

The Well-Being of Grandparents Living in South Tyrol

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1. Introduction

During the last decades, several studies have emphasised the key role played by grandparents being highly involved in both their child's and grandchildren's lives. In Italy, the powerful increase in life expectancy – more than the 20% of the overall population today is aged 65 and over – means that more children than in the past can grow up with their grandfathers and grandmothers, sometimes even with their great-grandparents.

Moreover, the continuous changes in the composition and structure of families, with more mothers involved in the labor market and higher divorce and marital dissolution rates, make grandparents a major resource to provide significant aid to their own children when it comes time to raise the newest generation of the family. Indeed, they greatly contribute to grandchildren's growth and care, whether it be contribution of time and experience, financial support, or a sense of emotional support (1). Their role is especially relevant for countries such as Italy that do not show an even distribution of public assistance, and where childhood public services are scarce or expensive (2, 3).

This article is a report of a pilot study funded by the Free University of Bolzano-Bozen at the end of 2015 conducted to compare health and well-being among grandparents caring for grandchildren and non-careers in South Tyrol (Province of Bolzano). The research aimed at promoting the research on grandparents' well-being in both objective and subjective terms, in the light of the increasing attention to the their measurement through subjective indicators (4, 5).

2. Background and aim of the study

Nowadays, in Italy, there are 12 million grandparents; one out of three take care of his/her own grandchildren every day, by providing assistance and practical aid, as well as financial and emotional support to his/her own children and grandchildren (6). Especially grandmothers represent a solid help to balance work and family tasks in two parent-working households (7). Several studies highlight the benefits of grandparents' support in terms of childcare assistance, female participation to the labor market (3,8), health outcomes, and cognitive abilities (9-12).

Italy is one of the European countries presenting the largest share of people aged 65 and over, and this leads to reflect on the other side of the issue: as people get older, they become vulnerable. Therefore, on one hand, thanks to the longer life expectancy, grandparents can provide assistance and care to their grandchildren; on the other hand, an ageing population needs assistance as well, above all over 70 years of age, when there is a deficit between the time of care provided and the time of care received by old people (13).

As for determinants of grandparents' health and wellbeing, literature is extensive but not univocal. Broadly, the relationships between grandparents and grandchildren can negatively affect the subjective well-being of the former when such relations depend above all on negative circumstances (i.e. parents who cannot take care of their children because of death, physical or mental health problems, alcohol or drug consumption), or when working parents cannot access public or private childhood assistance services. Instead, when parenthood is associated with strong family ties and recurring intergenerational exchanges (14), a positive effect on subjective well-being is observed. Moreover, gender matters: it is well known that, compared with grandfathers, grandmothers are more involved in grandchildren care and seem to be more satisfied with this (15, 16). However, other socio-economic factors have been found to be associated with parenthood such as for instance education level, occupational and economic status.

Our research aims at investigating the association between taking care of one or more grandchildren and grandparents' health and well-being. In particular, the study reports the preliminary results of a pilot study funded by the Free University of Bozen-Bolzano and conducted in South Tyrol, a geographic zone presenting specific socio-cultural characteristics that make it a particular case study in Italy. This area is in the North of Italy and borders with Switzerland and Austria; inhabitants can be divided in three groups based on their official native language: those speaking Italian, those speaking German, and those speaking Ladin. According to 2011 Census, the highest percentage of population (69,4 %) are German native speaking; while the 26,1 % speak Italian and the 4.5 % speak Ladins. As of today, South Tyrol is the wealthiest province in Italy and among the wealthiest in the European Union. Fertility rates are very high as well as quality of life and well-being levels. Furthermore, thanks to the great autonomy due to the designation of "Autonomous Region" in the Italian Constitution, the Province can issue its own laws in the field of the social system, namely also in terms of family and elderly assistance policies (17).

In particular, the pilot study has three main objectives:

1. to examine the health status, the quality of life and well-being of grandfathers and grandmothers living in South Tyrol;
2. to outline respondents' family structures and relationships in order to explore the relationship between taking care of one or more grandchildren and grandparents' well-being (by distinguishing between children aged 0-5 and children aged 6 and over);
3. to investigate the role of official language group differences as factor of influence on the activities played by grandparents and grandchildren, on the cultural values and on the educational model imparted by grandmothers and grandfathers.

3. Research plan

In order to favour all the three language groups living in South Tyrol and considering that Ladins can usually speak all the three languages, the questionnaire has been translated in both Italian and German and respondents have been asked to choose between them. A team of professional interviewers has used anonymous questionnaires and conducted CAPI face-to-face interviews. Grandparents who have filled the questionnaire have been recruited through a random sampling from the eight administrative district of the Province. Likewise, other specific local differences have been taken into account, such as the polarization urban/rural, and the representativeness of each language group in the specific considered area.

The 128 questions are all close-ended and have been grouped in the following seven sections: General Information and Family Structure, Working conditions, Social and Leisure Time Activities, Attitudes towards family, Health and Well-being, Children, Grandchildren (all), Grandchildren (aged 0-5). The questionnaire has mainly aimed at investigating the health status and the well-being of grandparents through different measurements: perceived health status, the presence of serious limitations to daily activities, depression (EUROD scale) (19), quality of life (CASP12) (20), life satisfaction and happiness levels. Also, the questionnaire allows us to outline a series of respondents' general information and the main aspects of their grandchildren care activity (e.g. amount and quality of time spent with grandchildren, the existing emotional relationships).

