

# Family Solidarity Under Stress: Material Deprivation and Upward Intergenerational Support During COVID-19

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**Abstract.** The COVID-19 pandemic placed an unprecedented strain on intergenerational support, restricting physical contact between adult children and ageing parents precisely as older adults faced elevated health and material risks. This article examines whether the pandemic activated socioeconomic gradients in upward intergenerational support – help received by parents aged 50 and over from their adult children. Drawing on SHARE Wave 8 and the two SHARE Corona Surveys, the analysis compares pre-pandemic, acute-pandemic, and later-pandemic support patterns across five post-socialist European Union member states grouped into Baltic and Central-Eastern European clusters. Binary logistic regression models were estimated separately by regional cluster for five support outcomes. Before the pandemic, socioeconomic position was a weak and inconsistent predictor of upward support. During the pandemic, material deprivation emerged as a significant predictor of receiving help to obtain necessities in both clusters. Wave-specific models suggest that this need-based activation was strongest as a crisis-period response and attenuated by the second pandemic wave, while regional differences between the Baltic and Central-Eastern European clusters were more modest than expected. The findings support a theoretical reading of crisis as a stress test of family solidarity: rather than creating new patterns of support, the pandemic made visible latent material-need gradients in upward intergenerational solidarity. Implications for intergenerational solidarity theory and for research on family-based welfare in post-socialist Europe are discussed.

**Keywords:** intergenerational solidarity, COVID-19 pandemic, socioeconomic status, family support, SHARE, post-socialist welfare regimes

### ***1. Introduction***

The demographic ageing of European societies has placed the question of how older adults are supported – and by whom – at the centre of contemporary social policy debate. Across the European Union, the share of the population aged 65 and over increased from about 16.2% in 2003 to 21.3% in 2023, reflecting a significant ageing trend across the EU, with particularly rapid ageing observed in several Central and Eastern European post-socialist Member States, that combine low fertility, persistent out-migration of working-age cohorts, and limited fiscal capacity for formal long-term care provision (Eurostat 2024). In this context, the family – and specifically the relationship between ageing parents and their adult children – remains a structurally indispensable site of support, particularly for activities of daily living that fall below the threshold of formal long-term care eligibility but above the capacity of unaided independent living. The literature on intergenerational solidarity has documented in detail the dimensions, mechanisms, and predictors of this support in routine times (Albertini et al. 2007; Bengtson & Roberts 1991; Silverstein & Bengtson 1997). What has remained less well understood is how the structures of family support respond to acute disruption and what such disruption reveals about the underlying configurations of solidarity that ordinarily operate beneath the surface of everyday family life.

The COVID-19 pandemic created exactly such a disruption. Beginning in March 2020, European societies experienced a simultaneous and unprecedented set of public health measures – restrictions on movement, prohibitions on intergenerational household visits, and explicit policy guidance discouraging older adults from contact with younger family members – that disrupted the everyday infrastructure of family support precisely as the health risks to older parents reached their highest levels in recent memory. The asymmetry of the situation is significant: adult children seeking to support their parents faced new and substantial constraints on the modes of support they had previously taken for granted, while parents requiring support confronted both increased health risks and disrupted access to formal and informal alternatives. The pandemic, in other words, did not merely make intergenerational support harder in a general sense, it specifically tested the resilience and adaptability of family solidarity under conditions that the institutional configuration of European societies was not designed to handle.

A growing body of empirical scholarship has examined the effects of the pandemic on intergenerational contact and support in European contexts, drawing on the SHARE Corona Surveys (Arpino et al. 2021; Bergmann & Wagner 2021; Ucheddu & Rizzi 2022). Country-specific studies, – such as

Klingel et al.'s (2025) German analysis shows that one-third of adult children stopped or reduced support to their parents during the early pandemic period – have illuminated the mechanisms through which support flows were disrupted at national scale. These studies have documented substantial interruption in physical contact between generations, partial substitution toward electronic communication, and notable variation in the patterning of support across European countries. Yet several important gaps remain. First, most existing pandemic-era studies have treated the COVID-19 period as a single unit of analysis or have focused on the immediate first-wave response, leaving open the question of how patterns evolved as the pandemic shifted from acute crisis to extended condition. Second, the prior literature has paid relatively limited attention to the question of whether the pandemic changed the structure of intergenerational support, that is, whether the predictors of receiving help became different during the crisis, as distinct from whether it changed the level of contact or support. Third, less is known about how the institutional context of family support conditions the response to crisis. This question is particularly relevant in post-socialist Europe, where weak and uneven formal care provision, and different family-state arrangements make the family a central but variably burdened source of support. The issue is therefore not simply whether intergenerational support changed during COVID-19, but whether the crisis activated family solidarity differently across contexts in which responsibility for older-age support is distributed differently between family and state.

Using SHARE Wave 8 and the two SHARE Corona Surveys, this article examines whether the pandemic activated socioeconomic gradients in upward intergenerational support, whether this activation attenuated between the first and second pandemic waves, and whether it differed between the Baltic and Central-Eastern European clusters.

The theoretical framework guiding the analysis treats the pandemic as a stress test of family solidarity: a sudden, external disruption that exposes the underlying opportunity structures and need-based responses that operate routinely but inconspicuously beneath the surface of everyday family arrangements. Crisis, in this view, does not create new patterns of family support; rather, it reveals dimensions of solidarity that are normally absorbed into the slow rhythms of reciprocal exchange and normative obligation. The empirical signature of the stress-test mechanism, if it operates as theorized, should be an activation of need-based predictors of support: most directly, material deprivation that was latent or weakly observable in routine times. The strength of this activation should vary across institutional contexts, with

sharper activation in more familialist configurations where families bear a larger share of the crisis response and softer activation in contexts where formal arrangements provide partial substitutes.

The article makes three contributions. Empirically, it documents the activation of a material-deprivation gradient in upward intergenerational support during the pandemic in two regional clusters where no such gradient was observable in the pre-pandemic baseline. This finding holds for both the Baltic and Central and Eastern European clusters, with somewhat greater statistical robustness in the latter. Methodologically, it uses the longitudinal structure of the SHARE Corona Surveys to compare pre-pandemic, acute-pandemic, and extended-pandemic patterns of support within the same panel of respondents, allowing the analysis to attribute observed differences to the pandemic context rather than to compositional differences across study populations. Theoretically, it advances the proposition that crisis functions as a stress test of family solidarity in a specific analytical sense – making structurally embedded opportunity structures clear – and suggests that this mechanism operates with detectable variation across post-socialist welfare configurations. The combination of empirical evidence, methodological design, and theoretical framing positions the study to speak to ongoing debates about the resilience of family-based welfare arrangements under conditions of social and demographic strain.

