

Ethnographic Study of Care for the Institutionalized Elderly in the Light of Leininger's Transcultural Theory

Estudo Etnográfico do Cuidado ao Idoso Institucionalizado à Luz da Teoria Transcultural de Leininger

Estudio Etnográfico del Cuidado al Mayor Institucionalizado a la Luz de la Teoría Transcultural de Leininger

RESUMO

As Instituições de Longa Permanência para Idosos (ILPI) são locais onde é possível observar um modo de viver o processo de envelhecimento. Esse estudo tem como objetivo desvelar como são realizados os cuidados a pessoas idosas institucionalizadas por profissionais de enfermagem e cuidadores de idosos, com base na etnoenfermagem de Madeline Leininger. Trata-se de um estudo qualitativo, do tipo etnográfico, com base na Teoria Transcultural do Cuidado de Enfermagem. Foi realizado em uma Instituição de Longa Permanência para Idosos localizada em Cuité – PB. Participaram do estudo os profissionais de enfermagem e cuidadores de idosos que trabalham na ILPI e teve um total de 7 participantes. A média das idades dos participantes foi de 37,8 anos, a maioria do sexo feminino. Após 6 meses de observação participante, foi possível perceber como o cuidado era realizado na ILPI, eram realizadas festas regionais e comemorativas, respeitando a identidade cultural e liberdade religiosa que os moradores possuíam. Como método utilizou-se o Modelo Sunrise de Madeleine Leininger como método de análise dos discursos. Após a verificação de como o cuidado era realizado na ILPI, foi construído um Modelo de Cuidado Cultural para ILPI. Acredita-se que utilizando modelos assim, a concepção dos cuidados em uma ILPI possa modificar como o próprio idoso se vê dentro dessa instituição e poder-se-á modificar a visão da sociedade em relação a ILPI e ao envelhecimento, tornando-a menos pejorativa e livre de estigmas e preconceitos.

DESCRITORES: etnografia, idoso, instituição de longa permanência para idosos, enfermagem geriátrica.

ABSTRACT

Long-stay institutions for the elderly (ILPI) are places where it is possible to observe a way of experiencing the aging process. This study aims to reveal how care for institutionalized elderly people is carried out by nursing professionals and elderly caregivers, based on Madeline Leininger's ethnonursing. This is a qualitative, ethnographic study, based on the Transcultural Theory of Nursing Care. It was carried out in a Long-Term Institution for the Elderly located in Cuité – PB. Nursing professionals and elderly caregivers who work at the ILPI participated in the study and there were a total of 7 participants. The average age of the participants was 37.8 years old, the majority were female. After 6 months of participant observation, it was possible to understand how care was carried out in the ILPI, regional and commemorative parties were held, respecting the cultural identity and religious freedom that the residents had. Madeleine Leininger's Sunrise Model was used as a method of analyzing speeches. After verifying how care was provided in the ILPI, a Cultural Care Model for the ILPI was constructed. It is believed that using models like this, the conception of care in an LTCF can change how the elderly see themselves within this institution and it will be possible to change society's view in relation to LTCF and aging, making it less pejorative and free from stigma and prejudice.

DESCRIPTORS: ethnography, elderly, long-term care institution for the elderly, geriatric nursing.

