

134 - CONSIDERATIONS ABOUT THE INSTITUTIONALIZATION OF THE ELDERLY IN NATAL, BRAZIL

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INTRODUCTION

The accelerated aging process in Brazil poses new challenges to Brazilian society in a scenario of profound social, urban, industrial and family transformations. A new type of family has emerged, characterized by changes in both ties and intergenerational relationships, in addition to other difficulties typically attributed to its functioning, compromising its capacity to care, protect and welcome the activities of daily living-dependent father or grandfather (RAMOS et al. 1987; VERAS, 2003).

Low-income families cannot afford to support elderly family members in their own environment. The social assistance offered by society to overcome this problem comes in the form of nursing homes, which according to Cancian and Dias (2000) aim to solve the problems of the elderly, especially those related to every day needs, which ultimately also involve costs to maintain their health. The more physically or financially dependent the senior, the greater the chance of institutionalization.

Nursing homes are nothing more than an age-old service offered to people with limitations, without a home or without relatives, instituted several years ago as a result of social security policies in Brazil, and known today as Long-Term Care Facilities for Seniors. LTCFs are defined as “governmental or non-governmental residential institutions for the collective housing of people aged 60 years or older, with or without family support, under conditions of liberty, dignity and citizenship” (BRASIL, 2005).

Changes in the family, associated to the aging population and the increasing demand for this type of senior care institution have led to the emergence of LTCFs as a new scenario in current societies, albeit not the best place or care model for this population. However, this type of facility has increased significantly in Brazil, and public protection policies for seniors have been recognized and established to regulate their operation.

The need to develop an investigation about the institutional aspects of the elderly has arisen as the municipality projects a growing number of shelter facilities for seniors. The current scenario is characterized by a situation of abandonment, poverty and solitude for many of those who reside there. The physical structures are generally inadequate for their needs and for the systematic monitoring of the age-related specificities that may affect their quality of life.

On the other hand, the significant growth of this age group in LTCFs requires us to direct our attention to certain aspects of life in our society. Thus, the aim of this study is to deepen our understanding of elderly institutionalization, in the hope that the results will lead to a reflection on the part of professionals who treat seniors, so that they can intervene positively to improve care practices and seek means to implement them in the institution.

In this sense, had the following objectives for this study: Describe the aspects related to the institutionalization of elderly in Natal, Brazil.

MATERIAL AND METHODS:

This is a descriptive, exploratory study using a literature review. For the development of this research, we sought to publications available in BIREME, specifically in the databases of the Literature of Latin American and Caribbean Health Sciences (LILACS) and International Literature in Health Sciences (Medline), the period was the years 1996 to 2008.

RESULTS:

From asylum to Long-Term Care Facility – LTCF:

Despite the different names, the senior care entities have the common function of providing care through permanent or extended lodging, direct or indirect health care and a number of time-occupying and leisure activities (CORTELLETTI; CASARA; HERÉDIA, 2004).

The more commonly used terms, “asylum” and “shelter”, characterize charitable establishments, shelters being more religiously oriented, whereas asylums, as a rule, are not run by religious entities. Small asylums or retreat houses are denominated “home”. The “Associações Vicentinas” or “Ladies of Charity”, present throughout the country, follow the spirituality norms of São Vicente de Paula. Private, for-profit establishments are commonly called “rest clinics”, “geriatric clinics” or “geriatric institutes” (PAVARINI, 1996).

However, regardless of the name attributed to them and to ensure comprehensive elderly rights, the Elderly Statute, in its chapter IX, paragraph 3, states that: Any institution that shelters the elderly is obliged to maintain housing standards compatible with their needs, as well as provide regular meals and hygiene, indispensable to sanitary norms, under the penalty of the law (BRASIL, 2003).

In Brazil, according to Decree no. 1948, of 3 July, 1996, article 3, the asylum, defined as “care in a boarding institution” is considered one of the ways to care for the elderly who have no family ties or are unable to support themselves, by providing for their housing, food, health and socialization needs” (BRASIL, 1996, p. 3). This care mode is explained by the single paragraph contained in the article, as follows: “in cases of the nonexistence of a family group” and “guaranteed by the Union, by the States, by the Federal District and by the Municipalities, under law”, according to the single paragraph of article 17 (BRASIL, 1996, p. 3).

