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WOMEN AS CRUCIAL "PIVOTS" OF THE INFORMAL SUPPORT NETWORKS: EVIDENCE FROM ITALIAN MULTIPURPOSE SURVEYS

Paper submitted by Italy¹

Summary

In the last decades, the social and demographic transformations are bringing about profound changes in the informal support network whose help capacity and resiliency are related to the size and composition of extended family and close-friend structure.

In the 1980s, the Italian National Statistics Institute began to collect data on the dimensions and characteristics of the help informal network, and during last years Multipurpose surveys on households are adding some precious information to put the support network mosaic together.

The analysis of flows of help shows that women are crucial "pivots" of the informal support network and confirms a continuing division of roles by gender, leaving women with most of the workload as care-givers. The solidarity networks are still large, but they are starting to show signs of crisis. The needs of the elderly population have to "compete" with the necessity for care expressed by working mothers with small children. If compensation mechanisms are not implemented, the increasing future care demands and the increasing desire of women to integrate more widely in the labor market can raise a progressive degrading of quality of life of lonely elderly people, of non integrated disabled and of women, more and more "overloaded".

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1. Introduction

In Italy, informal support networks have always played an important role for type and quantity of assistance provided, but they are starting to show signs of profound changes in their structure. In 1998, the number of care givers rose from 20.8% to 22.5% of the population of over 13 years of age (Table 1), compared to 1983, but in spite of their increase, the number of households benefiting from their support decreased. In fact, during the same time period, the households receiving aid dropped from 23.3% to 14.8%. Therefore, a more numerous group of care givers than in the past reaches a smaller number of people and households, tending to share the burden with others².

It is the crisis of the model, which had in women and households its point of reference. This model guaranteed for a long time assistance to the person with the greatest needs, whether elderly or young, in the various phases of their lives. Factors of this restructuring are the demographic changes, the ageing of the population, and the increase in women's employment. An important role is also played by the changes in culture, lifestyles, and health, especially in the elderly.

2. Grandmothers and mothers: links in an overloaded chain

The social and demographic transformations of the last decades have profoundly changed the kinship networks within which individuals are during the crucial times of their lives; persons giving care and persons supporting, as well. Men and women relate to household situations with new configurations that influence the solidarity networks, changing their characteristics, capacity for support, and strength. New needs emerge and others find different solutions from those of the past. The extent of the changes can be illustrated by considering, for example, the life courses and kinship networks of two generations of women: those born in 1940, who are now 60 years old, and those born in 1960, who are 40 years old.

At around 40 years, the age when the women of both generations normally have at least one 14-year-old child, the differences emerge quite clearly: the woman born in 1940 could potentially divide the burden of the care given to the older members and children of her household with nine other persons, including her husband, sisters/brothers, and sisters- and brothers-in-law; the woman born in 1960 can share the care giving only with five other adults.³

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² Among the households with at least three adult members, the percentage of those with two or more care givers has risen from 18.7% to 20.6%.

The family history of the women born in 1940 and those born in 1960 has been reconstructed on the basis of the demographic behaviours observed, on the average, for the two generations of women and for the generations of the other members of the kinship network. The purpose of this reconstruction is merely to serve as an example, since it was carried out considering equal other conditions which, instead, have changed with time (education and culture, state of health, job market).

The information on the average age at the time of the birth of the first child makes it possible to identify the generation to which the mothers of the women considered belong: 1913 for those born in 1940 and 1934 for those born in 1960. The average age at the time of the first marriage per generation makes it possible to identify the date of the parents' marriage. The average distance between the ages of the couple in the year of the first marriage makes it possible to identify the generation to which the father belongs; 1909 for the women of 1940 and 1931 for the women of 1960. The information on fertility by generation of the women makes it possible to estimate the average number of brothers and/or sisters (2.5 for the woman of 1940 and 1.8 for the woman of 1960). It has been hypothesised that the demographic behaviour of the brothers and sisters is similar to that of the women considered, given the "closeness" of the generations to which they belong. As for the estimate of the average life expectancies,

To this must be added the fact that, while the woman born in 1940 will have, for around 12 years of her life, one or more elderly persons in her kinship network, for the woman born in 1960 the period will be lengthened to 18 years. The simultaneous presence of several elderly people will involve only two years of the life of the first of the two women and 12 years for the second one. These changes have upsetting consequences on the average age of the kinship network: considering the close relatives (parents, husband, sisters/brothers, children, sons-/daughters-in-law, grandchildren), it rises from 26.1 years in the first case to 44.6 years in the second.

