



Advancing the health of our aging population: A lead role for nursing science

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“The impending crisis, which has been foreseen for decades, is now upon us. The nation needs to act now to prepare the health care workforce to meet the care needs of older adults.” —Institute of Medicine.

Today, people are living longer than ever before, and as the baby boomers age, the number of older adults is expected to increase exponentially over the coming decades. Combined, these 2 demographic shifts will lead to enormous challenges for society. They will require us to identify strategies to allow older adults to live independently for as long as possible; provide health care and education for older adults who are self-managing multiple chronic illnesses; ensure that older adults in long-term care settings receive high-quality care; and support family members and friends who are caring for an older loved one with dementia and/or a disability.

Nurses and nurse scientists have been leaders in elder care, and will play increasingly critical roles in addressing these challenges in the decades ahead. Nurse scientists conduct research that informs evidence-based interventions to promote health and manage illness in various health care settings. Nursing science will continue to build the scientific evidence base for improved clinical care and for improved quality of life for our aging population. Nurses provide the front line health care for older adults in a wide variety of settings, including preventive care in primary care offices and in the community, acute care in hospitals, and long-term care in nursing homes and assisted living facilities. Nurses and nurse scientists lead and participate on the

interdisciplinary and interprofessional teams necessary to understand and address the complex issues we face in elder care, and to provide optimal person-centered care.

To best meet the needs of an aging population and to improve the health of older adults, it is critical to train future nurses and nurse scientists in the field of aging. The Hartford Geriatric Nursing Initiative (HGNI) and the Building Academic Geriatric Nursing Capacity (BAGNC) program are leading the way in this critical endeavor as they collaborate in efforts to train the next generation of nurses with expertise in geriatric care. With an emphasis on mentoring and leadership, HGNI partners with nursing schools and health care organizations to develop students to be competent in the care of older adults, as well as to increase the number of geriatric nursing faculty. At the same time, BAGNC provides fellowships and scholarships for junior scholars to work with nursing faculty with expertise in aging and to gain valuable experience conducting research on issues related to improving the health and health care of older adults. I am pleased to introduce the work of 3 such BAGNC scholars and their mentors who contributed state-of-the-science briefs to this special issue of Nursing Outlook, which cover a range of topics of importance to the health of older adults. All 3 papers deal with basic care issues that are vital to maintaining the dignity and quality of life of older adults in various care settings.

Aselage et al review literature on mealtime and feeding interventions for nursing home residents with dementia. They discuss scientific evidence supporting hand feeding as an alternative to tube feeding to alleviate

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mealtime difficulties, and they discuss implications for future research and policy. They note the importance of interdisciplinary and international efforts to develop new models of care. Talley et al review literature on conservative behavioral treatments and clinical guidelines for managing and preventing urinary incontinence in frail older adults in the community. Although they find that the literature is limited, data from multicomponent interventions (eg, behavioral, exercise, biofeedback) show the strongest evidence for improving outcomes. Their analysis also revealed that current clinical guidelines are lacking specifically for frail community-dwelling older adults. Toles and Anderson use complexity science as a framework for examining literature on management strategies and practices in nursing homes. They emphasize the importance of developing relationship-oriented management strategies and staff communications in nursing homes that encourage interdependence among staff. In return, these strategies then allow staff to provide care needed to treat complex health issues in nursing home residents (eg, fall prevention).

Collectively, these 3 papers address several important aspects of these health care challenges. First, the papers focus on identifying ways to improve health care and quality of life for older adults across care settings from the nursing home to the community, and they highlight the need for a strong scientific base of research to inform clinical care guidelines. Second, these papers highlight the interpersonal interactions, either between older adults and family members or nursing staff, or among different levels of staff in a nursing home, which can influence older adults' quality of life and health-related outcomes. Third, these authors identify the importance of nurses as integral members and leaders of interdisciplinary health care teams to solve complex health problems and provide the best health care for older adults. Finally, the papers underscore the value in assessing multiple types of intervention (eg, behavioral, medical, physical), analytical parameters (eg, interpersonal, organizational, policy), and environmental settings (eg, community, long-term care) to fully understand the complexity of health issues facing older adults and to produce the most positive health outcomes.

Training BAGNC scholars in geriatric nursing is a vital way in which the field of nursing contributes to better health for older adults. Clearly there are many challenges ahead for nurses in both clinical care and research if we are to meet the needs of our aging society. At the National Institute of Nursing Research (NINR), we address these issues by supporting research on a broad range of topics related to aging, including self-management of chronic illness; support of family caregivers; and improving the quality of care and quality of life for older adults in long-term care facilities. We also support scientists and nurse scholars at all career levels, from predoctoral students to senior

researchers. Investing in research and training on aging and health ensures that nurses and nurse scientists receive the support they will need to fulfill their responsibilities as leaders in meeting the challenges of health care for our rapidly expanding senior population.

