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## Filial Maturity and Attachment Dimensions as Predictors for Prospective Caregiving Expectations

**Abstract.** The role of attachment and filial maturity dimensions in predicting expectations of filial caregiving was investigated on a sample of 296 (186 females) prospective caregivers aged 26 to 60. Consistent with previous studies, attachment avoidance negatively predicted the filial caregiving expectations. These effects were partially mediated by filial comprehending, which predicted higher self-expectations in providing assistance to the parent. Filial distancing was proven to be a negative predictor of caregiving expectations, although in low relation with attachment avoidance. Findings suggest the importance of further exploration, as well as the importance of the concept of filial maturity in the context of filial responsibilities and long-term parent-child relations.

**Keywords:** filial responsibility, adult attachment, caregiving

**Słowa kluczowe:** przywiązanie, filiacyjna odpowiedzialność, opieka nad starszym rodzicem

### INTRODUCTION

Intergenerational solidarity, including filial responsibility in terms of care provision to parents in later life, presents a domain of parent-offspring relationship where interpersonal dynamics exerts broader social and economic consequences (Gans, Silverstein, 2006). Tasks of renegotiation of the parent-child relationship and emotional coping with these changes are universal and specific for adult development (Cicirelli, 1993). Filial willingness to meet the caregiving needs of parents has theoretically been linked to developmentally emerging abilities of adults to perceive their parents as individuals, outside of their parenting role, termed as *filial maturity*. The development of this successor of achieved individuation, enables the adult child to perceive parents as peers and accept their limitations (Birditt et al., 2008). Evidence

suggests dispositional attachment is related to anticipated caregiving preparations, decisions to continue with caregiving in the future, and the concern about parent's well-being in adult children (Karantzas et al., 2010; Morais et al., 2019; Sörensen et al., 2002). The present study explored the association between filial maturity and attachment dimensions as well as their joint effects on filial caregiving expectations (FCE) in prospective caregivers.

### ATTACHMENT AND FCE

The attachment theory framework has been applied in the research of filial caregiving transactions (Cicirelli, 1993; Karantzas et al., 2019; You et al., 2019) as it is appropriate for the exploration of relations that are familiar, relatively unique, a part of identity, and include a grieving

reaction after loss (Bowlby, 1988). Early experiences of the style and quality of care received from attachment figures result in internal working models as generalized beliefs and expectations about the warmth and responsiveness of others and the worthiness of the self (Bowlby, 1988). These models serve as prototypes for future relationships and could affect how the child offers care to significant others later in life (Paulson, Bassett, 2015). Children with insecure attachment who have perceived their caregivers as inconsistent or rejecting caregivers are likely to develop a working model in which others are considered as unresponsive, while the self is either unworthy of care or self-sufficient and not in need of such care.

Individual differences in attachment styles present stable patterns of expectations, emotional reactivity or behaviours that can be described through two orthogonal dimensions: anxiety describes a level of doubt in one's own value and fear or possible unwillingness of important others to provide security, while avoidance represents a level of distrust towards others and a tendency for independency and emotional unavailability (Brennan et al., 1998; Mikulincer, Shaver, 2017). A low expression of both dimensions is characteristic for the secure attachment style. Efficient caregiving implies a level of security which enables caregivers to direct attention to the distress of the attachment figure, rather than own emotional state (Mikulincer et al., 2005).

Signs of a parent's need for care trigger attachment mechanisms in the adult child as a prospective caregiver. Cicirelli (1993) found that secure adult attachment relates positively to the frequency of caregiving and reduces caregiver burden, independently of the amount of care needed by the parent. Both carer's attachment security and anxiety have been positively associated with the current sense of filial obligation (Chen et al., 2013; Karantzas et al., 2019; Merz, Consedine, 2009; Morais et al., 2019). However, anxiety was also predictive of carer burden (Carpenter, 2001) or did not contribute to the explanation of the amount of care provided or planned (Karantzas et al., 2010). Avoidant individuals express reluctance towards signs

