Less is often more when it comes to health impact of children on parents later in life, study says

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Across the globe, it is generally accepted that individuals with larger families have more resources and support to draw on as they age. Less
discussed is that having many children can produce economic, social, emotional and biological burdens that impact health—even at older ages.

However, a first-of-its kind-study by researchers at the University of Rhode Island; the SGH Warsaw School of Economics; the University of Maryland, Baltimore County; and the University of Padua examines the association between number of children and several key health indicators among older adults across multiple global regions.

"Our main motivation for this study is really population aging globally. There are multiple studies that look at the connection between children and an aspect of health or life expectancy. While various aspects of health have been studied, there are few studies that look at this relationship across various nations and we are aware of none that compare multiple dimensions of health across multiple countries—so this is unique," said Nekehia Quashie, URI assistant professor of health studies and one of the paper's authors.

The study, recently published in *The Journals of Gerontology: Series B*, draws on cross-national harmonized data from the global family of the Health and Retirement Study (HRS) surveys provided by the Gateway to Global Ageing repository.

Researchers analyzed data for adults aged 50 and up across five health dimensions—specifically self-rated health; activities of daily living/limitations (eating, bathing, dressing independently); instrumental activities of daily living/limitations; depression and chronic conditions—in 24 middle- and high-income countries spanning North America, Latin America, Asia and Europe.

"What we found," said Quashie, "is that in the majority of countries we analyzed more children are associated with poorer health outcomes later
in life—especially for chronic conditions and depression."

In fact, they found that in half of the 24 countries analyzed, those with more children had a greater probability of depression, and close to half (11 of 24 countries) showed a similar pattern for chronic conditions. However, a universal global or regional pattern could not be identified.

Interestingly, when it came to self-rated health, there were six nations in which adults aged 50 and up with fewer children were more likely to report poor self-rated health: China, Estonia, France, Israel, the Netherlands, and Switzerland. This suggests that having more children may impact overall self-assessment of an individual's health in these nations. The variation in country contexts may reflect differences in the cultural value on children, having a more limited formal infrastructure by which to support older adults, or other localized conditions.

Quashie also identified other interesting findings—including that in the United States the link between fertility and older adults' health appears very weak, hence, any potential health benefits/disadvantages of higher or lower number of children are likely moderated by other factors, such as sociocultural differences. In Greece, Portugal, Spain, Italy, Czechia, and Mexico she noted those with higher numbers of children (four or more children) appeared to exhibit clear health risks for at least three health measures. In Israel, all substantial associations were related to disadvantages of a lower number of children.

According to Quashie, reliance on children for support—whether it is financial, instrumental or emotional—differs depending on country context based on the availability of social welfare supports. For instance, in those countries where there is a higher availability of formal supports, people may be more open to relying on those supports or other social networks such as friends as opposed to children.
"Children can be great and having larger numbers of children can increase your potential supply of support for when you may be in need as you age—and that might be common across the board," said Quashie. "But children do also present strains across the life course as well."

While having larger families does appear to be more connected with health risk, the findings were far from universal, and thus far, cannot be interpreted as causal, said Quashie. Further research is needed, she adds, to delve deeper into the role of individual and contextual mechanisms that can help to provide a clearer picture of the connection between family size and health later in life and the conditions that shape it.


Provided by University of Rhode Island


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