Important differences also emerge with regard to the parents of the two women considered, i.e. grandparents. At the age of 40 the kinship network of the woman born in 1940 has only one grandmother for ten grandchildren, while for the woman coming from the 1960 generation the proportion is three grandparents to six grandchildren. In the second case, the burdens for care of the grandchildren are reduced and may be shared with other grandparents, but, at the same time new and different burdens emerge within the household. The women born in 1913 and 1934 (mothers of the two women considered) become grandmothers around the age of 53, but the composition of their kinship network at this age is very different. The grandmother born in 1913, like most women of that generation, lives alone with her husband; her three children have all left home, and in the coming eight years they will give her a total of at least eight grandchildren. She no longer has elderly parents to care for, while the care giving for the numerous grandchildren is, at least in part, lightened by the fact that two daughters (or daughters-in-law) out of three are housewives. On the other hand, the grandmother born in 1934 still has, on the average, at least one elderly parent to care for. Her daughter or daughter-in-law is more frequently employed in an outside job (in fact, an average of one out of two is employed) and needs greater help in caring for and looking after her children. Therefore, a greater care burden tends to be concentrated on the grandmother born in 1934: even if she has fewer children, and especially grandchildren, to help, she must assist very elderly parents and, in some cases, the adult offsprings who prolong stays in their household. Furthermore, daughters (and daughters-inlaw) are more often employed and have greater needs for help.

In other words, the demographic changes and those connected with the job market tend to overload both the women with young children and the grandmothers. Mothers and daughters support each other with greater difficulty than during the preceding generations.

3. Size, characteristics and types of help by gender

In 1998, an average of 330 million hours was devoted to help provided from outside the household every month, totalling 2,840,000 hours during the year. The help actually given has consisted of forms of care (looking after elderly persons and children, home care, mediation with welfare institutions, taking care of bureaucratic matters, and simple company), health care, economic aid, and help in work and studies.

It is chiefly women who provide the care (a quarter of women, compared to a fifth of men), regardless of the social class and territorial context to which they belong. Female work

the following method was used. The starting point was the supposition that the parents of the women were both living during the year of their birth. Thus it was possible to estimate the average remaining life by using the mortality tables closest to the year of birth of the woman for those living at the specific ages reached by the parents during that year. Lastly, in order to make the comparison at the age of 40 for the women born in 1940 and 1960, it was assumed that both were living at that age and, using a procedure similar to that described above, their average remaining life was estimated. (Istat, 2000)

counts for two thirds of the hours of help provided. Only starting from the age of 75 does the male involvement become slightly higher than that of the women, because women are, on the average, older and in poorer health in the last age bracket

In addition, women devote greater portions of their time to assistance activities: on the average, they devote 12 hours per month to assistance, and men devote 8. In 1983, 54.3% of the individuals giving help to persons not living with them were less than 45 years old; in 1998 the percentage dropped to 47.8%. The average age of the care givers rose from 43.2 to 46 years (from 42.9 to 45.5 for men; from 43,5 to 46,3 for women).

For both sexes, the care givers are concentrated between the ages of 55 and 64 (32.4% of women and 28.4% of men). This same age bracket has the highest increase in the percentage of care givers compared to 1983.

For the individuals of this age there is a decrease in the work load concerning children in the household, but also the emergence of the necessity to care for parents, elderly relatives and adult offsprings, who have remained at home or have formed their own households. Elderly care givers provide 23.1% of the hours of assistance given (female work counts for 65% of the hours of aid provided by elderly). Women 65 years of age and older work, on the average, 20 hours a month for the needs of relatives, friends and other persons; men work, on the average, 16 hours.

