HEALTH PROMOTION STRATEGIES AND PREVENTION OF ACCIDENTS IN THE HOME ENVIRONMENT: A REFLECTIVE ANALYSIS

ESTRATÉGIAS DE PROMOÇÃO À SAÚDE E A PREVENÇÃO DE ACIDENTES NO AMBIENTE DOMICILIAR: UMA ANÁLISE REFLEXIVA

ESTRATEGIAS PARA LA PROMOCIÓN A LA SALUD Y PREVENCIÓN DE ACCIDENTES EN EL ENTORNO FAMILIAR: UN ANÁLISIS REFLEXIVO

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ABSTRACT

Objective: to reflect on the influence of health promotion strategies in preventing accidents in the home environment. Methodology: this is a study of reflective analysis, conducted from the analysis of scientific papers, laws and official documents of the Brazilian Ministry of Health. Results: it presents a brief history of health promotion, health promotion strategies highlighting the implementation of healthy public policies and creation of environments conducive for health as a way to prevent household accidents. Conclusion: through this discussion, it is concluded that health promotion has shown an evolution in its concept and in its way of operation, thereby turning itself into a great ally in reducing accidents in the home environment, in addition to providing a relevant space for the nurse’s work. Descriptors: Health Promotion; Accidents Prevention; Child; Elderly; Nurse’s Role; External Causes.

RESUMO

Objetivo: refletir sobre a influência das estratégias de Promoção da Saúde na prevenção dos acidentes em ambiente domiciliar. Metodologia: estudo de análise reflexiva, realizado a partir da análise de artigos científicos, leis e documentos oficiais do Ministério da Saúde. Resultados: apresenta-se um breve histórico da promoção da saúde, as estratégias da promoção da saúde enfatizando a implementação de políticas públicas saudáveis e criação de ambientes favoráveis à saúde como forma de prevenção de acidentes domésticos. Conclusão: por meio dessa reflexão, conclui-se que a promoção da saúde vem apresentando uma evolução no seu conceito e na sua forma de atuação, tornando-se uma grande aliada na redução dos acidentes no ambiente domiciliar, além de propiciar um espaço importante para a atuação do enfermeiro. Descriptors: Promoção da saúde; Prevenção de Acidentes; Criança; Idoso; Papel do Profissional de Enfermagem; Causas Externas.

RESUMEN

Objetivo: Reflexionar sobre la influencia de las estrategias de promoción de la salud en la prevención de accidentes en el entorno familiar. Metodología: el estudio de análisis reflexivo, realizado a partir del análisis de los artículos científicos, leyes y documentos oficiales del Ministerio de Salud. Resultados: presenta una breve historia de las estrategias de promocion de la salud, las estrategias de promoción de la salud enfatizando la implementación de políticas públicas saludables y la creación de entornos favorables a la salud como una manera de prevención de accidentes domésticos. Conclusión: A través de esta reflexión, se concluye que la promoción de la salud presenta una evolución en su concepto y en su forma de operar, se tornando una gran aliada en la reducción de accidentes en el entorno familiar, así como ofrecer un espacio importante para a la actuación del enfermero. Descriptors: Promoción de la Salud; Prevención de Accidentes; Niño; Anciano; Papel del Profesional de la Enfermería; Las Causas Externas.

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INTRODUCTION

Health promotion can be understood as a process of qualification of people to act in the improvement of its quality of life and health, offering skills on prevention to damages and including greater participation in the control of this process. Individuals must meet their needs for achieving a complete physical, mental and social welfare, besides to favorably modify the environment in which they live. Promoting health actions is not an exclusive responsibility of the health sector, since it requires the participation of everyone.1,2

Health promotion actions are intended to become the life conditions increasingly favorable, namely: peace, housing, education, feeding, income, stable ecosystem, sustainable resources, social justice, equity, etc. The focus of health promotion is to promote equity in health, with the aim at reducing the differences in health status of the population, and ensure equal opportunities and resources to allow all people to fully achieve their health potential.1

The home environment should provide benefits to health and welfare in physical, psychological, social and esthetic aspects. Nonetheless, people believe that they know the home environment very well and end up neglecting the minimum security care, as well as the adoption of a healthy behavior, which allows the onset of accidents. This, in turn, is characterized as every random event that is outcome of a combination of factors that make the occurrence more or less predictable, determining a recognizable injury.3

Recent studies shows that many accidents and injuries occur at home, since it is a place in which children and elderly spend most of their time and for being a place conducive to the occurrence of accidents, thereby offering a set of risks, such as: windows, stairs, needle-stick objects, toxic products, among others. 4 Besides the environment, the lack of information from parents or guardians increases the incidence of these accidents. This is because most accidents happen due to lack of attention from adults and/or guardians, as well as contempt of everyday risks; thus, only few minutes of inattention are enough to make an accident happen.5 Therefore, it becomes necessary to have constant surveillance and supervision of these age groups.

