Life Problems and Perceptions of Giving Support: Implications for Aging Mothers and Middle-Aged Children

Lauren R. Bangerter¹, Courtney A. Polenick², Steven H. Zarit³, and Karen L. Fingerman⁴

Abstract
Giving support may be a stressful or rewarding experience, and little is known about how family members perceive giving support amid problems or crises. Using a sample of 226 mother–child dyads (mother mean age = 75.04 years; child mean age = 49.57 years), we examine how mothers and their middle-aged children perceive giving support in the context of life problems. Actor–partner interdependence models tested whether associations between problems and perceptions of support are moderated by frequency of support given and if associations were stronger for daughters or sons. Children perceived giving support to their mother as more stressful when they had more of their own problems and gave high levels of support. Daughters, but not sons, considered helping their mother more stressful when their mother had more problems and they gave high levels of support. Distinctions between mother–son and mother–daughter dyads demonstrate the merit of a dyadic approach to understanding mother–child relationships.

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Family support is critical for well-being and family functioning across the lifespan. Giving support to family members may be perceived as a stressful or rewarding experience, and so these perceptions play a critical role in the psychological implications of giving support (Bangerter, Kim, Zarit, Birditt, & Fingerman, 2015). Though support is more frequently given to family members who have problems or an increased need for help (Davey & Eggebeen, 1998), little research has sought to understand how giving family support is perceived in the context or life problems or crises. The present study examined associations between life problems and perceptions of giving support within mother–child dyads in later life. Furthermore, we tested whether the associations between mother/child problems and perceptions of giving support are moderated by the amount of support given and if these associations differ between mother–daughter and mother–son dyads.

**Literature Review**

Giving support to others is generally regarded as a positive experience that is associated with greater well-being (Strazdins & Broom, 2007). Helping someone in need may promote a sense of fulfillment while also enhancing feelings of intimacy and trust within relationships. As such, giving support may be perceived as a beneficial and rewarding experience for those giving support. However, it is widely recognized that under certain circumstances, giving support may be burdensome, and may increase feelings of distress or negative mood (Liang, Krause, & Bennett, 2001). A daily diary study found that on days when middle-aged children gave support to aging parents, they had greater negative mood (Fingerman, Kim, Tennant, Birditt, & Zarit, 2015). Another study found that, among African American families, giving support is associated with compromised daily well-being (Cichy, Stawski, & Almeida, 2014).

A theoretical explanation for these findings comes from conservation of resource theory (Hobfoll, Freedy, Lane, & Geller, 1990), which purports that individuals strive to maintain personal and social resources and experience stress when such resources are threatened. Giving support to others inevitably uses valuable resources (e.g., time, finances, emotional, or social resources). Because individuals strive to protect and conserve valuable resources, giving support may become a stressful or negative experience if it
depletes or threatens such resources. While it is clear that giving support can indeed be perceived as rewarding or stressful in different contexts, more work is needed to understand what contexts promote negative perceptions of giving support; this inquiry has vast implications for clinical practice, specifically for family counseling services.

**Mother–Child Support Exchanges**

Research has shown that support exchanges within mother–daughter and mother–son dyads take on distinct patterns. Much work has explored the intensive support provision of middle-aged daughters who provide care for their aging mothers suffering from chronic illness (Horowitz, 1985; Pecchioni & Nussbaum, 2001; Pillemer & Suitor, 2014; Ward-Griffin, Oudshoorn, Clark, & Bol, 2007). However, much work often focuses exclusively on the problems of the individual receiving support (e.g., the health problems of an aging mother receiving caregiving from her daughter) and not the perceptions of the individual giving support. During midlife, daughters provide support to their mothers amid their own problems (e.g., balancing multiple family roles, health changes, financial strain) which may have implications for both quality and quantity of support given. Despite the intensity and importance of mother–daughter relationships, less is known about these relationships during adulthood (Bojczyk, Lehan, McWey, Melson, & Kaufman, 2011). Moreover, little work has sought to understand how mothers and daughters perceive the support they give to one another under different circumstances. Thus, it is unknown under what circumstances giving support to a mother or daughter is perceived as stressful or rewarding.