of other parent's vulnerability or weakness, avoid interdependence, and generally provide less emotional care (Carpenter, 2001; Gopalan et al., 2013; Karantzas et al., 2010; Mikulincer, Shaver, 2017). When assessing caregiver's capability to comfort their parent without hostility, relationship specific attachment should be evaluated (Chen et al., 2013). Explorations of the effects of attachment dimensions on prospective caregivers could contribute to the understanding of the long-term effects of family interactions. Exploring the anticipated filial solidarity on samples of progeny showed that securely attached children start their preparation for caregiving earlier (Paulson, Bassett, 2015) and feel more prepared than those anxiously attached, even after the objective preparedness was controlled for (Sörensen et al., 2002). Perceiving oneself as able to provide care predicts higher anticipation of parent's caregiving needs (Morais et al., 2019). Previous explorations of FCE showed substantial differences when explored from the perspectives of prospective caregivers and care seekers. Parents express higher needs for affective and companionship solidarity in comparison with financial and material transactions, while adult children as prospective caregivers report higher overall expectations across all types of solidarity (Banov, Smojver-Ažić, 2019; van der Pas, van Tilburg, Knipscheer, 2005; Wakui, Cheng, 2017).

Part of adult children accept mobilisation in the caregiver role despite their own preferences, when other sources of social support are not (perceived as) available, or assistance becomes urgent (Gans, Silverstein, 2006; Paulson, Bassett, 2015). Exploration of the role of attachment in the emergence of a psychological maturity in the specific filial role received little empirical examination. Intriguing questions are yet to be answered: could the adult child overcome the negative effects of insecure attachment on the willingness to assist the ageing parent through reaching filial maturity? This study explores a possible mediating role of relational maturity as a developmental component of adult children as prospective caregivers.

## **FILIAL MATURITY AS A POTENTIAL MEDIATOR**

Filial maturity represents a process of balancing between personal autonomy and concern for the parent, depending on the child's individual psychological development or individuation, as well as interpersonal characteristics of the relational bond (Fredriksen, Scharlach, 1996). It is understood as the ability of an individual to engage in an empathetic and reciprocal relation with own parent, accepting his or her limitations and needs (Nydegger, 1991). This role specific ability is achieved through two processes. One is filial distancing which begins in early adulthood, and fosters de-idealization, emotional and psychological emancipation from the parent. The second, named filial comprehending, appears later through development as a reconnection with the parent, with a rising understanding of the parent's life history and viewpoints.

The first attempts to operationalize filial maturity produced extensive instruments that showed conceptual overlapping with other constructs, especially intergenerational solidarity (Marcoen, 1995; Stiens et al., 2006). More recently, a brief measure of filial maturity was developed, relying on Nydegger's (1991) conceptualization and permitting assessment of this characteristic independently from the parent's solidarity need (Birditt et al., 2008). In young and middle adults, high filial comprehending and low to moderate distancing were predictive of better quality of family relations. Secure bonds within the filial relationship, provide the foundation for a differentiated self, as well as a capacity to form supportive relational bonds with others, all preceding the development of a relational, filial maturity in adult age. Consistent with the attachment theorists' argument that secure attachment relationships provide the foundation for the redistribution of attention and resources, away from self-protection and toward the caregiving system (Mikulincer et al., 2005), secure attachment could promote higher filial maturity which in turn, could yield greater FCE.

## **OVERVIEW OF THE PRESENT STUDY**

This study explores the potential mediating role of filial maturity in the association between attachment and FCE. Building on theoretical considerations on the sequential occurrence of the two dimensions (Nydegger, 1991), a test of a serial mediational model is proposed. Individual differences in attachment styles should predict differences in the empathic interest for the attachment figure, and the maintenance of emotional closeness with parents in later life (Carpenter, 2001), therefore a negative correlation is expected between avoidance and anxiety with comprehending, while positive correlations are expected with distancing. The second aim is to empirically examine the relative contribution of the measures of attachment to parents as prospective care seekers and filial maturity to the prediction of FCE, while considering the socio-demographic characteristics. We propose (H1) the dimensions of attachment, avoidance and anxiety will be negative predictors of FCE over and above socio-demographic characteristics; (H2) the comprehending dimension will predict higher FCE, while distancing will be negatively related to the outcome; (H3) associations of attachment dimensions with FCE will be mediated by filial maturity dimensions.

