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# Letters to the editor

*Letters received from readers in response to articles and ideas published in ANS are regularly featured, providing an opportunity for constructive critique, discussion, disagreements, and comment intended to stimulate the development of nursing science. Unless otherwise stated, we assume that letters addressed to the editor are intended for publication with your name and affiliation. When space is limited and we cannot publish all letters received, we select letters reflecting the range of opinions and ideas received. If a letter merits a response from an ANS author, we will obtain a reply and publish both letters.*

## INTERGENERATIONAL CAREGIVING

*To the editor:*

I read with great interest the article by Barbara J. Bowers, "Intergenerational Caregiving: Adult Caregivers and Their Aging Parents" (*ANS* 9:2, January 1987). I was particularly interested because I am a gerontological nurse and have been a caregiver for aging parents for almost 20 years. I have also participated in and taught the "As Parents Grow Older" course and have worked with support groups for adult children caring for aging parents.

The five categories of caregiving identified were revealing because they have not been previously classified as such in the literature. Anticipatory caregiving is relevant for adult children whose parents live in another state. Preventive caregiving and supervisory caregiving are important concepts when working with adult children who care for aging parents. However, I was surprised to see that protective caregiving was experienced by most caregivers as the most difficult and important type of care provided. I have not observed this type of caregiving. Perhaps it occurs in the very early stages of caregiving, before the

adult children feel the need to seek help through classes and support groups.

From my observations and experiences, I believe that instrumental caregiving is the most difficult and important type of care provided. The major problem of adult children caring for old-old parents becomes a vicious circle of fatigue, anger, guilt, and depression. How can protective caregiving be more difficult than that? It may be that protective caregiving, like anticipatory caregiving, occurs early in the process before the caregivers realize what future problems will occur.

Invisible caregiving was also discussed as a way of protecting the relationship between adult children and aging parents. While it is true that most elderly individuals want to remain independent as long as possible, when increasing dependence occurs, the older parent should not feel that he or she needs to continue to be independent when it is realistically impossible. If feelings of mutual support, caring, and freedom to depend on others have always been present in the adult child-parent relationship, there can be an open discussion about the needs and plans of both. I was surprised to see examples of adult children who were not honest with their aging parents (eg, the situation regarding the daughter not wanting the physician to tell her mother that the daughter had talked with the physician). It seems that this is an example of role reversal, in that the adult child is treating the parent as a child. An open discussion between the daughter and parent would have been more beneficial to both. The parent never becomes the child and the adult child never becomes the parent. Perhaps there needs to be more research on the adult child-aging parent relationship as the parent moves from an independent to a more dependent state.

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