

Social Support and Social Networks Among the Elderly in Mexico: Updating the Discussion on Reciprocity

Sagrario Garay Villegas¹, Verónica Montes de Oca Zavala² and Jennifer Guillén³

Abstract

The aging process in Mexico continues to transform household dynamics, in particular the intergenerational exchange of support and reciprocity. The aim of this article is to update the discussion and analysis on the exchanges between the elderly and their family members in Mexico. Therefore, we use the 2005 *Encuesta Nacional de la Dinámica Familiar* (ENDIFAM; National Family Dynamics Survey) in order to distinguish between supports granted and received among the elderly population. Additionally, we examine variables that measure solidarity among family members when facing difficult situations, crises, and everyday difficulties. Thus, we analyze factors that condition the granting and receiving of support among the elderly. Results show that the elderly population is active in an intergenerational family network that receives and offers social support as a means of maintaining their quality of life. Among the conditioning elements of intergenerational solidarity, we find that as age increases, the elderly are less likely to grant support. Moreover, results show that women are more likely to receive social support; and, being married or in a civil union increases the likelihood of counting on a more extensive support network. Unexpectedly, we found that the granting of support in difficult situations occurs in a unidirectional manner. That is, the elderly tend to provide support to others during difficult situations, but are less likely to receive support when facing similar circumstances.

Keywords

Elderly, households, social support, reciprocity

Studies in Mexico show that a significant proportion of individuals 60 years and older, and particularly women, do not have access to health services nor do they have pension-derived incomes (Salgado and Wong, 2007). As a result, social support networks (familial and non-familial) have become one of the most important mechanisms in alleviating financial and health difficulties faced by the elderly population.

Social support networks refer to the exchange of support granted by family, friends, neighbors, and the community. This support may vary across time and is not continuous or permanent, often occurring at specific junctures (financial crisis, illness, accidents, etc). In Latin American countries, social networks are linked to survival strategies used when facing resource scarcity and limited social protections, and are most often employed by the most disadvantaged social groups as mechanisms for the attainment of basic necessities not available through formal

¹ Universidad Autónoma de Nuevo León, Nuevo León, Mexico. Email: sgarayv@gmail.com

² Universidad Nacional Autónoma de México, Mexico City, Mexico. Email: vmojis@gmail.com

³ Texas A&M University, College Station, TX, USA. Email: jennifer.guillen@gmail.com

networks (Lomnitz, 1994). However, social networks not only link financial and material support, but also include informational and emotional supports crucial to the survival of the elderly population (Barros, 2001; Enríquez, 2012).

Previously, living in a familial household was thought to be an indicator of support. It was assumed that living with family meant belonging to a network, and, thus, having access to support. However, recent research shows that receiving support is often uncertain and varies inwith time (González de la Rocha, 1999). This is significantly relevant – counting on support at a younger age does not guarantee that the support will carry through to old age, especially for individuals in need with deteriorated health conditions and financial difficulties (Guzmán, Huenchuan and Montes de Oca, 2003). In Mexico, research shows that in homes with at least one elderly individual in a deteriorated functional state, the amount of support received is greater than the amount of support received in a functional healthy state (Montes de Oca, 2004b).

A variety of studies discussing the importance and function of social support networks exist. However, the intention of our article is not to exhaust this theme, but rather to highlight the conditions in Mexico directly affecting the elderly. In a context like Mexico, where socioeconomic conditions for the elderly are adverse⁴ and homes are reconfiguring, the family support network has become one of the most important elements in overcoming the lack of income and care needed by the elderly (Montes de Oca, 2001; De Vos, Solís and Montes de Oca, 2004). Nevertheless, although we highlight the importance of familial support for the elderly, we also acknowledge the amount of support and exchange of aid, both financial and non-financial, provided by the elderly to family and non-family members. Based on recent empirical evidence, we discuss this in an attempt to update the discussion on the flow of exchanges among the elderly population.

The first two sections of this article present a brief review of the research on the transformation of households and families with elderly members. Then, we present a description of our data source and the operationalization of our variables, as well as our methodological procedure. Our empirical evidence is presented in two parts: the first describes the flow of support between different age groups; and, the second describes factors affecting the granting and receiving of support for the elderly population. Lastly, we offer a discussion on our primary research findings.

Households and aging in Mexico: A brief review

Living arrangements among family members undergo important modifications throughout the life course. The transitions experienced through old age modify the structure, composition, and dynamics of families (Goldani, 1993; López, 2001). Specifically, in Mexico, the economic situation and physical well-being of the elderly, condition the transformations of various aspects of family life. For example, research shows that as a way of showing support for elderly members, Latin American families group more generations into households. Moreover, many of these elderly members depend on the supports granted by the family, especially in countries

⁴ In 2005 in Mexico, nearly 50 percent of the Mexican population 65 years or older does not have access to healthcare institutions and approximately 80 per cent does not receive income from pensions or retirement (Garay and Mancinas, 2010).

where social security systems are fragmented and coverage is insufficient for the entire population (Saad, 2005; Pérez and Brenes, 2006; Huenchuan and Saad, 2010).

Having an extensive elderly population transforms various aspects of family dynamics, including the exchange relationships between generations, familial coexistence, the distribution of care tasks among family members, as well as a series of adjustments in satisfying the needs of younger generations and the elderly (Arroyo, Ribeiro and Mancinas, 2011). According to López (2001), this has led to the following new five forms of household organization: (1) the reduction of household size; (2) the reduction of the relative presence of nuclear homes and the growth of extended households; (3) the rise in female-led households; (4) the “aging” of households; and, (5) the shared financial responsibility among men and women.