## **METHODS**

### **Participants and procedure**

This study is part of a larger study on FCE of prospective caregivers and care seekers. For this study, a convenience sample of adult children from several towns in Croatia was recruited by using a snowball sampling method. Research assistants (psychology students) distributed the research announcement to families of their friends, colleagues, and other students. Well-instructed psychology students administered the questionnaires. Participants were informed according to the standardized instructions about the purpose and method of data collection, and voluntarily participated in the study. Adult children were

randomly instructed to complete questionnaires regarding one of their parents, either their mother or father. Those who had only one living parent completed the survey for that parent. Most participants answered the questionnaire referring to their relationship with their mother (57.4%). The study included a sample of 296 participants (186 women). Their age ranged from 26 to 60 ( $M=41.83$ ;  $SD=7.99$ ). Most of the participants were employed (83.1%) and married (71.3%), 77.4% were also parents, of which 64.63 had one or more underage children. The proportion of subjects who reported being parents did not differ by gender ( $\chi^2(1, 268) = 0.19, p > .05$ ). A minority of participants lived in the same household as their parents (16.3%).

## Measures

We investigated several sociodemographic characteristics: the caregiver's age and gender, parent's gender, whether the prospective caregiver was a parent, whether they had one or more underage children. Parents' health was rated with one item from 1 – *severely impaired*, to 4 – *no health problems*. Socioeconomic status was rated with one item, from 1 – *significantly worse than average* to 5 – *significantly better than average*.

The shortened and adopted for a Croatian sample version of the *Experiences in Close Relationship Inventory* (Brennan et al., 1998; Kamenov, Jelić, 2003) was applied as it has previously demonstrated the psychometric characteristics of the original instruments (Smojver-Ažić, Martinac Dorčić, Živčić-Bećirević, 2015) when measuring the attachment to a family member. It consists of two subscales: avoidance (9 items; e.g.: *I am nervous when she/he gets too close to me*) and anxiety (9 items; e.g.: *I worry that she/he won't care about me as much as I care about her/him*), each rated on a scale from (0) *I do not agree* to (5) *I fully agree*. Higher scores indicate more anxiety or avoidance. A good reliability score was found for both subscales (avoidance  $\alpha = .839$ , anxiety  $\alpha = .801$ ).

*Filial maturity measure* (Birditt et al., 2008) is a questionnaire based on Nydegger's two-dimensional model. Two independent English

language bachelors and Croatian native speakers translated the scale to Croatian using back translation. It consists of 10 statements about the relation with a parent forming two subscales: six items form the comprehending subscale (e.g., *As I grow older, I notice my parent and I have more in common* and four items form the distancing subscale (e.g., *My parent has some really annoying habits*). Participants rated their agreement to these items on a scale from 1 (strongly disagree) to 4 (strongly agree). A confirmatory factor analysis yielded acceptable fit, a two-factor structure (comprehending and distancing):  $\chi^2(34) = 96.042, p < .001$ ; CFI = .901; PNFI = 0.647, SRMR = 0.066, – corresponding with that of the original measure. Internal consistencies for the comprehending subscale  $\alpha = .785$ , were acceptable, but poor for the distancing subscale  $\alpha = .570$ . Previous adaptations of the scale in Dutch and Portuguese (Van Bruggen et al., 2015; Mendonca, Fontaine, 2013) demonstrated similar shortcomings, yet, unlike in these studies, dismissal of any item from the original distancing scale would not lead to an increase of internal consistency.

