

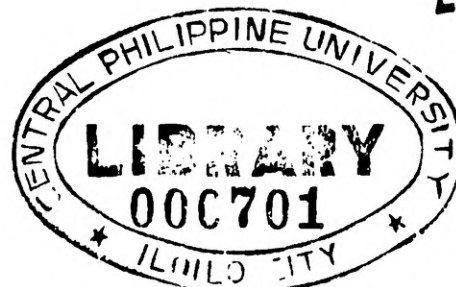
**FACTORS ASSOCIATED WITH ATTITUDES TOWARDS AND COPING
STRATEGIES IN THE CARE OF ELDERLY PARENTS AMONG
CENTRAL PHILIPPINE UNIVERSITY PERSONNEL**

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FACTORS ASSOCIATED WITH ATTITUDES TOWARDS AND COPING STRATEGIES IN THE CARE OF ELDERLY PARENTS AMONG CENTRAL PHILIPPINE UNIVERSITY PERSONNEL

by

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ABSTRACT

This study measured the attitudes and coping strategies of CPU personnel during summer 2008 with elderly parents and identified their demographic characteristics (sex, civil status, family income, and number of parents; and to further describe the characteristics of elderly parents in terms of their age, sex, health status, and economic status; the sources of support and the roles). Furthermore, the relationship between these demographic characteristics and their problems, attitudes and coping strategies concerning elderly parents were determined. This study was subjected to a one-shot survey using a questionnaire.

The findings showed most of the CPU personnel in this study as female, married, earning an average family income of P31,123.07, and had a median family income of P25,000.00. Less than two-thirds of the respondents had one parent living with them and around one-third of them had two or more parents residing with them.

Generally, the elderly who lived with the CPU personnel were biological parents. Most of them were mothers, which suggested that there were really more old females than old males living with the respondents. There was more of a young-old set of elderly than the old-old classification of the geriatrics. Most of the parents living with the

respondents did not have any source of income but they were generally healthy. Most of the unhealthy parents suffered from cardiovascular diseases. Parents were then considered as dependents of the personnel.

Most of the respondents received support in caring for their elderly, with more than half of them naming their siblings as their source of support. It proved that the family had an important role in one's life. In the Filipino culture, one almost always depended on the family for support in times of need. As to type of support given to the respondents, a little more than half of them were given support in monetary form, the same percent had food and medicines. A few of them had clothing, and around the same number had some other kind of support. Around two thirds of them had a supervising role; and only very few had a role as part time caregiver with assistance, closely followed by those who were sole care givers.

Among the twelve problems and difficulties presented, the seven most common problems experienced were: financial difficulties, forgetfulness, hearing deficits, parents' diseases affecting family's diet, inability to go anywhere even with day off from work, intrusion in the family's privacy, and arguments with siblings in caring for their elderly. The least problem experienced was the time-consuming bathing of the parent.

Of the favorable answers, majority of the respondents had the desire to take care of their elderly parent; the rest said nothing could replace the joy they felt when they took care of their parents; and they were able to consider their parents' becoming dependent of them as normal; majority also said that whenever they made the right decisions for their parents' care, it gave them a feeling of satisfaction; majority likewise said they felt cursed because they had to take care of their parents and the same percent said they were glad to

be of help to their parent's daily activities; the least of the favorable answers was wanting to take care of their parents even though they were tired from school work.

Almost two thirds of them had a favorable attitude while very few of the respondents had an unfavorable attitude toward their elderly.

Most of the respondents used problem-focused coping. Very few of the respondents used emotion-focused coping. The rest of the respondents did not experience the problems and difficulties listed down and did not find the coping strategies useful to them.

Among others, there was significant relationship between the respondents' support and family income. The higher the salary the personnel received, the lesser support could be had from others.

Parents' classified sex affected the roles one had. There was a significant relationship between respondents' roles and the parents' classified sex. Majority of the supervisors took care of one female parent in their house.

There was a significant relationship between the extent of difficulty and the parents' classified sex. Most of the respondents having one male and one female parent complained of slight extent of difficulty in the problems experienced. Most of the respondents complained of slight extent of difficulty when there were one male and one female parents living with them. In a sense, these parents complemented each other making it easier for the respondents to care for them.

There was a significant difference between the mean scores of those who used problem-focused coping strategies. There was also a significant difference between the mean score of respondents with female parents in terms of the use of emotion-focused

coping strategies. This meant that respondents having male or female parents who used problem-focused coping and the respondents having male or female parents using emotion-focused coping significantly differed in terms of their mean scores. However, one could see that respondents with male or female parents preferred to use problem-focused coping strategies for the problems experienced.

One-third of the respondents complained of difficulty when a parent didn't want to take his medicine. Support significantly affected the problem of parents not wanting to take the medicine. CPU personnel might have found it easier to deal with the problem if there was support from others to make the parent take his medicine.

There was significant relationship between the extent of difficulty and the roles of the respondents. There was significant relationship between the problem and difficulty of parents' forgetfulness and the role one assumed in the care of the elderly.

Findings revealed that in all of the problems experienced by the respondents while taking care of their elderly parents, the biggest percentage of them preferred to use part time caregiving role except in problems on family's diet which was affected by parents' diseases and on the salary not being enough. The least role respondents preferred to use with the problems experienced was that of a sole caregiver. There was a significant relationship, further between the problem and difficulty of parents' forgetfulness and the role one assumed in the care of the elderly.

More than three-fourths of the sole caregivers complained of slight extent of difficulty. There was significant relationship between the extent of difficulty and the roles of the respondents.

All problems and difficulties experienced by the personnel were faced with a favorable attitude. There was a relationship between the problems and difficulties experienced by the respondents and the level of attitude towards the care for the elderly.