A small body of work suggests that problems experienced by young men necessitate increased support from their mothers. Support exchanges in the context of life problems constitute an important component that builds and sustains relational closeness between mothers and their sons (Morman & Whitely, 2012). Problems experienced by young men such as criminal activity, legal disputes (Veen et al., 2011), and chronic health conditions (Uphold, Shehan, Bender, & Bender, 2012) have implications for support exchanged within the mother–son relationship. This research is limited by its emphasis on earlier parts of the lifespan (e.g., when sons are in adolescence and young adulthood), and how aging mothers perceive giving support to middle-aged sons with life problems. Likewise, we know little about how providing support to aging mothers is perceived and experienced by middle-aged men, as the vast majority of research focuses on mothers and daughters.

While much research has examined the quantity of support mothers and children exchange in the context of life problems or crises, no prior work
has considered perceptions of giving support when the giver or the receiver is experiencing problems. Amid research that has largely focused on mother–daughter dyads, it is unknown whether these associations may be different in mother–daughter versus mother–son dyads. Evidence shows that mother–daughter ties tend to be more emotionally intense and involve greater tensions than mother–son relationships (Birditt, Miller, Fingerman, & Lefkowitz, 2009; Fingerman, 2001). Furthermore, women are potentially more vulnerable to the crises that occur to members of their social network (Kessler & McLeod, 1984). Thus, it is plausible that the association between problems and support appraisals are stronger for mother–daughter dyads than mother–son dyads. However, empirical research has yet to confirm this distinction.

Another notable limitation is that prior work typically considers reports from only one member of the mother–child dyad and does not empirically examine the bidirectionality of support exchange between middle-aged children and their aging mothers. Thus, dyadic inquiry is essential to gain a comprehensive understanding of the problems of mothers and children as they relate to the support perceptions of both parties.

**The Present Study**

It is essential for family counselors and practitioners to have a nuanced understanding of what contexts promote negative perceptions of giving support, specifically mothers and children who may be at risk of negative experiences in giving intergenerational support. This knowledge could improve clinical practice and family counseling services aimed at promoting positive family functioning and intergenerational relations. The present study explores dyadic associations between life problems and supports perceptions among mother–child dyads. To our knowledge, this is the first study to investigate the implications of life problems on perceptions of support given within mother–child dyads in later life. We sought to test the following hypotheses:

**Hypothesis 1:** For mothers and children, one’s own greater life problems and greater life problems reported by one’s child/mother will be associated with higher perceptions of stress and lower perceptions of rewards linked to giving support in the mother–child relationship.

**Hypothesis 2:** The associations between more life problems and poorer perceptions of support will be exacerbated by high levels of support given to one’s child/mother.

**Hypothesis 3:** These associations will be stronger among mother–daughter dyads than for mother–son dyads.
Method

Sample and Procedures

Participants were middle-aged children ($M = 49.57$ years) and their mothers ($M = 75.04$ years), and were drawn from the Family Exchanges Study Wave 1 (Fingerman et al., 2011). In 2008, Family Exchanges Study Wave 1 recruited a target sample of 633 middle-aged adults who had at least one living child aged 18 years or older and at least one living parent. Participants were identified through random digit dialing within the Philadelphia Primary Metropolitan Statistical Area including urban, rural, and suburban areas in New Jersey and Pennsylvania. Participants completed 1-hour long computer-assisted telephone interviews regarding relationships with their children and parents. Participants also provided contact information for their children and parents. Among middle-aged participants, 280 (44%) had parents who also completed interviews.

Overall 337 parents participated, generating 137 mother–daughter dyads and 97 mother–son dyads from different families. This inquiry focuses on mothers because of evidence that mother–child relationships are more intensive than father–child relationships (Burholt & Wenger, 1998; Rossi & Rossi, 1991). Participants with missing data on one or more study variables were removed, resulting in a sample of 226 mother–child dyads (134 mother–daughter dyads and 92 mother–son dyads).

Measures

Problems. We assessed personal problems mothers and children had experienced in the past 2 years using an adapted measure from the Midlife in the United States Study (Greenfield & Marks, 2006). The dimensions we tapped were a serious health problem or injury, a drinking or drug problem, and a serious financial problem. We were interested in determining whether the experience of a greater number of these common problems was linked to perceptions of fewer rewards and more stress linked to giving support in the mother–child relationship. Thus, in accordance with similar research (e.g., Bangerter et al., 2015; Birditt, Fingerman, & Zarit, 2010; Fingerman, Miller, Birditt, & Zarit, 2009), the sum of participants’ self-reports of life problems was used in analyses.