Thus, it is necessary that people responsible for children and elderly are aware of the environmental risks, in order to avoid or prevent them, because at the same time in that the home environment can facilitate the occurrence of these diseases, it can also work as a means facilitator for educational and preventive actions, by minimizing or even eliminating the appearance of such a risk.6

Health promotion can be a great ally to minimize these risks, because, through the guidance of the population, many accidents and injuries that occur at home can be avoided. Accordingly, health professionals are essential, because they are like communication media between public policies and population, since they are possessors of knowledge and are usually within the health services that meet the majority of accidents and damages arising from the home environment. The commitment of this professional is to guide and encourage the population to adopt protection and prevention measures.

Given the importance of this issue, this paper seeks to reflect on the influence of health promotion strategies in preventing accidents in the home environment. Regarding health promotion strategies, proposed by the Ottawa Charter, it should be highlighted that we will address only the one relating to healthy public policies and creation of supportive environments. It is noteworthy to emphasize that this paper was written in the discipline “Care in Acute Situations” of the PHD Course of the Post-Graduation Nursing Program at the Federal University of Santa Catarina (PEN/UFSC).

♦ Health Promotion: Brief History

The traditional concept of health promotion was initially defined from the Leavell & Clark’s model, in the 40s, in the scheme of the natural history of the disease, as one of the elements of the primary care level in preventive medicine. This concept has been changed in the last 25 years, thus giving rise to new strands for promotion, especially in Canada, in United States and in Western European countries.2

Health promotion has reappeared as an international “new concept of health” in mid-1970s, and it is result of the discussion on social and economic determination of health and building of a conception that is not focused on illness. From this discussion, there was the Canadian movement developed based on the Lalonde Report - a new perspective on the health of Canadian citizens. It was the first official document to be called health promotion. The fundamentals of this report were in the concept of “health field” and
introduced the so-called “health determinants”.

Despite this evolution, this approach had the focus targeted to the changing of lifestyles, with an emphasis on individual action, by adopting a behavioral and prevention-centered perspective. There were numerous criticisms, especially by neglecting the political, economic and social context, by “blaming the victims” and certain social groups by their health problems, whose causes are beyond their control.

These events have established the foundations for relevant movements regarding the formation of a new paradigm formalized in the Alma-Ata Conference (1978), with the proposal “Health For All in the Year of 2000”. Besides this, it gave rise to the strategy of Primary Health Care, which achieved a special prominence in the First International Conference on Health Promotion (1986), with the enactment of the Ottawa Charter. The aforementioned charter has been enriched with a set of international declarations that are periodically formulated in conferences on the topic.

♦ Ottawa Charter and health promotion strategies

The Ottawa Conference was a response to growing expectations for a new public health, which is a movement that is taking place across the world. The document drafted in this conference contains five essential strategies proposed for health promotion, namely:

![Figure 1: Health Promotion Strategies.](image)

Below, we will succinctly describe each one of the health promotion strategies:

1) **Implementation of healthy public policies**: Ottawa Charter suggests legislative, tax and organizational actions aimed at reducing social inequalities and improving the quality of life of the population. The main goal of this strategy is to indicate to the leaders and politicians that healthy choices are easier to be performed. Furthermore, it still requires the identification and removal of obstacles to the adoption of healthy public policies in sectors that are not directly related to health scope.

2) **Creation of environments conducive for health**: Systematic monitoring of the impact that the changes in the environment exert on health - particularly in areas like technology, work, energy production and urbanization - is essential and must be followed by actions that ensure positive benefits for the population’s health. Protection of the environment and conservation of natural resources must be part of any health promotion strategy.

3) **Reorientation of health services**: One should put the focus on health and not on the disease, besides pointing to the completeness of health actions. To that end, it proposes changes in the training and attitudes of organizations of health services. The responsibility for health promotion in health services must be shared among individuals, community, groups, health professionals, institutions providing health services and governments.

4) **Strengthening community actions**: The core of this process is the increase in the power of communities - implementation of actions and resources existing in the community that can enhance self-help and social support required for the development of popular participation in matters of health -, in other words, community empowerment.

5) **Development of personal skills**: Supports the personal and social development through the dissemination of information, health education and enhancement of life skills, thereby increasing the options available so that people can exercise greater control over their own health conditions and over the
environment, as well as making choices that lead to a better health status.8

This paper will explore two strategies for health promotion, implementation of healthy public policies and creation of environments conducive for health. Accordingly, we chose to address only the international conferences that support and complement these strategies and contribute to the issue “health promotion”.

