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Main nursing interventions in supporting family caregivers: an integrative review

ABSTRACT Objective: Identify the main nursing interventions to support family caregivers. Methods: This is an integrative review, carried out on the databases: SciELO, Scopus, NIH-PUBMED and Web of Science. The following descriptors from the Medical Subject Headings (MeSH) were used: "care", "home care", "family caregivers" and "nursing". After the search process, 844 articles were retrieved, so that only 13 met the inclusion criteria, making up the final sample. Results: Regarding the methodological design, most used the randomized clinical trial (n: 09), with a predominance of evidence level II. The studies presented intervention components, so that some presented mixed interventions: practical support when caring (n: 09); needs assessment (n: 05) and; psychoeducation (n: 04). Conclusion: It was found that the observed interventions had positive effects among family caregivers, suggesting that nursing has an important role in supporting these individuals. **Keywords:** Self are; Home Nursing; Caregivers; Nursing.

RESUMEN | Objetivo: Identificar las principales intervenciones de enfermería para apoyar a los cuidadores familiares. Métodos: Se trata de una revisión integradora, realizada sobre las bases de datos: SciELO, Scopus, NIH-PUBMED y Web of Science. Se utilizaron los siguientes descriptores de Medical Subject Headings (MeSH): "cuidados", "cuidados domiciliarios", "cuidadores familiares" y "enfermería". Tras el proceso de búsqueda se recuperaron 844 artículos, por lo que solo 13 cumplieron los criterios de inclusión, conformando la muestra final. Resultados: En cuanto al diseño metodológico, la mayoría utilizó el ensayo clínico aleatorizado (n: 09), con predominio del nivel de evidencia II. Los estudios presentaron componentes de intervención, por lo que algunos presentaron intervenciones mixtas: apoyo práctico en el cuidado (n: 09); evaluación de necesidades (n: 05) y; psicoeducación (n: 04). Conclusión: Se encontró que las intervenciones observadas tuvieron efectos positivos entre los cuidadores familiares, lo que sugiere que la enfermería tiene un papel importante en el apoyo a estos individuos. **Palabras claves:** Autocuidado; Atención Domiciliaria de Salud; Cuidadores; Enfermería.

RESUMO | Objetivo: Identificar as principais intervenções de enfermagem no apoio a cuidadores familiares. Métodos: Trata-se de uma revisão integrativa, realizada nas bases de dados: SciELO, Scopus, NIH-PUBMED e Web of Science. Foram utilizados os seguintes descritores extraídos do Medical Subject Headings (MeSH): "care", "home care", "family caregivers" e "nursing". Após o processo de busca, foram recuperados 844 artigos, de modo que apenas 13 atenderam aos critérios de inclusão, compondo a amostra final. Resultados: Em relação ao desenho metodológico a maior parte utilizou o ensaio clínico randomizado (n: 09), com predominância do nível de evidência II. Os estudos apresentaram componentes de intervenção, de modo que alguns apresentaram intervenções mistas: suporte prático ao cuidar (n: 09); avaliação de necessidades (n: 05) e; psicoeducação (n: 04). Conclusão: Verificou-se que as intervenções observadas tiveram efeitos positivos entre os cuidadores familiares, sugerindo que a enfermagem tem função importante no apoio a estes indivíduos.

Palavras-chaves: Autocuidado; Assistência Domiciliar; Cuidadores; Enfermagem.

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INTRODUCTION

n view of the current demographic aging situation, the last eight decades have added more than thirty years to the population's life expectancy. (1) In view of the current demographic aging situation, the last eight decades have added more than thirty years to the population's life expectancy.

The exposed brings to light circumstances that have become common in the daily lives of many families: individuals with illnesses who are limited to carrying out activities of daily living (ADLs), who can only count on the help of relatives to achieve them. (2)

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When a patient appears with disabling or restrictive illnesses to perform basic daily activities, a caregiver also appears and a large part of these will originate from the family nucleus and scope. (3) When a patient appears with disabling or restrictive illnesses to perform basic daily activities, a caregiver also appears and a large part of these will originate from the family nucleus and scope (4), providing greater quality of life to the person who is in need of it because he is bedridden or with physical limitations. (5)

In Brazil, the home care policy determines that health professionals in this care network are responsible for training family caregivers and involving them in the care process. (6) The absence of training and information generates anxiety and deficit in the self-care of the companions, who are more exposed to imbalances in their physical and emotional health. (7)

