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Educational technology to guide self-care for elderly patients at hospital discharge to the home: An integrative review

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***Keywords*— Educational technology, Self-care, Elderly, Patient discharge.**

***Abstract*—** *Objective: To identify in the scientific literature the educational technologies used in self-care guidance for elderly patients at home discharge. Method: An integrative literature review study, whose inclusion criteria were: articles in Portuguese, English and Spanish, articles in full that portrayed the theme, published in the last five years and available online and free of charge in the databases of data: PubMed, Medline (National Library of Medicine) and LILACS (Latin American Literature in Health Sciences). Results: 12 publications were found, the analysis took place through analytical and interpretive readings and the educational technologies used were varied. Conclusion: It is noticed that the use of the booklet as an educational technology was the most used in the studies, and also, the limitation of the studies in directing and restricting the care orientation in only one specific approach for each clinical case presented by the patient.*

I. INTRODUCTION

Technologies are structured as a set of knowledge related to products and materials that define therapies and work processes and constitute instruments that help health actions. When these are educational, they mediate the teaching and learning processes. [1]

Health education is a tool used to trigger health promotion, prevention and recovery actions. [2] Technologies combined with health education offer the necessary support for the discussion for the self-care of elderly patients with hospital discharge planning, since it offers knowledge and empowerment of their capacities in order to understand their basic human needs.

Self-care can be conceptualized as a guided action taken by the individual in order to regulate the factors that affect their own development, performing activities that promote their well-being and life, involving

spiritual, physical, mental and social aspects, providing quality of life. [3]

For Galvão and Janeiro self-care is a regulatory function that allows people to perform, by themselves, activities aimed at preserving life, health, development and well-being. [4]

Self-care is considered an integral component of managing chronic diseases and preserving an acceptable level of functionality. It allows the person to observe himself, recognize symptoms, determine the aggressiveness of the symptomatology and choose appropriate strategies to overcome these symptoms, minimizing them and maximizing health. Thus, self-care integrates not only the ability to take care of oneself, but also the performance of essential activities to achieve, maintain or promote optimal health. [4]

The capacity for self-care is only affirmed when the individual is able to perform the self-care activity to maintain, restore or improve their health and well-being. In the studies by Santos, Ramos and Fonseca [5] it was observed that all human beings are willing to take care of themselves and their dependent family members. They have the potential and the ability to learn to meet their self-care needs.

Self-care emerges as the promotion of activities promoted by the personal care demanded daily to regulate its own functioning and development. While the self-care deficit is related to the commitment to its accomplishment. [6]

The period after hospital discharge is a time of challenges for patients and family members, as they find difficulties in carrying out daily activities and doubts about self-care management. [7]

The transition of care from the hospital environment to the home is an important strategy to avoid hospital readmissions, as it contributes to the coordination and continuity of care, minimizing adverse events and other post-discharge complications. Actions taken include discharge planning, health education, promotion of self-management of care, guidance on medication and articulation with the health network. [7]

The modifications of senescence and senility affect self-care actions. Thus, the elderly, especially those hospitalized, need adequate multidisciplinary guidance to strengthen their autonomy. [8-9]

In view of this process of welcoming, caring and educating, the planning of hospital discharge at home is essential to ensure the continuation and quality of care (7). Since discharge can generate an ambiguous feeling for the patient, family members and caregivers, as there is a mixture of feelings of happiness and insecurity. [10]

Souza et al. reports that the elderly are the main users of health services and have a higher frequency of hospital admissions, as well as a longer length of stay. They use hospital services more intensively than other age groups, involving high costs, implying a longer duration of treatment and slower and more complicated recovery. [11]

A large part of the elderly, after discharge, present some degree of limitation and family members are often not prepared to face this situation, making State support to family members essential. [12]

Aging associated with dependency leads to the need to replace some self-care, which is normally undertaken by a family member. This role involves multiple responsibilities that can cause overload when the needs of this family member are not met. [13]

In view of the above, the number of the elderly population in Brazil has been growing at an accelerated rate. According to the Brazilian Institute of Geography and Statistics (IBGE), [14] it is estimated that the population aged 60 and over is 30 million people, representing about 14% of the general population (210 million inhabitants), and it is still the population segment with the highest growth rate - above 4% per year - from 14.2 million in 2000 to 19.6 million in 2010, and should reach 41.5 million in 2030 and 73.5 million, in 2060.