According to Resolution 1395, of 9 December, 1999, elderly individuals are considered healthy when they are able to maintain their self-determination and do not require help or supervision to perform activities of daily living, in addition to exhibiting the physical and mental skills needed for an independent and autonomous lifestyle and the capacity to organize and decide about their own interests (BRASIL, 1999). Thus, it is understood that institutionalization must not occur with healthy seniors, at least not at current rates, which are likely a result of inadequate public policies.

As of 23 September, 2003, nursing homes in Brazil began to be regulated by Resolution 1301/03 of the Statute of the Elderly, which outlines the regulatory directives and norms that must be observed when a relationship is established between the elderly and the institution. Under Chapter II, Title IV, Art. 35 of this statute, all long-stay entities or home shelters are obliged to sign a service provider contract with the elderly that they house. In turn, § 1 determines that philanthropic entities or house shelters

may require the elderly residents to pay part of the costs incurred by the entity. In Art. 37 of the same chapter, it is determined that seniors have the right to dignified housing with their natural family or substitute, remain apart from their family if they so desire, or stay in a public or private institution. Clause VIII of Art 50 covers health care obligations, where the entities must provide for the needs of their elderly residents (BRASIL, 2003).

To this end, the current National Elderly Care Policy defines the service modes for the elderly in Brazil, and establishes norms for their functioning with Resolution 73, of 10 May, 2001 and more recently with RDC no. 283, of 26 September, 2005, which approves the Technical Regulation and defines functioning norms for Long-Term Care Facilities for the Elderly (BRASIL, 2005).

According to the National Agency of Sanitary Vigilance (ANVISA), Long-Term Care Facilities for the Elderly (LTCF) include governmental and non-governmental institutions for the collective housing of individuals aged 60 years or older, with or without family support, under conditions of freedom, dignity and citizenship (BRASIL, 2005).

Municipal Decree no. 8533 of October 2, 2008, which regulates the functioning of Long-Term Facilities in the city of Natal, Brazil, established the classification of LTCFs in terms of size and degree of dependence of the elderly. Thus, according to the number of elderly residents, the following classification was determined: Small (1 to 20 seniors), Medium (21 to 60 seniors) and Large (over 61 seniors). As to degree of physical and mental dependence, these institutions may shelter elderly with or without physical or mental dependence. Based on these aspects the institutions were classified as follows: Type I – Small facilities with physically and/or mentally independent residents; Type II – Small facilities with physically and/or mentally dependent residents; Type III – Medium-size facilities housing seniors with physically and/or mentally independent residents; Type IV – Middle-size facilities with physically and/or mentally dependent residents; Type V – Large facilities with physically and/or mentally independent residents; Type VI – Large facilities with physically and/or mentally dependent residents (NATAL, 2008a).

Based on this classification, LTCFs must maintain full-time professionals on their staff, taking size and degree of dependence into account, to meet the vital needs of the institutionalized elderly, as established in this legislation.

Accordingly, there is a need for health professionals that act in tandem with the elderly care institutions, by stimulating communication, not only with a focus on transmitting life experiences and daily needs, but also as a therapeutic process. Moreover, they must be prepared to care for this clientele, by interacting with them, understanding their values and beliefs and allowing their expression, as well as providing security and knowledge to facilitate their decision making and strengthen their self-care, improving quality of life in the process.

Nursing homes: a portrait of institutionalization:

The physical structure of LTCFs is similar to that of large shelters or boarding institutions, submitted to entry and exit rules and where residents lack socialization, feelings of affection or active sexuality. They are known as shelters that provide care to persons at the end of their life (SILVA, 1997). Private institutions have gradually become part of this scenario, generating the need to redefine and complement their objectives and adapt them to current legislation.