RESUMEN

Las instituciones de larga estancia para personas mayores (ILPI) son lugares donde es posible observar una forma de vivir el proceso de envejecimiento. Este estudio tiene como objetivo revelar cómo el cuidado de personas mayores institucionalizadas es realizado por profesionales de enfermería y cuidadores de personas mayores, a partir de la etnoenfermería de Madeline Leininger. Se trata de un estudio cualitativo, etnográfico, basado en la Teoría Transcultural del Cuidado de Enfermería. Se llevó a cabo en una Institución de Larga Estancia para Adultos Mayores ubicada en Cuité – PB. Participaron del estudio profesionales de enfermería y cuidadores de adultos mayores que trabajan en el ILPI y hubo un total de 7 participantes. La edad media de los participantes fue de 37,8 años y la mayoría eran mujeres. Luego de 6 meses de observación participante, se pudo comprender cómo se realizaba la atención en el ILPI, se realizaban fiestas regionales y conmemorativas, respetando la identidad cultural y la libertad religiosa que tenían los pobladores. Se utilizó el modelo Sunrise de Madeleine Leininger como método de análisis de discursos. Luego de verificar cómo se brindaba la atención en el ILPI, se construyó un Modelo de Atención Cultural para el ILPI. Se cree que utilizando modelos como este, la concepción del cuidado en una LTCF puede cambiar la forma en que los ancianos se ven a sí mismos dentro de esta institución y será posible cambiar la visión de la sociedad en relación a la LTCF y el envejecimiento, volviéndola menos peyorativa y libre de estigma. y prejuicios.

DESCRIPTORES: etnografía, anciano, institución de cuidados a largo plazo para personas mayores, enfermería geriátrica.

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INTRODUCTION

Human aging has always been a phenomenon observed with curiosity and doubt by both the scientific community and society. It is a multifactorial process, simultaneously desired and feared, due to the lack of knowledge about its consequences on everyday life¹. Most societies value the young body, which influences how older people are perceived; the relentless pursuit of physical preservation can represent a difficulty for older people in their social interactions².

Increased life expectancy is undoubtedly a step forward for humanity, but it has health repercussions that need to be addressed. Currently, 11% of the Brazilian population is over 60 years old, and it is estimated that this number will reach 20% by 2050, which represents a challenge for the healthcare system and professionals who work with this population³. Furthermore, it is estimated that 50% of these elderly people will need long-term care⁴. This scenario highlights the importance of studies that understand the care needs of institutionalized elderly people.

Long-term care facilities for the elderly (ILPI) are places that allow us to observe how the aging process is experienced. Many families have shared the care with these institutions, seeking support to deal with the health demands of the elderly. In Brazil, there are approximately 1,400 ILPIs registered with the Brazilian Society of Geriatrics and Gerontology (SBGG), of which 180 are located in the North-east region, representing 12.8% of the total. A census conducted between 2007 and 2009 revealed the predominance of philanthropic ILPIs (65.2%), followed by private (28.2%) and public (6.6%) institutions⁵.

The motivations for institutionalizing the elderly include: the need for specialized care due to functional loss

or cognitive impairment; risk to themselves or others due to dementia; lack of full-time family members available; family conflicts; caregiver overload; lack of a support network; provision of housing and socialization; or the decision of the elderly person themselves.

For Vieira, ILPIs should be understood and respected as a choice in the context of the individual's life, who seeks integration and belonging, and not just as a place of abandonment. In these institutions, care is provided to assist elderly residents in performing Activities of Daily Living (ADLs).

Care, whether institutional or at home, is a phenomenon of assistance, support, or facilitation to another individual or group with evident needs, with the aim of improving their human condition⁶. Madeleine Leininger's Theory of Diversity and Universality of Cultural Care (TDUCC) supports the practice of transcultural nursing and allows nurses to understand the sociocultural origin of health complications, predicting behavioral changes. Transcultural care favors the adoption of new individual and collective habits⁹.

By understanding how institutionalized care is provided, it may be possible to predict the conditions that could lead to disability in older adults and help them maintain their independence for a longer period of time. Therefore, training nursing professionals and caregivers of the elderly seems to be a way to promote the health of elderly people living in ILPIs and prevent disabilities. In addition, the creation of a care model based on TDUCC with a focus on cultural care may be a means of making this institutionalized care more humane and appropriate for institutionalized elderly people, and this is the thesis defended in this study. In this context, this study is an excerpt from a doctoral thesis in nursing and sought to understand

how care is provided in an ILPI, with the following guiding question: "How is care provided to the elderly in ILPI based on Madeleine Leininger's ethno-nursing?"