Data from the *Encuesta Nacional de la Dinámica Demográfica* (ENADID; National Family Dynamics Survey) shows a slight increase from 24.2 to 29.2 percent in the number of households with elderly individuals between 1992 and 2009. Moreover, households with individuals younger than five years in age decreased from 47 percent in 1992 to 43.7 percent in 1997, 33.7 percent in 2006, and, 30 percent in 2009 (Montes de Oca and Garay, 2010). This reflects the impact of lower fertility and mortality rates, and, the increase in life expectancy.

This change in Mexican households not only stems from transformations in the structure due to age and generational composition of households, but reflects changes in priorities among Mexican families. According to Rabell and Murrillo (2007), the family shifts from a biological, social, and symbolic reproductive environment to a space that reproduces mechanisms for the personal fulfillment of its members. This is fundamental because in the biological, social, and symbolical reproductive environment the elderly command hierarchical respect; while in the spaces for personal fulfillment, the elderly aspire to have relationships that are not hierarchical.

A vast literature on households and aging exists stemming from a growing consciousness on demographic aging. These studies focus on analyzing the composition of households with elderly members, as well as the residential situation and family dynamics of the elderly individual. Nationally, findings show that the predominant types of households among the elderly are nuclear and extended, with a significant presence in single-person households (López and Izazola, 1994; INEGI, 1997). Although these trends persist, the following changes between 1992 and 2009 are worth highlighting: the proportion of nuclear households with at least one elderly individual has decreased from 39 percent in 1992 to 36.4 percent in 2009. The percentage of extended households with elderly individuals does not show much variation, except in 2006, which shows a significant reduction (Table 1). This type of household is strategic for obtaining the support of the family for other generations (children and grandchildren or the elderly). In Mexico, the limited number of public nurseries and daycares indicates a significant added expense that is often remedied by the presence of a grandmother who functions as caretaker to her grandchildren. Additionally, research shows that elderly women are more accepted in their children’s households because of their role in household maintenance and care for younger generations (Varley and Blasco, 2001).

The most significant change occurs in single-person households, which have been on the rise since the 1990s, and, particularly in the last decade (Table 1). Studies suggest that the most

vulnerable elderly population is found residing in single-person households, where individuals do not have access to family support networks but also lack the protections of income or medical insurance (Garay and Mancinas, 2010).

Table 1
Mexico. Percentage of households with elderly members, 1992-2009

	1992	1997	2006	2009
Nuclear	39.0	37.7	42.3	36.4
Extended	47.3	48.0	41.0	46.3
Shared	1.8	2.2	2.5	1.1
Single-person	11.5	11.7	13.8	16.0
Co-habiting	0.5	0.4	0.3	0.3
HOUSEHOLD TOTAL	100.0	100.0	100.0	100.0
	(13788)	(17162)	(9620)	(24562)

Source: Montes de Oca, Garay, Rico and García (2013).

Describing the problem: Families and aging

Cohabitation with family members is considered one of the conditions activating support and care mechanisms for the elderly population. Research has extensively discussed the role of the extended family as a household strategy for survival among family members during times of crisis (Ariza and Oliveira, 2001, 2007; García and Rojas, 2002). For the elderly population, this survival strategy argument is linked to issues of care rather than finances. Independent of income, the proportion of the elderly population residing in extended households is generally similar when controlling for different social conditions (Mancinas and Garay, 2011). However, cohabitation not only indicates the dependency of parents on children, but the dependency of adult children on their parents (Gomes, 2001; Hakkert y Guzmán, 2004). This is particularly true when the elderly continue to generate income or count on physical assets (homes, real estate). Inclusively, the large proportion of elderly adults living with their children instead of other relatives (Montes de Oca and Garay, 2010) highlights the permanence of adult children from the original nuclear household who may need help or other forms of support in their own households (e.g., taking care of grandchildren, sharing household costs, etc.).

Single-member households in Mexico have gained popularity among the elderly population in the last few years. Interestingly, contrary to observations in other countries where individuals of higher socioeconomic status live alone (Ramos, 1994), in Mexico, individuals from the lowest socioeconomic strata reside in these households (Garay and Montes de Oca, 2011). In distinguishing for social coverage, findings indicate that individuals without income and/or without medical insurance are likely to live alone. It is possible for this population to receive some sort of transference and attention from children living outside of the household or other family members and friends. However, it is also true that not all elderly adults who live alone receive support or that their socioeconomic status coupled with deteriorating health conditions places them in a vulnerable positions (Mancinas and Garay, 2011).

Despite the disadvantages of living with family, it is inevitable to not consider the difficulties and limitations that the family faces in order to continue supporting others as they age. On one hand, the demographic changes associated with the decrease in fertility are associated with the decrease of family size. Therefore, as family size decreases so does the number of potential providers for the elderly. Moreover, the support provided by women will decrease as a consequence of their participation in the labor market. Additionally, families face the difficulty of covering the necessary, and increasingly more expensive, medical costs accrued by the elderly (Abrantes, 2010; Mancinas and Garay, 2011).

