The Role of Gender in Coping with Mild Cognitive Impairment

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Clinics:

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Mild Cognitive Impairment (MCI)

- Age-related decline in memory and executive functioning

- Criteria for assessing MCI include:
  - self-reported complaint of memory loss that interferes minimally with activities of daily living and personal relationships
  - uncharacteristic memory loss for the person’s age
  - normal functioning in other cognitive domains
  - no evidence of dementia

- Transitional phase between normal cognitive aging and early dementia

(Petersen et al., 1999)
Purpose

- To identify memory-related changes influencing daily tasks, decision-making, and relationships
- To examine family interactions and relationships over time when one member has mild cognitive impairment
- This report: To analyze the effects of gender on coping with MCI
Conceptual Frameworks

I. Pearlin’s Caregiving Stress Process Framework

II. Boss’s Theory of Ambiguous Loss
   - Boundary ambiguity
   - Role ambiguity
Methods

- Memory Clinics

- Family Focus - Level Data
  - Elder with MCI (E), age 60+
  - Primary care partner (PCP)
  - Secondary care partner (SCP)

- Mixed Methods

- Three Contacts (face-to-face/telephone)
  - T1 (118 families)
  - T2 (77 families so far)
  - T3 (49 families so far)
Methods (cont’d.)

- 17 male primary care partners in sample

- selected 17 female primary care partners, matched on
  - age
  - race
  - marital status
  - relationship to person with MCI
  - living arrangements
# Demographic Characteristics

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Males (n = 17)</th>
<th>Females (n = 17)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age, M (SD)</strong></td>
<td>65.12 (19.6)</td>
<td>66.41 (16.3)</td>
</tr>
<tr>
<td><strong>White, %</strong></td>
<td>94.1</td>
<td>94.1</td>
</tr>
<tr>
<td><strong>Married/Partnered, %</strong></td>
<td>82.4</td>
<td>82.4</td>
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<tr>
<td><strong>&gt; HS Education, %</strong></td>
<td>64.7</td>
<td>82.4</td>
</tr>
<tr>
<td><strong>Monthly income, %</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>≤ $1,999</td>
<td>26.7</td>
<td>23.5</td>
</tr>
<tr>
<td>$2,000-3,999</td>
<td>13.3</td>
<td>52.9</td>
</tr>
<tr>
<td>≥ $4,000</td>
<td>48.2</td>
<td>23.6</td>
</tr>
<tr>
<td>Refused</td>
<td>11.8</td>
<td>-</td>
</tr>
<tr>
<td><strong>Live with Elder, %</strong></td>
<td>82.4</td>
<td>82.4</td>
</tr>
<tr>
<td><strong>Relationship to Elder, %</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spouse</td>
<td>64.7</td>
<td>64.7</td>
</tr>
<tr>
<td>Adult Child</td>
<td>23.5</td>
<td>23.5</td>
</tr>
<tr>
<td>Sibling</td>
<td>5.9</td>
<td>5.9</td>
</tr>
<tr>
<td>Other Relative</td>
<td>5.9</td>
<td>5.9</td>
</tr>
</tbody>
</table>
Methods (cont’d.)

- Qualitative analysis using Atlas.ti to organize and manage data, coding scheme, findings

- Open coding process – multiple coders/checkers

- Final coding scheme – 41 overarching categories
Coding Categories Used

- care partner’s assessment, role and role changes
- household responsibilities
- managing MCI
- coping strategies
- interaction dynamics, positive & negative
- intimacy
- social support
- suggestions to others
Results: Major Themes

- Identity and Support
- Interpersonal Dynamics
- Emotion Management
Identity and Support

- Effects of role changes on personal identity
  - Men
    - Continuity: business-like approach similar to work identity
  - Women
    - Disconnect between previous identity and new roles as manager or supervisor
    - Also concerned about sustaining elder’s identity, involvement, and autonomy
Identity and Support

- Adjustments to external engagements
  - Both
    - valued social interactions
  - Men
    - sought new support and new outlets
  - Women
    - “too much on my plate” - stressed by outside commitments, gave up activities
Interpersonal Dynamics

- Soliciting help
  - Both
    - sought help from relatives and professionals
    - but perceptions of symptom severity differ
  - Men
    - more readily acknowledged need for help early on
  - Women
    - solicited help only when absolutely necessary
    - reluctant to over-burden other helpers
Interpersonal Dynamics

- Relationship history
  - Both
    - willingness to embrace care responsibility stemmed from life-long reciprocity
  - Men
    - “it’s my turn now”
  - Women
    - “elder would do the same for me”
Emotion Management

- Regulating frustration and anger
  - Both
    - experienced impatience, irritability, annoyance
    - struggled with losing temper
  - Men
    - expressed more severe anger and more intense outbursts
  - Women
    - reported having to deal with E’s dramatic temper flares and with threatening behaviors
Emotion Management

- Minimizing stress and worry
  - Both
    - ambiguity of everyday life was stressful
    - “one day at a time,” “take it as it comes”
  - Men
    - increased intensity of their supervisory role to ease worry
  - Women
    - reframed feelings of guilt and inadequacy
    - recognized impact of worry and stress on physical and mental health
Conclusions

- Emergent cognitive impairment elicits strong reactions

- Complexity of responses to MCI across both male and female care partners

- Strategies for managing MCI include some gender similarities and numerous differences
Implications

- Future Research: Effects on gender-based coping strategies of
  - care partner-MCI elder relationship and living arrangement
  - care partner’s age and care work experience

- Interventions
  - provide education and support early in care cycle
  - recognize that males and females may need different intervention approaches and focal strategies
More Information
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Mild Cognitive Impairment (MCI):
What Do We Do Now?
http://www.gerontology.vt.edu/docs/Gerontology_MCI_final.pdf

Continuing Research
Seeking families from minority groups