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Instrumentalization program of elderly for the use of health care facilities in the domestic environment. *Gerontechnology* 2012; 11(2):193; doi:10.4017/gt.2012.11.02.598.00

Purpose Technological progress has enabled an increase in life expectancy, allowing people to have greater autonomy over their health as well as developing capacities to manage tasks independently at home. With the growth of the elderly population the main cause of disease changed from acute to chronic, including chronic parasitic infections that lead to long-term problems¹. Understanding the human factor involved in the association between the digital world and older adults can be of great importance in the context of actions directed to the health of the elderly and care for chronic conditions. This study aimed at providing instruments to older adults for using health care equipment, as developed in the Digital Inclusion Project of the Elderly in Brazil (city of Ribeirão Preto, State of Sao Paulo). **Method** The project of Digital Inclusion of the elderly was created in the year 2010 in an Occupational Therapy course at the Medicine University of Ribeirão Preto – USP, together with Biomedical Informatics students of USP-FMRP. Participants were older adults of both genders, aged from 60 to 85 years, coming from different social classes and levels of schooling. They were studied with others for the use of electronics in care and health monitoring. The project aims to facilitate the relationship and socio-cultural development of elderly and young people, through a process of mutual education. In this way of the older adults can improve their skills of using electronic equipment present in daily life, and this can improve their autonomy and independence in the digital age. The course included theoretical and practical group lessons with presentation of devices, with instruction on the functions and forms to manage the devices in order to facilitate the use of such equipment on a day-to-day basis. The devices were made available to the older adults, as well as newly developed and dedicated manuals. Special attention was given to questions of the participants. The devices more commonly used are an arterial blood pressure meter, blood glucose meter and devices of drugs organizer analog and digital. **Results & Discussion** Assessment showed that the actions to provide instruments to older people for to the use of electronics equipments improved the day-to-day activities of the older persons, promoting better health, greater social participation, and autonomy up to advanced ages. The power to monitor their own health and wellness through these devices can be a generator of independence and empowerment, enabling decision-making and control of their daily lives. The elderly participants used such knowledge to care for themselves and also for others, since the role of spouse's caregiver or another person was developed as they assessed such knowledge as essential to their lives. They indicated that when purchasing a digital health device in a store, they rarely receive the seller's instructions; this results in a preference for healthcare professionals to use these equipments instead. We evaluate this project as a success, of great social relevance to the ageing population and the important in the field of gerontechnology for the management of chronic diseases.

References

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