Although Brazilian public health policies guide the structuring of a health care network, they present vulnerability and inefficient health services in the involvement of caregivers. Nursing, which focuses on providing support for patients, then needs to recognize the need to establish specific programs to identify and meet the needs of family caregivers. (3, 8)

In the home environment, the nurse is characterized by being the professional endowed with knowledge and skills that aim at the professional education of family caregivers, in addition to playing a major role in guiding patients who receive assistance from these professionals as well as their families. (8, 9)

So that most of the research available in the literature, regarding family caregivers, is related to their family and social characteristics, in addition to work overload and quality of life, few studies exist that present nursing interventions that meet their needs caregivers. (8)

In this perspective, the present study aimed to identify in the scientific literature the main nursing interven-



In the home environment, the nurse is characterized by being the professional endowed with knowledge and skills that aim at the professional education of family caregivers, in addition to playing a major role in guiding patients who receive assistance from these professionals as well as their families

tions in support of family caregivers, and their difficulties when assisting family members in their ADLs.

METHODS

This is an integrative review study, which is characterized by a broad analysis of the literature, with the objective of obtaining a complete understanding of a given theme. (10) The methodological path comprised five distinct phases: identification of the theme or questioning of the integrative review; literature search and categorization of publications; grouping and analysis of included studies; interpretation of results and; synthesis of the knowledge of the final sample. (11)

We sought to answer the following guiding question: What are the main nursing interventions for family caregivers? Based on this question, a search was carried out by three independent researchers, in the databases: Scientific Eletronic Libray Online (SciELO), SCOPUS, National institute of Medicine (NIH-PUBMED) and Web of Science.

For searching the databases, the following descriptors were combined using Boolean operators: "family caregivers" AND "care" AND "nursing interventions". The classified descriptors were taken from the Medical Subject Headings (MeSH).

To carry out the searches, the following inclusion criteria were adopted: full articles in Portuguese, English or Spanish and that clearly describe the nurse's role in interventions to family caregivers. Publications with a theme not relevant to the purpose of this research were excluded, those methodologies did not present a clear description of the interventions, studies whose interventions were exclusively of a psychological nature for family caregivers, research with interventions aimed at the home patient, review studies and duplicates. No time limit was set for searches.



The articles found in the databases described were then put to an exploratory reading, in order to identify them and, consequently, extract the variables. Afterwards, a search instrument (12) adapted for this study was used in the Microsoft Excel 2013 Software, to tabulate the following variables: title of the article, authors, journal, year of publication and country of origin of the study; qualifications of the journals according to data from the Coordination for the Improvement of Higher Education Personnel (Capes) in the nursing area; data base; type of study and level of evidence; pathology or clinical situation involved; nursing interventions and: results of interventions.

The searches were carried out from March to May 2020. 884 articles were found, of which 411 in the Web of Science, 260 in PubMed, 125 in Scopus and 88 in Scielo. After reading the titles, 95 articles were excluded because they were duplicates. After reading the abstracts, 708 articles were excluded because they were not relevant to the study and did not meet other eligibility criteria; 61 publications were then pre-selected for reading in full; 24 were excluded for presenting only psychological interventions, 20 for presenting interventions aimed at home patients and 04 for not clearly presenting the proposed intervention. Thus, 13 articles made up the final study sample, as shown in Figure 1.

classification proposed by Stillwell et al(13). It is noteworthy that this research, being a review study, respected the ethical conformations through the Copyright Law no 9.610 of February 19th, 1998(14), so that all authors of the analyzed publications were referenced appropriately.

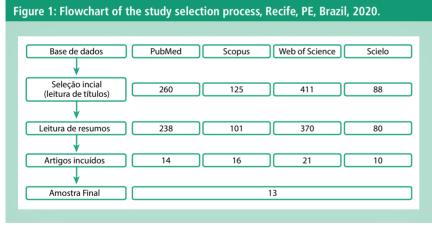
RESULTS

Of the total of 13 articles analy-

zed, there was a higher frequency of publication in 2015 (n: 04) and greater production from Australia (n: 05). The most frequently used journal for publication of studies was PsychoOncology (n: 03), while in relation to the qualifications of the sample journals, 05 are classified as A1 in the nursing area by Capes. As for the databases, five publications were indexed in Pubmed, followed by Web of Science (n: 04), Scopus (n: 03), and Scielo (n: 01). Regarding the methodological design of the articles analyzed, it was found that most of them used the randomized clinical trial (RCT) (n: 09), so that the most common level of evidence was one was II.

