

First-time motherhood and intergenerational solidarities during COVID-19

Paula Pustulka¹ and Marta Buler¹

¹ SWPS University in Warsaw

Address correspondence to: Paula Pustulka, c/o Youth Research Center / Młodzi w Centrum Lab, SWPS University in Warsaw, ul. Chodakowska 19/31, 03-815 Warsaw (Poland). Email: ppustulka@swps.edu.pl

Abstract

Objective: This study investigated the effects of the COVID-19 pandemic on intergenerational solidarities in Poland, specifically looking at flows between members of four family generations in the context of first-time motherhood.

Background: Unlike other crises, which typically mean that family members rely on one another for support, the pandemic challenges the scope of family solidarities. Little is still known as to how families navigate the particular vulnerability of first-time mothers who might face obstacles in accessing family assistance during lockdowns.

Method: The empirical material originates from a Qualitative Longitudinal Study (QLS) on transitions to motherhood in Poland (GEMTRA project, 2018-2021) and features case studies of intergenerational family triads (a first-time mother, her mother, and her grandmother). Two cases have been selected from a large pool of over 100 interviews conducted in two waves.

Results: We argue that the crucial stage of family life reified in welcoming the first child serves as special grounds for examining how family support and intergenerational solidarities are maintained, altered, or prioritized during the COVID-19 pandemic. We demonstrate that distinct types of associational, affectual, consensual, functional, normative and structural solidarities are variably affected.

Conclusion: We propose a new angle for identifying key support recipients within intergenerational solidarity flows in families during the crisis. Two directions of solidarity flows, towards younger and older generations, respectively, are presented.

Key words: first-time motherhood, intergenerational solidarity, family practices, the COVID-19 lockdown



1. Introduction

The restrictions imposed by national governments in response to the emergence and spread of the novel coronavirus in 2020-2021 have affected various spheres of people's lives, including the realm of family relations (Hiller, Grieg 2020; Settersen et al. 2020; Stanley, Markman 2020). Unlike other crises, which typically meant that family members relied on one another for emotional and practical support (e.g., Finch, Mason 1993; Kirschenbaum 2006), we argue that the pandemic has challenged the scope of family solidarities. Previous research ascribed particular vulnerability and need for family support to first-time mothers (Lupton 2000; Darvill et al. 2010; Loudon et al. 2016; Miller 2011; Budrowska 2000). During the COVID-19 crisis, however, first-time mothers' capacity to receive assistance from older family members may diminish. Emerging research at the junction of family support and the pandemic has already highlighted that generational bonds and support flows have become strongly conditioned by interdependencies among providers and recipients of family help in the social distancing and self-isolation regimes (Ayalon et al. 2020; Cantillon et al. 2021; Gulland 2020; Glazer 2020).

The paper focuses on intergenerational solidarity and its directions within the context of first-time motherhood during the COVID-19 pandemic in Poland. The main research question pertains to how intergenerational relations and solidarity flows towards first-time mothers have been altered by the pandemic. Thus, the first conceptual pillar relates to the types of solidarities within a family, based on the approach by Bengtson and Roberts (2009). The second pillar is connected with examining changes in intergenerational flows, treating the pandemic as a significant shift that warrants "before and after" or temporal comparisons (Bengtson, Oyama 2007; see also Neale 2019). The third aspect concerns vulnerability, which – as noted above – characterizes first-time mothers more broadly (Lupton 2000; Mcveigh 1997; Miller 2011).

Choices around solidarity practices became more complex with the novel coronavirus being a particular threat for seniors (Ayalon et al. 2020; Settersen et al. 2020; Gulland 2020; Stokes, Pettersen 2020). Consequently, it is important to question how distinct types of associational, affectual, consensual, functional, normative and structural solidarities (Bengtson, Roberts 2009; Szukalski 2019) are reconstructed and practiced throughout multigenerational kinship matrices during a global pandemic.

With the focus on solidarity 'practices', the core idea puts emphasis on their routinization and daily-ness (Morgan 1996), whereas 'fluid, negotiated and cross-cut' practices are present as actual endeavours, accounts and evaluations of dynamically led family-life (McCarthy, Edwards 2011: 88-91). To reiterate, we discuss how first-time mothers and their elders - mothers and grandmothers - navigate the demands and practices of intergenerational solidarities during the COVID-19 crisis in Poland.

2. Intergenerational solidarity practices

Seen through the prism of solidarities, practices are something that people use to understand their lives (Morgan 1996:11) and make choices about 'modifying their doings'

(Smart, Neale 1999:21). In fact, “the concept of ‘*solidarité*’ is frequently employed today to evoke practices of reciprocity and mutual assistance at family and kinship level” (Martin 2004:3), though it remains invariably connected to family interaction, unity, coherence and integration (Jansen 1952). Family solidarity often hinges upon manageable social distances, frequent contact and the bonds that engender a sense of belonging. A typology with six variants of intergenerational solidarity has driven the research since the 1980s (Bengtson, Schrader 1982; Bengtson, Oyama 2007; Bengtson, Roberts 2009; Szukalski 2019). Mostly measured quantitatively, the types can also be tracked in qualitative data (see e.g., Lowenstein, Ogg 2003).

In the adopted framework, six types of solidarities within a family (Bengtson, Roberts 2009) are applied in the descriptions of family practices (Morgan 1996). The first type is the associational solidarity, which relates to how often and in which ways family members engage in interactive activities and contacts when sharing responsibility for familyhood (McCarthy, Edwards 2011). The current approach also spans virtual contact (Fingerman et al. 2011), which became the pivotal form of communication during the social distancing era (Radzińska, Pustułka 2021). Next, affectual solidarity concerns the type and degree of positive sentiments about family members rooted in emotional aspects of reciprocity, warmth, closeness and trust (Szukalski 2019). It is a measure of relationships’ ‘temperature’.

Third on the list is consensual solidarity, which specifies the agreement on values, attitudes and beliefs between family members. Research has shown that dissonance between parents and their adult children causes intergenerational strain (Peng et al. 2019; Finch, Mason 1992), whereas cohesion is a contrapuntally good predictor of the quality of support in the face of a crisis (Kirchenbaum 2006). Functional solidarity, as the fourth type, concerns intergenerational assistance - be it financial, physical or emotional. For first-time mothers - or those in any other moment of difficulty, it shows the practical dimension of support, and sheds light on mutual expectations about the direction of solidarity in intergenerational relations (Fingerman et al., 2020).