Therefore, the objective was to reveal how care is provided to institutionalized elderly people by nursing professionals and caregivers, based on Madeline Leininger's ethno-nursing.

METHOD

This is a qualitative study, which allows the researcher to explore various avenues in order to elucidate their questions¹⁰. Ethnography literally means the description of a people, that is, it is understanding the collective meaning of the word, rather than individuals. Thus, it is a way of studying people in organized, long-lasting groups, which can be called communities or societies. The unique way of life that characterizes a group is understood as its culture. Ethnography is the study of culture, which involves an examination of the learned and shared behaviors, customs, and beliefs of the group¹¹.

Transcultural Care Theory argues, as one of its basic assumptions, that every nursing care situation involves transcultural behavior and that, in order to provide therapeutic nursing care, nurses must be familiar with the cultural values, beliefs, and practices of their clients¹². The study was conducted at a Long-Term Care Facility for the Elderly located in the city of Cuité, Paraíba.

The participants in this study were nursing professionals and caregivers for the elderly who work at the ILPI. They were recruited using a non-probabilistic snowball sampling technique, widely used in qualitative research, which uses referral networks and recommendations. This technique is especially useful for studying sensitive and private issues that require

prior knowledge of people belonging to the group in order to locate informants.

This study used participant observation and semi-structured interviews with participants who were identified as "key informants" during the first stage of data collection. Data collection took place from February to August 2023.

Data collection for this study was carried out using three instruments: Assessment Tool for Characterizing Nursing Professionals/Caregivers, developed by the researcher, which provided data on nurses, nursing technicians, and caregivers of the elderly in the following areas: sociodemographic (age in full years, gender, level of education, marital status, and training/education in elderly care); Field diary, in which the researcher's impressions as a participant observer were described; and Semi-structured script¹⁴ built from aspects that could capture how care is provided in the ILPI.

The research was conducted in three stages: the first consisted of participant observation at the ILPI. The researcher participated in the activities after being accepted by the study group, consisting of nurses, technicians, and caregivers, following the signing of the Free and Informed Consent Form, the Voice Recording Authorization Form, and the Image Authorization and Use Form.

The data were collected by writing in the field diary at the time of participant observation, and the other instruments were applied by the researcher in the second stage of the study. The second stage lasted 30 days and consisted of the application of the other data collection instruments, with interviews conducted in a calm and private environment, with only the researcher and the participant present, using audio recording with a smartphone recorder. These interviews

were transcribed by a single researcher, listening and transcribing excerpts from each of them, and writing in the Office Word® text editor program.

At the end of the data collection, the third stage took place, which was the proposal of a cultural care model to be used in ILPIs, which was constructed based on the findings of this study in conjunction with the literature on cultural care practiced in various spaces. It emphasizes the importance of cultural influence in the care of institutionalized elderly people.

The study design was submitted to the Research Ethics Committee (CEP) of the State University of Paraíba (UEPB) and approved under number CAAE: 66062222.5.0000.5187.

Nursing professionals and caregivers of elderly people in ILPIs were presented with all the information about the study and its objectives, as well as Resolution No. 466/2012 of the National Health Council¹⁵, which provides guidelines and regulatory standards for research involving human beings.

After this explanation, they were asked to sign the Free and Informed Consent Form and the Voice Recording Authorization Form in order to contribute to the confidentiality of the research data and the privacy of the relationship during participant observation and interviews, as well as to avoid external interference in the process. The interviews were conducted in private settings secured by the researcher and suggested by the participants.

The anonymity of the participants was guaranteed by replacing their real names with names of flowers in the transcription of the collected material, which did not identify them. During data collection, participants were numbered according to the chronological order in which they were interviewed, and in the process of transcribing the recording, their re-

spective names and the names of people mentioned in the interview were also replaced by flower names. The field diary did not mention the names of participants or physical characteristics that could identify them.