Frequency of Support Given. Support was measured using the Intergenerational Support Scale (Fingerman et al., 2009), which assesses how frequently family members give different types of support including companionship, talking about daily events, emotional support, practical support, giving
advice, and financial assistance (e.g., “How often do you provide your mother with emotional support”). Participants ranked how frequently they gave these six types of support with their child or mother on an 8-point scale ranging from 1 (less than once a year or not at all) to 8 (daily; α = .79).

**Perceptions of Support Given.** We measured participants’ global perceptions of stress and rewards linked to giving everyday support within the mother–child relationship. To measure perceptions of stress and rewards, participants answered two single item questions: “How stressful is it to give support to your [child/mother]” and “How rewarding is it to give support to your [child/mother]” on a 5-point scale ranging from 1 (not at all) to 5 (a great deal).

**Child Gender.** We considered child gender (1 = daughter, −1 = son) to determine whether the associations in this study significantly differed between mother–daughter and mother–son dyads.

In order to contextualize the dyads in the study, several other variables were taken into consideration. Foremost, to ensure that mothers in the study were not in need of intensive caregiving, mothers specified their functional limitations in activities of daily living through a series of yes/no questions. Participants also indicated their self-rated health over the past 12 months using a 5-point scale ranging from 1 (poor) to 5 (excellent). Because relational quality plays an important role in parent–child support exchanges (Fingerman et al., 2009), participants were asked to report how important they rated his or her relationship with their mother/child from 1 (least important) to 6 (most important).

**Analytic Strategy**

To account for the nonindependence in dyadic data and to explore mutual influences within mother–child relationships, actor–partner interdependence models (Kenny, 1996) were estimated with the mixed model procedure in SPSS Version 22. The partner interdependence model combines a conceptual model of relational interdependence with statistical techniques that facilitate the simultaneous estimation of one’s own and the other party’s influence on outcomes within the dyad. Hence, dyadic associations between mothers’ and children’s reports of life problems and perceptions of giving support in the mother–child relationship were examined. In this study, *actor effects* refer to the extent to which the life problems that mothers and children experience are associated with *their own* perceptions of giving support (e.g., mothers’ problems predicting mothers’ reward perceptions). *Partner effects* refer to the extent to which the life problems that mothers and children experience are
associated with *their relational partner’s* perceptions of giving support (e.g., mothers’ problems predicting children’s reward perceptions).

Separate hierarchical models were estimated for perceptions of rewards and stress linked to giving intergenerational support. Each model included generation as a distinguishing variable (1 = *mother*, −1 = *child*) to estimate separate intercepts for mothers and children (Kenny, Kashy, & Cook, 2006). This enabled the examination of actor and partner effects for each member of the dyad. To determine associations between life problems and support perceptions, both parties’ reports of life problems were entered in the first step of the models. One’s own and the other party’s reports of given support were also entered to account for the frequency of support exchanged within the mother–child dyads. Child gender was also included in the model. All continuous predictors and covariates were grand mean centered (Kenny et al., 2006).

To consider whether the frequency of one’s own support given in the mother–child relationship moderates the dyadic associations between life problems and support perceptions, two interaction terms were added in the second step of the model (i.e., Own problems × Own support, Partner problems × Own support; Garcia, Kenny, & Ledermann, 2015). In the third step, we added two three-way interaction terms to determine whether these moderation effects differed on the basis of child gender (i.e., Own problems × Own support × Child gender, Partner problems × Own support × Child gender). To examine the nature of significant interactions, the statistical significance of associations between life problems and support perceptions were evaluated at one standard deviation above and below the grand mean of intergenerational support scores to represent high and low levels of given support, respectively (Aiken & West, 1991).

**Results**

Means and standard deviations for mothers’ and children’s scores on major study variables are presented in Table 1. Mothers were in generally good health (\(M = 3.03, SD = 1.10\)) and a low proportion (28%) needed help with activities of daily living (e.g., transportation, personal care, financial help, housework), mirroring the study intention to assess a sample of aging mothers who did not need support due to physical or cognitive limitations. Children in the sample also were in generally good health (\(M = 3.51, SD = 1.06\)).