As a pre-final type, normative solidarity envelops the strength of commitment to practicing family roles and meeting obligations (Szukalski 2019) behind societal visions of kinship and ‘familism’ (Daatland, Herlofsen 2003). Practically, it encompasses the family ‘display’ (Finch, Mason 1992), for instance during family gatherings like marriages or baptisms (Buler, Pustułka, 2020) which have been divested by the pandemic (Settersten et al. 2020). Lastly, opportunity structures related to spatial propinquity, family size and members’ health frame structural solidarity (Bengtson, Roberts 2008; Szukalski 2019). This type takes into consideration spatial proximity as a mediating factor of family relations, especially among adults (Bengtson, Roberts 2009; Finch, Mason 1992).

Beyond the six types, researching solidarity in the context of change (here exemplified by the COVID-19 crisis) calls for process structuring, which Bengtson and Oyama (2007) nestle in cohort affiliation, socialization and historical events. These concepts present an opportunity to track change and continuity in intergenerational comparisons, not only in the context of transmission and support itself, but also the generational impact that ties in life-courses at individual, family, and historical levels (Neale 2019). Cohort experiences or effects link an age group/generation with the individual reception of a socio-political event. They refer to occurrences specific “to a group born during a certain time period, and are

therefore experienced at a common level of their biosocial development” (Bengtson, Oyama 2007: 5). Acknowledging that first-time motherhood biographically happens at different ages, the fact it concurs with the COVID-19 crisis makes it a significant cohort experience.

In addition, intergenerational solidarity changes are conditioned by lineage effects. These “represent the bidirectional nature of intergenerational socialization, which can lead to continuities despite cohort and maturation differences” (Bengtson, Oyama 2007: 6). Last but not least, the significance of period effects encapsulates “the impact of socio-political events, such as wars, economic shifts, and political causes, which affect all groups within a society” (Bengtson, Oyama 2007: 6). These theoretical considerations explain why COVID-19 should be seen as impactful for the new picture of intergenerational solidarity.

3. Family/intergenerational relations in Poland

Polish society is often characterized as traditional and family-oriented (Slany 2002), with a strong emphasis placed on the intergenerational contract (Grotowska-Leder, Roszak 2016; Krzyżowski 2011). Grandparents were credited with providing care for 65% of the representatively sampled Poles (CBOS 2012) and enjoy societal respect (Wawrzyniak 2011). Although some claim intergenerational bonds have been tested by urbanisation and individualisation, 72% of families remain territorially concentrated to the same/neighbouring communes. 62% of those who have grandchildren see them at least once a week; the same holds for 59% of adults visiting aging parents whilst living apart (CBOS 2019). This creates certain expectations about family support towards these family members who find themselves needing help, be it as first-time mothers or as seniors (e.g., Grotowska-Leder, Roszak 2016). The intensification of motherhood (Sikorska 2011) has not made the expectations towards intergenerational assistance dissipate (Krzyżowski 2011), especially as current family policies are geared towards gender-conservative ideologies (Kotowska 2019).

Although fatherhood is changing among younger generations (Suwada 2017), only a minuscule fraction (1%) of Polish men took paternity leave in recent years (IPS 2020). Against the rigidity of the self-sacrificing motherhood model (Budrowska 2000; Sikorska 2011), family roles are less demanding of men, as also indicated by the normalization and high proportion of extra-marital births (23%) and solo-parenting mothers (19.4 % of all families with children; Eurostat 2019). Consequently, older women in the family - especially grandmothers - are expected to provide assistance and take on childcare responsibilities in many households (Wawrzyniak 2011).

Loyalty – and sometimes resentment – work as organizing principles for family-based at-home care in the aging Polish society (Krzyżowski 2011). This particularly relates to the roll-back of the state in terms of welfare provisions for dependents (Kotowska 2019), indicating limited accessibility of good-quality public care, both in terms of nurseries and care-homes for seniors (CBOS 2019). The so-far scarce qualitative research into the pandemic implications for families in Poland reveals that people invest in relations to combat sadness and fear. Lack of direct contact can be offset by maintaining quality bonds virtually (Radzińska, Pustułka 2021).

4. (First-time) motherhood and grandparenthood: Before and during the pandemic

Transition to motherhood is a multi-layered, socially vital, and biographically fundamental experience (e.g., Miller 2011; Budrowska 2000). It is also associated with a tremendous sense of uncertainty: First-time mothers report their lack of preparation for the unrelenting demands of early mothering necessitating the provision of 24-hour-a-day infant care, as well as fatigue and loss of personal time and space (Mcveigh 1997; Miller 2011). First-time motherhood often means that women feel like they lose control over their lives (Darvill et al. 2010), due to the discrepancy between the motherhood myth and the challenging realities of early parenting (Miller 2011). An ambivalent 'love/hate' relationship with an infant may emerge (Lupton 2000), untethering women's well-being (Miller 2011).

The current context of the COVID-19 outbreak exacerbates the chaos of maternal lives (e.g., Hillier, Greig 2020). Both experts and mothers in the postpartum period underline the repercussions of lockdowns in the form of poorer mental health and greater anxiety (Ceulemans et al. 2020). Subsequent COVID-19 restrictions and worsening economic standing translate into multiple family problems (Stanley, Markman 2020). Mothers, more often than fathers, need to limit their lives outside of the household and struggle to remain in employment or go back to work after a period of inactivity (e.g., Hillier, Grieg 2020).

In this context, it is essential to underline that offsetting the requisites of 24/7 motherhood was previously linked with kinship support. Transitions do not happen in a vacuum, but rather envelop a socialization environment (e.g., Bengtson, Roberts 2008; Sikorska 2019), wherein maternal confidence and strength can be derived from social surroundings that span various family members. In particular, the intergenerational appraisals acquired from own mothers are of particular importance for successful transitions 'back to self' (Miller 2011; Loudon et al. 2016). In this sense, practices of intergenerational solidarity can moderate the negative effects of becoming a mother for the first-time. The presence of grandmothers who offer care for their grandchildren is seen as especially valuable (Hayslip et al. 2019).