The assistance given to persons not living in the same household consists of care giving, health care, help in doing work outside the household, help in studies, and economic aid.

The care giving carried out outside of the household does not mean simply taking care of the house and caring for the persons, also consists of mediation with institutions and welfare agencies (nurseries, schools, hospitals, etc.). Furthermore, it changes according to the phases of the family life cycle, which redesign its frequency and contents.

Children are less numerous, but the needs have changed. They are often only children and need to socialise outside the household. Courses and lessons of various kinds, sports, and the homes of friends replace the apartment building courtyard, and this determines the need for someone to follow them throughout the day. But, in the meantime, the time available for the mothers has been reduced, because the number of working women has increased.

The lengthening of the average life span translates into a higher risk of disability in the elderly and in particularly elderly women, who live longer. The care giving in this case translates into a continuous and often less gratifying job; it can even be very hard and comprises many different activities, from help in housework, to taking care of bureaucratic matters, to accompanying people, or to simple company.

The hours spent in care giving count for 85.8% of the total hours of help and have involved 19.8% of the population over 14 years of age, with higher tendencies in women and persons aged from 55 to 64. For 27.7% of the care givers, their work consists of keeping company, accompanying, or offering hospitality to other individuals; 22.2% do housework, take care of bureaucratic matters, and provide assistance for adults; lastly, 19.3% care for children.

Of the 268 million monthly hours spent by the care givers in their work, equal percentages, of slightly less than a third of the total, are devoted to assistance for adults or the elderly and child care (Figure 1). In the first case, most of women and men between 45 and 64

years are involved, with a commitment of 30 and 24 hours a month respectively, in the second case, child care is widespread especially among persons aged 65 to 74 (38 and 28 hours respectively).

18.8% of the time spent in care giving is devoted to keeping company, giving hospitality, and accompanying people, and the remaining 14.3% is devoted to housework. A residual percentage (5.3%) is used in helping take care of bureaucratic matters.

Men and women are involved in different ways: with the exception of the assistance provided in handling bureaucratic matters, which involves men more than women, the time devoted by women to the various activities is always greater.

The receivers of the care giving differ in the kind of care giver (Figure 2). Men very often help parents, in-laws and friends; while women, in addition to these persons, devote themselves to their children's households, to grandparents or other elderly relatives, and to neighbours⁴.

The care givers also provide health care, help with housework, help with studies, and economic aid. The commitment devoted is equal to 18.8% of the total of the hours provided and, except for those dedicated to work outside the household, which involve men more than women. The commitment of women is greater. Health care (which among the care givers involves 11.6% of men and 17.2% of women) is frequently addressed to elderly persons belonging to the household of origin, friends and neighbours: on the average women provide 14 hours per month, men only 10 hours. In the case of help in work outside the household (which takes up 5.5% of the total hours), men very often help friends, parents and in-laws; while women, in addition to working for their household of origin, also help their children and their children's households. A percentage of 2.8% of the total hours spent in forms of aid concerns help with studies, provided mainly to friends. Women care givers provide 61.9% of the hours of help with studies. Lastly, particular attention should be given to the economic aid provided by 3.4% of the population of over 14 years of age, and with a relatively greater frequency by persons between 35 and 59 years of age, employed men and, in general, individuals which are on the average of a higher class. Of the total care givers, 17.6% of the men and 13% of the women provide economic aid, with tendencies increasing with the increase in age.

4. Territorial differences and social status

The North-east is the Italian geographic area where traditionally the attitude of population to exchange mutual help trough informal network is the highest. 31.8% of the women and 24.7% of the men gave help at least once to people living outside their household; again, in this area the highest mean number of hours (12 for women and 8 for men) spent in this activity is observed, together with the highest percentage of helped households (16,2%). In the regions belonging to the North-east and North-west areas about one-fourth of the residents are care givers and they give 55,1% of the total amount of help given in one month (measured in hours). But, the North-west area shows the lowest percentage of households receiving help (13,2%).