Among mothers, the most common problems experienced were health problems (50%), followed by financial problems (9%), and drinking/drug problems (0.4%). For children, the most frequently cited problems were also health problems (40%) followed by financial problems (17%) and drinking/drug problems (3%).
Table 1. Sample Characteristics for Mother–Child Dyads (N = 226).

<table>
<thead>
<tr>
<th>Variables</th>
<th>Mothers</th>
<th>Children</th>
<th>Sons</th>
<th>Daughters</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M (SD)</td>
<td>M (SD)</td>
<td>M (SD)</td>
<td>M (SD)</td>
</tr>
<tr>
<td>Age in years</td>
<td>75.04 (6.12)***</td>
<td>49.57 (4.70)</td>
<td>49.73 (4.39)</td>
<td>49.46 (4.91)</td>
</tr>
<tr>
<td>Self-rated healtha</td>
<td>3.03 (1.10)***</td>
<td>3.51 (1.06)</td>
<td>3.50 (1.14)</td>
<td>3.52 (1.00)</td>
</tr>
<tr>
<td>Importance of otherb</td>
<td>4.70 (0.98)***</td>
<td>4.37 (0.85)</td>
<td>4.54 (0.87)</td>
<td>4.25 (0.82)</td>
</tr>
<tr>
<td>Support given to otherc</td>
<td>4.20 (1.37)***</td>
<td>4.66 (1.35)</td>
<td>4.41 (1.40)</td>
<td>4.83 (1.28)</td>
</tr>
<tr>
<td>Total life problemsd</td>
<td>0.59 (0.63)</td>
<td>0.60 (0.71)</td>
<td>0.55 (0.68)</td>
<td>0.62 (0.72)</td>
</tr>
<tr>
<td>Reward perceptionse</td>
<td>4.34 (0.82)</td>
<td>4.27 (0.81)</td>
<td>4.29 (0.79)</td>
<td>4.25 (0.82)</td>
</tr>
<tr>
<td>Stress perceptionsf</td>
<td>1.61 (1.12)***</td>
<td>2.00 (1.16)</td>
<td>1.78 (1.10)</td>
<td>2.15 (1.17)</td>
</tr>
<tr>
<td>Proportions</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender (female)</td>
<td>1.00</td>
<td>.59</td>
<td>—</td>
<td>1.00</td>
</tr>
<tr>
<td>Mothers’ disability statusg</td>
<td>—</td>
<td>.28</td>
<td>.29</td>
<td>.26</td>
</tr>
<tr>
<td>Minority statush</td>
<td>.39</td>
<td>.39</td>
<td>.41</td>
<td>.38</td>
</tr>
<tr>
<td>Problems</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health problem</td>
<td>.50</td>
<td>.40</td>
<td>.33</td>
<td>.44</td>
</tr>
<tr>
<td>Drinking/drug</td>
<td>.004</td>
<td>.03</td>
<td>.03</td>
<td>.02</td>
</tr>
<tr>
<td>Financial</td>
<td>.09</td>
<td>.17</td>
<td>.18</td>
<td>.16</td>
</tr>
<tr>
<td>Marital status</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>.39</td>
<td>.71</td>
<td>.70</td>
<td>.71</td>
</tr>
<tr>
<td>Cohabiting</td>
<td>.00</td>
<td>.03</td>
<td>.02</td>
<td>.04</td>
</tr>
<tr>
<td>Single</td>
<td>.03</td>
<td>.08</td>
<td>.12</td>
<td>.06</td>
</tr>
<tr>
<td>Divorced</td>
<td>.13</td>
<td>.12</td>
<td>.08</td>
<td>.13</td>
</tr>
<tr>
<td>Separated</td>
<td>.01</td>
<td>.05</td>
<td>.05</td>
<td>.04</td>
</tr>
<tr>
<td>Widowed</td>
<td>.44</td>
<td>.09</td>
<td>.01</td>
<td>.007</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High school graduate</td>
<td>.50</td>
<td>.29</td>
<td>.28</td>
<td>.29</td>
</tr>
<tr>
<td>Some college</td>
<td>.19</td>
<td>.31</td>
<td>.30</td>
<td>.30</td>
</tr>
<tr>
<td>College graduate</td>
<td>.09</td>
<td>.20</td>
<td>.23</td>
<td>.16</td>
</tr>
<tr>
<td>Post graduate</td>
<td>.04</td>
<td>.16</td>
<td>.10</td>
<td>.20</td>
</tr>
</tbody>
</table>

