

THE EFFECTS ON ADULT CHILDREN OF PLACING
A PARENT IN A NURSING HOME

by

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DEDICATED TO

Katherine S. Lane,

a grandmother who had taught me the beauty of growing
old.

W. Sherill Lyon,

a father-in-law who gave his support in unique ways
and whose life reminded me of the importance of
family.

James E. and Ruth L. Garrison

parents who have modeled the role of caring for the
elderly.

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Chapter I

INTRODUCTION

Literature concerning the relationship between the elderly and their adult children suggests that there is a maintenance of a "close, viable, and satisfying relationship" (McCubbin et al., 1980, p. 141) through the years (Troll, 1971; Adams, 1967, 1968). In addition, there is evidence that the level of interaction increases between the older parent and the adult child as they age (Sussman, 1960; Brody, 1978).

At the same time, there is a pervasive myth that the younger generation abandons the older generation (Shanas, 1979). This is particularly evident in the view held by some that many children abandon their aging parent in a nursing home when placement is unnecessary (Karcher & Linden, 1974). Brody (1974, 1978) has asserted that the institutionalization of a parent is a crisis for the whole family with potentially severe negative repercussions. Cath (1972) has even described the decision to place a parent as one of the most difficult ever made by an adult child, presumably because of the feared outcome in terms of deteriorating relationships. For some adult children, placing one of their parents in a nursing home is perceived as being equivalent to pronouncing

a sentence of death on that parent (Brandwein & Postoff, 1976).

It is incongruous that the research characterization of parent-child relationships throughout the years is that of being close and satisfying, while relationships among such a large proportion of the elderly and their children are pictured as being in a serious decline. It is conceivable, of course, that the nursing home aged and their families are a special population where the former generalization does not hold true.

The fear of disintegration of the relationship may be an unrealistic perception held by those who face the possibility of placing a parent in a nursing home. Most empirically derived knowledge about the elderly in nursing homes is based on perceptions of the parent rather than the adult child, permitting each child to face the situation without information about the personal effect upon others or their relationships with parents.

Since a larger proportion of the population in the future will face the decision of placing a parent in a nursing home, it seems beneficial to study the perceived effects on adult children of placing one of their parents in a nursing home and the perceived effects on the relationship between the parent and the child.

Specifically, the present study looks at the following issues:

(1) Difficulties encountered by adult children.

It is known that adult children perceive placement as a difficult matter to carry out (Brody, 1978; Cath, 1972; Brandwein & Postoff, 1976). The specific areas of difficulty for the adult child and the predictors of this difficulty are still undefined.

(2) Changes in Parent-Child Relationships.

Certain research has demonstrated that placement of a parent in a nursing home results in a positive change in the parent-child relationship (Smith & Bengtson, 1979; Montgomery, R., 1982), while other writers suggest that there is a perceived strain in the relationship or abandonment by the adult child once placement occurs (Brandwein & Postoff, 1980). At this point, definitive evidence does not exist to support either of these contending views, or to identify the predictors associated with actual outcomes in relationships.

(3) Effects on the Personal Life of the Adult Child.

Past research has examined the perceived effects on the parent, rather than the children, as being the more important dimension. There is the perception that placing one's parent in a nursing home will result in a change in the demands on one's

personal life which caring for an ill parent may bring about (Zarit, Reever, & Bach-Peterson, 1980; Litman, 1971).

Again, at this point, definitive evidence does not exist to identify the perceived effects on the personal life of the adult child or to identify predictors associated with those effects.

Proportion of the Population Who Are Elderly

Few are still holding that one-quarter of our population will be 65 and over in the future, but demographers continue to predict that the elderly segment of the population will increase at extremely rapid rates in the next few decades. Today more than 23 million persons are over the age of 65 in the United States. The prediction is made that by the year 2000 there will be over 31 million (Glick, 1979). This will amount to an increase of one-third over the current population level for that age group.

The size of this segment of the population is presently increasing faster than any other segment. Between 1970 and 1979, the size of the population aged 65 and over increased by 23.5%, while the increase for all age groups was only 8.3% (Statistical Notes, 1980). The proportion of the population in 1900 which was 65 or above was only 4% (Brody, 1974), while today that figure is 11% (Montgomery, J., 1982), representing one in nine persons in the United States.

Not only is this segment of the population growing in size, but its distribution configuration is changing. It is predicted that there will be a larger increase in the proportion of the elderly population which is 80 years old and over than in the segment of the age group 65 to 79. Those 65 to 79 years old, or the "young-old," as described by Glick, will increase 25% by the year 2000. The "old-old," or those 80 years old and over, will increase over 50% in that same time span (Glick, 1979). The age group 75 and over increased 24.6% between the years 1970 and 1979, and the age group 85 and over increased 65.6% during that same period (Statistical Notes, 1980). The segment of the population which is the oldest is also the most rapidly growing.

The number of elderly who are placed in institutions at any one time is roughly 5% of the population of the elderly (Montgomery, J., 1982; Treas, 1978). However, since there is a tendency for the health of the elderly person to deteriorate with age, the likelihood of one's being in a nursing home increases with the age of the person. Almost 2% of men aged 65 to 69 are in some intermediate care facility, but the proportion increases to 12.9% for those aged 85 and older. For women, the corresponding percentages are 1.6% and 20.8%, respectively (Glick, 1979). With an increase in the percentage of elderly who reach an age of 80 plus years, there will also be an increase in the number of elderly requiring special health care (Glick, 1979).

This increase has already begun to appear in the state of Virginia. A major increase in the number of patient days spent in intermediate care facilities has occurred since 1973. In that year, the State Health Department reported 1,682,000 patient days in the state of Virginia. By 1980 that figure had risen to 4,361,014 patient days, an increase of 159% in seven years (Virginia Health Care Association, 1980).

Kin as Caretakers of the Elderly

The shape of family composition is also undergoing changes which will have an effect on the care of the elderly. In the past, it was likely that there would be a larger number of children in the family than in the present. When this was the case, the parents were more assured they would be cared for in their old age (Treas, 1978). There would also be more children to help carry the burden of this care. In 1967, the number of lifetime births expected by wives in the 18 to 24-year-old age group was 3.1. But, in 1978, the figure was only 2.3 live births (Current Population Reports, 1979). In 1980, the fertility rate for women aged 15-44 was 69.5 live births per one thousand women, and for 1960 the rate was 118 (Vital Statistics Report, 1981). In the future, fewer children must share the caretaking responsibilities of the increasing number of elderly parents (Glick, 1979; Montgomery, J., 1982; Treas, 1978).

As the parent ages and becomes more disabled, the most likely person to care for the parent is the spouse or one of the children. In the American culture, caretaker children are usually adult daughters. Parents are more likely to move in with daughters than with the sons (Troll, 1971). Daughters are more likely to be the providers of the direct care of the parent (Troll, 1971; Troll, Miller & Atchley, 1979), a phenomenon attributable to several factors. Daughters assume more nurturing roles as a part of their traditional role in the family. Women apparently have stronger emotional ties with their family of orientation than men do. They also supposedly have more time to spare in their role as homemaker (Horowitz, 1981). Research shows that the majority of older parents who have living children will be taken care of by those children when there is a need for such care (Horowitz, 1981; Horowitz & Shindelman, 1981; Montgomery, J., 1982). This is more true for mothers than for fathers (Troll, 1971).

Simos (1970) reported that adult children continue to be involved with their aging parents, helping them to solve problems they may have in all areas of life. Even after the parent reaches the point where nursing home care is necessary, many children seem to continue to remain involved through fairly frequent visitation and by providing some personal services for the parent (Montgomery, J., 1982; York & Calsyn, 1977).

The trend toward smaller families has already been cited, and this trend will reduce the probability that one of the children is a daughter because of the sex ratio favoring males at birth. In addition, the increase in the proportion of women who are now in the labor market will also decrease the number of available caretakers for the elderly parents. At the present time, 51% of women between the ages of 18 and 65 are employed, and 60% of those between 45 and 54 are employed (Horowitz, 1981). This latter age group is the one which would more likely be involved with the caretaking responsibilities. Horowitz pointed out that although working women do not abandon their caretaking responsibilities, their employment may bring about some different types of arrangements (1981). Nardone (1980) reported, in a study of several counties in Pennsylvania, that one of the predictors of the number of elderly in nursing homes are the proportion of women employed in the work force in those counties.

Institutionalization of a Parent as Crisis for the Family

There is, as Treas reported, a "collision course" between the declining number of descendants and the increase in the lifespan of the elderly parent (Treas, 1978). This non-complementarity implies that there will be an increase in the strain on the families caring for the elderly. A parent's aging increases the potential for deterioration in the health

of that parent. A parent's deteriorating health may be accompanied by an increase in the sense of burden for the whole family.

Economic and emotional demands can be quite high if the parent is cared for at the home of the adult child (Horowitz, 1981; Montgomery, J., 1982). York and Calsyn (1977) reported that the families in their sample had greater difficulty coping with the mental deterioration of their parent than they did in dealing with the physical disabilities. Simos (1973) reported that "three-fourths of the children reported a variety of familial problems resulting from parental aging" (p. 25).

Even with these difficulties, many families tend to make nursing home placement the last step to be taken in the care of their parents. Montgomery stated that many families wait too long before placement of the parent in a nursing home. They tend to wait until after all of their economic resources are exhausted and, emotionally, they have no other choice but to place their parent (Montgomery, J., 1982; Saul, 1968).

In fact, it appears that for some families, the placement of a parent in a nursing home is the equivalent of sentencing that parent to death (Brandwein & Postoff, 1980). It is usually the case that once a person enters a nursing home they never leave (Shanas, 1962). For this reason, the decision to place a parent in a nursing home may be one of

the most difficult and emotionally depressing decisions a person ever makes (Cath, 1972).

The placement of that parent in a nursing home has considerable potential for complications in the parent-child relationship. There is not only the overtone of the "ultimate separation by death" (Brody & Spark, 1966), but also a change in the developmental life cycle of the family in that the elderly parent most likely becomes more dependent on the child (Hill, 1970). Often, unresolved interpersonal conflicts between the parent and the child come to the surface during this period of decision making and placement of the parent (Brody & Spark, 1966). These unresolved tensions make the interpersonal relationship more strained, which can make the placement process more of a crisis for the family members as well as the parent.

The Need to Study the Effects on Adult
Children of Placing a Parent in a
Nursing Home

Given the fact that placing a parent in a nursing home is a family crisis, and the fact that adult children continue to be involved with their aging parents, the desirability of including family members in treatment programs for nursing home patients is indicated. A number of studies have called for the family to be involved in either the treatment of the patient (Kahana, 1971; Shuttlesworth, Rubin, & Duffy, 1982; Smith & Bengtson, 1979) or in services to the elderly in

nursing homes (Simos, 1973, 1978; York & Calsyn, 1977). R. Montgomery (1982) has even suggested that the family, and not just the elderly, become the client for the staff at the nursing homes. Yet, at this time, we know very little about how the adult children perceive the effects of this event.

Before it becomes necessary to actually place a parent in a nursing home, adult children appear to have a negative perception of that event. They avoid or delay the placement even at added financial and emotional cost to themselves and/or their families. Some of the possible reasons may be the anticipated reactions of the parent towards them, a sense of guilt at having failed to do their duty, the sense that they may be pronouncing a death sentence on their parent, or the sense that the relationship with the parent may be negatively affected. Without information to the contrary, these expectations may increase the stress related to the nursing home placement. One way in which family members manage the stress of a particular situation is to change their subjective perception of the stressful situation (Mechanic, 1974; Antonovsky, 1979). In order to help the adult child deal more positively with nursing home placement, it seems appropriate to study this process in greater depth.

Focus of the Present Study

The present study has as its focus the perceptions adult children have of three aspects of placing a parent in a

nursing home and some predictors of those perceptions. These three aspects are:

- 1) the perceived ease of placing a parent in a nursing home;
- 2) the perceived change in the parent-child relationship as a result of the placement;
- 3) the perceived effects on the personal life of the adult child.

Chapter II

REVIEW OF THE LITERATURE

The literature on the frail elderly deals inadequately with the effects on adult children of placing their parents in a nursing home. The greater proportion of this literature deals with the elderly by themselves, or the effects on the children who care for those elderly parents outside of an institution (Cicirelli, 1981; Horowitz, 1981; Horowitz & Shindelman, 1981). This review relates to either the general make-up of the nursing home population, or to the ease of placement, change in relationship resulting from placement, and the effects on the personal life of the adult child.

General Survey Data

In 1978, the U.S. Department of Commerce, Bureau of the Census, issued a report on the persons who are receiving long-term care. As a part of that study, nursing home residents were surveyed. The sample of residents (N = 9,336) was taken from 868 randomly selected institutions. The sample of institutions was taken from the Master Facility Inventory compiled by the National Center for Health Statistics. Data were obtained from interviews which took place over a six-month period in 1976, revealing the following characteristics of nursing home residents.

The nursing home population was made up of over twice as many females (68.7%) as males (31.1%). For those residents who had families, the breakdown by age was as follows: 3.1% were under age 49; 9.8% were 50-64; 30.6% were 65-79; and 52% were 80 years old and over. Around fifteen percent (15.4%) were married, 60.7% were widowed, 5.4% were divorced and 1.1% were legally separated. Nearly eighty percent (79.1%) of the patients had been admitted for medical reasons, 13.2% for family reasons; and 6.1% were admitted for other reasons. Approximately fifteen percent (14.7%) had been in a nursing home for less than four months; 8.9% had been there 4 to 6 months; 13.2% had been there for 7 to 11 months; 19.3% had been there 1 to 2 years; and the remaining 40% had been there for over three years. Over fifty percent (51.6%) of the patients listed their next of kin as being a son or daughter.