Chart 1 elucidates the main nursing interventions found in the analyzed articles. It appears that most studies have proposed interventions to family caregivers with cancer patients in palliative care (n: 09), while others in patients with sequelae of stroke (n: 05). The studies presented intervention components, so that some presented mixed interventions: practical support when caring (n: 09); needs assessment (n: 05) and; psychoeducation (n: 04).

The results identified after interventions with family caregivers showed that the actions taken by nurses led to improvements in the practical aspect of care, such as in solving problems and competencies in self-care, and also in coping skills in adverse situations, such as dealing with the problem. mourning in palliative care patients. Some psychological aspects were also evaluated as rates of less depression and suffering



Source: Research data

Chart 1: Characterization of nursing interventions to family caregivers, Recife/PE, Brazil, 2020.			
Situação clínica	Intervenção de enfermagem	Resultados pós-intervenção	
*AVE(15)	Visita domiciliar com treinamento de habilidades para a solução de problemas, seguido de contatos telefônicos semanais. (Suporte prático ao cuidar)	Melhores habilidades de solução de problemas; maior preparo do cuidador; menos depressão; e melhoria nas me- didas de vitalidade, funcionamento social e saúde mental.	
Oncologia ⁽¹⁶⁾	Duas visitas domiciliares e uma ligação telefônica de acompanhamento entre as duas visitas. (Suporte prático ao cuidar)	Experiência mais positiva frente aos cuidados paliativos no grupo de intervenção.	

Oncologia (17)	Grupo psicoeducacional com três sessões em um período de 3 semanas. (Psicoeducação)	Efeitos positivos na preparação para o papel, competência e recompensas do cuidar.
Oncologia (18)	Consistiu na preparação e avaliação dos cuidadores e na elaboração de um plano de assistência. (Suporte prático ao cuidar e avaliação de necessidades)	Melhorias nos níveis de preparação e competência dos cuidadores.
*AVE ⁽¹⁹⁾	O grupo randomizado recebeu uma média de 36,7 h de psicoeducação ao longo de 6 meses. (Psicoeducação)	Menor depressão e estresse além de estratégias melhores de saúde e enfrentamento.
Oncologia (20)	Foi utilizado a ferramenta de avaliação de necessidades de apoio ao cuidador. (Avaliação de necessidades)	Redução significativa na tensão do cuidador em relação aos controles.
Oncologia ⁽²¹⁾	Foi avaliado as necessidades do cuidador, estabelecimento de um plano de cuidados e fornecimento de apoio ao cuidador. (Suporte prático ao cuidar e avaliação de necessidades)	Houve mudanças no sofrimento. Nenhuma diferença signi- ficativa foi encontrada entre a intervenção de duas visitas e o grupo controle.
Oncologia ⁽²²⁾	Visitas domiciliares por vídeo e chamadas telefônicas. (Suporte prático ao cuidar, avaliação de necessidades e psicoeducação)	Maior qualidade de vida, alta satisfação com o suporte social, proximidade com o paciente, auto eficácia no autocuidado, recompensas por cuidar e menor estresse e depressão.
Oncologia (23)	Um livreto com informações para cuidados familiares foi distribuído (Suporte prático ao cuidar)	Melhora na positividade em relação ao cuidado e maior competência da sua função.
Oncologia (24)	Grupo psicopedagógico liderado por enfermeiros, em três sessões. (Psicoeducação)	Melhoria na preparação e competência para cuidar.
*AVE ⁽²⁵⁾	Fornecimento de orientações e avaliação das competên- cias práticas. (Suporte prático ao cuidar e avaliação de necessidades)	Foi constatado menor sobrecarga de trabalho no grupo experimental em detrimento do controle.
*AVE ⁽²⁶⁾	Acompanhamento sistemático (Suporte prático ao cuidar e avaliação de necessidades)	** -
*AVE ⁽²⁷⁾	Sessões de educação sobre AVE e cuidar e 6 telefonemas quinzenais para treinar habilidades de enfrentamento de problemas. (Suporte prático ao cuidar e psicoeducação)	Melhorias em termos de competência para cuidar, capacidade de lidar com problemas e satisfação de apoio social (p <0,01). Melhorias em termos de funcionamento da família (p <0,05).
Note: *AVE (Acidente Vascular Encefálico - Brain stroke); ** Study without post-intervention results.		

to the detriment of the control groups evaluated by the studies.

