

# The Role of Family Involvement In a Long-term Care Facility

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## ABSTRACT

As the Baby-Boomer generation (those born between 1946 and 1964) reaches retirement age, the population of senior adults is expected to increase in all fifty states. The Census Bureau projects that America's aging population will double between 1995 and 2025. Literature suggests a direct correlation between family involvement and the life satisfaction level of residents in long-term care facilities. (Gaugler, 2003, p. 3) The purpose of this study is to evaluate the effect of family involvement on the depression and life satisfaction levels of residents in a long-term care facility. Using a convenience sampling method, a sample size of 30 individuals will be obtained from the population of residents at St. Barnabas Senior Living Services. The sample will consist of a diverse population of individuals at last fifty-five years of age residing in a long-term care facility and cognitively able to participate. A questionnaire will be used to collect demographic information as well as responses to the questions outlined by the Geriatric Depression and Satisfaction with Life Scales. Responses will be coded and entered into SPSS. Descriptive statistics will be run to check for data distribution. Frequencies/descriptives will be used to examine the distribution of data. T-tests will be used to determine the differences, if any, between the groups. Finally, correlation analysis will be used to examine the relationships between family involvement and the participant's depression and life satisfaction levels.

## PURPOSE/RATIONALE

According to Paul Campbell (1997) with the United States Census Bureau, "the number of elderly is projected to at least double in 20 states between 1995 and 2025." Given the aforementioned statistics, it is imperative that some focus be directed toward the aging population and their life satisfaction.

## DESCRIPTION OF SAMPLING FRAME

The sampling frame are the ninety-two residents at St. Barnabas Senior Living Services.

## RESEARCH QUESTIONS

1. Is there a positive relationship between family involvement and the level of life satisfaction in senior adults living in a long-term care setting?
2. Is there a negative relationship between higher levels of depression and lower levels of life satisfaction?

## STUDY PROCEDURES FOR IMPLEMENTATION AND DATA ANALYSIS STEPS

1. Quantitative Study will be conducted.
  2. Data will be collected and entered into SPSS.
  3. Descriptive statistics will be run to check for data distribution and skewness.
- For both research questions, the Geriatric Depression and Satisfaction with Life Scale will be utilized. There responses will be summed to create a total score. Frequencies will then be run to determine range of scores, mean scores, and standard deviations. T-Tests will be run to look for differences between groups. A correlation analysis will be run to examine relationships between the Geriatric Depression Scale and the Satisfaction with Life Scale and family involvement variables.\_

## DESCRIPTION OF METHODS TO SELECT STUDY SAMPLE

Convenience sampling method will be used to identify a minimum of thirty individuals aged fifty-five years of age and older representing diversity in terms of both race and gender.

## DEMOGRAPHICS

Out of the total sample (N=30), 63 percent or (N=19) was female. The age of the participants ranged from 55-64, with 50 percent or (N=15) of the total population being between the ages of 75 and 84. This age range also represents the mean ( $SD=.788$ ), mode and median of this data set. The sample population was comprised of 93.3 percent or (N=25) of European-American with the remaining 16.7 percent or (N=5) being of African-American descent.

## IMPLICATIONS FOR PRACTICE

2. SW should remember the importance of family involvement.
3. SW should remember that the older population will double between 1995 and 2025 and research possible ways to better support.
4. SW should encourage family visitation through structured activities.
5. SW should work in conjunction with other support systems.
6. SW should encourage residents to make their own decisions about the care they receive.



## RESULTS

To address question one A Pearson's correlation coefficient was calculated for the relationship between subjects' level of life satisfaction and family involvement. A moderate negative correlation was found ( $r(28) = -.697, p < .005$ ), indicating a significant relationship between the two variables. As family involvement increases, life satisfaction decreases. To address question two A Pearson's correlation coefficient was calculated for the relationship between subjects' level of life satisfaction and family involvement. A moderate positive correlation was found ( $r(28) = -.668, p < .005$ ), indicating a significant relationship between the two variables. As geriatric depression scores increase, life satisfaction scores decrease. Results showed that resident's income level was a larger contributing factor to resident's views of life satisfaction than family involvement. ( $r(28) = .519, p < .005$ ). However results showed that the higher the level of geriatric depression the lower levels of life satisfaction. ( $r(28) = -.668, p < .005$ ),

## DISCUSSION

The primary objective of this study was to research the correlation between family involvement and levels of life satisfaction. The study also looked at the impact of geriatric depression on residents living in a long term care setting. Research revealed that family involvement had a negative influence on resident's personal views of life satisfaction. While completing a Pearson's correlation coefficient study it was revealed that resident's income level was a larger contributing factor to resident's views of life satisfaction than family involvement. However, results showed that the higher the level of geriatric depression the lower levels of life satisfaction. The literature review mean GDS score was very similar to the mean GDS T-Tests results that were completed for this study.