time and financial investments from parents in early life will reciprocate, sometimes decades later, by providing parents social support and instrumental care (Kohli, 2005). An attachment perspective posits that close emotional bonds forged with parents early in life promote strong and altruistic tendencies in adult children (Silverstein et al., 2002). Divorce and remarriage appear to compromise both reciprocity and attachment mechanisms for securing informal eldercare by disrupting parents’ early investments in children and compromising secure intergenerational bonds (Lin, 2008).

The Longitudinal Study of Generations

The task of understanding such family dynamics from a cross-cohort perspective is made possible by the Longitudinal Study of Generations (LSOG), a study spanning four decades. The LSOG began in 1971 as a cross-sectional study of 2,044 individuals nested within 351 three-generation families. The sample was derived via a multistage stratified random selection of grandfathers enrolled in a large southern California HMO and their descendants. Each family lineage consisted of older G1 grandfathers, middle-aged G2 children, and late adolescent G3 grandchildren. Spouses of family members in each generation were also surveyed. Beginning in 1985, follow-up surveys were administered every 3–5 years until 2005, and a fourth generation was added in 1991.

The LSOG is unique because it followed individuals in multiple linked generations over a period of history when many social changes occurred. Two important features of the LSOG shed light on the Baby Boomers: (a) the capacity to compare Baby Boomers with other generations when each is at the same stage of life but experiencing different sociohistorical conditions and (b) the ability to track Baby Boom respondents from when they were as young as 16 years to late middle age.

Caring for Parents

Research from the LSOG has focused on the role of early family conditions that predispose adult children to provide support to older parents. Parrott and Bengtson (1999) found that intergenerational relationships with higher levels of affection were more likely to later be characterized by reciprocal exchanges of support between the generations. By contrast, lessened affection may be associated with diminished sense of obligation to provide parental care. Schmeeckle, Giarrusso, Feng, & Bengtson (2006) found that middle-aged children who had emotionally closer relations with their mothers as adolescents were more likely to provide support three decades later when their mothers experienced severe functional impairments.

Similarly, familistic values prospectively predicted the support children provided, but only when triggered by parents’ frailty as manifested by poor functional health and widowhood (Silverstein et al., 2006). In this sense, filial norms and attachment forms of social capital that may remain latent until action is triggered (Silverstein & Conroy, 2009), and marital disruption may result in a loss of such capital.

It is important to note that changes in norms of obligation are widespread, perhaps linked to changing marital patterns. Silverstein and Giarrusso (2011) applied a generational-sequential design—where G3 (children) and G2 (parents) were matched at the same chronological age and contrasted across historical periods 30 years apart—to study how the strength of emotional bonds between middle-aged children and their older mothers and fathers changed across adjacent generations. The authors found that G3 and G2 relationships were weaker than G2 and G1 relationships when the child generation in each dyad averaged about 45 years of age. This weakening was partially explained by the increased prevalence of marital disruption and steprelations, but it was mostly explained by a decline in the strength of familistic values in successive generations.

Furthermore, LSOG data have shown that the strength of parent-care norms has weakened between the 1970s and 1990s (Gans & Silverstein,
Aging Baby Boomers in the Context of Marital Disruption

Taken together, LSOG studies have offered evidence that poor early parent–child relationships may have adverse implications for future caregiving roles in complex families where intergenerational bonds are notably weaker. These trends are linked to marital instability and family disruption and portend greater atomization in the family, with consequences for the support and care the current cohort of adult children will provide to their divorced Baby Boom parents and stepparents.

Evidence from the LSOG suggests filial obligations and attachment—precisely those aspects of intergenerational relationships that are compromised in divorced and stepfamilies—are important motivators of social support to older parents. Were we to prognosticate based on the LSOG and accumulated evidence, we would be less than sanguine about intergenerational care available to Baby Boom parents as they grow older, particularly fathers whose relationships with adult children are detached due to divorce and remarriage (Silverstein, Bengtson, & Lawton, 1997). Some of these fathers may remarry, however, and benefit from care provided by a new, and possibly younger, spouse.

Yet, adaptation to new realities may blunt the impact of family change. The support portfolio of older adults may actually widen with the proliferation of kin ties that result from multiple divorces and remarriages (Riley & Riley, 1994). Moreover, personal values may dictate patterns of support more than norms and obligations among the Baby Boomers and their progeny. Thus, gerontologists might focus on within family differences and compare biological and stepchildren in their filial commitment (Pillemer & Suitor, 2006) and track support Baby Boomers receive as they advance to an age when the true impact of the divorce revolution will be discernable.