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⁴Only 5.6% of the care givers (5.1% of women and 6.1% of men) provided help within the framework of a volunteer organisation. The corresponding number of hours of assistance given amounts to 5.2% of the total hours worked by the care givers (and to 4.6% of those worked during a year).

As compared to 1983, in the areas of the North, especially the North-east, can be observed an increase in the quota of population giving help, while in the regions of the Centre-south the increase doesn't even reach one point of percentage. Nevertheless, the disadvantage of the Centre-south in terms of care givers (28.9% of the women and 20.8% of the men) is only slightly reflected by the percentage of helped households, that is more ore less equal to the national average.

As compared to the North, the Centre-South areas show a more traditional structure of helped households. Households with at least one elderly person are helped more frequently (18%) than the average (13,6%), while households where there is a working woman with at least one child less than 14 years old receive generally less help (25,5% against 36,5%).

The solidarity network is less developed in the centres of metropolitan areas: in 1998 only 19% of the women and 16.3% of the men declared to have given help al least once, as compared to the values of 28.1% and 23.9% observed for the municipalities that are in the suburbs of metropolitan areas.

Women and men of higher social class are more active in the informal support network. Among graduated people there are more care givers (33.5% of the women and 30.6% of the men) and this happens also for managers, professionals and entrepreneurs. As far as education level and professional position decrease, also the percentage of population giving help decrease. One-fourth of population with secondary education level gives help (26.5% of the women and 23% of the men), while for primary educated people, self employed and working-class people, this rate is one-fifth.

To counterbalance the scarcity of knots that constitute the informal support network in lower classes, a stronger effort in terms of hours spent giving help is shown by the data. During a time slot of four weeks, primary educated women and men gave help for respectively 20 and 12 hours on average, 10 and 8 hours where spent by graduated and 8 and 6 where spent by managers, professionals and entrepreneurs.

Therefore, the stronger involvement of higher classes into informal help network doesn't comes out to become a particular advantage for households belonging to such classes, that probably need less help, too. As it happened in 1983, the propensity to receive help is higher among poorer and needy households that generally belong to lower social classes. In particular, the head of those needy households is unemployed or is a housewife or is in "other condition". As compared to the situation observed 15 years before, the percentage of those households changes from 11.1% to 13.8%, and among helped households from 14.5% to 21%.

5. Crucial subjects in the support network: elderly people and working mother with small children

The constant decrease in beneficiaries of the assistance starting in 1983 was joined by a process of selection of the households of the receivers, mainly to the disadvantage of the elderly (Table 2). Between 1983 and 1998, the percentage of households helped among those with at least one elderly person (and without children) dropped by almost half (from 30.7% to 16%), while that of households with children of up to 13 years of age (and without elderly persons) remained substantially constant; in the meantime the amount of the assistance provided to households with children and working mothers grew.

Households may be part of the informal support network because they receive, because they give, or because they give and receive aid. In households of elderly people helped, in 1998 compared to 1983, ca be observed more markedly than with other kinds of households, a reduction in the so-called "symmetrical" households, i.e. those who both receive and give aid. In fact, of the total number of households receiving aid, those who also give it fall from 47.1% to 42.2%, while among the households with elderly members they drop from one third to one fourth. If we consider the households with at least one elderly member of 80 years of age and older, the phenomenon is even more accentuated: symmetrical households fall from 23.5% to 13.6%. In other words, even if there is a considerable decrease in the percentage of households helped, the households of elderly persons who receive only, and who therefore can be more disadvantaged, tend to be privileged as receivers of aid. If, alongside the informal aid, we consider the kinds of services provided by individuals outside the circle of relatives and friends (assistants for the elderly, home help, babysitters, etc.), the percentage of households helped among those with at least one elderly member (25.2%) increases in 1998 by almost ten percentage points over 1983; and among those with at least one elderly member of 80 years of age and older, it increases by 13.5 points, rising from 26.5% to 40% (Table 3). In short, the elderly households helped by the informal network decrease, and among them, those worse off are privileged as receivers of aid; moreover, with regard to the more elderly households, the informal network is being replaced with a recourse to private and, in part, public care givers.

