

Intergenerational Family Relations: A Systematic National Literature Review

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ABSTRACT

Introduction: The increase of populational aging brings to light new family configurations, such as, for example, multi-generational homes which are homes composed of three or more generations living together in the same house. Thus, the importance of studies in this area is pointed out, once that this configuration has important aspects for being considered about caring for the elderly and their families.

Objective: The general objective of this study was to analyze the national literature panorama on intergenerational relationships within the family between 2009 and 2021. Method: This treats about an exploratory research, in which a systematic literature review was carried out. The databases used were: Google Scholar, Ibtct Oasis BR, Lilacs, and Scielo. Descriptors were used for the search strategy, previously selected in DeCs. It was possible to realize that the most frequent reason for the formation of multigenerational homes was economic issues, divorces, and separations. Regarding the family members, the second generation was mostly female, and the third generation consisted from baby grandchildren to young adult grandchildren. The predominant difficulties found in co-residence were issues of differences in values and beliefs. And the most pointed benefits were the financial and emotional support.

Conclusion: It is observed that the exchange of experiences and affections could be a consequence of co-residence, favoring mutual learning. And, despite the conflicts that exist in these homes, it is possible that there is the exercise of respect for the choices of each one aiming at the search for a harmonious coexistence. The need for further studies in this area is emphasized since there was a scarcity of literature on the subject in Brazil.

Keywords: Family; Intergenerational relations; Systematic review; Aging

INTRODUCTION

The aging process and the aging phase bring with them changes that occur in the physical dimension, that is, physiological changes, such as gray hair and wrinkles. In addition, like all age phases, there are also changes in the way of thinking, feeling and acting, understanding that the human being is a biopsychosocial being. Consequently, the contexts of aging and old age are essentially heterogeneous and complex [1].

Based on data released by the Brazilian Institute of Geography and Statistics it is estimated that in 2060, 25.5% of the Brazilian population will be elderly [2]. During the First World Assembly of the United Nations on the aging of the population, it was defined, through resolution 39/125, that for developing

countries, people aged 60 years or more are considered elderly, whereas in developed countries it is considered to be 65 years of age or older [3]. This population aging brings to light a factor that is already present and operating in a constant, which is the formation of multigenerational homes, which are homes composed of three or more generations living in the same residence [4]. It is also considered that the current economic situation in the country is one of the main motivators for the formation of these family arrangements, as it highlights issues such as unemployment, for example, where family members can seek help from the elderly, who in most cases, it presents itself as the main contributor to the family's income [2].

One of the first researches that addressed this topic was the study of Camarano, et al. which sought to understand how

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families with elderly people are organizing in Brazil in the face of population aging [4]. These researchers argue that co-residence is a family strategy that has been used not only to benefit older generations, but also young people, as they have been financially dependent on their parents for longer, given the instabilities in the labor market, greater demand for professional development and unstable affective relationships [4,5].

This family configuration can be formed for two reasons: “permanent cohabitation” or “recohabitation”. The first is defined by the generations always living in the same house, while the second is when there is a physical distance between the generations, but then they move back in together [6]. With regard to the leadership of these homes, showed that there is a difference between the “family of elderly people” and the “family with elderly people” [5]. The “of the elderly” refers to the fact that the elderly head the household, and the “with the elderly” occurs when the elderly person lives with other family members who are the heads of the household.

Still, it is known that the family can be a strong support network for individuals, which can promote health. With this, people who often have family support, and a more harmonious intergenerational coexistence, have better health conditions [7]. In this context, in the study of Leme, et al. highlight the importance of investigating grandparents in the scenario of multigenerational homes, as they are often protagonists in the dynamics of exchange and support that are present in current family relationships [8]. Therefore, it is an important scenario to be considered by professionals, given the care of elderly people and their families. Understanding this panorama allows a new view on the dimensionality of these relationships for a professional performance that is more congruent with reality [9].

