THE NURSE AS A FACILITATOR OF CARE FOR THE DEPENDENT ELDERLY AT HOME: AN INTEGRATIVE REVIEW

O ENFERMEIRO COMO FACILITADOR DO CUIDAR DO IDOSO DEPENDENTE NO DOMICÍLIO: REVISÃO INTEGRATIVA

LA ENFERMERA COMO FACILITADORA DE LA ATENCIÓN DE ANCIANOS DEPENDIENTES EN SU CASA: UNA REVISIÓN INTEGRADORA

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ABSTRACT

Objective: analyzing the scientific production in nursing regarding care of dependent elderly at their home.

Method: a descriptive study, of integrative review type, guided by the question « How are exhibited in Portuguese the scientific production in nursing regarding care of dependent elderly at their home? ». It was conducted the search based on Latin American Literature in Health Sciences, delimiting the time frame from 2004 to 2014. There were emerged two thematic categories. Results: the studies show that the family still supports elderly with limitations in the family context, where health professionals, especially nurses, should provide home care of quality. Conclusion: health care for dependent elderly, when effective, cooperate on promoting their health and their families, however, it is necessary to stimulate the scientific literature in this area, in order to encouraging care for the elderly with quality.

Descriptors: Home Care; Nursing; Dependent Elderly.

RESUMO

Objetivo: analisar as produções científicas na área da enfermagem com relação ao cuidar do idoso dependente em seu domicílio.


Descritores: Assistência Domiciliária; Enfermagem; Idoso Dependente.

RESUMEN

Objetivo: analizar la producción científica en enfermería con respecto al cuidado de personas mayores dependientes en el hogar.

Método: un estudio descriptivo, del tipo revisión integradora, orientado por la pregunta « ¿Cómo son expuestas en portugués las producciones científicas en enfermería con respecto al cuidado de personas mayores dependientes en el hogar? ». Ha llevado a cabo la búsqueda basada en Literatura Latinoamericana en Ciencias de la Salud, que delimita el marco de tiempo 2004-2014. Emergieron dos categorías temáticas. Resultados: los estudios muestran que la familia todavía apoyan a los ancianos con limitaciones en el contexto de la familia, donde los profesionales de la salud, sobre todo enfermeras, deben ofrecer una calidad de atención en el hogar. Conclusión: la atención a la salud de las personas mayores dependientes, cuando eficaz, cooperan en la promoción de su salud y sus familias; sin embargo, es necesario estimular la literatura científica en esta área, con el fin de fomentar el cuidado de las personas mayores con calidad.

Descritores: Cuidado en el Hogar; Enfermería; Personas Mayores Dependientes.

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At the beginning of humanity, care existed for the reason that the species should be maintained for the preservation of life, many changes of health, social and economic nature occurred in society until getting to the present day, making another meaning for care. Care is an attitude of responsibility and of affective involvement with each other. In relationships of care, the caregiver and of the one whom care is given interact, transforming and being transformed among themselves.

The aging population is a known fact on the world stage since the last century, due to the accelerated growth in the quantity of seniors. Previously, this phenomenon was observed only in developed countries, but over the years there have been changes in the demographic profile of the population, observing the growth of the elderly also in developing countries, particularly in Brazil, which in 2025 will occupy the 6th place in the number of older people, with 32 million people aged 60 or older. It is because of this growth that care is increasingly present, especially in the lives of dependent elderly and their caregivers.

Aging is characterized as a complex process of psychological and social nature in human development, being natural and irreversible due to endogenous deterioration of functional abilities of the organism. It is considered that functional capacity is the absence of difficulties in performing certain gestures and activities in daily life, as a consequence of aging; there has been the emergence of diseases typical of this process, and the major chronic degenerative diseases, sequelae of cerebrovascular accident (CVA) and dementia, which can jeopardize and cause failure in the elderly.