The remainder of the article is organized as follows. Section 2 develops the theoretical framework, building on the intergenerational solidarity paradigm of Bengtson and Roberts (1991) and articulating three hypotheses concerning the activation of need-based gradients, their temporal trajectory, and their regional patterning. Section 3 describes the SHARE data sources, defines the five dependent variables and the principal independent variables, and presents the analytical strategy of stratified logistic regression by country cluster. Section 4 presents the empirical findings in five subsections corresponding to the analytical questions, supported by five regression tables. Section 5 discusses the implications of the findings for the theory of intergenerational solidarity and for the comparative literature on welfare configurations, addresses limitations and alternative interpretations, and identifies directions for further research while section 6 concludes.

## ***2. Theoretical framework***

### **2.1. Intergenerational solidarity as a multidimensional construct**

The theoretical foundation of this study is the paradigm of intergenerational solidarity developed by Bengtson and Roberts (1991), which conceptualizes

relations between parents and adult children as enduring beyond the period of dependent childhood and operating along six analytically distinguishable dimensions. *Associational solidarity* refers to the frequency and patterns of contact and shared activity between generations. *Affectual solidarity* refers to the emotional bonds and sentiments of closeness between family members. *Consensual solidarity* refers to agreement on values, opinions, and life orientations. *Functional solidarity* refers to the exchange of help, support, and assistance – both instrumental and financial. *Normative solidarity* refers to the strength of obligation felt toward family relationships and is closely aligned with the concept of familism (Daatland & Herlofson 2003). *Structural solidarity*, finally, refers to the opportunity structures – geographic proximity, health, partner status, household configuration – that enable or constrain interaction and exchange (Bengtson & Roberts 1991; Silverstein & Bengtson 1997).

These six dimensions are interrelated but not reducible to one another. Empirical work has consistently shown that family ties can be high on one dimension and low on another: geographically distant adult children may maintain strong affectual bonds with their parents while providing limited functional support, just as physically proximate kin may exhibit dense functional exchange amid affective ambivalence (Lüscher & Pillemer, 1998). The solidarity paradigm is therefore not a unitary scale of family closeness but a typology of distinct mechanisms through which intergenerational relations operate.

This study focuses on *functional solidarity* as the dimension most directly responsive to acute need and most informative about the structure of family support under crisis conditions. Functional solidarity is the exchange of concrete resources – practical help, financial transfers, assistance with essential goods – that enable older adults to manage daily life and respond to disruption. It is the dimension of solidarity that the COVID-19 pandemic placed under the most direct stress, as restrictions on movement and the elevated health risk to older adults simultaneously raised the demand for support and disrupted its conventional channels.

Functional solidarity, however, cannot be analysed in isolation from *structural solidarity*: the patterning of opportunity structures that determines whether functional exchange is possible at all. The empirical analysis that follows treats SES indicators (education, material deprivation, crowded housing) and demographic indicators (partner status, number of children, health) as components of structural solidarity that condition the activation of functional exchange. Crisis, in this framework, alters the relevance of different structural conditions – bringing some into operation while leaving others

unchanged – and thereby reshapes the (observable) patterns of functional support.

## **2.2. Crisis as a stress test of family solidarity**

Family support is commonly understood as combining several allocation logics. Transfers between adult children and ageing parents may respond to immediate need, but they may also be embedded in longer histories of reciprocity, obligation, co-residence, and routine exchange (Cox 1987; Kohli & Künemund 2003). For this article, the key distinction is not between pure altruism and pure exchange, but between support that becomes visibly need-responsive under crisis conditions and support that remains absorbed into routine family arrangements. In ordinary times, material deprivation may exist without appearing as a strong predictor of discrete support receipt, because need is often managed through ongoing family routines rather than through clearly identifiable transfer events.

This is the sense in which crisis can be treated as a stress test of family solidarity. The metaphor captures the idea that the structural properties of a system become more visible when routine operating conditions are disrupted (Walsh 2016). When an external shock raises acute need and interrupts established patterns of exchange, the underlying opportunity structures of family support – who has access to family resources, who can mobilize help, and whose needs become salient enough to activate support – become more observable. The pandemic therefore does not provide evidence that crisis creates family solidarity; rather, it offers an opportunity to examine whether the need-based dimension of solidarity, especially material deprivation, becomes more legible when ordinary family arrangements are placed under strain.

The COVID-19 pandemic is therefore treated here as an empirical stress test of family solidarity: an external disruption that heightened older adults' needs while constraining the routine infrastructures through which intergenerational support is normally enacted.

The theoretical expectation that follows is testable. If crisis activates need-based dimensions of family solidarity that are latent in routine times, then SES indicators tied to acute material need – most directly, material deprivation – should emerge as predictors of family support receipt during the pandemic where they did not before. The pre-pandemic baseline should show family support patterned principally by demographics, normative configuration, and structural availability of kin (gender, age, number of children, health, partner status). The pandemic-era pattern should show these baseline predictors retained but augmented by an activated material-deprivation gradient. The

transition between the two patterns is the empirical signature of the stress-test mechanism.

This expectation is conditional, however, on the institutional context in which family solidarity is embedded. Where formal welfare arrangements are robust and provide alternative channels for crisis support, the activation of family transfers may be muted: families need not bear the full weight of crisis response because state and market provide substitutes. Where formal arrangements are weaker and family is the principal safety net, the same activation should be sharper. This conditionality motivates the regional comparison that organizes the empirical analysis.

### **2.3. Welfare regimes and post-socialist legacies: an exploratory regional comparison**

The regional comparison developed in this study starts from the premise that post-socialist Europe is not institutionally homogeneous. Although the countries analysed here share the historical experience of state socialism, (more or less) rapid market transition, demographic ageing, and subsequent European integration, comparative scholarship has consistently shown that post-1989 transformations generated differentiated welfare trajectories rather than a unified “Eastern European” welfare model (Cerami & Vanhuyse 2009; Fenger 2007; Saxonberg 2014). These differences matter for intergenerational support because they shape the allocation of responsibility between state, market, and family in responding to old-age dependency, economic insecurity, and care needs.

The regional comparison therefore has an exploratory rather than confirmatory function. It does not test a categorical divide between a formalized Baltic care regime and a familialist CEE regime but examines whether the stress-test mechanism identified in this article - the activation of material-need gradients in upward intergenerational support under crisis conditions - operates across both clusters and whether its intensity or social patterning differs between them. Comparative work does distinguish between more market-liberal Baltic trajectories and more residual-familialist configurations in parts of Central and Eastern Europe (Bohle & Greskovits 2007; Aidukaite 2011; Saxonberg 2014), but these distinctions should be understood as differences of degree and institutional configuration rather than differences in kind. Lithuania and Latvia remain hybrid post-socialist cases, marked not only by reformist and market-liberal welfare trajectories but also by weakly developed long-term care services, high old-age poverty risks, and continued reliance on family-based assistance (Aidukaitė & Mikulionienė 2024).

The Baltic cases are therefore not outside the familialist pressures characteristic of post-socialist welfare arrangements more broadly; they represent a somewhat different configuration of those pressures.

