



14^a Conferência Internacional de Investigação em Enfermagem

14th International Conference of Nursing Research

**A translação do conhecimento de
enfermagem: Uma força para a mudança
na prática clínica!**

***Translational nursing knowledge: A force
for change in clinical practice!***

Lisboa, 10 a 12 de Maio de 2017

Fundação Calouste Gulbenkian

Avenida de Berna

Lisboa – Portugal

Lisbon, 10 to 12 May 2017

Calouste Gulbenkian Foundation

Berna Avenue

Lisbon - Portugal

ORGANIZAÇÃO | ORGANIZATION
Associação Portuguesa de Enfermeiros



INSCRIÇÕES | FURTHER INFORMATION

Associação Portuguesa de Enfermeiros

Estrada do Paço do Lumiar, 57 - B.

1600-543 Lisboa - Portugal

e-mail: investigaenf@gmail.com

www.apenfermeiros.pt

© 2017

ISBN 978 – 989 – 99867 – 0 – 1

Título: 14ª Conferência Internacional de Investigação em Enfermagem. A translação do conhecimento em enfermagem: Uma força para a mudança na prática clínica!

(Org.) Oliveira, Helga | Barros, Irina | Curado, Maria Alice | Fernandes, João | Gomes, José

Editor: APE – Associação Portuguesa de Enfermeiros

ÍNDICE | SUMMARY

COMISSÕES COMMITTEE	7
COMISSÃO ORGANIZADORA ORGANIZATION COMMITTEE	7
COMISSÃO CIENTÍFICA SCIENTIFIC COMMITTEE.....	8
NOTA INTRODUTÓRIA INTRODUCTION	9
MENSAGEM DO PRESIDENTE DA COMISSÃO CIENTÍFICA	10
MESSAGE FROM THE PRESIDENT OF SCIENTIFIC COMMITTEE	11
PROGRAMA PROGRAM	12
PROGRAMA DAS COMUNICAÇÕES LIVRES 	13
ORAL PRESENTATIONS PROGRAM	13
PROGRAMA DOS POSTERS POSTERS PROGRAM	22
RESUMOS DAS CONFERÊNCIAS 	24
CONFERENCE ABSTRACTS	24
MEASUREMENT AND HEALTH ASSESSMENT SCALES OF NEONATAL AND PEDIATRIC POPULATIONS. A MONTE CARLO SIMULATION STUDY WITH ORDINAL VARIABLES	24
FROM CONCLUSIONS TO ACTION: DISSEMINATION AND IMPLEMENTATION	27
PRÉMIO ENFERMEIRA MARÍLIA VITERBO DE FREITAS	29
MARÍLIA VITERBO DE FREITAS AWARD.....	30
RESUMOS DAS COMUNICAÇÕES ORAIS 	32
ORAL PRESENTATIONS ABSTRACTS	32
MEN SEXUAL HEALTH IN PORTUGAL: GAPS AND PROXIMITIES WITH HEALTH CARE PROFESSIONALS	32
AGREEMENT PLAN FOR SELF-CARE OF PATIENTS WITH DIABETES USING INSULIN IN PRIMARY CARE IN SOUTHERN BRAZIL	33
DIAGNOSTICS OF NURSING FREQUENTLY IN NURSING CONSULTATIONS TO DIABETES IN THE USE OF INSULIN IN PRIMARY HEALTH CARE	33
VIOLENCE IN THE MEDIA AND ITS REFLEXES IN DOMESTIC LIFE.....	34
MENTAL HEALTH AND SEXUAL SELF-CONCEPT: INTERVENTION IN NURSING	35
SEXUAL HEALTH AND REPRODUCTION LITERACY, THE HUMAN PAPILOMA VIRUS (HPV) AND CERVICAL CANCER (CC), AMONG HIGHER EDUCATION HEALTH STUDENTS.....	36
THE FAMILY CONTEXT AND SLEEP PATTERNS OF CHILDREN AND ADOLESCENTS.....	37
SEXUALITIES ON AGEING: CONTRIBUTIONS TO HEALTH CARE	38
EVALUATION OF SAFETY CULTURE IN THE OPERATING ROOM: NURSES PERCEPTION	38
THE GROUP OF SELF-CARE IN HEALTH SELF-MANAGEMENT OF THE PERSON WITH DIABETES USING INSULIN	40
DIFFICULTIES AND NEEDS OF PARENTS IN POSITIVE PARENTING PRACTICE	40