After data collection, the data were transcribed and validated by presenting the transcribed interview to the participant himself, and if he so desired, any statement or excerpt from the interview could be removed, and it would only be used in the data analysis after the participant approved the transcription. It is worth noting that only one informant asked to remove a statement after transcription, as he had been interrupted by a resident of the ILPI.

RESULTS AND DISCUSSION

For this research, institutionalized care was taken as the object of study. However, to understand this phenomenon and subsequently explain it based on Madeleine Leininger's theory, we deemed it necessary, and as a fundamental point, to identify and characterize the participants and thus integrate them later into the narrative texts and analysis.

To characterize the participants in this study, they were guaranteed anonymity, without previously established criteria, in addition to their social attributes, such as age, gender, race, marital status, having children, and level of education. To further explore the object of the study, they were also characterized in relation to their training in elderly care and how long they had worked at the ILPI, as shown in Table 1.

Quadro 1 – Caracterização dos participantes com base nos atributos sociais e de pesquisa – Campina Grande, 2024.

Name	Age	Gender/Race	Marital status	Children	Grau de escolaridade	Length of service at the ILPI (years)	Informant
Rosa	42	Female/Brown	Married	2	Level of education	2	IC
Bromelia	47	Male/Brown	Single	1	Postgraduate degree	6	IC
Sunflower	39	Female/Brown	Married	2	High school graduate	3	IC
Jasmim	38	Female/Brown	Married	2	High school graduate	2	IG
Lily	27	Male/Brown	Single	0	Higher education (bachelor's degree) completed	2	IG
Tulipa	38	Female/Brown	Common-law marriage	3	High school graduate	8	IG
Lavender	34	Female/Brown	Single	0	High school graduate	2	IG

Caption: KI: Key Informant; General Informant.

Source: Research data, 2024.

Regarding training in elderly care, three of the caregivers (43%) responded that they had received training five years ago promoted by the institution itself in partnership with the Federal University of Campina Grande, while the others (57%) had not received training because they had been working at the ILPI for less than five years.

Seven caregivers participated in this study, including one nurse, two nursing technicians, and four caregivers. The youngest was 27 years old and the oldest was 47 years old, with the majority being female (5/7). Married and single individuals were equally represented, as were those with two children. Regarding educational level, the majority (5/7) had completed high school and had been working at the ILPI for less than five years.

All participants self-identified as

brown, which corroborates the study by Ceccon et al.¹⁶, which stated that black and brown women, as formal caregivers, constitute a social vulnerability. These women are part of the most disadvantaged and vulnerable group in capitalist, patriarchal, and racist regimes, which prevents them from achieving better incomes and jobs, leaving them overrepresented in less prestigious occupations.

Justo and Peterle¹⁷ state that, although formal caregivers provide paid services and there are short private courses for training caregivers of the elderly, there are still no established guidelines to adequately guide this training in Brazil. This gap contributes to an increase in the number of caregivers working in the market, especially in view of the aging Brazilian population.

Oliveira et al.¹⁸, when conducting training on fall prevention with caregivers of the elderly in an ILPI in Fortaleza

(CE), reported the importance of constantly updating professionals on topics related to care, especially with a focus on preventing health problems in institutionalized elderly people.

When analyzing the statements extracted from the interviews with the participants in this study, it was possible to see that they go through several factors present in the "trainers" proposed by Leininger in her theory. Cultural analysis, based on Madeleine Leininger's Sunrise Model methodology, allows us to understand how we assimilate the attitudes of the elderly towards accepting care and help, as well as the possible influence of cultural factors on this behavior. With regard to ILPIs, the technologies mentioned in the participants' statements are diverse, with light technologies, such as access to medical staff and specialists, having the most direct impact on the care of older adults who need continuous pro-

fessional monitoring.