4. Preliminary results

As a first step, in order to describe the sample and examine the variables distribution, univariate descriptive analyses have been conducted. The sample numbers 229 grandparents, and more than three quarters of respondents (73.8%) are females. The average age is about 66 for grandfathers and about 63 for grandmothers. Almost half of respondents (49%) are German native speaking, while the 28% and the 23% are Italians and Ladins respectively. The average age is higher for Italians (around 68) than for Germans (about 62.5) and Ladins (about 61). The average number of children is 2 for Italians and about 2.5 for Germans and Ladins. The average number of grandchildren, instead, is around 3 (about 3.3 for Germans, 2.8 for Italians, and 3.5 for Ladins), while the total number of

grandchildren ranges between 1 to 11, with slight differences by language group. The average age of all grandchildren is about 5, while the average age of the sub-groups of grandchildren aged 0-5, for whom the activity care is more demanding and tiring, is around 3. As for the activity care, preliminary results are shown in Table 1. More than the 60% of grandfathers and grandmothers (70% for the groups of Ladins) take care of more than one child at the same time, regardless they are siblings or cousins.

Table 1. Activity care and well-being of grandparents living in South Tyrol by Language group, non-weighted sample

	German		Italian		Ladin	
	N	%	N	%	N	%
Characteristics of grandparents	113	49.3	63	27.5	53	23.2
Took care of at least one grandchild in the last 12 months:	106	93.8	60	95.2	48	90.6
Takes care of more than one grandchild at the same time:	67	63.2	41	68.3	33	70.2
Do you take care of your grandchildren:						
While their parents works	64	60.4	46	76.7	28	58.3
During occasional parental engagements	70	66.0	23	38.3	24	50.0
When parents go out in their free time	50	47.2	21	35.0	30	62.5
During holiday periods	13	12.3	15	25.0	8	16.7
When they are sick	28	26.4	25	41.7	7	14.6
In case of emergency	39	36.8	33	55	16	33.3
How is your health in general?						
Very good	34	30.6	17	27.4	22	43.1
Good	66	59.5	32	51.6	26	51.0
Neither good nor bad	7	6.3	11	17.7	3	5.9
Bad	4	3.6	1	1.6	0	0.0
Very bad	0	0.0	1	1.6	0	0.0
In the last 6 months, have you had limitations to normal activities due to health problems?						
Limitations	35	31.5	16	25.4	12	25.0
No limitations	76	68.5	47	74.6	36	75.0
In general, all considered how are you happy (0-10)?						
Average value (sd)		9.3 (1.7)		9.1 (1.5)		9.2 (1.5)
How are you satisfied with your life? (0-10)?						
Average value (sd)		9.4 (1.8)		9.4 (1.2)		9.4 (1.7)
Quality of life (CASP 12-48)						
Average value (sd)		41.2 (3.7)		37.6 (4.0)		38.3 (5.1)

The highest percentage of respondents have recurrent contact with their grandchildren, with differences by language group according to the reason why they take care of them (not showed in the table). Also, more than the 90% of grandparents (about the 94% of German, the 95% of Italians and the 91% of Ladins) take care of their grandchildren without their parents presence.

Table 1 also shows the main well-being measures included in the questionnaire. First of all, we asked grandparents to report their general health status: more than the 90% of Germans and Ladins say to be in good health (good or very good health), while the percentage is slightly lower for Italians (79%). A few respondents report being in bad health conditions, and around the 25% of Italians and Ladins and the 31% of Germans report the presence of limitations to their activities because of health problems in the last 6 months.

Quality of life is assessed through the CASP12 indicator, which measures four derived dimensions of quality of life in the early old age: control, autonomy, self-realization, and pleasure. These four dimensions are combined in order to construct a unique Likert scale ranging between 12-48, where higher values indicate higher quality of life levels. On average, the German sub-group exhibits higher values of quality of life (41.2) compared with both Ladins (38.3) and Italians (37.6). As for the two

other measures of subjective well-being assessed by the survey, the satisfaction with life and happiness level, data do not show great differences by language and indicate general high levels of subjective well-being. Indeed, for all language groups, the expected value of responses to both questions is over 9, with a standard deviation that is always under 2.

5. Preliminary conclusions and next steps

Overall, preliminary results show that most of the interviewed grandparents living in South Tyrol are in good health and report high levels of subjective well-being in terms of quality of life, life satisfaction and happiness. The highest percentage of respondents take care regularly of their grandchildren, confirming how important the role played by grandparents in terms of responsibility, care and help for their children's daily life is.

However, further data analysis is needed to investigate how the cultural heterogeneity of the South Tyrol area influences the care activities of grandchildren, and whether such activities are associated with grandparents' health conditions and subjective well-being. In particular, we will deepen our study through two steps. Firstly, we will focus on the questionnaire's section about grandchildren aged 0-5, which deals with the care of children younger than 6 years of age or who do not attend nursery school yet. The choice to concentrate on this age class depends on the idea that taking care of very young children demands very hard physical efforts and may have a greater impact on health and well-being.

As a second step, we will increase the number of respondents in order to strengthen the sample's statistical power. Also, since German population is underrepresented in our present sample, we will add above all grandfathers and grandmothers of this language group (88 further interviews have already been funded). Hence, our data will be representative of the three language communities living in South Tyrol.

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