Purpose

In Mexico, where socioeconomic conditions for the elderly are adverse, familial and non-familial support networks are one of the most important elements in surviving the lack of income and care needed for the elderly population (Montes de Oca, 2001; De Vos, Solís and Montes de Oca, 2004). However, although we highlight the importance of family support towards the elderly, we must also acknowledge that the elderly provide supports and exchanges, economic as well as non-economic, to family and non-family members. The following sections will discuss this possibility and will attempt to empirically demonstrate the flow of exchanges involving individuals 60 years or older.

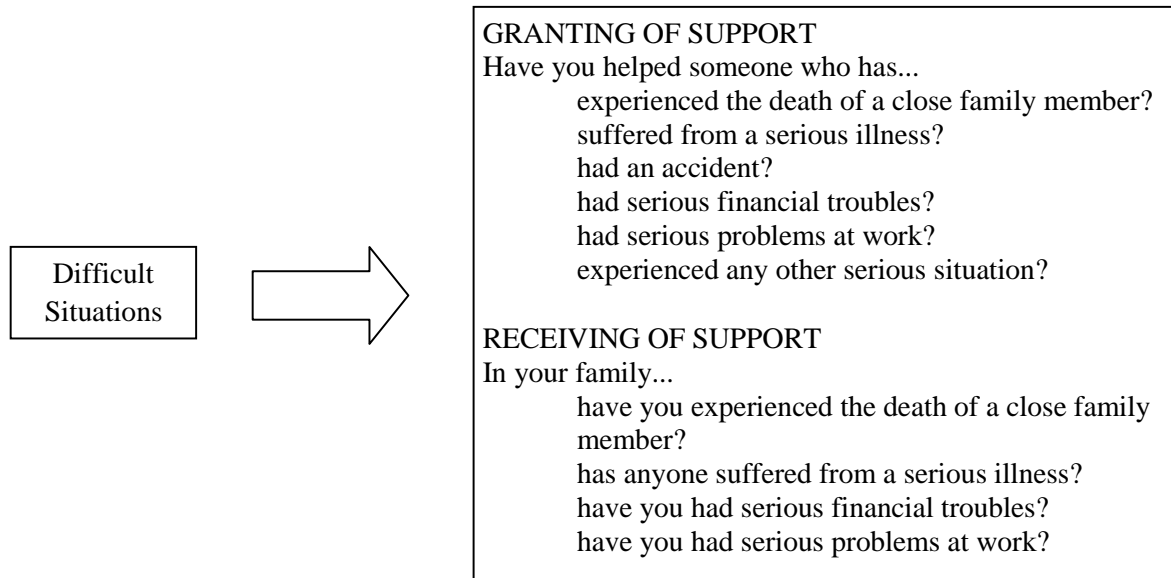
Data and Methods

This study employs the 2005 *Encuesta Nacional de la Dinámica Familiar* (ENDIFAM; National Family Dynamics Survey) conducted by the *Instituto de Investigaciones Sociales* (the Institute of Social Research) at the *Universidad Nacional Autónoma de México* (the National Autonomous University of Mexico; IIS-UNAM) and the *Sistema Nacional para el Desarrollo Integral de la Familia* (National System for the Integral Development of the Family; SNDIF). ENDIFAM is a nationally representative survey allowing us to approximate the transformations in Mexican family dynamics. Survey respondents include any household member 18 years and older, which we acknowledge may affect gathering on other household members, especially in issues linked to interior relationships within the family.

The data gathered for this project includes all individuals surveyed in order to analyze the support received and granted among individuals in different age groups. Subsequently, in order to focus solely on the elderly population, we only analyze data for individuals 60 years and older, representing 15.8 percent of the total population surveyed by ENDIFAM.

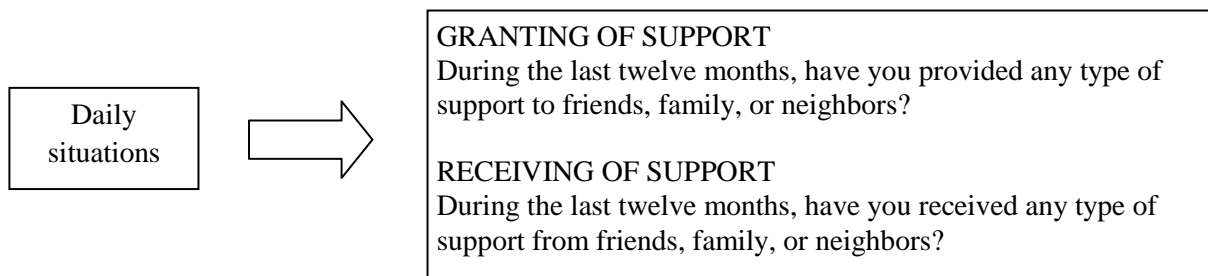
To analyze the flow of exchanges using ENDIFAM, we focus on questions regarding supports granted and received; and, in particular, on solidarity during difficult situations/moments of crisis and daily situations. Under ENDIFAM, difficult situations or moments of crisis refer to the

death of a close relative; serious illness; accidents; serious financial troubles; serious difficulties at work; or, other serious situations. The questions used are:



Based on these questions, we constructed a variable grouping people who have provided at least one of the types of support mentioned. In analyzing the reception of support in difficult situations we only include individuals who have experienced some sort of difficult situation, whether they have received support or not. This allows us to more precisely calculate the number of support-receiving people. Thus, we find that of the total number of surveyed individuals, 37.6 percent has never been in a difficult situation; and, 32.2 percent of the elderly population has never experienced a difficult situation⁵.