"It's a big challenge because, in fact, we wouldn't even be able to receive such a frail elderly person because we don't have a medical team, because it's not a health care institution, it's a social support facility." (Rosa)

"You have to seek care, sometimes even privately, for specialized services [...]" (Rosa)

"[...] We never receive patients with more advanced stages of disease because we don't have the means to care for more critical patients, but in terms of frailty and dependence, especially in cases of dementia." (Rosa)

"[...] Some elderly people may require specialized attention and medical care that is more readily available in a geriatric care institution." (Bromélia)

Some institutionalized elderly people may be frail. Frailty syndrome is understood as a set of signs and symptoms with multiple causes, including intrinsic, extrinsic, pathological, or clinical factors, and is characterized by loss of strength, endurance, and physiological functions, leading to functional dependence or even death²⁰. In the participants' statements, frail elderly people were mentioned as those who most need these technological resources to better assist them:

"In the case of the most frail elderly, care needs are intensified, requiring extra attention and specific skills to ensure their comfort and safety." (Cirassol)

Spirituality is considered an influencing factor in care by both the elderly person and the caregiver, who refers to spirituality as a fundamental role in the way of thinking and caring for others:

"Spirituality plays a fundamental

role in my care, and I think about how I can support the faith and participation of the elderly, providing spiritual comfort." (Lírio)

"I chose to care for the elderly because I see it as helping Jesus. In 'my' church, they teach the importance of caring for the elderly and the poor, just as Jesus helped them, and being a caregiver for the elderly makes me feel good, as if I were doing it for Jesus." (Lírio)

It is important to differentiate between religiosity and spirituality in this context: religiosity is defined as an activity that may involve the individual's participation in religious services with other people or refer to religious activity performed alone, in private, such as praying. Spirituality, on the other hand, is a complex and multidimensional part of the human experience²¹.

With human aging and new family configurations, caring for the elderly at home is no longer feasible for some families, and this makes new care environments such as ILPIs necessary. Some participants reported that because of aging, the need for care increases and families are often unable to meet this need:

"Because, as time goes by, you end up needing support, you need your family, and you need care." (Rosa)

"I think that aging brings a lot of this need, this support, from family, relatives, anyone who is there to support them [...]" (Rosa)

"Some families don't have the resources, time, or knowledge to care for them (the elderly) at home." (Lírio)

In this study, some participants reported that the elderly did not have an adequate family structure and that many of them were in a vulnerable situation be-

fore being institutionalized:

"Yes, mistreatment [...] practically abandonment, right? We receive a lot of these people, who, in fact, right? The support we offer is more like that, unlike other shelters that receive lucid elderly people in good health. Not here. Here, there are more cases of vulnerability [...]" (Rosa)

It is important to seek to understand the life history of that elderly person and thus try to understand what led them to that situation of abandonment, not that this can justify any kind of violence, but often the context of life that that elderly person has experienced can reveal to us the basis of the situation in which they find themselves²².

In a qualitative study with caregivers of elderly people in a nursing home in southern Brazil, participants revealed in their statements that they always talk a lot with the elderly people they care for, which facilitates the establishment of bonds and their relationship with people who often hold beliefs related to stereotypes of aging, such as decreased dependence and their relationship with finitude¹⁷.

FINAL CONSIDERATIONS

Therefore, the study achieved its objective, and among the limitations of this study, we found that this thesis could have been approached from the perspective of the elderly regarding the cultural care they receive. We also believe that this study can be replicated in more than one ILPI and thus, in addition to the diversity of statements that will be found, it will be possible to perceive how care for the elderly is carried out in different locations, influenced by cultural aspects of the region.

The use of Madeleine Leininger's Sunrise Model allowed us to search the narratives, statements, and attitudes for forms of care that professionals allow to

manifest the culture of institutionalized elderly people. The fact that there is an open area in the ILPI favors sunbathing for elderly people who previously lived in rural areas and had more contact with

nature.

Through Leininger's theory and the results of this study, it was possible to propose a sensitive care model to be used in ILPI, whose main objective is to

support the elderly in their needs according to their independence and consistent with their culture, respecting the various dimensions of care.

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