Emerging research suggests that seniors who provide care to grandchildren during the pandemic increase their risk of exposure to the virus (Glazer 2020). As a result, mothers of infants and small children may be unable to benefit from assistance offered by older kin (Gulland 2020) who formerly provided childcare systematically or just from-time-to-time (Hayslip et al. 2019; Wawrzyniak 2011). Due to the heightened risks, families must make difficult decisions about offering support during this crisis. Work by Cantillon et al. (2021) pinpoints material hardship as the key determinant of maintaining grandparents' involvement in childcare, suggesting that care contributions from grandparents to (grand)children should be accounted for despite the pandemic. Another factor families are taking into account is that social distancing has negative consequences for the mental health and cognitive functioning of older people (e.g., Aylon et al 2020; Settersen et al. 2020). Contributing to the knowledge gap on these decisions in the multigenerational context of first-time motherhood, the paper accounts for the inner-functioning of various family solidarities (Szukalski 2019; Bengtson, Roberts 2008) in times of profound social change (Bengtson, Oyama 2007) driven by COVID-19.

5. Study & methods

The analysis conducted for this paper is based on data from the GEMTRA project¹ (full title: *Transition to motherhood across three generations of Polish women. An intergenerational longitudinal study*) which has been underway since 2018. The project uses Qualitative Longitudinal Study (QLS) methods (Neale 2019) and is built on two waves of individual in-depth interviews (IDIs) with Polish women representing three subsequent generations of a given family (n=100 IDIs). As such, the interviewees - at Wave 1 (W1) - were pregnant women (G3; first-time [n=22] and second-time mothers [n=6]), their mothers (or in some cases mothers-in-law; G2) and grandmothers (G1; whenever it was possible). The research design purposefully centred on the experiences and relations between women.

Before fieldwork commencement, the project was approved by the Research Ethics Committee at the implementing institution. Deliberate and snowballing strategies of recruitment were used in the GEMTRA project. Prior to the interview, participants were provided with information about the study (the purpose and procedure of the interviews, anonymity, right to withdraw, data use, etc.) and asked to sign a consent form. Beyond the standard pseudonymization of study-participants, issues surrounding internal confidentiality and reporting findings within family clusters – as a possible threat to in-family anonymity - were explained (see Gabb 2010).

Twenty-seven families took part, with 58 interviews in W1 (2018-2019) and – due to funnelling and deaths in G1 – 42 interviews in W2 (2020). Pregnant women from the G3 generation became mothers between W1 and W2 and were interviewed whilst caring for small children (G4 generation) at Wave 2 (W2). Thus, W1 pregnancies happened before the pandemic, while W2 coincided with COVID-19 restrictions. This additionally meant that online/phone interviews were used in W2, especially to limit the risks for older generations (G2, G3).

Age-wise, G3 first-time mothers were between the ages of 22 and 40 at W1 (median 35yrs) with corresponding ranges for G2 and G1 standing at 54-70 (median 62yrs) and 65-95 (median 83yrs). The women's backgrounds differed in terms of coming from villages, small and medium-sized towns, as well as originating from larger cities in Poland. While all G3 interviewees had, or were pursuing, university degrees, fifteen women from G2 and G1 had lower (secondary - vocational/technical or only primary) education.

Question blocks in W1 pertained to family relations, including retrospective and prospective narratives on family solidarity, with dedicated probes on practices pertinent to female relatives and visions of the child's arrival. At the stage of data reduction (Miles, Huberman 1994), mostly thematic and conceptually ordered approaches focused on family solidarities between generations. Across waves, we tracked expectations and actual practices (Morgan 1996), while framing solidarity was theoretically informed by existing work (Bengtson, Schrader 1982; Szukalski 2019). After identifying key narratives, we took a closer look at the direction of solidarity flows.

Next, at the data display phase, the line of argumentation towards 'support recipients' resulted in analytical vignettes and case studies at the family-level (Neale 2019). According

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to Denzin and Lincoln (2000: 3), “a case study (...) involves an interpretative, naturalistic approach to the world. In this perspective, it means trying to uncover the sense of a phenomenon that people attach to it”. Following careful selection, we present two case-studies of multigenerational family triads (G1-G2-G3). We have specifically focused the analyses on kinship triads living in relatively close spatial proximity, so as to narrow down factors that can impact solidarities upon the birth of a (great)grandchild (G4).

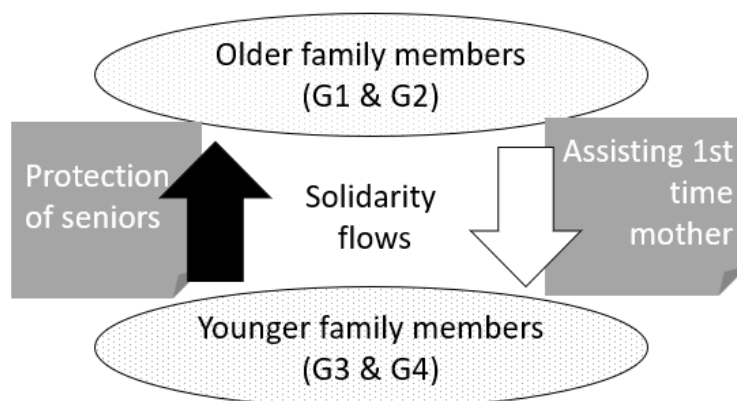
Case analysis serves as a comprehensive reflection of data-reading and offers a thick description. The goal of case studies in QLR is to compare, draw and bring together segments of case data gathered from clustered-biographies and/or at different points in time (Neale 2019: 111). The backdrop is socio-temporal change, here operationalized as the ongoing COVID-19 pandemic. The described triads tracked over two waves broadly depict two main types of solidarity flows found in the data. The chosen case studies were optimal exemplifications, with the most nuanced and detailed description of the represented types of solidarities. They were also selected due to ethical concerns, given that family members of the triads are very self-aware about intra-family relations (see also Gabb 2010).

6. Intergenerational solidarity flows during COVID-19

The analysis revealed that the COVID-19 had a clear - either verbalized or tacit - reorganizing effect on the flows of intergenerational solidarity in Polish families, suggesting a strong process structuring around lineage, cohort and period when social change is upon us (Bengtson, Oyama 2007). In the multi-generational constellations of support, families seemingly decided which family generation/members were most at risk in the context of the novel coronavirus. Based on this, two main types of solidarity flows were delineated (Figure 1).

