



Epidemiology of Aging: *Being homebound*

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Definition of homebound

- Frequency of going out
- Need for help when going out
- Medicare: "confined to the home" (eligibility for home health benefit)
 - 1. need supportive devices, special transportation, or assistance to leave place of residence OR leaving home is medically contraindicated

AND

- 2. normally unable to leave home AND leaving home requires considerable and taxing effort

Descriptive epidemiology

Data from National Health and Aging Trends study:

- Completely homebound: 1.1%
- Mostly homebound: 4.5%
- Completely homebound people: more likely to be older, women, people of color, lower income, less education
 - Twice as many chronic conditions
 - More likely to be depressed or have possible or probable dementia
 - More likely to have been hospitalized in past year

Outcomes

Two-year mortality:

- Completely homebound 40.3%
- Semi-homebound 21.3%
- Non-homebound 5.8%

Half of older community-dwelling Medicare beneficiaries were homebound in the year before they died

Role of hope

But also:

- Presence of stairs
- Heavy front door
- Access to a car
- Floor of entry to household
- Household tenure
- Distance to retail stores



Celeiro ID, Santos-del-Riego S, García JM. Homebound status among middle-aged and older adults with disabilities in ADLs and its associations with clinical, functional, and environmental factors. *Disability and Health Journal*. 2017;10(1):145-51.

“You’re limited.”

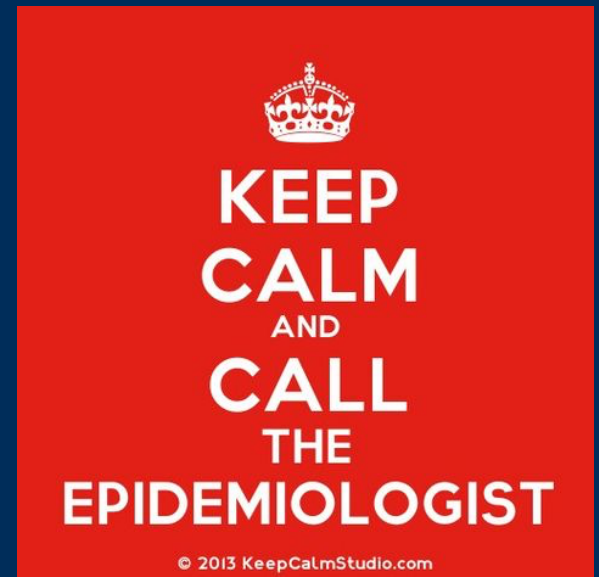
“You’re stuck.”

“And you’re stuck with the people
that help you.”



Methods concerns

- Selection bias
- Achievement vs difficulty vs need for assistance vs getting assistance
- Directionality/causation
- Confounding



Functional impairment? Disability? A consequence of disability?

- Individual vs. environment
- Social roles
- Premature aging?

Discussion

- Is it helpful to see being homebound as a functional limitation? A type of disability? A consequence of disability?
- How could we measure social role fulfilment?
- What is most important to capture in studying homeboundness?
- How should we use data from those receiving home-based primary care?