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RESEARCH

Validation of informative booklet about the elderly demented by nurses and nursing students: an observational-transversal study

Validação de cartilha informativa sobre idoso demenciado pelos enfermeiros e acadêmicos de enfermagem: estudo observacional-transversal

Validación de folleto informativo acerca de ancianos demenciados por enfermeros y estudiantes de enfermería: estudio observacional transversal

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ABSTRACT

Objective: To validate the informative booklet as Educational Technology (ET) on care for the elderly with dementia by nurses and nursing students. **Method:** Transversal observational study quantitative, in which the setting was a higher education institution in the state of Rio de Janeiro, whose subjects were teachers and nursing students with data collection period of 04/04/12 to 30/06/12. **Results:** The validation of the booklet was satisfactory in the analysis of the evaluators, as most of the responses received adequate concepts did not show significant variations. Regarding the valuation parameter in their assessment items in large part the booklet has reached agreement on the concepts the goal. **Conclusion:** The validated primer can contribute to the care of people with dementias, preventing complications, development of skills of its users and promotes nursing autonomy and motivation to create new educational technologies. **Descriptors:** Elderly, Dementia, Nursing, Educational Technology.

RESUMO

Objetivo: Validar a cartilha informativa como Tecnologia Educacional (TE) sobre os cuidados ao idoso com demências pelos enfermeiros e acadêmicos de enfermagem. **Método:** Pesquisa quantitativa, observacional do tipo transversal, na qual o cenário foi uma instituição de ensino superior do estado do Rio de Janeiro, cujos sujeitos foram docentes e acadêmicos de enfermagem com período de coleta de dados de 04/04/12 a 30/06/12. **Resultados:** A validação da cartilha foi satisfatória na análise dos avaliadores, pois a maioria das respostas recebeu conceitos adequados não apresentando variações importantes. Quanto ao parâmetro de valoração em seus itens de avaliação em grande parte a cartilha possui concordância nos conceitos atingindo a meta proposta. **Conclusão:** A cartilha validada pode contribuir para o cuidado a pessoas com demências, prevenindo complicações, desenvolvimento de habilidades de seus usuários e favorece a autonomia e a motivação da enfermagem para inventar novas tecnologias educacionais. **Descritores:** Idoso, Demência, Enfermagem, Tecnologia Educacional..

RESUMEN

Objetivo: Validar el folleto informativo como Educación Tecnológica (ET) sobre el cuidado de los ancianos con demencia por enfermeras y estudiantes de enfermería. **Método:** Estudio cuantitativo transversal-observacional, con escenario en una institución de educación superior en el estado de Río de Janeiro, cuyos temas fueron los profesores y estudiantes de enfermería en el período de 04/04/12 hasta 30/06/12. **Resultados:** La validación del folleto ha sido satisfactoria en el análisis de los evaluadores, ya que las respuestas recibieron conceptos adecuados y no mostró variaciones. En cuanto al parámetro de valoración en la evaluación de sus elementos se ha llegado a un acuerdo sobre los conceptos de la meta. **Conclusión:** El folleto puede contribuir para atención de personas con demencias, la prevención de complicaciones, el desarrollo de habilidades de sus usuarios y promueve autonomía de la enfermería y motivación para crear nuevas tecnologías educativas. **Descriptor:** Anciano, Demência, Enfermería, Tecnología de la Educación.

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INTRODUCTION

The Brazil recorded in 2009, 9,7 million elderly people, accounting for 5,1% of Brazilians over 70 years. This number is higher if also considered people 60 years or older, who were more than 21,7 million in 2009, equivalent to more than 11% of the population.¹

This involves a demand for health services and, in the case of nursing a qualified care being provided to these clients. In this respect, for epidemiologists situation mirrors a real challenge, because there is an increasing number of people with dementia.