‘Direction’ arrows specify which family generations - older (G1 & G2) or younger (G3 & G4) – are the main recipients of assistance. These result in solidarity flows towards either seniors or first-time mothers and their babies, elaborated below through two cases of the Zatorski and Kowalski families, respectively.

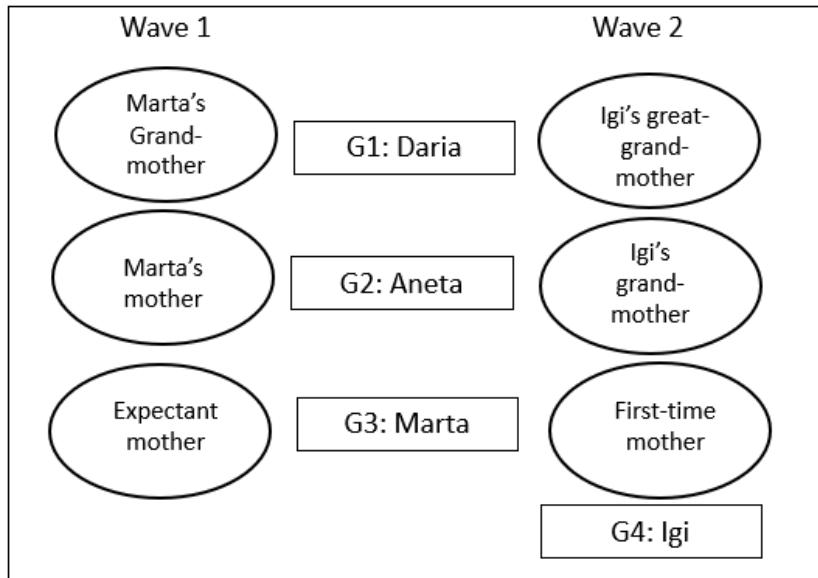
Figure 1: Two directions of solidarity flows during the pandemic



7. Zatorski family: For the grandparents' protection

The motto of Zatorski women could be “when we meet, we cook, eat, talk and drink wine”. The women who constitute this family have various life histories, but emphasize strong attachments and reliance on one other at different moments of their lives. This case study represents families in which there are quite consistent lineage effects on intergenerational solidarity and relations (Bengtson, Oyama 2007). Marta (G3), born in 1987, is the youngest woman in this trio. An educated professional, she is in an informal relationship and has recently given birth to her first child - a son named Igi (G4). Her mother is Aneta (G2, b. 1959), a university graduate who only ever worked part-time due to raising three daughters. Finally, the eldest is Daria who was born in 1937, has a secondary education and became a widow early.

Figure 2: Zatorski family map



Despite different socio-economic paths, all three interviewees report very strong affectual solidarity (Bengtson, Roberts 2009; Szukalski 2014) as a feature of a family life. Emotional bonds, as can be seen from Daria's (G1) narrative, hinge upon non-hierarchical relations:

Aneta and I are friends. I sometimes think I'm not her mother, but rather her friend (...) Same goes for my granddaughters (...) Once Marta came to stay with me (after a breakup) to cry and share her motivations (...) which means she trusts me and knows I would not criticize (...), just listen and hold her (Daria, G1, W1)

Strong affectual solidarity transfers into associational and functional solidarity-types (see Jansen 1952). Daria, Aneta and Marta declare they spend a lot of time together and such physical 'togetherness' signifies personal happiness and joy. In their narratives, food and eating meals together play an important role (see also Buler, Pustulka 2020).

G2: Aneta	G3: Marta
<p><i>Our time together is absolutely the best. I always tell them that this is my favourite thing to meet with them (...)</i></p> <p><i>They were here yesterday and cooked, (...) same a week ago to celebrate Mother's Day, and invited us to walk along the river. We truly spend loads of time together, meet up (W1)</i></p>	<p><i>We increasingly come up with things to do - this is our initiative as daughters - to do some things like picnic at the river (...) or go to an escape room (...)</i></p> <p><i>We travel together quite often, go to the mountains for the weekends or visit grandma who spends part of the year in the countryside (W1)</i></p>

The women are in agreement about their values, attitudes and the meanings of family bonds, showcasing consensual solidarity (Szukalski 2014; Bengtson, Roberts 2009) and the mentioned strong lineage effects (Bengtson, Oyama 2007). In addition, time spent together in the form of both routine and special occasion practices (see Buler, Pustułka 2020; Daatland, Herlofsen 2003) highlights the extended presence of functional and associational solidarity in the Zatorski family during W1 interviews. Similarly, the women share a strong conviction about the crucial importance of being a mother and ascribe their sense of identity and belonging to a home-space marked by particular qualities.

G1: Daria	G2: Aneta	G3: Marta
<p><i>Family is (...) a group of people who are close (...) It does not have to be sanctioned by law (...) Home has to have this smell of soup, or stew (...) when you make jam, the entire home smells. Even better when you are baking a cake. This is home.</i></p>	<p><i>Family is everything. It was always my dream (...)</i></p> <p><i>University was something added but my biggest dream was to have a family (...)</i></p> <p><i>Family is my entire life</i></p>	<p><i>Family is those closest to you (...)</i></p> <p><i>I am now creating my own family (...) with my boyfriend and a son who will be born (...)</i></p> <p><i>Grandma is (family), you visit her in this absolutely warm home, full of delicious food (...)</i></p>

All four types of solidarity in the Zatorski family overlap and act as a strong foundation for multifaceted assistance (Szukalski 2014; Bengtson, Roberts 2009; Jensen 1952). This

extends to first-time motherhood, as Marta (G3) voiced a detailed expectation of the support she would be receiving within an intergenerational setting during W1 interview (see also Grotowska-Leder, Roszak 2016; Bengtson, Shrader 1982). Functional, normative and affectual solidarities characterize her statement:

When I think about the early time after birth, then I am sure my mother will be of great help. She is made for this; she raised three daughters and can't wait (to be a grandma). (Marta, G3, W1)

This plan was confirmed by Aneta (G2) and then, once Igi (G4) was born, the family wanted to offer childcare and practical help to Marta (G3). However, the pandemic erupted and the Zatorski family altered the direction of solidarities. In their collective view, the most vulnerable were the oldest - G1 and G2 - so these generations had to be protected (Glazer 2020; Stokes, Patterson 2020):