However, this accelerated aging of the Brazilian population should not necessarily be considered a problem, but requires attention and brings important challenges for society. In the elderly, chronic health conditions are more prevalent, requiring responses capable not only of solving these problems, but of maintaining or recovering their autonomy and independence, with quality, resolution and cost-effectiveness. [15]

As it ages, the population starts to present a differentiated epidemiological profile, characterized by the progressive increase in the prevalence of non-communicable chronic diseases, such as diabetes, coronary artery disease and obstructive pulmonary disease, among others, which leads to the growing demand for health care long duration. [16]

However, the population does not age in the same way: there are elderly people who remain absolutely capable of carrying out their daily activities by themselves, even if they have chronic diseases or other important health conditions. Other people need support and adaptations to carry out their activities and some become completely dependent on continuous care and

the help of others, even if they are not chronologically that old. Thus, the presence of multiple health problems and advanced age does not necessarily imply dependence to perform activities of daily living or functional dependence. [17]

The initial motivation for this research came during the professional practice in the medical clinic service of Fundação Santa Casa de Misericórdia do Pará (FSCMPa). The medical clinic sector of that institution is characterized by the continuous service to users, mostly elderly, with the presence of comorbidities and non-communicable chronic degenerative diseases, a fact that corroborates the emergence of doubts and difficulties of patients and families for the care to be applied in the most diverse areas of health.

Restlessness and concern arise in the professional / researcher from the moment he starts to hear reports from patients, caregivers and/or family members about difficulties in adapting to routine, health monitoring, doubts and insecurities regarding post-hospital self-care.

Hospital discharge planning with an emphasis on self-care for elderly patients is a complex aspect of care. However, through the care practice in the medical clinic, it was possible to observe that these actions have not been prioritized and documented among the activities that are under the responsibility of the nurse. It is also a topic that is rarely addressed by undergraduate and/or postgraduate nursing students.

Furthermore, the clinical care practice of the nursing professional in the medical clinic service is overloaded, due to multiple administrative functions and the large number of care services performed routinely on duty, a fact that corroborates the emergence of flaws in the education planning process for the self-care of the patient still hospitalized and also at the time of hospital discharge.

In this way, family members and patients end up not receiving the necessary attention to suppress their inquiries and doubts. Also, given this scenario, the institution does not have a study on the subject and a formal instrument that facilitates or assists the professional, family members and patient in this process of monitoring, guidance and planning of hospital discharge to home.

For Delatorre et al. [9] during hospitalizations, patients and caregivers need to receive adequate guidance in order to limit disabilities, damages, avoid subsequent hospitalizations and ensure quality of life.

Thus, this study aims to identify in the scientific literature the educational technologies used in self-care guidance for elderly patients at hospital discharge home.

II. METHOD

This is a bibliographic study with a quantitative approach of the integrative literature review type and followed the following steps: elaboration of the research question, definition of databases and criteria for inclusion and exclusion of studies, definition of information to be extracted from studies selected, evaluation of the studies included in the review, presentation and discussion of the results and presentation of the review.

The guiding question was: What educational technologies have been used to guide the self-care of elderly patients at hospital discharge home? To select the articles, free online access was used in the following databases: PubMed, Medline (National Library of Medicine) and LILACS (Latin American Literature in Health Sciences).

The search for articles took place between September and October 2020 using the following controlled descriptors and their combinations in English and Portuguese: Educational technology (Educational technology), self-care, elderly (aged) and patient discharge (patient discharg), mediated by the Boolean operator "AND", aiming to expand the number of studies. The descriptors were extracted from the DECS (Descriptors in Health Sciences) and from the MESH (Medical Subject Headings) of the National Library.

The inclusion criteria of the studies were: articles in Portuguese, English and Spanish, articles in full that portrayed the theme and published in the last five years. The following were excluded: editorials, letters to the editor, reflective studies, as well as studies that did not address the topic relevant to the objective of the study, studies that did not fully present the pre-defined information to be extracted and literature reviews.

For analysis and synthesis of the selected articles, a structured form was used, filled in for each article in the final sample, containing the following information: Identification of the article (author, type and year of publication), title, search location, type of research, educational technology and descriptors.

A total of 984 scientific articles were found in the databases. However, the final sample consisted of 39 publications, which met the established criteria. However, after analytical reading of these studies, only 12 publications were used as object of study. The articles

were excluded because they did not answer the guiding question of this study, were repeated, were not available in full, and did not clearly present the proposed educational technology. The results were presented by means of charts and tables and discussed according to the relevant literature.

III. RESULTS

Table 1 presents, in a general and comprehensive way, the pre-selected information for the study and extracted from the researched articles, of which 11 were identified in the LILACS database (Latin American Literature in Health Sciences) and 01 in PubMed / Medline. As for publication, eight were published in nursing journals and two in journals in other health areas. Table 1 shows the methodology applied in the studies, 04 (33.3%) articles were classified as action research, 04 (33.3%) as methodological research, 02 (16.6%) as convergent care research, 01(8) .3%) as qualitative research and 01 (8.3%) as a prototyping-type technological production study.