Note. Subsequent models used data from all children (sons and daughters combined). Data provided for sons and daughters are for descriptive purposes.

aRated from 1 (poor) to 5 (excellent). bHow important the participant rated their relationship with their child/mother from 1 (least important) to 6 (most important). cMean frequency of everyday support given to one’s child/mother from 1 (less than once a year or not at all) to 8 (daily). dSum of three life problems (i.e., a serious health problem or injury, a drinking or drug problem, and a serious financial problem) experienced within the past 2 years. eHow rewarding it is to help one’s child/mother from 1 (not at all) to 5 (a great deal). fHow stressful it is to help one’s child/mother from 1 (not at all) to 5 (a great deal). g1 = mother needs help with one or more daily activities, 0 = mother does not need help. hRacial/ethnic minority = 1, non-Hispanic White = 0.

***Indicates a significant mean difference between mother’s and child’s report (p < .001).
Significant mean differences were found in the amount of support given by mothers and children (Table 1). On average, mothers reported giving less frequent support to their children (on a monthly basis) than children reported giving support to mothers (a few times per month), $t(225) = -5.26$, $p < .001$. Mothers also perceived giving support to their children as less stressful than children viewed giving support to their mothers. On average, mothers reported that giving support was not stressful, whereas children reported that giving support was on average a little stressful, $t(225) = -3.82$, $p < .001$. We did not find significant differences in how mothers and children perceived support in terms of rewards. Mothers ($M = 4.34$, $SD = 0.82$) and children both perceived giving support to be quite rewarding ($M = 4.27$, $SD = 0.81$). Pearson correlations among key variables are shown in Table 2.

**Associations Between Life Problems and Perceptions of Support in Mother–Child Dyads**

As presented in Table 3, there were two significant main effects for mothers’ reward perceptions of giving support. Specifically, mothers reported fewer
rewards associated with helping their child when mothers had more of their own problems ($B = -0.19, p = .03$) or when their child had more problems ($B = -0.23, p = .003$). Next, we examined if the presence of mother/child problems moderates the association between the support that mothers give to their children and mother’s perceptions of giving support as stressful. For mothers,

**Table 3. Associations Between Life Problems and Support Perceptions in Mother–Child Dyads ($N = 226$).**

<table>
<thead>
<tr>
<th>Effect</th>
<th>Mothers’ perceptions</th>
<th>Children’s perceptions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B</td>
<td>SE</td>
</tr>
<tr>
<td>Reward perceptions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child gender$^a$</td>
<td>0.05</td>
<td>0.06</td>
</tr>
<tr>
<td>Own given support$^b$</td>
<td>0.04</td>
<td>0.05</td>
</tr>
<tr>
<td>Partner given support$^b$</td>
<td>-0.01</td>
<td>0.05</td>
</tr>
<tr>
<td>Own problems$^c$</td>
<td>-0.19*</td>
<td>0.08</td>
</tr>
<tr>
<td>Partner problems$^c$</td>
<td>-0.23**</td>
<td>0.08</td>
</tr>
<tr>
<td>Own problems × Own given support</td>
<td>-0.01</td>
<td>0.06</td>
</tr>
<tr>
<td>Partner problems × Own given support</td>
<td>-0.10</td>
<td>0.05</td>
</tr>
<tr>
<td>Own problems × Own given support × Child gender</td>
<td>-0.05</td>
<td>0.06</td>
</tr>
<tr>
<td>Partner problems × Own given support × Child gender</td>
<td>-0.02</td>
<td>0.05</td>
</tr>
<tr>
<td>Stress perceptions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child gender$^a$</td>
<td>0.02</td>
<td>0.08</td>
</tr>
<tr>
<td>Own given support$^b$</td>
<td>-0.01</td>
<td>0.06</td>
</tr>
<tr>
<td>Partner given support$^b$</td>
<td>0.09</td>
<td>0.06</td>
</tr>
<tr>
<td>Own problems$^c$</td>
<td>0.13</td>
<td>0.12</td>
</tr>
<tr>
<td>Partner problems$^c$</td>
<td>0.20</td>
<td>0.11</td>
</tr>
<tr>
<td>Own problems × Own given support</td>
<td>0.07</td>
<td>0.09</td>
</tr>
<tr>
<td>Partner problems × Own given support</td>
<td>0.05</td>
<td>0.08</td>
</tr>
<tr>
<td>Own problems × Own given support × Child gender</td>
<td>0.06</td>
<td>0.09</td>
</tr>
<tr>
<td>Partner problems × Own given support × Child gender</td>
<td>-0.06</td>
<td>0.08</td>
</tr>
</tbody>
</table>

