Individual nursing care for the elderly among China's aging population

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\textbf{Summary}

By the end of 2014, China had an elderly population age 60 or over totaling 212 million; this group accounted for 15.5\% of the country’s total population of 1.37 billion, which means that China has passed the threshold for an aging population. As China’s population ages and the disease spectrum changes, nursing services for the elderly must be expanded. Given differences in the health status, financial situation, and family composition of each elderly person, modern society is tending towards individual nursing care for the elderly. Adapting to the changing composition of society by age will present new challenges.

\textbf{Keywords:} Aging of the population, nursing care, healthcare, long-term care

Aging of the population means that a population consists of more individuals of an older age, which is typically defined using the age 65 as a cutoff. A country is considered to have an aging population when the proportion of the population age 60 over exceeds 10\% of the total population or age 65 over exceeds 7\% (1). Population aging has many important socio-economic and health consequences, including an increase in the old-age dependency ratio, which presents challenges for the fields of nursing, public health, and economic development (2).

\section{1. Aging of the Chinese population}

By the end of 2014, China had an elderly population age 60 or over numbering 212 million; this population accounted for 15.5\% of the country’s total population of 1.37 billion, which means that China has passed the threshold for an aging population (3). According to data from the United Nations, the world’s elderly population grew at an average rate of 3.3\% (4). According to the World Health Organization, 35\% of China's total population will be over the age of 60, making China the world’s most elderly society in 2050 (5).

\section{2. Nursing needs of the elderly}

The elderly have greater nursing needs because they are primarily a population with common chronic conditions and geriatric diseases, such as diabetes, dementia, cardiopathy, cerebrovascular disease, and respiratory disease (Figure 1) (1,6,7). The prevalence of chronic conditions in the elderly is 4.2 times that in the population as a whole, and each elderly person usually has 2-3 different conditions (8).

According to data from the China Health and Family Planning Statistical Yearbook 2016, the prevalence of hypertension among the elderly age 60 or over was six times that of citizens ages 18-44 and twice that of citizens ages 45-59 (Figure 2). In addition, the elderly had a high mortality from different tumors, and lung cancer in particular (Figure 3). The increasing number of elderly patients have common chronic conditions and geriatric diseases. In contrast, patients with intractable and rare diseases such as HIV, fragile X syndrome, and Allan-Herndon-Dudley syndrome are gradually aging (9,10).

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spectrum changes, nursing services for the elderly must be expanded. How should geriatric nursing adeptly respond to these challenges is a significant concern.

3. Individual nursing care for the elderly

When birthrate and mortality trends have been fairly regular over time, population growth is positively correlated with age, which implies that if the population age 65 or over is increasing, then the proportion age 80 or over is also increasing (11). The health status, financial situation, and family composition of 65-year-olds and 80-year-olds vary greatly, so healthcare and nursing care should also vary from person to person. Modern society is tending towards individual nursing care for the elderly. Adapting to the changing composition of society by age will present new challenges.

**Health status.** The first challenge concerns expanded nursing services for individual elderly with a different health status; tailored services are not easily provided by social support systems (12). Elderly individuals with a different health status need a corresponding level of nursing. Elderly who are relatively healthy may need little help, elderly with some health problems may need some care, and elderly with severe health problems may be unable to care for themselves. However, individual nursing care for the elderly has not been implemented in China because of faults in disease prevention among healthy elderly and a lack of nursing care for elderly who are unable to care for themselves. At present, care is still focused on individuals who are ill.

**Financial situation.** As the prevalence of disability, frailty, and chronic diseases increases dramatically, the burden of disease will become a key issue for the elderly and their families (13). Given the need for regular insurance when healthy and medical insurance in the event of illness, China needs to have long-term care insurance for individuals who are unable to caring for themselves. At present, care is still focused on individuals who are ill.

**Family composition.** The families of elderly individuals in China differ and vary in terms of their composition; this is mainly evident from where the elderly live (14). Compared to the elderly who live with
their children, the elderly who live alone have more complicated and more difficult issues of healthcare and nursing care. As the population ages, nursing care for the elderly who live alone will pose an enormous social burden in the future.

On the positive side, the health status of older people of a given age is improving over time thanks to societal and medical advances. Over time, better health will significantly reduce the effort needed to provide individual nursing care for the elderly as China's population ages.

References


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