NURSING CARE IN FIRST-EPISEDE PSYCHOTIC PATIENTS: A QUALITATIVE STUDY	41
THE USE OF CLINICAL SUPERVISION BY NURSES WHO WORK IN MENTAL HEALTH: INTEGRATIVE LITERATURE REVIEW	42
IMPORTANCE OF SUPPORT HOUSES IN THE EXPERIENCE OF CHILDREN WITH CANCER UNDER PALLIATIVE CARE: A SOCIAL ISSUE	43
ADHERENCE OF HEALTHCARE WORKERS TO PREVENTION MEASURES OF NOSOCOMIAL INFECTIONS:PROBLEMS AND IMPLEMENTATION STRATEGIES.....	44
NURSING DIAGNOSES ON WOMEN'S HEALTH IN PRIMARY CARE IN SOUTHERN BRAZIL	45
DAMAGE REDUCTION IN ATTENDANCE OF POPULACION IN STREET SITUATION	46
RECEPTION OF TRAVESTITES BY NURSING IN HOSPITALS	46
CONCEPTIONS OF ELDERLY ON THE PROCESS OF HUMAN AGING: BE AGED OR BE OLD?.....	47
TRIANGULATION OF METHODS IN SOCIAL REPRESENTATION IN THE AGING PROCESS AFTER 65 YEARS: METHODOLOGICAL STRATEGY	48
WHAT DOES IT DO FALLING AT HOUSE IN THE ELDERLY PEOPLE SOCIAL CONCEPTION?	49
DEPRESSIVE SYMPTOMATOLOGY RELATED TO UNEMPLOYMENT IN NURSES OF A BRAZILIAN REGION	50
EDUCATION AND NURSES PERFORMANCE IN OBESITY COMBAT	51
ULCERS OF INFERIOR MEMBERS: DATA INVESTIGATION OF CASES IN ASSIS, A CITY IN THE STATE OF SÃO PAULO, BRAZIL.....	52
DEPRESSIVE SYMPTOMS IN NURSES OF THE FAMILY HEALTH STRATEGY IN THE CITY OF GUARULHOS	53
BEHAVIORAL STRATEGIES IN ADHERENCE TO ORAL ANTIDIABETIC DRUGS AND THEIR EFFECTS ON DIABETES-RELATED DISTRESS	53
EFFECT OF BEHAVIORAL STRATEGIES IN ADHERENCE TO ORAL ANTIDIABETIC DRUGS: RANDOMIZED CONTROLLED TRIAL..	54
EFFECT OF NONPHARMACOLOGICAL INTERVENTIONS ON SLEEP QUALITY AND EMOTIONAL STRESS IN PEOPLE WITH TYPE 2 DIABETES.....	55
EVALUATION OF SWALLOWING IN A STROKE UNIT (UAVC).....	56
MEASURING COMPLIANCE WITH THE BABY-FRIENDLY HOSPITAL INITIATIVE FOR NEONATAL WARDS GUIDED BY KNOWLEDGE TRANSLATION FRAMEWORK.....	57
THE IMPACT OF BABY-FRIENDLY HOSPITAL INITIATIVE FOR NEONATAL WARDS GUIDED BY KNOWLEDGE TRANSLATION FRAMEWORK IN A BRAZILIAN NEONATAL UNIT	58
THE EMPOWERMENT AS A RESULT: NURSING CARE IN SELF MANAGEMENT'S CHRONIC DISEASE.....	59
EDUCATIONAL MATERIALS IN HEALTH: A NURSING INSTRUMENT IN THE PREVENTION OF HYPERTENSION AND DIABETES MELLITUS	60
HEALTH IN FOCUS: RESEARCH IN BASIC EDUCATION INTEGRATING NURSING AND A SCHOOL COMMUNITY IN THE METROPOLITAN REGION OF BELO HORIZONTE - MG –BRAZIL	60
EFFECTIVENESS OF A NURSING INTERVENTION IN SELF-MANAGEMENT OF SYMPTOMS	61
ADMINISTRATION OF CHEMOTHERAPY ANTI NEOPLASIC; NURSING INTERVENTION TO RELEAF SUFFERING	62
A PILOT STUDY OF IMPACT OF NURSES-LED WEANING PROTOCOL ON OUTCOMES OF MECHANICAL VENTILATION FOR CRITICALLY ILL PATIENTS AMONG PALESTINIAN HOSPITALS.....	63
CARING FOR FAMILIES IN THE EMERGENCY DEPARTMENT	64
PSYCHOTHERAPEUTIC INTERVENTION MODEL IN NURSING: A PILOT RANDOMIZED CONTROLLED TRIAL.....	65
SUPERVISING RELATIONS AND DEVELOPMENT OF SIGNIFICANT LEARNING OF NURSING STUDENTS – RESEARCH PROJECT ..	66
STRESS IN NURSES OF THE FAMILY HEALTH PROGRAM IN THE SOUTH OF MINAS GERAIS/BRASIL	67
THE NURSE AND THE USE OF PSYCHOMETRIC SCALES FOR THE DETECTION OF DEPRESSIVE SYMPTOMATOLOGY IN THE GENERAL POPULATION.....	68
FACTORS INFLUENCING THE DEVELOPMENT OF SELF-MANAGEMENT ON ADOLESCENTS WITH DIABETES TYPE 1: A SCOPING REVIEW	68
NURSING SUPPORT TO BREAST CANCER PATIENT'S QUALITY OF LIFE IN NORTH ESTONIAN MEDICAL CENTRE	69
THE INFLUENCE OF NANDA-I NURSING DIAGNOSES TRAINING ON PRACTICE IN HOME CARE NURSING.....	70
CONTINUED LONG-TERM INTEGRATED CARE UNIT AND MAINTENANCE AND THE SYMPTOMS OF EDMONTON AS A QUALITY INDICATOR, A RETROSPECTIVE STUDY	70
FAMILY HOME CARE: EXPERIENCING IN PEDIATRIC HEMATOPOIETIC STEM CELL POST TRANSPLANTATION.....	71
FORMAL THEORY FOR THE HOME CARE	72
DEPRESSIVE SYMPTOMOLOGY IN NURSES THAT ACT IN EMERGENCY SERVICES	73
PREVALENCE OF ACUTE TRANSFUSION REACTIONS IN A TEACHING HOSPITAL.....	74