$^a$1 = daughter, -1 = son. $^b$Mean frequency of everyday support given to one’s child/mother from 1 (less than once a year or not at all) to 8 (daily). $^c$Sum of three life problems (i.e., a serious health problem or injury, a drinking or drug problem, and a serious financial problem) experienced within the past 2 years.

*$p \leq .05$. **$p \leq .01$. 

*1 = daughter, −1 = son. *Mean frequency of everyday support given to one’s child/mother from 1 (less than once a year or not at all) to 8 (daily). *Sum of three life problems (i.e., a serious health problem or injury, a drinking or drug problem, and a serious financial problem) experienced within the past 2 years. 

* $p \leq .05$. ** $p \leq .01$. 

the association between perceptions of stress related to helping their child and the frequency of support mothers give to their child was not moderated by their own problems. Similarly, the link between the frequency of mothers’ given support and mothers’ perception of stress was not moderated by children’s problems.

We then tested if mother/child problems moderate the association between the frequency of support that children give to their mothers and children’s perceptions of giving support as stressful. For children, the association between their perceptions of stress related to helping their mother and the frequency of support they gave to their mother was moderated by their own problems ($\beta = .20, p = .03$). Children perceived helping their mother as more stressful when they had more of their own problems and gave high ($\beta = .26, p = .05$) but not low ($\beta = −.29, p = .10$) levels of support to their mother (Figure 1).

Results also indicate a significant three-way interaction between mothers’ problems, children’s given support, and child gender ($\beta = .18, p = .03$). Daughters considered helping their mother as more stressful when their

![Figure 1](image-url). Significant moderating effect of the support children gave to their mother on the association between children’s life problems and their own perceptions of stress related to helping their mother.
mother had more problems and they gave high ($B = .62$, $p = .002$) but not low ($B = -.26$, $p = .28$) levels of support to their mother (Figure 2). In contrast, mothers’ problems were not associated with sons’ perceptions of stress related to helping their mother when sons gave high ($B = -.09$, $p = .65$) or low ($B = -.13$, $p = .71$) levels of support to their mother. We did not find any significant moderating effects of life problems on links between the frequency of support and perceptions of reward linked to giving support.

Discussion

While much research has focused on what aspects may contribute to the burden associated with providing caregiving to an aging parent, our study explores specific circumstances which contribute to the increased burden of providing support to an aging mother. We highlight this phenomenon within the specific context of mother–child relationships at a point in the lifespan when mothers are nearing late-life and children are in midlife. These findings show that the context in which aging mothers and middle-aged children give

![Figure 2. Significant moderating effect of the support daughters gave to their mother on the association between mothers’ life problems and daughters’ perceptions of stress related to helping their mother.](image-url)
support (e.g., when the mother or child has experienced a problem), the amount of support given, and child gender play a critical role in how giving support is perceived.

Our study is, to our knowledge, one of the first inquiries to use a dyadic approach to understand perceptions of giving support within the mother–child dyad. This stage of the mother–child relationship is greatly important, but has been examined less than mother–child relationships at earlier stages of the lifespan. While children are largely on the receiving end of family support during childhood, adolescence, and young adulthood, they become critical sources of support for aging family members during midlife. Yet their ability and willingness to give support is influenced by multiple roles (Evandrou, Glaser, & Henz, 2002) and increases the risk of chronic physical illness, loss-related events, and other life problems (Aldwin & Levenson, 2001). Thus, giving support to parents may be seen as an effortful form of emotional labor (Strazdins & Broom, 2007) amid the demands of midlife. Our study adds to our understanding of supportive relationships between elderly mothers and their adult children by revealing that the problems of middle-aged children have a significant association with their perceptions of giving support to their aging mothers. Children perceived helping their mother as more stressful when they had more of their own problems and gave high levels of support to their mother. These findings are also in line with conservation of resource theory; individuals strive to conserve personal and social resources and experience stress when these resources are lost or threatened. In the context of family support, middle-aged children with problems of their own may feel as though their personal and social resources are already limited; giving high amounts of support to their mother could perhaps further deplete such resources and translate into a stressful experience. However, giving low levels of support may not compromise personal resources enough to warrant a stress response.