Thus, this study aimed to analyze the panorama of national literature about intergenerational relationships within the family between 2009 and 2021. Specifically, it aimed to: characterize the profile of the members of these multigenerational families; to identify, in the selected studies, the reasons that have caused the formation of multigenerational homes in Brazil and to verify the factors that generate conflicts and/or that facilitate the coexistence of members in this type of family configuration.

LITERATURE REVIEW

This is a qualitative research, in which a systematic review of the literature was carried out, with the aim of evaluating and synthesizing studies on intergenerational relationships within the family, including research carried out in the national territory and published in the Portuguese language, between the years 2009 and 2021. The databases used were: Google Scholar, Ibtct Oasis BR, Lilacs and Scielo. For the search strategy, descriptors were used, previously selected in DeCs (Descriptors in Health Science) and free terms: “relationship between generations”; “intergenerational relationship”; “cohabitation” and “cohabitation”.

The inclusion criteria used were: research in which the participants lived in multigenerational homes, empirical research articles, in Portuguese and carried out in Brazil. Exclusion criteria were: literature review articles, conference

proceedings, dissertations, theses, articles in another language and research carried out in other countries.

During the search, 532 potentially relevant articles were found in the aforementioned databases, after selection, 509 of them were removed due to the exclusion criteria, leaving 23 articles. After the full reading was carried out, 17 more articles were removed, leaving 7 articles in the final database.

Characteristics of the members

In the study, on the impact of Alzheimer's Disease on intergenerational relationships, developed at the Reference Center for Health Care for the Elderly and People with Alzheimer's Disease at the University Hospital of Brasília (HUB), 24 daughters participated (with ages ranging from 35 to 64 years old) and 24 elderly parents (5 fathers and 19 mothers) [10]. The homes were formed by elderly people with a possible diagnosis of Alzheimer's, who had their daughters as caregivers, and who cohabited with their grandchildren and also, in some cases, great-grandchildren.

Of the 24 daughters, all were mothers and had an average of two children, four of whom were already grandmothers and two were great-grandparents. Most of them were middle-aged, the first-born, had a college degree, were of Catholic religion, retired or working in the household, and had a medium socioeconomic level. It is important to note that these homes are part of the “family with elderly” category because the elderly live with their daughters who headed the household.

On the other hand, in the study of Paixão, et al. it is observed that the profile of the homes was the “family of elderly people” [11]. In this research, the authors discuss the experiences of 6 adolescents (15 to 18 years old) raised by grandparents, 4 of them male and 2 female. All were single and did not have a paid job, with study as their main occupation. The formation of these multigenerational homes consisted of elderly grandparents, second generation (parents and/or uncles) and teenagers.

Still following the “family of elderly”, the research of Meira, et al., investigated 154 elderly people living in a state of co-residence with other generations (children and grandchildren) in a municipality in the interior of Bahia, 79.2% women, 69.5% illiterate and 41% widows [12].

In the research “The rehabilitation of children and grandchildren from the perspective of elderly heads of family”, Cunha interviewed 9 elderly women who lived in multigenerational homes, aged between 60 and 70 years [5]. The profile of these elderly women were: 4 married, 3 widows and 2 divorced/separated. Regarding the level of education, only 1 had completed higher education, 3 had completed high school, 3 had incomplete primary education, 1 was illiterate and 1 had completed secondary education. As for the other members of the household, the second generation was mostly the younger daughters of the elderly. The third generation ranged from infant grandchildren to young adult grandchildren, most of them female.

The study of Silva, et al. portrays the dynamics of intergenerational family relationships from the perspective of

elderly people living in the municipality of Jequié (Bahia) [9]. It was carried out with 32 elderly people, 13 men and 19 women. The composition of households were elderly grandparents, adult parents and grandchildren. In this research, the marital status and level of education of the participants and family members were not described. It should be noted that, as in the study of Silva, et al., it was observed that not all of the participants' homes were multigenerational, with only two-generation homes [13].