Source: Data obtained in the study, 2020.



DISCUSSION

This review explored in the scientific literature the main nursing interventions for family caregivers and their main effects. Only thirteen articles were analyzed, using the eligibility criteria, which corroborates with researchers who already stated about the scarcity of research on such interventions. (28)

The nursing interventions analyzed in this study were aimed only at family caregivers of cancer patients in palliative care and those victims of stroke ...which requires caregivers more time per day in

care tasks.

(CVA). Nine studies were carried out with caregivers of cancer patients and this is justified due to the significant increase in cases of cancer patients in palliative care in recent years, which requires caregivers more time per day in care tasks. (29)

Five studies evaluated nursing interventions for family caregivers of stroke victims. This in turn is one of the main causes of serious disabilities that affects about 32.2 million people worldwide, generating a long recovery and making the family assume the tasks of care most of the time. (30)

Regarding the intervention components identified in the studies analyzed in the results, these were based on



three main axes: practical support in caring, needs assessment and psychoeducation. The first axis was the most common component in the interventions and had as its primary objective to train family caregivers about basic care performed with home patients.

The fact that 9 of the 13 studies analyzed performed interventions in the care process is supported by research that demonstrated that family caregivers feel unprepared in relation to the practical support they provide to their patients. (31, 32) This unpreparedness occurs essentially in the recognition and monitoring of symptoms and in the identification of an appropriate time to contact a health professional. (32)

The need to improve the skills of family caregivers was also a component of nursing intervention in the sample publications. In this sense, some systematic review studies point to a series of situations that involve the need for family caregivers to receive nursing interventions, especially those who care for patients in palliative care. (32, 33) These needs are based on the following prerogatives exposed by family caregivers: having mental health support; obtain information about medical equipment available at home, how to deal with an emergency, and have accurate and objective information on how to get help from a healthcare professional. (33)

The psychoeducational component was also the target of nurses when carrying out interventions. Of the five studies that carried out this action, three aimed to carry out only the intervention in psychoeducation. These interventions are reported to be beneficial for family caregivers, so that some studies have found positive effects on preparation, competence, rewards and the needs of family caregivers. (28, 34)

Regarding the results of nursing interventions to family caregivers, it



The main limitation of this review study refers to the few publications included, suggesting that this topic is rarely addressed in the field of nursing. However, despite this limitation, the studies analyzed have a consistent methodological design and a high level of evidence, contributing significantly to nursing practices based on scientific evidence.

was possible to verify that there was a positive and quite significant effect in all the studies analyzed. There were improvements in the development of skills in problem solving and a decrease in the rates of depression, suffering and stress, which demonstrates that interventions performed by nurses have effects both on the component of the care process and on the mental health of family caregivers.

However, few studies have had results based on mental health and this may be due to the high rate of depressed caregivers. Another justification is that taking care of a family member can inevitably be stressful and provoke feelings of anxiety and depression despite the best possible intervention. (35)

So that family caregivers care for loved ones in their homes for months or years and, during the course of the disease, provide extensive care and support that can be physically, emotionally and socially demanding, nursing interventions to these individuals should be more encouraged to ensure that they care more safely and that they can feel more confident and prepared.

The main limitation of this review study refers to the few publications included, suggesting that this topic is rarely addressed in the field of nursing. However, despite this limitation, the studies analyzed have a consistent methodological design and a high level of evidence, contributing significantly to nursing practices based on scientific evidence.

CONCLUSION

Although there are few articles that address nursing interventions to family caregivers, this review analyzed that existing publications have high methodological rigor with clear and concise interventions.

The main nursing interventions in



the context of preparing family caregivers were found based on three axes: practical support in care, assessment of caregiver needs and psychoeducation. The interventions performed by nurses had positive effects among family caregivers, suggesting that nursing has an important role in supporting these individuals.

In this way, nursing interventions

to family caregivers can benefit not only these professionals but also the patients who receive the care, since they will be more qualified and prepared for their performance.

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