Over forty percent (41.5%) had lived with their next of kin prior to admission, and 34.9% had lived in their own home. Of those who had lived with a son or daughter, 54.1% reportedly had no conflict or strain on the household as reported by the family members; 45.9% had caused conflict in the households, with 37.1% causing conflict before admission, 1.1% after admission, and 7.8% causing conflict both before and after admission to the nursing home.

The general picture one gets of those in a nursing home

is that they are what Glick (1979) called the "old-old" with half of them being 80 or more years of age. Over 60% had been in a nursing home for at least one year. Almost one-half of them had lived with their next of kin prior to being admitted to the nursing home, and almost one-half of those who lived with an adult child resided in a conflictual situation.

Ease of Placing a Parent in a Nursing Home

Linn and Gurel (1972) examined the attitudes of family members toward placing a parent in a nursing home directly from a Veterans Administration Hospital. The subjects, 514 males with a mean age of 66, were assessed as to their physical and mental impairment. The families of these patients were assessed by social workers as to the degree of their being in favor of the patient's going to a nursing home. Most of the families presented a low level of opposition to the placement. Family opposition was reported to be negatively related to the seriousness of the physical impairment and ability of the patient to get around. Also, the longer the patient was in the hospital, the less opposed the family was to the placement in a nursing home.

York and Calsyn (1977) investigated the level of family involvement in nursing homes by interviewing a sample of 76 patients, and their families, from three private nursing homes. All but 12 of the families were the adult children

of the patients. The mean age of the patients sampled was 81 years, and 80% were female. The mean length of stay in the nursing home was almost three years, and 78% of the patients were widowed. The authors reported that although families which had an elderly person needing nursing home care knew of community services, very few of them utilized these services. The nursing home utilized by the family was not chosen because of its quality of care, but rather by the availability of a bed and the geographical location of the nursing home. York and Calsyn concluded that the families appear to "feel extremely frustrated and defeated at the time of placement" (p. 502).

In 1968, Saul reported on a study of family factors relating to an application to a Jewish home for the aged. In this study of 96 residents of the home for the aged, he concluded that attempts to get a parent in a home usually represent a last step in a series of coping efforts to care for the elderly parent. Only a small number of people who applied did so before the patient was 70 years old, and men tended to apply at a later age. Very few of the patients were married at the time of admission, and a similar number had family members. The primary reasons for applying were a sharp decrease in the physical or emotional abilities of the elderly person and the lack of any external support services such as family members.

Describing a workshop they set up for aiding adult children of aging parents, Brandwein and Postoff (1980) reported that the greatest guilt about placing a parent in a nursing home was felt by those who had the parent living with them. Surrendering the role as caretaker to a non-family member brought up "feelings of inadequacy, shame and fear" (p. 179). The workshop participants were 23 adult children of 17 elderly applicants to nursing homes. All of the applicants suffered from some chronic condition; 60% of the adult children were admitting their parent because of a need for medical care, and 31% reported mental deterioration of the parent was the main reason for placement.

In a comment on the reaction of the adult child to placing a parent in a nursing home, Krasner (1969) stated that if the placement is "warranted because of debilitating limitations on the part of the parent or the inability of the adult child to provide adequate care," the placement can be accomplished with greater ease and the relationship between the parent and child can remain positive. However, if the parent is against the placement, then accusations of rejection can be hurled at the adult child and a cycle of resentment, guilt, anxiety" can be established. This same cycle is the result of a conflictual relationship between the parent and the child which has been present, according to the author, for a number of years. The crisis of placement of

the parent in a nursing home only helps bring it to the surface.

Change in the Parent-Child Relationship
as a Result of Placement

Smith and Bengtson (1979) pointed out the positive consequences of institutionalization for the parent-child relationship. They held interviews with 100 resident adult child couples which focused on the amount and type of contact between the subjects, "the types of shared activity, and feelings of family closeness and affection" (p. 439). The subjects were also asked to describe how these feelings had changed as a result of the parent's being in a nursing home. All of the parents were patients in one institution and they had an age range of 70 to 92. The age of the adult children ranged from 50 to 71 years.

Their results suggest six types of general patterns of consequences for family relationships as a result of institutionalization: 1) a renewed closeness and a strengthening of family ties (30%); 2) a discovery of new love and affection (15%); 3) a continuation of closeness (25%); 4) a continuation of separateness (20%); 5) quality without quantity interactions (10%); and 6) abdication of the relationship. The major reason cited for strengthening relationships was the alleviation of pre-admission strains on the family which were caused by the multiple and acute needs of

the parent. A second reason given was the improvement of the physical or mental condition of the parent following institutionalization. As a result of not having major responsibility for the physical well-being of the parent, the child can then focus on other aspects of the relationship. The time together could be much more enjoyable.

Building on the research of Smith and Bengtson (1979), R. Montgomery (1982) examined the impact of institutional care policies on the parent-child relationship for those parents in a nursing home. She explored the care policies of three rural nursing homes in terms of how those policies related to the quality of family relations. Regardless of the content of the care policy of the nursing home, the families began to have more positive relationships after the parent was admitted to the nursing home. However, the homes with a more inclusive policy, where family members were seen as a part of the treatment team, had the highest changes in relationship. The age range of the patient was from 55 to 102 years, with a median of 83. The sample included 76% females and 24% males as patients. The length of residency ranged from 1 month to 16 years, with the median length of stay being 31 months. Forty-seven percent of the responding family members were daughters and 21.2% were sons. The family members ranged in age from 20 to 85 years old, with the median age being 46 years.

York and Calsyn (1977) reported that families tended to maintain the patterns and level of interaction which were established prior to placement of the parent. Thus, the evidence is somewhat confusing related to the level of parent-child interaction after placement of the parent in a nursing home. York and Calsyn also reported that there was a difference in the enjoyment of the interaction and visits when compared on the basis of the physical and mental condition of the parent. Family members reported less enjoyment of visits when parents were confused mentally than when parents were only physically disabled. Thirty-seven percent of the family members reported having more difficulty dealing with the mental deterioration of the parent, while only 15% reported difficulty dealing with their physical disabilities.

The Effects on the Personal Life of the Adult Child

Zarit, Reeve, and Bach-Peterson (1980) investigated the feelings of burden felt by the primary caregivers of parents diagnosed as having dementia. They interviewed the 29 caregivers and administered a 29-item self-report inventory which measured the degree of burden felt by the respondents. The mean age of the elderly was 76 years, and the caregivers averaged an age of 65 years. Their findings indicated that none of the behavior variables, such as "wandering or getting lost," and "having embarrassing, rude, or

objectionable behavior," was correlated with the level of burden experienced. Only the frequency of family visits was significantly related to the level of burden. Those visits by other family members would give the primary caretaker some break from the sense of burden. The most frequently reported burdensome aspects of the caretaking were the lack of time for self and the fears of further deterioration in the parent's behavior. The duration of the behaviors did not correlate with the sense of burden expressed by the caregivers.

Simos (1973) reported on a study of the relationship of Jewish-American adult children to their aging parents. The data for this study were obtained from personal interviews with the adult children. The sample of 50 children was made up of 36 females and 14 males, and ranged in age from 30 to 68 years. In this sample, three-fourths of the children reported a variety of family problems resulting from parental aging. The author stated that the increased stress from assuming the role of caretaker for the parent can have an adverse effect on the adult child as well as the parent-child relationship.

Summary

From the discussion of the above studies emerges a picture of the placement experience for the adult child of an elderly parent. Many children wait until the last moment

before placing their parent in a nursing home. When they do place the parent, often it is an experience accompanied by feelings of frustration, defeat, and depression, as if they have failed in their obligation to care for their parent. The experience can, however, have positive results in terms of the parent-child relationship. Once placement occurs, this relationship can improve as a result of the caretaking burden being lifted from the child.

Chapter III

METHODOLOGY

Available knowledge about the impact of placing one's parent in a nursing home exhibits several deficiencies. There is an absence of quantitative data concerning parent-child relationships and the perceived effects on the adult child. There is also an absence of information concerning predictors of those effects as well as a lack of instrumentation for assessing the effects of a parent's placement in a nursing home on the adult child.

Original Study

To contribute to the knowledge in this field with regard to the above deficiencies and to answer questions raised in chapter one, a study was undertaken by Maxwell and Garrison (1981). That study had as its purpose:

- 1) to establish the importance of predictor variables which might affect parent-child relationships, but which had previously been neglected;
- 2) to obtain quantitative data about the perceived changes in parent-child relationships associated with nursing home placement; and
- 3) to develop instrumentation for assessing the effect of nursing home placement upon the adult child.

Dependent Variables in the Original Study

The three dependent variables examined in the original study were: 1) the adult child's perceived ease of placement, 2) the adult child's perception of change in the parent-child relationship, and 3) the perceived effect on the personal life of the adult child. A description of these variables and how they were measured follows:

The perceived ease of placement. The Ease of Placement scale was a five-item scale which examined the specific events of dealing with other family members regarding the placement of the parent, accepting the decision to place the parent, discussing with that parent the decision for placement, actually taking the parent to the nursing home, and leaving the parent at the nursing home for the first time. The adult children were asked to respond to these items by checking the degree of ease they experienced for each event. The responses were made on a ten-point Likert-type continuum (Appendix A, item 40). A higher score on this scale indicated greater ease in carrying out these events.

The perceived change in relationship. The Change in Relationship scale contained items covering a number of aspects of the parent-child relationship. Examples include how loving the child felt toward his or her parent, how easy it was for the child to give affection to his or her parent, how much the child wished to do things for his or her parent.

The adult children were asked to respond to each of these items by checking the amount of change they perceived having occurred in the relationship with their parent on a ten-point Likert-type continuum (Appendix A, item 54). A higher score indicated a positive change in the relationship.

The perceived effects on the personal life of the adult child. The third scale, Effects on the Personal Life of the Adult Child, was composed of seven items examining the degree of effect placing their parent had on the personal life of adult children. Items on this scale looked at having more time to do things, having a more satisfying family life, sleeping better, feeling less guilty about the care the parent received, having better health themselves, and getting along better with both one's parent and one's siblings. Responses were made on a ten-point Likert-type continuum from "not at all" to "a great deal" (Appendix A, item 64). A higher score indicated a more positive effect on the personal life.

Independent Variables in the Original Study

The above dependent variables were correlated with the following independent variables: the amount of concern the adult child had about the parent's entrance into a nursing home, the attitude the adult child had toward his or her own aging, the age of the adult child, the living arrangement of

the parent prior to placement, the attitude the adult child had toward placement, the level of involvement the adult child had in the placement decision, the perceived adjustment of the parent to being in a nursing home, and the health of the parent prior to placement. The rationale for these variables and a description of how they were measured follows.

Amount of concern. Brandwein and Postoff (1980) reported from their work with adult children of aged parents about to go into a nursing home that the children stated feelings of guilt associated with two factors: the fear that the health of the parent would deteriorate after institutionalization, and that the parent might not get the care they were used to receiving. It was expected that the degree of fears would have an impact on the adult child's decision about, or experience of, placing a parent in a nursing home. The Amount of Concern scale was developed with its focus being the fears the adult child might have about the parent's being in a nursing home.

This seven-item scale looked at the feelings the adult child had concerning the treatment the parent may or may not be receiving while in a nursing home. Some of the specific areas are that the parent may not receive the needed attention, the parent may be treated unkindly, the parent might be lonely, the parent might think that the child does not love him any more, the parent may die alone, the parent's

health may decline in the nursing home, and others may think less of the child since he or she had to place his or her parent in a nursing home. The possible responses ranged from "no concern" to "considerable concern" on a ten-point Likert-type continuum. A higher score on this summated scale indicated greater concern.

It was expected that the greater the amount of concern, the greater would be the difficulty of placing the parent, the greater the positive change in the parent-child relationship, and the less positive the effects on the personal life of the adult child.

Attitude toward aging. Several studies have demonstrated that the attitude one has toward aging influences relationships between the elderly and their adult children (Johnson, 1978; Johnson & Bursk, 1977). They suggest that if the elderly parent has a more positive attitude toward aging, then there appears to be a "higher quality in the intergenerational relationship" (Johnson, 1978, p. 306). However, the authors of these studies did not make any attempt to ascertain the attitude of the adult child toward aging or the consequences of placing a parent in a nursing home.

The Scale on Attitude Toward Aging was taken from the Aging Opinion Survey developed by Hicky, Rakowski, Hafer, and Lachman, as reported by Abernathy in her unpublished dissertation (1980). These fifteen items were designed to measure

the respondent's attitude toward his or her own aging. Some of the subject areas were one's attitude toward money matters, looks, health and physical concerns, the lack of friends, etc., all related to one's getting older. The response categories ranged from "strongly agree" to "strongly disagree" on a five-point Likert-type continuum (Appendix A, item 29). No reliability or validity findings were reported by the authors. It was expected that the more positive attitude one had toward his or her own aging, the less difficult placement would be perceived to be by the adult child, the more positive would be perceived changes in the parent-child relationship, and the more positive would be perceived effects on the personal life of the adult child.