Romania, Bulgaria, and Slovakia represent a somewhat more visibly familialist configuration. Formal long-term care provision is limited, and unevenly accessible, social protection remains fragmented in important respects, and families often absorb dependency risks that are only partially addressed by public provision (Saxonberg 2014). Recent empirical evidence from Romania confirms the continuing importance of these constraints: material deprivation, rural residence, living alone, and having migrant family members are structural predictors of unmet care needs among older adults (Hărăguș & Földes 2026). Familialism in these societies therefore reflects not only cultural norms of intergenerational obligation but also structural necessity produced by limited formal provision. As previous research on post-socialist family policy demonstrates, the region's welfare transformations have often combined residual state paternalism, neoliberal retrenchment, and selective social investment in ways that reinforced unequal dependence on family resources (Inglot, Szikra, & Raț 2022; Kovács 2023).

Recent scholarship further suggests that post-socialist welfare development has increasingly produced processes of institutional dualization, whereby better-protected groups retain access to more stable benefits while vulnerable populations rely more heavily on informal support networks and family transfers (Kovács 2023). Although Kovács' analysis concerns family transfers and benefits for families with children rather than old-age support directly, it is relevant here as evidence of a broader institutional logic in which social protection in post-socialist contexts often protects labour-market insiders more effectively than structurally vulnerable outsiders. This is important for the present study because it implies that socioeconomic inequalities are not external to family solidarity systems but embedded within them (Daatland & Lowenstein 2005; Saxonberg 2014). Crisis conditions may therefore intensify dependence on kin-based support precisely among structurally vulnerable groups.

This framing is important because the empirical question is not whether family support exists in one cluster and not in the other. Both clusters remain situated within a broader post-socialist field in which families play a central role in older-age support. The more relevant question is whether a common crisis-activation mechanism takes somewhat different forms across related welfare configurations. If welfare arrangements shape the allocation of crisis response, then the activation of need-based support during the COVID-

19 pandemic may be more statistically robust, more concentrated, or more clearly structured by material vulnerability in the CEE cluster. However, given the shared weakness of formal care provision across both clusters, substantial similarity is also expected. The Baltic cases should not be assumed to provide strong institutional insulation from family reliance; nor should the CEE cases be treated as the only contexts in which family solidarity becomes activated under crisis.

Routine-time evidence from the region supports this cautious framing. Mureşan and Hărăguş (2015) show that filial obligation norms are stronger in CEE than in Western Europe, but actual support to ageing parents does not simply follow this normative gradient. This suggests that strong family obligations may coexist with constrained capacity to provide support: where formal welfare provision is weak, families face higher expectations but often fewer resources with which to respond.

This routine-times baseline is central to the present argument. If complementarity governs the relationship between family norms and support behaviour in ordinary times, then the pandemic raises a different question: what happens when formal services contract, mobility is restricted, and acute needs rise simultaneously? The stress-test mechanism articulated above provides a candidate answer. Under crisis conditions, need-based dimensions of family solidarity may become more visible, not because crisis creates family solidarity, but because it makes latent vulnerability gradients more legible. In this sense, the pandemic offers an opportunity to observe whether material deprivation becomes a stronger predictor of upward intergenerational support when routine family-state arrangements are disrupted.

## 2.4. Hypotheses

The theoretical framework yields three empirically testable expectations that structure the analysis.

*Hypothesis 1 (the stress-test hypothesis).* Material deprivation should be a weak or non-significant predictor of upward intergenerational support before the pandemic but a significant predictor during the pandemic, reflecting the activation of need-based transfers under crisis conditions.

*Hypothesis 2 (the temporal attenuation hypothesis).* If crisis-period activation is an acute response rather than a permanent restructuring of family support, need-based gradients should be more visible in the first pandemic wave and weaker or less stable by the second wave.

*Hypothesis 3 (exploratory expectation of regional patterning of activation).* The activation of need-based gradients in upward intergenerational support may

differ between the Baltic and CEE clusters. Given the more visibly familialist configuration of the CEE countries included in the analysis, the material-deprivation gradient may be more robust or more concentrated in CEE than in the Baltic cluster. However, because both clusters share weak formal care provision and substantial reliance on family support, this expectation is exploratory: The analysis does not assume a sharp regime divide but examines whether a common stress-test mechanism takes somewhat different forms across related post-socialist contexts.

These hypotheses are tested against the empirical results presented in the following sections.

### ***3. Data and methods***

#### **3.1. Study design and data sources**

This study draws on three waves of the Survey of Health, Ageing and Retirement in Europe (SHARE), a longitudinal, cross-national survey of individuals aged 50 and over and their household partners across European countries (Börsch-Supan et al. 2013). The analysis combines pre-pandemic baseline information from SHARE Wave 8 (fieldwork conducted between October 2019 and March 2020) with two subsequent telephone-administered Corona Surveys conducted during the COVID-19 pandemic (Corona Survey 1 in June–August 2020; Corona Survey 2 in June–August 2021). The combined design yields a longitudinal observational dataset spanning the pre-pandemic period, the acute first phase of the COVID-19 crisis, and a second wave of pandemic-era data approximately one year later.

The analytical sample is restricted to two regional clusters of post-socialist European Union member states. The Baltic cluster comprises respondents from Lithuania and Latvia ( $N = 1,102$ ), while the Central and Eastern European (CEE) cluster comprises respondents from Romania, Bulgaria, and Slovakia ( $N = 1,419$ ). Both clusters share a common history of state socialism and accelerated post-1989 marketization but diverge along welfare regime trajectories. The Baltic countries included in this study (Lithuania and Latvia) represent a distinct hybrid post-socialist configuration: more institutionally reformist and in some respects more formally organized than several Central and Eastern European systems, but still characterized by basic income protection, weakly developed long-term care services, high old-age poverty risk, and substantial reliance on family-based support (Aidukaitė & Mikulionienė 2024). The CEE cluster retains stronger familialist features and weaker formal long-term care infrastructure (Cerami & Vanhuysse 2009; Saxonberg 2014). Within each cluster, individual countries are too small in

sample size to permit reliable within-country modelling; the cluster-level analysis represents a methodologically conservative compromise between cross-national heterogeneity and statistical power.

Eligibility for the analytical sample required respondents to be aged 50 or older and to have at least one living adult child, since the study addresses upward intergenerational support flowing from adult children to ageing parents. One respondent per household was selected to avoid clustering. Following the analytical conventions of recent SHARE-based COVID-19 research (Bergmann & Wagner, 2021; Börsch-Supan et. al., 2013), missing data on dependent and key independent variables were handled through listwise deletion within each model, and analytical samples vary slightly across outcomes.

### 3.3. Dependent variables

Five binary outcomes capture distinct dimensions and temporal phases of upward intergenerational support. Each outcome was coded 1 if the respondent reported receiving the type of support in question and 0 otherwise.

The first two outcomes concern the pre-pandemic baseline. *Practical support before COVID* indicates whether the respondent received practical household help from any of their children during the year preceding Wave 8 fieldwork – including assistance with home repairs, gardening, transportation, shopping, or routine household tasks. *Financial support before COVID* indicates whether the respondent received a financial gift or material support amounting to €250 or more from any of their children during the same reference period.