A second type of exchange associated with daily life covers a large spectrum, including: care, financial or material loans, checking mail, etc. In this case, the question is more concrete and considers the support activities performed in the last twelve months.



To differentiate between support granted and support received we built two variables grouping all individuals who have provided at least one type of support in daily life in the last twelve

⁵ From our point of view, the percentage of the elderly who have not experienced a difficult situation is high. However, we consider that omissions of information during surveying may play a role in this given that the survey was answered by any household member of 18 years or older and not necessarily by the elderly individual.

months into one variable; and, all individuals who have received help in their daily life in at least one activity for at least the last year into another variable.

We analyzed each exchange variable as a dependent variable in the adjustment of the binomial logistic regression models. Additionally, we include gender because studies have indicated that it is a conditioning factor for exchanges among the elderly population, including the reception and granting of support (Antonucci and Akiyama, 1987; Campo, 2000). Likewise, marital status has been identified as an element that affects the extent of social networks (Montes de Oca, 2004a). Moreover, socioeconomic status⁶, and the area size of residence are factors affecting exchanges, and, especially the granting of support (Montes de Oca, 2004a; Ybañez, Vargas and Torres, 2005).

Results

Support received and granted among the elderly

In general, studies indicate that in Latin America and the Caribbean, cohabitation is often a protection mechanism; inclusively, it is noted that the average rate of material well-being is higher when elderly individuals live with others in comparison to those who live alone (Saad, 2005). Moreover, studies show that cohabitation is one of the mechanisms most closely associated with intergenerational solidarity because it allows housing costs to decrease, including sharing food costs and facilitating support among household members (Hakkert and Guzmán, 2004; Montes de Oca, 2004b). Nevertheless, some argue against this, asserting that cohabitation does not necessarily signify an equal distribution of resources among all members. However, the theory that sharing physical space is strongly associated with the distribution of resources holds strong (De Vos and Holden, 1988).

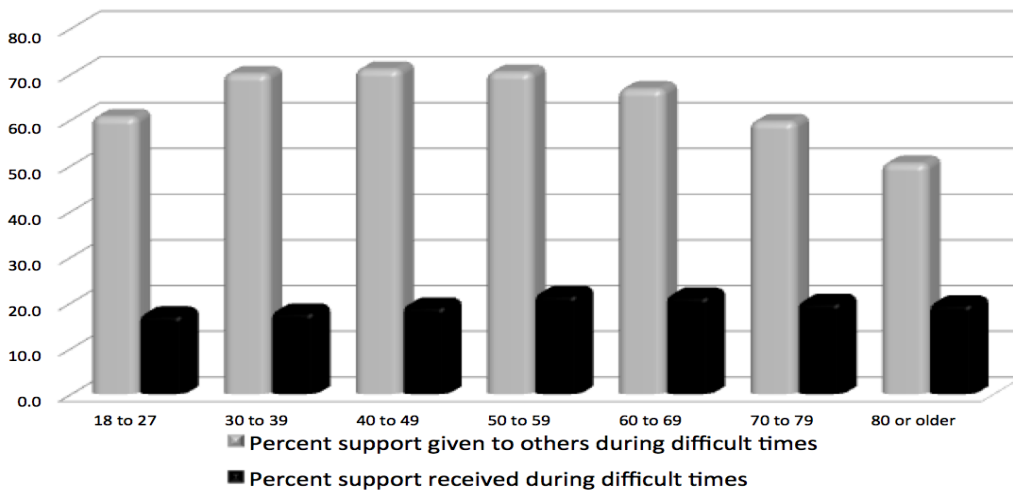
In this article we hypothesize that regardless of the individual's living arrangements, as difficult situations arise, various mechanisms of reciprocity prescribe whether individuals receive support from family and friends or whether they grant it. Moreover, this varies according to the individual's life course. Evidence for this includes two types of situations: those linked to difficult events such as the death of a close relative, illness, accidents, serious financial difficulties, work-related problems, or other situations considered serious; and, those associated with daily situations⁷ (Graph 1 - 2).

⁶ Socioeconomic status in ENDIFAM was calculated by analyzing the main components found in the survey, including variables relating to housing, material assets, domestic furnishings, and the educational levels of people. For more details about the construction of this index, see SNDIF, 2005. The survey report is available at: http://www.bdsocial.org.mx/index.php?option=com_content&view=article&id=104&Itemid=29&lang=en

⁷ Support or aid received in daily situations covers a wide gamut of activities such as care, material or financial loans, checking mail, etc.