Age of the parent. The literature suggests that as people get older they maintain close, satisfying relationships with their family members (McCubbin et al., 1980) or they become more involved with their adult children (Sussman & Burchinal, 1962). The parent-child interaction seems to increase if the parent is in ill health (Horowitz, 1981). In Hill's three generation study (1970), the grandparent generation was seen as the most dependent generation, being dependent on their adult children for services. In addition, as a person increases in age, there is an increased chance of institutionalization (Glick, 1979), and thus, such institutionalization could be more expected for an older person

and more easily accepted. Thus the age of the parent was included as an independent variable. It was expected that the greater the age of the parent, the greater would be the perceived ease of placement. Also, it was expected that the greater the age of the parent the more positive would be the perceived changes in the parent-child relationship and the more positive would be the perceived effects on the adult child's personal life.

Living arrangement of the parent. Smith and Bengtson (1979) suggested that an apparent reason for an improved relationship between the parent and the adult child after placement in a nursing home was the relief experienced by the adult child from providing the parental care. If the parent lived with the adult child prior to admission to the nursing home, it would seem that the amount of relief would be greater than if the parent had his or her own home and was functioning well enough to remain there. It was expected that if the parent lived with the adult child immediately prior to placement, the placement would be perceived to be less difficult, the perceived change in relationship would be more positive, and the perceived effects on the personal life of the adult child would be more positive. This variable was coded with a score of "1" if the parent lived with adult child prior to placement and a "0" if the parent had some other living arrangement (Appendix A, item 21).

Health of parent prior to placement. Linn and Gurel (1972), in their study of family attitudes toward placing a person in a nursing home, found that the level of severity of the illness of the elderly person was inversely related to the family's opposition to placing that person in a nursing home. The severity of the illness was measured by the number of times the parent was hospitalized during the two years prior to placement in a nursing home. It was expected that a worse health status, i.e., more hospitalizations, would result in greater ease of placement, a more positive relationship change as perceived by the child, and a more positive effect on the personal life of the child (Appendix A, item 39).

Perceived adjustment of the parent. It was expected that the amount of adjustment the adult child perceives the parent making to the nursing home would have an effect on both the perceived change in the parent-child relationship and the effect on the personal life of the child. If the parent was perceived as making a good adjustment to the nursing home, then the potential guilt might be lower for the adult child and thus a more positive change in relationship might be perceived, and more positive effects on his or her personal life might be perceived. The parent's adjustment was measured by the response to a single item on a ten-point Likert-type continuum, with potential responses ranging from

"very poor adjustment" to "very good adjustment" (Appendix A, item 61).

Level of involvement and Attitude toward placement.

Two additional independent variables were included in the original study: the level of involvement in making the decision to place the parent in a nursing home, and the degree to which the adult child favored the placement of the parent. It would seem that the degree to which the adult child favored placement, and was involved in it, would have some effect on the consequences of placement. The more involved a child is in a placement decision, and the more he or she favored placement, the greater would that child's sense of responsibility for the outcome appear to be. A child's need for self-justification may lead to a more positive perception of the outcome, in terms of both parental adjustment and change in relationship. Thus, these two independent variables were included in the original study. They were measured by a ten-point Likert-type scale varying from "totally against" to "totally in favor) and "totally uninvolved" to "totally involved," respectively. A higher score indicated greater favoring of placement and more involvement in the decision to place (Appendix A, items 33 and 34).

It was expected that the more the child favored placement, the greater would be the perceived ease of placement, the greater the positive change in the parent-child

relationship, and the more positive the effects on the personal life of the adult child. The same expectations were held for the level of involvement.

Sample of the Original Study

The original study was performed with the cooperation of Heritage Hall, Inc., a corporation which, at that time, operated five nursing homes in the Commonwealth of Virginia. Questionnaires were sent to 228 adult children listed as guarantors for their parents who were in the five Heritage Hall, Inc., nursing homes. The fact that they were all guarantors meant that they were the persons who signed the admission papers and were the persons to be contacted in case of emergency.

From this sample, a total of 116 (51%) adult children responded over a period of 13 weeks. This slow response appears to be indicative of the sensitivity of the subject area covered in the questionnaire. In addition, the length of the questionnaire, eleven pages, may have reduced the response rate. The number of responses received from the sample of each nursing home was roughly proportional to the number of adult children included in the total sample for that nursing home. Of the respondents, 32% were male and 68% were female.

Limitations and Revisions of Original Study Scales

Difficulties with the face validity of several scale items and problems with the breadth of response categories were discovered prior to the analysis of the data of the original study. Also, questions were raised as to the psychometric properties of the scales used in that study. Therefore, the responses to the various scales contained in the original study questionnaire were analyzed for psychometric adequacy through factor analysis and internal consistency analysis (Chronbach's Alpha). As a result of these analyses and subjective evaluation of the face validity of several items, the following changes were made in the scales used in the original study. The Ease of Placement Scale was reduced from five to four items, deleting the item concerning the child's acceptance of the decision to place the parent. The Change in Relationship Scale was reduced from nine to six items, one of which was a reworded version of an original item. The Effect on the Personal Life of the Adult Child Scale was reduced from seven to four items, two of which were reworded versions of original items. The Attitude Toward Aging Scale was reduced from fifteen to seven items. The Amount of Concern Scale retained all seven items. In addition, all of the response categories were reduced from ten-choice to five-choice scales or four-choice in the case of the Amount of Concern and Level of Involvement scales. This

was done because ten choices implies greater precision than is warranted in the responses to these questions. Where only positive response categories were offered in the original study, both positive and negative categories were established in order to give the respondent the opportunity to report either dimension.

It was decided that these revisions should be incorporated into a new study which would not have the limitations of the original research. The revised scales were used in a new, more abbreviated questionnaire for use in the present study. The findings of the original study, reported below, served as a catalyst for the hypotheses to be tested in the main study. The present study could then validate the new scales and attempt to replicate the findings of the original study. A copy of the revised questionnaire is provided in Appendix C.

Results of the Original Study

The SPSS New Regression procedure (Hull & Nie, 1981) was used to effect a stepwise regression analysis of the three dependent variables onto the set of independent variables. A separate analysis was undertaken for each dependent variable. The level for inclusion of a variable in the equation was set at $p = .20$ in order to avoid deleting any potential relationships which might exist. The perceived adjustment of the parent was not included in the analysis in

which the ease of placement was the dependent variable. Any relationship existing between these two variables would be meaningless to interpret.

A summary of the regression analysis which used ease of placement as the dependent variable is presented in Table 1. It was found that the more concerned the adult child was about the parent's being in a nursing home, the greater was the perceived difficulty associated with placing that parent in a nursing home. Also, the more the child favored placing the parent in a nursing home, the greater the perceived ease associated with that placement.

A summary of the regression analysis which used perceived change in the relationship as the dependent variable is shown in Table 2. It was found that the more concern the adult child had about the parent's being in a nursing home, the more positive change was perceived by the adult child to have occurred in the relationship. The higher the level of parental adjustment to the nursing home as perceived by the adult child, the more positive were the perceived changes in the parent-child relationship. The older the parent, the less positive were the perceived changes in the parent-child relationship. And, finally, the lower the level of parental health (as measured by an increased number of hospitalizations) prior to placement in a nursing home, the more

Table 1
 Multiple Regression Summary Table
 for perceived Ease of Placement in Original Study

Dependent Variable: Ease of Placement

Independent Variable	Beta	zero-order correlation
Concern about Placement	-.407	-.464
Attitude toward Placement	.381	.442

Multiple R = .598

$R^2 = .358$

Table 2
Multiple Regression Summary Table
for Perceived Change in Relationship in Original Study

Dependent Variable: Change in Relationship

Independent Variable:	Beta	zero order correlation
Concern about Placement	.202	.257
Adjustment of Parent	.158	.208
Age of Parent	-.129	-.155
Health of Parent	.101	.138

Multiple R = .340

$R^2 = .115$

positive were the perceived changes in the parent-child relationship.

Three independent variables appeared to be related to the perceived effects on the personal life of the adult child. As shown in Table 3, in the regression analysis which used perceived effects on the personal life of the adult child as the dependent variable, it was found that the more the adult child perceived the parent as being adjusted to the nursing home, the more positive were the perceived effects on the child's personal life. The older the parent, the less positive were the perceived effects on the child's life. And the higher the level of concern the adult child had about the parent's being in a nursing home, the more positive the perceived effects on the child's life.

Present Study

A reexamination of the research topic was judged to be desirable for several reasons. First, a second study would provide an opportunity to validate the scales constructed for the original study and revised on the basis analysis. Second, since the original study was the first investigation of the relationship between adult children and their parents in nursing homes in terms of the specific dependent variables and predictors of them, a second study would seek replication of the original findings. Therefore, the

Table 3
 Multiple Regression Summary Table
 for Perceived Effects on the Personal Life
 of the Adult Child in Original Study

Dependent Variable: Effects on the Personal Life of Child

Independent Variable:	Beta	zero-order correlation
Adjustment of Parent	.304	.262
Age of Parent	-.182	-.161
Concerns about Placement	.182	.085

Multiple R = .353

$R^2 = .124$

present study was performed following the same basic methodology of the original study.

Subjects

Data for the present study were collected from a list of adult children who had admitted a parent to one of the seven nursing homes in the Heritage Hall, Inc. organization at the time of the main study. This kept the sample within the same nursing home system, providing the advantage of consistency of nursing home policies toward the inclusion of the family in the treatment of the parent. It has been shown that the institutional care policies toward including the families of the patients are related to the positive experiences of institutionalization (Montgomery, R., 1982).

The revised questionnaires were mailed to the adult children, and two follow-up contacts were made. The first was a postcard sent at two and one-half weeks after the initial mailing, and then a second questionnaire and letter were sent at five and one-half weeks.

Measurement of Dependent Variables

The dependent variables for the present study were the perceived ease of placement, the perceived change in parent-child relationship, and the perceived effect on the personal life of the adult child. These were the same three dependent variables used in the original study. However, they

were measured by the revised scales. These scales and scoring procedures are described below.

The individual's score for each of the summated rating scales was computed by summing his or her responses to the items for each scale and dividing by the number of items minus the number omitted. This yielded an average scale value between one and five. This method of scoring was chosen in order to retain several cases where individuals had failed to respond to several items of a scale. Those respondents who had more than twenty percent of the responses missing for any scale were deleted from having a score on that scale.

Perceived ease of placement. The dependent variable, perceived ease of placement, was measured by a four-item scale (Table 4), with a higher score indicating a greater ease of carrying out the placement of the parent in a nursing home. The possible range in scores was from one to five.

Perceived change in relationship. The perceived change in the parent-child relationship was measured by the Change in Relationship Scale which consisted of six items (Table 4). A score above "3" on this scale indicated that there was a perceived positive change in the relationship. A score of "3" indicated that no change in the relationship and a score of less than "3" indicated a perceived negative change in the relationship. The potential range of scores was from one to five.

Table 4

Dependent Variable Scales and Factor Loadings*

Scale Item	Factor Loadings
<u>Ease of Placement Scale:</u>	
How different was your experience in	
1. Dealing with other family members?	.615
2. Discussing your decision with your parents?	.843
3. Actually taking your parent to the nursing home?	.842
4. Leaving your parent in the nursing home for the first time?	.814
<u>Change in Relationship Scale:</u>	
1. How (loving) do you feel toward your parent now?	.734
2. How easy is it for you to show affection toward your parent?	.736
3. How satisfied are you with your relationship with your parent now?	
4. How pleasant is it to be in the presence of your parent now?	.667
5. How often do you think pleasant thoughts about your parent now?	.602
6. How close emotionally do you feel to your parent now?	.662
<u>Effects on the Personal Life of the Adult Child Scale:</u>	
What effect has placing your parent in a nursing home had on:	
1. Your own family life?	
2. Your relationship with your brothers and sisters?	
3. Your mental health?	
4. Your physical health?	

*Factor loadings are from original study data. Loadings are not given for items which were reworded.

Perceived effect on personal life. The third dependent variable, effects on the personal life of the adult child, was measured by the Effects on Personal Life Scale (Table 4). A score above "3" on the scale indicated that a positive effect on the personal life of the adult child had been perceived by that child after his or her parent had been admitted to the nursing home. A score of "3" indicated no perceived change in the personal life of the adult child and a score of less than "3" indicated a perceived negative change. The potential range of scores for this scale was from one to five.

The Measurement of the Independent Variables

The same eight independent variables used in the original study were used in the present study. These variables were concern about placement, attitude toward placement, the parent's perceived adjustment, the age of the parent, the living arrangement of the parent, the number of prior hospitalizations, adult child's attitude toward aging, and the level of involvement of the child in the placement decision. One additional variable was included in the main study. These variables are described below along with scoring techniques.

Amount of concern. The amount of concern the adult child had about his or her parent's being in a nursing home

was measured by the Amount of Concern Scale consisting of seven items (Table 5). The range of potential scores was from one to four. A higher score indicated a greater amount of concern about the treatment and care the parent would be receiving in the nursing home.

Attitude toward placement. The degree to which the child favored the placement was measured by a single item which had five degrees of response. A higher score indicated increased favoring of the placement of a parent (Appendix C, item 70).