Three further outcomes concern support during the pandemic period itself. *Help to obtain necessities (pooled across waves)* indicates whether the respondent received help from their adult children to obtain essential goods – such as food, medications, or emergency household repairs – at any point during the pandemic (in either Corona Survey 1 or Corona Survey 2). *Intensified support during COVID wave 1* indicates whether the respondent reported that support from their children had intensified relative to pre-pandemic levels at the time of the first Corona Survey, while *Intensified support during COVID wave 2* captures the same question at the second Corona Survey, approximately one year later.

These five outcomes are conceptually related but operationally distinct. The pre-pandemic measures capture established patterns of family solidarity in routine times. The any-wave necessities measure captures the broad activation of support during the pandemic. The two wave-specific intensification

measures permit assessment of whether the acute mobilization observed in the first wave was sustained, weakened, or transformed by the second wave.

### 3.4. Independent variables

The principal independent variables capture five dimensions of socioeconomic status and structural vulnerability that the prior literature identifies as relevant to family solidarity (Lennartsson et al., 2010; Timonen et al., 2013).

*Education* was operationalized using the International Standard Classification of Education (ISCED) levels reported in Wave 8, recoded into three categories: low (ISCED 0–2, pre-primary through lower secondary), medium (ISCED 3–4, upper secondary and post-secondary non-tertiary), and high (ISCED 5–6, tertiary). Low education served as the reference category. Education is a foundational indicator of social position, capturing both human capital and the social-class trajectories that shape family network structures (Lennartsson et al. 2010).

*Material deprivation* was operationalized as a binary indicator of whether the respondent reported difficulty making ends meet, drawing on the SHARE financial-strain item that closely parallels the material deprivation indicators used in the EU Statistics on Income and Living Conditions (EU-SILC). Material deprivation is the most direct empirical indicator of acute economic need and is therefore central to theories of family transfers that distinguish need-responsive support from transfers embedded in reciprocity or routine exchange (Cox 1987; Kohli & Künemund 2003).

*Crowded household* indicates whether the respondent's household exceeded conventional density thresholds (more than one person per room). Crowded housing serves as a proxy for residential resource constraints but also captures patterns of co-residence with adult children or other kin, which may attenuate the need for separately reported support flows.

*Social participation* was operationalized as a binary indicator of whether the respondent participated in any social, religious, political, or voluntary activity outside the household in the year preceding Wave 8. Social isolation, indexed here by an absence of social participation, has been identified as a distinct dimension of structural vulnerability among older adults (Cornwell & Waite 2009) and is theoretically distinguishable from material deprivation.

*Digital skills* was operationalized as a continuous index based on respondents' self-reported computer and internet use frequency and competence. The variable is included both as a measure of contemporary social inclusion and as a potential mechanism through which support can be received remotely under pandemic restrictions.

### 3.5. Control variables

All models include the following control variables: respondent age in years (continuous); gender (female = 1, male = 0 reference); presence of a partner in the household (yes = 1, no = 0 reference); number of children (two or more = 1, one = 0 reference); pre-pandemic health status (poor health = 1, good health = 0 reference); and self-reported deterioration in health during the COVID-19 period (yes = 1, no = 0 reference). These controls were selected based on theoretical relevance: each is a documented determinant of intergenerational support flows in the established family solidarity literature (Bengtson & Roberts 1991; Silverstein & Bengtson 1997). They are not included merely as statistical adjustments but as substantively motivated confounders.

### 3.6. Analytical strategy

The analytical strategy follows three principles, each tied to the study's theoretical questions.

First, all models are binary logistic regressions estimated separately for the Baltic and CEE country clusters. This stratified approach formalizes the regional comparison central to the research design: rather than introducing region as a control variable in a pooled model, separate estimation allows every coefficient to vary by region, capturing the possibility that different SES dimensions activate support in different institutional contexts. Results are reported as odds ratios ( $\text{Exp}(B)$ ) with associated significance levels.

Second, model fit is assessed using the Nagelkerke pseudo- $R^2$ , acknowledging the limitations of this statistic for substantive interpretation of model adequacy in logistic regression. Robustness was assessed by comparing coefficient stability across the five outcomes and the two regional clusters.

Third, for the any-wave necessities outcome – the dependent variable most directly tied to pandemic-era acute need – a supplementary pooled-sample model was estimated including a gender $\times$ partner-in-household interaction term. This specification tests whether vulnerability accumulates whether women without a partner in the household experience a compounded likelihood of receiving help relative to what would be expected from the additive contributions of gender and partner status alone. Limitations of the study are addressed substantively in the Discussion section.

#### 4. Findings

##### 4.1. Before the pandemic: socioeconomic status is a weak predictor of upward support

The pre-pandemic models reveal a striking pattern: socioeconomic position exerts limited and inconsistent effects on the receipt of practical or financial support from adult children. Table 1 reports the results for practical support before COVID, estimated separately for the Baltic and CEE clusters.

Table 1. Binary logistic regression of practical support received from adult children before COVID-19, by regional cluster

Variable	Baltic countries		Central and Eastern European countries	
	<i>Exp(B)</i>	<i>Sig.</i>	<i>Exp(B)</i>	<i>Sig.</i>
<i>Education (ref: low)</i>				
Medium	0.901	.712	0.488**	.001
High	0.641	.212	0.722	.446
Material deprivation	0.743	.207	0.908	.619
Crowded household	0.978	.962	0.780	.416
No social participation	1.182	.518	0.651*	.034
Digital skills	0.981*	.029	0.999	.926
Female	2.612**	.005	0.993	.973
Partner in household	1.266	.373	1.897**	.002
Two or more children	1.202	.479	1.423	.152
Poor health status	1.714*	.047	2.333**	.001
Age	1.060**	.001	1.047**	.001
Nagelkerke R <sup>2</sup>	.199		.157	

*Note.* Coefficients reported as odds ratios (*Exp(B)*) with associated p-values. Baltic countries: Lithuania, Latvia (N = 1,102). Central and Eastern European countries: Romania, Bulgaria, Slovakia (N = 1,419). All models control for gender, partner in household, number of children, age, and pre-pandemic health status. †p < .10. \*p < .05. \*\*p < .01. \*\*\*p < .001.

In the Baltic cluster, none of the five SES indicators significantly predict the receipt of practical support before the pandemic, with the marginal exception of digital skills (*Exp(B)* = 0.981, p = .029), where higher digital competence is associated with slightly lower odds of receiving practical help, plausibly reflecting that more digitally engaged older adults are also more functionally independent and require less hands-on assistance. Education effects are statistically indistinguishable from zero, as are the effects of material

deprivation, crowded household, and social participation. Control variables tell most of the story: women are substantially more likely than men to receive practical support ( $\text{Exp}(B) = 2.612$ ,  $p = .005$ ), older respondents are more likely to receive support ( $\text{Exp}(B) = 1.060$ ,  $p < .001$ ), and respondents in poor health are more likely to receive it ( $\text{Exp}(B) = 1.714$ ,  $p = .047$ ).