VACCINATION ADHERENCE AMONG HOSPITAL CLEANING ASSISTANT OUTSOURCED IN A TEACHING HOSPITAL FROM SAO PAULO CITY	74
STRATEGIES FOR THE ELUCIDATION OF NURSING PROCEDURES IN RESPONSE TO BASIC HUMAN NEEDS TO THE INTENSIVE CARE UNIT.....	75
PATIENTS` EXPERIENCES AND NEEDS WITH LIFESTYLE COUNSELING IN TALLINN AND HARJUMAA FAMILY HEALTH CENTERS	76
EFFECT OF A NURSING INTERVENTION IN REDUCING THE BURDEN OF THE FAMILY CAREGIVER OF THE ELDERLY WITH DEPENDENCE AT HOME	77
NURSE PRACTITIONERS' PRACTICES AND CHALLENGES IN CHRONIC DISEASE MANAGEMENT IN QUEBEC	77
DEVELOPMENT OF THE EDUCATIONAL PROGRAM FOR PATIENTS WITH ACUTE CORONARY SYNDROME: PEPSCA-CARE	78
PROMOTING SELF-CARE IN HOSPITALIZED PATIENTS: EDUCATIONAL INTERVENTION PROGRAM.....	79
ANALYSIS OF ASSISTENCIAL PRACTICES OF NURSING TO THE NEWBORN WITH HYDROCEPHALY	80
RESEARCH INTO NURSING: KNOWLEDGE, ABILITIES AND ATTITUDES FOR EVIDENCE-BASED PRACTICE IN PRIMARY HEALTH CARE	81
FRAILITY SYNDROME IN ELDERLY ATTENDED IN AN OUTPATIENT SPECIALTY CLINIC.....	82
MASSAGE IN CHILDREN WITH CÂNCER: EFFECTIVENESS OF A PROTOCOL	83
WORKPLACE INCIVILITY AND BURNOUT AMONG PORTUGUESE HEALTHCARE PROFESSIONALS	83
MALE VISION ABOUT THE PERFORMANCE OF THE PROSTATE SURVEY	84
NURSING SAFE STAFF'S INFLUENCE IN THE PATIENTS AND NURSES RESULTS	84
OLDER ADULTS' PERSPECTIVES ON DRUG USE AND THEIR TRAJECTORIES: A GERONTOLOGICAL NURSING CONTRIBUTION	85
OLDER DRUG USERS, CARE DEMANDS AND THE HOSPITAL CONTEXT: A NURSING STUDY.....	86
SEXUALITY, OLDER ADULTS LIVING WITH HIV/AIDS AND NURSING	86
PATERNAL PERCEPTION RELATED TO THE PREMATURE BORNING AND HOSPITLIZATION	87
ANALYSIS OF THE EFFECTS OF REIKI THERAPY AS AN INTERVENTION IN THE HEALTH CARE OF THE ELDERLY – A SYSTEMATIC REVIEW	88
THE PROMOTION OF NURSING CARE FOR ELDERLY PEOPLE WITH BREAKTHROUGH PAIN: NURSING INTERVENTION IN A PAIN UNIT	89
I AM LIKE OTHERS EVEN THOUGH I AM DIFFERENT	90
PEDIATRIC PARTNERSHIP CARE: WHERE ARE WE AND WHERE SHOULD WE BE?	91