The case of households with children is different. In 1998 a percentage of households with small children almost identical to that of 1983 can count on informal support and, among these, the proportion of those who reciprocate the aid received (around 50%) does not change. Both tendency of households with children to be receivers of help and the active role they play within the network do not seem to have undergone major changes.

For households with children, the weight of the services coming from outside of the informal network is less important. If we consider all the kinds of aid (informal, public and private), the percentage of households with children aided rises by 7.6 percentage points and totals 31.2%. Of the total households who receive informal aid and services, both paid and free of charge, the exclusive recourse to the kinship and friendship network concerns the majority of the households with children⁵ (61.4%), while it does not reach 50% for those with elderly members (47.2%). The informal network continues to hold its ground with households with children, especially for those with working mothers, and is supported by the elderly population in good health, which is more active than in the past⁶. In fact, among the households with at least one elderly member, the percentage of those who provide aid rises from 19.1% to 25.4%, and of the total hours spent for child care, 22.8% refers to the helping of women and 14.1% of men of 65 years of age and older. Even if the drop in the fertility rate tends to limit the number of couples with small children and working mother, the needs of employed women with children of up to 13 years of age have increased and attract a major share of the aid. In fact, this category

⁵ Of the total informal helps received by households with children 77.4% concerns care for children, 7.7% consists of economic aid, and 6.9% is devoted to housework.

⁶ In just six years, from 1993 to 1999, the percentage of individuals of at least 65 years of age suffering from more than one chronic illness decreased by five percentage points (from 57.6% to 52.7%), and the improvement among individuals nearing old age was even greater. In fact, between 55 and 64 years of age, that percentage drops from 37.4% to 31%. Disability grows only among those over 79 years and, on the other hand, with the onset of serious pathologies being pushed further ahead, it is increasingly probable that the need arises when the network has weakened.

of household, which in 1998 comprises a number of households more or less equal to that of 1983 (2,200,000), represents 10.7% of the total households, but 22.4% of the households helped, compared to 16.4% of fifteen years earlier. Couples with children and housewife mother, on the contrary, have become less numerous, both among the total households (from 19.1% to 10.3%) and among those receiving aid (from 16.6% to 10.7%).

Considering the classification of the households according to the intensity of the aid received from the informal network, it emerges that, between 1983 and 1998, couples with children and working mother moved up from fifth to first place. On the other hand, the households with at least one elderly member of 80 years of age or older slipped from second place to fourth. (Table 4).

37.8% of the working mothers with children of up to 5 years of age are helped by the informal network, compared to 20.7% of the housewives with children of the same age. In 1983 the two percentages were, respectively, 37.1% and 25.2%.

As children grow, the need for support tends to decrease, but the distances just reported between working mothers and housewives remain practically unchanged. Working mothers with a child of up to 13 years of age receive help in 31.2% of the cases, while for housewives in the same condition the percentage is 15.4%. When all the kinds of aid are considered (informal, private and public), the percentage of working mothers who receive support increases by almost 11 points, reaching 41.8%, while the percentage for housewife mothers just barely stands at values close to those of fifteen years earlier.

In short, the newly formed households represent the emerging subject in the support network as far as needs expressed and met are concerned. They can still make use of a support network which is relatively young, although older than in the past and certainly physically more efficient.

6. New structure and strategies of the network: problems and policies

The solidarity networks are still large, but they are starting to show signs of crisis: they involve more people, but reach fewer households. In order to deal with the needs of those who need help, different strategies are used:

- the sharing of the work loads among a number of individuals and households which is on the whole higher, often recruited from among friends and neighbours also;
- the selection of the receivers in favour of those who have the greatest need for help;
- the considerable commitment of the care givers in favour of households with working mother and small children;
- process replacing at least a part of the aid provided by the informal network with a recourse to paid or free services (provided by public institutions and bodies, home help, and assistants for the elderly).