Perceived adjustment of the parent. The perceived adjustment of the parent to being in a nursing home was measured by a single item with five degrees of response. A higher score indicated better adjustment (Appendix C, item 23).

Parent's age and number of hospitalizations. The age of the parent and the number of hospitalizations during the two years prior to placement in a nursing home were measured by chronological age and the frequency of hospitalizations as reported by the adult child (Appendix C, items 7 and 21).

Living arrangement of the parent. The living arrangement of the parent immediately prior to placement in a nursing home was coded either "1" or "0," with "1" indicating that the parent lived with the adult child during that time. A "0" indicated that the parent had some other living

Table 5

Independent Variable Scales and Factor Loadings*

Scale Items	Factor Loadings
<u>Amount of Concern Scale:</u>	
1. Parent may not receive needed attention	.781
2. Parent may be treated unkindly	.688
3. Parent will be lonesome	.745
4. Parent may think that you do not love him or her	.769
5. Parent may die alone	.789
6. Parent's health will decline more in the nursing home	.712
7. Other people may think badly of me for putting my parent in a nursing home	.602
<u>Attitude Toward Aging Scale:</u>	
1. The older I get, the more I worry about money matters.	.740
2. I always dreaded the day I would look in the mirror and see gray hair.	.633
3. The older I become, the more I worry about my health.	.750
4. I fear that when I'm older all my friends will be gone.	.636
5. The thought of outliving my spouse frightens me.	.460
6. The older I become, the more anxious I am about the future.	.647

*Factor loadings are from original study data.

arrangement, including living in his or her own home or with some other relative (Appendix C, item 6).

Attitude toward aging. The attitude one had toward his or her own aging was measured by the Attitude Toward Aging Scale (Table 5). This seven-item scale had a potential range of scores from one to five. A higher score indicated a more positive attitude toward one's own aging.

Level of involvement of child in decision to place. The level of involvement in making the decision to place the parent was measured by a single item with five degrees of response (Appendix C, item 61). A higher score indicated greater involvement and increased favoring of placement.

Health of parent prior to placement. Whereas in the original study the only measure of health of the parent prior to placement was the number of hospitalizations, in the main study the variable measuring the perceived health of the parent at the time of admission was a single item with three degrees of response (Appendix C, item 26). A higher score indicated a poorer status of parental health as perceived by the child.

Hypotheses Related to Ease of Placement

Brandwein and Postoff (1980) reported that adult children had guilt feelings associated with both the fear that the parent's health would deteriorate in a nursing home and

that the parent would not get the care they were used to receiving. This guilt could then make placement more difficult. The same could be said for the belief some adult children have of placement being equal to a death sentence on the parent (Brandwein & Postoff, 1980). For these reasons, in concert with the findings of the original study, it is logical to hypothesize that:

- Hypothesis (1). The adult child's concern about placement is inversely related to the perceived ease of placement, and
- Hypothesis (2). The adult child's approval of placement is directly related to the perceived ease of placement.

Hypotheses Related to Perceived Changes in the Parent-Child Relationship

The fears adult children report about placing a parent (Brandwein & Postoff, 1980) include concern for both the privation of the parent and potential parent-child relationship deterioration. These concerns might lead the child to increased direct involvement with the parent to minimize privation with one by-product being relationship enhancement. Direct participation in relationship activities might occur to forestall anticipated deterioration of the relationship. For this reason, along with the finding of the original study, it was hypothesized that:

- Hypothesis (3). The adult child's concern is directly related to perceived positive change in the relationship.

It seems logical that if the parent was perceived by the adult child as making a good adjustment to the nursing home, then the potential guilt associated with placing that parent, might be lower for the child and a more positive change in the relationship might be perceived. This was supported by the findings of the original study and therefore it was hypothesized that:

Hypothesis (4). The perceived parental adjustment is directly related to perceived positive change in the relationship.

During the period of time when the decision is being made to place a parent, unresolved interpersonal conflicts often arise between the parent and the child (Brody & Spark, 1966). This has also been reported as being a part of the parent-child relationship of non-institutionalized population, with more conflict arising as the parent ages (Simos, 1973). At the same time, the literature has suggested that the parent-child relationship remains close and satisfying with increased age (McCubbin et al., 1980). The nature of the relationship of the parent's age to the parent-child relationship is unclear. Therefore, based on the findings of the original study, it was hypothesized that:

Hypothesis (5). The age of the parent is inversely related to perceived positive change in the relationship.

It has been found that the perceived level of severity of the illness of the elderly person prior to placement was inversely related to the family's opposition to placing that person in a nursing home (Linn & Gurel, 1972). It is assumed that those factors associated with parental illness which lead to family acceptance of placement would lead also to positive relationship changes for the same reasons. For example, a child who yields the daily concerns of caring for a sick parent to the staff of a nursing home is probably freer to perceive the emotional benefits, as opposed to the emotional costs, of having an elderly parent. For this reason, along with the findings of the original study, it was hypothesized that:

Hypothesis (6). Perceived parental health prior to placement is inversely related to perceived positive change in the relationship.

Hypotheses Related to Perceived Effects on the
Personal Life of the Adult Child

It seems logical that if the parent was perceived by the child as making a good adjustment to the nursing home, then the potential guilt associated with the placement of that parent might be lower and a more positive effect on his or her own personal life might be perceived. This was supported by the findings of the original study. Therefore, it was hypothesized that:

Hypothesis (7). Perceived parental adjustment is directly related to perceived positive effects on the child's personal life.

Simos (1973) reported that three out of four adult children reported family problems as a result of parental aging. Yet the older the parent, the more likely he or she would be in ill health. This could make more demands on the personal life of the adult child (Horowitz, 1981), and the parent's being placed in a nursing home might then relieve some of those demands. The nature of the relationship of the parent's age to effects on the personal life of the adult child is unclear. Therefore, based on the finding of the original study, it was hypothesized that:

Hypothesis (8). The age of the parent is inversely related to perceived positive effects on the child's personal life.

It has been reported that adult children had guilt feelings related to the fear that the parent may not get the care they were used to receiving and the parent's health might deteriorate in a nursing home (Brandwein & Postoff, 1980). This guilt could have a negative effect on the personal life of the child. This reasoning, supported by the findings of the original study, led to the hypothesis that:

Hypothesis (9). The adult child's concern about placement is inversely related to perceived positive effects on the child's personal life.

Data Analysis

Descriptive statistics were used to describe the demographic characteristics of the sample. Hypothesized relationships between the independent and dependent variables were investigated using stepwise regression prescribed in the SPSS "new regression" model as found in Hull and Nie (1981). The level for inclusion of a variable in the equation was set at $p = .05$.

The following assumptions were required for using regression analysis to test the relationships hypothesized in the present study:

1. Scores from the summated rating scales are assumed to represent measurements at the interval level.
2. Other variables included in the regression analyses were either measured at the interval level or, as in the case of dichotomous nominal variables, could be treated statistically as though they were measured at the interval level.
3. A linear combination of the variables could provide an adequate representation of the relationships between the independent and the dependent variables.

Chapter IV

RESULTS

In the seven nursing homes sampled, 175 patients had living adult children listed as guarantors by the nursing homes. Questionnaires were sent to these adult children. Nine potential respondents had moved with no forwarding addresses. One hundred twenty-six of the remaining 166 adult children returned questionnaires, for a response rate of 75.9%. Fifteen of the returned questionnaires were not usable because of missing data; the usable response rate was 66.9%

Descriptive Analysis

The demographic characteristics of the respondents are given in Table 6. The mean age of the respondents was 54.8 years with a range of 27 to 72 years. The mean age of the males (57.7 years) was higher than that of the females (53.2 years). Thirty-four percent of the adult children were older than the youngest parent in the sample; i.e., 60 years old and older. When one is interpreting the responses of "adult children" in this study it is necessary to keep in mind that a sizable proportion of them are already considered to be "old" by some standards.

Table 6

Demographic Characteristics of Adult Children in the Present Study

Variable	Present Study		Original Study %
	N	%	
<u>Sex</u>			
Male	39	35.1	32
Female	72	64.9	68
<u>Age</u>			
26-30	2	1.8	0.8
31-35	2	1.8	1.7
36-40	9	8.1	5.1
41-45	9	8.1	6.9
46-50	14	12.6	19.0
51-55	18	16.2	18.1
56-60	19	17.1	20.7
61-65	22	19.8	16.4
66-70	10	9.0	8.6
71-75	6	5.4	2.6
<u>Marital Status</u>			
Single	4	3.6	2.6
Married	84	75.7	73.3
Separated	2	1.8	1.7
Divorced	6	5.4	5.2
Widowed	11	9.9	17.2
Remarried	4	3.6	
<u>Income Adequacy</u>			
Inadequate	6	5.6*	3.5
Inadequate, but making it	27	25.2*	25.4
Adequate, but could use more	34	31.8*	43.9
Adequate	38	35.5*	23.7
More than adequate	2	1.9*	3.6
Missing	4	--	
<u>Education</u>			
Less than high school	40	37.0*	23.7
High school graduate	46	42.6*	47.4
Some college	12	11.1*	10.5
College graduate	10	9.3*	18.4
Missing	3	--	
<u>Residence</u>			
Rural, open country	58	52.3	39.5
Small town, under 1,000	18	16.2	5.3
Town, under 10,000 population	19	17.1	30.7
City(10,000 to 100,000)	11	9.9	22.8
Large city, over 100,000	5	4.5	2.0

*Adjusted percentage due to missing data.

The typical respondent resided in a rural or small town, and had completed high school. A larger number of them had their mothers in the nursing home than had fathers there. Thirty-four percent of the children were older than the youngest parent in the sample.

The characteristics of the parents are given in Table 7. The average length of time the parent had been in a nursing home was 1.74 years. The largest percentage of the parents (45.9%) lived with the respondent prior to placement in the nursing home. However, more than one-third of the parents (37.8%) lived in their own home. The majority (85.5%) of the parents had been hospitalized at least once during the two years prior to placement in a nursing home.

Results

The intercorrelations for the independent variables, as well as the means and standard deviations, are given in Table 8. The intercorrelations for the independent variables are fairly low for the most part. Only four of the correlations were significant at the .01 level. The intercorrelations among the dependent variables was virtually nonexistent with the highest correlation being $-.050$.

Item response analyses as well as reliability coefficients for the multiple item scales are reported in Appendix B. The responses for each of the dependent variables are summarized below.

Table 7

Demographic Characteristics of Parents in the Present Study

Variable	<u>Present Study</u>		Original	National %
	N	%	Study %	
<u>Sex</u>				
Male	31	27.9	12.0	31.1
Female	80	72.1	87.0	68.9
<u>Age</u>				
< 49	0	0.0	0.0	3.1
50-64	5	5.8	5.0	9.8
65-79	28	25.2	26.0	30.6
80 +	78	70.2	69.0	52.9
<u>Marital Status</u>				
Married	21	18.9	9.6	
Widowed	90	81.1	90.4	
<u>Length of Stay in Hospital</u>				
< 4 months	12	10.3	0.9	14.0
4-6 months	13	11.2	2.6	8.9
7-11 months	28	24.1	21.2	13.2
1-2 years	35	30.2	36.6	19.3
3-4 years	10	8.6	25.4	19.9
5-9 years	10	8.6	13.8	17.1
10 + years	2	1.7	0.9	3.0
<u>Living Arrangement</u>				
<u>Prior to Placement</u>				
In own home	42	37.8	29.9	34.0
With respondent	51	45.9	44.0	(41.5
With other relatives	8	7.2	12.9	(
Other	10	9.0	13.3	--
<u>Number of Hospitalizations</u>				
<u>Prior to Placement</u>				
0	16	14.5	11.5	
1	29	26.4	15.4	
2	24	21.8	33.7	
3	13	11.8	15.4	
4	15	13.6	6.7	
5	5	4.5	5.8	
6 +	8	7.4	11.5	

Table 8

Correlations, Means, and Standard Deviations for the Independent and Dependent Variables

Variables	1	2	3	4	5	6	7	8	9	10	11	12
1. Attitude Toward Placement	---	---	---	---	---	---	---	---	---	---	---	---
2. Concern About Placement	-.355 **	---	---	---	---	---	---	---	---	---	---	---
3. Attitude Toward Aging	.114	-.241 **	---	---	---	---	---	---	---	---	---	---
4. Parent's Age	-.011	.017	-.033	---	---	---	---	---	---	---	---	---
5. Number of Hospitalizations	.005	.201 *	-.004	-.137	---	---	---	---	---	---	---	---
6. Living Arrangement of Parent	-.215 *	.063	-.120	.003	-.157	---	---	---	---	---	---	---
7. Adjustment of Parent	.175	-.448 **	.168	-.087	.042	.096	---	---	---	---	---	---
8. Level of Involvement	.126	-.111	.069	-.009	-.003	.014	.186	---	---	---	---	---
9. Health at Admission	.033	-.155	.171	.138	-.191 *	-.056	-.017	-.230 *	---	---	---	---
10. Ease of Placement	.366 **	-.372 **	.173	.012	-.128	-.284 **	.085	-.025	.010	---	---	---
11. Change in Relationship	-.006	.267 **	-.221 *	-.260 **	.218 *	-.025	.101	.064	-.193 *	-.050	---	---
12. Effect on Personal Life	-.025	-.064	.025	-.119	-.162	.169	.098	.070	-.004	.029	.002	---
Mean	4.35	2.13	2.96	83.38	2.50	.46	3.69	3.87	1.48	2.63	3.54	3.34
S. D.	1.29	.86	.86	8.74	2.63	.50	1.06	.58	.62	.94	.68	.73

** = p .01

* = p .05

Ease of Placement

Respondents tended to perceive the process of placing their parent in a nursing home as somewhat difficult. The most difficult task, as the child perceived it, was leaving the parent at the nursing home for the first time. The next most difficult task was that of taking the parent to the nursing home for the first time. The respondents saw dealing with other family members as being somewhat easy.