A *Scale of filial caregiving expectations* consists of 17 items describing anticipation of specific filial caregiving behaviours where the respondent rates his or her expectations of providing care to own parent on a 5-point scale. Eight of these items were adopted from the *Filial Responsibility Scale* by Hamon, Blieszner (1990) with some old-fashioned items omitted (e.g. writing to the parent). These items describe the following caregiving actions: cohabitating, adjusting work and family responsibilities to provide care, sacrificing personal freedom, financial, emotional support and advice. Other 9 items were formulated in the same wording and included other caregiving behaviours based on the dimensions of intergenerational solidarity theory (Gans, Silverstein, 2006): helping with household chores, being together in special occasions, planning health care, give assistance in personal care, accepting age related changes, etc. The scale has proven to have high internal consistency in previous (Banov, Smojver-Ažić, 2019) and the present research (Cronbach's  $\alpha = .939$ ).

**RESULTS**

Descriptive and correlational data are presented in Table 1. Most participants expressed moder-

ately high FCE, which were correlated to several sociodemographic characteristics (parent’s gender and health, participants’ gender, age and number of his underage children).

**Table 1.** Pearson Intercorrelations, Means and Standard Deviations for Filial Caregiving Expectations, the Attachment Dimensions, Filial Maturity Dimensions and Sociodemographic Characteristics (N = 296)

	3	4	5	6	7	8	9	10
1. Gender	.02	-.01	-.03	-.04	.22***	-.16**	-.02	-.17**
2. Gender (parent)	-.02	.01	.03	-.02	.05	-.20***	.12*	-.11**
3. Age	1	-.13**	-.28***	.03	.05	-.12*	-.03	-.13**
4. N. underage children		1	.04	.04	-.03	.12*	.07	.19***
5. Parent’s health			1	-.16**	-.11*	.07	-.12*	.10*
6. Anxiety				1	.16**	.04	.20***	-.12*
7. Avoidance					1	-.47***	.13**	-.43***
8. Comprehending						1	-.24***	.45***
9. Distancing							1	-.25***
10. FCE								1
M	41.83	0.68	2.7	18.23	20.96	14.86	10.78	68.84
SD	7.99	0.76	0.76	6.05	6.63	3.73	2.3	12.25

\**p* < .05; \*\**p* < .01; \*\*\**p* < .001

Note: Only the variables *Gender (parent)* (coded: 1 – male, 0 – female) and *Parent’s health* refer to characteristic of parents, other are self-ratings of prospective caregivers’ characteristics; *N. underage children* (number): 0 – none, 1 – one, 2 – two or more; *Health* – subjective rating of parent’s health; *SES* – rating of own socioeconomic status (1–5); FCE – Filial caregiving expectations.

Source: own elaboration.

FCE were correlated with both attachment and filial maturity dimensions. Both attachment dimensions were modestly related to distancing, while only avoidance showed a moderately high negative correlation with the comprehending dimension of filial maturity. To examine the predictive effects of attachment dimensions and filial maturity dimensions on FCE, hierarchical regression analyses were performed.

Demographic variables were entered in the first step as control of the social background, dimensions of attachment to parents were used at the second step of analysis as a relatively stable characteristic and filial maturity dimensions were entered at the third step of analysis as an expression of development in the perception of a parent (Table 2).

**Table 2.** Results of the Hierarchical Regression Analysis with Attachment and Filial Maturity Dimensions as Predictors of Filial Caregiving Expectations

Variable	Step 1			Step 2			Step 3		
	B	SE B	$\beta$	B	SE B	$\beta$	B	SE B	$\beta$
Gender (parent)	-2.15	1.43	-.09	-2.12	1.31	-.08	-0.52	1.27	-.02
Gender	-3.72	1.46	-.15*	-1.65	1.37	-.06	-1.79	1.31	-.07
Age	-0.14	.09	-.09	-0.13	0.08	-.08	-0.11	0.08	-.07
N. underaged children	2.79	.92	.17**	2.68	0.84	.17**	2.47	0.81	.15**
Parent's health	1.02	.95	.06	0.21	0.88	.01	-0.10	0.84	-.01
Anxiety				-0.12	0.11	-.06	-0.13	0.10	-.06
Avoidance				-0.72	0.10	-.39***	-0.47	0.11	-.25***
Distancing							-0.82	0.28	-.15***
Comprehending							0.83	0.19	.25***
$R^2$		.08			.24			.32	
$\Delta R^2$					.15			.08	
Model $F(df), p$	5.41 (5,290), $p < .001$			12.82 (7,288), $p < .001$			14.95 (9,286), $p < .001$		

\* $p < .05$ ; \*\* $p < .01$ , \*\*\* $p < .001$

Source: own elaboration.