The II International Conference on health Promotion, which was conducted in Adelaide, Australia, had public policies targeted for health as its core theme. During this conference, the five action strategies proposed in the Ottawa Charter were reaffirmed, but the emphasis was given to healthy public policies that establish the environment for that the other four strategies are achieved. The main objective is to create an environment conducive for people to live healthy lives. Community action is the core point of the promotion of healthy policies. This strategy has identified four priority areas for promoting immediate actions in healthy public policies: support for women's health; feeding and nutrition; tobacco and alcohol; creation of supportive environments.8

Another relevant conference was the III International Conference on Health Promotion, held in Sundsvall, Sweden, in 1991. This advocates that a favorable environment is of paramount importance for health and recognizes that every person has a role in creating such environments. It proposes the action of several segments of society to engage in the development of physical, social, economic and political environments for health. Furthermore, it highlights that, in order to promote this environment conducive for health, one must encompass four important aspects: the social dimension, the political dimension, the economic dimension and the need to recognize and use the ability and knowledge of women in all sectors, including political and economic, decision and the skills and knowledge essential to deploy changes.8

♦ National Policy for Health Promotion

In the last few decades, it has become increasingly relevant to take care of life so that one could reduce its vulnerability to diseases and the chances of being a producer of disability and chronic suffering, thereby avoiding premature death of individuals and populations.

Moreover, the analysis of the health-illness process showed that health is the result of the modes of organization of production, work and society in a particular historical context, and biomedical apparatus cannot modify the constraints and broader determinants of this process, since it operates in a model of attention and care generally marked by the centrality of symptoms.9

In 1986, the 8th Brazilian National Health Conference (CNS) had “Democracy is Health” as its theme and formed a forum to fight for the decentralization of the health system and the implementation of social policies to defend and take care of life. It was a key moment of the Brazilian Sanitary Reform Movement and the affirmation of the indissociability between the warranty of health as an irrevocable social right and the warranty of all other human rights and of citizenship. The final report of the 8th CNS launched the foundations of the proposal of the SUS.9

In SUS, health promotion strategy is taken as an opportunity to highlight the aspects that determine the health-illness process in our country, such as, for example, violence, unemployment, underemployment, lack of sewage treatment, inadequate and/or absent housing, difficulty of access to education, hunger, unplanned urbanization, threatened or degraded water and air quality; and leverage broader forms of intervening in health matters.9

Therefore, it proposes that health interventions broaden their scope, by taking the health problems and needs and their determinants and constraints as objects so that the organization of attention and care concomitantly involves actions and services that operate on the effects of illness and those who gaze the space beyond the walls of the health units and systems, thereby addressing the living conditions and promoting the expansion of healthy choices by individuals and communities in the places in which they live and work.9

Accordingly, the National Policy for Health Promotion aims at promoting the quality of life and reducing vulnerability and health risks related to its determinants and constraints - ways of living, working conditions, housing, environment, education, leisure, culture, access to essential goods and services, and these issues are most specified in the emphasis on primary care; expansion of autonomy and co-responsibility of individuals and communities; enhancement and optimization of the use of public spaces for living and producing health with sights to develop of health promotion actions; favoring preservation of environment and promotion of safe and healthy spaces; prevention of
determining and/or conditioning factors of diseases and health damages; encouragement to adopt non-violent ways of living and development of a culture of peace in the country, among other goals. 9

The national policy for health promotion shows eight specific actions with sights to implement its proposed goals: 1) Dissemination and implementation of the National Policy for Health Promotion; 2) Healthy feeding; 3) Corporal practice/Physical activity; 4) Prevention and control of smoking, 5) Reduction of mortality due to the abusive use of alcohol and other drugs; 6) Reduction of morbidity and mortality from road traffic accidents; 7) Prevention of violence and stimulation in creating a culture of peace; 8) Promotion of sustainable development.

It should be realized, through these objectives and specific actions of the policy for health promotion, that these are always interconnected to the health promotion strategies, especially the healthy public policy and the supportive environments. That is to say, what is being proposed is to try to fulfill what the health promotion strategies have indicated, in order to allow us to reach a status of healthy life in its broader sense of expression.

Moreover, it becomes necessary to reflect from the above mentioned about the difference existing between health promotion and diseases prevention. The differences between them are related to the concepts of health and disease that guide their practices and political-ideological strands to which they are affiliated. 10

Thus, health promotion involves the population as a whole, in the context of daily life, instead of focusing on people at risk of being affected by a particular disease; it is directed towards action on the determinants or social, economic, cultural, political and environmental causality in health; it needs social participation, because it is an activity of the social and health-related field, not only a health service.