Perceived Change in the Relationship

The respondents perceived a slight positive change in the relationship with their parent since the parent was placed in a nursing home. However, for each item in the scale, over 50% of the respondents reported "no change" in the relationship. The items with the largest amount of positive change as perceived by the child were the child having more loving feelings toward the parent, being more satisfied with the relationship, having more pleasant thoughts about the parent, and feeling more emotional closeness with the parent.

Respondents were asked to rate the quality of their relationship they had with their parents as of the time they were filling out the questionnaire. Of the 107 who responded to this question, 76.6% rated their relationship as being "good," the highest possible response, and an additional 2.8% reported it as being "somewhat good." The remaining 20.6%

reported their relationship as being "average." None of the respondents reported their relationship with their parent as being "somewhat bad" or "bad." When this information is coupled with the fact that the respondents reported "no change" or a predominantly positive change in the various items of the Change in Relationship scale, it can be concluded that placing a parent in a nursing home has the potential of improving the relationship with that parent or at least will tend to keep it the same as it was before placement occurred.

The Perceived Effects on the Personal Life of the Adult Child

For the respondents as a whole, slight positive effects were reported for the personal life of the adult child as a result of his or her parent being placed in a nursing home. As with the previous scale, for each of the items over 50% of the respondents reported "no change." Yet, when an effect was reported, the effects were predominantly positive. The items where the most positive effects were perceived were in terms of the respondent's own family life, and the respondent's own mental health.

Regression of Perceived Ease of Placement

A summary of the stepwise regression analysis in which the Ease of Placement was the dependent variable is shown in Table 9. It was hypothesized that the amount of concern the

Table 9
Multiple Regression Summary Table
for Perceived Ease of Placement in Present Study

Dependent Variable: Ease of Placement

Independent Variable	b	Beta	Zero-order correlation (r)
Concern about placement	-.303	-.280	-.372
Living arrangement of parent	-.407	-.219	-.284
Attitude toward placement	.157	.219	.366

Multiple R = .497
R² = .247

adult child had about his or her parent being in a nursing home would be negatively related to the perceived ease of placement (Hypothesis 1). This hypothesis was supported by this study. The standardized beta (β) for the adult child's concern about placement was $-.280$. This finding corroborated the reporting of Brandwein and Postoff (1980) and the finding of the original study.

It was further hypothesized that the attitude the adult child had toward putting a parent in a nursing home would be positively related to the perceived ease of placement (Hypothesis 2). This hypothesis was also supported ($\beta = .219$). This finding also adds quantitative support for the thesis of Brandwein and Postoff (1980).

Thus both of the hypotheses concerning the ease of placement were supported. There was an additional predictor which emerged in the regression analysis; i.e., the living arrangement of the parent which was not hypothesized to be present ($\beta = -.219$). If the parent did not live with the adult child prior to being placed in a nursing home, the child perceived it as being easier to carry out the activities associated with that placement.

These three significant predictors accounted for 24.7% of the variance in the ease of placement. Thus, the group of respondents most likely to perceive placing a parent in a nursing home as being more difficult were: those who had

more concerns about the parent being in a nursing home, who had their parent living with them prior to placement, and who were against their parent being placed in a nursing home.

Regression of Perceived Change in the Parent-Child Relationship

As shown in Table 10, the regression analysis revealed four significant predictors of the perceived change in the parent-child relationship. It had been hypothesized (Hypothesis 3) that the level of concern the adult child had would be positively related to the perceived change in the relationship. This hypothesis was supported ($\beta = .345$). The finding supports Brandwein and Postoff (1980) and the original study.

The second significant predictor was the age of the parent, which was negatively related to the perceived change in relationship ($\beta = -.250$). This finding supported Hypothesis five. That hypothesis stated that the older the parent, the less positive change in the relationship was perceived by the adult child. This finding appears to support the thesis of Brody and Spark (1966) that with increased age of the parent, there is increased strain in the parent-child relationship. However, it must be kept in mind that 93% of the respondents reported no change or positive change in the parent-child relationship. Thus, this finding lends support

Table 10
 Multiple Regression Summary Table
 for Perceived Change in Relationship in Present Study

Dependent Variable: Change in Relationship

Independent Variable	b	Beta	Zero-order correlation (r)
Concern about placement	.269	.345	.267
Age of parent	-.019	-.250	-.260
Adjustment of parent	.166	.266	.101
Attitude toward aging	-.150	-.191	-.221

Multiple R = .476

R² = .226

to the conclusion of McCubbin et al. (1980) that with increased age of the parent, the parent-child relationship remains satisfying and close.

The third significant predictor of a perceived change in relationship was the amount of adjustment the adult child perceived the parent making to being in a nursing home. This finding supported hypothesis four in that the perceived adjustment was positively related to the perceived change in relationship ($\beta = .266$). This finding was somewhat surprising in light of the low zero order correlation between these two variables ($r = .101$). When a predictor has a low zero order correlation and a higher partial correlation with the criterion, it is known as a suppressor variable (Pedhazur, 1982). This type of variable has a low correlation with the criterion but does have a higher correlation with at least one of the predictor variables. In this case the other predictor variable was the amount of concern ($r = 0.423$). When such a suppressor is included in the equation, "it serves to suppress, or control for, . . . variance that is shared with the predictor and not with the criterion, thereby ridding the analysis of irrelevant variation, or noise" (Pedhazur, 1982, p. 104). This supports the finding of the original study. It also parallels the findings of Smith and Bengtson (1979) that improved physical condition of the parent after placement

was directly related to an improved closeness in the parent-child relationship.

It had been hypothesized that the lower the level of parental health prior to placement, as perceived by the child, would be directly related to the perceived change in the parent-child relationship (hypothesis 6). However, this hypothesis was not supported. The parent's health was found to be a significant predictor of a perceived change in the relationship.

A fourth predictor, the adult child's attitude toward his or her own aging, emerged as a significant predictor of a perceived change to the parent-child relationship ($\beta = -.191$). It was not expected that this predictor would be present in the equation.

When combined, these four variables accounted for 22.6% of the variance. The group of respondents most likely to have perceived a positive change in the relationship were those who had more concerns about the parent being in a nursing home, had younger parents, saw their parent as making a good adjustment to being in a nursing home, and did not view their own aging positively.

Regression on the Perceived Effects on the Personal Life of the Adult Child

None of the independent variables emerged from the regression analysis as being a significant predictor of

perceived effects on the personal life of the adult child. In light of the absence of relationships found here, it appears that the independent variables used in this study do not predict the perceived effects on the personal life of the adult child when he or she places a parent in a nursing home.

Chapter V

SUMMARY AND DISCUSSION

The practical importance of the study of relationships between nursing home patients and their children is made apparent by the juncture of several facts. First, the elderly make up the fastest growing segment of the American population. Secondly, because of the deterioration of health with advanced age, the elderly represent the fastest growing segment of the population who require extensive medical care; the most plausible projection is for the demand on health care facilities for the aged to increase in the future (Glick, 1979).

A third phenomenon related to the importance of this study is the increase in the percentage of females in the work force. Since daughters historically have been the most likely candidates to care for their aging parents, fewer of them are now available for the task; the care of aged parents is, therefore, more likely to be transferred to paid professionals. All of these facts suggest the likelihood that an increasing proportion of adults will actually place a parent in a nursing home in the future, receiving the accrued benefits and absorbing the undesirable consequences. This study, therefore had the purpose of examining selected aspects of the effects this experience has on adult children.

An original study was performed in 1981 by Maxwell and Garrison with the three dependent variables being the ease of placement, the change in parent-child relationship, and the effect on the personal life of the adult child as perceived by the child. Independent variables were chosen both on the basis of previous research and on logically expected relationships. Those independent variables were: the amount of concern the adult child had about the parent's being in a nursing home, the adult child's attitude toward his or her own aging, the adult child's level of involvement in the decision to place the parent, and how favorably the child viewed the placement. Also included were the parent's age, the perceived adjustment the parent had made to being in a nursing home, the perceived health status of the parent at the time of admission, and the living arrangement of the parent prior to placement.

Questions concerning the psychometric properties of the scales used to measure the dependent variables and several independent variables, and the face validity of several items necessitated the present study. Scale revisions were made on the basis of analyses performed. The revised scales were included in a shorter, more focused questionnaire utilized in the present study. Results of the original study and evidence from existing literature formed a basis for hypotheses which were tested in the present study. These hypotheses and a discussion of the results of the present

study follow.

Findings Related to Perceived Ease of Placement

It was hypothesized that 1) the adult child's concern about placement is inversely related to the perceived ease of placement, and 2) the adult child's approval of placement is directly related to the perceived ease of placement. Both of these hypotheses were supported by the present study. An additional variable, the living arrangement of the parent prior to placement, emerged as being a significant predictor of the ease of placement.

The parent's susceptibility to feelings of loneliness and abandonment, and the health care status of the parent were of primary interest to the adult. Children were anxious that the parent might not receive the care the child could, and should be giving. This apparent sense of filial responsibility exhibited itself in another way. If the parent lived with the adult child before going to the nursing home, it was more difficult for the adult child to carry out the decision to place the parent. Adult children appear to have a personal investment in caring for their parent. One would expect that a child would be relieved to have someone else take over the caretaking responsibilities, thereby providing greater ease in placing the parent. However, this was not the case in the present study. Rather, those children whose parent had lived with them

prior to placement had more difficulty with the placement. This may be indicative of filial responsibility having greater importance to the adult children than the personal relief from someone else taking over the care of their parent.

The third predictor of the ease of placement was how favorably the adult child viewed the nursing home placement. It appears logical that the more an adult child favors placing his or her parent in a nursing home, the easier that task would be. This conclusion was supported by the present study.

Findings Related to Perceived Change in the Parent-Child Relationship

It was hypothesized that 3) the adult child's concern about placement is directly related to perceived positive change in the relationship; 4) the perceived parental adjustment is directly related to perceived positive change in the relationship; 5) the age of the parent is inversely related to perceived positive change in the relationship; and 6) perceived parental health prior to placement is inversely related to perceived positive change in the relationship. The first three of these hypotheses were supported by the present study. The perceived parental health prior to placement did not emerge as a significant predictor. However, a fourth predictor did emerge as being significant, namely, the adult child's attitude toward his

or her own aging, which was negatively related to perceived positive change in the relationship.

The best predictor of a change in the parent-child relationship was the amount of concern the adult child had about the parent's patient status, and that relationship was positive. The positive association may be a result of the fact that an increase in concern may bring about increased contact and increased opportunity for relationship enhancement.

The age of the parent was the second predictor of the perceived change in parent-child relationships. The older the parent, the less likely it was that the child perceived positive changes in the relationship. In interpreting this finding, it must be remembered that 93% of the respondents had scores on the Change in Relationship Scale indicating no change or positive change in the relationship. On a separate item, all of the respondents evaluated the quality of the relationship with their parent at the time of response, as being average to good. This finding, then, lends support to the conclusion that the parent-child relationship remains satisfying and close as the parent ages (McCubbin et al., 1981; Troll, 1971), even when the parent's mental or physical status requires institutional care.

The perceived adjustment of the parent to being in the nursing home was the third variable to emerge in the regression. As was described above, this was a suppressor variable

due to its strong association with the amount of concern. However, on the surface it appears logical that the better adjusted the adult child views his or her parent as being, the more positive the relationship could become. If the parent has not adjusted to being in a nursing home, the parent may express dissatisfaction to the child, or may blame the child for his or her unhappiness. This could present a barrier between them, preventing the maintenance of a close relationship.

The last variable to emerge from the regression was the attitude the adult child had toward his or her own aging, and was negatively related to perceived positive changes in the relationship. If the adult child has a negative attitude toward his or her own aging, caring for a chronically ill parent might be a constant reminder to the child of his or her own approaching old age and thereby continually activate the negative feelings associated with that aging process. That constant reminder associated with the parent's condition, might then be a barrier to a more positive relationship. When that reminder for the adult child is removed by the parent's being placed in a nursing home, then the child may be able to have a more positive relationship with that parent.

Findings Related to Perceived Effects on the Personal Life of the Adult Child

It had been hypothesized that 7) perceived parental adjustment is directly related to perceived positive effects on the child's personal life; 8) the age of the parent is inversely related to perceived positive effects on the child's personal life; and 9) the adult child's concern about placement is inversely related to perceived positive effects on the child's personal life. None of the independent variables emerged as significantly related to this dependent variable. Therefore, hypotheses seven through nine were unsupported.

Summary of Findings

These findings suggest that adult children perceive the placement of a parent in a nursing home as being difficult. The most difficult aspects of placement revolve around taking and leaving the parent at the home for the first time. It is more difficult for those children who have more concern about the parent's patient status, who have had the parent living with them prior to placement, and who do not favor placing their parent. This may be accounted for by those children having a stronger sense of filial responsibility related to caring for their parent.