According to Chaimowicz and Greco (1999), the increased demand for institutionalized services for senior citizens is a consequence of a social transition, in which women, formerly the main caregiver of parents or in-laws, are now actively present in the workforce. These new family arrangements – women living alone, single mothers, separated or childless couples and children who leave the home early – decrease the likelihood of elderly individuals aging in a safe family environment (BERQUÓ, 1996).

Institutionalizing an elderly person in a long-term facility may be an alternative and, in some cases, the only option. Family conflicts involving the elderly, the temporary absence of a home caregiver, or even loneliness brought about by the lack of a relative to live with or for company, especially in seniors with impaired functional capacity, have been the main factors for opting for these institutions (CHAIMOWICZ, 1997).

Also according to Chaimowicz (1997), most nursing homes are not totally appropriate for the needs of elderly people because they do not always offer comprehensive assistance, which includes leisure activities and health care, often limiting themselves to providing basic hygiene, sleep and food. Furthermore, these facilities hinder interpersonal relationships, which are indispensable to maintaining the QOL of the elderly.

The reality of institutionalization for seniors in Brazil, especially in terms of care quality, has been a concern to social entities that defend the rights of the elderly. There is a disparity between existing availability and the distribution of technical and human resources among the different regions of the country and between urban and rural areas, aspects considered contributing factors for the inefficiency of these institutions (PAVARINI, 1996).

The decision to institutionalize an elderly individual in an LTCF is generally an alternative in various situations: widowhood; not having children or having children that are unable to take care of their parent; lack of living space in the family home; family conflicts; lack of a caregiver; high degree of dependence.

Long-Term Care Facilities in Natal, Brazil:

In the state of Rio Grande do Norte, according to the Census of 2000, the elderly population in that year was 250,594 55% (136,475) of whom were women and 45% (114,119) men (IBGE – Brazilian Institute of Geography and Statistics, 2000).

In Natal, the population was 734 thousand inhabitants, including approximately 8% (57,000) of whom were 60 years of age or older.

Five years later, the elderly population in the state was 297,083 inhabitants (9.9%) (IBGE, 2005). According to the National Household Sample Survey conducted by the Brazilian Institute of Geography and Statistics (IBGE), in 2007, the city of Natal had a population of 774,205 inhabitants, with a life expectancy of 70.1 years, similar to the country's average of 72.4 years. The elderly population was 56,269 inhabitants, corresponding to 7.27% of the total (IBGE, 2006).

The Sanitary Vigilance Agency (VISA), part of the Municipal Health Secretariat, conducted a survey in Natal and found ten establishments between August 2006 and August 2007, six philanthropic and four private. However, between January and September 2008, six more private facilities were registered, for a total of 16 LTCFs.

Faced with the increased number of local LTCFs, VISA, in conjunction with the Municipal Council of the Elderly and the Office for the Defense of the Elderly of the State of Rio Grande do Norte, conducted an intense inspection campaign to ensure that all institutions complied with municipal (Municipal Decree no. 8553/2008) and federal (RDC no. 283/2005) legislation. This enabled a close observation of the facilities that house the elderly, and was the start of a long road that includes constant sanitary vigilance and more direct contact with the elderly in special situations (BRASIL, 2005).

In an attempt at preserving the dignity and respect towards the institutionalized elderly, the Sanitary Vigilance Agency (VISA) and the Public Ministry, starting in the second trimester of 2006, gave high priority to inspecting and monitoring LTCFs by observing the living conditions of these individuals, generally weakened by the presence of pathologies and often without the systematic care of a multiprofessional health team.

CONCLUSIONS:

This study dealt with a reality characterized by social isolation and lack of affective ties, in addition to the absence of coordination between the basic care network and the other levels of health care. This fact leads to inaccurate diagnoses, hindering care that is focused on problems inherent to aging. Moreover, the social environment in which the elderly find themselves is limited and inadequate for meeting their needs. These problems likely have a negative effect on the quality of life of institutionalized elderly.