My mum completely stopped coming. At first, we would not see our parents at all, then we'd see them in the forest to go for a walk, or in a garden with a 3-meter distance between us. This was all so extremely hard and unpleasant (Marta, G3, W2)

Grandparents did not provide any help in childcare during the national quarantine (see also Gulland 2020), which could be interpreted as a strong period effect (Bengtson, Oyama 2007). Physical distancing was not limited to women, but also demanded by Aneta's father (G2) who saw himself and his wife as very vulnerable. He tried to cut all possible sources of infection:

When the epidemic was announced, my husband went crazy. He said we'd stop going to the store so as not to get exposed. We started to buy everything online, even though I did not like it too much (Aneta, G2, W2)

In contrast to her husband, Aneta did not seem to be so afraid for herself, yet respected her husband's concerns. Even though both normative understandings of solidarity and the emotional bonds of its affectual kind were still in place, the flows of support had been adjusted to protect the seniors (Glazer 2020; Stokes, Patterson 2020). The G3/G4 generations limited their visits and adhered to safety rules, mostly meeting with their parents (G2) outside.

The great-grandmother Daria (G1) was shielded even more and, ultimately, could not play an active role in Igi's (G4) life. This was seen as a "natural" decision: as she lived in the countryside when COVID-19 started, neither her daughters, nor granddaughters had visited for months. For the family members, it seemed obvious to open a protective umbrella over those whose health might be critically impacted. For Marta, however, it was a significant moment of worsened wellbeing (see also Mcveigh 1997; Miller 2011):

When Igi was born I tried not to be at home a lot. I would make plans non-stop as it was summer and I could go for walks (...) This early period of the pandemic when all my friends

had moved to their countryside homes and we were sitting locked away at home was psychologically extremely difficult for me (Marta, G3, W2)

After the Zatorski family overcame the first shock, they tried to find safe ways to meet again and offer mutual and practical support, also to counter the possible negative effects of social distancing (see Aylon et al. 2020; Glazer 2020). This was directed at the 'edge' generations, as both the grandmother (Daria, G1) and the first-time mother (Marta, G3) had struggled considerably:

My mood totally plummeted (due to the) pandemic. I felt locked away at home with a baby. My entire day was about sitting at home. I was fed up (...) (Marta, G3, W2)

While the family reported a dilemma between improving Marta's psychological state (see also Ceulemans et al. 2020) and the older generation's health, they never had any doubts that the first-time mum 'could make it' and was fully capable of taking care of herself and her baby. They only changed their mind slightly when they supported Marta in searching for a new job, confirming that economic struggles warrant grandparents (but not great-grandparents) stepping in despite the risks (see also Glazer 2020; Gullan 2020)

COVID has turned everything on its head and there are completely new situations, like with Marta looking for work now. It has taken her much longer I reckon (...) We have supported her as much as we can by taking care of Igi (Aneta, G2, W2)

Over time, family solidarity has pushed the Zatorskis towards the concerted management of togetherness and restrictions: although G1 was still protected, G3 was equally seen as needing support from G2. In the family puzzle, the first-time mother eventually received it. Prolongation of the period effect (Bengtson, Oyama 2007) paired with exceptionally strong affectual solidarity and sense of familyhood, shifted rule-adherence. Routine assistance and meetings began again between G2 and G3/G4:

Marta started visiting me, but we had different stages of fear and anxiety because (her husband) was working (...) She came a lot at some point: arrived early morning and left late in the afternoon. I tried to help her (with the baby) (Aneta, G2, W2)

It appears that the G1 and G2 were still considered at risk health-wise, yet associational solidarity (Szukalski 2014; Bengtson, Roberts 2009) put the family 'back on track' in regard to what was planned for G4 support before the pandemic. Importantly, for the sake of her parents' health, Marta and her partner made a trade-off between kinship and friend-networks, remaining isolated from the latter so as not to expose G2 to the virus:

Marta is a very social person. She needs contacts, so I think that for her this time is very difficult. If she was not worried about giving (the virus) to us, they would meet with friends. Now they severely limit their contacts (Aneta, G2, W2)

Throughout the lockdown and national quarantine, nobody has visited the great-grandmother (G1). In this sense, family solidarity was altered through the prism of responsibility for the health of the oldest and most endangered member – Daria, this time showing how period and cohort effects are overlain (Bengtson, Oyama 2007). Moreover, because of the risk management between G2 and G3, shared associational activities were ruled by normative practices. The love and care created agreement that allowed a “remote” form of affectual and consensual solidarity. Regardless of the COVID-19 pandemic, first-time motherhood tightened the bonds between G3/G4 and G2 (see also Ayalon et al. 2020; Morrow-Howell et al. 2020), whereas it also loosened the ties of G1:

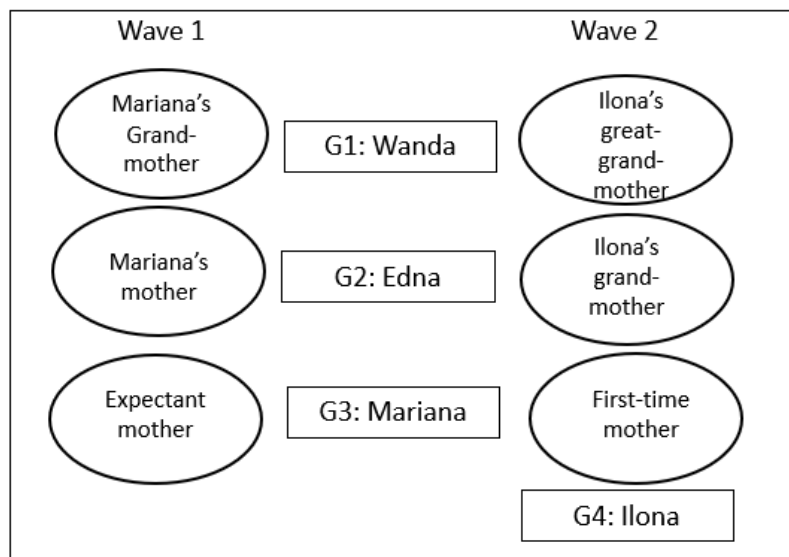
Our relationship was always close but, perhaps, I would say that Igi has made us even closer. My mum now completely understands what I am going through, without words, just mother to mother (Marta, G3, W2)