Health promotion has been undergoing an evolutionary process through which there was a social transformation by building healthy public policies, focusing on equanimity and changes in power relationships, in order to achieve improvement of health conditions and quality of life of people. 10

As for accidents prevention, it is linked to behavioral and biologicist perspective of the health-disease process; it identifies risks, acts on them, but genesis of these risks is not considered a matter of its jurisdiction; it focuses on the biological aspects and does not take into account their strategies to “have a way to avoid”; and its forms of action do not include intersectoral healthy public policies that deal with social, political, educational, environmental and cultural determinants of the health-disease process. 10

In fact, health promotion strategies and their policies and actions are aimed at the attempt to minimize accidents and prevent diseases and health damages. Accordingly, we will show the most common types of household accidents and their respective strategies for prevention.

♦ Household Accidents

Accidents and violence forms, denominated in its entirety as “external causes”, can be understood as events capable to provoke health damages, responsible for injuries of different severities, which can lead to death in many cases. The causes include the so-called accidental or unintended items - road traffic accidents, work, various traumas, falls, burns, drowning, poisoning, among others - and the provoked or intentional causes, such as self-caused aggressions and injuries. 11-12 Among the main features of injuries from external causes, one could cite the complexity of cases and coverage throughout Brazil. 13

External causes represent a public health problem, since they are responsible for high morbidity and mortality rates. 14-11 This means a large impact on the population’s health and hospital services provided after the event. Increasingly, health services need to be prepared for immediate care and possible hospitalization of these individuals, by allocating specialized professionals and equipment to better serve victims of accidents or violence forms. The consequences of these facts point to the need for a closer gaze towards morbidity and mortality rates, with the aim at supporting effective public policies for the prevention of the problem and quality care to victims. 13 In order to promote preventive actions, it is important to understand the distribution of damages, characteristics, causes and aspects related to the event. 4

Several accidents can be understood as unintentional events, which can be avoided in most cases. 11 This is the case of many damages that take place in the home environment with children and elderly, due to the carelessness of adults and indifference with regard to prevention measures, and these individuals are more vulnerable because of their physical conditions. Accordingly, it is

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noteworthy to highlight accidents involving children and adults, since accident rates in these two age groups are higher, thereby making these individuals more prone to accidents and injuries from external causes.

The home environment can be a place of welcoming and rest to its residents, however, it becomes a dangerous place as maintains risk conditions in relation to the occurrence of damages and injuries. By considering that, in this place, there are windows and stairs that can provoke falls; sharp tools, like knives; pots containing hot foods; toxic products left under the sink; furniture and slippery carpets, among others. Hence, these are factors or conditions that offer risks to health of children, adults and elderly, thereby contributing significantly to the increase in the amount of accidents at home.

The amount of household accidents has positioned over the years as one of the leading causes of attendances for accidents and violence in many health institutions, thereby contributing significantly to the growing morbidity and mortality rates in several Brazilian states. Accidents that happen in the home environment are closely linked to the behavior of family members and the social network that surrounds them, such as lifestyle, education, economic, social and cultural factors.

Children need more attention due to the phase maturation that they live in early years of life, in order to achieve a positive growth and development. Because they are in a phase of maturation of many organic systems, in addition to acquiring motor skills, children are more likely to be victims of accidents, thereby becoming more vulnerable to home-related risk factors. This is a phase of discovery, which is marked by many falls and some other types of accidents. This is due to environmental risk factors, such as: glassware, unprotected windows, raised beds, toys and small parts that can be introduced into the natural orifices of the foreign body, needle-stick objects, stove, medications and improperly stored cleaning products, among others. Being alert to conditions that predispose children's curiosity is a first step to prevent accidents that can cause irreversible and fatal injuries in some cases.

Another group that is vulnerable in the home environment is the one of elderly. The aging process of the individual commonly brings physical, social and psychological changes, as well as gradual alterations in the body as the age advances, such as decreased in muscle strength and reflexes, in flexibility movements, altered gait, decreased visual and hearing acuity, thereby making elderly patients more susceptible to accidents and injuries. As the functions of the elderly are being harmed, the individual becomes more exposed to risk factors of the home environment. These are changes that modify the routine and the daily lives of these individuals, by harming the development of simple and everyday tasks.