As we embrace our leadership responsibilities in the years ahead, we should be mindful of several critical health and health care challenges as well as the ways in which we can contribute to the solutions to these challenges.

Multiple Chronic Illnesses

We are living longer today, yet with increasing age, we are also more likely to live with chronic illness and disability. Current estimates indicate that approximately 80% of people age 65 and older have at least 1 chronic illness, such as heart disease, diabetes, or arthritis,¹ and that the number of older adults with multiple chronic illnesses is substantial.² These chronic illnesses often involve pain, functional limitations, and the need for long-term self-management of symptoms. Chronic conditions not only impact the quality of life of older adults, but are also associated with considerable economic cost with estimates that 75% of health care costs in the United States are the result of chronic illness.³ In a time of dwindling resources, we will be required to provide quality care to a larger number of older adults with multiple health problems and complex health care needs. To address these issues in the future, research should focus on older adults with multiple chronic illnesses rather than just 1 illness, as this scenario best represents the typical older patient. In addition, as nurses we are in a unique position to communicate with older adults and their families about effective self-management strategies to maintain independence, functioning, and mental and physical health.

Racial/Ethnic Diversity of Older Adults

Racial and ethnic diversity is increasing in older adults in the United States. For example, current projections estimate that between 2010 and 2050 the percentage of Latino older adults will increase from 7% to 20% in our geriatric population.⁴ As a society, we must be prepared to provide services, programs, and interventions that are culturally sensitive and appropriate, and which are best designed to address this increasing diversity. Here again, nurses and nurse scientists are at the forefront of research efforts to inform the design of prevention and health promotion interventions, to ensure health equity, and to improve the health of racially/ethnically diverse older adults. As a corollary to this, we must also continue to invest in a geriatric

nursing and research workforce that is racially and ethnically diverse.

Caregiver Burden

Our aging demographics also portend a significant increase in caregiver burden for family and friends who provide care for older loved ones with physical disability and/or dementia. For instance, in 2009 there were approximately 10.9 million unpaid caregivers providing care for loved ones with Alzheimer's disease.⁵ This translates into an estimated 12.5 billion hours of care. These statistics are likely to increase dramatically in the decades ahead, and will lead to corresponding increases in public health challenges because caregivers themselves often experience higher incidences of disease and disability. For example, informal caregivers often experience stress, depression, and physical illness as they care for loved ones. Moreover, caregivers are often faced with difficult decisions regarding placing loved ones in long-term care facilities. In the years ahead, we must pay special attention to our roles in supporting family members and other caregivers as they navigate a complex health care system and make decisions about the best course of care; and nursing research must accelerate our efforts to identify the best practices for providing quality care for older adults and for supporting their families and other caregivers.

Interdisciplinary Collaboration and Research Translation

It has become increasingly apparent that solutions to our health and health care challenges require a collaborative teamwork approach that is interdisciplinary and inter-professional. Moreover, it is increasingly clear that although we have made great strides forward in scientific research, we have been less successful in translating this research into health and health care improvements. As highlighted by the state of the science briefs, nurses and nurse scientists will play increasingly important roles in the coordination of interdisciplinary and inter-professional teams both in research and in health care practice. In addition, we must redouble our efforts to accelerate the translation of research advances into health and health care improvements. This means we must embrace every opportunity to provide leadership in translational initiatives and to encourage collaboration and partnership.

Prevention and Wellness across the Life Span

Prevention and wellness across the life span, as well as across generations, have long been cornerstones for nursing practice and nursing research. As our Nation's

health care policies increasingly reflect this emphasis on prevention and wellness, we will increasingly be called upon to provide leadership in these areas. In this context, it is imperative that we pursue and encourage efforts at prevention and health promotion that target the early part of the life span, where the seeds for illness and disability as we age are often sown.

The Next Generation of Nurses and Nurse Scientists

Encouraging the next generation of nurses and nurse scientists to pursue careers in geriatric nursing is of critical importance, because the majority of health care consumers in the coming decades will be older adults. In concert with the efforts of HGNI and BAGNC, we must ensure that future nurses are prepared to provide older adults with the best possible care. In addition to providing fellowships and scholarships, we need to think creatively about ways to make geriatric nursing an appealing career track, and find ways to incentivize and support students in this important endeavor.

As stated by the Institute of Medicine: "The impending crisis, which has been foreseen for decades, is now upon us"—and the time to act is now. Nursing and nursing research must continue to lead the way in addressing the challenges associated with providing quality health care for older adults through excellence in science and practice, and through training the next generation of leaders in geriatric research and practice.

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