With the emergence of the very diseases of aging, usually the elderly come to possessing different degrees of addiction, which can influence on the performance of Activities of Daily Life (ADLs), those related to the body, such as personal hygiene and feeding, and still Instrumental Activities of Daily Life (IADL’s) assigned care activities with dependent relatives, the house, and the environmental administration. With this, the elderly presents the need to be assisted in conducting such activities, to be dependent on the situation, from the simple to the complex, so there is the maintenance of the biopsychosocial well-being.

Dependency is not characterized as a phenomenon, but as a process that generates social, economic, psychological, financial and political implications for the dependent person, as well as for those of the carers. The most viable alternative to caring for the dependent elderly is home care; however, it assesses the need for infrastructure and preparing the family home for its conduction.

With the dependence comes a new social actor in the family: the caregiver, who may be a family member, a friend, or a person that represents something meaningful to the elderly who receive this care. Due to the changes in the structure of society, the concept of family has become wider. Family is defined as a group of people who form a group, based on blood or emotional ties.

Working with the dependent elderly and their families in health services or at home, the nurse requires knowledge of the composition of their household, habits, living conditions, customs, culture, among other aspects, which are critical in the process of taking care. The role of health professionals in home care by the caregiver is essential, because they must go beyond the execution of procedures, including physical, mental, spiritual and social aspects of the elderly. Importantly, the caregiver also needs to be careful to continuing the care process.

In the context of the care process, the research on nursing and care for elderly dependents at home are essential to generate theoretical foundation to supporting nursing care to the elderly and their caregivers, where the nurse works in health promotion activities, prevention and control of diseases, with the competence to assisting the dependent elderly and also their caregiver, to seek for improvement the quality of life of the one who receives care and to the caregiver. The Family Health Strategy (FHS) emerges as speaker of the relationship between the nurse, the elderly and caregivers enabling them to receiving home care with the same quality existing in the health unit, causing that the architectural barriers to be transposed.

These considerations justify the interest of this study to developing an integrative review of the scientific production in nursing regarding elderly care at their home, for the interpretation of the knowledge produced in the area with the intention of assisting in the development of new research and techniques providing the effectiveness of care to dependent elderly and their caregivers.

The articles published by nursing in relation to care with the frail and dependent elderly at home still leave several gaps, while...
contributing to the development of theoretical foundation and technical nursing care, caregivers need to involving more and their household.

Facing this problem, this study starts from the following question: “How do you present nursing scientific productions in Portuguese regarding care of dependent elderly at home?” To answer this question was set as goal:

- Analyzing the scientific production in nursing with regard to care for dependent elderly at home.

**METHOD**

This is a descriptive study, of an integrative review type, since this method allows to summarizing the studies already completed and to drawing conclusions about a topic of interest through the analysis of significant studies for Evidence-Based Practice (EBP), contributing to the deepening of knowledge and its further applicability in nursing in order to carry out the care with excellence and quality.11

To following with a methodological rigor there were adopted the six stages of the preparation process:

- 1st phase: drafting the guiding question and the choice of data collection instrument

Understanding the theme proposed in the study, with the time frame from 2004 to 2014, there was conducted for the purpose of guiding it to the following question: “How are the nursing scientific productions presented in Portuguese regarding the care of dependent elderly at their home?"

To answering this question there was chosen as instrument one validated form that allows to obtaining information on identity of the original article and authors, methodological characteristics, assessment of methodological rigor (level of evidence) and the measured interventions and the found results.12

This instrument was adapted to the reality of the study, by inserting the following topics: database, journal and year of publication, which were systematized and resulted in the preparation of a table, which was used in data collection, and filled one for each article of the final sample.

- 2nd phase: Sample definition

There established the inclusion and the exclusion criteria for the search and selection of the sample in the literature, which were: (1) articles published in Portuguese; (2) articles available in full; (3) articles published from 2004 to 2014. And, as exclusion criteria: (1) items not within the proposed theme; and (2) articles repeated between the bases.

As it can be seen in Figure 1, after applying the criteria remaining nine (9) selected articles, which were analyzed in full texts.
Figure 1. Flowchart of the number of articles found and selected after applying the criteria of inclusion and exclusion according to described and data base.

