Meaning of palliative care for the elderly in primary care: a grounded theory

Gleyce Any Freire de Lima¹; Rejane Maria Paiva de Menezes¹; Heloisa Talita Adriano da Silva¹; Rafaela Guilherme Gonçalves²; Maria Edjailma Silva Sousa¹; Graciela Maria Carneiro Maciel¹

¹Nursing department, Natal Nursing School, Federal University of Rio Grande do Norte

ABSTRACT

Aim: To understand the significance of palliative care for the elderly for health professionals working in primary health care. Method: An exploratory study with a qualitative approach, which will use the encoding and constant comparison process of Grounded Theory (GT), and will be interpreted in terms of the theoretical framework of social phenomenology of Alfred Schutz. The research scenarios will be three Family Health Units in the Felipe Camarão neighborhood, West District, in the city of Natal (RN), Brazil. For the production of the data, with the consent of the directors of each unit and with the acceptance of health professionals, participants will be interviewed through the use of semi-structured questionnaires incorporating demographic data and open questions about palliative care for the elderly. Expected results: to establish a health care strategy for primary care professionals that improves the quality of life of the elderly and other patients who depend on palliative care.

Descriptors: Geriatric Nursing; Primary Health Care; Palliative Care; Aged.
INTRODUCTION

Regarding the health of the elderly in Brazil, in less than 40 years, the country has gone through transformations in terms of the socio-demographic profile that characterized diseases in older age groups. Neoplasms, diabetes, osteoporosis, neurodegenerative diseases, are presented in terms of the mortality and morbidity impact on the older population\(^{(1)}\). A study of the institutionalized elderly found 192 indicators of nursing practice, and identified a significant prevalence across psychobiological, psychosocial and spiritual needs that corroborate the philosophic principles of palliative care\(^{(2)}\). This study brings as a relevant issue to the nursing situation, information to enable assistance guided by philosophical principles, and has developed a new theory that will allow quality care in the context of palliative care for the elderly.

GUIDING QUESTION

What is the understanding of the meaning of palliative care for the elderly in primary care on the part of health professionals? How do they describe the situations experienced with their teams regarding critical care for the elderly? Which are the factors that interfere with this practice?

MAIN GOAL

To understand the meaning of palliative care for the elderly on the part of health professionals working in primary care.

SPECIFIC GOALS

To ascertain the opinions of health professionals about palliative care for the elderly;
To describe situations experienced by health team professionals in critical care for the elderly;
To identify factors that interfere with the practice of health staff in critical care for the elderly.

THEORETICAL REFERENCE

The present study uses the phenomenology of Alfred Schutz as a proposed interpretation of the meaning of palliative care for the elderly in primary health care through a comprehensive social science approach\(^{(3)}\). A comprehensive social phenomenology is based on cognitive reality, and identifies, through human processes and experiences, the philosophy of individuals through the perception of their lives, in which their experiences can be explained in an experimental form\(^{(3)}\).

METHOD

This is an exploratory study which adopts a qualitative approach, and uses, as a methodological reference, some elements of Grounded Theory (GT). The data will be interpreted using the social phenomenological theoretical framework of Alfred Schutz.

Semi-structured interviews, with questions relating to sociodemographic characteristics, research objectives, and based on the subjectivity of the theoretical
framework, will be used as a data collection technique. The information will be recorded during interviews using an MP4 electronic device with the written approval of the participants. For the production of the data, the researcher will incorporate three stages: (I) transcription of the data collected, (II) codification and (III) comparative analysis.

After undertaking such a comparative analysis, the data will be compared constantly to identify the phenomenon and the emergence of the categories and subcategories. After determining the categories, we intend to understand the meanings of palliative care for the elderly in primary care on the part of health professionals through the social phenomenology of Alfred Schutz.

The scenarios for the research will be the three health family units in the Felipe Camarão neighborhood, located on Natal West Zone (RN), Brazil, namely: Felipe Camarão Mixed Unit I, Felipe Camarão Basic Unit II and Family Health Basic Unit III.

The data collection period will be from July to September 2015. The participants will be the professional teams of the Family Health Strategy program (FHS), in the form of doctors, nurses and dentists, and the staff of the Center for Support to Family Health (NASF) in the form of a psychologist, physiotherapist, social worker, pharmacist and dietitian.

The following will be the inclusion criteria: being a health professional in receipt of a higher education. The quantity will be determined by the total number of professionals who are part of the staff of the three units and the NASF, and will be equivalent to 29 participants. Professionals with less than a year as a health professional at FHS or NASF, on leave or on vacation will be excluded from the research.

This study is a part of a Master’s dissertation project entitled “Assistance in palliative care for the elderly in primary health care”, approved by the Ethics Committee of the Federal University of Rio Grande do Norte (UFRN), under opinion number 1,095,898 on June 8th, 2015. The ethical and legal aspects recommended by Resolution 466/12 on research involving human beings were respected.

REFERENCES


All authors participated in the phases of this publication in one or more of the following steps, in According to the recommendations of the International Committee of Medical Journal Editors (ICMJE, 2013): (a) substantial involvement in the planning or preparation of the manuscript or in the collection, analysis or interpretation of data; (b) preparation of the manuscript or conducting critical revision of intellectual content; (c) approval of the versión submitted of this manuscript. All authors declare for the appropriate purposes that the responsibilities related to all aspects of the manuscript submitted to OBJN are yours. They ensure that issues related to the accuracy or integrity of any part of the article were properly investigated and resolved. Therefore, they exempt the OBJN of any participation whatsoever in any imbroglios concerning the content under consideration. All authors declare that they have no conflict of interest of financial or personal nature concerning this manuscript which may influence the writing and/or interpretation of the findings. This statement has been digitally signed by all authors as recommended by the ICMJE, whose model is available in http://www.objnursing.uff.br/normas/DUDE_eng_13-06-2013.pdf

Received: 08/25/2015
Revised: 11/13/2015
Approved: 11/13/2015