Intergenerational Relationships, Familial Responsibility, Reciprocity, and Quality of Life Among Rural Older Adults Aging in Place in Mississippi



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Background

Definition: *Aging in Place*

"The ability to live in one's own home and community safely, independently, and comfortably, regardless of age, income, or ability level"

(Centers for Disease Control and Prevention, 2009, p. 1)

Why Age in Place?

- Satisfaction through attachments to own community
- Sense of identity
- Familiar lifestyle

(Beckley, 2003; Goudy, 1990)

Factors in Aging in Place

- Dramatic increase in aging population
- Draining of governmental resources (Medicare, Social Security, Medicaid)
- Limited access to health care services in rural areas
- Increase in dementia occurrence
- Economic forces (e.g., recession of 2009)

Caregiving and Successful Aging

- Depends on unpaid caregiving family members (Vreugdenhil, 2014).
- Long-term care by adult children (80–90%) (Redfoot, Feinberg, & Houser, 2013)
- 65 million (29% of adults) care for someone that is ill, disabled, or aged (The National Alliance on Caregiving, 2009, 2012)

What are we curious about?

- Mississippi's rural nature
- Diminished access to resources in rural areas
- Emigration of younger generations
- Growing aging population with fewer caregivers
- Multigenerational processes, roles, and promises
- Explore factors to promote intergenerational resilience and relationships

Filial Responsibility

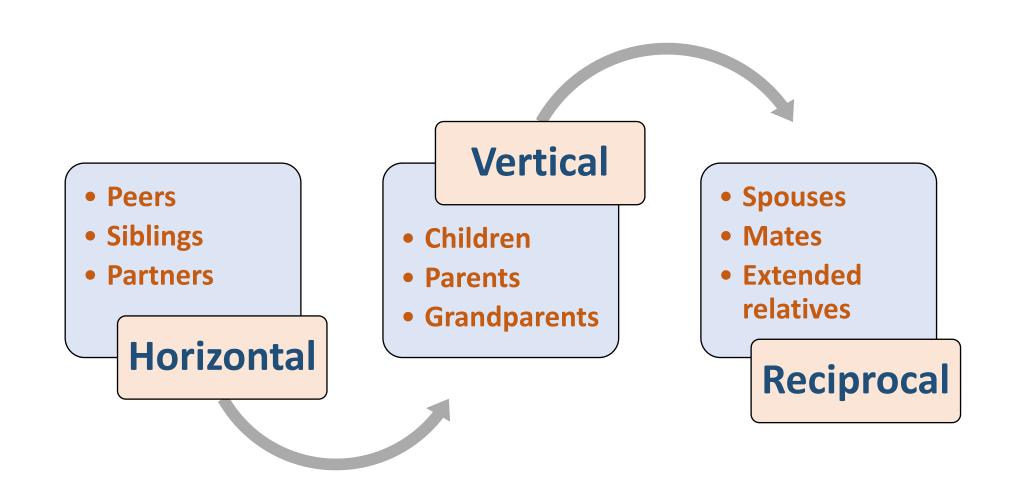
Reciprocity

Quality of Life

Intragenerational Relationships

Intergenerational Relationships

Typology of Intergenerational Relationships



Research Methods and Findings

Qualitative & Quantitative (Mixed)

- Phenomenological and grounded theory approach to understand aging in place scenario.
- Data collected using snowballing, personal contacts, Extension agents, and church communities
- Three members from three generations of same family enrolled
- In-depth interviews and semi-structured questionnaire
- Interviews transcribed and analyzed using MaxQDA (qualitative software)
- SPSS used for descriptive data analysis
- Categories created using axial, open coding, line by line coding
- Corroborated quantitative and qualitative data to maintain trustworthiness

Theoretical Lenses

Bioecological Model (Bronfenbrenner & Morris, 2005) to see interactional proximal processes among generations

Intergenerational Solidarity Theory (Bengtson, et al., 1990) to understand nature of intergenerational relationships (affectional, associational, structural, and normative)