DYNAMIC MODEL OF FAMILY ASSESSMENT AND INTERVENTION: CASE STUDY	92
FAMILY PROCESS AND SYSTEMIC QUESTIONS: NEW WAYS OF FAMILY INTERVENTION IN PRIMARY HEALTH CARE	92
THE FAMILY NURSING HEALTH CARE AND THE INDICATORS OF HEALTH: NEW CHALLENGES FOR THE PRACTICE	93
NURSING DOCUMENTATION WITH FOCUS ON EMOTIONAL RESPONSES OF FAMILY CAREGIVERS OF THE HOSPITALIZED CHILD: FROM THE SPEECH TO REGISTRATION IN THE INFORMATIC SYSTEM	94
PROCESS OF MORAL DISTRESS IN THE PROFESSIONAL PRACTICE OF NURSES.....	95
PROFESSIONAL PRACTICE OF THE FAMILY HEALTH NURSE: UNRAVELING ETHICAL CHALLENGES.....	96
NURSING CONSULTATION IN PROMOTING SELF CARE FOR THE ELDERLY WITH CHRONIC PAIN IN A UNIT OF PAIN	96
EXPERIENCE OF FAMILIES AND TEENAGERS WITH DM TYPE 1 IN THE PUBLIC HEALTH OF A REGION IN SOUTHERN BRAZIL.....	97
USE OF FAMILY PLANNING RISK STRATIFICATION OF ATTENTION TO FAMILIES IN BLUMENAU, BRAZIL	98
THE PROMOTION OF THE AUTONOMY OF THE DEPENDENT PERSON FORSELF-CARE; A MODEL OF NURSING INTERVENTION IN LONG TERM CARE.....	99
IMPACT OF A PATIENT CARE BUNDLE FOR PAIN MANAGEMENT IN PEDIATRIC VENIPUNCTURE	100
MEANING OF THE EXPRESSIVE-INSTRUMENTAL-AFFECTIVE TOUCH FOR THE NURSES WHO WORK IN AN ADULT INTENSIVE CARE CENTER METROPOLITAN REGION OF BELO HORIZONTE – MG – BRAZIL	101
PUNCTION VEIN PERFORMED IN A BRAZILIAN PRIVATE INSTITUTION: STUDY OF CONVERGENT MIXED METHOD	102
SOCIAL REPRESENTATIONS OF PATIENTS ON HEMODIALYSIS USING ARTERIOVENOUS FISTULA: NURSING CARE EVIDENCE	103
SOCIAL REPRESENTATION OF USERS OF PRIMARY HEALTH CARE REGARDING VENIPUNCTURE SAFETY IN THE STRUCTURAL APPROACH	104
DEVELOPMENT PROJECT OF NURSING INTERVENTION PROGRAM FOR SELF-MANAGING FOOD/DIGESTIVE SYMPTOMS FOR THE PERSON WITH GASTRIC CANCER UNDERGOING SURGICAL INTERVENTION.....	105
FAMILY INTERVENTION STRATEGIES: PERCEIVED COMPETENCE OF NURSES IN PRIMARY HEALTH	105
THE DYNAMIC MODEL OF FAMILY ASSESSMENT AND INTERVENTION AND LEARNING PROCESS IN FAMILY HEALTH: FACTORS VALUED BY STUDENTS	106