For the survey of the articles, was held the crossing with the use of Boolean AND of the following health sciences descriptors (DeCS): Care (synonym of home care), Nursing and Elderly dependent (synonym of elderly fragile).

3rd phase: Search for data in the literature

To this end, it was carried out the literature survey between May and July 2014, through the free electronic access by the Virtual Health Library (VHL), on the basis of Latin American Literature data and Caribbean Health Sciences (LILACS).

4th phase: classification of level of evidence

It is noteworthy that, before the reading of selected studies, it was observed that two (2) two were exploratory and descriptive type, two (2) were case studies and one (1) was descriptive, matching the level four. And yet, two (2) were cross-sectional studies and one (1) was retrospective documentary, described as being level 5, and one (1) was a quasi-experimental study, satisfying the level of evidence 3.13

Through the analysis of levels of evidence, one can observe the occurrence of level 4 evidence (55,5%), followed by level 5 (33,3%) and level 3 (11,1%).13

5th phase: Presentation of the review of researched sources

In identifying the sources for locating articles, the nine (9) are from the LILACS. It is noteworthy, that the evidence found was not defined as an inclusion criterion, but as a random finding.

Upon the foregoing, it is observed that the periodic who obtained the highest number of publications of articles about nursing and elderly care at home were the Acta Paulista Magazine (2) and Magazine Text & Context (2). Periodicals others had the same number of publications (1).

6th phase: synthesis of the final sample and integrative review presentation

That have been identified six hundred forty-seven (647) articles is observed, which were submitted to the inclusion criteria and predetermined exclusion, resulting in a final sample of nine (9) articles.

According to Figure 2 we note that the selected articles were summarized in a table based on the chosen instrument.
<table>
<thead>
<tr>
<th>Article title</th>
<th>Authors</th>
<th>Approach/data base</th>
<th>Level of evidence</th>
<th>Results</th>
<th>Periodical</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Profile of the familiar caregiver of elderly weakened in the great domestic conviviality Region of Porto, Portugal</td>
<td>Pimenta GMF, Costa MASMC, Gonçalves LHT, Alvarez AM.</td>
<td>Qualitative/Lilacs 4</td>
<td>4</td>
<td>The knowledge of the profile of carers of elderly dependants contributes greatly in providing essential local services grants: health and social, in the redesign of programs aimed at meeting the families including those who have elderly members as well as the reconstruction of cuidativas technologies.</td>
<td>Rev esc enferm USP [Internet]</td>
<td>2009</td>
</tr>
<tr>
<td>Accuracy of nursing intervention s for patients with type 2 diabetes mellitus in outpatient visit</td>
<td>Scain SF, Franzien E, Santos LB, Heldt E.</td>
<td>Quantitative/Lilacs 5</td>
<td>5</td>
<td>Predominated in the sample comorbidities: hypertension in 97 (71%), obesity in 54 (40%) and dyslipidemia in 36 (26%).</td>
<td>Rev gaúcha enferm [Internet]</td>
<td>2013</td>
</tr>
<tr>
<td>Nursing care to a patient with Diabetes Mellitus</td>
<td>Faeda A, Leon CGRMP.</td>
<td>Qualitative/Lilacs 4</td>
<td>4</td>
<td>It is observed in this patient reluctance to accept the diagnosis of Diabetes, treatment and guidance, in all clinical course, to establish changes in life habits, in spite of the signs and symptoms are established. However, after the implementation of the nursing process, the patient has shown less resistance guidelines.</td>
<td>Rev bras enferm [Internet]</td>
<td>2006</td>
</tr>
<tr>
<td>Care conducted by the family caregiver to the elderly, dependent on domicile, in the context of the family health strategy</td>
<td>Azevedo LAFRCS, Reiners AAO, Sudré MRS.</td>
<td>Qualitative/Lilacs 4</td>
<td>4</td>
<td>Developed the elderly care in condition of dependency is an activity that leads to changes in the lives of caregivers, which can generate stressors of physical, emotional and social order.</td>
<td>Texto contexto enferm [Internet]</td>
<td>2012</td>
</tr>
<tr>
<td>Workload in weakened elderly caregivers who live at home</td>
<td>Stackfleth R, Diniz MA, Fhon JRS, Vendruscolo TRP, Fabricio-Whiebe SCC, Marques S, Rodrigues RAP.</td>
<td>Quantitative/Lilacs 5</td>
<td>5</td>
<td>Most caregivers were female (75%) and married (58,3%). As for overhead, 31,7% rarely felt overloaded. The correlation between the fragility and the overhead shows that the higher the level of fragility, increased caregiver burden.</td>
<td>Acta paul enferm [Internet]</td>
<td>2012</td>
</tr>
<tr>
<td>Evaluation of results in a secondary service for patients with Diabetes</td>
<td>Alencar AMPG, Zanetti ML, Araújo MFM, Freitas RWJF.</td>
<td>Qualitative/Lilacs 5</td>
<td>5</td>
<td>Showed that 30,3% of users reached the target glycated hemoglobin, 48,1% for blood pressure and 42,3% for low-density lipoprotein.</td>
<td>Acta paul enferm [Internet]</td>
<td>2012</td>
</tr>
</tbody>
</table>
The articles surveyed were numbered according to the order of location, and the data were critically analyzed through a qualitative approach, this time after two thematic categories were created: the family and the care of dependent elderly, and the nurse and the elderly care dependent.

