






**Elderly Caregiver Program: a scoping review*****Programa Acompanhante de Idosos: uma revisão de escopo******Programa de Acompañamiento a la Persona Mayor: una revisión de alcance***

Received: 27/07/2024 Accepted: 03/08/2024 Published: 12/10/2024

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**Abstract:**

**Objective:** to investigate the scientific production in Portuguese about the Elderly Caregiver Program. **Methods:** a scoping review was carried out using the term “Programa Acompanhante de Idosos” (Elderly Caregiver Program) in the Portal of Journals of Coordination for the Improvement of Higher Level Personnel, in Brazilian journals specialized in old age and aging, and in the references of the selected articles, from 2008 to 2022. **Results:** of the initial 10 publications selected, four articles were excluded, and the six remaining articles were included in the study. The production analyzed consisted of: description and evaluation of the profile of the elderly people served; perception of the actors involved in the program; contextualization of the program in the scenario of long-term care policies. **Conclusion:** the Elderly Caregiver Program is an initiative of the city of São Paulo, SP, Brazil, which aims to provide home care to elderly people in situations of fragility and social vulnerability. The service appears as a successful response to the challenges imposed by population aging in Brazil.

**Keywords:** Old age assistance; Aging; Long-term care; Home care services.

**Resumo:**

**Objetivo:** investigar a produção científica em língua portuguesa acerca do Programa Acompanhante de Idosos. **Método:** revisão de escopo realizada a partir do termo “Programa Acompanhante de Idosos” no Portal de Periódicos da Coordenação de Aperfeiçoamento Pessoal de Nível Superior, em revistas brasileiras especializadas em velhice e envelhecimento e nas referências dos artigos selecionados, considerando o período de 2008 a 2022. **Resultados:** da seleção inicial de 10 publicações, foram selecionados seis artigos. A produção analisada consistiu em: descrição e avaliação do perfil dos idosos atendidos; percepção dos atores envolvidos no programa; contextualização do programa no cenário de políticas de cuidados de longo prazo. **Conclusão:** o Programa Acompanhante de Idosos é uma iniciativa do município de São Paulo, SP, Brasil, que visa oferecer atenção domiciliar a pessoas idosas em situação de fragilidade e vulnerabilidade social. O serviço aparece como uma resposta acertada aos desafios impostos pelo envelhecimento populacional no Brasil.

**Palavras-chave:** Assistência a Idosos; Envelhecimento; Assistência de longa duração; Serviços de assistência domiciliar.

**Resumen:**

**Objetivo:** investigar la producción científica en portugués sobre el Programa de Acompañamiento a la Persona Mayor. **Método:** se realizó una revisión exploratoria utilizando el término “Programa de Acompañamiento a la Persona Mayor” en el Portal de Periódicos de la Coordinación para el Perfeccionamiento Personal de la Enseñanza Superior, en revistas brasileñas especializadas en vejez y envejecimiento y en las referencias de los artículos seleccionados, considerando el período de 2008 a 2022. **Resultados:** De la selección inicial de 10 publicaciones se seleccionaron seis artículos. La producción analizada consistió en: descripción y evaluación del perfil de los ancianos atendidos; percepción de los actores involucrados en el programa; y contextualización del programa en el escenario de la política de cuidados de larga duración. **Conclusión:** Programa de Acompañamiento a la Persona Mayor es una iniciativa del municipio de São Paulo, SP, Brasil, que pretende ofrecer atención domiciliar a ancianos en situación de fragilidad y vulnerabilidad social. El servicio parece una respuesta adecuada a los retos que plantea el envejecimiento de la población en Brasil.

**Palabras-clave:** Asistencia a los ancianos; Envejecimiento; Cuidados a largo plazo; Servicios de atención de salud a domicilio.

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## INTRODUCTION

**T**he Elderly Caregiver Program (ECP) is an initiative of the Municipal Health Department (SMS) of the city of São Paulo/SP, Brazil, within the scope of primary care of the Unified Health System (*Sistema Único de Saúde* - SUS). It offers home care to fragile and socially vulnerable elderly people. The service is organized into 50 teams in Basic Health Units (*Unidades Básicas de Saúde* - UBS) in the city. Assistance is provided to users in their homes, in their respective territories, in order to encourage social participation, autonomy and independence<sup>1</sup>. One of the main guidelines of the ECP is to keep elderly people in their communities, with a view to preventing or delaying institutionalization.

The guiding document of the program understands fragility as the criteria established by the National Health Policy for the Elderly (*Política Nacional de Saúde da Pessoa Idosa* - PNSPI)<sup>2</sup> and by the Brazilian Ministry of Health<sup>3</sup>. The definitions considered by Morley *et al.*<sup>4</sup> are also taken into consideration. For the group of researchers who proposed the consensus, frailty can be defined as a “medical syndrome with multiple causes and contributors that is characterized by diminished strength, endurance, and reduced physiologic function that increases an individual's vulnerability for developing increased dependency and/or death.” (p. 393).