For the Zatorski family, the pandemic caused a disruption in functional solidarity, but it did not impact affectual solidarity (Szukalski 2015; Bengtson, Roberts 2009). In the broader dataset, this seems connected with high cohesion in lineage effects (Bengtson, Oyama 2007) that directly shape intergenerational solidarity. In the majority of the studied families, all members recognized older generations’ vulnerability to COVID-19. As a main finding, we see that the G1 family members – meaning great-grandparents – are consistently isolated. Similarly, as the Zatorski case shows, the G3 generation (i.e., first-time mothers, their partners and children) - initially did not see their senior-parents (G2). In time, however, the flows of solidarity became more nuanced. G1 and G2 remained protected, yet consensual solidarity helped to forge contracts around practical support for first-time mothers, even if this happened later than expected and on a smaller scale. In addition, it seems that the oldest family generation (G1) became somewhat excluded from family solidarity flows, provided they could manage on their own. This changes the functional solidarity type and generational contracts (see also Bengtson, Roberts 2009; Krzyżowski 2011; Szukalski 2014).

8. First-time mother in trouble and ‘all-hands-on-deck’ in the Kowalski family

The second variant of solidarity - directed towards younger family members - is exemplified by the Kowalski family, which displays and enacts particularly strong forms of family solidarity towards its most recently born member (Ilona, G4) and her mother Mariana (G3).

Figure 3: Kowalski family map



It should be noted that the family is relatively well-off and highly-educated. The biographies of the women representing the G1 (Wanda) and G2 (Edna) generations are characterized by prestigious university degrees and successful careers which make their cohort experiences similar (Bengtson, Oyama 2007). Both women led independent, big-city lives and divorced their husbands once the children had grown up. Although the G3 first-time mother Mariana gained a tertiary degree as well, her life has been marked by recurring crises related to economic precarity and mental health challenges. She decided to move back to her locality of origin due to being pregnant and single. Unlike Marta from the Zatorski family, Mariana could not count on a partner for support (see also Hillier, Grieg 2020). While in her case there was no father involvement at all, it is representative of the broader dataset, since in the lives of many couples, husbands/partners were generally absent and/or focused on work rather than parenthood, especially during the pandemic.

Prior to the birth of the (great)-granddaughter and the novel coronavirus, solidarity in the Kowalski family hinged upon the structural conduit of limited spatial distances (see Bengtson, Roberts 2008; Szukalski 2019) and the normative belief about one's duties that, however, did not need to be acted upon daily. The family members live relatively close together (in one district), but – surprisingly in the Polish context (CBOS 2019) - the G1 and G2 members engage in few intergenerational contacts. Illustrating the concurrence of low associational solidarity and enduring functional and normative family solidarities, this is how Edna (G2) described her relationship with Wanda (G1):

I never had an honest relationship with her (my mother), never shared any of my problems with her. But she did help me later on, when my children were small (Edna, G2, W1)

Good economic standing meant that functional solidarity was weaker between G1 and G2 but capitalized on when Mariana (G3) - was in financial/employment trouble and at risk of losing benefits:

My mother and I had various troubles but I have to say that things have been good since my return (...) Mum hired me at her company, so that I could get maternity leave. I will be getting paid, quite a lot, for one year after the birth (Mariana, G3, W1)

Across all three interviewed generations, the women claimed they were “not close” because emotional propinquity was made impossible by numerous conflicts related to the past and indicative of low affectual solidarity (Bengtson, Roberts 2008; Szukalski 2019).

G3: Mariana	G2: Edna
<i>I have a lot of resentment towards my mum and my parents regarding (my teenage years). Their reaction towards my illness, namely the fact that they negated it (...) perhaps if they (had done) something else, I would not have been sick all my life (...) I went through therapy and now I know it's in the past, that I will never get what I was missing in childhood (W1)</i>	<i>My relationship with Mariana is difficult (...) she says nothing or very little about herself (...) It's a shallow bond. I help her a lot financially and with Ilona (G4) but it's hard to call it a close connection. (...) At one point my contact with my mother (G1) broke off (...). She pretends not to see me, not to recognize me on the street (...) When we meet at Mariana's place, she does not speak to me (...) She hasn't spoken to me in a year (W2)</i>

The birth of the (great)grandchild and the all-encompassing sense of crisis accompanying the COVID-19 pandemic did not revolutionize the intergenerational flows of family solidarity for the most part. While the G1-G2 solidarity remained stagnant, all forms of assistance from older generations became directed at the first-time mother Mariana and her daughter Ilona (G4). Importantly, despite being older and, thus, exposed to greater COVID-19 risks (Glazer 2020; Stokes, Patterson 2020), neither G2 nor G1 were seen as requiring care, even though the family's contact with Wanda (G1) was initially limited. The self-perceived strength and independence of Edna (G2) engendered normative understandings and functional consequences linked to a central notion that it was Mariana (G3) and her daughter who needed support:

I dedicate a lot of time and money to my granddaughter. I am the one who financially supports her and I spend a lot of time with her (...) The situation is what it is: Mariana simply needs help. (...) My partner and I have declared that we will help her no matter what. She simply

takes us up on this offer. I am at their place every other day, sometimes every day (Edna, G2, W1)

Wanda (G1) places the solidarity emphasis on slightly different aspects, focusing more on affectual flows of support (Martin 2004; Szukalski 2019), although she also feels compelled to be emotionally involved:

Mariana needs support all the time. She either has love trouble or (fights) with her parents. I worry about her all the time and can't escape this (Wanda, G1, W1)

With illness, sole motherhood and financial dependency, Mariana herself recognizes the need for family solidarity:

The plan was to move as close to my mum and grandma as possible because I actually need help (...) After the birth, my sister had a week off to care for me, and mum came over once or twice to stay the night (...) The first month I never bathed Ilona myself because somebody would come over to bathe her: my sister, my mum, grandma (Mariana, G3, W2)

The new mother rents a flat with her daughter, yet the bulk of financing, care and home tasks are shouldered by her mother (G2) and grandmother (G1). From the perspective of Mariana (G3), this indicates continuous, constant and daily practical engagement (see Morgan 1996) that overrides broken or strained bonds between older generations. Instead, it centralizes the affectual relationships between a baby (Ilona, G4) and her elders, typifying Polish visions of intergenerational solidarity and grandparents' involvement (Wawrzyniak 2011; Grotowka-Leder, Roszak 2016). The narrative of Edna (G2) confirms this, even though it is more focused on normative and functional realms.