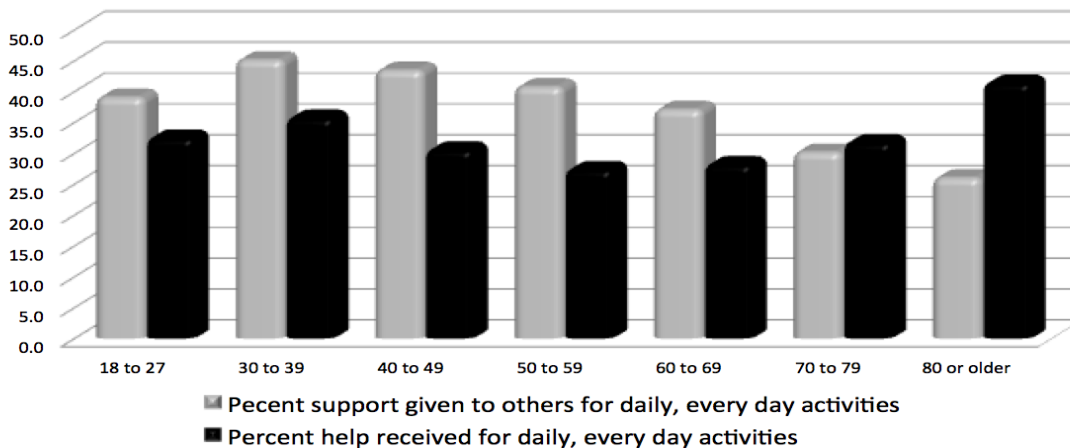
Among the different population groups, the most common trend is to provide support during critical events, especially among individuals 30 to 59 years old. Similarly, receiving support during a difficult situation is common among this group, but to a lesser extent (Graph 1). Nevertheless, noticeable changes occur when observing trends in the support provided and received in daily life – a larger percentage of people in younger age groups provide and receive support in every day life. Moreover, as individuals age, especially those 70 years or older, the amount of support received becomes greater than the amount of support granted (Graph 2).

Graph 1
Support received and granted during difficult times by age group, Mexico, 2005



Source: This graph was developed and calculated by the authors using data from ENDIFAM 2005.

Graph 2
Support received and granted in daily activities by age group, Mexico, 2005



Source: This graph was developed and calculated by the authors using data from ENDIFAM 2005.

Studies show that the family is the main source of support for the elderly, especially in facing everyday situations⁸ (Barros, 2001; Enríquez, 2012; Guzmán, Huenchuan and Montes de Oca, 2003). Although younger age groups provide more support to non-family members (Table 2), more advanced age groups mainly receive support from their children (Table 3). This coincides with research indicating that elderly individuals with deteriorated health are more likely to receive support from family members (Montes de Oca, 2004b; Arroyo, Ribeiro and Mancinas, 2011).

Table 2
Support granted during difficult daily situations by relationship and age group, 2005

	55 a 59	60 a 64	65 a 69	70 a 74	75 a 79	80 o más
Family members	38.3	41.5	41.5	40.1	38.7	27.9
Children	10.9	17.0	20.3	19.4	14.8	16.2
Parents	2.6	1.8	0.9	0.9	0.0	0.0
Siblings	8.1	7.6	7.0	6.5	7.7	0.9
Other	16.8	15.2	13.3	13.4	16.1	10.8
Non-family members	61.7	58.5	58.5	59.9	61.3	72.1
TOTAL	100.0	100.0	100.0	100.0	100.0	100.0

Source: the development and calculation of this table was done by the researchers using data from ENDIFAM 2005.

Table 3
Support received during difficult daily situations, by relationship and age group, 2005

	55 a 59	60 a 64	65 a 69	70 a 74	75 a 79	80 o más
Family members	47.1	48.6	50.2	58.0	52.4	64.0
Children	24.5	23.7	30.4	42.5	34.8	41.6
Parents	1.9	0.3	0.0	0.0	0.0	0.0
Siblings	11.1	9.7	8.9	3.5	4.3	4.5
Other	9.6	14.9	10.9	11.9	13.4	18.0
Non-family members	52.9	51.4	49.8	42.0	47.6	36.0
TOTAL	100.0	100.0	100.0	100.0	100.0	100.0

Source: the development and calculation of this table was done by the researchers using data from ENDIFAM 2005.

Factors affecting exchanges amongst the elderly population

Certain conditions with various characteristics tend to activate the use of exchanges or supports. Some studies indicate that a large proportion of men's labor participation outside the household allows women to establish closer relationships with family and the community, thus making them more likely to provide and receive support. During the aging process, and especially in old

⁸ We make the distinction for exchanges experienced during difficult situations and observe that in both the granting and receiving of supports from, family members are the main actors in this type of exchange among different age groups.

age, these supports function distinctively for men and women and is generally associated with marital status – single or widowed men tend to have less extensive social networks than women with these same characteristics (Montes de Oca, 2004b). Inclusively, friendships vary by gender— women tend to establish closer relationships in comparison to men, and these provide a greater emotional well-being. Additionally, research on the elderly stresses the importance of moral supports and the feelings of happiness generated by friendships (Antonucci and Akiyama, 1987). Studies on the perceptions of help indicate that when males care for other males, the person receiving attention perceives it more negatively than when care is granted by women. In other words, there is a socialized belief that women are better suited as caretakers than men (Campo, 2000). Likewise, research suggests that the ways in which support is perceived also depends on socioeconomic status. In particular, these studies propose that among the lower strata, material and economic help, as well as companionship, are valued the highest while the middle strata concerns itself more with finding shared similarities among partners (Montes de Oca, 2004b).

Despite differences between providing and receiving support, studies show that elderly individuals receive and give all types of support. Furthermore, in facing difficult situations⁹, gender does not affect the ability to give or receive support. That is, gender is not a limiting factor in establishing ties of solidarity when facing complicated circumstances. However, the same cannot be said for age – those aged 60 to 79 are more likely than those 80 years or older to give some type of help when family members and friends face crises. Surprisingly, when the elderly, of any age, experience complicated events, there is no statistically significant difference. In other words, independently of age, the elderly do not receive help when they need it (Table 4).