Dementia remain to be studied and known by the company, after all, even though there are studies in various areas of those diseases, the vast majority of them still not presented in an entirely complete on the subject.²

In a large number of articles found in this research, the difficulty has been that, for the most part, they were not on the network, free visibility to stakeholders on these issues. Faced with this realization, we can deduce that there is a limitation of harmful information, given that, in our view, would be necessary to provide the network for a greater amount of free publications, free, socializing more comprehensive and exhaustive explanations these troubling diseases, high incidence in contemporary society aging.²

Given this context, the family is the source of support which their members resort to troubleshooting issues where we find relevant as the fact of being elderly caregiver, scarce family network, overhead in care, depression, lack of availability to care, lack authority of the caregiver, the impact of the disease, difficulties in the development of care and emotional support. Consider the family and/or caregiver as active in the process of care through continuous planning is a challenge because the inexorable relationships family life are present and must be constantly considered by the nurse.

However, in order to discern and disclose the issues on the elderly with severe dementia and family caregivers to see that the information can be a source of constant debates nursing students, nurses and multidisciplinary team in a unique way.³

For the support to family/caregivers to be effective, there is the importance of attending to the equilibrium state of the elderly with dementia where the predominant clinical staging of the disease. This requires different skills and there is the possibility of understanding the high incidence of complications related to daily activities with the importance of knowledge about the kind of commitment aiming planning nursing care consistent with this clientele.³

There is a need for an educational process that takes into account this specific content, which promotes the use of the educational component and progressive technologies by educational professionals to work in a participatory, democratic and citizen with the different groups of the population.⁴

In this perspective the exchange of knowledge we aim to validate an informative booklet about the elderly with dementia as educational technology that deals with the evolutionary stages for the detection of problems and planning for the maintenance of

equilibrium of assisted clientele. Moreover, the problems encountered in conflicts can be mitigated through consistent guidelines, the vulnerability of the person with dementia disorders should be understood by family and/or carers as something real and need of effective participation in the continuity of care. Moreover, it is also important to ongoing training of nurses for the singularities of nursing care as well as ongoing support network to families and/or caregivers.

Thus, we noted the question that guides the study: the informative booklet on care for the elderly with dementia can be used as educational technology? Therefore, the aim of this article is to validate the informative booklet as Educational Technology (ET) on care for the elderly with dementia by nurses and nursing students.

How important it is emphasized that the development of this primer promotes education for quality of life, promoting the active participation of family members and/ or caregivers, providing and encouraging self-care, helping the elderly may have a better survival, for your well-being and state of balance. So its validation developed in this work have characteristics relevant to care, teaching and extension.

METHOD

It is a quantitative observational research of transversal type, in which the scenario was an institution of higher learning in the city of Niterói in the state of Rio de Janeiro. This proposal intends to validate the informative booklet on care for the elderly with dementias such as educational technology (ET), and the strategy to be used in the healthcare practice of nurses and family caregivers.

About the observational research, the researcher simply observes the patient, the characteristics of the disease or disorder, and its evolution, without intervening or modifying any aspect of the study. In line with the model of the transversal is the presentation of a population through sampling, examining the members of the sample or sample, the presence or absence of exposure and the presence or absence of the effect (disease or other factor analysis). It has as main advantages the fact that they are inexpensive and virtually no follow-up losses.⁵

Therefore, the inclusion criteria of the subjects were nurses and nursing students caring for the elderly with dementia and therefore know the activities in the Project Enabling Actions next to the caregivers of patients with dementia: PRO-TAKE CARE. Furthermore, volunteered to participate in the survey according to Resolution 196 of 1996. Exclusion criteria were those subjects who did not have access to the contents of the project or not volunteered to participate.

The structured questionnaire with closed questions is the technique chosen for data collection.⁶ was applied to an instrument that has advantages such as the ability to reach a large number of people, lower personnel expenses, it does not require training people; saving time; anonymity of responses, lower risk of distortion by no investigator bias in responses ; more time to respond and most favorable time.

The period of data collection took place from 04/04/12 to 30/06/12, with 23 subjects in total (nurses and nursing students).

The structured questionnaire designed for the study subjects are divided in Part I of identification for age and occupational category. Part II is organized on the objectives of the booklet and its items in Block 1: purposes, goals or purposes you want to achieve with the use of educational technology. However, the structure and presentation item is contained in Block 2. This presents the following assessment: the overall organization, structure, presentation strategy, consistency and formatting. Contained in the relevant item in Block 3 we assess the degree of significance of the learning object presented (the primer) and general comments and suggestions.

