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## INTENTIONAL ACTION OF NURSING EDUCATION CONSULTATION

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ORIGINAL ARTICLES

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### ABSTRACT

This article is the result of a dissertation presented in June 2011 at the Anna Nery Nursing School - UFRJ. Purpose of the study: to understand the typical school of nursing consultation to older adults by nurses who work teaching undergraduate

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and postgraduate nursing students. Method: qualitative and phenomenological approach. Subjects: twelve nurses who work with the teaching of consultation. Scenario: two Hospital School institutions, working with the teaching of nursing consultation for the older adult undergraduate and postgraduate nursing students. Approved by the Ethics Committee, protocol #093/2010. As a result of the seizure of "reason-why", generated the following result: the failure to identify the teaching of nursing consultation to older adults at the undergraduate level, the demand for professional qualification of nurses to teach undergraduate and graduate students to assist the needs of current and future demands. Therefore, it was shown what nurses do today is directly linked to their training, as some have reported they were not adequately prepared to deal with the nursing consultation to senior adults.

**keywords:** Nursing Consultation, Education, Gerontology, Phenomenology

## INTRODUCTION

The crescent aging of the population is already considered a worldwide phenomenon in all its complexity, demonstrated by its multifaceted and multidisciplinary status. However, it is necessary to understand the bio-psycho-social aspects and their variations, as they interfere directly on the subject that age. Therefore, the aging event is characterized by the rise of the population who is 60 years old or more, in relation to the total population, with significant relative participation of younger age groups, rise of life expectancy and reduction in mortality<sup>(1)</sup>.

However, all this movement gave rise to the Bill #8,842, in January 4<sup>th</sup> 1994, regulated by the Decree #1,948, in July 3<sup>rd</sup> 1996, which enabled the Brazilian National Policy Towards the Seniors (PNI, in Portuguese) that, after 11 years, in September 2003, gave opportunity to the approval of the Seniors Statute, namely Bill #10,741/2003, having seven titles, their chapters and 118 articles. Since then, it has become possible the effectiveness of referred human rights to the senior person, especially because it tries to protect and develop a base to the discontent in senior actuation (in the family, in society and in the State)<sup>(1)</sup>.

Besides the PNI and the Senior Statute, another legal instrument was developed no give orientation of social and health actions – the Brazilian National Policy towards the Senior Person, Ordinance #2,528/GM, in October 19<sup>th</sup> 2006, which establishes the actions in the health field in relation to the

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integral attention to the aged population and in process of aging, according to the Organic Health Bill # 8,080/90 (also named "For the preservation of the autonomy of the people, in defense of their moral and physical integrity") and Bill #8,842/94, regulated by the Decree #1,948/96, safeguarding the rights of the senior person and aiming to create an environment of promotion of autonomy, integration and participation of the elderly in society<sup>(2)</sup>.

All these measures aim to recover, keep and promote the autonomy and independence of the senior citizens, directing health collective and individual actions to this end, once the regional inequality of aging population requires a higher attention in planning and evaluation of actions based on the Brazilian Organic Health Bill #8,080/90 and Bill #8,842/94, previously mentioned, benefiting every Brazilian citizen above 60 years old<sup>(2)</sup>.

After the creation of the Statute, in the year of 2006, the Brazilian Ministry of Health elaborated the Basic Attention Booklet, issue 19, series A. Standards and Technical Manual named "The Aging and the Health of the Elderly Person", as an objective to proportionate the senior citizen an active and healthy aging, intuitively intending some specific technical subsidies, to facilitate the daily practice of the professionals that work with Basic Attention. Prepared in an accessible language, with specific instruments, of easy access (the Internet), and promoting updated discussions, capable to assist appropriate intervention to the demands of the population<sup>(2)</sup>.

In this context and understanding the present issue, we believe it is better to use the Phenomenology as a method. Through the theoretical-methodological model, it is possible to demonstrate the experiences and the knowledge acquired through life, which means, it is an available knowledge, or in other words, the "typical action of a nurse that teaches the nursing consultation to the elderly patient to the undergraduate and graduate Nursing students" and that is necessary to listen to them to learn what sort of background is needed to a certain professional qualification. Therefore, we can also understand the reasons that pushed forward to plans and executions of singular activities for each subject of this process. Thus, each nurse has their own motivations to elicit their singular way to teach how to perform the nursing consultation, either to Nursing undergraduates or to graduate ones, aiming to motivate these future nurses to support the needs of their future senior clients. This happens

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because the singularity that is lived by each individual, which belongs to every individual and is not of the other<sup>(3)</sup>.

Hence, as the goals of this study, we aim to comprehend the meaning of intentional action of education of Nursing Consulting to the elderly patient by the nurses that work directly teaching Nursing graduates and undergraduates.

The relevance of this study is in the possibility to create critical-reflexive thoughts after a situation of education, facing the fact of the implemented actions since the under-graduation, as seen the necessity to improve life and survival conditions through health services given that can attend the immediate needs and, as a consequence, with the possibilities for future qualified professionals to take care of seniors in a similar condition to the social reality.