This set of parameters make up one of the domains assessed for inclusion of users in the program. Inclusion is based on the Multidimensional Assessment of the Elderly in Primary Care (*Avaliação Multidimensional da Pessoa Idosa na Atenção Básica* - AMPI/AB) of the city of São Paulo. This instrument provides support to optimize the flow of care, planning and management of actions aimed at the elderly population living in the city. The instrument assesses social, physical, cognitive and functional dimensions<sup>5</sup>. The concept of vulnerability, in turn, is defined by the ECP's guiding document, also in a multi-determined manner<sup>1</sup>, supported by the National Social Assistance Policy<sup>6</sup>. This condition manifests itself from a combination of absences, especially in economic and affective-relational orders, as well as a sense of social belonging and political representation.

Therefore, organizing an initiative that takes these characteristics into account can be a way of minimizing situations of fragility and social vulnerability that may affect elderly people. Therefore, the ECP is a public policy for long-term care.

Beyond the Brazilian scenario, assuming both concepts as a basis, the Program aligns itself with the global debate about the need to develop measures that will respond to part of the global challenges of population aging. The PNSPI<sup>2</sup> itself recognizes the scarcity of home services

for this social segment, making the responsibility for care fall mainly on the family, when necessary<sup>7,8</sup>.

The promotion of initiatives aimed at preventing or postponing the institutionalization of elderly people is a contemporary global trend, centered on the concept called Aging in the Community (originally, Aging in Place). This type of care can be defined as “the ability to continue living at home and in the community over time, safely and independently”<sup>9</sup>. The possibility of reaching old age and remaining connected to the place where one lives brings individual and collective advantages, such as maintaining meaning in multiple domains, a state of autonomy and the performance of significant social roles, contributing to greater satisfaction and even better health conditions, in some cases<sup>9,10</sup>.

The appreciation of Aging in the Community is not antagonistic to the existence of Long-Term Care Facilities for the Elderly (LTCFs). On the contrary: the emphasis is on humanizing care provided by these services to those who really need them. A network of possibilities must be activated to address the diversity of people and their demands throughout their lives. For this scenario to be implemented, it is necessary to strengthen and broaden the scope of intersectoral coordination of social development and health policies. This strategy, already provided for in the PNSPI<sup>2</sup>, must take into account care models that integrate the perspectives of health systems, without neglecting the preferences, profiles and other conditions of the people subject to these measures.

Based on these premises, the World Health Organization (WHO)<sup>11</sup> proposed a model that it called the "Integrated Continuum of Long-Term Care". The institution advocates the reorganization of care within existing systems, aiming to avoid fragmentation of actions. In this way, it is believed that promoting healthy aging can be achieved by optimizing opportunities to maintain people's functional and intrinsic capacities, regardless of their functional status. Thus, it is expected to allocate appropriate services to each user profile, and allocating available resources in the best possible way and enabling satisfactory results.

This debate is expanded with some other concepts, such as Avoidable Displacement from Home (ADH)<sup>10</sup>. For its proponents, ADH occurs when a person cannot exercise their power of choice, especially to remain or return to their residence, when there is a failure of integration between the social and health systems. Such is the case of unnecessary institutionalization or a hospital stay longer than it should be<sup>10</sup>.

Furthermore, the notion of ADH complements a series of other concepts related to the quality of care for elderly people, such as integrated person-centered care. This concept deals with “respect for the patient's right to self-determination”<sup>12</sup> and its interaction with the

perspectives of care providers and the context itself. Thus, based on the logic of the Integrated Long-Term Care Continuum, a program such as ECP could avoid ADH for its users and delay their institutionalization as much as possible. The strengthening of initiatives that aim to alleviate these challenges is therefore necessary both in terms of promoting quality of life of elderly people and in reducing and optimizing resources in the management of public policies aimed at qualified aging of this population<sup>10</sup>. In Brazil, the ECP has proven itself to be one of these fronts. Proof of this statement was the winning of the 5<sup>th</sup> Edition of the Spanish institution *Fundación Pilares para la autonomía personal* award, in October of 2022, in the Popular Award category. Every two years, the foundation honors initiatives for good practices in integrated care centered on the person<sup>13</sup>. In view of the importance and recognition of the ECP's trajectory in the scenario of care for the aging of the elderly, this work is a scoping review, with the aim to investigate the scientific production in Portuguese about the Elderly Caregiver Program.

## METHODS

The methodological framework used in the composition of the scoping review is based on the proposals of the Joanna Briggs Institute (JBI), an Australian institution specialized in literature reviews<sup>14</sup>. The review was conducted according to the Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR) checklist<sup>15</sup>. The main steps taken are described below. The protocol was registered on the Open Science Framework (OSF) platform.