RESULTS

When analyzing the whole sample (647 articles), according to the criteria of inclusion and exclusion proposed, there was verified the existence of a small number of publications (9 articles) in relation to the topic and nursing care of the elderly at home. Worrying fact due to accentuation of population aging, it occurs due to the increase of diseases typical of this stage of life that cause dependence and limitations, therefore, these seniors will need more care.

The nurse is inserted in the aging process, since these professionals have the care of the subject in its essence, having the possibility to intervene by identifying the needs of those who care and who care, thus contributing to improving the quality of life the elderly and their caregivers.

With respect to the descriptors used by most authors, the "elderly" was present in four (4) studies, followed by "nursing" and "caregivers" each exposed in three (3) studies.

It was found that all (9) items presented their goals clearly, allowing easy understanding of the reader. It is understood the proposal aimed to answer the question of action study. In studies that reported the problem to be investigated, there were no disagreements between the type of object and the selected method. In analyzing the research designs in the study sample, we identified six (6) qualitative approach, which aims to describe, explore and interpret the phenomenon through the point of view of the people who experienced it; and the other three (3) articles used the quantitative approach, which aims to measure the variables related to the persons investigated, enabling statistical correlations and allowing for greater generalizability of scientific data.

All items properly responded to the proposed objectives and presented final comments.

DISCUSSION

Given the above, after analyzing the content of the articles, two thematic categories emerged. Three (3) items were part of the first category, the family and the care for dependent elderly. The second, the nurse and the care of dependent elderly, comprised the majority of articles (6).
The family and the care for dependent elderly

Although some health services offer substantial aid to dependent elderly patients with age-related pathologies, the family continues to play a major role in supporting the dependent elderly with limitations within the family, even with limited financial, human and physical resources. As for the family caregiver, that needs to be upheld, savvy and oriented to face the care and the new reality in their life.6,16

The old-age dependency causes a strong impact on family and society transforming the place where they live, a fact also noted the difficulty of the elderly in performing their ADLs.6,17

The fragility of the elderly is proportional to the overload of their caregiver, so the larger more expensive fragility becomes the handle, resulting in increasing its overload.18

The caregiver may feel alone, because despite the family consist of several members, not all are available to perform care, therefore, the responsibility of care is performed by only one member of the family, which contributes to caregiver burden family.9

The study showed an effective participation of women in the exercise of caring for the elderly, which is corroborated by other studies relating care to women’s role in society as a mother and caregiver since the dawn of society.4,6,9 This overload can have negative effects on family caregivers, highlighting financial problems, social relations, leisure, emotional and physical stress may cause depression, high levels of anxiety, stress and emotional high load, however, the process of care consists of several nuances in daily lives of the elderly and their caregivers revealing a mister feelings. Thus, care can also be perceived by the caregiver as something that dignifies them as human beings, besides the feeling of accomplishment in moral and religious area.9,19,20

Due to the complexity of the dynamics in the exercise of care arises the need for support from the health system as well as the professionals who work in these institutions, as the nurse, in order to facilitate and promote caring for the elderly with quality.