As indicated by other studies, we observe that for marital status, widowed or single elderly individuals are less likely to receive help. In particular, when facing difficult situations, those who are married or in civil unions are more likely to help in comparison to others. Similarly, those who are separated or divorced, followed by those who are married or in civil unions, are most likely to receive help.

Furthermore, we observe that for socioeconomic status, the lowest strata implement certain mechanisms to contribute to the granting of help during difficult situations. Results show that the lowest socioeconomic strata are more likely to provide help in comparison to those in higher strata. Furthermore, those in the fourth decile of the socioeconomic index and those in the best economic position (seventh and ninth decile) are the most likely to receive help (Table 4).

Moreover, residing in a location with a certain number of inhabitants is not an element that establishes a difference in the elderly's granting of support during difficult situations (Table 4). This characteristic is only influential in the reception of support, observing that the only group

⁹ As aforementioned, difficult situations are those related to the death of a close relative, illness, accidents, serious financial troubles, serious difficulties at work, as well as other situations considered serious by people surveyed in ENDIFAM, 2005.

differentiated to receive help are those living in places with 100,000 to 999,999 inhabitants, who are less likely to receive help in comparison to individuals residing in more urbanized areas.

The ENDIFAM survey allows us to differentiate between help received and granted in facing difficult situations. However, help granted during eventualities is not indicative of the supports that the elderly generally count on. A better approximation necessitates knowing what specific supports are provided or received in daily life¹⁰. By differentiating by gender, we clearly observe in Table 4 that in receiving and granting support, men are less likely to do so, in comparison to women. This result supports previous research that suggests that women tend to establish closer relationships with family, friends, and the community, thus, making them more likely to receive help (Guzmán, Huenchuan, and Montes de Oca, 2003).

In distinguishing by age, we find that individuals aged 60 to 69, in comparison to those 80 years or older, are more likely to provide help to others in daily activities, highlighting the functionality of this age group in performing activities that do not require the help of others. On the contrary, in receiving help, the younger elderly groups (60 to 79 years old) are less likely to receive help in their daily lives in contrast to those of more advanced ages (80 years or older) (Table 4). This may suggest the development of illness or functional deterioration that merits the activation of social network in facing the initial stages of dependency (Arroyo, Ribeiro, and Mancinas 2011).

Marital status only establishes differences in providing help in daily life, but not in receiving help. In providing help, only those who were separated or divorced presented the greatest probability of providing help in daily life. Further findings show that those concentrated in the lowest socioeconomic strata (first decile) are less likely to provide help during every day activities, while those in the highest strata (ninth decile) are more likely to give help. The supports received also vary by socioeconomic index, where the fourth and ninth deciles are those most likely to receive help (Table 4).

Individuals residing in areas of varying size are more likely to grant support, in particular among rural communities (less than 2,500 inhabitants). Other studies attribute this to weakened family and support ties among individuals living in urban settings; and, strengthened ties among those in rural communities (Ybañez, Vargas and Torres, 2005). However, this only happens in a unilateral manner and is not an explanatory element (Table 4).

¹⁰ ENDIFAM 2005 considers the last 12 months as the referential period for the activities associated with receiving or granting of support.

Table 4 Likelihood of receiving or providing support among the elderly population when facing difficult situations and in daily activities, Mexico, 2005				
	Support provided in facing difficult situations	Support received during difficult situations	Support provided in daily activities	Support received in daily activities
	<i>Exp (B)</i>	<i>Exp (B)</i>	<i>Exp (B)</i>	<i>Exp (B)</i>
Sex				
Males	0.999	1.124	0.878 **	0.783 *
Females	1.000	1.000	1.000	1.000
Age Group				
60 to 69 years old	1.754 *	1.014	1.542 *	0.585 *
70 to 79 years old	1.348 *	0.973	1.191	0.692 *
80 years or older	1.000	1.000	1.000	1.000
Marital Status				
Married or in civil unions	1.114 *	1.620 *	1.112	0.813
Separated or divorced	1.152	1.865 *	1.563 *	1.034
Widowed	1.181	1.105	1.094	0.953
Single	1.000	1.000	1.000	1.000
Socioeconomic index				
First decile	0.532 *	0.687	0.576 *	1.328
Second decile	0.606 *	0.716	0.820	1.444
Third decile	0.617 *	0.707	0.790	1.197
Fourth decile	0.674 **	0.623 **	0.915	1.537 *
Fifth decile	0.877	0.687	0.899	1.129
Sixth decile	0.853	0.609	1.136	1.407
Seventh decile	0.844	0.493 *	1.257	1.443
Eighth decile	0.756	0.597	1.129	1.073
Ninth decile	1.004	0.516 **	1.592 **	1.912 *
Tenth decile	1.000	1.000	1.000	1.000
Number of inhabitants				
Less than 2,500	1.131	0.753	1.609 *	1.106
2,500 to 19,999	0.912	0.786	1.373 *	1.123
20,000 to 99,999	0.809	0.793	1.412 *	1.200
100,000 to 999,999	1.019	0.611 *	1.259 **	1.159
More than 1,000,000	1.000	1.000	1.000	1.000

*p < 0.05 **p < 0.10

Source: the development and calculation of this data was realized by the authors using data from ENDIFAM 2005.