Socioemotional Selectivity Theory (Carstensen, 2006) to see change in motivation in goal selection, optimization, and compensation due to time limitation in late life

Selection, Optimization, and Compensation (Baltes & Baltes. 1990) to see how fewer remaining resources maximize life satisfaction in late life

Life Course Theory (Elder, 1974) to understand how linked lives influence aging in place among rural older adults

Intergenerational Projection Process (Bowen, 1978) to see how experiences in a family of origin become established and form a legacy

Social Learning/Efficacy/Agency (Bandura, 1959) to understand how self-esteem and worth help increase life satisfaction among older adults

Demographics

Age

Generations	Mean	Range
G1	77.83	65 – 93
G2 & G3	43.25	17 – 72

Gender

Gender	n	%
Female	27	65.9
Male	14	34.1

Common Themes in Aging in Place

- Desire to age in own home
- Wish to feel connected, valued, and needed
- Long for transfer and advocacy of heritage
- Willingness to stay with offspring and siblings
- Desire to stay independent in place for longer time
- Wish to communicate and be reachable

Attachment to Place

... she wants to go back to the farm. She has always wanted to go back to the farm.... I said, "Fine with me, as long as somebody is out there. I got no problem, but you ain't going nowhere until we get somebody and be close to you." So even that it is not just being in her own house but being in her house.



Interview: Nursing Home (Non)Option

So, I mean, in a case like that I feel like they need somebody for 24 hours, you know.

Probably the only way I would put them in a nursing home was if they were just, not know who they were, could not care for themselves, you know, something like that.



Independence and Freedom

They still have their freedom, their mind is still good, they know how to use the phone, and, you know, just simple things that I guess most of us take for granted.

You know when you're living in your own home, you can walk around with no clothes, you can walk around with the door locked, you can walk around and sing praises and thanking everyday, thank God for letting you [live] everyday and seeing daylight.



Resilience and Independence

I know a lot of, a lot of older people, I guess, who want to feel independent. They do not want, you know, allow people. I guess it is the hardworking generation, you know, they were. They just take care of themselves and they do not like to have to depend on other people and I feel like it would be easier for them to age, you know, I guess, in their home with a family member's assistance.

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Yeah, but it depends on the physical ability because some older people are still able to do a lot of things on their own, so it just depends.

Interview: Reciprocity

I pray that the Lord give me strength to where I can take care of my father because I look at what all he did for us of raising us up. So that is my thing.

I think it would make us strong because we come together to take care of him so that his needs are met. When we was little, their life was on us. So it would be our turn to return it back to them to see that about them.

I don't mind it because I know she'd been there for me my whole life so I don't mind and I want to be it.



Caregiving at Home

I feel like they live longer when they can stay in their own home around their familiar surrounding. I took care of my husband who had Alzheimer's

And we understand that like I could say because my other sister work and I am the one now who is not working and because I am on disability, but I plan to do primary care.

And it's an advantage because I think she lived longer, because she was at our own home, and I do think that people feel when you put them on a nursing home, that's the end for them.

I feel like that most of the responsibility usually ends up on the sisters, the daughters.



Filial Responsibility and Commitment

Well, my daughter will take care of me, you know. I know they will take care of me, stay by me.

Yeah, well. I still trust and depend, a dependent trust, that my daughter is going to take care of me because she has seen this with mom, my mom. So, I do not, I really think that we are going to be in good shape there.

...and [my dad] said, "I want you to, I want you to look after your mama." And that, you know, I made a promise that I would, but I love my mama... and I did, and then she got the Alzheimer's, and that kind of hard you know.

Family Commitment

I feel like it would fall on me. If my children live here, I feel that they would help me. You know, that as far as that goes, I would hope that I would be able to take care of them. If it was a case like my mother-in-law, I would have to be home and I would never work.

I would think of family first. You know what I mean. You may have something else you want to do, but you know you love your family members, or you know they come first, so....

I feel like they live longer when they can stay in their own home around their familiar surrounding. I took care of my husband who had Alzheimer's.



