Home healthcare nurses know all too well that the health of older adults is a priority. While a prevailing attitude in this country has been to focus on youth and beauty, devaluing aging for far too many years, many of us as nurses can no longer look away and ignore this issue. For one thing, “we,” collectively, are aging. Many are caring for aging parents and their issues, while perhaps at the same time anticipating our own aging. That certainly makes me think about what my expectations are for aging…and where and how I want to be cared for as I age!

We live in an aging society. The “Baby Boomers” (those born between 1946 and 1964), of which I am one, will begin turning 65 in 2011. This has been described as the anticipated “silver tsunami of aging” or “graying of America.” Currently 12% of the population is over 65 years old. By 2030, this number is expected to increase; 1 out of 5 people will be 65 and over, and 1 out of 4 will be 60 and over (Wan, 2005). In the home care business, we are directly impacted by this growing number of older adults, and particularly the increasing number of very old adults. Health problems of the older population are quite challenging when compared with those of younger populations. The effects of aging are profound for all, and few professionals are adequately prepared. An astounding 80% percent of adults 65 and over has at least 1 chronic illness, and 60% has 2 or more (Wan; Centers for Disease Control & Prevention, 2003).

The health problems of older adults who are cared for by home healthcare nurses are often quite complex; providing care is often very challenging. Patients are more likely to be functionally impaired, requiring more coordination of healthcare and community resources than younger adults. Despite the downward spiraling of health and progressing disability often seen among home care patients, the majority of older adults prefer to remain living in their own homes…and to die at home. In fact, only 4.5% of all adults over 65 (and 16% of those over 85) live within institutional settings—a number that has steadily diminished (U. S. Bureau of the Census, 1996).

Caring for older adults is the core role of home healthcare nurses. Eighty percent of patients receiving home care services are older adults, due in large part to Medicare regulations. Often older adults live alone with limited social, emotional, and financial resources, while receiving care from home care and hospice nurses within the home setting. In fact, 10% of the older adult population with the most complex problems account for 70% of the Medicare budget (Gruenberg et al., 1989) and currently, more than two thirds of healthcare costs are allocated for treating chronic illnesses (Hoffman et al.,1996). These are our clients! Home care nurses must be prepared to care for those individuals at greatest risk, as well as their families, delivering quality care to address acute and chronic problems, while minimiz-
ing risk and promoting quality of life and independent living within the home setting.

This issue of *Home Healthcare Nurse* focuses on health issues that are particularly challenging when caring for older adults, as well as nursing interventions that are important when planning care. In the article entitled “Emotional Needs of Care Recipients and the Psychological Well-Being of Informal Caregivers: Implications for Home Care Clinicians,” Egbert and coauthors found that informal caregivers report poorer emotional well-being when experiencing difficulty in meeting caregiver recipients’ emotional needs in the face of complex health problems. Lamb and O’Brien discuss the challenge of both preparing older adults for impending natural and manmade disasters and caring for them after such disasters. Specific clinical conditions are discussed in “Managing Patients with Dysphagia,” “My Father’s Experience with Macular Degeneration,” and “Partnering for Prevention: A Pressure Ulcer Prevention Collaborative.” Chronic health problems such as these often present with a slow, insidious course, resulting from multiple causes (e.g., poor diet, lack of exercise, genetics, lifestyle choices) and requiring an increasing, burdensome self-management protocol. It is expected that the older patients will comply with these demands, while often realizing that there is little hope of returning to the previously well state. Adherence to complex medication regimens for chronic illnesses is often difficult for older patients and their families.

The challenges within home care are expected to increase over the years to come as the proportion of the older population grows and continues to live longer. It is important for us, as nurses, to be prepared. This issue provides preparation to address the current, challenging issues that face the older home care population.

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