Implications of the Baby Boomers’ Ties to Parents and Children for the Future

Although the demise of the American family has been lamented throughout the Baby Boomers’ lives, most Baby Boomers are actively involved with members of generations above and below them. Nonetheless, as these three studies indicate, significant societal changes have resulted in more individualized relationship patterns and weakening norms regarding what is expected from family members. As the Baby Boomers enter the final decades of life, they are likely to experience: (a) caregiving for their parents; (b) losses of parents, siblings, and even children; and (c) eventual needs for care themselves. From a practical perspective, each of these issues presents complexities.

With regard to caregiving, research has documented the effectiveness of a family meeting supplementing individual counseling for caregivers of older adults suffering from dementia (Zarit & Femia, 2008). For the Baby Boomers, a key issue is who to invite to such a meeting. Both the changing dynamics of marriage and the longevity of sibling ties provide an array of individuals who could be involved in care. Beyond legal aspects of medical decisions, caregiving will need to counterbalance inclusiveness with effectiveness. The WFDS suggests individuals remain sensitive to being less favored than other family members. Thus, exclusion from parental or stepparental care may have deleterious effects on well-being and self-esteem, and this possibility should be considered in care planning.

Although demands of raising young children have not typically conflicted with parental care (Grundy & Henretta, 2006; Loomis & Booth, 1995), these patterns may change for a subset of the youngest Baby Boomers or the oldest Baby Boomers’ own children in the future. Since the early 1990s, the number of women giving birth after age 35 has risen (47.1 per 1,000 women) as has the number of women older than 40 years who have given birth (1.5 births per 1,000 women; Hamilton, Martin, & Ventura, 2006; National Health Statistics, 1997). Delayed childbearing increases the likelihood of facing concurrent demands from both generations for intense care. Due to the large sibships typical of the Baby Boom, however, Boomers who had children late may have siblings who are available to care for their own parents. The proportion of women in this age
range is also still relatively small, but nonetheless, this trend suggests that a subset of Baby Boomers may require care from children in the throws of raising children of their own.

The FES and LSOG also document the need to consider the role of personal values in the experiences of providing support. The FES found that Baby Boomers are more motivated to provide care when they find doing so to be personally rewarding. Some Baby Boomers who find providing care unpleasant may favor the idea of formal or institutional care for parents (Zarit & Femia, 2008). Indeed, the 1990s already saw increasing trends toward use of paid care and decreasing informal family care, and these trends may persist as the Baby Boomers care for their parents (Spillman & Pezzin, 2000). Thus, interventions and policies will be most effective when acknowledging many views on the best means of caring for older adults.

The next few decades will involve loss of loved ones for Baby Boomers. Many Baby Boomers have already lost a parent, but nearly all Baby Boomers will be orphaned in the upcoming decades. Inheritance among siblings is typically equitable, but prior inequities in transfers when the parents were alive (McGarry & Schoeni, 1997) may resurface and generate conflict among siblings. Workplace bereavement policies also may be challenged due to marital dynamics as Baby Boomers and their children encounter deaths of stepparents, parents, ex-in-laws, and other family members in the older generation.

Finally, in coming decades, Baby Boomers themselves will incur disability and require care. The majority of Baby Boomer parents are actively involved with at least one grown child on a weekly or even daily basis (Fingerman et al., in press). Although norms and perceived obligation to support family members have weakened (Gans & Silverstein, 2006), such intensive involvement bodes well, based on LSOG data showing endurance of strong attachments and reciprocity (Silverstein et al., 2002). Many Baby Boomers may reap the benefits of reciprocity when they themselves are old. Nonetheless, aside from family structure changes that involve limited assistance from stepchildren, other conditions may constrain the Baby Boomers’ children from assisting them. Most grown children benefit from parental involvement (Fingerman, Cheng, et al., 2011), but for some grown children, parental overinvolvement in early adulthood may limit acquisition of skills to provide care in return. Baby Boomers’ children also are likely to be single parents; nearly, 4 in 10 births in the United States in 2007 were to unmarried women (Ventura, 2009). Similarly, if the weakened economy persists, some of the Baby Boomers’ children may be struggling financially, working in unstable jobs, managing multiple stressors in their own lives, and unable to allocate time necessary to provide care consistently.

The Baby Boomers have lived through and shaped societal changes that define the nature of intergenerational ties in the 21st century. As they enter later life, they are likely to increasingly value their family ties. Yet, the Baby Boomers are a unique cohort and their approach to these family ties may define new patterns for future generations.

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