The CEE cluster shows a slightly different pattern. Here, respondents with medium education are significantly less likely to receive practical support than those with low education ( $\text{Exp}(B) = 0.488$ ,  $p = .001$ ), and the absence of social participation reduces the odds of receiving support ( $\text{Exp}(B) = 0.651$ ,  $p = .034$ ). These two findings hint at a pre-pandemic pattern in which families in lower-education and more socially integrated configurations were already more active in providing practical help. As in the Baltic cluster, however, material deprivation and crowded household do not significantly predict practical support before the pandemic.

*Table 2. Binary logistic regression of financial support received from adult children before COVID-19, by regional cluster*

Variable	Baltic countries		Central and Eastern European countries	
	<i>Exp(B)</i>	<i>Sig.</i>	<i>Exp(B)</i>	<i>Sig.</i>
<i>Education (ref: low)</i>				
Medium	1.577	.284	0.789	.406
High	1.753	.219	0.601	.288
Material deprivation	0.836	.474	1.300	.252
Crowded household	0.799	.645	0.798	.584
No social participation	0.794	.500	0.597*	.037
Digital skills	1.020*	.019	1.023**	.001
Female	3.057**	.007	1.020	.936
Partner in household	1.653†	.066	1.676*	.031
Two or more children	0.826	.468	2.982**	.004
Poor health status	2.097**	.007	1.079	.764
Age	1.020	.209	1.011	.449
Nagelkerke R <sup>2</sup>	.086		.066	

*Note.* Coefficients reported as odds ratios ( $\text{Exp}(B)$ ) with associated p-values. Baltic countries: Lithuania, Latvia (N = 1,102). Central and Eastern European countries: Romania, Bulgaria, Slovakia (N = 1,419). All models control for gender, partner in household, number of children, age, and pre-pandemic health status. \* $p < .05$ . \*\* $p < .01$ .

The financial-support models (Table 2) reinforce this overall picture. In the Baltic cluster, no SES indicator significantly predicts the receipt of financial support before COVID; in the CEE cluster, only the absence of social participation reaches significance ( $\text{Exp}(B) = 0.597$ ,  $p = .037$ ), and the effect runs in the same direction as for practical support. Digital skills show a small positive association with financial-support receipt in both clusters (Baltic  $\text{Exp}(B) = 1.020$ ,  $p = .019$ ; CEE  $\text{Exp}(B) = 1.023$ ,  $p = .001$ ), perhaps reflecting that digital channels facilitate the recording or transmission of financial transfers across distance.

The substantive interpretation of these pre-pandemic results is that, in routine times, the receipt of upward intergenerational support is shaped primarily by family demographics and need – gender, age, number of children, and health – rather than by socioeconomic position as conventionally measured. This finding is consistent with the view that family solidarity in stable contexts operates largely through normative and demographic channels rather than through acute need-based activation (Bengtson & Roberts 1991; Silverstein & Bengtson 1997).

#### **4.2. During the pandemic: material deprivation activates as a predictor of support**

The picture shifts substantially when the analysis moves to support received during the pandemic. Table 3 reports models for help received from children to obtain necessities, pooled across the two Corona Survey waves.

In both regional clusters, material deprivation emerges as a statistically significant predictor of receiving help to obtain necessities. In the Baltic cluster, materially deprived respondents have approximately 1.42 times the odds of receiving help compared with non-deprived respondents ( $\text{Exp}(B) = 1.415$ ,  $p = .019$ ). In the CEE cluster, the effect is almost identical in magnitude and slightly more robust statistically ( $\text{Exp}(B) = 1.388$ ,  $p = .006$ ). This is the strongest single finding of the analysis: material deprivation, which was not a significant predictor of either practical or financial support before the pandemic, becomes a significant predictor of pandemic-era assistance with essential goods in both clusters.

The crowded-household variable shows an apparently protective effect in both regions (Baltic  $\text{Exp}(B) = 0.480$ ,  $p = .007$ ; CEE  $\text{Exp}(B) = 0.581$ ,  $p = .004$ ). On its face this is counterintuitive, but substantively it is consistent with the operationalization: respondents in crowded households are more likely already living with adult children or other kin and therefore receive support through co-residence rather than through reported separate flows. The

“support” measured in the dependent variable is help from children outside the household; for those already co-resident, this category is mechanically less applicable.

*Table 3. Binary logistic regression of help received from adult children to obtain necessities (either pandemic wave), by regional cluster*

Variable	Baltic countries		Central and Eastern European countries	
	<i>Exp(B)</i>	<i>Sig.</i>	<i>Exp(B)</i>	<i>Sig.</i>
<i>Education (ref: low)</i>				
Medium	0.877	.552	1.095	.531
High	0.787	.335	0.953	.852
Material deprivation	1.415*	.019	1.388**	.006
Crowded household	0.480**	.007	0.581**	.004
No social participation	0.658*	.023	0.750*	.023
Digital skills	0.993	.152	0.999	.739
Partner in household	1.033	.832	1.008	.951
Poor health status	1.637**	.001	1.642**	.001
Health worsened during COVID	1.420	.104	1.239	.349
Female	2.760**	.001	1.606**	.001
Two or more children	1.788**	.001	1.375*	.027
Age	1.085**	.001	1.057**	.001
Nagelkerke R <sup>2</sup>	.317		.141	

*Note.* Coefficients reported as odds ratios (*Exp(B)*) with associated p-values. Baltic countries: Lithuania, Latvia (N = 1,102). Central and Eastern European countries: Romania, Bulgaria, Slovakia (N = 1,419). All models control for gender, partner in household, number of children, age, pre-pandemic health status, and health change during COVID. \*p < .05. \*\*p < .01. \*\*\*p < .001.

Social participation similarly shows a protective effect (Baltic *Exp(B)* = 0.658, p = .023; CEE *Exp(B)* = 0.750, p = .023): respondents who participate socially are less likely to receive help to obtain necessities. This is consistent with the view that socially integrated older adults have more diverse resource networks and rely less on family for essential goods. Education and digital skills do not significantly predict receipt of pandemic-era support.

The contrast with the pre-pandemic findings is the central empirical observation of this study. The same individuals, drawn from the same panel, show no statistically discernible material-deprivation gradient in support receipt

before the pandemic but a substantial gradient during it. This is consistent with the theoretical claim that crisis activates need-based dimensions of family solidarity that are latent in routine times.

### 4.3. Wave-specific models: a weaker temporal signal

Decomposing the pandemic-era support into the two Corona Survey waves provides more tentative evidence on temporal dynamics. Tables 4 and 5 report models for intensified support during the first and second waves of the Corona Survey, again estimated separately by region.