The placement of a parent does not appear to be accompanied by a deterioration of the parent-child relationship as perceived by the child. Rather, the relationship

tends either to remain the same or improve, especially in terms of the love that is felt toward the parent, feeling closer emotionally, thinking pleasant thoughts of the parent, and being satisfied with the parent-child relationship. Placement may bring about an increase in parent-child contact out of the child's concern over his or her parent's patient status, which can result in improved relationships. Physical separation removes the parent's illness as a constant reminder of one's own aging. Greater objectivity can be maintained by children when nursing home staff assume responsibility for physical care of the parent. The fear that the parent-child relationship will automatically deteriorate after placement has not been supported by this research. The evidence suggests instead that children may enter the experience with the possibility of placement providing opportunity for relationship enhancement.

Children perceive that their personal life is either unaffected, or positively affected, by the placement of a parent. Beneficial effects are seen mainly in terms of the child's own family life, and the child's mental and physical health. Relief from the caretaking responsibilities result in positive personal benefits for the child.

While nursing home care for a parent produces realistic concerns, both for the parent's welfare and for the child's own sense of kinship obligations, it appears that the most

likely outcome of placement is salutary in terms of the relationship between parent and child.

Recommendations for Future Research

Analysis of the data revealed that the multiple correlation coefficients for the first and second regression equations were statistically significant. The multiple correlation coefficient for the ease of placement was .459 ($F = 11.27$, $p < .001$), and .476 ($F = 7.45$, $p < .001$) for the change in the parent-child relationship. The proportion of the variance accounted for in the perceived ease of placement was 24.7% and in the perceived change in relationship was 22.6%. Although this amount of variance accounted for in these models is statistically significant, it is still rather moderate. Over seventy-five percent of the variance for each of these dependent variables is unaccounted for. Therefore it would seem advisable for future research to examine other factors which could reduce that amount of unexplained variance.

One such approach might be to explore the nature of the parent-child relationship prior to placement. The family theory of Bowen (1978) seems most appropriate for such an investigation, with his emphasis on intergenerational relationships. This framework has been used by Hall (1981) when she used single case studies to test several hypotheses related to how family members react to the institutional-

zation and/or debilitation of elderly family members. Areas of concern to her were the relationship of emotional dependency among the family members and the level of physical debilitation, and senile behavior; patterns of dependency present at an earlier time in the relationship recurring as the parent grows older; the connectedness of same-sex parents and children; and the loneliness, alienation or isolation experienced by the parent being directly related to the degree of emotional cut-off with other family members. These same areas of investigation provide potential for explaining a portion of the unaccounted for variance in the dependent variables above.

In pursuing such an investigation, areas such as the level of parent-child dependency prior to placement, the level and quality of interaction prior to and after placement, make-up by sex of the parent-child dyad, and the family's history of caring for the elderly might be explored. Also, the impact on children other than guarantors and the process by which guarantors were chosen might add valuable information, as suggested by Cath (1972).

Additional improvements might include the use of pre-admission tests and post-admission tests at several different times to assess the influence of the length of time the parent has been in the nursing home. Also, the parent's ability to communicate, the length of time the parent resided with the child prior to placement, and the support

for placement given by other family members might be considered.

One caveat for future research is the potential effect of the financial status of the parent and/or the adult child on the placement of a parent in a nursing home. The present study was conducted prior to the government's cutbacks in financial assistance for nursing home care, and the majority of the parents had the cost covered by medicare or medicaid. However, in future studies it is recommended that the family's ability to pay for the nursing home and the extent of the family's involvement in such payments be considered.

Contributions to the Literature

This study makes several contributions to the existing literature. The position taken by earlier researchers that the parent's placement in a nursing home generates positive change in the parent-child relationship (Smith and Bengtson, 1979; Montgomery, R., 1982) was supported. This position is strengthened not only through similarity of findings, but through the fact that the present study employed a different, more quantitative method of analysis.

In addition to supporting those particular studies, these findings help in answering the question whether or not those who place a parent in a nursing home are a

unique population in terms of parent-child relationships. It adds strength to the conclusions reach by McCubbin et al., (1981) and Troll (1971) that the parent-child relationship remains satisfying and close as the parent ages, and suggests that, in this respect, nursing home patients and their children are not unlike the general population.

This study identified several predictor variables which can be useful in future development of causal models for the dependent variables. This is especially true for the perceived change in relationship between the parent and child. A part of this identification process was the noting of other independent variables which were not predictive of the dependent variables.

Scales were constructed to measure the dependent variables and several independent variables and were analyzed on two separate samples. These scales might be used in future research on this subject.

One further contribution of this study is that the findings, especially related to change in relationship, can bring added information to adult children as they anticipate the placement of their parent in a nursing home. This is especially true if the child perceives placement as necessitating a deterioration in the relationship with his or her parent. It has been demonstrated that the relationship will remain the same or improve

for the majority of families.

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APPENDICES

APPENDIX A

Original Study Questionnaire

Questionnaire for Child of Nursing Home Patient

Name _____

1. What is your present age? _____
2. What is your sex? Male _____
Female _____
3. What is your present marital status?
 Single, never married
 Married
 Separated
 Divorced
 Widowed
4. What best describes the place where you live now?
 Rural, open country
 Small town, under 1,000 population
 Town, under 10,000 population
 City, from 10,000 to 100,000
 Large city, over 100,000 population
5. What is your present occupation? _____
6. What is your spouse's occupation? _____
7. To what degree does your family income meet your financial needs?
 Totally inadequate - need financial assistance
 Inadequate, but making it
 Adequate, but could use larger income
 Adequate
 More than adequate
8. How many years have you been married to your present spouse? _____
9. Please list the sex and ages of all your children- for example, Boy - 13, Girl 10

<u>Sex</u>	<u>Age</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

10. To which religious denomination do you belong, if any? _____
11. How often do you attend your church, on the average?
 More than once a week
 Once a week
 About once a month
 A few times a year
 Almost never

12. Please give us the age and marital status of your brothers and sisters who are still living, by filling in the blank and checking the appropriate column.

	Age	Single	Married	Separated	Divorced	Widowed
Brothers: (1)	_____					
(2)	_____					
(3)	_____					
(4)	_____					
Sisters: (1)	_____					
(2)	_____					
(3)	_____					
(4)	_____					

13. What is your position among the children in the family?

- Oldest child
- A middle child
- Youngest child
- Only child
- Adopted child

14. What is your level of education?

- Completed 1 through 3 grade
- Completed 4 through 6 grade
- Completed high school
- Completed two years of college
- Completed 4 years of college
- Completed a graduate degree

15. What is your spouse's level of education?

- Completed 1 through 3 grade
- Completed 4 through 6 grade
- Completed high school
- Completed two years of college
- Completed four years of college
- Completed graduate degree

16. On a scale of 1 (Unhappy) to 10 (Very Happy), circle the number that represents the level of happiness you have in your marriage at the present time.

Very Unhappy	Unhappy	Mildly Unhappy	Mildly Happy	Happy	Very Happy				
1	2	3	4	5	6	7	8	9	10

PLEASE GIVE US THE FOLLOWING INFORMATION ABOUT YOUR PARENT WHO IS IN THE NURSING HOME.

17. Which of your parents is in the nursing home?

- Mother
- Father

18. Is your other parent still living?

- Yes
- No

19. What is the present age of your parents?

- Mother
- Father

28. Please go back now to item 27 and draw a circle around the check mark by the item you think was the most important reason for the decision to put your parent in a nursing home.
29. Please respond to the statements below by indicating your own level of agreement or disagreement. Check the number in the response column that expresses your judgment.

	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
a. It is best to forget that we are getting older every day.	1	2	3	4	5
b. The older I get the more I worry about money matters.	1	2	3	4	5
c. I always dreaded the day I would look in the mirror and see gray hairs.	1	2	3	4	5
d. I have become more content with the years.	1	2	3	4	5
e. I dread the days when I can no longer get around on my own.	1	2	3	4	5
f. The older I become the more I worry about my health.	1	2	3	4	5
g. I am sure I will always have plenty of friends to talk to.	1	2	3	4	5
h. I never think about dying.	1	2	3	4	5
i. I fear that when I'm older all my friends will be gone.	1	2	3	4	5
j. The thought of outliving my spouse frightens me.	1	2	3	4	5
k. Financial dependence on my children in old age is one of my greatest fears.	1	2	3	4	5
l. I know I'll enjoy sexual relations no matter how old I am.	1	2	3	4	5
m. The older I become, the more anxious I am about the future.	1	2	3	4	5
n. You can keep the joys of grandparenthood, I'd rather be young.	1	2	3	4	5
o. I would prefer to always live in an area where people my age predominate.	1	2	3	4	5
p. When parents get older their children ought to take care of them.	1	2	3	4	5

30. How long was it from the time you first considered admitting your parent until your parent actually entered the nursing home?

_____ Years, _____ Months

31. How many nursing homes did you call, write, or visit before making the decision to admit your parent?

- _____ None
 _____ One
 _____ Two
 _____ Three or more

32. Which of these professionals were involved in the decision?

- _____ Doctor
 _____ Lawyer
 _____ Minister
 _____ Other (please specify) _____

33. In general, what was the opinion of the following people about your parent going to a nursing home?

	Totally Against		Against		Mildly Against		Mildly In favor		Favor		Totally In Favor
	1	2	3	4	5	6	7	8	9	10	
Your parent who was admitted											
Your other parent											
Your aunts											
Your uncles											
Your brothers											
Your spouse											
Yourself											

34. In general, what was the level of involvement of the following people in making the decision to admit your parent to a nursing home?

	Totally Uninvolved		Uninvolved		Mildly Uninvolved		Mildly Involved		Involved		Totally Involved
	1	2	3	4	5	6	7	8	9	10	
Your parent who was admitted											
Your other parent											
Your aunts											
Your uncles											
Your brothers											
Your spouse											
Yourself											

35. How would you describe your own health at the present time?

- _____ Excellent
- _____ Good
- _____ Fair
- _____ Poor

36. How would you describe your spouse's health at the present time?

- _____ Excellent
- _____ Good
- _____ Fair
- _____ Poor

37. How far away do you live from the nursing home where your parent is a patient? _____ miles

38. How far away do you live from a hospital? _____ miles

39. How many different times was your parent admitted to a hospital in the two years before being admitted to a nursing home? _____

40. In making and carrying out the decision to place your parent in the nursing home, how difficult was each of the following?

	Extremely Difficult	1	2	3	Difficult	4	Mildly Difficult	5	Mildly Easy	6	7	8	Easy	9	10	Very Easy	Not Applicable
Dealing with other family members																	
Accepting the idea																	
Handling the expense																	
Separating my parents																	
Telling your parents about the decision																	
Actually taking your parent to the nursing home																	
Leaving your parent in the nursing home for the first time																	

41. During the two years before entering the nursing home, how much total time was your parent in the hospital?

- None
- Less than 1 week
- From 1 to 4 weeks
- More than a month

42. How often do you visit your parent in the nursing home?

- Several times a week
- About once a week
- About twice a month
- About once a month
- About once every 3 months or less

43. How often do you telephone your parent in the nursing home?

- Several times a week
- About once a week
- About twice a month
- About once a month
- About once every 3 months or less
- Never

44. Please circle the number which best reflects how satisfied you feel about the frequency of your visits to your parent.

Very Dissatisfied		Dissatisfied		Mildly Dissatisfied		Mildly Satisfied		Satisfied		Very Satisfied
1	2	3	4	5	6	7	8	9	10	

53. Are visiting hours adequate to your needs?

_____ They are adequate
 _____ Would like more time
 (please fill in the specific times _____)

54. Please answer the following questions comparing the way things are now with the way they were before your parent entered the nursing home.

a. How do you feel toward your parent now?

Much Less Loving											Much More Loving
1	2	3	4	5	6	7	8	9	10		

b. How easy is it for you to give affection to your parent now?

Much Harder											Much Easier
1	2	3	4	5	6	7	8	9	10		

c. How much do you need your parent now?

Much Less											Much More
1	2	3	4	5	6	7	8	9	10		

d. How much do you wish to be in the presence of your parent now?

Much Less Often											Much More Often
1	2	3	4	5	6	7	8	9	10		

e. How often do you think pleasant thoughts about your parent now?

Much Less Often											Much More Often
1	2	3	4	5	6	7	8	9	10		

f. How much do you wish to do things for your parent now?

Much Less											Much More
1	2	3	4	5	6	7	8	9	10		

g. How satisfied are you now with your parent's situation?

Much Less Satisfied											Much More Satisfied
1	2	3	4	5	6	7	8	9	10		

h. How much tension exists in your own family now about your parent's situation?

Much Less Tension											Much More Tension
1	2	3	4	5	6	7	8	9	10		

i. How close emotionally do you feel to your parent now?

Much Farther Apart											Much Closer Together
1	2	3	4	5	6	7	8	9	10		

j. How do you feel toward nursing homes now?

