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Experience of educational actions in health with elderly people in primary care

Experiencia de acciones educativas en salud con ancianos en atención primaria

Experiência de ações educativas em saúde com idosos na atenção primária

ABSTRACT

Objective: Report educational health actions experiences with elderly in Primary Health Care. **Method:** Qualitative, descriptive study of an experience report, performed in a Basic Health Unit, in the city of Campina Grande-PB. For the educational actions development, the implementation of the Health Handbook for the Elderly was used as a strategy, developing the themes in it. **Results:** Through educational actions provided by the extension project, it was possible to implement the Handbook in the unit as recommended by the Ministry of Health, optimizing the work process and a comprehensive assessment of the elderly. It is important to emphasize the continuous construction of knowledge through collective actions providing a better exchange of knowledge. **Conclusion:** It is expected that this experience will raise the awareness of the academic community regarding the importance of educational practices through university extension, providing collectively knowledge exchange, contributing to the personal and professional construction of the participants.

DESCRIPTORS: Health of the Elderly; Health Education; Primary Health Care; Nursing; Community-Institutional Relations.

RESUMEN

Objetivo: Informar experiencias de acciones educativas en salud con ancianos en Atención Primaria de Salud. **Método:** Estudio cualitativo, descriptivo, tipo de relato de experiencia, realizado en una Unidad Básica de Salud, en la ciudad de Campina Grande-PB. Para las acciones educativas, se desarrolló como estrategia la implementación del Manual de Salud para Personas Mayores, desarrollando temas presentados en la misma. **Resultados:** Mediante las acciones provistas por el proyecto de extensión, se logró implementar el Manual en la unidad según lo recomendado por el Ministerio de Salud, optimizando el proceso de trabajo y evaluación integral de los ancianos. Importante enfatizar la construcción continua de conocimiento mediante acciones colectivas que brinden mejor intercambio de conocimiento. **Conclusión:** Se espera que esta experiencia concientice la comunidad académica sobre la importancia de las prácticas educativas mediante la extensión universitaria, con intercambio colectivo de conocimientos, contribuyendo a la construcción personal y profesional de todos los participantes.

DESCRIPTORES: Salud del Anciano; Educación en Salud; Atención Primaria de Salud; Enfermería; Relaciones Comunidad-Institución.

RESUMO

Objetivo: Relatar experiências de ações educativas em saúde com idosos da Atenção Primária à Saúde. **Método:** Estudo qualitativo, descritivo, tipo relato de experiência, realizado em uma Unidade Básica de Saúde, no município de Campina Grande-PB. Para o desenvolvimento das ações educativas, utilizou-se como estratégia a implementação da Caderneta de Saúde do Idoso desenvolvendo as temáticas apresentadas nela. **Resultados:** Por meio de ações educativas proporcionadas pelo projeto de extensão, possibilitou-se implementar a Caderneta na unidade conforme preconização do Ministério da Saúde, otimizando o processo de trabalho e promovendo uma avaliação integral da pessoa idosa. Importante enfatizar a construção contínua do conhecimento por meio de ações coletivas proporcionando melhor troca de conhecimentos. **Conclusão:** Espera-se que esta vivência, sensibilize a comunidade acadêmica quanto à importância das práticas educativas por meio da extensão universitária, proporcionando a troca de conhecimentos de forma coletiva, contribuindo para a construção pessoal e profissional de todos que dele participaram.

DESCRIPTORES: Saúde do idoso; Educação em saúde; Atenção Primária à Saúde; Enfermagem; Relações Comunidade-Instituição.

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INTRODUCTION

The decrease in the fertility rate as well as the increase in the life expectancy of the Brazilian population brings a new social organization, a real challenge for public health. Projections indicate that for the year 2050, the elderly represent approximately 28% of the Brazilian population.⁽¹⁾ These changes, in turn, have also led to important changes in the population's epidemiological profile, with relevant changes in morbidity and mortality indicators. As a result, public policies were needed to ensure prevention and health promotion for this public, such as Brazilian legislation that ensures certain rights for the population aged 60 or over.⁽²⁾

Understanding that the National Primary Care Policy (Política Nacional de Atenção Básica - PNAB) describes Primary Care as the first level of health care, characterized by a set of health actions, at the individual and collective level aiming to develop comprehensive care that positively impacts the health situation collectivities.⁽³⁾ However, he-

alth care for the elderly involves some challenges, especially with regard to the current model of health care, which is unsatisfactory to meet the demands of the elderly population, since most of them are based on curative actions aimed at biomedical model.⁽⁴⁾ In this sense, it is extremely important to develop health strategies specific to the elderly, who provide holistic assistance to their needs, in addition to biological aspects.⁽⁴⁾ In line with this, health education emerges as an important tool for changing paradigms in the current model of care, pointing to an expanded concept in health, which involves environmental, psychological, biological, interpersonal, economic, social spheres etc.