Several factors contribute to the injuries against the elderly in the family space, namely: abandoned or slippery rugs in the house, wet floors, furniture with corners, stairs, lack of bars in the bathroom, difficult access to the light switch and poor lighting. Hence, being aware of simple preventive measures can facilitate the lives of these individuals and prevent damages that can lead to serious injuries, which can let the elderly bedridden in certain cases.

Accidents prevention in the household environment

The prevention of accidents and violence forms is not only an issue relevant to Public Health or any health field, but it should be interesting to the entire population. At this point, health professionals are in a privileged position by having knowledge about the preventive measures and possibility of sharing them with those who are in a situation of risk to external causes. It is important to diagnose eventual problems and properly guide the population, in order to decrease the impacts and provide knowledge to individuals and their families in relation to injuries.

It is important to adopt measures such as constant supervision of children when they are close to lakes, streams and ponds, while playing near streets and tall trees or practicing exercise in pools. Burns are common in younger children, especially involving hot substances, such as the case in which they pull for themselves containers with hot liquids that are on tables or stoves. One should recommend constant supervision of adults and limit access of infants to kitchen. Accidents involving foreign bodies can be explained by the curiosity typical of children. This can be resolved by selecting the toys that do not contain small parts that come off easily.

The immaturity and the need for discovery are stimulating factors to the curiosity of children in high environments and difficult to access. Accordingly, it is essential to protect children by adopting security mechanisms, such as: protection in windows, gates at the ends of the stairs, electric socket covers,
angle brackets, safety locks in the bathrooms, storage of medications and cleaning materials in a safe place, among others.\textsuperscript{1,19}

In order to prevent accidents and falls in children, it is recommended the following actions: keeping the toys away from the floor and from the stairs, wiping immediately form the floor when wet, installing non-slip rubber on the bathroom floor, putting railing and safety gate on the stairs, placing protective grids on the windows, avoiding jokes in bed, among others.\textsuperscript{16}

Younger children must not sleep on the upper part of bunks, one should not place crib or other furniture near the window, children must not have access to household appliances, matchboxes and lighters, one must check the water temperature before bathing and, lastly, foods must be placed in the center of dining tables. Medicine bottles must be closed with the safety cap immediately after use and one must never tell a child that a medication is candy. Other care procedure to prevent accidents in the home environment is to consider the toxic substances and medications that must be kept in their original packages, i.e., never transferred to others with the aim of reusing. Similarly, one must be aware of products with potential to cause poisoning so that they are not in sight and in reach of children.\textsuperscript{16}

It should be highlighted that the most effective way to prevent accidents with children is the prevention of risk factors inherent to the home environment. It is essential having a continuous monitoring of children. Hence, guidance given to parents and guardians is a first step towards the health promotion and diseases prevention in household environments.

Regarding the elderly people, prevention of accidents follows the example of measures aimed at improving access and mobility of these individuals in the household environment, such as: setting the rugs with adhesive tapes or installing non-slip rubber lining, removing furniture that are hindering the passage or putting them in another place not to obstruct access to the bathroom; easing passage through the corridor, i.e., the pathway to answer the phone or press the light switch; putting railing on stairs and protective bars in the bathroom; always using the stairs when the lights are turned on; putting colored and non-slip adhesive tapes on the stairs; increasing the height of the furniture and the toilet bowl; avoiding to sit on chairs, couches and beds that make it difficult to transfer to other locations; keeping the most used objects and household utensils between the height of shoulders and of the waist; avoiding the use of slippery sandals and shoes, which can provoke a fall or slipping; keeping the wires attached or under furniture and installing grab bars in the shower stall and toilet bowl.\textsuperscript{17} Therefore, these are some ways to prevent accidents.

The aging process predisposes the body to a set of limitations, by letting the elderly prone to falls and other damages. It is essential that health professionals advise the family and/or guardian to adopt security measures for the elderly subjects, by facilitating their mobility and the development of everyday activities, thereby favoring the independence of elderly people and improving the self-esteem of this population group.\textsuperscript{20}

CONCLUSION

It was found, in a consultation with national literature, that studies related to strategies for health promotion and prevention of accidents in the home environment are very rare. Through this reflection, it was observed that health promotion has shown an evolution in its concept and in its way of operation, as well as it is a great ally for reducing accidents in the household context.

It is noteworthy to emphasize that the health professional and the caregiver (parents and/or guardians) are essential elements for promoting health in the home environment. In order to bring change and impact on reducing accidents in this context, it becomes necessary that there are strategies for advising on their prevention, as well as change of attitude of parents and/or guardians.

In light of the foregoing, we can conclude that one must put into practice the strategies for health promotion, in order to prevent household accidents, in addition to requiring that these actions are fulfilled for that there is a decrease in the amount of accidents.

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