The review was conducted according to the Population/Participants, Concept and Context (PCC) mnemonic technique. Thus, the population studied was configured as all parties involved in the Elderly Caregiver Program. The concept was the ECP itself. The context is that of Primary Care of the SUS, the instance in which the Program is located.

Thus, from the establishment of the PCC, the following research questions were identified:

- *What scientific knowledge has already been produced in Portuguese about the ECP?*
- *Which aspects of the Elderly Caregiver Program have already been addressed in scientific production in Portuguese?*
- *What are the main challenges, gaps and potentialities pointed out by the studies?*

The inclusion criteria used in the survey were: 1) original articles in Portuguese; 2) research focus was or involved ECP; 3) published between 2008 and April of 2022; 4) presented, at least in the title, abstract and/or keywords, the search term "Elderly Caregiver Program".

The exclusion criteria adopted were: 1) articles that were not original research; 2) not written in Portuguese; 3) whose research focus was not or did not directly involve ECP; 4) published outside the specified time frame; 5) did not contain the search term in the title, abstract and/or keywords. The review was conducted based on scientific production on ECP available on the Journals Portal of the Coordination for the Improvement of Higher Education Personnel (*Coordenação de Aperfeiçoamento de Pessoal de Nível Superior* - CAPES). This Portal is a free virtual scientific collection from Brazil, which has more than 49 thousand national and international journals. It provides full texts from 455 databases.

In the scope of this research, the two most important databases available on the Portal are the Virtual Health Library (VHL/BIREME) and the Scientific Electronic Library Online (SciELO), which focus on production related to the health area. In order to expand the research, a survey was also conducted on Brazilian journals specializing in aging and old age.

Some of these are already included in the CAPES Portal databases (*Estudos Interdisciplinares sobre o Envelhecimento*, Brazilian Journal of Geriatrics and Gerontology, and Kairós Journal). The journals consulted that were not indexed in the databases of the aforementioned Portal were: *Mais 60 - Estudos Sobre o Envelhecimento*; *Revista Brasileira de Ciências do Envelhecimento Humano*; Geriatrics, Gerontology and Aging (GGAgging); and *Revista Amazonense de Geriatria e Gerontologia*. The search for these journals was carried out on the Sucupira Platform (CAPES), using the terms “*envelhecimento*” (aging), “*velhice*” (old age) and “*Gerontologia*” (Gerontology).

In addition, as instructed by the JBI Manual for Evidence Synthesis<sup>14</sup>, a scan of the reference lists of the selected articles was also carried out to search for additional material that might not have appeared in the initial sources. In this case, the same inclusion criteria were used.

Since it is a specific program, with its own name, in the selected sources the search term used was “*Programa Acompanhante de Idosos*” (Elderly Caregiver Program), in quotation marks, only in Portuguese. The initial search date was January of 2008, since this was the year in which the ECP achieved municipal public policy status. The final search date was July 10, 2022.

The selected articles that met the inclusion criteria were imported into the Parsifal platform (<https://parsif.al/>), where the analysis of the articles found was conducted. This tool allows researchers to conduct systematic reviews in an organized manner. It is an online and shared environment through which it is possible to add, organize and delete review results. Duplicate articles were later excluded from the platform.