## **METHODOLOGY**

This is a qualitative research, of phenomenological approach, which importance is the appropriation of methods that emerge the highest number of phenomenon captured by this study. Its results are based on real life experiences of people who know the phenomenon in first hand.

The qualitative methodologies are those capable to incorporate the matter of significance and intentionality as inherent to the actions, to the relationships and to the social structures, as those are taken in their rise or their transformation as significant human constructions<sup>(4)</sup>. Then, as seen the specificity of the studied topic, we opted to use the Sociological Phenomenology of Alfred Schütz, as we analyze it is the most adequate to articulate the object of study.

Hence, such rulings will permit to demonstrate the living world and the structures of relationship between the conscience and its object<sup>(5)</sup>. And that, to reach the meaning of the attribution to the subject, it is needed to suspension of the judgements, reaching the "the pure me, transcendental". Thus, to know the significations of the phenomenon of the process of health-disease is essential to

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fulfill the individual and collective actions, propitiating a higher insertion into the feelings, ideas and behaviors to be studied.

Phenomenology means the clarifying discourse of what shows itself in the interpersonal relationships<sup>(6)</sup>. As a consequence, the present paper pretends to approach the phenomenon of aging and the phenomenon of comprehension of the nurses that work with the teaching of nursing consultation to the elderly, of undergraduates and graduates in nursing in the practical field and its contextual needs, without caring with their address, last names, and social and economical situation<sup>(7)</sup>.

### **The background of the study**

This study had, as natural background, the dependencies of two School Hospital Institutions that aim the education of nursing consultation to the senior patient, with undergraduates and graduates of nursing, one in the city of Niterói - a University Extension Programed called "Nursing in Assistance to the Elderly and Their Caretakers - NAETC", by Fluminense Federal University (UFF, in Portuguese), and another one in the city of Rio de Janeiro, in the School Hospital Saint Francis Assisi - HESFA, in Portuguese, by Rio de Janeiro Federal University (UFRJ, in Portuguese).

The nursing consultation at the NAECT started in 1998 with a primary attention and with the presence of a multidisciplinary team - general and gerontology nurses, nutritionists and occupational therapists. Having as front doors the basic health care units, the regional and metropolitan Public Hospital (from the cities of Niterói, São Gonçalo, Silva Jardim, Maricá, Itaboraí, Rio Bonito and Tanguá), it has become the reference in the treatment of the elderly in dementia in those municipalities.

On the other hand , the attention given by the HESFA occurred in the ambulatories in which some Basic Health Unit in Health Programs (UCB, in Portuguese) are performed, such as: gynecological nursing consultation; nursing consultation to women in climacteric state and menopause; the Program of Integral Assistance to the Senior Person - PAIPI, in Portuguese; the Integral Assistance Program to HIV/AIDS Holder - PAIPHA, in Portuguese - connected to SAE (Specialized Attention Service) and to CTA (Testing and Counseling Center), and CEPRAL (Learning, Research and Reference Center in Alcoholism and Addictions).

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The choice is justified because the institution that adopt teaching and consulting dynamics, permitting to show the intention of the action of nursing educators and also because they are referenced in elderly care. and then, after the approval by the Ethics and Research Committee of EEAN/HESFA/UFRJ, protocol #093/2010, we started this study.

## **PRESENTATION OF RESULTS**

Twelve nurses participated in this study, who work directly in the teaching of nursing consultation, to the senior patient, for undergraduates and graduates of Nursing in the chosen practicing fields chosen as study scenarios. As inclusion criteria, nurses from two selected institutions for the research, who work teaching nursing consultation for undergraduates and graduates, to the senior patient, for at least two years.

As criteria of exclusion, we opt out the nurses that did not want to participate in this study as subjects, and those that, were away from the practicing scenario for any reason, such as maternity leave, prize, health, among others, or even those who were present in the scenario but not performing the teaching of nursing consultation for undergraduates and graduates, to the senior patient. To understand their biography, we used a guide with non-structured questions as to characterize the subjects.

then, the nurses were interviewed individually, through electronic recording, in MP3 format. As a criteria of reliability, it was given opportunity to the interviewed subjects to listen to their own interview. The interviews were finished after acquiring certain specificities of the researched group from the speech of the subjects, which will be stored for five years and then deleted after this period.

As a way to respect the opinion and human dignity, Resolution #196/96, the subjects that participated in this study signed the Free and Clear Consent Agreement, and the Authorization Order, which were forwarded to the Ethics and Research Committees of the Institutions used as scenario.

## DISCUSSION

From the current action of the subjects, it was possible to understand the "reason why" of the intentional action, through the context lived by the subjects of the study and thus transporting the difficulties of non-identification of the learning of nursing consultation to the elderly in the undergraduate and graduate courses, searching for professional qualification of the nurse to teach undergraduates and graduates to assist the actual and future demands.

With the declarations given, it was clearly understood that the changes occurred in the curricula directives of Nursing Courses directly influenced the understanding and the practice of nurses, as analyzing the biographical aspects of the interviewed subjects, there are five nurses who had access to theoretical and practical learning of nursing consultation during their undergraduate years, fulfilling the demands of the license and that, even though they were in different or in the same university, as they are complying with the curriculum, they have performed this same proceeding only after they were bachelors.

