
The most difficult dilemma for us was that we were unable to provide follow-up for those individuals who remained anonymous, although we were able to offer them a certain amount of information and support that they would not have otherwise had. The ethical and moral problems associated with this kind of research are staggering. The legal concerns are much simpler to handle. In this particular study, for example, our legal counsel assured us that we were not mandated to report because the design of the study did not require an interview with both the elder and the caregiver and we were, as a result, unable to confirm the stories we were told. The research we are currently conducting requires an interview with both parties but our legal counsel believes that since we are acting as researchers and not in the professional capacity of nurses we are exempt from our state's reporting law. Regardless of the legal technicalities, however, we continue to feel our ethical and moral responsibilities strongly and try diligently to project our desire to help families rather than to punish wrongdoers. We would appreciate any further comments on this subject.

*Linda R. Phillips, RN, PhD, FAAN
Associate Professor
The University of Arizona
Tucson, Arizona*

INTERGENERATIONAL CAREGIVING

To the editor:

I would like to comment on Barbara J. Bowers' article, "Intergenerational Caregiving: Adult Caregivers and Their Aging Parents" (*ANS* 9:2, January 1987). Dr. Bowers' article appeared as I was preparing the defense for my dissertation, which focused on measuring stress, appraisal, and coping in the family caregivers of noninstitutionalized elders. I did not

get the significance I had hypothesized and the results of Dr. Bowers' study helped me to explain the unexpected outcome. For one thing, I had the subjects use the list compiled by Clark and Rakowski to identify the strain situation, which was the basis for measuring stress, appraisal, and coping. This is a list of caregiving tasks derived from an extensive review of the caregiving literature. The items selected as most stressful were not those dealing with hands-on activities but rather those dealing with caregiver feelings about the caregiving relationship.

As I reflect on some of the stories the subjects told me, the ones that generated the most emotional response were those that would fit into the category of protective caregiving, as suggested by Bowers. A vivid example was provided by a woman who was struggling with the knowledge that her father's driving was a hazard to society while acknowledging that taking the privilege away from him would be devastating to his morale. She had tried several alternative approaches, such as suggesting that he hire the services of a chauffeur (which he had the means to do), but he refused. She was struggling between helping him to maintain his dignity and independence and meeting her responsibility to society. One year after I first interviewed this woman, I got a note from her. The family had been successful in getting her father to stop driving and in providing him with a driver, although she says, "I could write a book on what we went through" to make that happen. That, combined with other changes in environmental circumstances, has resulted in a deterioration in his well-being that generated many conflicts for her. She sums it up by saying, "I know I'm not alone with these soul-searching questions, but it is heartbreaking for me to watch this vital, dynamic person I remember as my father be so hard to reach, almost impossible to help, and just sit back and do nothing while he is dying under my eyes." She had not done that. She had done every-

thing humanly possible in providing for his instrumental care needs. It was in preserving his dignity and dynamic nature that she felt stressed and helpless.

I applaud Dr. Bowers for returning to the exploratory mode of study and I am grateful for the timeliness in sharing her findings. I plan to continue to study elder caregiving and

to incorporate findings such as those of Dr. Bowers in an ongoing manner.

*Clara M. Long, RN, DNSc
Associate Professor
Department of Nursing
York College
York, Pennsylvania*