Note that their blocks have valuation assessment in Part II described as follows in each of its items: 1-Fully adequate (TA) 2-Adequate (A), 3-Partially adequate (PA) and 4 - inappropriate (I).

The booklet has the following contents:

- Basics of dementia: this module presents the types of dementia, the 10 most common signs of dementia, the pathologies involved with the disease, Alzheimer's disease, stages of dementia.
- Basics of medication: shows the types of drugs used, its purposes, its administration, the most common adverse reactions and basic care.
- Daily care to meet the challenges of dementia, which anticipates information about elderly care at home, in clothes, bathing, hygiene, promotion of self-care, and found the alternatives suggested for better living this old, not forgetting never the security provided by the environment.
- Basics of cognitive stimulation: the need to keep the mind active and the elderly slow the advance of dementia, this class is provides suggestions on how to encourage the elderly at home. Common tools of our day to day are presented and explained how they should be used in the situation of having a process in elderly dementia at home.

The intention is to provide ongoing information to families and caregivers of patients with dementias. The assessment is made in order to enable new ways of conveying information and its effectiveness in daily caregiver/family with a view to better matching of information at the expense of reality experienced by these people.

It is worth mentioning that this project was approved by the Ethics and Research of the Antonio Pedro University Hospital, Fluminense Federal University in accordance with Resolution 196 of 1996 of the National Health Council through its item IV of Consent, with the protocol n.º 0363.0.258.000-11 record with 347, November 2011.

After completion of data collection, they were treated statistically (simple statistical) data in percentage, so do not miss the importance of the results in numbers, through quantitative analysis. Therefore, in this study, responses were grouped and categorized to form a database using simple percentage frequency.

The statistical analysis was performed and the results by category, according to the evaluation aimed adequacy of information content to the detriment of clients assisted in the search landscape.

RESULTS

Of the 24 questionnaires distributed, 23 were returned and evaluated. All research participants have a training area nursing. Of the total, 19 (86,6%) were female and 4 (17,4%) were male.

The subjects comprise: 9 (40%) Academic Nursing, 4 (17%) Nurse and 10 (43%) Nursing Teachers. In nursing, in general, there is a predominance of female professionals. Therefore the discrepancy in the values related to that item. The age range was around 21-51 years old.

In block 1 on the objectives refers to the purposes, goals or purposes you want to achieve with the use of Educational Technology (informative booklet). The maximum score for validation of the same equals 115.

The answers were as follows: 79 for TA (Totally Fit), 31 for a (suitable) for 5 PA (Partially Adequate). Therefore, as can be inferred, from 115 (100%) response options 110 (95,65%) were for TA and A.

We can say that in block 1 were validated their items because they were all above 80% by adding the responses of TA (totally appropriate) of a (suitable) for primer evaluated.

In block 2 on the structure and presentation refers to the way of presenting the guidelines of the booklet. This includes their overall organization, structure, presentation strategy, consistency and formatting.

The maximum score is 230 for validation. As responses were obtained: 134 points for TA (Totally Fit), 73 points for A (Adequate), 19 points for PA (Partially Adequate), 2 points for I (inadequate) and 2 persons not answered (NR). Therefore, as evidenced, from 230 (100%) maximum score the responses, 134 (58,26%) went to RT, 73 (31,73%) for A, 19 (8,26%) for PA 2 (0,86%) for I and 2 (0,86%) for RN.

In block 3 on the relevance to the characteristics that assesses the degree of significance of the learning object presented. The maximum score for validation of this block is equal to 115.

The answers were as follows: 78 for TA (Totally Fit), 31 for a (suitable) for 5 PA (Partially Adequate) and 1 for I (inadequate). Therefore, as can be inferred, from 115 (100%) options were 106 responses to TA and A.

Items on this block were validated because they all had approval ratings above 80% by adding the responses of TA (entirely appropriate with a (suitable)).

DISCUSSION

Nurses and nursing students who assist seniors with high levels of information needs reported the presence of physical problems and psycho-behavioral characterize the importance of assessing caregivers' perception to the development of designing care interventions.⁷ The development of awareness about the health problems of caregivers of dementia relatives/careers also helped us have a look reflective of what is offered in the booklet content.