Daughters’ perceptions of giving support, but not sons, appear to be affected by mothers’ problems. Specifically, daughters considered helping their mother as more stressful when their mother had more problems and they gave high levels of support to their mother. These findings are particularly salient because daughters are expected to provide care to aging parents with limitations in activities of daily living or other health problems that necessitate support (Pillemer & Suitor, 2014). Aging mothers also consistently prefer daughters over sons as sources of emotional and instrumental support, primarily on the basis of shared values and gender similarities (Suitor, Pillemer, & Sechrist 2006). Thus, daughters are expected to provide the majority of support and potentially serve as caregivers for aging mothers, an experience which may be perceived as stressful when support is given in high
quantities. When support was given in low quantities, however, giving sup-
port to a mother with problems was not highly stressful for daughters. These
findings indicate that giving a low quantity of support to mothers does not
appear to have the same negative impact on how giving is perceived. Thus,
giving support may be perceived as less stressful in circumstances where a
lower quantity of support is given (e.g., if support provision is a shared
responsibility among other family members). When these results are consid-
ered in conjunction with caregiving research, it may be that sharing care
responsibilities for an aging parent could be a beneficial strategy for adult
children.

Our findings are in line with the notion that women as potentially more
vulnerable to the crises that occur to members of their social network (Kessler
& McLeod, 1984). Other work suggests that an emotional separation between
mothers and sons begins in adolescence, whereas the interconnectedness
between mothers and daughters stays persistent across all stages of the life
course (Fingerman, 2001). Thus, mother–son relationships may be less emo-
tionally intense and interconnected in midlife such that sons are not as reac-
tive to problems of their mother. Other research has found that perceptions of
giving play a critical role in the psychological implications of giving support
(Bangerter et al., 2015). Thus, daughters who give support to aging mothers
with problems are at a heightened risk for negative psychological ramifica-
tions of giving support. These results warrant the development of services
and resources aimed at assisting daughters in the support they give to their
mothers. Likewise, other family members may be used to supplement the
support that daughters give to their aging mothers. Family counselors and
practitioners could use this information to promote effective and sustainable
family support exchanges.

We did not find any significant moderation effects for mothers. These
findings may partially be explained by the intergenerational stake hypothesis
(Giarrusso, Feng, & Bengtson, 2005), which points to parents as having
heightened relational investment in the parent–child relationship (Cooney &
Dykstra, 2013). It may be that mothers view the mother–child relationship
more favorably such that perceptions of support remain stable amid prob-
lems. Mothers’ support given to children may also be perceived as more nor-
mative and connected to patterns of support earlier in the life course, whereas
the reverse flow of support may feel less normative (and perhaps more stress-
ful and less rewarding) for middle-aged children. This study implies that giv-
ing more frequent support in the context of life problems may not have
adverse implications for older mothers’ experience of helping their children.

This study highlights the importance of considering the context in which
support is given, and incorporating the perspectives and experiences of
multiple family members. The contributions of this work, however, must be interpreted within the context of several limitations. First, both mothers and middle-aged children reported a low frequency of life problems; therefore, the range and variability of problems did not offer an ideal distribution. We also found that both mothers and children generally perceived giving to be highly rewarding and reported that their mother–child relationship was highly important. Thus, our sample is perhaps not indicative of families who experience less satisfying relationships or support-exchanges. It is critical that such families receive greater attention from researchers. Strategic recruitment of a problem-based sample would allow for a more thorough exploration into how specific, more intensive problems influence support within mother–child dyads in later life. Moreover, a broader range of life problems that are commonly experienced by middle-aged and older adults (e.g., the onset of illness in a loved one or a death in the family) may be especially important to examine. Finally, longitudinal data are needed to more fully understand how perceptions of giving support may change across time and across different contexts. Despite such limitations, this study lays groundwork for future research to gain a more complete understanding of how perceptions of support in the mother–child relationship may be related to life problems experienced by aging mothers and their adult offspring. Further dyadic inquiry is needed to understand how external and internal characteristics of older mothers and their middle-aged offspring may shape their perceptions of intergenerational support provision.

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