Discussion

In this article, we discuss the link between the flow of exchanges and aging. The two guiding ideas for this project are: (a) family networks constitute a fundamental source of support in the process of aging; and, (b) reciprocity functions as a social network-strengthening tool.

Our findings highlight the importance of the family in providing material, financial, and care support in old age. However, the family also assumes these responsibilities as a consequence of the limited availability of social services for the elderly in Mexico. Other research discusses the inability to provide support among Mexican families as demographic changes (decreased fertility

and mortality) occur, especially with the current socioeconomic conditions and those to come (Mancinas and Garay, 2011).

The empirical evidence presented in this article aims to show that the family is still the largest source of support, in giving and receiving, among the elderly; and, in particular, among those 80 years or older. Additionally, the younger elderly tend to provide more support to non-family members. The types of support provided by this population are characterized as moral, affectionate, and care-related, thus it is worth highlighting the role of these supports in inserting this group into a social network that may provide benefits in the present and the future.

There is no doubt that social networks, and the supports provided and received among the Mexican population behave differently depending on the life course, especially for the elderly population in Mexico. Therefore, it is not possible to generalize that the elderly population only functions as a group receiving support. The evidence from this study shows that mechanisms for reciprocity exist, that social networks are sustainable, and that these translate into better living conditions for this age group.

References

Abrantes, R., *Salubristas y neosalubristas en la reforma del estado: grupos de interés en México e instituciones públicas de salud, 1982- 2000*, El Colegio de Michoacán, 2010.

Antonucci, T. & Akiyama, H. (1987). Social networks in adult life and preliminary examination of the convoy model. *Journal of Gerontology*, vol. 42 no. 5, Washington, D.C., The Gerontological Society of America, september.

Ariza M, Oliveira O. Familias en transición y marcos conceptuales en redefinición. *Papeles de Población* 2001; (28): 9 - 39.

Ariza M, Oliveira O. Familias, pobreza y desigualdad social en Latinoamérica: una mirada comparativa. *Estudios Demográficos y Urbanos* 2007; 22: 9 - 42.

Arroyo, C., Ribeiro, M., y Mancinas, S. (2011). *La Vejez Avanzada y sus Cuidados. Historias, Subjetividad y Significados Sociales*. Monterrey: UANL.

Barros, C. (2001). Relaciones e intercambios familiares del adulto mayor, documento presentado en el simposio "Antropología de la vejez, cuarto congreso chileno de antropología", Santiago de Chile, Universidad de Chile, noviembre.

Campo, María de Jesús (2000). Apoyo informal a las personas mayores y el papel de la mujer cuidadores. *Opiniones y actitudes*, no. 31, Madrid, Centro de Investigaciones Sociológicas.

Comisión Económica para América Latina (CEPAL). *Panorama Social de América Latina, 1999-2000*. Naciones Unidas, 2000.

Comisión Económica para América Latina (CEPAL). *Las personas mayores en América Latina y el Caribe: Diagnóstico sobre la situación y las políticas*. Conferencia regional intergubernamental sobre envejecimiento: hacia una estrategia regional de implementación para América Latina y el Caribe del Plan de Acción Internacional de Madrid sobre el envejecimiento; 2003 Naciones Unidas, Santiago de Chile.

De Vos, S. & Holden, K. (1988), "Measures Comparing Living Arrangements of the Elderly: an Assessment", *Population and Development Review*, vol. 14, núm. 4, pp. 688-704.

De Vos, S., Solís, P. y Montes de Oca, V. (2004), Receipt of assistance and extended family residence among elderly men in Mexico. *International Journal of Aging and Human Development*, Vol. 58 (1), pp. 1-27.

Enríquez, R., "Construcción social de las emociones y exclusión social urbana en adultos mayores en la Zona Metropolitana de Guadalajara: los nervios como categoría sociocultural". En Montes de Oca, V. (Comp.), *Vejez, salud y sociedad*, IIS-UNAM, México, 2012.

García B, Rojas O. Los hogares latinoamericanos durante la segunda mitad del siglo XX: una perspectiva sociodemográfica. *Estudios Demográficos y Urbanos*, 2002;(50): 261 – 288.

Garay S, Mancinas S. Una aproximación a la relación familia, envejecimiento y política social en México. *Revista Kairós Gerontología* 2010; 13: 23-39.

Garay, S. & Montes de Oca, V. (2011), La vejez en México: una mirada general sobre la situación socioeconómica y familiar de los hombres y mujeres adultos mayores, *Perspectivas Sociales/ Social Perspectives*, Vol. 13, no.1, primavera/spring, pp.143-165.

Goldani, A.M., "La familia brasileña en transición". En *Cambios en el perfil de las familias: la experiencia regional*, libros de la CEPAL 36, Santiago de Chile, Naciones Unidas, Comisión Económica para la América Latina y el Caribe, CEPAL, 1993, 155- 183.

Gomes, C. (coord.) (2001), *Procesos sociales, población y familia. Alternativas teóricas y empíricas en las investigaciones sobre vida doméstica*, México, FLACSO y Miguel Ángel Porrúa.

González de la Rocha, M. (1999). Los recursos de la pobreza. Familias de bajos ingresos en Guadalajara, Guadalajara, Jalisco, El colegio de Jalisco/Centro de Investigaciones y Estudios Superiores en Antropología Social (CIESAS).