The nurse and the care for dependent elderly

All articles that refer to this category agree that health professionals, including nurses should provide quality home care to dependent elderly and their caregivers, it is extremely important the support and guidance of health institutions.

Note the need for the creation of new care strategies, with multidisciplinary character, aiming to reduce the limitations and dependence of the elderly, because they cause increased hospitalizations, which in turn reduces the quality of life of the elderly and their families and also increases the costs of public health nursing.21 Must act on health promotion, disease prevention, and contribute to the rehabilitation of elderly people thus favored, as far as possible, the autonomy and independence of the elderly.

The nursing care is a complex practice that encompasses not only the mastery of technique, but the complexity of dealing with each other, besides being an Evidence-Based Practice. The elderly have differentiated needs of other age groups because their own physiological condition hinders the recovery process, with that comes the need to care.22

Identify the evidence that FHS allowed access to care, which highlights its importance in the context of care for persons unable to travel to the health units, especially the elderly with limitations.23,4 Is necessary to equip the ESF teams, with regard to its performance in the family context where the dependent elderly with limitations. It is the team who develops discussions on the needs of the elderly; being thus, able to plan and intervene in health care.25,6

The issue of lack of professional training in gerontology and geriatrics shows this factor as a problem for the realization of domestic care to elderly.26 The formation of many nurses still has the focus centered on the disease, it directly influences the organization of the work process, interfering in assisting the elderly at home.27,8

The nurse plays a decisive role in the care of dependent elderly, should assist and monitor the same and family caregivers, increasing levels of health, preventing disease complications, collaborating with the processes of adaptation to health problems, seeking biopsychosocial wellbeing.24,26

The monitoring of chronic diseases of the elderly is an important tool in the promotion and restoration of health, as in the case of diabetes mellitus, which may be associated with other comorbidities. The professional’s performance can occur by encouraging physical activity, glycemic control and weight, as well as many other variables that are associated with lifestyle.29,30

The authors agree with each other and complement which is also a function of the
nurse educator to be participatory and dynamic way, and shall carry out health education and promote care to its users grounded in social reality. Health education for caregivers is the initial start of a transformation process aimed at quality of life of dependent elderly and their family caregivers. Thus, the support of health facilities through the basic guidelines to caregivers is essential. Quality care makes it possible to minimizing the dependencies of these difficulties and the elderly and their families, causing them to gain a better health condition, acquiring the minimum necessary autonomy for self-care and independence. Regarding the dependent elderly and their families, it is the nurse's commitment to support, guide, educate and enlighten situations experienced in this new reality.

CONCLUSION

This study allowed considering that adequate and quality care provided to elderly dependent, your caregiver and family is still a challenge for all health professionals, especially nurses.

As positives, the understanding of the experience of care among nursing staff, the dependent elderly and their families, provides the construction of knowledge as reflections on the care and quality of life resulting in the care, emphasizing the integrality of elderly dependent care and your caregiver.

The FHS is a vital link between the professionals, seniors and families, which promotes health through monitoring and the institution itself, in addition to developing activities related to permanent education in health unit, encouraging self-care of the elderly and their caregivers.

It is worth mentioning that the training of professionals to meet the elderly population is essential, this demand which features needs inherent in the aging process. Thus it is necessary to supply the knowledge base, with publications of scientific quality, whose responses could promote the effectiveness of care provided to the elderly dependent and their family, as provided for in the National Health Policy of elderly person.

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