Older adults worked through 3 phases as they made the initial transition to permanent residence in a nursing home


Question
What are the initial experiences of older adults who are admitted to nursing homes on a planned or unplanned basis as they make the transition to nursing home life?

Main results
The transition to nursing home life had 3 phases: overwhelmed, adjustment, and initial acceptance. Participants who had planned their admission to the nursing home progressed through the phases more quickly than those who had unplanned admissions. The overwhelmed phase consisted of the emotional response to the admission, including crying, feelings of loneliness and sadness, and longing to go home. Participants made conscious efforts to protect their families and attempted to hide their feelings. Problems included experiencing too many changes at once, adjusting to reduced personal space, and the lack of privacy.

During the adjustment phase, participants began the process of adjustment by internalising their admission. They began to think about the future and everyday living. They tried to have a positive attitude, establish new social networks, and deal with issues about control and autonomy (eg, rules and regulations of the nursing home and lack of participation in decision making).

In the initial acceptance phase, participants began to take action (eg, made new friends, got involved in activities), felt more self confident, and began to take control of their situation, realising that they had a future.

Commentary
The number of older people entering nursing homes is rising and will continue to rise for the foreseeable future. This relocation can be a traumatic event and often occurs at a time when the person is experiencing a personal crisis or physiological change. It is therefore vital for nurses to understand more about nursing home entry if they are to help make this transition a success. This study by Wilson seems to indicate that participants can easily be classified as having planned or unplanned admissions, but has not made clear what constitutes a planned and unplanned event. Indeed, there may be varying degrees of each.

The choice of a grounded theory design is appropriate, because nursing home entry is a complex social process and there may be many variations in the way people respond. This method of research never suggests generalisability and the author rightly says nothing about the results being applicable to all environments. The study simply provides an emergent theory of nursing home entry, with the expectation that others will replicate it and modify it in light of further data. Lack of replication for grounded theory studies is one of the major obstacles to their acceptance as a valid method of research.

The study’s failure to address specifically the role of informal carers as a central concern at nursing home entry may be an important omission, but could be addressed in an adjacent study in the future.

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