The model accounted for 32.4% of variance: including sociodemographic data as control variables showed that the number of underage children of the participant contribute significantly to the prediction, while dimensions of attachment to parent significantly explained 15.6% of FCE, and filial maturity in the third step explained an additional 8.3% of the variance. Only the avoidance dimension attachment significantly negatively predicted FCE and it remained significant in the final step. Both filial maturity dimensions were significant predictors: distancing negatively and comprehending positively contributed to explaining FCE.

We further tested whether distancing and comprehending sequentially mediate the effect of avoidance on filial caregiving expectations. As mentioned above, a serial multiple mediation

was conducted based on the assumption that filial comprehending can be fully achieved only if distancing is considered. For that purpose, the PROCESS macro for SPSS Version 3.4.1. was used, which allowed us to test serial mediation. This approach is superior to the classic one of testing mediation through causal steps approach (Baron, Kenny, 1986), as it offers inferential tests of the indirect effects, which is especially important when testing direct and indirect effects of opposite signs (as is the case of the relation of avoidance and comprehending). Estimation of indirect effects in a serial multiple mediator model with both comprehending and distancing as mediators allows for a simultaneous test of each mechanism while accounting for the association between them (Hayes, 2018). The path coefficients are presented in Table 3.

**Table 3.** Results of the Serial Mediation Analysis with Avoidance and Filial Maturity Dimensions as Predictors of Filial Caregiving Expectations

Antecedent	Consequent											
	M1 (Distancing)			M2 (Comprehending)			Y (FCE)					
	Coeff.	SE	<i>p</i>	Coeff.	SE	<i>p</i>	Coeff.	SE	<i>p</i>			
X (Avoiding attachment)	<i>a</i> <sub>1</sub>	.04	.02	.03	<i>a</i> <sub>2</sub>	-.25	.03	< .001	<i>c</i> '	-.51	.10	< .001
M1 (Distancing)		–	–	–	<i>d</i> <sub>21</sub>	-.29	.08	< .001	<i>b</i> <sub>1</sub>	-.77	.27	< .01
M2 (Comprehending)		–	–	–		–	–	–	<i>b</i> <sub>2</sub>	.94	.19	< .001
Constant	<i>i</i> <sub>M1</sub>	20.42	0.64	< .001	<i>i</i> <sub>M2</sub>	9.87	0.44	< .001	<i>i</i> <sub>Y</sub>	73.80	5.50	< .001
	<i>R</i> <sup>2</sup> = .02			<i>R</i> <sup>2</sup> = .25			<i>R</i> <sup>2</sup> = .28					
	<i>F</i> (1,294) = 4.74, <i>p</i> = .03			<i>F</i> (2,293) = 49.95, <i>p</i> < .001			<i>F</i> (3,292) = 38.09, <i>p</i> < .001					

Note: FCE = Filial caregiving expectations, X – predictor, M1 – first mediator, M2 – second mediator, Y – criterion Source: own elaboration.