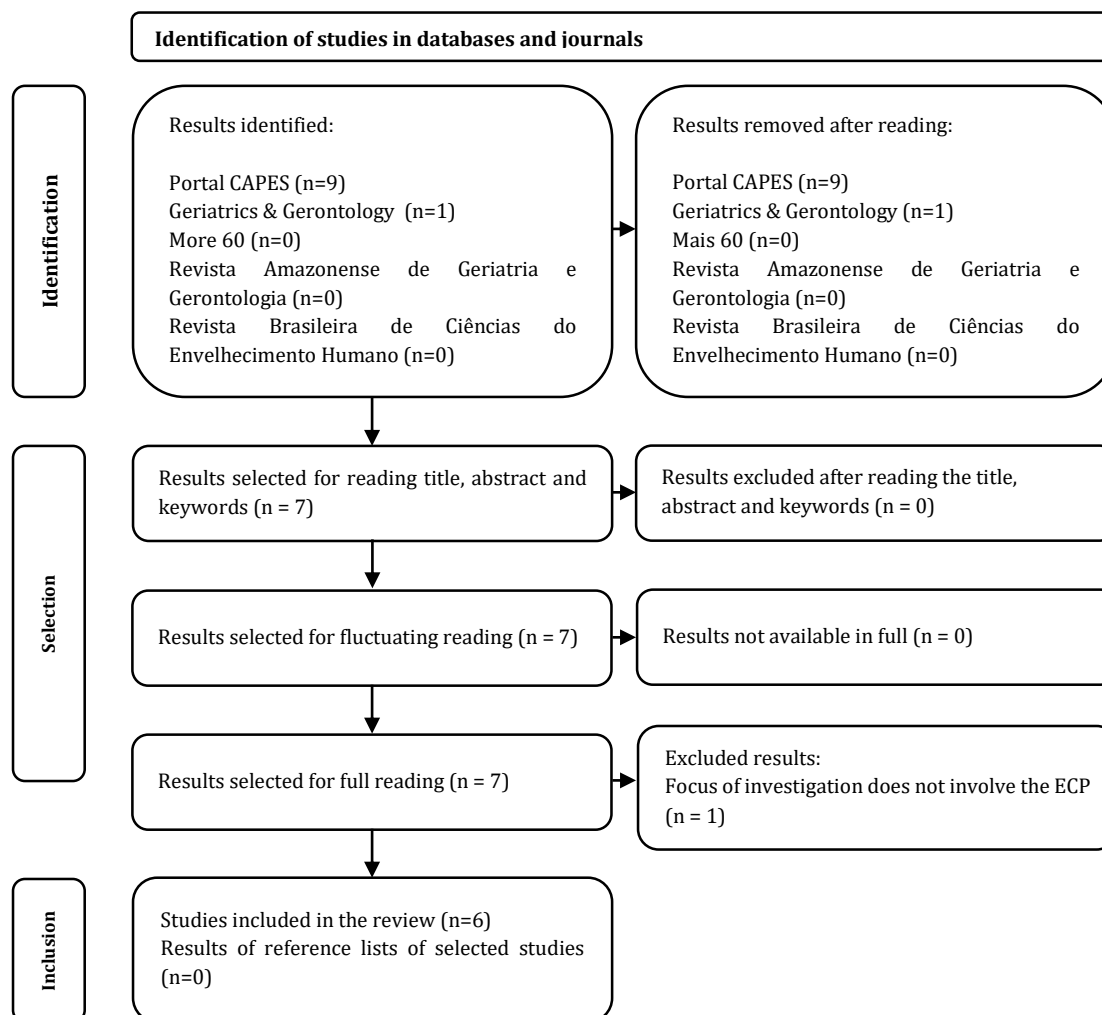
All selected articles underwent a quick reading by two researchers, who carried out the survey and selection independently. Disagreements would be handled by a third researcher, who would act as a judge. However, it should be noted that there were no disagreements. The set of selected articles then underwent a full reading. If there were still any items at this stage that did not meet the criteria, they would be excluded, which was also not the case. Next, the selected articles underwent data extraction and analysis.

According to Peters *et al.*<sup>14</sup>, the data extraction stage “provides the reader with a logical and descriptive synthesis of the results aligned with the objective(s) and question(s) of the scoping review” (p. 420). Thus, the following information was taken from the analyzed studies: 1) Title; 2) Author(s); 3) Year of publication; 4) Institution to which the authors are affiliated; 5) Authors’ area of expertise; 6) Research objective(s); 7) Population and sample size (if applicable); 6) Method(s); 7) Results; and 8) Findings relevant to the guiding question(s) of the scoping review. It is worth noting that data extraction was also performed independently, still on the Parsifal platform. Again, there was no disagreement in the selected material.

## RESULTS

The survey initially resulted in 10 articles. Of these, six articles were included in the review and four were excluded. Three of them were duplicate documents. In the full reading phase, the last article was excluded because it did not directly address the ECP, but only mentioned it. The search process is detailed below, in the PRISMA flowchart (Figure 1).

**Figure 1.** PRISMA flowchart of scoping review on the Elderly Caregiver Program in the CAPES Portal databases and in specialized Brazilian journals. São Paulo/SP, Brazil, 2022.



### Characterization of results regarding authorship and year of publication

The articles selected for the scoping review were organized according to the year of publication, in ascending chronological order. They were also classified based on authors' data, such as the institution to which they are affiliated and their areas of study. Table 1 shows this.

The timeline of the list of included articles starts in 2013<sup>16</sup>, passing through three published in 2014<sup>17, 18, 19</sup> and two more recent ones dating from 2020 and 2021<sup>20, 21</sup>. In other words, there is a gap of five years between the institutionalization of the ECP and the first publication in the databases and journals listed for this study. A gap in publications on the subject between 2015 and 2019 is also observed.

**Table 1.** Studies included in the scoping review on the Elderly Caregiver Program, year of publication, authors and respective institutions and areas of study. São Paulo, 2022.