Table 2 presents the type of technology identified in the review studies. Which stand out: educational booklet (05), educational guide (02), educational workshop (01), interactive blog (01), educational mobile application (01), educational video (01), memory game (01), educational banner (01) 01), educational doll (01) and storytelling (01).

Table 1: Presentation of articles included in the integrative review according to Identification (authors, type and year of publication) title, search location, type of research, educational technology, descriptors and care, Belém, Pará, Brazil, 2021.

N	Article Identification	Title	Search location	Search type	Educational Technology	Descriptors	Care
1	AGUIAR,A.C. T. et al. Artigo cientifico 2018	Capacitação do familiar cuidador na adesão à prevenção e ao controle da hipertensão arterial	Rev. Brasileira de Promoção a Saúde (LILACS)	Action research	Educational workshops	Hypertension Health education care	Guidelines for care giverson Systemic Arterial Hypertension
2	GONÇALVES, M.S. et al. Artigo cientifico 2019	Construção e validação de cartilha educativa para promoção da alimentação saudável entre pacientes diabéticos	Rev. Brasileira de Promoção a Saúde (LILACS)	Methodological research	Educational booklet	Health promotion Educational technology Food Validation studies	Healthy food for diabetic patient
3	CAMACHO, A.C.L.F. et al. Artigo cientifico 2019	Tecnologia educacional interativa sobre cuidados a idosos com demências	Rev de Enfermagem UFPE online (LILACS)	Descriptive qualitative research type experience report	interactive blog	Elderly health Nursing Educational technology Health education Information Technology	Alzheimer's disease guidance

4	MENDEZ,C.B. et al. Artigo cientifico 2019	Aplicativo móvel educativo e de followup para pacientes com doença arterial periférica	Revista Latino Americana de Enfermagem (LILACS)	Study of technological production type prototyping	Educational mobile app	Nursing care Educational technology Information Technology peripheral arterial disease	Care in patients with peripheral arterial disease
5	CARDOSO, R.S.S et al. Tese de mestrado 2016	Tecnologia educacional: um instrumento dinamizador do cuidado com idosos	LILACS	Action research with a qualitative approach	Educational guide Educational video	Elderly health Care givers Educational technology	Elderly care for care givers
6	FERREIRA, J.M. et al. Artigo cientifico 2018	Gerontotecnologia para prevenção de quedas dos idosos com Parkinson	Revista Brasileira de Enfermagem (REBEN) (LILACS)	Convergentcarere search	educationalbooklet memory game	Educationaltechnology Oldman Health promotion Accident by falls Parkinson's disease.	Care in preventing falls in the elderly
7	PENNAFORT, V.P.S. et al. Artigo cientifico 2019	Tecnologia educacional para orientação de idosos nos cuidados com a fístula arteriovenosa	Revista Enfermagem em Foco (LILACS)	Actionresearch	educational banner educational doll	Educational technology Elderly Nursing care Renal dialysis Arteriovenous fistula	Arteriovenous fistula care
8	CARVALHO, D.S. et al. Artigo cientifico 2017	Construção de tecnologia educacional para estomizados: enfoque no cuidado da pele periestoma	Revista Brasileira de Enfermagem (REBEN) (LILACS)	Action research with a qualitative approach	Orientation guide	Educational technology Health education Nursing ostomy focus group	Peristomy skin care
9	SENA, J.F. et al. Artigo cientifico 2020	Validação de material educativo para o cuidado da pessoa com estomia intestinal	Revista Latino Americana de Enfermagem	Methodologicalresearch	Educational booklet	Educational technology Nursing care Self care Stoma health education	Stoma care

			(LILACS)			Validationstudies	
10	ALVES, A.M Tese de mestrado 2017	Construção e validação de cartilha educativa para prevenção de quedas em idosos	LILACS	Methodological research	Educationalbooklet	Educational technology health promotion Acidentes due to falls Elderly health	Guidance for preventing acidentes from falls in the elderly
11	GALDINO, Y.L.S. et al. Artigo cientifico 2019	Validação de cartilha sobre autocuidado com pés de pessoas com diabetes mellitus	Revista Brasileira de Enfermagem (REBEN) (LILACS)	Methodological research	Educational booklet	Educational technology Validation studies Diabetic foot diabetes mellitus	Diabetic foot care
12	COSTA, N.P et al. Artigo cientifico 2016	Contação de história: tecnologia cuidativa na educação permanente para o envelhecimento ativo	Revista Brasileira de Enfermagem (REBEN) (PUB MED)	Convergent care research	Educational care storytelling	Educational technology Health education activeaging geriatric nursing	Self care in aging

Source: Bibliographic search of the authors, 2021.

Table 2: Distribution of research types identified in integrative review studies, Belém, Pará, Brazil, 2021.