*Table 4. Binary logistic regression of intensified support from adult children during the first wave of COVID-19, by regional cluster*

Variable	Baltic countries		Central and Eastern European countries	
	<i>Exp(B)</i>	<i>Sig.</i>	<i>Exp(B)</i>	<i>Sig.</i>
<i>Education (ref: low)</i>				
Medium	0.976	.929	1.588	.289
High	0.890	.578	1.755	.162
Material deprivation	1.106	.568	1.350†	.081
Crowded household	0.433*	.035	0.833	.506
No social participation	0.430**	.001	0.673*	.025
Digital skills	0.989†	.075	0.998	.726
Partner in household	0.810	.262	1.083	.656
Poor health status	1.666**	.007	1.971**	.001
Health worsened during COVID	1.773*	.011	1.444	.154
Female	0.437**	.001	0.768	.161
Two or more children	0.507**	.001	1.004	.985
Age	1.070**	.001	1.062**	.001
Nagelkerke R <sup>2</sup>	.221		.134	

*Note.* Coefficients reported as odds ratios (*Exp(B)*) with associated p-values. † $p < .10$ . \* $p < .05$ . \*\* $p < .01$ . \*\*\* $p < .001$ .

During the first wave, the direction of the material-deprivation effect is consistent with the pooled any-wave finding, especially in the CEE cluster, but the statistical evidence is weaker. Material deprivation falls just short of conventional significance in the CEE cluster ( $Exp(B) = 1.350$ ,  $p = .081$ ), and the crowded-household and social-participation effects continue in the same direction observed for the any-wave outcome.

Table 5. Binary logistic regression of intensified support from adult children during the second wave of COVID-19, by regional cluster

Variable	Baltic countries		Central and Eastern European countries	
	<i>Exp(B)</i>	<i>Sig.</i>	<i>Exp(B)</i>	<i>Sig.</i>
<i>Education (ref: low)</i>				
Medium	0.878	.660	0.626	.220
High	1.093	.691	0.950	.879
Material deprivation	1.088	.654	0.977	.889
Crowded household	0.761	.463	0.403**	.008
No social participation	0.748	.209	0.752	.109
Digital skills	0.997	.589	0.986**	.009
Partner in household	0.982	.929	0.769	.147
Poor health status	1.491†	.050	1.284	.161
Health worsened during COVID	0.943	.826	1.543	.103
Female	0.708	.136	0.487**	.001
Two or more children	0.456**	.001	0.882	.544
Age	1.055**	.001	1.048**	.001
Nagelkerke R <sup>2</sup>	.101		.096	

Note. Coefficients reported as odds ratios (Exp(B)) with associated p-values. \*p < .05. \*\*p < .01. \*\*\*p < .001.

By the second wave – conducted approximately one year after the first, when pandemic conditions had stabilized into a new normal – most SES effects have substantially attenuated. In the Baltic cluster, no SES indicator significantly predicts intensified support during the second wave. In the CEE cluster, only crowded household remains significant (Exp(B) = 0.403, p = .008), and digital skills shows a small negative association (Exp(B) = 0.986, p = .009).

This wave-on-wave attenuation suggests that the acute mobilization of family support observed in the first wave was a crisis response, not a permanent restructuring of intergenerational support patterns. As the pandemic context settled into a new equilibrium, families returned toward something closer to their pre-pandemic configurations, though with material deprivation still exerting a discernible effect on the broader any-wave outcome, indicating that some of the activation persisted in less acute form.

#### 4.4. Regional comparison: a shared activation mechanism with modest differentiation

Comparing across the two regional clusters yields a further observation. While the qualitative pattern – material deprivation activating during the pandemic – appears in both regions, the effects are typically more robust statistically in the CEE cluster. The CEE material-deprivation effect on receipt of help to obtain necessities ( $\text{Exp}(B) = 1.388$ ,  $p = .006$ ) is significant at the .01 level, while the corresponding Baltic estimate ( $\text{Exp}(B) = 1.415$ ,  $p = .019$ ) is significant only at the .05 level despite a slightly larger point estimate. This difference reflects both effective sample size and effect concentration.

More striking is the pre-pandemic CEE finding that respondents with medium education are substantially less likely to receive practical support than those with low education ( $\text{Exp}(B) = 0.488$ ,  $p = .001$ ). No comparable effect appears in the Baltic cluster. This suggests that even before the pandemic, the CEE cluster exhibited a more pronounced family-centred safety net for lower-education older adults, consistent with the characterization of the CEE welfare arrangement as more familialist than the Baltic equivalent (Aidukaite 2011; Saxonberg 2014). When the pandemic arrived, this latent gradient appears to have extended into a broader material-deprivation gradient.

In the Baltic cluster, by contrast, the most pronounced pre-pandemic patterns concern gender: Baltic women are far more likely than Baltic men to receive practical support before COVID ( $\text{Exp}(B) = 2.612$ ,  $p = .005$ ). This gender effect is somewhat attenuated in CEE (where the corresponding coefficient is not significant), suggesting that practical support flows in the Baltic states are more strongly gendered prior to the crisis. During the pandemic itself, the gender effect on receipt of help to obtain necessities is substantially larger in the Baltic cluster ( $\text{Exp}(B) = 2.760$ ) than in CEE ( $\text{Exp}(B) = 1.606$ ), although both are significant.

#### 4.5. Gendered vulnerability: evidence of compounded disadvantage

A final analytical step examines whether vulnerability accumulates across dimensions. A supplementary pooled-sample model on the any-wave necessities outcome, including a gender  $\times$  partner-in-household interaction term, reveals a significant interaction effect ( $\text{Exp}(B) = 1.533$ ,  $p = .016$ ). The substantive interpretation is that the additional likelihood of receiving help associated with being female and the additional likelihood associated with not having a partner combine more than additively: women without a partner in the household experience a compounded increase in the odds of receiving help to obtain necessities.

This finding strengthens the broader argument that the pandemic activated structural vulnerability gradients in family support. It is not only that any single dimension of disadvantage (material deprivation, female gender, living single) increased the likelihood of receiving help; rather, when these dimensions intersect, their joint effect exceeds what would be predicted from their separate contributions. Crisis-period family solidarity, in other words, appears to be allocated toward those whose vulnerabilities accumulate.

## ***5. Discussion***

### **5.1. Summary of findings**

This study set out to test three theoretical expectations concerning the activation of socioeconomic gradients in upward intergenerational support under crisis conditions. Before the pandemic, conventional measures of socioeconomic status – education, material deprivation, crowded housing – exerted limited and inconsistent effects on the receipt of practical and financial support from adult children among respondents aged 50 and over in five post-socialist EU member states. Family support in routine times was shaped principally by gender, age, number of children, and pre-existing health status. During the pandemic, this picture changed. Material deprivation emerged as a robust predictor of receiving help to obtain necessities in both regional clusters, with odds ratios in the range of 1.39 to 1.42 ( $p \leq .019$ ). Evidence for temporal attenuation is more qualified. The broad pandemic-era model shows a robust material-deprivation gradient in help with necessities, while the separate wave-specific models suggest that this gradient was less stable over time and no longer visible by the second wave. A supplementary pooled-sample analysis revealed compounding effects of gender and partner status, with women without a partner in the household experiencing significantly elevated odds of receiving help beyond what the additive contribution of each factor would predict.