Authors	Year of Publishing	Titles	Authors' Institutions	Authors' field of study
Faria <i>et al.</i>	2013	Epidemiological profile of elderly included in the Elderly People Accompanying Program ( <i>Programa Acompanhante de Idosos - PAI</i> )	Universidade Nove de Julho; Universidade de Santo Amaro	Public Health, Nursing, Medicine
Batista <i>et al.</i>	2014	Formal caregivers of older adults: reflection about their practice	Universidade de São Paulo	Occupational Therapy
Ferreira <i>et al.</i>	2014	Aged care services and home health care and institutional strategies	Centro Universitário São Camilo; Secretaria Municipal de Saúde de São Paulo	Public Health
Rodrigues <i>et al.</i>	2014	The relevance of Immunization for Longevity and consent of the "Senior Companion Program"	Associação Saúde da Família, em parceria com a Secretaria Municipal de Saúde de São Paulo; Pontifícia Universidade Católica de São Paulo (PUC-SP)	Public Health, Gerontology, Social Services, Anthropology
Andrade <i>et al.</i>	2020	Health profile of older adults assisted by the Elderly Caregiver Program of Health Care Network of the City of São Paulo	Universidade de São Paulo; Secretaria Municipal de Saúde	Gerontology
Minayo <i>et al.</i>	2021	Support policies for dependent older adults: Europe and Brazil	Escola Nacional de Saúde Pública Sérgio Arouca, Fiocruz; Universidade de Brasília; Universidade Federal de São Paulo	Public Health, Social Sciences, Nursing

Regarding areas of activity of the authors of the studies, most were professionals from the field of Public Health (n=4), followed by other professionals in the health area: Nursing, Medicine and Occupational Therapy. It was also observed that the subject interested researchers with training in social sciences and social work<sup>19, 21</sup>; and two articles included researchers in the field of gerontology<sup>19, 20</sup>.

Regarding the institutions to which the authors of the selected studies are linked, it can be seen that the articles are, in their entirety, linked to higher education organizations, both public<sup>17,20,21</sup> and private<sup>16,18,19</sup>. Three of these studies were conducted in partnership with researchers from the Municipal Health Department of São Paulo itself. With the exception of one study<sup>21</sup>, all the institutions are from the state of São Paulo.



## Characterization of the researched production in terms of objectives, populations investigated and main results

The studies aimed to analyze different aspects of the Program. In general, it can be said that analyses were made based on three types of variables: a) the profile of the elderly people served by the ECP; b) the perception of the Program by the people involved in it (professionals and users); and c) the context of home care policies in which the ECP is situated, as shown in Table 2.

**Table 2.** Objectives, populations and results of the publications included in the scoping review on the Elderly Caregiver Program. São Paulo/SP, Brazil, 2022.

Artigo	Objetive	Population	Main results
<b>Faria et al., 2013</b>	Characterize the epidemiological profile of the elderly included in the Elderly Caregiver Program	100 medical records of elderly people assisted	The contribution of the ECP to health promotion and reduction of hospitalizations was observed in the last year
<b>Batista et al., 2014</b>	Understand the functions of elderly caregivers and contribute to the debate about the consolidation of this professional practice	11 caregivers of elderly people	Caregivers reported a lack of clarity about the duties pertinent to their role
<b>Ferreira et al., 2014</b>	Describe and compare the home care services, Elderly Caregiver Program and long-term care facilities for the elderly	Publications in the electronic databases SciELO and LILACS from 1997 to 2012	32 texts included. AD and ECP are advantageous because they value the maintenance of family and community in the environment
<b>Rodrigues et al., 2014</b>	Report the team's action in raising awareness about vaccination for Influenza	108 people assisted by the Program, including elderly people and their families	Program inspires trust and credibility, contributing to adherence to vaccination
<b>Andrade et al., 2020</b>	Analyze the health profile of elderly people living in the community, according to gender, registered in the Program	Medical records of 535 elderly people assisted by ten ECP teams	Elderly people predominantly female, 76.2 years of age on average, negative self-rated health, sensory losses, impairment of IADLs and signs of mood changes
<b>Minayo et al., 2021</b>	Analyze the content and strategies that guided the formulation of "dependency policies" in some European states, seeking guidance for carrying out actions in Brazil	Official documents and scientific articles that describe and analyze the institutionalization of the proposals	Countries that are successful in supporting dependent elderly people balance public, private, social and family responsibilities; keep the elderly in the community; invest in family caregivers (education, support, financing)