Thus it is essential to identify the nurse and nursing student as a subject which also requires watchful eye in planning and nursing actions in view of what it takes to be well informed caregiver can provide for a care worthy of the elderly with dementia. Nursing, with their knowledge and skills, can contribute to the construction of new models of care in the health care of the elderly with dementia not only to maintain quality of the patient but also the caregiver/family this clientele.⁸

On the results of validation of the booklet as an educational technology instrument, as its objective observed that the incorporation of new information provides learning, from the multiple potentialities, abilities and interests of students. This fact can individualize learning and contribute to the construction of a collective learning.⁹

About the organization in educational practice in health technology should be used in order to encourage the participation of individuals in the educational process, contributing to the construction of citizenship and increased autonomy of those involved. So, should explore resources that meet the cultural meanings recognized and valued in the context of users and the community.¹⁰

We note that the results and the look and style of writing can enhance the acquisition of knowledge through visual and spatial skills, and may be incorporated in the presence of thematic exchange converged on similar dementias.⁹

In general, comments and suggestions judge experts report that the text of the booklet is interesting and enlightening. It provides an understanding of dementia. In addition, the text provides a broader view than simply read. The meetings stipulated, with the help of the booklet, that it is a practical way to understand and take questions about the pathology of dementia and that any form of interaction with the public, is valid.

Moreover, given the findings through communication and information technology, nursing teachers involved in the process of mutual exchange with caregivers/family may favor the use of this tool for teaching, with a view to inclusion of experiences and adapt to technology means needs constant updating and validation.¹¹

The assessment in this regard is required because it aims to increase awareness among educators that the choice of this technology is closely related to the pedagogical primer, its development potential users of this technology education and their conceptions. Moreover, this form of production of materials characterized as a viable alternative to an audience like this, due to its decentralization and cost of necessary technological resources.

Beyond a transformative education item structure and presentation to corroborate participants' needs, and allows experimentation with new educational approaches Nurse in teaching, as well as the creation of effective technological tools that may facilitate nursing care.¹²

It realizes that this item relevance, technologies in this study refer to strategic educational use and encourage healthy behaviors through learning skills for health care in addressing the health-disease process.¹² If the confrontation is directly linked to the elderly with dementia and their relevance was perceived by expert judges.

Still, as general comments and suggestions there were highlighted the importance of orienting postures and psychological actions, in the face of situations of day-to-day with suggestions for action. Moreover, were considered by nurses and nursing students greater disclosure because many people need but do not have access to this information and are totally unaware how to handle these problems.

For families, both dependence as the aging events are understood as inherent to life and thus is expected to pass the elderly to live with their families, according to the onset of difficulties to perform the day-to-day for the elderly.¹³ Thus, the approach to situations of day-to-day are considered overweight for the specifics of each caregiver.

Regarding the appearance of the booklet, it was also featured binding for better conservation with illustrations and cover with colored highlight. It was also considered an indication of books and handouts to raise awareness about dementia so that each family /caregivers may be interested in wanting to get deeper into your specific issue.

A limitation of this study is to highlight the duration of data collection which required an average of two hours as well as the development of educational lectures. Moreover, another limitation was the absence of the return of one of the parties to the instrument for data collection. It is worth mentioning that this study is complementary validation of this booklet that was also valid for families and caregivers.

CONCLUSIONS

The experience described and validated the primer care for the elderly with dementia in this study can be expanded to reach other scenarios, and applied in other subjects of health concerns for use in communities in health education, because it is a technology, that uses simple language so attractive and unique.

The results show that it is important to adopt technologies, incorporating new teaching methods. And in this case, the booklet provides a range of information relevant to health education.

The evaluation of nurses and nursing students showed that the booklet encourages the acquisition of knowledge on the subject generating behavior change in the care provided to the elderly with dementia and family caregivers. The creation of new knowledge favors the ability to produce new technological resources and readjust.

In this sense the activities developed through educational technologies can serve as a primer to a health education based on actions that recognize the true needs, desires and aspirations of family members/caregivers.

With the recommendations suggested by the nurses and nursing students in the playbook suffer the necessary adjustments to meet the real needs of this clientele, and is important to conduct meetings aimed at guidance and understanding of dementia in elderly clientele.

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