Seeing the Methodological “Trees” in the “Forest” of Gerontological Nursing Research

Do you ever wonder where the balance lies between the “forest” of the field of gerontological nursing research and the “trees” of specific content, methods, and approaches? Two or 3 decades ago, we began to see a steady increase in published papers reporting research, examining teaching and practice, and thus defining gerontological nursing. Yet, at that time, with our specialty only really beginning to gain a foothold, gerontological nursing research was rather monolithic and lacked the definitive subspecialities and advanced methods with which we are familiar today. Then, general research questions investigating incontinence among nursing home residents, falls in community-dwelling older adults, or reaction to hospitalization for hip fracture all fit under the general umbrella of gerontological nursing research. We collectively saw this research as centered on frail older adults and common settings for their care. As the specialty has matured, so too has the precision and sophistication of our questions and, with those questions, our research methods have advanced.

Nonetheless, as our society ages and the character of our aging population changes with demographic shifts, the demand for increasingly sophisticated methods grows. The need for commensurate consideration of the ethics of conducting this research and applying the results with vulnerable participants parallels the need for methodological advances. The forest of gerontological nursing research has grown vastly as have many of the trees within it. Simultaneously, significant pressures to produce high-quality research relevant to advancing science, improving practice, and establishing outcomes may make it difficult to see some of those trees—the methods, along with issues of approach and ethics, they represent.

This issue of Research in Gerontological Nursing emerged from an understanding that the methodological landscape of gerontological nursing research has changed and will need to continue to evolve at a brisk pace. Thus, the collection of six articles gathered here were solicited to achieve two, intertwined aims. The first aim is to explore in some depth issues related to conducting research with older adults who are cognitively impaired. The discussion, represented in the articles by Beattie; Mayo and Wallhagen; and Garand, Lingler, Conner, and Dew, is intended to bring to the surface specific issues around research conduct, ethics, and participation with cognitively impaired older adults. Given the demographics of our society and those of many other developed nations, coupled with the epidemiology of dementia and similarly impairing diseases and conditions, it is no longer feasible to think about cognitively impaired older adults as a “special” population who can be included or excluded from research merely by focus and topic. Rather, the epidemiology of cognitive impairment combined with the demography of an aging society mandates we find new ways to consider the involvement of these older adults in research.

The second aim of this issue is to highlight some novel approaches to methods in gerontological nursing research and program development. The articles by Happ; Demiris, Doorenbos, and Towle; and Thompson and Voss are representative of the character of innovation in research methods and mechanisms in our specialty. The innovative methods highlighted are mixed methods, technology and telehealth, and biomarkers. Grasping advances made in ethically conducted, methodologically sophisticated research elucidates possible visions of a preferred future in gerontological nursing research. Visions of the future support increasingly well-developed, ethical programs of research as we define the forest and the trees in gerontological nursing.

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