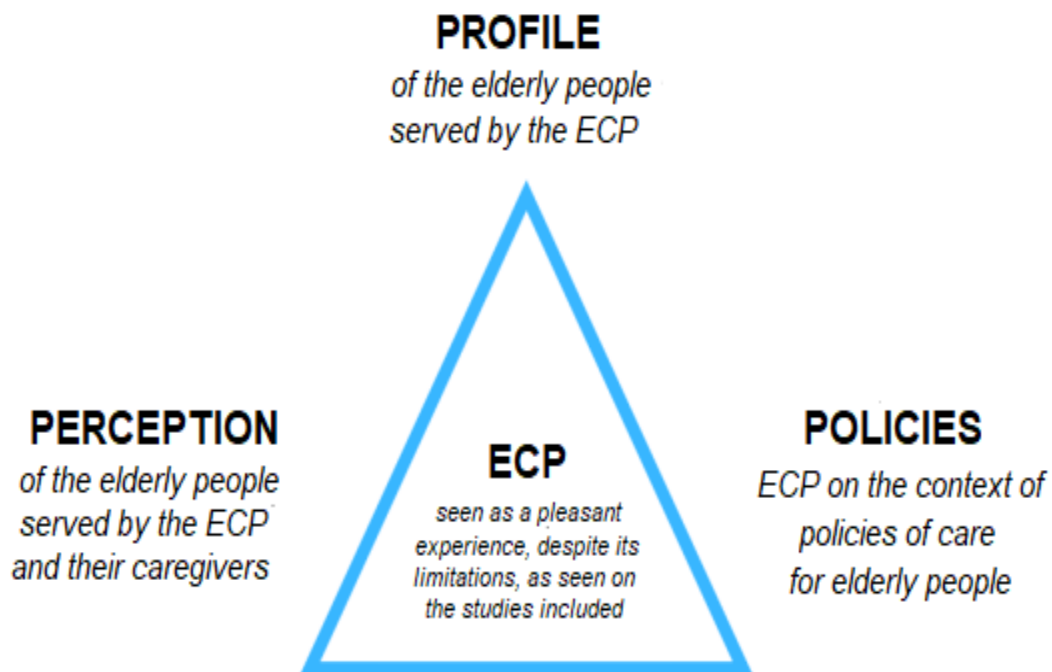
One of the studies<sup>18</sup> conducted a non-exhaustive review of the ECP, as well as other types of Home Care and LTCFs, seeking to compare them. However, the results included on the Program were only its Guiding Document<sup>22</sup>, a book chapter and a master's dissertation, materials that do not meet the inclusion criteria of this review. In any case, the researchers characterized the ECP as "a Program with easy social technology and favors implementation in

other locations (...) allowing people to remain in the community for longer exercising their citizenship rights”<sup>18</sup> (p. 924).

Figure 2 presents a summary of the results achieved by the analysis of the scientific production surveyed. In general, they point to a positive view regarding the Elderly Caregiver Program. The initiative is seen as a way to stimulate education and health promotion both with more specific directions, such as adherence to the influenza vaccination campaign<sup>19</sup> and for more general issues, such as the prevention of illnesses and hospitalization<sup>16</sup>.

The ECP is also seen in a positive light when included in a scenario of discussion of public policies for assistance to the elderly<sup>18,21</sup>. In both cases, the relevance of such a Program in promoting better living conditions for the population of interest is highlighted.

**Figure 2.** Summary of the results of the scoping review on the Elderly Caregiver Program. São Paulo/SP, Brazil, 2022.



## DISCUSSION

The studies on the profile of the elderly individuals included in the review reveal indicators such as multimorbidity and difficulty in performing Activities of Daily Living (ADLs), both basic and instrumental. Faria *et al.*<sup>16</sup> analyzed the epidemiological profile of elderly individuals included in the Program and served by a Basic Health Unit (n=100), while Andrade *et al.*<sup>20</sup> described the health profile of elderly individuals served by ten ECP teams from the Southern Regional Health Coordination (n=535). The first group of researchers found a prevalence of 36% of high functional dependence in the sample studied. The second group of researchers, seven years later, described that 68.4% of the elderly individuals needed help to perform at least one Instrumental Activity of Daily Living (IADL), such as handling money and activities performed outside the home.

One of the criteria for inclusion in the ECP is dependence to perform ADLs. Thus, it is expected that this variable will present a high prevalence in the samples studied. However, considering that one of the main fronts of the program is the attempt to keep the elderly in their communities, one of the challenges of the actions is precisely the preservation and recovery of the capacity to carry out these activities among those involved, which are essential for community life.

The results obtained by two studies analyzed that investigated the perception of the so-called stakeholders of the Program addressed the view of the caregivers of the elderly<sup>17</sup> and of the elderly people served<sup>19</sup>. Batista *et al.*<sup>17</sup>, based on the organization of focus group sessions with 11 caregivers, revealed the lack of outline and clarity regarding the professional role of the caregiver. These workers reported that there were differences in the role of each of them. In other words, there were services, especially domestic ones, that some performed while others believed that they were not their responsibility. Furthermore, they felt that a “caregiver manual” (p.737) was missing, which would standardize the service and complement the Program's guiding document<sup>17</sup>.

This study was conducted before the publication of the updated Program Guiding Document<sup>1</sup> in 2016. A brief comparison between this and the previous version of the document<sup>22</sup> in the section on the caregiver's responsibilities and profile (p. 44) did not find any substantial differences. However, one change caught our attention: in 2012, one of the items included “offering assistance with environmental and personal hygiene care” (p. 45), while in 2016 the guidance was to “perform actions in domestic care related to environmental and personal hygiene, when necessary” (p. 55).