The decrease in the number of households with assisted elderly persons occurred for various reasons. The health of the elderly population has improved and, within the framework of the potential support network itself, their needs often have to "compete" with the necessity for care expressed by households with small children, in particular by those with working mothers.

Besides, the households in the last phase of the life cycle (particularly elderly women, who live longer) are also those who have a support network with a higher age and, therefore, with a lower assistance capacity. A lower number of households with elderly persons assisted corresponds to a higher presence of elderly persons among the care givers; consequently the average age of those actively involved in the solidarity networks increases.

The restructuring of the support network is also connected with the changes in the needs of the individuals and households, and in the routes taken to meet them. The behaviours of the care givers, which help certain kinds of receivers, do not necessarily translate into the non-satisfaction of the needs of vulnerable individuals, but may also reflect a changed structure of the needs⁷. At the present time it is not possible to determine how much of the restructuring of the informal support networks is due to a change in the structure of the needs, and how much is due to the network's difficulty in tackling the problems. Certainly the decrease in aid to households with elderly persons over 80 years of age (65.1% are women) and with a high disability rate, just to cite an example, can create a great number of problems.

If compensation mechanisms are not implemented, the increasing future care demands and the increasing desire of women to integrate more widely in the labor market can raise a progressive degrading of quality of life of lonely elderly people, of non integrated disabled and of women, more and more "overloaded". Specific social policies are required; they should take into account demographic and social dynamics in progress, changes in relations between women and men, and should aim at reducing inequalities due to gender, generation and geographical area. Furthermore, these policies should aim at a more marked support of service and care work within households.

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⁷ For example, the need for company may prove to be less important for individuals who are approaching old age with a cultural background and health that permit them to keep up relations outside of their homes.

Table 1 - Persons of 14 years of age and older who have given help to persons not living in the same household in the four weeks preceding the interview, by sex and socioeconomic characteristics. Years 1983 and 1998 (average values and per 100 persons with the same characteristics)

	MAL	ES	FEMAL	LES	TOTA	L
Socio economic characteristics	1983	1998	1983	1998	1983	1998
Average number of receivers	-	1.3	-	1.3	-	1.3
Average number of helps provided	1.3	1.5	1.3	1.8	1.3	1.7
AVERAGE AGE (years)	42.9	45.5	43.5	46.3	43.2	46.0
AGE GROUPS						
14-24 years	10.6	14.0	16.4	20.3	13.5	17.1
25-34 years	21.2	17.9	24.2	22.4	22.7	20.2
35-44 years	24.2	23.9	27.2	27.3	25.8	25.6
45-54 years	21.2	24.8	27.1	30.9	24.2	27.9
55-59 years	21.0	25.9	28.5	32.3	24.7	29.2
60-64 years	20.4	25.0	28.4	32.4	24.7	28.8
65-74 years	18.8	18.9	20.9	23.1	20.0	21.2
75 years and older	9.4	13.2	9.3	10.9	9.3	11.7
EDUCATIONAL BACKGROUND						
No formal qualification/primary school	17.7	16.6	23.2	22.0	20.8	19.9
Junior high/middle school diploma	17.6	19.2	20.9	24.4	19.2	21.7
High school diploma	20.2	23.0	24.4	26.5	22.2	24.7
Universitary degree	27.3	30.6	26.3	33.5	26.9	31.9
CIVIL STATUS						
Unmarried	12.0	15.1	16.4	20.8	14.0	17.7
Married	22.2	23.5	26.3	27.0	24.3	25.2
Separated	21.6	20.5	19.6	29.1	20.4	25.3
Divorced	20.5	23.9	24.5	29.1	23.3	27.1
Widowed	10.0	14.7	19.4	20.2	17.8	19.3
PROFESSIONAL STATUS						
Employed	21.8	21.6	24.7	26.6	22.7	23.4
Executive, entrepreneur, freelance, professional	27.4	29.0	32.8	32.9	28.1	29.8
White-collar worker	24.6	24.7	24.5	29.4	24.5	27.0
Blue-collar worker	19.6	17.6	23.5	22.0	20.7	19.0
Self-employed worker	21.7	19.6	26.5	23.8	23.2	20.9
Job-seeker	12.8	14.7	20.6	23.3	16.6	18.5
Housewife	-	-	24.6	24.4	24.6	24.4
Student	10.4	16.3	14.1	21.4	12.1	18.9
Retired	16.6	21.6	22.1	26.3	19.0	23.6
GEOGRAPHICAL DISTRIBUTION						
North-west	20.1	21.5	25.4	27.0	22.9	24.3
North-east	20.3	24.7	25.2	31.8	22.9	28.4
Centre	17.7	18.9	21.3	21.1	19.5	20.1
South	16.6	18.0	19.9	20.2	18.3	19.2
Islands	17.8	17.6	20.7	21.6	19.3	19.7
Total	18.6	20.3	22.8	24.5	20.8	22.5