The total effect of avoidance on FCE was significant and negative ( $c = -.79, t = -8.12, p < .001$ ; obtained as  $c = c' + a_1b_1 + a_2b_2 + a_1d_2b_2$ ). It was found that avoidance positively related to distancing ( $a_1 = .04, t = 2.17, p < .03$ ) and negatively to comprehending ( $a_2 = -.25, t = -8.82, p < .001$ ). The results indicated that distancing was negatively ( $b_1 = -.77, t = -2.82, p < .01$ ), while comprehending was positively ( $b_2 = .94, t = 4.99, p < .001$ ) associated with FCE, suggesting these variables' impact on expectations of adult children to provide care to their aging parents. The indirect effects were tested using 5000 bootstrapping resamples. The specific indirect effect through distancing calculated as the product of paths  $a_1$  and  $b_1$  was small (point estimate =  $-.03$ ) and resulted with a bootstrap confidence interval in nearly approaching zero (CI =  $-.0804$  to  $-.0009$ ). The specific indirect effect through comprehending was significant and negative ( $a_2b_2 = -.24$ ; CI =  $-.3855$  to  $-.1114$ ). When testing serial multiple mediation, the specific indirect effect of avoidance through both filial distancing and comprehending was not significant ( $a_1d_2b_2 = -.01$ ; CI =  $-.0313$  to  $-.0007$ ). Thus, avoidant attachment decreases FCE, but reaching higher comprehending can

reduce these negative effects. In addition, results indicated that the direct effect of avoidance on FCE became reduced when controlling for filial maturity dimensions ( $c' = -.51, t = -4.89, p < .001$ ).

**DISCUSSION**

Our data suggest that adult attachment and filial maturity can add to our understanding of FCE: striving to maintain emotional independence from the parent characteristic for avoidantly attached, is related to lower expectations of future care provision. Additionally, evidence for the potential mediating role of filial maturity was found, and more consistently for the dimension of comprehending. Out of all the sociodemographic variables analysed, only the number of underage children significantly and positively contributed to caregiving expectations, a characteristic that was also associated with a somewhat greater comprehending. Parenthood represents a specific life stage in young adulthood that might promote the filial responsibility norms (Gans, Silverstein, 2006). With adult children becoming parents themselves,



intergenerational congruence in attitudes toward family roles starts to increase, as well as the number of interactions with elderly parents (Bucx et al., 2010), and greater understanding and identification can be achieved. Our data confirm this notion as we found a modest but significantly positive correlation ( $r = .12, p < .05$ ) between the number of underaged children and filial comprehending.

Effects of sociodemographic characteristics, such as age or gender, on solidarity relations are differentially expressed depending on the type of family dyad analysed (Pillemer, Gilligan, 2018; Silverstein et al., 2006), and seem to differ between expectations and actual care provided. An explanation for a low negative correlation found between age and expectations could be that younger adults, who have been less exposed to situations of parental difficulties, are not aware of the practical implications of caregiving, hold idealistic views, and therefore tend to express higher self-expectations (Wakui, Cheng, 2017).

Consistent with previous findings (Karatzas et al., 2010), no association of FCE with the anxiety dimension was found. The role of attachment anxiety in caregiving remains controversial. The negative internal model of the self can trigger doubts of incapability to respond adequately to the parent's needs, causing personal distress and fear of rejection (Karatzas et al., 2019; Mikulincer et al., 2005). The aversiveness of thoughts about one's own frailty in the role of caregiver activates emotion-focused coping in anxiously attached and prevents from active, problem-focused preparatory activities (Paulson, Bassett, 2015; Sørensen et al., 2002). Our results show that attachment avoidance exerts negative effects on prospective FCE. An internal working model of others as unwilling or unavailable to provide support is characteristic for avoidance, as well as the reaction of emotional withdrawal (Bowlby, 1988; Merz, Consedine, 2009; Mikulincer, Shaver, 2017). In the context of prospective caregiving, avoidance appears more relevant than the negative model of the self as undeserving of love and care (characteristic for anxiously attached). Investing in a relationship with a parent toward whom they are insecurely attached provides less psycho-

logical rewards for these caregivers (Carpenter, 2001). The negative association between avoidance and willingness to provide care to aging parents was found across different cultures and for different types of care provided (Karatzas et al., 2019; You et al., 2019). With the reduction of the number of children per family and, in the context of under-capacitated formal services, there is a greater chance to experience filial obligation during lifetime (Wakui, Cheng, 2017). Clinicians and social workers remain in doubt: how to support families with avoidantly attached children in the decisions regarding filial caregiving?