Much Less Favorable											Much More Favorable
1	2	3	4	5	6	7	8	9	10		

45. Who visits your parents at least once a month?

- You
- Your spouse
- Your children
- Your brother(s)
- Your sister(s)
- Your aunt(s)
- Your uncle(s)

46. How often do you write letters to your parent in the nursing home?

- Several times a week
- About once a week
- About twice a month
- About once a month
- Once every 3 months or less
- Never

47. If your parent did not live with you before entering the nursing home, how often did you visit, on the average?

- 3 or more times a week
- 1 or 2 times a week
- Twice a month
- Once a month
- Once every 3 to 6 months
- Once a year or less

48. What special occasions did you remember for your parent in the nursing home in the past year? Check as many as apply:

- Birthday of parent
- Wedding anniversary of parent
- Easter
- Christmas
- Thanksgiving
- Other (please specify) _____

49. If you have chosen not to remember your parent on special occasions, what was the reason?

- It was too expensive
- I was too busy
- I forgot about it
- I didn't want to remind my parent of how things have changed
- My spouse did not want me to remember them

50. To what degree has your family had to make these adjustments to having a parent in the nursing home?

	No Adjustment	1	2	3	4	5	6	7	8	9	10	Great Adjustment
Changing our routines on weekends												
Changing our family budget												
Providing living accommodations for my other parent												
Others (please specify)												

51. What days of the week do you usually visit?

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday
- Sunday

52. What times of day would be most convenient for you to visit? _____

55. What has been done with your parent's property since the time of admission to the nursing home?

- It has been kept just as it was before admission.
- It has been divided among the children.
- Part has been sold and part divided among the children.
- Other (please specify) _____

56. Who is in charge of your parent's property now that your parent is unable to look after it?

- Oldest boy
- Oldest girl
- A middle boy
- A middle girl
- Youngest boy
- Youngest girl
- Only child
- Someone outside the family

57. How often do your aunts & uncles have contact with your parent in the nursing home?

- | | | | | | | | | | | |
|---------------|---|----------------|---|--------|---|-------------------|---|-----------------|----|--------------------|
| Not
At All | | Very
Seldom | | Seldom | | Occa-
sionally | | Fre-
quently | | Very
Frequently |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |

58. To what degree do you foresee your parent moving out of the nursing home in the future?

- | | | | | | | | | | | |
|------------------------------|---|---|---|---|---|---|---|---|----|-------------------------|
| Definitely will
not leave | | | | | | | | | | Certainly
will leave |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |

59. If your parent does move out of the nursing home in the future, where do you think the new residence will be?

- With oldest boy
- With oldest girl
- With a middle boy
- With a middle girl
- With youngest boy
- With youngest girl
- With only child
- To his or her own residence
- Other (please specify) _____

60. What was the approximate total cost of medical care for your parent in the two years before entering the nursing home, including the costs paid by medicaid or medicare? _____

61. How well has your parent adjusted to being in a nursing home?

- | | | | | | | | | | | |
|-------------------------|---|--------------------|---|--------------------------------|---|--------------------------------|---|--------------------|----|----------------------------|
| Very Poor
Adjustment | | Poor
Adjustment | | Slightly
Poor
Adjustment | | Slightly
Good
Adjustment | | Good
Adjustment | | Very
Good
Adjustment |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |

62. What kinds of messages do you get from your parent about being in the nursing home?

63. What could the nursing home do to improve their services to you, your family, or your parent?

66. What are the things about the nursing home that you like best?

We want to thank you for taking your time to share with us some information about your family and the impact your parents' being in a nursing home has had on you and your family. We hope we have covered most of the areas of concern. However, if you can think of any information or feelings that might help us better understand what you are going through, please use the space below to write those items in. Again, we thank you for your help in this endeavor.

APPENDIX B

Present Study Questionnaire

QUESTIONNAIRE FOR THE ADULT CHILD OF NURSING HOME PATIENTS

(Please answer all questions)

Name _____

Which of your parents is in the nursing home? 4 _____ Mother _____ Father _____ Both

Is your other parent still living? 5 _____ Yes _____ No

What was the living arrangement of your parent immediately before going into the nursing home? 6

- _____ Lived in his/her own home.
 _____ Lived in your home.
 _____ Lived in the home of another child or relative.
 _____ Other (Please specify) _____

What is the age of your parent(s)? 7 _____ Mother _____ Father

How long has your parent been in the nursing home? 9 _____ Years, _____ Months

Please put a check mark by the reasons for deciding to admit your parent to a nursing home. You may check as many as apply:

- 13 _____ The doctor recommended it.
 14 _____ My parent needed constant medical attention.
 15 _____ The person who had been taking care of my parent was no longer able to do so.
 16 _____ My parent's decline in mental abilities made constant attention necessary.
 17 _____ There was not enough space in my home to take care of my parent there.
 18 _____ We can get more financial help by putting my parent in a nursing home.
 19 _____ Other (Please specify) _____

Please go back to the above question and circle the check mark by the item you think was the most important reason for the decision to put your parent in a nursing home.

How many different times was your parent admitted to a hospital in the two years before being admitted to a nursing home? _____

How well has your parent adjusted to being in a nursing home?

- | | | | | | |
|----|------------|---------------|------------|---------------|------------|
| 23 | Poor | Somewhat poor | Average | Somewhat good | Good |
| | adjustment | adjustment | adjustment | adjustment | adjustment |
| | 1 | 2 | 3 | 4 | 5 |

How would you rate your parent's health six months after placement in a nursing home compared to his/her health before placement?

24 _____ Improved _____ Remained the same _____ Declined _____ Does not apply

Compared to the health of people the same age as your parent how would you rate your parent's health at this time?

25 _____ Good _____ Average _____ Poor

Compared to the health of people the same age as your parent how would you rate your parent's health at the time of admission to the nursing Home?

26 _____ Good _____ Average _____ Poor

In the six months to one year prior to your parent being placed in the nursing home, was your parent affected with a chronic mental or physical illness?

27 _____ Yes _____ No

If "Yes", please describe: _____

In the same period of time did your parent's health change to any great extent?

30 _____ Improved _____ Remained the same _____ Declined

(CONTINUE ON BACK)

2

In deciding and arranging to place your parent in the nursing home, how difficult was your experience in:

		Difficult	Somewhat difficult	Average	Somewhat easy	Easy
31	dealing with other family members.	1	2	3	4	5
32	discussing your decision with your parent.	1	2	3	4	5
33	actually taking your parent to the nursing home.	1	2	3	4	5
34	leaving your parent in the nursing home for the first time.	1	2	3	4	5

Now that your parent is in a nursing home, to what extent is each of the following of concern to you?

		No Concern	Slight Concern	Moderate Concern	Considerable Concern
35	Parent may not receive needed attention	1	2	3	4
36	Parent may be treated unkindly	1	2	3	4
37	Parent will be lonesome	1	2	3	4
38	Parent may think that you do not love him or her.	1	2	3	4
39	Parent may die alone.	1	2	3	4
40	Parent's health will decline more in the nursing home	1	2	3	4
41	Other people may think badly of me for putting my parent in a nursing home.	1	2	3	4

From your perspective, how would you rate the quality of the relationship between you and your parent now?

	Bad	Slightly bad	Average	Slightly good	Good
42	1	2	3	4	5

In contrast to the way things were before your parent entered the nursing home:

43. how do you feel toward your parent now?

	Less loving	Somewhat less loving	No change	Somewhat more loving	More loving
	1	2	3	4	5

44 how easy is it for you to show affection toward your parent now?

	Harder	Somewhat harder	No change	Somewhat easier	Easier
	1	2	3	4	5

45 how satisfied are you with your relationship with your parent at this time?

	Less satisfied	Somewhat less satisfied	No change	Somewhat more satisfied	More satisfied
	1	2	3	4	5

46 how pleasant is it to be in the presence of your parent now?

	Less pleasant	Somewhat less pleasant	No change	Somewhat more pleasant	More pleasant
	1	2	3	4	5

47 how often do you think pleasant thoughts about your parent now?

	Less often	Somewhat less often	No change	Somewhat more often	More often
	1	2	3	4	5

3

- 48 how close emotionally do you feel to your parent now?
- | Farther
apart | Somewhat
farther
apart | No
change | Somewhat
closer
together | Closer
together |
|------------------|------------------------------|--------------|--------------------------------|--------------------|
| 1 | 2 | 3 | 4 | 5 |
- 49 how much do you wish to do things for your parent now?
- | Less | Somewhat less | No change | Somewhat more | More |
|------|---------------|-----------|---------------|------|
| 1 | 2 | 3 | 4 | 5 |

Now that your parent is in the nursing home what effect has this had on the following aspects of your life?

- | | Negative
effect | Somewhat
negative
effect | No
change | Somewhat
positive
effect | Positive
effect |
|--|--------------------|--------------------------------|--------------|--------------------------------|--------------------|
| 50 Your own family life. | 1 | 2 | 3 | 4 | 5 |
| 51 Your relationship with your brothers and sisters. | 1 | 2 | 3 | 4 | 5 |
| 52 Your mental health | 1 | 2 | 3 | 4 | 5 |
| 53 Your physical health | 1 | 2 | 3 | 4 | 5 |

In general, what was the opinion of the following people about your parent going to a nursing home?

- | | Against | Mildly
against | No
opinion | Mildly
in favor | In
favor | Does
not
apply |
|---------------------------------|---------|-------------------|---------------|--------------------|-------------|----------------------|
| 54 Your parent who was admitted | 1 | 2 | 3 | 4 | 5 | 6 |
| 55 <u>Your other parent</u> | 1 | 2 | 3 | 4 | 5 | 6 |
| 56 <u>Your aunt(s)</u> | 1 | 2 | 3 | 4 | 5 | 6 |
| 57 <u>Your uncle(s)</u> | 1 | 2 | 3 | 4 | 5 | 6 |
| 58 <u>Your brother(s)</u> | 1 | 2 | 3 | 4 | 5 | 6 |
| 59 <u>Your sister(s)</u> | 1 | 2 | 3 | 4 | 5 | 6 |
| 60 <u>Your spouse</u> | 1 | 2 | 3 | 4 | 5 | 6 |
| 61 <u>Yourself</u> | 1 | 2 | 3 | 4 | 5 | 6 |
| 62 <u>Your children</u> | 1 | 2 | 3 | 4 | 5 | 6 |

In general, what was the level of involvement of the following persons in making the decision to admit your parent to a nursing home?

- | | Not
involved | Slightly
involved | Moderately
involved | Considerably
involved | Does
not
apply |
|---------------------------------|-----------------|----------------------|------------------------|--------------------------|----------------------|
| 63 Your parent who was admitted | 1 | 2 | 3 | 4 | 5 |
| 64 <u>Your other parent</u> | 1 | 2 | 3 | 4 | 5 |
| 65 <u>Your aunt(s)</u> | 1 | 2 | 3 | 4 | 5 |
| 66 <u>Your uncle(s)</u> | 1 | 2 | 3 | 4 | 5 |
| 67 <u>Your brother(s)</u> | 1 | 2 | 3 | 4 | 5 |
| 68 <u>Your sister(s)</u> | 1 | 2 | 3 | 4 | 5 |
| 69 <u>Your spouse</u> | 1 | 2 | 3 | 4 | 5 |
| 70 <u>Yourself</u> | 1 | 2 | 3 | 4 | 5 |
| 71 <u>Your children</u> | 1 | 2 | 3 | 4 | 5 |

(CONTINUE ON BACK)

4

Please respond to the statements below by indicating your own level of agreement or disagreement. Check the number in the response column that expresses your judgement. There are no right or wrong choices.

	Strongly agree	Agree	No opinion	Disagree	Strongly disagree
72 The older I get the more I worry about money matters	1	2	3	4	5
73 I always dreaded the day I would look in the mirror and see gray hairs.	1	2	3	4	5
74 The older I become, the more I worry about my health	1	2	3	4	5
75 I fear that when I'm older all of my friends will be gone	1	2	3	4	5
76 The thought of outliving my spouse frightens me.	1	2	3	4	5
77 The older I become, the more anxious I am about the future	1	2	3	4	5
78 I dread the day when I can no longer get around on my own.	1	2	3	4	5
79 Financial dependence on my children in old age is one of my greatest fears.	1	2	3	4	5
80 When parents get older their children ought to take care of them.	1	2	3	4	5

We now move to some general questions about you and your spouse.

- 4 What is your present age? _____
- 6 What is your sex? Male _____ Female _____
- 7 What is your present marital status?
 _____ Single, never married.
 _____ Married
 _____ Separated
 _____ Divorced
 _____ Widowed
 _____ Remarried
- 8 What best describes the place in which you grew up?
 _____ Rural, open country
 _____ Small town, under 1,000 population
 _____ Town, under 10,000 population
 _____ City, from 10,000 to 100,000 population
 _____ Large City, over 100,000 population
- 9 Are you living in the same area in which you grew up? _____ Yes _____ No
- 10 If you are not living in the same place where you grew up, what best describes the place where you live now?
 _____ Rural, open country
 _____ Small town, under 1,000 population
 _____ Town, under 10,000 population
 _____ City, from 10,000 to 100,000 population
 _____ Large City, over 100,000 population
- 11 What is your present occupation? _____
 In what industry? _____
- 12 What is your spouse's occupation? _____
 In what industry? _____

5

13 To what degree does your family income meet your financial needs?

- Totally inadequate; need financial assistance.
- Inadequate, but making it.
- Adequate, but could use larger income.
- Adequate.
- More than adequate.

14 What is your level of education?

- Less than high school
- High school graduate
- Some college
- College graduate

15 What is your spouse's level of education?

- Less than high school
- High school graduate
- Some college
- College graduate

If you would like to have some report of the findings of this research, please check the following request.