Table 2 - Households who have given help to persons or received help from persons not living in the same household in the four weeks preceding the interview, by type of household. Years 1983 and 1998 (percentage values)

	PER 100 H	HOUSEHOLDS WIT	TH SAME CHARAT	TERISTICS	PERCENTAGE COMPOSITION						
TYPE OF HOUSEHOLD	Households	giving help	Households receiving help		Households giving help		Households receiving help		То	Total	
	1983	1998	1983	1998	1983	1998	1983	1998	1983	1998	
Household with at least one elderly person and no children	26,1	25,0	30,7	16,0	19,1	25,1	32,3	36,5	24,5	33,9	
One member	17,7	16,9	48,6	24,2	3,8	6,3	14,8	20,6	7,1	12,6	
Two members	26,4	27,3	28,9	11,6	8,0	11,1	12,6	10,8	10,2	13,8	
Three or more members	34,0	34,3	15,7	10,2	7,3	7,6	4,8	5,2	7,2	7,5	
Household with at least one child and no elderly persons	34,7	36,5	25,1	23,7	36,7	26,0	38,3	38,6	35,6	24,1	
Couple with housewife mother	34,5	33,9	20,2	15,4	19,7	10,4	16,6	10,7	19,1	10,3	
Couple with working mother	36,1	38,5	30,9	31,2	13,3	12,2	16,4	22,4	12,4	10,7	
Couple with mother in other condition	38,2	41,2	27,0	24,9	2,9	2,0	3,0	2,7	2,6	1,6	
Lone-parent	19,6	34,2	38,9	30,8	0,8	1,2	2,3	2,5	1,4	1,2	
Other	16,8	39,2	6,5	7,2	0,1	0,3	0,0	0,1	0,1	0,3	
Household with elderly persons and children	34,9	36,8	14,8	11,7	3,3	1,3	2,0	0,9	3,2	1,2	
Household with no elderly persons and no children	37,3	39,2	17,4	8,7	40,9	47,6	27,4	24,0	36,8	40,9	
One-person household	32,4	30,9	33,0	14,1	5,7	8,3	8,4	8,6	5,9	9,0	
Couple with children	38,2	43,9	11,6	5,2	19,5	23,8	8,6	6,4	17,2	18,3	
Couple without children	40,4	39,3	17,8	8,9	12,0	11,1	7,6	5,7	10,0	9,5	
Lone-parent	31,9	36,1	18,2	11,2	3,0	3,8	2,5	2,6	3,1	3,5	
Other	36,5	39,2	17,3	16,7	0,7	0,7	0,5	0,7	0,6	0,6	
Total	33,5	33,7	23,3	14,8	100,0	100,0	100,0	100,0	100,0	100,0	

Table 3 - Households who have received help by origin of the help and type of household. Year 1998 (average values per 100 households with the same charateristics)