Thus, there is a need for strategies that promote, in the mid and long term, improved care in terms of sanitation and treatment, to provide a dignified quality of life for this population. Therefore, strategies capable of promoting quality aging must be created "given that the institutions will continue to be important housing facilities for the near future", and that the institutionalized elderly today are citizens with rights to quality care. Nowadays, there is a focus on age-related questions that enable the assessment, planning and even monitoring of activities developed within gerontological institutions.

The importance of the welfare of these institutionalized seniors must be reflected on, so that intervention strategies in their health and quality of life can be effective, providing the expected benefits to both health professionals and the elderly themselves. The search for quality health care is a technical and social necessity, and the evaluation of QOL should be used as an indicator when monitoring the care provided.

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CONSIDERATIONS ABOUT THE INSTITUTIONALIZATION OF THE ELDERLY IN NATAL, RN**ABSTRACT**

Introduction: The question of aging in current society is increasingly important, resulting mainly from the decrease in general mortality and child bearing. This has led to an increase in the elderly population worldwide, and a sharp rise in social science, political and medical studies on the aging process, in addition to greater exposure of the topic in the international television and print media. Objective: Describe the aspects related to the institutionalization of the elderly in the city of Natal, Brazil. Material and Methods: Descriptive and exploratory study using a literature review of Scielo and Lilacs databases between December 2008 and July 2009. Results and Discussion: The accelerated aging process in Brazil poses new challenges to Brazilian society under a scenario of profound social, urban, industrial and family transformations. A new type of family has emerged, which, associated to the increase in the elderly population and the rising demand for this type of care facility, has led to the emergence of Long-Term Care Facilities (LTCFs) for the elderly. These are certainly not the best locations, nor the best care model for this population. However, this type of facility has increased significantly in Brazil, and public protection policies for seniors have been recognized and established to regulate their operation. Conclusion: Therefore, strategies capable of

promoting quality aging must be created "given that the institutions will continue to be important housing facilities for the near future", and that the institutionalized elderly today are citizens with rights to quality care.

KEYWORDS: Elderly; Human Aging; Long-Term Care Facility

CONSIDERATIONS SUR LA MISE EN PLACE DES AÎNÉS DANS LA VILLE DE NATAL - RN

RÉSUMÉ

Introduction: La question du vieillissement dans la société d'aujourd'hui prend une plus grande taille, essentiellement en raison de la baisse de la mortalité générale et de la fertilité, augmente chez les personnes âgées à travers le monde, le facteur déterminant pour la question du vieillissement fait partie en permanence l'étude des sciences sociales, la médecine et la politique, qui gagne en visibilité encore plus grande à la télévision et dans des journaux à grand tirage dans le monde. Objectif: Décrire les aspects de l'institutionnalisation des personnes âgées dans la ville de Natal - RN. Méthodes: Cette étude descriptive et exploratoire menée en passant en revue la littérature dans la base de données SciELO et Lilas dans la période entre Décembre 2008 et Juillet 2009. Résultats et Discussion: L'accélération du vieillissement au Brésil apporte de nouveaux défis pour la société brésilienne dans un contexte de profonde transformation sociale, urbaine, industrielle et familiale, à l'émergence d'un nouveau type de famille dont les variations de celle qui est associée avec une augmentation de la population vieillissante et la demande croissante pour des formes d'aide au logement par exemple, les institutions pour personnes âgées - LPI émerger comme un nouveau scénario dans les sociétés d'aujourd'hui, qui ne sont certainement pas le meilleur endroit, pas le modèle de soins les mieux adaptés à cette population. Toutefois, nous observons qu'il est de plus en plus évidente, l'augmentation de ce type d'institution au Brésil, être reconnu et établi une politique publique de protéger les personnes âgées, qui régissent leur fonctionnement. Conclusion: Il est nécessaire de créer des stratégies qui favorisent bien vieillir », puisque les institutions demeureront des environnements d'hébergement essentiels à l'avenir proche, et les personnes âgées, maintenant institutionnalisés, sont des citoyens avec des droits aux soins de bonne qualité.