*(...) Around the year 1974, it was not used to (...) mention the nursing consultation (...) I don't remember performing a nursing consultation, nor learning about it (...) I participated in an updating course (...) and it was like that, related to prenatal care (...) you will end up dealing with this population, wherever you are it doesn't matter, the estimates are there (...) the numbers are telling us (...) the pool of the elderly, the demographic revolution (...) (Dendron)*

This is the way Schutz calls as exchange and change of social world perspective, where the man in natural attitude lives with his own ordinary life. then, the same object of his knowledge can seem a little different for the other, as he identifies better aspects than the others, since what is accessible to one is not as to others<sup>(3)</sup>.

On the other hand, the other seven nurses that are into the new methodology of teaching-learning process in public and private universities, without the professional practice, and without any



Specialization in Elderly, can see the necessity of the qualification to practice and teach the consulting. therefore, it will depend on the spectrum and the optics that are inherent of each subject. It is important to remember that the biography makes the subject singular, but it is conditioned to the place and time he/she belongs. Because of that, it is possible to say that a person has been through a direct experience when the researcher shares the same experience of the subject that is being studied.

*(...) The aged population in Brazil has grown significantly; it is needed that the people appropriate this knowledge, the people should prepare new professionals to deal with this reality; in twenty years the majority of the population will be of seniors. (...) to prepare new professionals that will soon take care of the population. (..) I was never attached to the methodological references while teaching; I think we develop our own ways to teach (...)*  
(Margarida)

*My background came from searching this because of the practice (...) I take care of my deficiency while the professor of this area, for not dealing with senior patients (...) to evaluate this reality of the old folks, in today's society, which is a population that is growing in number, really needs effective actions (...) the importance to insert in this field (...) I recognize it is my fault, a field I am not so familiar with (...) about this age group, to get involved more with it (...) I think it is a great victory. (...) (Íris)*

Another reported preoccupation deals with the lack of existence of a theoretical reference that deals with the complexity of Nursing Consultation to the senior adult. They also see the necessity of a specific theory that is meaningful that aims to support confronting the challenges and the needed adaptations to respond the biopsychosocial routine experiences.

*(...) I usually discuss that in the scope of senior consulting, (...) we still don't have a referential which is really closer to what is necessary in this consultation. (...) Here I normally use the Theory of Basic Human Needs (...) we need a referential, for example, the NANDA (North American Nursing Diagnosis Association) referential, (...) we need to find a certain diagnosis which is ours, of course that the systemization of the assistance, we go through these steps (...) sometimes with the Leininger theory, which I studied in my doctorate (...) we from this field, we need to think (...). The theory would cover completely the nuances of the consultation, (...) but I don't have, like, a single approach, I am*



*discovering new things, even in other theories, the opportunity to participate in boards of evaluation, other theories, interesting ones, and we develop these approximations. (...)*  
(Dendron)

The interviewed signed that, there is a necessity in the change of the curricular matrix, as the students arrive for internships, either from undergraduate or graduate backgrounds, with a cartesian view and cannot see the patient as a whole. Thus, we are faced with the arguments of Capalbo (1998), where "the specificity develops an important role when understanding the other and the social interaction".

This typicality is translated on the reports of the subjects responsible to include Gerontology since the undergraduate studies as an elective discipline, as the students would spend more time with this type of clients. As a consequence, they would deal with the crescent demand of the population, as well they would follow the update of didactics and the actual health public policies.

*(...) The strategy of family health has broken some paradigmas related to the question of basic attention, even more we have a very centralized focus in the hospital field, in hospitalizations (...). Let's talk about women's health; it is preferred you keep a student ten days in the delivery room than in a nursing consultation (...)* (Orquídea)

With the understanding of the speeches of the educators, in their political attitude or in their teaching, it is important to go back to the strategy of the education in political and ideological practice aiming the structural change<sup>(3)</sup>. Therefore, the motivation of the nurses would come from the presented demand while practicing new knowledges or abilities, perceiving the existence of a tension field between the technical and scientific knowledge and the representations or meanings that the subjects express in their lives<sup>(8)</sup>.

## CONCLUSION

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As a result, the actual actions reflect the experiences and the knowledge acquired since the undergraduate studies, with the peculiarities of each curriculum and the need of recognition of the assistential action of nursing consultation to the senior person, so it is possible to reach a professional identity and the social recognition, through the curricular changes of the Undergraduate Courses of Nursing to attend and perform the roles of educators with efficiency and resolvability.

Hence, the actual performance of the nurses is directly connected with their background, as some report they haven't been properly prepared to deal with the Nursing Consultation of the elderly. Then, it became necessary the qualification to enable the proposition and coordination of innovative practices, helping also the development of new roles that came from the clinical competence and the ability in human relations, permitting to extend this knowledge and proportioning the desired competence of a vast array of services.

As a conclusion, to recognize and to characterize the necessities of the learning-teaching process will permit the competence and confidence in the practice through educational actions directed to a continuous learning process, bringing new competent and specific opportunities to the teaching of Nursing Consultation to the elderly as we move forward.

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