Search type	N	%
Action Search	04	33,3
Methodological Research	04	33,3
Qualitative research	01	8,3
Study of technological production type prototyping	01	8,3
Convergent care research	02	16,6

Source: Bibliographic search of the authors, 2021.

Table 3: Distribution of educational technologies identified in integrative review studies, Belém, Pará, Brazil, 2021.

Educational technologies	N
Educational workshops	01
Educational booklet	05
Interactive blog	01
Educational mobile app	01
Educational guide	02
Educational video	01
Memory game	01
Educational banner	01
Educational doll	01
Storytelling	01

Source: Bibliographic search of the authors, 2021.

IV. DISCUSSION

Most of the documented research was based on scientific articles, which comprise strategies that facilitate access to knowledge by researchers through publications on free platforms such as electronic journals indexed in the investigated databases.

Nursing was the area of knowledge where all publications were concentrated. Care for the human being is the basis of nursing science, which has sought over the years to solidify knowledge through the practice of scientific research. For Galvão and Janeiro [4] promoting and maintaining self-care in people with chronic disease is a central role of nurses' intervention, as their interaction is constant in any context – hospitals, health centers, outpatient clinics, continued care and in the community. The implementation of self-care actions promotes a partnership between nurses and the person/family, so that the latter develop skills and knowledge to adapt and make informed decisions regarding their chronic illness.

From the admission of the elderly-family caregiver to discharge, it is essential that the nurse is able to assess and diagnose the needs of the dependent elderly person, the family, the caregiver and the home environment through a care plan developed by an interdisciplinary team that includes guidance to the caregiver, enabling him to provide care adequately. [18]

The elaboration of the booklet was evidenced as the main educational technology in the research used. A booklet is an educational material that enables patients to better understand the health problem they are experiencing, helping them to reflect on their lifestyle and to develop the capacity for autonomy in health care. [19]

It is believed that the largest number for this educational technology to be used is because it is creative and attractive and disseminates information quickly, in addition to enabling the achievement of patients' goals, favoring the optimization of nursing work.

For Torres et al. [17] the use of educational materials contributes to the improvement of the level of knowledge, development of skills and greater autonomy of the person, being able to allow the subjects to reflect on behavior and actions that influence their health pattern.

Despite all the scientific and technological development in recent years, the use of informative booklets as efficient educational strategies to be used with the elderly stood out in the literature. For Camacho et al. [19] the activities developed through these educational technologies sought to provide health education based on actions that recognize the true needs, desires and aspirations of the assisted individuals.

As for the type of research, action research and methodological research stood out. Action research is a type of applied research in the field of Social Sciences, meaning a simultaneous process of investigation and action, whose primary intention is the knowledge and resolution of the collective problem from the observed facts, culminating in the transformation of researchers and participants involved in the social context, site of the problem. However, it has been increasing in health research, especially with regard to the human care process, and can be seen in preventive medicine, occupational medicine and in the field of mental health, as well as in the various spaces of the professional practice of nurses. [20]

The use of the most used descriptors was

educational technology, health education, nursing and elderly.

It was observed the concentration of studies in a particular care only for the orientation of the patient, with no studies found with a holistic assessment of post-discharge care and its subsequent dissemination, since the elderly patient usually admits several clinical conditions, therefore, it is assumed the need for guidance on at least more than one care.

In the studies by Souza et al. [11] the main diagnoses found in hospitalized patients were separated by systems, with a great emphasis on diseases related to the respiratory and neurological systems, and alterations in the skeletal and digestive systems. But this is not only true in relation to diseases that affect the locomotor system, but also very prevalent systemic diseases, such as heart failure, pneumonia and dementia, which manifest with loss of function in the elderly. As for the main reasons for hospitalization, most of the findings involved pulmonary disorders. This occurrence is due to their greater physiological and immunological susceptibility to infections, contributing to the reduction of physical and biological capacity and decreasing their autonomy. In addition to the high prevalence of chronic-degenerative diseases associated with aging, conditions with different etiologies are more severely expressed in the elderly.

V. CONCLUSION

In this study, the importance of documentation and dissemination of research produced and indexed in scientific articles, the centralization of the self-care theme in the area of nursing concentration, the use of action and methodological research, as well as the limitation of studies in directing and restricting care guidance to only a specific approach for each clinical case presented by the patient.

Nurses play an important role in planning the hospital discharge of elderly patients, as well as being responsible for self-care guidelines for the home practices of patients and their post-discharge family members. It is essential to start the process of self-care guidelines during hospitalization, in order to provide safety and humanized treatment to patients and families.

There is an urgent need for studies and new educational technologies that seek to cover the greatest possible amount of self-care guidelines for elderly patients after hospital discharge, since most elderly people have several vulnerabilities in relation to their health, whether these come from factors of the pathology itself, as well as natural physiological conditions.

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