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Trends and priorities of research on older adult health in the context of Brazilian nursing

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In Brazil, the older adult population and life expectancy has been increasing rapidly when compared to countries such as France and Sweden. If on the one hand this fact represents an achievement for Brazilian society, on the other, it brings with it new social demands⁽¹⁾. Such demands express the need to care for the specificities of this population, always aiming at maintaining autonomy, independence and quality of life.

In this light, the WHO⁽¹⁾ presented proposals for how to approach healthy and active aging, such as fostering health-promoting behaviors in all ages in order to prevent or delay the development of chronic diseases; reducing the consequences of chronic diseases by early detection and quality of care; creating physical and social environments that promote health and the participation of older adults (this incudes accessibility, transportation, inter-generational relationships, social attitudes and health care service organization) and a change of attitude to incentivize the participation of older adults in society.

In the attempt to respond to these social demands, the Brazilian Ministry of Health has presided over the elaboration of the National Agenda of Priorities in Health Research so that knowledge production and material and procedural goods generated in priority areas could aid in the development of social policies⁽²⁾.

Part of the 24 priority sub-agendas, Health of Older Adults includes themes such as: the magnitude, dynamics and understanding of older adult health issues, the understanding of mechanisms of age-related diseases and evaluating policies, programs, services and technologies⁽²⁾.

In consonance with international trends and with the national scenario, Nursing has also collectively discussed its priorities for developing research in the field⁽³⁾. A study presented at the 17th National Seminar for Nursing Research displayed that such priorities were based on 11 priorities which characterize this profession's field of knowledge. An indepth reflection of these priorities as pertains to the specificities of the nursing field focused on care, population groups, national health risks, professional competencies and issues prioritized by health care⁽⁴⁾.

Thus, this study⁽⁴⁾ defined five cross-sectional axes (Health, Environment and Biosecurity in Nursing; Evaluation of Nursing Technologies and Health Economics; Clinical Investigation in Nursing; Work Management and Health Education and Health Systems and Policies) and six vertical axes, further subdivided in three thematic axes of vertical action (Mental Health Nursing; Nursing Care of Communicable Diseases; Nursing care of Non-Communicable Diseases) and in three thematic axes per population groups (Nursing Care of Older Adults; Women's Health Nursing; Child and Adolescent Health Nursing)⁽⁴⁾.

Considering that nursing care of older adults is one of the priorities of the Science of nursing, we conducted a review which guided us in some of the reflections contained in this editorial.

The review was based on published articles contained in the Nursing database (BDEnf) over the last 10 years (2004 to 2013), using the words "older adult" and "nursing" present in the title, abstract and/or descriptors. Although the BDEnf is a somewhat restricted database, it gathers indexed Brazilian nursing journals, and our interest at the time was to understand the behavior of scientific production in the area relating to the health of older adults in broader terms.

The result of this exercise provided us with a total of 593 articles. We read the abstracts of each one to identify which articles expressed the topic of interest. After this initial reading we excluded 20 (3.3%), which were duplicates and 223 (37.3%), which included younger adults and/or was not directed related to older adults, thus leaving us with 350 (59.1%) articles. Among these analyzed articles, the most common themes were: nursing care of older adults 30 (8.5%); older adult caretakers 29 (8.2%); nursing diagnosis for this population 25 (7.1%); institutionalized older adults 25 (7.1%); studies related to the perception of nursing professionals of training and qualification of nurses for older adult care 23 (6.5%); hospitalized older adults 18 (5.1%); older adult functional capacity 13 (3.7%); the older

adult in the family context 13 (3.7%), quality of life in older adults 12 (3.4%) and educational activities/groups for the older adult population 10 (2,8%).

As limitations of our analysis, we mention the timeframe chosen for the database search and also the fact that there was only one database consulted. However, the intention of this editorial is that of calling attention to some gaps which exist in the field of nursing related to older adult health. Such gaps can mobilize the efforts of researchers, especially those who are part of graduate programs, from where most of the research in the field in Brazil originates.

Reflecting on the considerations presented above, we conclude that nursing researchers have developed their studies in adherence to the expressed priorities. Nonetheless, there is still a vast field of investigation left which considers the specificities of older adult health. For example, we observe that there is a lack of studies regarding the reorganization of nursing care in the older adult health network, proposing health care models; the development and/or establishment of nursing care technology that can contribute to maintaining autonomy, independence and quality of life in the older adult and their family, as well as to long-term nursing care; the professional qualification of nursing and caretakers and proposing nursing quality indicators.

The articles contained in this edition on older adult health approach relevant aspects of the health risks which most affect this population and contribute to the reflection on nursing care technologies that can be potentially incorporated into professional practice.

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