Finally, the search for Brito, et al. and Dias, et al. presented the profile of 12 elderly people living in Bahia and Pernambuco, 8 women and 4 men. Regarding the level of education, 7 were illiterate or attended elementary school and 5 had secondary or higher education [14,15]. The professions were mostly rural workers/farmers, housewives and teachers. Not all households in this survey were characterized as multigenerational. Thus, for this review, within these studies, only information referring to households that had three or more generations were selected.

Motivo da formação dos lares

In the context of the formation of multigenerational homes, family aspects were identified as motivating factors for co-residence, issues such as the divorce of biological parents, postponement of the children's departure for economic reasons, early pregnancy and the guarantee of better schooling for children were some points that favored co-existence [4,11,13].

The need for care for the elderly was also a factor pointed out for the constitution of these homes, as mentioned in research by Silva, et al. [10,13]. In this second study, the possible diagnosis of Alzheimer's Disease was what changed the family structure of some homes, contributing to co-residence, so that family members could provide better care to the elderly.

It was also possible to see that the feeling of loneliness was also a motivator for this training, as some elderly women reported that they would not like to be alone or leave their daughter living alone, seeking a solution for this in the co-residence [5]. Finally, the study of Silva, et al. and Meira, et al. they did not point out in their research the reason for the formation of homes [9,12].

Factors that generate conflicts

In surveys of Falcão et al. corroborated the generation gap as a generator of conflict, especially between grandparents and grandchildren [9,10,11,13]. The first attested that Alzheimer's Disease interfered directly in family relationships, causing grandparents' conflicts with at least one of their children, as well as the emotional impact of the disease, generating involvement with drugs and distancing from family life by the grandchildren. The second highlighted fights in relation to studies, conflicts caused by the grandson not complying with the grandmothers' requests and abusive use of alcohol by a grandfather. The third highlighted the dissatisfaction that some elderly people had in relation to the behavior and behavior of their children and grandchildren, as well as the difficulty of the grandchildren to accept the divergence of values between generations, and finally, the fourth points to a divergence of goals to be achieved and values to be respected.

Already in the study of the conflict generator factor was the overload, resulting from the rehabilitation, which generated an excessive demand for responsibilities for the elderly, for caring for their grandchildren and for more day-to-day responsibilities [5]. Finally, in the study of Meira et al., the conflicting factors pointed out by the elderly were health problems and not receiving visits from neighbors and relatives [12].

Factors that facilitate cooperation

Falcão, et al. point out that the affective proximity that grandchildren had with grandparents with Alzheimer's disease was a factor that contributed to them exercising solidarity actions and helping in the care of grandparents [10]. They were described as facilitating factors of coexistence, according to Paixão et al. the emotional support that grandparents provide, through dialogue, as well as advice and tips about the lives they share [11]. Other factors found were: flexibility, respect, dialogue and deep emotional bond between members [9].

Help with financial needs, physical care, companionship and emotional support were highlighted as benefits of this type of family configuration in the study of Meira et al. and Brito et al. [12,14]. It was also recorded that 80.5% of the elderly in the survey reported being satisfied with life and that the multigenerational coexistence provided a leading role in the construction of the family, as well as welcoming the elderly [12,14].

With the harmonious intergenerational coexistence, it was perceived, according to Silva, et al. that older people were more positive about themselves and the world, better withstanding illnesses, stresses and other difficulties [13]. It was also pointed out that the understanding between generations is a strong factor that facilitates coexistence and, they emphasize that the family presents itself as an environment of care, as well as a source of support for the elderly, and may become a space to ensure the well-being, survival and full protection of members.

With the presence of the family, the feeling of loneliness presented in the research it is overlaid by the feeling of acceptance that ends up being mutual, by the reception of family members in the homes of these elderly women and by the company and support from these family members [5,15,16]. Financial help is also reported as something contributing to the good functioning of these homes, as the attitude is well liked by the elderly.