A similar challenge was faced by professionals from a program of the same nature as ECP, *Maior Cuidado*, an initiative of the city of Belo Horizonte (MG/Brazil)<sup>23</sup>. Implemented in 2011, it offers community care to elderly people in situations of social vulnerability and fragility, dependent and semi-dependent. Its particularity lies in its intersectoral approach: it is located in the articulation between the Municipal Departments of Social Assistance and Health<sup>23</sup>.

Based on focus groups with professionals, Aredes *et al.*<sup>24</sup> described that the program's limitations included, among other factors, the lack of clarity regarding the duties of caregivers hired by the Program, who are generally charged if they do not perform domestic tasks. They also reported the perception of these professionals regarding the lack of standardization of the service.

The second article included in this review that assessed perceptions of the Program had a more targeted objective: to report on the contribution of the ECP team to adherence to vaccination for Influenza<sup>19</sup>. Based on open interviews with 108 ECP users from a Basic Health Unit, it was possible to observe that the work of professionals constitutes a "facilitator in adherence" (p.43), including by helping Community Health Agents identify and transport those people who are unable to go to the units in search of immunization.

Both the studies that focused on the profile and those that assessed perceptions of the Program are essential for its improvement as a public policy, since they support its formulators and organizers in decision-making<sup>25</sup>. However, they still represent a timid scientific production - only six articles were included in the review.

There is still a lack of studies that assess the impact and scope of the ECP in changing outcome indicators. No studies were found in the survey that brought these data to light. In this way, the systematic production of more information that may contribute to the evaluation of the program and possible developments, such as its expansion, is also encouraged. Research already conducted may contribute to the design of new studies.

The creation of public policies aimed at caring for the frail elderly population in a context of heterogeneous experiences of aging is characterized as a great challenge<sup>26</sup>. In this sense, situating the ECP in this scenario is understood as an investment in the clarity of its relevance. The aim is to inspire the formulation of initiatives of the same nature that may benefit more and more people. This is what the third direction of the results found in this review deals with.

One of the studies included in this review situates the ECP in the context of the elderly care network in Brazil, along with Home Care (HC) strategies and LTCFs<sup>18</sup>. Based on the review, these researchers dedicated themselves to pointing out the differences and similarities

between these types of care. In the study, the ECP appears as an alternative to institutionalization. From the perspective of the Integrated Long-Term Care Continuum<sup>11</sup> and as a Community-Based Aging<sup>27</sup> and Person-Centered Integrated Care<sup>12</sup> program, the ECP would be a type of care prior to LTCFs, not exactly an alternative. In this way, the hope is to optimize the supply of places in institutions of the Brazilian Unified Social Assistance System (*Sistema Unificado de Assistência Social - SUAS*), granting access to those who need them. Furthermore, the mandatory presence of a caregiver, formal or informal, for the inclusion of elderly patients in HC programs, articulated through the Home Care Network (HCN) of the Unified Health System (SUS), was the main difference between this modality and the ECP<sup>18</sup>. In the Program, the presence of a caregiver is not necessary, which contributes to a greater reach and possibly greater benefit of the strategy. This is because, in the city of São Paulo, according to data from the Health, Well-Being and Aging Study (*Saúde, Bem Estar e Envelhecimento - SABE*)<sup>28</sup> (n=1,399), 46.1% of elderly people who lived alone presented pre-frailty, according to the criteria of Fried *et al.*<sup>29</sup>.

Furthermore, 7.5% of the sample who lived alone were considered frail. In the studies included on the profile of the elderly served by the ECP, 24%<sup>16</sup> and 25.8%<sup>20</sup> of the elderly lived alone. The housing configuration is a complex indicator, since it can both prevent and aggravate situations of frailty and social vulnerability.

Minayo *et al.*<sup>21</sup>, the second article included in the third group of studies surveyed, situates the Program in an international context, especially in the European continent. The fundamental role of the State in establishing the Welfare State was highlighted, in a notion that care for dependent people should not be based on charity, but rather on the articulation of policies that aim to “guarantee human dignity” (p.139). This state intervention will occur to a greater or lesser extent, depending on the social security models of each country in the European Union. When compared with the Brazilian reality, the article shows that, in the country, much of the care still takes place within the family, with little or no public support. This happens despite the existence of legal and regulatory provisions that regulate social and health care for the elderly, especially those in situations of fragility and vulnerability. The ECP and the Maior Cuidado Program are described as “good multidisciplinary practices focused on care for dependent people” (p. 142). Although they are still localized actions, they have “potential for universalization through public policy” (p. 143).