It is necessary to face health education as a complex action, a social practice with power to develop people's reflection and critical awareness of their health problems.⁽⁵⁾ It is considered an effective non-pharmacological intervention for the elderly, as it provides a better understanding of human needs and stands out as health promotion in relation to awareness of health-related responsibilities and rights.⁽⁶⁾ What was

possible to accomplish through the Institutional Extension Scholarship Program of the Federal University of Campina Grande (PROBEX-UFCG).

According to Resolution No. 04/2009, his responsibility is to contribute to the professional training of UFCG undergraduates, based on involvement in concrete teaching-research situations made possible by extension activities, in addition to enabling the transforming relationship between the university and society, prioritizing the demands of social relevance, in order to improve the living conditions of the benefited communities.⁽⁷⁾

It is important to discuss aging and all the changes resulting from this process so that it can promote greater longevity with quality of life, mainly through educational actions, an important tool to promote self-care, encourage and expand autonomy, favoring the independence of the elderly.

Thus, the study aims to report the experience of educational health actions with elderly people in primary health care.

METHOD

This is a qualitative, descriptive study, type of experience report, carried out in a Basic Health Unit (UBS) located in the city of Campina Grande-PB. This type of study consists of an experience belonging to the social domain, being part of human experiences, and must contain observed impressions.⁽⁸⁾

The experience took place through the Extension Project, linked to the Dean of Research and Extension (PROPEX), entitled "Health education with the elderly in primary health care" developed during the period from May to December of the year 2018 by 10 students, 8 from the Nursing course and 2 from the Medicine course, under the supervision of the project coordinator. It counted with the participation of 15 elderly people from that community.

Initially, a meeting of the project participants was held with the UBS team to present the project and set goals. Then, home visits were made to invite users, of both sexes, aged 60 years or over and the date and time of the first meeting was set for the development of educational activities. The meetings took place fortnightly in the auditorium of UBS and in the Society of Friends Neighborhoods (Sociedade dos Amigos Bairros - SAB), located next to the Unit.

For the development of educational actions, the implementation of the current version of the Caderneta de Saúde do Idoso, recommended by the Ministry of Health and the development of the themes presented in it, as well as others according to the needs and desires of the target audience, was used as a strategy. Activity records were made in a field diary. It is noteworthy that all actions were planned and discussed by the participants and that at the end of each one the evaluation was carried out, contemplating the positive aspects and points to be improved.

Data analysis was subjective, described according to each theme addressed during the educational actions carried

out. It was not necessary to submit to the Ethics and Research Committee because it is an experience report. The activities carried out were intended solely for education and teaching, with no scientific research purpose. However, the ethical precepts of Resolution No. 466/12 were respected.⁽⁹⁾

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RESULT

During the actions, an initial approach was carried out with all the elderly people present with blood pressure measurements and the registration in the Health Handbook for the Elderly, then the planned theme was worked on, ac-

ording to the themes in that Handbook or according to the theme suggested by the elderly. The actions were carried out in order to facilitate the understanding of the target audience through workshops, lectures, conversation circles and games.

Throughout the project's eight months of activity, with the participation of about 15 elderly people, 10 actions were carried out by the project's supervising teacher, by students from the Nursing and Medicine courses who are part of the project, invited students from the Phytotherapy Tutorial Education Program (Programa de Educação Tutorial de Fitoterapia/PET- Phytotherapy) from the Center for Biological and Health Sciences (CCBS/UFCG) and professionals from the Family Health Support Center (Núcleo de Apoio à Saúde da Família - NASF).

As an initial action of the project, it was presented to the elderly. Starting with the reception through a dynamic of interaction between students and the elderly, saying the name and some personal characteristic. Through the dialogue between two students of the project, the Health Handbook for the Elderly was presented, its function, importance and objectives. Then, the distribution and initial filling were performed.

As suggested by the Health Handbook for the Elderly, the second educational action carried out had the theme "Physical activity" in order to encourage the practice of activities that provide more disposition, autonomy, interpersonal relationships, decreases the risk of heart disease, diabetes and depression. It was developed with the participation of a Physical Education teacher when simple exercises were performed that can be performed even at home with functional stimulation in order to motivate their practice.

With the development of some more common diseases in old age, such as diabetes, there is the possibility of loss of sensation, especially in the lower limbs, called peripheral neuropathy. correct way of cutting nails, hydrating the skin

and the right type of footwear. On the occasion, materials such as scissors, moisturizers, nail files and printed images were taken to facilitate the understanding of the content demonstrated during the workshop.

As suggested by the Health Handbook for the Elderly, the topic "Healthy eating" was discussed by the nutritionist regarding the best and most suitable foods to be consumed on a daily basis. During the explanation of the topic, the elderly raised a green sign if they agreed with the statement above or a red sign indicating that they did not agree, and thus doubts were resolved and guidelines were given.