CPU personnel, when faced with the problems and difficulties, would prefer to use problem-focused coping strategies in the care of the elderly.

There was no significant difference in the mean scores of the respondents' level of attitude in terms of using either the problem-focused coping or the emotion-focused coping strategy. There was however a finding that respondents with both unfavorable and favorable attitudes preferred to use problem-focused coping.

Based on the highlight of the study findings, the following conclusions and generalizations are arrived at namely, that parents were considered as dependents of the personnel regardless of their characteristics since they lived with their children. This finding of prevalent desire to care for one's elderly parents reflects what Mooney (2002) observes in most people that both men and women have a strong sense of wanting and needing to provide care for those they are close to;

That the family indeed, is an important part of one's life. In Filipino culture, one can always depend on the family for support in times of need;

That the respondents played an important role in taking care of their elderly and it depended upon the choice they made as to what caregiving role they assumed;

Most of the CPU personnel experienced problems and difficulties as they cared for their elderly parents. The problems might have come in different levels of difficulty;

The CPU personnel had developed the right attitude towards the care of the elderly parent although sometimes they admitted to feeling somewhat cursed to be taking care of their parent;

Taking care of the elderly parents was a normal way of life in the Filipino culture. Since it was part of the culture, the CPU personnel took his caregiving responsibility in stride no matter how easy or difficult it took to live with an elderly parent;

The respondents made use of problem-focused coping when they were faced with problems or difficulties while taking care of their elderly parents;

Support affected one's family income. If one earned a higher family income, there could be less support received than those who earned less or those whose parents were no longer income earners. This corroborates Beck's (1990) contention that cash and services are important, not only to family carers but also to the older person being cared for;

Supervision came easy for those with mothers. Sole caregivers preferred taking care of fathers and part time caregivers did better in caring for a father and a mother at the same time.

Difficulties were experienced by the respondents as they took care of their elderly parents and it was affected by the respondents' civil status, parents' sex, economic status and health status;

Regardless of the CPU personnel's and the parents' characteristics, one still favored taking care of their elderly parent at home;

Parents' sex altered one's use of coping strategies. More of the respondents preferred to use problem-focused coping strategies when they dealt with mothers than with fathers;

Respondents living with elderly parents without support from others had problems with their parents not wanting to take the medicine. Indeed, Kobassa's (1979) contention holds true that one of the ways by which caregivers can cope with their role is building and utilizing support networks; indeed, caregiving could become less of a burden if one had a network of support;

Whether one did or did not have support did not influence one's attitude towards elder care. This seems to validate the prevalent belief especially of Filipinos that caring for their aging parents is simply part of their responsibility;

Apparently, if one was a sole caregiver, he found the problem and difficulty of parents' forgetfulness most burdensome. The findings support the contention that all types of health conditions can compromise independence, including physical conditions, mental or cognitive conditions (involving memory or attention), and even emotional conditions (Patricelli, 2009);

No matter what role the respondents assumed, they still had positive attitude towards caregiving. This perspective is in agreement with Bishop's belief that caregiving can and should be a positive experience. She says that when one was a baby and a child, his parents took care of him. Taking care of them later is just part of the way one can give back to their parents;

Whether they employed problem-focused or emotion-focused coping did not influence whatever caregiving roles they assumed. This finding corroborates what Folkman & Lazarus (1980) state about individuals employing either of the two general coping strategies:

problem-solving coping strategies which are efforts to do something active to alleviate

stressful circumstances, and *emotion-focused coping strategies* which involve efforts to regulate the emotional consequences of stressful or potentially stressful events;

It was found that the respondents maintained a positive attitude in the midst of caregiving difficulties. This finding supports Brehm and Kassin's (1996) position that attitude is an important determinant of behavior;

One can deduce that CPU personnel, when faced with difficulties, would prefer to use problem-focused coping strategies in the care of the elderly;

In view of the aforementioned conclusions, the following recommendations are presented: that family members of the respondents must continue giving support to the personnel living with elderly parents in cash or in kind;

That whatever role the respondents choose, they must perform it at their best;

Since problems will always be present, there is the pressing need for support from other family members or the community for those who take care of the elderly parents;

The CPU personnel must develop the right attitude towards the care of the elderly parent;

Regardless of how bad things get to be, the CPU personnel must continue having the right attitude towards the care of their elderly parents;

Since problems will always come as one takes care of an elderly parent, one must choose which coping strategy is applicable in helping him surmount the problems;

No matter how able one could earn a living, support must continue to be given to the brothers or sisters who are taking care of an elderly parent;

Supervision, part time caregiving, or being a sole caregiver must be done without regard to any of the characteristics of the respondents or parents;

Problems and difficulties should be expected as one takes care of an elderly, but they should be solved accordingly;

Although difficult, taking care of elderly parents must continue regardless of the parents' sex;

The respondents' acceptance of their parents' sex could alleviate the difficulty one faces as they take care of their parents;

One must continue having the right attitude towards the care of their elderly parent;

Problem-focused coping is applicable when dealing with mothers since it lessens the use of drama, which mothers are capable of, in solving problems;

CPU personnel might find it easier to deal with the problem if there is support from others to make the parent take his medicine;

Lastly, caregivers would be well-advised to take to heart what Aging America Resources Care Ministry recommends in helping them draw upon the resources of their faith in difficult situations (such as coping with aging parents); to provide the elderly ethical and moral choices that involve preserving dignity, offering respect, and engendering empowerment to them; and to meet the spiritual needs of one's parents by encouraging church attendance, visits from a local pastor, and reading Bible passages to them.