These findings provide empirical support for the hypotheses developed in Section 2. Hypothesis 1 (the stress-test hypothesis) is supported by the contrast between weak pre-pandemic SES gradients and robust pandemic-era material-deprivation effects on the same panel of respondents. Hypothesis 2 (the temporal attenuation hypothesis) is only partly supported: the direction of the wave-specific pattern is consistent with attenuation, but the evidence is weaker than for the general stress-test hypothesis. Hypothesis 3 (exploratory expectation of regional patterning of activation) finds qualified support: both clusters show activation because both are post-socialist old-age security contexts where family remains central under conditions of limited formal care.

The CEE cluster shows somewhat greater robustness of activation, not because the Baltics are non-familialist, but because the CEE configuration may combine family obligation with even weaker or more uneven institutional buffering.

## **5.2. Theoretical interpretation: crisis activates latent structures of family solidarity**

The central theoretical contribution of these findings concerns the mechanism through which crisis reshapes the observed patterns of family solidarity. The argument advanced here is that the pandemic did not change the underlying structure of intergenerational relations; rather, it altered the salience of different components of that structure. In routine times, functional solidarity flows along channels shaped by demographic configuration, normative obligation, and slow patterns of reciprocal exchange. Need-based transfers occur but are folded into broader rhythms of family life that obscure their structural correlates. When an external shock raises the level and the visibility of acute need, the need-response mechanism becomes more visible: support flows toward those whose need is most salient, and the SES dimensions most directly tied to acute material need become predictive of who receives help. The empirical pattern observed in this study is consistent with this mechanism: a non-significant material-deprivation gradient before the pandemic and a significant one during it, observed in the same panel under comparable domains of upward functional support.

This interpretation extends the intergenerational solidarity framework of Bengtson and Roberts (1991) in a specific direction. The original framework distinguishes six dimensions of solidarity but is comparatively silent on the question of when different dimensions become observable and predictive. The findings suggest that functional solidarity – and specifically its need-based component – is most clearly observable under conditions that raise the importance of acute need. The structural solidarity dimension (opportunity structures including SES) does not operate autonomously; it conditions when and how functional exchange becomes visible. Crisis is the empirical setting in which this conditioning becomes most legible, because the configuration of need, constraint, and resource is reshuffled rapidly enough that the underlying allocation logic of family transfers can be inferred from the resulting pattern of exchange.

The compounding-vulnerability finding strengthens this interpretation further. If support activation reflected a single mechanism operating through any one SES indicator, additive coefficients would suffice to capture it. The

presence of a significant gender  $\times$  partner interaction indicates that the allocation of crisis-period family support follows a logic of cumulative disadvantage: those whose vulnerabilities intersect receive support disproportionately. This is consistent with a need-response mechanism responsive to the aggregate salience of need rather than to discrete need indicators considered in isolation. It also resonates with broader sociological theorizing on the accumulation of disadvantage across life-course trajectories (Dannefer 2003; DiPrete & Eirich 2006), suggesting that the family-based response to crisis recapitulates, in compressed form, patterns of stratification that operate over much longer time horizons.

### **5.3. Situating the findings in the broader literature**

The findings reported here align with and extend several strands of the existing literature. The general activation of family support during the pandemic is consistent with the broad findings of recent SHARE-based studies that have documented the mobilization of intergenerational support across European contexts (Bergmann & Wagner 2021; Arpino et al. 2021). What this study adds is a specifically structural analysis: not whether support increased on average, but whether the predictors of receiving support changed in ways that reveal the underlying allocation logic. The shift from a demographics-driven pattern in routine times to a need-driven pattern under crisis is the kind of structural shift that aggregate-level descriptive analyses cannot detect.

Two recent European studies provide useful comparative reference points for the findings reported here. Ucheddu and Rizzi (2022), analysing SHARE Corona Survey data across 27 European countries, documented substantial cross-national heterogeneity in pandemic-era patterns of intergenerational contact and support, finding that institutional and familial configurations shaped how the pandemic disruption manifested across the European space. The present analysis can be read as a deeper structural decomposition within a subset of that broader landscape: not which countries showed more or less support during the pandemic, but how the predictors of support shifted within specific institutional configurations. Klingel et al. (2025), focusing on Germany during the early pandemic, documented that a third of adult children stopped or reduced their support to parents, with continuation patterns shaped by employment flexibility and gender. These findings, which point to a contraction or interruption of some support flows during the early pandemic, provide an instructive contrast to the present analysis of post-socialist contexts. Here, the central question is not only whether intergenerational support declined or intensified overall, but how the allocation

of support was reorganized under crisis conditions. The evidence suggests that pandemic-era family solidarity may have been reconfigured differently across welfare-state contexts. In settings with stronger formal alternatives, disruption may be observed primarily as the interruption or reduction of established support flows. In contexts where families remain more central to the management of old-age need, the crisis may instead make need-based allocation more visible, activating material-deprivation gradients that were less apparent in routine times.

The findings also bear directly on the pre-pandemic baseline established by Mureşan and Hărăguş (2015), whose analysis of routine-times intergenerational support across seven Central and Eastern European and two Western European countries documented two patterns of immediate relevance. First, in routine conditions the relationship between filial obligation norms and actual support behaviour in CEE follows a complementarity logic rather than a family-steps-in logic: families are not uniformly more supportive where the welfare state is weaker, and the link between norms and behaviour depends on the specific type of support examined and the country context. Second, the strongest predictors of support given to parents in their analysis were structural and demographic – co-residence, parental need, gender, education as a proxy for capacity – rather than acute need indicators directly comparable to material deprivation. The present analysis suggests a temporal extension of this account. In routine times, complementarity governs the family-state allocation of support, and structural predictors capture the available variation. Under crisis, the complementarity arrangement is disrupted: formal services contract or become unavailable, acute need rises, and a different mechanism – need-based activation along material-deprivation lines – becomes observable in the data. The present findings are therefore not in tension with the routine-times baseline established by Mureşan and Hărăguş (2015); they extend it by documenting what happens when the conditions that sustain complementarity are removed. The implication is that the structure of family solidarity is genuinely contingent on context in the way Bengtson and Roberts (1991) anticipated but did not specify temporally: different dimensions become predictive under different conditions, and the same population can exhibit complementarity-governed behaviour in routine times and need-based activation-governed behaviour under acute crisis.

The regional differentiation in the strength of SES activation contributes to the comparative welfare-state literature on post-socialist Europe. The fact that the material-deprivation gradient appears in both clusters is consistent with recent evidence that Baltic old-age security is also characterized

by weak formal care provision, high poverty risk, and reliance on family support (Aidukaite & Mikulioniene 2024). The regional difference lies less in the presence or absence of familialism than in the relative intensity and institutional configuration of family-based buffering (Aidukaite 2011; Saxonberg 2014; Cerami & Vanhuysse 2009).