CONCLUSION

Given the above in the selected surveys, it is clear that there were two strong influences for the formation of multigenerational homes: divorce/separation and economic factors, where the current economic situation in the country can force individuals to seek housing in a single home in order to lessen the damage. It was also possible to observe that this coexistence can lead to conflicts that arise for issues such as different values, beliefs and lifestyles.

The fact that they are in a home made up of different generations allows for an exchange of experiences to take place,

favoring mutual learning and exercising respect for each one's choices, seeking a harmonious coexistence. In addition, it also favors the exchange of affections, which is necessary to develop a healthy and welcoming environment for all members present in multigenerational homes.

There was a scarcity of literature on the subject in Brazil, as only six articles were found according to the authors' criteria. There was also a greater concentration of surveys in the northeast region (85.7%), specifically in the state of Bahia. Regarding the area of study of the main authors, the articles were conducted by nursing professionals (42%), Psychology professionals (42%) and by a Physiotherapy professional (16%).

Finally, the need for studies that address the dynamics of this growing family configuration is highlighted, as these are important aspects to be considered in the performance of health professionals, with regard to care for the elderly and your family members.

REFERENCES

1. Santos SSC. Concepções teórico-filosóficas sobre envelhecimento, velhice, idoso e enfermagem gerontogeriatrica. *Rev Bras.* 2010;63(6): 1035-1039.
2. Instituto Brasileiro de Geografia e Estatística (IBGE). 2018.
3. Organização das Nações Unidas (ONU). 1982.
4. Camarano AA, El Ghaouri SK. Família com idosos: ninhos vazios? IPEA. 2003;950: 1-27.
5. Cunha UC, Dias CMSB. A recoabitação dos filhos e netos na perspectiva de idosas chefes de família. *Contextos Clínicos.* 2019;12(2).
6. Peixoto CH, Luz GM. De uma morada a outra: processo de recoabitação entre as gerações. *Cadernos Pagu.* 2007;29: 171-191.
7. Aquino RR, Baptista MN, Souza MS. Relação entre percepções de suporte familiar e vulnerabilidade ao estresse no trabalho. *Revista Psicologia.* 2011;3(2): 30-38.
8. Leme VBR, Falcão AO, Morais GA, Braz AC, Coimbra S, Fernandes LM. Solidariedade intergeracional familiar nas pesquisas brasileiras: revisão integrativa da literatura. *Revista da SPAGESP.* 2016;17(2): 37-52.
9. Silva DM, Vilela ABA, Nery AA, Duarte ACS, Alves MR, Meira SS. Dinâmica das relações familiares intergeracionais na ótica de idosos residentes no Município de Jequié (Bahia), Brasil. *Ciênc Saúde Coletiva.* 2015;20(7): 2183-2191.
10. Falcão DVS, Bucher-Maluschke JSNF. O impacto da doença de Alzheimer nas relações intergeracionais. *Psicol Clin.* 2009;21(1): 137-152.
11. Paixão FJD, Morais NA. A experiência de adolescentes criado por avós. *Clínica Cultura.* 2016;5(1): 65-86.
12. Meira SS, Vilela ABA, Casotti CA, Nascimento JC, Andrade CB. Idosos em estado de coresidência em um município no interior da Bahia. São Paulo. 2015;39(2): 201-209.
13. Silva DM, Vilela ABA, Oliveira DC, Alves MR. A estrutura da representação social de família para idosos residentes em lares intergeracionais. *Revista Enfermagem UERJ.* 2015b;23(1): 21-26.
14. Brito ES, Ferreira MM, Rabinovich EP, Dias CMSB. Panorama das características de pessoas centenárias na Bahia e Pernambuco. *Revista Kairós Gerontol.* 2020;23(3): 111-132.
15. Dias CMS, Ataíde ER, Magalhães KA, Albuquerque NCC. As relações entre as gerações nas famílias chefiadas por idosos. 2011.
16. Galvão TF, Pereira MG. Revisões sistemáticas da literatura: passos para a sua elaboração. *Epidemiol Serv Saúde.* (2014);23(1): 183-184.