Guzmán JM, Huenchuan S, Montes de Oca V. Redes de apoyo social de las personas mayores: marco conceptual. *Notas de Población* 2003;(77): 35 – 70.

Hakkert R, Guzmán JM. Envejecimiento demográfico y arreglos familiares de vida en América Latina. En: Ariza M, Oliveira O, coords. *Imágenes de la familia en el cambio de siglo*, Instituto de Investigaciones Sociales – Universidad Nacional Autónoma de México, 2004: 479-518.

Huenchuan S. Envejecimiento e institucionalidad para el cuidado de las personas mayores. Seminario regional las familias latinoamericanas interrogadas. Hacia la articulación del diagnóstico, la legislación y las políticas, CEPAL 2009, Santiago de Chile.

Huenchuán, Sandra; Saad, Paulo. (2010). "Envejecimiento y familia y América Latina: el desafío del cuidado en la edad avanzada", en Lerner, Susana; Melgar, Lucía. (coordinadoras) *Familia en el Siglo XXI: Realidades diversas y políticas públicas*. PUEG-UNAM, COLMEX. pp. 115-135.

Instituto Nacional de Estadística Geografía e Informática. *Los hogares en México*, INEGI, México, 1997.

Lomnitz, L. (1994). *Redes sociales, cultura y poder: ensayos de antropología latinoamericana*, México, D.F., Editorial Miguel Ángel Porrúa.

López A, (2001) *El perfil sociodemográfico de los hogares en México 1970 – 1997*, Consejo Nacional de Población, México.

López M, Izazola H. (1994) *El perfil censal de los hogares y las familias en México*, INEGI, IIS-UNAM, México.

Mancinas S. & Garay S. (2011) Límites y potencialidades de la cobertura social para la población envejecida en México. En: Oswaldo Méndez-Ramírez, coord., *Rostros de Latinoamérica. Perspectiva multidisciplinaria*. IDAM-Institute of Iberoamerican Studies. Busan: República de Corea, 2011: 23- 43.

Montes de Oca, V. (2001) *El envejecimiento en México: un análisis sociodemográfico de los apoyos sociales y el bienestar de los adultos mayores*, tesis de doctorado, CEDDU, El Colegio de México.

Montes de Oca, V. (2004b) *Envejecimiento y protección familiar en México: límites y potencialidades del apoyo al interior del hogar*. En: Ariza M, Oliveira O, coords. *Imágenes de la familia en el cambio de siglo*, Instituto de Investigaciones Sociales – Universidad Nacional Autónoma de México, : 519-563.

Montes de Oca, V., (2004a) *Redes comunitarias, género y envejecimiento*, Colección Cuadernos de Investigación, Instituto de Investigaciones Sociales-UNAM, México, 161 pp.

Montes de Oca, V. & Garay, S. (2010), *Familias, hogares y vejez: cambios y determinantes en los arreglos familiares con personas adultas mayores en México, 1992 – 2006*. En: Chávez AM, Menkes C, coords., *Procesos y tendencias poblacionales en el México contemporáneo. Una mirada desde la ENADID 2006*. Secretaría de Salud, Centro Regional de Investigaciones Multidisciplinarias de la Universidad Nacional Autónoma de México, 2010: 402 - 432.

Montes de Oca, V., Garay, S., Rico, B. & García, S.J. (2013), *Living Arrangements and Aging in Mexico: Changes in Households, Poverty and Regions, 1992-2009* (in process).

Pérez, J. & Brenes, G. *Una transición en edades avanzadas: cambios en los arreglos residenciales de adultos mayores en siete ciudades latinoamericanas*. *Estudios Demográficos y Urbanos*, 2006; 21:625 – 661.

Rabell C, Murillo S. *El respeto y la confianza: prácticas y percepciones de las familias numerosas y pequeñas*. En: Rabell C, coord., *Tramas familiares en el México contemporáneo. Una perspectiva sociodemográfica*, Instituto de Investigaciones Sociales, UNAM y El Colegio de México, 2007.

Ramos L. *Family support for the elderly in Latin America: the role of the multigenerational household. Ageing and the Family*. *Proceedings of the United Nations. International Conference of Aging Populations in the context of the Family*, Department for Economic and Social Information and Policy Analysis; 1994 oct 15 – 19; New York.

Saad P, *Los adultos mayores en América Latina y el Caribe: Arreglos residenciales y transferencias informales*. *Revista Notas de Población*; 2005 (80):127 – 154.

Salgado-de Snyder, V. Nelly y Wong, Rebeca. *Género y pobreza: determinantes de la salud en la vejez*. *Salud Pública Méx [online]*. 2007, vol.49, suppl.4, pp. s515-s521.

SNDIF. *Diagnóstico de la Familia Mexicana. Encuesta Nacional de la Dinámica Familiar*, SNDIF, IISUNAM, 2005.

Varley A, Blasco M. *¿Cosechan lo que siembran? Mujeres ancianas, vivienda y relaciones familiares en el México urbano*. En: Gomes C, coord., *Procesos sociales, población y familia. Alternativas teóricas y empíricas en las investigaciones sobre vida doméstica*, México, FLACSO y Miguel Ángel Porrúa, 2001: 301-322.

Ybáñez E, Vargas E, Torres AL. *Factores asociados a la coresidencia de los adultos mayores de 50 años por condición rural – urbana*. *Papeles de Población*, 2005; 11: 29- 48.