The three directions in which the results obtained point, therefore, converge in the finding that the ECP, although local and with challenges, is dedicated to filling gaps in care for the elderly in Brazil, namely: the scarcity of public policies aimed at home care for frail elderly

people, as well as the implementation of existing policies. In this sense, it reveals the existence of a reality in which this responsibility usually falls on the family or community, anchored in a model of informal and unpaid work, especially on the part of middle-aged women<sup>26, 30</sup>.

## CONCLUSION

This scoping review of the Elderly Caregiver Program indicated that the initiative is a model for the public provision of community care to frail and vulnerable elderly people.

Regarding the aspects already addressed in the scientific production in Portuguese about this initiative, the selected publications indicate results marked by three main directions: 1) the description and evaluation of the profile of the elderly people served; 2) the perception of the Program's involved parties - both elderly people and caregivers; and 3) the contextualization of the Program in a scenario of long-term care policies for the elderly.

On all fronts, the ECP is positively perceived. It appears as an achievement in public health, since it seeks to respond to the challenges imposed by the accelerated and unequal process of population aging in Brazil.

The main challenges of the Program highlighted by the studies were: 1) the need to better define the role of caregivers, since it is a new occupation, without many precedents; 2) maintaining the autonomy and independence of the elderly included in the ECP, which is essential for community life; and 3) intersectoral coordination to enhance the actions.

The program's potential lies in its capacity for expansion and universalization. This is because the ECP would complement long-term care policies for the elderly, and is considered a good practice for this modality.

The knowledge gaps regarding the ECP are located in the scarcity of scientific production that evaluates results before and after inclusion in the Program. With information of this nature, it would be possible to support arguments based on this evidence that would contribute to the implementation of the aforementioned potentialities.

With regard to the characterization of the scientific knowledge already produced in Portuguese about the ECP, this scoping review raised 10 articles on the subject, of which 6 were included for data extraction and analysis. Of the production considered, most of the articles were published by professionals in the public health area, from the state of São Paulo. Half of the articles were produced by at least one author linked to the SMS/SP. The articles were published between 2013 and 2020.

As limitations of this study, we can mention its restriction regarding the nature of the prioritized materials. By not including other types of sources, such as theses and dissertations

databases, as well as the collection of abstracts presented by SMS/SP on the Program, it is clear that a portion of the production was not analyzed.

However, considering the size of the scope outlined, in terms of bases and time period, it is possible to notice that production is still modest and local. Even so, in its almost 14 years as a municipal public policy, it is recognized in the texts obtained as an innovative Program and relevant to the current Brazilian and global challenges of aging. However, it still needs greater attention from the scientific community that publishes in the selected sources, aiming at building a robust and varied production on the topic, the various domains of the initiative and its developments.

This finding does not in any way diminish the relevance of the ECP to what it provides, much less the production found here. Quite the contrary: the experiences reported in the selected articles demonstrate the positive impact of the work of the Program teams on the lives of elderly people.

Thus, we hope that this review will stimulate the production of scientific knowledge about the Program. In particular, we hope that new studies of a mixed methodological nature will be able to assess the broad impact on the lives of the population involved and living in the city of São Paulo; as it is believed that constant investment in research can be one of the pillars that can expand and maintain the ECP in Brazil.

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**Associated Publisher:** Vania Del Arco Paschoal

**Conflict of Interests:** the authors declared there is no conflict of interests

**Financing :** none

**CONTRIBUTIONS:**

Concept – Lopes A, Santos ST,

Investigation – Lopes MBA, Santos ST,

Writing – first draft – Lopes A, Lopes MBA, Marcucci RMB, Santos ST,

Writing – revision and editing - Lopes A, Lopes MBA, Marcucci RMB, Melo RC

**How to cite this article (Vancouver)**

Santos ST, Lopes MBA, Marcucci RMB, Melo RC, Lopes A. Elderly Caregiver Program: a scoping review. Rev Fam, Ciclos Vida Saúde Contexto Soc. [Internet]. 2024 [cited in *insert day, month and year of access*]; 12(3):e7500. DOI: <https://doi.org/10.18554/refacs.v12i3.7500>

**How to cite this article (ABNT)**

SANTOS, S. T. dos; LOPES, M. B. de A.; MARCUCCI, R. M. B.; MELO, R. C. de; LOPES, A. Elderly Caregiver Program: a scoping review. **Revista Família, Ciclos Vida e Saúde no Contexto Social**, Uberaba, MG, v. 12, n. 3, e7500, 2024. DOI: <https://doi.org/10.18554/refacs.v12i3.7500>. Access in: *insert day, month and year of access*

**How to cite this article (APA)**

SANTOS, S. T., LOPES, M. B. A., MARCUCCI, R. M. B., MELO, R. C., & LOPES, A. (2024). Elderly Caregiver Program: a scoping review. Rev. Fam., Ciclos Vida Saúde Contexto Soc., 12(3), e7500. Retrieved in *insert day, month and year of access* from <https://doi.org/10.18554/refacs.v12i3.7500>



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