A developmental model is proposed and incorporated with exchange theory to further explain the position of the second generation in considering dependency needs of both the first and third generations. What literature exists deals primarily with dependency needs of children or at best, attitudes toward older people. Questions are raised and some answers suggested to encourage research focused on behavioral responses to the increasing dependency needs of older persons, therefore, offering further assistance to counselors and families. (Author)
COUNSELING NEEDS FOR THREE GENERATIONAL FAMILIES

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COUNSELING NEEDS FOR THREE GENERATIONAL FAMILIES

In the United States today, there are some 21.3 million Americans age 65 or older. This figure, both in terms of numbers and proportionate to the population, is a new phenomena. In general, we have neither been conditioned by experience nor theory and research to understand how to deal with family relationships that involve the older person. The literature from the relatively new field of gerontology plus counseling experience, document mushrooming case loads of second generational families concerned with the question, "What are we going to do with Mom and/or Dad as they grow increasingly older and usually increasingly dependent." Whereas one hundred years ago, Mom and Dad seldom lived much beyond the marriage of their last child, major improvements in medical technology, nutrition, etc. have increased life expectancy and thus permitted larger numbers to live to the fulness of their life span.

It would seem that we have always been a "Youth Oriented Society." History will document from the inception of movement to this country and even to these Western Regions, that it was mainly the strong, and the young, who survived and have been the most revered. Hand in hand with the stress on "youthfulness" has been the ideal of early and lasting independence. Even the oldest person desires to remain as independent for as long as he/she possibly can. Although not everyone experiences major decline after age 65, most can eventually expect some decline in physical and/or mental powers as well as economic resources. But even desire is usually not sufficient to ward off decline, and eventually most older persons find themselves becoming increasingly dependent.
As dependency increases the literature suggests that older persons normally turn first to their own children, more often to an older daughter rather than to a son. Some theory has been developed to at least suggest why this approach appears to be the norm, but that is beyond the focus of this paper today (Turner, 1975). Instead, since there appears to be a near paucity of experience plus empirically based literature to guide the interventionist and families in dealing with the general increasing dependency of older people, one developmental model will be introduced which attempts to explain dependency-independency in terms of Exchange Theory.

More recent literature, together with the theory workshop that preceded this annual meeting, continue to support the theoretical viewpoint that the American family is an interdependent kinship system (Turner, 1975). Accordingly, some social exchange usually occurs between, as well as within related families. Richer (1968) postulated that people who hold central valued resources rise to power in a social system. He suggested that power accelerates under two conditions: when those who need the resources do not have alter-
native sources of supply, and/or when they do not have resources of equivalent value with which to reciprocate. If both conditions prevail, the person without social exchange value is likely to display deference in order to insure access to further resources in the future.

Consider with this exchange theory, the infant who unilaterally depends upon his parents or parent surrogates for all resources (Blau, 1964). This disproportionate balance of power does not normally remain static over time, but later shifts to accommodate gains in the resource repertoire of the child. As the child grows older, he depends less upon his parents, therefore, decreasing the power within the older generation. In kinship systems that involve three generations, the second generation rises to power because of this valued position in being able to look both, up and down the generational lines. (That is, dependency on the second generation by the first and third generations.)

Again we have a voluminous literature instructing the second generation on how to deal with dependency needs in children, but little has been written to guide them in dealing with these dependency needs in older persons.

Winch (1951), and Komarovsky (1950) have dealt with emancipation ties. Rautman (1962) labeled the process of dependency in the later years as role reversal. Goldfarb (1965) talked about working out a dependent relationship that always existed rather than an imbalance of power, with his "motivated search for dependency." Strieb (1958), Bossard and Boll (1949), and Sussman (1965) suggested that dependency in the later years follows patterns of previously established inter-generational interaction.
Most of the gerontological literature has dealt with attitudes toward older persons rather than with behavior (Barron, 1953; Bekker and Taylor, 1966; Drake, 1958; Eisdorfer and Altrocci, 1961; Tuckman and Lorge, 1953). What the interventionist needs today is solid innovative research and theory that will help him become more effective in dealing with first and second generations. One approach would be to obtain results of studies based on behavioral responses to adults' (older persons') rather than attitudes alone.

Additionally, are there alternatives to meeting dependency needs of older persons other than such mechanisms as institutionalized care? Where as many needs of both families and older people are being met by such facilities, recent concern has been raised that those who work closest with the residents (specifically nursing home aids), are the least trained, poorest payed and thusly have the highest turn over rate of all employees dealing with the aged (Kramer, 1971; Reader, 1971; Vincent, 1971). There also exists the fact that the demand for quality care facilities far exceeds their availability. Then, there is concern about being able to financially sustain an older person, particularly over extended periods of time even when space becomes available.

Thirdly, and certainly not lastly, are there ways of increasing the bargaining power of older persons in our society?

It is not as though there are no answers to the previously stated questions. Some interventionists have drawn upon the vast experience of religion (Turner, 1973). For example the age old commandment of "honor thy father and thy mother," has been somewhat satisfied by the Jewish population, which disproportionate to their size, have done more toward institutionalized care for the aged than any other single group.
Catholics on the other hand support few institutionalized care facilities and primarily lead out in support of home care for the aged. The Protestants in general comprise the largest portion of our population, and although you'll find some deviations by denominations, generally place the fulfillment of dependency needs back upon the older person first, and then secondly on society at large rather than upon the family. That is, legislatively speaking, Protestants are the ones most likely to be the strongest supporters for socially funded programs for the elderly. (Max Weber's Protestant Ethic and the Spirit of Capitalism would offer one explanation for this behavior.)

To some extent we might turn to the examples of the traditional family systems of the Orient. For centuries the elderly have maintained a most respectable position in the extended kinship group. However, some recent professionals in Japan have become alarmed with the modern position and status of their older people (Ueno, 1973). Due to such national legislation as occurred some 27 years ago for abortion, there is developing a disproportionate balance of young to old in the Japanese population. The small stems of second and third generations are far less inclined to support the dependency needs of their fully matured and larger numbers of first generational members. In fact, some of the young are now moving for national legislation supporting Euthanasia. I don't want to sound like a "doomsayer," but perhaps we're not too far behind the Japanese with this similar major social problem.

Perhaps there exists or could be established some functional mechanisms which would increase the valued resources of older persons, or at least provide them with equivalent value with which to reciprocate. Some attempts have been made in this direction, such as
increased Social Security benefits to the elderly, involving them in programs as the R.S.V.P., and even granting them special financial and social privileges. As a group, those age 65 and older have demonstrated their potential power during election times.

The quest for knowledge in this area is great. We need to encourage the behavioral scientists to help us move over the threshold and to find more understanding in this issue that we might become more effective counselors. As we move more strongly into fourth and fifth generational families, we can only begin to perceive the increasing critical position which the older person will face. Yes, and that older person will be you and me.

Thank you!
REFERENCES