MOTS-CLÉS: Personnes âgées - Droits de l'âge - Homes for the Aged

CONSIDERACIONES SOBRE EL ESTABLECIMIENTO DE LA TERCERA EDAD EN LA CIUDAD DE NATAL - RN

RESUMEN

Introducción: La cuestión del envejecimiento en la sociedad de hoy tiene un tamaño mayor, principalmente a consecuencia de la disminución de la mortalidad global y la fertilidad, el aumento de las personas mayores en todo el mundo, el factor determinante para la cuestión del envejecimiento es parte en constante estudio de las ciencias sociales, la medicina y la política, ganando una visibilidad aún mayor en la televisión y en los periódicos de mayor circulación en el mundo. Objetivo: Describir los aspectos de la institucionalización de los ancianos en la ciudad de Natal - RN. Métodos: Estudio descriptivo y exploratorio, realizado mediante la revisión de la literatura en la base de datos SciELO y LILACS en el período comprendido entre diciembre de 2008 y julio de 2009. Resultados y Discusión: El ritmo acelerado de envejecimiento en Brasil trae nuevos retos para la sociedad brasileña en un contexto de profundos cambios sociales, urbanos, industriales y de la familia, con la aparición de un nuevo tipo de familia cuyos cambios que se asocia con un envejecimiento de la población mayor y la creciente demanda de las formas de asistencia tales viviendas, de las instituciones para la Tercera Edad - LPI emerge como un nuevo escenario en las sociedades actuales, que ciertamente no son el mejor lugar, y no el modelo de atención más adecuado para esta población. Sin embargo, observamos que cada vez es más evidente, el aumento en este tipo de institución en Brasil, siendo reconocido y establecido la política pública de protección de las personas mayores, que regulan su funcionamiento. Conclusión: Es necesario crear estrategias que promueven el envejecimiento bien ", ya que las instituciones seguirán siendo los entornos de vivienda importante en el futuro cercano, y los ancianos, ya institucionalizada, son ciudadanos con derecho a una atención de calidad.

PALABRAS CLAVE: Ancianos - el envejecimiento humano - Homes for the Aged

CONSIDERAÇÕES ACERCA DA INSTITUCIONALIZAÇÃO DE IDOSOS NO MUNICÍPIO DE NATAL – RN

RESUMO

Introdução: A questão do envelhecimento na sociedade atual vem tomando uma dimensão cada vez maior, resultado, principalmente, da diminuição dos índices de mortalidade geral e fecundidade, ocasionando o aumento de idosos em todo o mundo, fator determinante para que o tema envelhecimento faça parte, constantemente, de estudos nas ciências sociais, na medicina e na política, ganhando, inclusive, maior visibilidade na mídia televisiva e nos jornais de maior circulação em todo o mundo. Objetivo: Descrever os aspectos relacionados a institucionalização de idosos no Município de Natal – RN. Material e Métodos: Estudo descritivo e exploratório, realizado através da revisão da literatura na base de dados da Scielo e Lilacs no período compreendido entre dezembro de 2008 e julho de 2009. Resultados e Discussão: O acelerado ritmo do envelhecimento no Brasil trás novos desafios para a sociedade brasileira num contexto de profundas transformações sociais, urbanas, industriais e familiares, com o surgimento de um novo tipo família cujas mudanças, que associadas ao aumento da população que envelhece, e a demanda cada vez maior por modalidades de atendimento desse tipo de moradia, as Instituições de Longa Permanência para Idosos - LPI surgem como um novo cenário nas sociedades atuais, que, certamente não são o melhor local, nem o modelo de atenção mais indicado para essa população. Contudo, observa-se que é cada vez mais evidente, o aumento desse tipo de instituição no Brasil, sendo reconhecidas e estabelecidas políticas públicas de proteção ao idoso, que, regulamentam o funcionamento das mesmas. Conclusão: É necessário, criar estratégias capazes de promover um envelhecimento com qualidade, "uma vez que as instituições continuarão sendo importantes ambientes de moradia no futuro próximo," e os idosos, hoje institucionalizados, são cidadãos com direitos ao atendimento de boa qualidade.

PALAVRAS-CHAVE: Idoso; Envelhecimento Humano; Instituição de Longa Permanência para Idosos.

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