G1: Wanda (W2)	G2: Edna (W2)	G3: Mariana (W2)
<p><i>The situation required me to engage in assisting Mariana because she was alone. I went to see her all the time (...) Even though public transport was terrible (...) I managed. In the summer heat it was hard, so I didn't go every day but every other day. I went round at 11 or 12. I cooked, I brought shopping in a backpack, I went for a walk with the baby, fed her, helped with bathing. Around 7pm I went home.</i></p>	<p><i>I buy all of (Ilona's) clothes (...), shoes, diapers; earlier I bought formula, now I buy healthy food, toys, books (...) Often, almost every month, I buy something to make sure she has warmer clothes and shoes (...) At least once a month I buy toys and books, other equipment like utensils, bottles, cups, everyday items, pacifiers (...) Once a month I buy presents, plus for birthdays, Santa and so on.</i></p>	<p><i>I neither shop nor cook (as this is done by my family members) (...) Every day around 5 pm we go to see my grandmother (G1) to eat dinner; she invites us and has a very strong need to see Ilona, ideally everyday (...) We stay there until the evening and then come home and go to sleep (...) Very often we go to the summer house for the weekend (...) This weekend my mum (G2) took Ilona on Saturday afternoon and brought her back Sunday night (...) I know that if I asked she would help me even more. (...) At one point my illness got worse and then my mum took Ilona to her place for a week, I think, I visited (my daughter) there (...) 50% of doctor's visits for Ilona are done by my mum, 80% of cooking is done by my grandma (...) Someone else is taking care of Ilona several times a week</i></p>

It can be concluded that normative and functional solidarities overlap with the new development of affectual forms of intergenerational bonds connected to the birth of the child and the challenges of first-time motherhood, exacerbated by the pandemic (see also Cantillon et al 2020; Glazer 2021). In addition, structural responsibility over the social position of Mariana (e.g., housing costs, labour market/salary) lies squarely on the G2 generation, as Edna pays for the nursery of her granddaughter and buys the vast majority of her clothing, toys and similar items. While Edna (G2) does not evade responsibilities that span structural, normative, functional and affectual flows, she is somewhat ambivalent about the assistance that her daughter benefits from: *Mariana sees profit in getting help from me, my mum, her sister (...) She has to do a lot less (Edna, G2, W2)*. Because the family was

worried about Mariana and her daughter, who admittedly faced worse health periods during the COVID-19 crisis, the lockdown was not at all an issue for family practices. In fact, Edna (G2) spent even more time with her granddaughter and offered more care:

(During the national quarantine) I went for a walk with my granddaughter every day, (...) I could not go to the park as it was closed, but I walked through empty streets or we would go to the summer house every few days, when the weather was nice. (...) The contact with the family (was) not restricted because we met in the countryside (Edna, G2, W2)

To conclude, the Kowalski' family situation warranted disregarding the pandemic as the lesser risk than leaving the vulnerable younger generations – G3 and G4 - without assistance. Despite the coronavirus spread, other families in the study also decided that the first-time mothers should be the main recipients of support, especially when coupledom in the procreation family was strained or economic worries loomed for G3 (see also Hillier, Grieg 2020; Stanley, Markman 2020). The prolonged 'return to normalcy' in the context of transitions to motherhood (Darvill et al. 2010; Miller 2011; Lupton 2000; Mcveigh 1997) meant women were enveloped in support.

With this direction of support flow, functional solidarity was driven by material and care assistance from G1 and G2, as well as the strong convictions of these women about fulfilling their roles towards their (great)grandchildren (normative solidarity; see also Grotowska-Leder, Roszak 2016; Gullan 2020; Daatland, Herlofson 2003). As a result, the G1 and G2 generations provided tremendous assistance that relied on frequent direct contacts and shared activities in a functional and normative sense, yet with a varying affectual quality that could (but did not have to) translate into a sense of emotional closeness (see also Bengtson, Shrader 1982; Bengtson, Roberts 2008; Szukalski 2019). In addition, it is hard to see any form of consensual solidarity in such cases. It appears that structural solidarity plays a bigger role in underpinning the identification of the G3/G4 as the 'weaker' family members within intergenerational kinship networks.

9. Discussions and conclusions

As expected, the presented findings highlight that family practices (Morgan 1996; Sikorska 2019) in the realm of intergenerational family solidarities acquire certain new shapes and meanings in the face of the COVID-19 pandemic.

The selected case studies of female family triads represent the two main models of solidarity flows discovered in the broader dataset of the GEMTRA project. In particular, they illuminate how the current crisis differs from adverse circumstances in the past in the sense of strongly limiting the capacity of direct intergenerational family support by default (Gulland 2020; Cantillon et al. 2021; Radzińska, Pustułka 2021). Although previous crises also influenced family solidarities (Bengtson, Oyama 2007), the novelty of the coronavirus is entrenched in age-based vulnerability caused by direct contact (Glazer 2020). Effectively, it makes it harder for the families to face the 'disaster' together (see also Kirchenbaum 2006).

The biggest solidarity challenges are primarily due to the inherent uncertainty as to how to deal with two competing needs. On the one hand, older generations - G2 and G1 in the study - are most at risk of severe health consequences from catching the virus (Glazer 2020; Stokes, Patterson 2020). On the other hand, the families are also well-aware that first-time motherhood is a considerable challenge for a woman, even without the pandemic (see also Miller 2011; Budrowska 2000). In Wave 1 of the study, the expectant mothers and their elders were making specific plans about practical assistance, pointing to the importance of functional, associational and affectual solidarities within a physical co-presence enabled by structural proximity (see also Bengtson, Shrader 1982; Bengtson, Roberts 2009; Szukalski 2019). The pandemic has altered their capacities, not only favouring technology-mediated contact (Fingerman et al. 2020), but also removing some of the normatively desirable solidarity-affirming events like christenings (see also Settersen et al. 2020).