Interview: Social Support

Yeah, I mean we all live right there close together, and we are a close, tight-knit family. You know, we got a good church family around so that is another thing.



Work Stress and Care

Right, so it is just a little different, you know, trying. I am there trying to sleep, you know, because I got work, and you know you have to get up during the day and go help him go to restroom and then go back to sleep.



Social Isolation & Loneliness

I think they're facing more of a loneliness, They need people to come check on them, and basically house care, cleaning up, and cooking for them, and just taking them places sometimes.

I feel that they would need more of definite centers for them to come to, like this here, like recreation for them to do. I guess, sometimes, sitting at home, get lazy, you know, and you don't wanna do anything.... But recreation, Meals on Wheels to help them prepare so they won't have to cook as much, and then that would've had more money, because sometimes older people, you're colder, and they have to spend more money on heat and lighting, so that will help them out in different things, and somebody just to come by, come by and just, you know, share with them and greet with them, take them to places.



Transportation

Like, before, they got to where they had to go. Well, simple things as much as like running, picking up some groceries, or go and by the drug store, you know, and I think it will be great if drug stores did more delivery you know, and even grocery stores for the elderly.

So we do not trust his driving.

Mostly the biggest fight we had is transportation. We provided for him—at least she do—but I will be at work, and I do when I can.

If he had to go to Columbus or Starkville, Tupelo—long distances—Jackson, my aunt or my mom will do it sometimes, and...when they cannot, they have to let me know ahead of time, I can tell my boss, then I can drive him or one of my cousin can drive.



External Resources

Maybe government programs, because with them being older sometimes, with financial situations, it could be hard for them to be able to pay bills and stuff like that

As our parents get older, they would need meals, transportation, possibly financial support and, I guess, help around the house, house cleaning and I guess hygiene too

And that to have a pick-up and delivery on that too because you are losing the ability to drive. You know, meals prepared for people.



Top Current Problems for Older Adults

	Mean (1 – 5)	n
Physical health	2.3478	23
Financial problems	1.9200	25
Affordable medications	1.8750	24
Adequate health care	1.7600	25
Transportation	1.6800	25
Having enough food to eat	1.6800	25
Boredom	1.6087	23
Suitable housing	1.6000	25
Everyday activities like bathing or preparing meals	1.5200	25
Feeling lonely or isolated	1.4000	25
Depression	1.3478	23

Anticipated Service Needs: In Both Top 10s

	G1 M	G1	G2&3	G2&3 M
	n = 25	Ranking	Ranking	n = 41
Home health care	2.2174	1	3	2.9756
Respite care	2.1667	2	9	2.7805
Senior discount programs	2.1200	3	6	2.9024
Shopping services	2.1000	4	7	2.8571
Health screening	2.0833	5	2	3.0250
Adult day care	2.0800	6	24	2.3902
Support groups	2.0800	7	15	2.5366
Homemaker services	2.0417	8	4	2.9512
Repair services	2.0400	9	14	2.5610
Physical fitness programs	1.9167	10	5	2.9500

Using Findings to Improve Lives

The Need

- Existing residential centers are not adequate to accommodate aging population
 - Medicaid costs will be untenable
- Paid caregivers are cost-prohibitive (and unavailable) for most families
- Younger generations are, by necessity, becoming more involved in caregiving but are inexperienced and untrained

Some Suggestions

- Community support for older adults aging in place
 - Transportation
 - Delivery of groceries, medicines, etc.
 - Adult "day cares"
 - Home modifications
- Resources for families that provide care
 - Flexible working hours
 - Respite care (formal and/or informal)
 - Family education in relationship dynamics, financial management/planning

Some Suggestions

- Innovative programs to influence society
 - College, Community, Collaborate
 - Service-learning educational programs in schools, youth organizations, etc.
 - Multigenerational legacy structures
 - Community education about valuing older generation (PSAs, programs, etc.)
- Recruitment of churches and community agencies as aging-in-place partners

Let's make older adults our mentors to become more positive and more productive



Thank you!