	ORIGIN OF HELP										
TYPE OF HOUSEHOLD	Only informal help	Only private help		Informal and private help	Informal, municipal and public help	Pirvate, municipal and public help		No help	Total		
Households with at least one member 65 years of age or older	11,9	7,0	1,9	2,2	1,3	0,4	0,5	74,8	100,0		
Households with at least one member 75 years of age or older	14,7	9,0	2,7	3,4	2,0	0,6	0,8	66,7	100,0		
Households with at least one member 80 years of age or older	18,2	9,5	3,0	5,2	2,1	0,9	1,0	60,0	100,0		
Households with at least one individual with autonomy problems	22,4	7,8	3,7	4,9	4,1	1,1	2,2	53,8	100,0		
Households with at least a child under 14 years of age	19,1	6,5	1,0	3,3	1,0	0,2	0,1	68,9	100,0		
Households with at least a child under 14 years of age and a housewife mother	13,6	2,4	1,2	0,7	1,0	0,2	0,1	80,9	100,0		
Households with at least a child under 14 years of age and a working mother	24,2	10,6	0,5	5,9	0,5	0,2	0,1	58,2	100,0		

Table 4 - Classification of households who have received help from persons not living in the same household in the four weeks preceding the interview, by type of household. Years 1983 and 1998 (per 100 households with the same characteristics)

TYPE OF HOUSEHOLD		Rank	TYPE OF HOUSEHOLD	1998	Rank
	%			%	
Lone-parent with at least one child of less than 14 years of age	38,9	1	Lone-parents with at least one child of less than 14 years of age	30.8	2
Households with at least one member 80 years of age or older	35,5	2	Households with at least one member 80 years of age or older	26.5	4
Households with at least one member 75 years of age or older	33,6	3	Households with at least one member 75 years of age or older	20.9	7
Households with head of household in another condition	33,5	4	Households with head of household in another condition	22.7	5
Couples with at least one child of less than 14 years of age and a working mother	30,9	5	Couples with at least one child of less than 14 years of age and a working mother	31.2	1
Households with housewife as head of household	30,3	6	Households with housewife as head of household	21.1	6
Households with at least one member 65 years of age or older	28,9	7	Households with at least one member 65 years of age or older	15.9	8
Households with unemployed head of household	28,3	8	Households with unemployed head of household	28.0	3
Households with retired head of household	27,5	9	Households with retired head of household	11.5	10
Couples with at least one child of less than 14 years of age and a housewife mother	20,2	10	Couples with at least one child of less than 14 years of age and a housewife mother	15.4	9

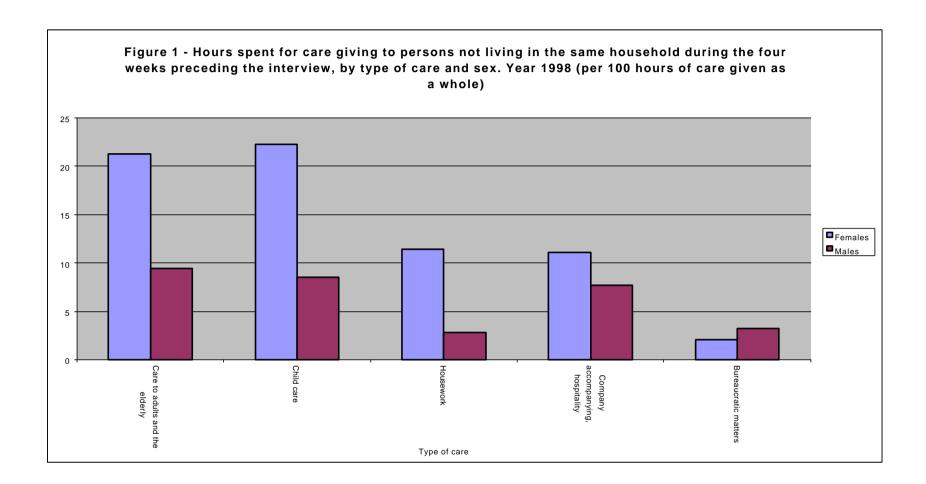


Figure 2 - Persons of 14 years of age and older who have given help to persons not living in the same household during the four weeks preceding the interview, by sex and receiver of the help. Year 1998 (per 100 persons who gave help) 30 25 20 ■ Males 15 **■**Females 10 5 Friends their households Grandparents or Other young Neighbours Other persons Parents/in-law Brothers/sister relatives Children and other elderly relatives **Receivers**