The structural conditions enabling this activation – weak formal care provision, care drain through emigration, rural service deserts – are confirmed to remain operative by Hărăguș & Földes's (2026) nationally representative post-pandemic survey of Romanian older adults, providing cross-study validation of the welfare-regime assumptions motivating the regional comparison. Our findings do not, however, support a strong claim that family solidarity operates differently in kind between the two clusters; rather, the same underlying mechanism appears to operate with somewhat greater intensity in CEE, where the institutional space for alternative crisis responses is narrower.

The pre-pandemic finding that respondents with medium education in CEE are less likely to receive practical support than those with low education is worth note. This effect, which has no Baltic counterpart, suggests that even in routine times the CEE family solidarity structure tilts toward lower-education households, perhaps reflecting both denser working-class family networks (Lennartsson et al. 2010) and the practical reality that lower-education older adults in CEE contexts face more constrained access to formal services and rely more heavily on family-based practical assistance. The activation of material-deprivation effects during the pandemic can then be read as an extension of this baseline tilt: where family was already disproportionately serving lower-education households, the crisis added a further activation of need-based response among those most acutely deprived.

#### **5.4. Limitations and alternative interpretations**

First, the observational design prevents causal inference, and reporting effects cannot be entirely ruled out. Although the comparison uses the same SHARE panel and therefore reduces compositional explanations, the observed activation of material deprivation may partly reflect the heightened prominence of both financial strain and family help during the pandemic. Respondents in difficulty may have become more likely to report deprivation and support together. A purely reporting-based explanation is less likely, however, because material deprivation was measured with the same SHARE financial-strain item across waves, the effect appears mainly for help with necessities rather than across all support outcomes, and the gender-by-partner interaction points to a structured vulnerability pattern.

Second, panel attrition in the SHARE Corona Surveys may also have affected the estimates. Respondents who remained in the panel may differ systematically from those who dropped out, especially if attrition was related to age, health, digital access, material deprivation, or the likelihood of receiving family support. If more vulnerable respondents were less likely to remain in the survey, the pandemic-era estimates may understate the true activation of material-deprivation effects; conversely, if continued participation selected for more resilient or better-resourced respondents, the observed associations may partly reflect this surviving sample composition. Existing evidence suggests that SHARE Corona Survey attrition was patterned to some extent by age and health, but less strongly by socioeconomic indicators (Scherpenzeel et al. 2020).

Third, the cluster-level design may obscure country-specific variation. Because the country samples are too small for reliable separate modelling, Lithuania and Latvia are pooled as a Baltic cluster, while Romania, Bulgaria, and Slovakia are pooled as a CEE cluster. This is a pragmatic analytical choice rather than evidence that countries within each cluster follow identical solidarity patterns. The regional interpretation should therefore be read cautiously: if the observed activation effect is driven mainly by one country, the cluster-level argument would require qualification. Future research with larger samples should test whether the stress-test mechanism operates consistently within each regional grouping.

Fourth, the support measures available in SHARE are binary indicators of whether help was received; they do not capture the intensity, monetary value, or qualitative meaning of support flows. The presence or absence of help is a coarse measure of family solidarity, and a more detailed analysis of support volume might yield somewhat different conclusions.

Fifth, the analysis examines only upward support – from adult children to ageing parents. The complementary downward flow (from parents to adult children), as well as exchanges with non-kin and non-coresident family members beyond children, are outside the scope of this study.

### **5.5. Implications**

The findings carry implications for three distinct domains of inquiry. For the theory of intergenerational solidarity, they suggest that the framework of Bengtson and Roberts (1991) is most fully observable under conditions that elevate the salience of need-based response. Functional solidarity does not operate as a constant flow patterned by stable predictors but as a contingent response whose structural logic becomes legible under crisis. Theoretical extensions of the solidarity framework should make explicit the temporal and

contextual conditions under which different dimensions of solidarity become observable, rather than treating the dimensions as features of stable family configurations.

For the comparative welfare-state literature, the findings support the proposition that post-socialist welfare arrangements vary in their family-state allocation of crisis response in theoretically meaningful ways. The Baltic–CEE differentiation is not a categorical distinction between family-based and state-based welfare but a gradient along which the family's share of crisis-period welfare functions is somewhat larger in CEE than in the Baltic cluster. This has policy relevance: efforts to strengthen formal long-term care provision in post-socialist contexts should anticipate that families have been carrying a load that is not equally distributed across SES strata and that policy interventions targeting acute material deprivation may relieve a particular burden on lower-income families that has been intensified by recent crisis experience. Hărăguș & Földes (2026) make the same policy argument from the other direction: care poverty should activate targeted policy responses.

For the broader sociological literature on inequality and crisis, the findings contribute to an emerging understanding of how external shocks interact with stratification systems. The pandemic did not equalize the experience of older adults; rather, it activated structural vulnerabilities along established lines of socioeconomic position. Family solidarity, in this respect, functioned both as a buffer (mobilizing support toward those in acute need) and as a reproducer of existing inequality (with the burden of crisis response falling disproportionately on families with fewer resources to mobilize). Future analyses of how social institutions respond to crisis should consider both functions simultaneously.

## 5.6. Directions for further research

The findings of this study suggest several directions for further inquiry. First, the activation of SES gradients in crisis-period family support should be examined across a wider range of contexts. The COVID-19 pandemic is one instance of an external shock; economic shocks, displacement crises, and natural disasters represent distinct test cases through which the generality of the stress-test mechanism could be assessed. Second, the temporal dynamics observed here – acute activation followed by partial attenuation – invite longer-horizon analyses extending beyond the two Corona Survey waves to assess whether and when family support patterns return fully to pre-crisis configurations. Third, the within-cluster heterogeneity not directly modelled in this study warrants country-specific analysis as larger samples become available,

particularly to assess whether the welfare-regime differentiation hypothesis operates at the level of country institutional configurations rather than at the cluster level. Fourth, the gendered dimension of crisis-period family support – particularly the compounded vulnerability at the intersection of gender and non-partner living – invites analysis that situate these findings within broader scholarship on the gendered division of care labour and the structural position of older women in post-socialist contexts.

### ***6. Conclusion***

This study examined whether and how the COVID-19 pandemic activated socioeconomic gradients in upward intergenerational support across two clusters of post-socialist European Union member states. Drawing on three waves of SHARE data spanning the pre-pandemic period, the acute first phase of the crisis, and a second pandemic-era wave, the analysis showed that assistance with necessities became patterned by material deprivation during the pandemic, whereas pre-pandemic practical and financial support showed no equivalent deprivation gradient. The strongest evidence comes from the any-wave necessities model, with somewhat greater statistical robustness in the Central and Eastern European cluster than in the Baltic cluster.

The contribution of the study lies in the analytical perspective it advances. The metaphor of crisis as a stress test of family solidarity captures the idea that structures of intergenerational support, often absorbed into routine family exchange, become more visible when external disruption elevates acute need. The pandemic did not create family solidarity; it made visible a need-responsive dimension that had remained comparatively hidden in ordinary times. In this sense, the family neither failed nor proved indifferent to the crisis but activated along lines of material need that became legible only under stress.

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