In this regard, a major contribution of this study presents the identification of the mediating effects of filial maturity dimensions in the relationship between avoidant attachment and FCE. Our results indicate that avoidantly attached adults are less likely to develop comprehending for their parents, accept their limitations, and perceive them as peers (Birditt et al., 2008). Individuals with an avoidant attachment style might need support in developing this dimension of filial maturity: rising comprehending towards a parent one perceived as emotionally unresponsive seems to present a precondition for providing filial solidarity. This could be a valuable line of intervention to ease the coping process with the provision of informal care. Clinical interventions based on attachment theory are efficient in the support of adults coping with tasks of filial caregiving (Chen et al., 2013). For family counsellors working with prospective caregivers especially with those with an avoidant attachment style, an efficient way of fostering filial maturity, especially filial comprehending would be to focus on intergenerational parenting history through techniques like the genogram which consider the individual acts in the context of broader family history and expectations. Greater efficiency in psychological support to caregivers might be accomplished by assessing perceptions of long-standing family patterns, such as the example of parental differential treatment or the intergenerational transmission of parenting styles (Gopalan et al., 2013; Pillemer, Gilligan, 2018), and clinicians should be aware of the negative consequences of lower

comprehending capacities, which may in turn affect care provision. Through psychoeducation adult children could be directed to recognize the complexity of the relationship between readiness to care for elderly parents and the quality of emotional relationship.

The filial maturity subscale of comprehending showed acceptable reliability and stronger effects in the mediation model. On the contrary, distancing, the ability to be emotionally emancipated from a parent and to review their acts critically, promoted lower FCE but its positive association with attachment avoidance was low, and the mediating path was marginally significant. Distancing serves in the process of separation and individuation in the adolescence (Marcoen, 1995), and it is also in line with individualist values, contemporary career obligations and increased mobility. A recent qualitative study found how even under the COVID-19 pandemic, in circumstances of reduced physical contact and practical support from the children, parents in individualistic societies appreciate the authentic emotional attitude of filial piety above the simple conforming to solidarity norms (Ren et al., 2022). The detrimental role of filial psychological distancing appears to be marginal when we consider the FCE as a set of both practical and emotional caregiving tasks. However, distancing can appear as a stumbling block in the circumstances of social and physical distancing when the expectations of filial solidarity focus on the quality of emotional interactions. Psychosocial interventions and promotion of a sense of communion and connectedness in families might be more pressingly needed in the present time (for more detailed suggestions see Fraenkel, Cho, 2020).

This study examined self-expectations, a manifestation of filial piety that differs from normative expectations or enacted behaviours (Wakui, Cheng, 2017). Future studies of the evolving process of filial maturity would benefit from longitudinal and simultaneous investigations of these constructs to describe the tra-

jectories of the development of distancing and comprehending, their relation to the parent's emerging need for support and, ultimately, the possibility to predict actual caregiving. Several limitations should be noted when considering the results. First, most of our respondents were women and as filial caregiving often relates to social roles of women, future research could benefit from more balanced samples in respect to gender. Secondly, self-reports might be biased by introspection capacities and motivation. Behavioural measures and dyadic datasets on family samples would permit a deeper exploration of the effects of attachment, and the expectations of both the adult-child and the parent. The cross-sectional design does not preclude the possibility of reciprocal causality, even though the data were entered in a theoretically logical order. A better operationalisation of the distancing dimension is still needed. While original authors found the subscale to be internally consistent (Stiens et al., 2006), it did not demonstrate the same stability on other samples and language adaptations (Van Bruggen et al., 2015; Mendonca, Fontaine, 2013), including ours. Older age of our participants compared with the samples of Stiens et al. (2006), and their experience in parenthood might have affected the difference in the functioning of the scale. The psychometric issues of currently developed measurement instruments probably play their role in the negligence of the construct of filial maturity in the research through the last decade.

## CONCLUSION

The current study additionally confirmed the role of avoidant attachment in predicting prospective caregiver's expectations of filial care for the ageing parent. The development of filial maturity through comprehending the parent outside of the parental role could lessen the effects of avoidance and present a base for intervention plans that promote greater filial solidarity.

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