Yes, I would like to receive some report of the findings of this research.

Please use the space below to give any additional comments which you feel would be of benefit to us in our study.

THANK YOU FOR YOUR TIME AND INTEREST IN FILLING OUT THIS QUESTIONNAIRE.

APPENDIX C

Item Analysis of Scales
Including Reliability Coefficients
for Present Study

Responses to "Ease of Placement" Scale Items

Item	Mean	S.D.	Range
How difficult was your experience in:			
1. Dealing with other family members	3.766	1.225	1-5
a. Difficult (4.7%)			
b. Somewhat difficult (9.3%)			
c. Average (32.7%)			
d. Somewhat easy (11.2%)			
e. Easy (42.1%)			
2. Discussing your decision with your parent	2.602	1.301	1-5
a. Difficult (26.2%)			
b. Somewhat difficult (21.4%)			
c. Average (30.1%)			
d. Somewhat easy (10.7%)			
e. Easy (11.7%)			
3. Actually taking your parent to the nursing home	2.303	1.946	1-5
a. Difficult (39.4%)			
b. Somewhat difficult (21.1%)			
c. Average (20.2%)			
d. Somewhat easy (8.3%)			
e. Easy (11.0%)			
4. Leaving your parent in the nursing home for the first time	1.946	1.127	1-5
a. Difficult (46.8%)			
b. Somewhat difficult (26.1%)			
c. Average (17.1%)			
d. Somewhat easy (5.4%)			
e. Easy (4.5%)			

Mean	= 2.628		
S.D.	= .939		
Chronbach's Alpha	= .722		
Range	= 1.0 to 5.0		

Responses to "Change in Relationship" Scale Items

Item	Mean	S.D.	Range
1. How do you feel toward your parent now?	3.631	.841	3-5
c. No change (60.4%)			
d. Somewhat more loving (16.2%)			
e. More loving (23.4%)			
2. How easy is it for you to show affection toward your parent?	3.396	.730	3-5
c. No change (74.8%)			
d. Somewhat easier (10.8%)			
e. Easier (14.4%)			
3. How satisfied are you with your relationship with your parent now?	3.509	.843	2-5
b. Somewhat less satisfied (2.7%)			
c. No change (63.5%)			
d. Somewhat more satisfied (13.6%)			
e. More satisfied (20.0%)			
4. How pleasant is it to be in the presence of your parent now?	3.333	1.056	1-5
a. Less pleasant (6.3%)			
b. Somewhat less pleasant (5.4%)			
e. No change (56.8%)			
d. Somewhat more pleasant (11.7%)			
e. More pleasant (19.8%)			
5. How often do you think pleasant thoughts about your parent now?	3.773	.915	2-5
b. Somewhat less often (1.8%)			
c. No change (50.0%)			
d. Somewhat more often (17.3%)			
e. More often (30.9%)			
6. How close emotionally do you feel to your parent now?	3.591	.849	2-5
b. Somewhat farther apart (2.7%)			
c. No change (56.4%)			
d. Somewhat closer together (20.0%)			
e. Closer together (20.9%)			

Mean for scale	= 3.537		
S.D.	= .677		
Chronbach's Alpha	=		
Range	= 2.5 to 5.0		

Responses to "Effects on the Personal Life of the Adult Child" Scale Items

	Mean	S.D.	Range
What effect has placing your parent in a nursing home had on:			
1. Your own family life	3.523	.942	1-5
a. Negative effect (3.6%)			
b. Somewhat negative effect (1.8%)			
c. No change (52.3%)			
d. Somewhat positive effect (23.4%)			
e. Positive effect (18.9%)			
2. Your relationship with your brothers and sisters	3.167	.816	1-5
a. Negative effects (5.2%)			
b. Somewhat negative effect (1.0%)			
c. No change (75.0%)			
d. Somewhat positive effect (9.4%)			
e. Positive effect (9.4%)			
3. Your mental health	3.369	1.053	1-5
a. Negative effect (7.2%)			
b. Somewhat negative effect (3.6%)			
c. No change (52.3%)			
d. Somewhat positive change (18.9%)			
e. Positive change (18.0%)			
4. Your physical health	3.288	1.021	1-5
a. Negative effect (7.2%)			
b. Somewhat negative effect (3.6%)			
c. No change (58.6%)			
d. Somewhat positive effect (14.4%)			
e. Positive effect (16.2%)			

Mean	= 3/34;		
S.D.	= .732		
Chronbach's Alpha	= .779		
Range	= 1.0 to 5.0		

Responses to "Concerns About Parent Being in a Nursing Home" Scale Items

Item	Mean	S.D.	Range
a) Parent may not receive needed attention	2.167	1.219	1-4
1. No concern (43.5%)			
2. Slight concern (19.4%)			
3. Moderate concern (13.9%)			
4. Considerable concern (23.1%)			
b) Parent may be treated unkindly	2.037	1.186	1-4
1. No concern (48.6%)			
2. Slight concern (18.3%)			
3. Moderate concern (13.8%)			
4. Considerable concern (19.3%)			
c) Parent will be lonesome	2.568	1.165	1-4
1. No concern (24.3%)			
2. Slight concern (25.2%)			
3. Moderate concern (19.8%)			
4. Considerable concern (30.6%)			
d) Parent may think that you do not love him or her	2.245	1.235	1-4
1. No concern (40.0%)			
2. Slight concern (21.8%)			
3. Moderate concern (11.8%)			
4. Considerable concern (26.4%)			
e) Parent may die alone	2.358	1.244	1-4
1. No concern (ee.9%)			
2. Slight concern (27.5%)			
3. Moderate concern (7.3%)			
4. Considerable concern (31.2%)			
f) Parent's health will decline more in the nursing home	1.836	1.088	1-4
1. No concern (53.6%)			
2. Slight concern (23.6%)			
3. Moderate concern (8.2%)			
4. Considerable concern (14.5%)			
g) Other people may think badly of me for putting my parent in a nursing home	1.667	1.082	1-4
1. No concern (66.7%)			
2. Slight concern (13.5%)			
3. Moderate concern (6.3%)			
4. Considerable concern (13.5%)			

Mean = 2.134

S.D. = .859

Chronbach's Alpha = .870

Responses to "Attitude Toward Aging" Scale Items

Item	Mean	S.D.	Range
a. The older I get, the more I worry about money matters.	2.349	1.197	1-5
1. Strongly agree (27.5%)			
2. Agree (37.6%)			
3. No opinion (11.9%)			
4. Disagree (18.3%)			
5. Strongly disagree (4.6%)			
b. I always dreaded the day I would look in the mirror and see gray hair.	3.709	1.061	1-5
1. Strongly agree (4.5%)			
2. Agree (6.3%)			
3. No opinion (27.9%)			
4. Disagree (35.1%)			
5. Strongly disagree (25.2%)			
c. The older I become, the more I worry about my health	2.682	1.27	1-5
1. Strongly agree (16.4%)			
2. Agree (41.8%)			
3. No opinion (10.0%)			
4. Disagree (20.9%)			
5. Strongly disagree (10.9%)			
d. I fear that when I'm older all my friends will be gone	3.450	1.076	1-5
1. Strongly agree (5.5%)			
2. Agree (10.1%)			
3. No opinion (36.7%)			
4. Disagree (29.4%)			
5. Strongly disagree (18.3%)			
e. The thought of outliving my spouse frightens me	3.090	1.215	1-5
1. Strongly agree (13.0%)			
2. Agree (17%)			
3. No opinion (31.0%)			
4. Disagree (26.0%)			
5. Strongly disagree (13.0%)			
f. The older I become, the more anxious I am about the future	2.670	1.179	1-5
1. Strongly agree (15.6%)			
2. Agree (36.7%)			
3. No opinion (20.2%)			
4. Disagree (20.2%)			
5. Strongly disagree (7.3%)			

Mean	= 2.961		
S.D.	= .860		
Chronbach's Alpha	= .785		

APPENDIX D

Initial Cover Letter



COLLEGE OF HOME ECONOMICS

VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY

Blacksburg, Virginia 24061 - 8299

DEPARTMENT OF MANAGEMENT, HOUSING AND FAMILY DEVELOPMENT (703) 961-4794 or 4795

March 17, 1982

Dear

Nursing homes are providing services for an increasing number of families, and we are attempting to learn more about how this growing practice affects families. You are an authority about the effect of nursing home placement on your family; it is likely that other adult children will have experiences similar to yours. We are joining Heritage Hall, Inc. in the study of this subject. One of our goals is to provide a service to families who are considering placing a parent in a nursing home by helping them consider in advance some of the issues, areas of relief, and areas of concern they may encounter. The information you can provide from your own experience will help us in reaching this goal. Some of the questions we are trying to answer are:

- How do the elderly parent and the family benefit from placement in a nursing home?
- What factors seem to be important in the decision to place a parent in a nursing home?
- How is the relationship between parent and child affected when the parent enters a nursing home?
- What are the continuing problems or concerns of families when the parent is in a nursing home?

Your parent is now residing in a nursing home operated by Heritage Hall, Inc. We have selected your name randomly from among the adult children of all Heritage Hall patients, and are asking you to provide information about your family. The information you give us will be handled in strict confidence. Your parent does not know that we are seeking your help. We are hopeful that, as a result of our study, the service both you and your parent receive from the nursing home will be even more satisfactory. Therefore, we are asking you to voluntarily fill out the enclosed questionnaire.

It is our intention to make our research findings known both to professionals who serve families with aging parents, and to the general public. Your name would never be used in any way, but your experience may help other people who face the same experience you have had.

Please fill out the questions as carefully and completely as possible. Try to answer every question, and feel free to write in any additional explanations you wish to give. We are asking that you fill out this questionnaire during the coming week. You may return the form in the enclosed, self-addressed envelope.

If you wish to contact us personally about this project, please call (703) 961-5997, or write us at the address given on the enclosed envelope.

Please accept our thanks for your help. This may not be an easy task, but it is certainly one worth your time and interest.

Sincerely yours,

Joseph W. Maxwell
ProfessorJames Garrison
Ph. D. Candidate

APPENDIX E

Follow-up Postcard

Followup Postcard

Dear

Several weeks ago a questionnaire seeking information on your experience around placing your parent in a nursing home was sent to you. If you have already completed and returned it to us, please accept our sincere thanks. If not, please do so today. Because it has been sent to only a small sample of adult children, it is extremely important that your's also be included in the study if the results are to accurately represent the experience of placing a parent in a nursing home.

If by some chance you did not receive the questionnaire, or it has been misplaced, please call me right now, collect _____, and I will get another one in the mail to you today.

Sincerely,

Jim Garrison

APPENDIX F

Second Follow-up Cover Letter



COLLEGE OF HOME ECONOMICS

VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY

Blacksburg, Virginia 24061 - 8299

DEPARTMENT OF MANAGEMENT, HOUSING AND FAMILY DEVELOPMENT (703) 961-4794 or 4795

Dear

Several weeks ago you received a questionnaire on the effect of placing one of your parents in a nursing home. It is extremely important that we have your input into this research. Since we are asking only a small number of people to respond, if your experience is not represented through your questionnaire then there is a good chance that our conclusions will not be as accurate nor as helpful as they would be if you do respond.

Therefore, if you have already sent your questionnaire back, please accept our thanks. If not, please do so today. I am enclosing another copy of the questionnaire in case the first one has been misplaced or lost.

We feel that this research is vitally important to an increasing number of people. We know that answering some of the questions may bring back to mind some painful feelings. But your input may help ease some of that pain for others who have to go through a similar experience. Please, be assured that all responses will remain confidential. Your name is requested only for the purpose of knowing who has responded and who to send a report of our findings, if they so desire.

I thank you for your support in this research and look forward to hearing from you in the next few days.

Sincerely,

James Garrison

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the scanned document**

THE EFFECTS ON ADULT CHILDREN
OF PLACING A PARENT IN A NURSING HOME

by

James E. Garrison, Jr.

(ABSTRACT)

This research investigated selected aspects of the effects on adult children of placing a parent in a nursing home; specifically, the ease of placement, change in parent-child relationships, and effects on the personal life of the adult child as perceived by the child. Scales constructed for use in measuring these dependent and several independent variables in an original study were revised on the basis of factor analysis, internal consistency analysis and subjective judgement. The revision of the scales was based on the original study's data. The revised scales were included in a shorter, more focused questionnaire utilized in the present study. Results of the original study and evidence from existing literature formed a basis for hypotheses tested in the present study. Revised questionnaires were mailed to 175 adult children listed as guarantors of patients in seven nursing homes. A 66.9% usable response rate was obtained. Stepwise regression was utilized to test the hypotheses.

The results indicated that the more concerned the child was about the parent's placement and the less the

child favored the placement, the more difficult it was for the child to carry out the decision to place his or her parent. The placement of a parent did not appear to be accompanied by deterioration of the parent-child relationship. Rather, it tends to either remain the same or improve. Those children who are most likely to have perceived positive change in the relationship were those who had more concerns about the parent being in a nursing home, had younger parents, saw their parent as making a good adjustment to being in a nursing home, and did not view their own aging positively. None of the independent variables were significant predictors of perceived effects on the personal life of the adult child.

Support for potential positive changes in parent-child relationships as a result of a parent being placed in a nursing home was discussed. Recommendations for further research utilizing the family theory framework of Bowen (1978) was presented.