It is known that the frailty of the elderly, combined with extrinsic factors, such as poor lighting, slippery floors, cause falls to have significant consequences on their physical and psychological health.⁽¹⁰⁾ With the help of the NASF physiotherapist, a workshop on "Fall prevention" was provided with the main guidelines for avoiding falls, especially in the domestic environment.

A conversation was held with the theme "Body changes with the aging process", an important discussion in relation to aging and all changes resulting from this process, whether physical, psychological or social.⁽¹¹⁾ The workshop was guided through printed photos of some of these changes. The elderly reported the changes felt and what strategies were used to face them.

It is known that in October, after the Elderly Statute came into force, which ensures the rights of people aged 60 or over and Law No. 11.433/06, the National Day of the Elderly celebrated on the day October 1st.⁽¹²⁾ Referring to that date, a celebration was provided for the project participants.

It is also emphasized that during this month the national Campaign for the prevention of breast cancer is held in order to alert about prevention and early diagnosis. To this end, an action was developed with the theme "Guidelines for breast self-examination", sensitizing el-

derly people about the importance of early detection and diagnosis. A mannequin with breasts was used, facilitating the demonstration of how self-examination and printed images should be performed with the main changes in the breasts.

It was also discussed, with the collaboration of PET-Fitoterapia students, the use of medicinal plants in the daily lives of the elderly. The elderly were asked to present the phytotherapies and medicinal plants that they usually use, discussing the effects, indications and method of preparation of the most used, solving doubts. A pamphlet was distributed with general guidelines on the use of herbal medicines. And for feedback on the theme, students used a memory game that in addition to entertaining the elderly facilitated learning.

During the actions of the project, it was seen the importance of talking about "Sexuality and sexually transmitted infections (STIs)" that are still present in people regardless of age. It was explained that, over the years, some conditions can interfere with sexual life, and that age will not provide protection against STIs. The importance of condom use was highlighted as one of the best forms of prevention. In addition, tests for syphilis, HIV/AIDS and hepatitis C were carried out, and condoms were delivered. It is noteworthy that the sooner they are identified, the sooner they can start treatment and prevent transmission.⁽¹³⁾

The elderly were always satisfied with the performance of the actions, with reports that the project was very good and added a lot to their lives, which was confirmed with the assiduity in the actions that aimed to promote an exchange of experience between the elderly and the students for the well-being and better quality of life for that community benefited by the extension project.

DISCUSSION

Reaching old age, which was once the privilege of a few, has become an event even in the poorest countries. Even thou-

gh it was a major achievement of the 20th century, this has become a major challenge for the current century. The aging of the population is not enough in itself. It is known that the lifestyle adopted by the elderly directly affects their aging process. Old age is known as heterogeneous because, some people age with good quality of life and health, with few diseases, while others experience inactivity, fatigue, comorbidities that affect their quality of life.⁽¹⁴⁾

Therefore, it is important to be able to add quality to the additional years of life.⁽¹⁵⁾ Therefore, the importance of working on the promotion and prevention of diseases, which will provide active and healthy elderly people. In this perspective, the Ministry of Health launched the current Health Handbook for the Elderly, as a strategic instrument for qualifying care for the elderly, which aims to organize the work process of health teams and optimize the comprehensive health assessment of the elderly, identifying its main vulnerabilities and offering self-care guidelines.⁽¹³⁾

It is an instrument proposed to assist in the good management of the health of the elderly, being used both by health teams and by the elderly, their families and caregivers.⁽¹³⁾ It presents personal data, a general evaluation of the elderly person, a vaccine calendar and oral health evaluation, space for scheduling appointments and exam results and lifestyle habits, important information for the elaboration of the therapeutic project.

It is known that health education must be based on building relationships and democratic environments that offer an exchange of knowledge with a commitment to humanization, which includes respect for the geographical, social, political and cultural characteristics of the person, family and community using preferably active learning methods.⁽⁶⁾

The playful and active educational activity is understood as important, as they stimulate the understanding of themes, in a pleasant way, generating reflection on the knowledge acquired and creating

relationships between knowledge produced in a recreational and experienced way, including individual and collective behavioral aspects.⁽⁶⁾ Thus, practices based on the production of comprehensive care constituted in accordance with the principles of universality and equity, in the composition of the Unified Health System (SUS).⁽¹⁶⁾

Thus, it is of fundamental importance to encourage the practice of educational

actions for the elderly, whose active participation contributes to the strengthening of bonds, interpersonal interaction, improvement in the performance of activities of daily living, emotional well-being, adherence to the proposed activities, functionality and consequently in their quality of life.

CONCLUSION

Health education is considered a

form of humanized and holistic care providing a continuous and collective construction of knowledge through group activities. It is hoped that this report will sensitize the academic community as to the importance of university extension as a facilitator and prioritizing demands of social relevance, to improve the living conditions of communities, being a bridge to enhance public policies. ■

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