As the data purposefully investigated families where proximity of residence would normally let people engage in family practices of togetherness (e.g., Szukalski 2019; Bengtson, Oyama 2007; Silverstein, Bengtson 1997), we could see the new face of structural solidarity limitations in how the oldest generations were spatially isolated (the Zatorski family) and solidarity flows towards them partially ceased. Conversely, for families where first-time mothers were in crisis (the Kowalski family), living close together was the basis for all other types of intergenerational solidarities, with the exception of affect. Consequently, we have shown that families reflect upon generational needs and challenges, offering protection and assistance accordingly. The rules of socio-spatial distancing and isolation make it impossible for kin-groups to avert risks for seniors and help first-time mothers at the same time.

The interviewed families typically pondered - tacitly or directly - as to whether the first-time mother could deal with the crisis on her own. In most cases - like the Zatorski family - this was indeed achievable and the national quarantine created bubbles to protect the oldest family members. The wellbeing of first-time mothers (G3) and their babies (G4) was considered less critical due to the conviction that they were still 'better off' than seniors. Conversely, alternative models characterized families where first-time mothers faced additional life challenges - lack of support from partners, adverse housing or health conditions, unemployment or being otherwise in difficulty. Such conditions made it impossible for families to overlook the risks that the pandemic isolation would create for the first-time mother and (great)grand-child. As illustrated by the case of the Kowalski family, protecting seniors became secondary to continuing support for the younger family members. Conclusively, in decision-making, structural conditions - such as spatial proximity, financial stability and the existence of coupledom in the youngest families remained significant during the pandemic (see also Stanley, Markman 2020).

More generally, it can be stated that the pandemic does not have a special power to fully create or completely damage certain solidarity types, as delineated by Bengtson and Roberts (2008, see also Szukalski 2019). This was visible especially in affectual and consensual solidarities, which appeared to work independently of changes in other realms. In other words, emotional closeness or distance, as well as value-agreements, were rarely altered. In our dataset, the normative solidarity of meeting obligations was connected to broader change (see also Krzyżowski 2011). The processes of structuring - periodical, cohort- and

lineage-related - seem to be the basis for flows directed at a given generation at a certain time (Bengtson, Oyama 2007).

At a broader level, the paper demonstrates that the pandemic not only makes people 'modify their doings' (Smart, Neale 1999: 21) but necessitates difficult choices in the realm of period effects that shape intergenerational solidarity (Bengtson, Oyama 2007). Some of the key solidarity tenets of mutuality and interaction (Jansen 1952; Martin 2004) became suddenly ill-advised. Different intersectional variables - such as the possibility to obtain support without intergenerational assistance - became deterministic of the lasting solidarity overall. Possible other determinants relate to class backgrounds, which were not tackled here but indicate a direction for future analyses.

From the perspective of first-time mothers (G3), the pandemic has exacerbated the sense of losing control over life (see also Darvill et al. 2010; Miller 20011). It is undeniable that the coronavirus restrictions prolong the process of 'returning to normal' after the first birth, as it deprives them of support when families turn their focus on seniors. Intergenerational affirmation - normally vital for first-time mothers' sense of confidence in parenting (Loudon et al. 2016) - may thus be delayed and lead to heightened uncertainty, as well as negative long-term consequences during the postpartum period (Ceulmans et al. 2020). First-time mothers whose plans for engaging grandparents in childcare cannot be realized (see also Cantillon et al. 2021) must conceive alternative strategies for reconciling motherhood with other life-spheres, particularly work. It remains to be seen how much the pandemic will influence the popularity of the pre-existing intergenerational childcare provision (see also Grotowska-Leder, Roszak 2016, Wawrzyniak 2011, Szukalski 2019) that shaped grandparenthood in Poland.

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Information in German

Deutscher Titel

Erstmalige Mutterschaft und Solidarität zwischen den Generationen während COVID-19

Zusammenfassung

Fragestellung: Die vorliegende Studie untersucht die Auswirkungen der COVID-19-Pandemie auf die Solidarität zwischen verschiedenen Generationen in Polen und betrachtet insbesondere die Ströme zwischen Mitgliedern von vier Familiengenerationen im Kontext der Erstmutterschaft.

Hintergrund: Im Gegensatz zu anderen Krisen, bei denen Familienmitglieder typischerweise aufeinander angewiesen sind, um Unterstützung zu erhalten, stellt die Pandemie die Tragweite der Familiensolidarität in Frage. Es ist noch wenig darüber bekannt, wie Familien mit der besonderen Verwundbarkeit durch erstmalige Mutterschaft umgehen. Diese Gruppe könnte während des Lockdowns beim Zugang zur Familienhilfe auf Hindernisse stoßen.

Methode: Das empirische Material stammt aus einer Qualitativen Längsschnittstudie (QLS) zu Übergängen zur Mutterschaft in Polen (GEMTRA-Projekt, 2018-2021) und enthält Fallstudien zu generationenübergreifenden Familien-Triaden (eine Erstmutter, ihre Mutter und ihre Großmutter). Aus einem großen Pool von über 100 Interviews, die in zwei Wellen durchgeführt wurden, wurden zwei Case Studies ausgewählt.

Ergebnisse: Wir argumentieren, dass die entscheidende Phase des Familienlebens, die durch die Aufnahme des ersten Kindes verdinglicht wird, als besonderer Anlass dient, zu untersuchen, wie familiäre Unterstützung und generationenübergreifende Solidarität während der COVID-19-Pandemie aufrechterhalten, verändert oder priorisiert werden. Wir zeigen, dass verschiedene Arten von assoziativen, affektiven, konsensuellen, funktionalen, normativen und strukturellen Solidaritäten unterschiedlich betroffen sind.

Schlussfolgerung: Wir schlagen einen neuen Blickwinkel vor, um die wichtigsten Unterstützungsempfänger innerhalb der Solidaritätsflüsse zwischen den Generationen in Familien während der Krise zu identifizieren. Es werden zwei Richtungen der Solidaritätsflüsse – jeweils hin zu jüngeren und zu älteren Generationen – dargestellt.

Schlagwörter: Erstmutterschaft, Solidarität zwischen den Generationen, Familienpraktiken, die COVID-19-Sperre

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Paula Pustułka: <https://orcid.org/0000-0001-6679-0365>

Marta Buler: <https://orcid.org/0000-0001-7205-4831>



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