

Intergenerational Care and Depressive Symptoms in Older Adults: Insights from the Perspective of Time Allocation

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ABSTRACT

It is well-known that intergenerational care has positive impacts on mental health of older people, but limited research has discussed how varying time allocation, such as differences in caregiving involvement level or work status, affect these outcomes. This research aims to explore the varying influences for individuals under different time burdens, for an in-depth understanding of autonomy arrangements and intergenerational care for older people. This research used data from the China Health and Retirement Longitudinal Study 2011-2018, involving 16,073 older adults aged 50-85. Logistic random effects regression method was employed to examine the impacts of grandchild care and its level of engagement on the depressive symptoms of older people. People with different work statuses were discussed separately. Intergenerational care has varied impacts on individuals with different time arrangement. In general, grandchild care reduces the risk of depressive symptoms for older adults. However, increased level of caring involvement may increase the likelihood of experiencing depressive symptoms. Also, for working people, the risks of depressive symptoms were not associated with the degree of grandchild care participation. Consistent with previous studies, this research indicates that participation in grandparenting reduces the risk of depressive symptoms. However, time burden resulting from multi-role or over-involvement could diminish this benefit of grandparenting and potentially render it detrimental. These findings suggest that, in the context of declining fertility, policies aiming to promote population reproduction should consider the well-being of grandparents, particularly in terms of how they can arrange their time related to intergenerational care.

Keywords: Grandparenthood; Mental Health; Active Aging

How to Cite

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