Cunha, A. H. G. B. (2014). Hydrocephaly in childhood. (Hidrocefalia na infância). *Brazilian Magazine of Neurology and Psychiatry*, 18(2). Kliemann, S. E., & Rosemberg, S. (2005). Hydrocephaly derived in childhood: an epidemiologic-clinic study of 243 consecutive observations. (Hidrocefalia derivada na infância: um estudo clínico-epidemiológico de 243 observações consecutivas). *File Neuropsychiatry*, 63(2b).

Rocha, M. C. P., Carvalho, M. S. M., Fossa, A. M., Pedroso, G. E. R., & Rossato, L. M. (2015). Necessities and difficulties of families who live the experience of having a child with hydrocephaly. (Necessidades e dificuldades de famílias que vivenciam a experiência de ter uma criança com hidrocefalia). *Health in a Magazine (Saúde em Revista)*, 15(40), 49-66.

RESEARCH INTO NURSING: KNOWLEDGE, ABILITIES AND ATTITUDES FOR EVIDENCE-BASED PRACTICE IN PRIMARY HEALTH CARE

Luana Roberta Schneider; Rui Pedro Gomes Pereira; Lucimare Ferraz

In Primary Health Care (PHC), nurses develop promotion, prevention, recovering, and rehabilitation actions, as well as palliative care.¹ In order to be able to develop their activities following scientific advances; they need to overcome obstacles to keep updated continuously.² One of the main challenges is to train professionals who are competent to understand clinical studies and apply them according to the model of Evidence-Based Practice (EBP),³ defined as an approach that associates the best scientific evidence with clinical experience and patient's choice, developed with the purpose of decreasing mistakes and qualifying health work.⁴ When referring to PHC, particularly in the Brazilian nursing area, there is a scarcity of scientific research on EBP. This study aimed at discussing knowledge, abilities and attitudes of nurses in relation to research and EBP in PHC. Therefore, an investigation was carried out, having a qualitative and quantitative approach, with 44 nurses of PHC, in Chapecó, Santa Catarina, Brazil. Data was collected through questionnaire and focal group, between July and November, 2016. The questionnaire was culturally adapted to Portuguese Brazilian Language, called Questionnaire of Evidence-Based Practice and Clinical Effectiveness⁵ and a Script of Secondary Questions, developed by researchers. In the focal group, there were six nurses and the script presented questions about perception of EBP, sources and obstacles to carry out scientific research. To analyze the quantitative data, the software Statistical Package for the Social Sciences (SPSS®) was used; there were also calculations of position and dispersion measurements. Qualitative information was analyzed by content analysis. The Research Ethics Committee approved the research under number 1.573.371. Results showed that nurses, in spite of recognizing the importance of research and EBP, do not have abilities to produce and make use of scientific studies. They did not feel completely able to handle information technology, accessing and interpreting the articles acutely. In their practices in PHC, clinical experience is the main sign of their actions, considering their high workload, work organization and their deficiency in academic training as the main barriers to produce and make use of scientific information. It is really necessary to reflect on the aspects that involve research and EBP, in a perspective of not blaming the nurses, but of (re) thinking the professional training process and the importance of research in graduation and in health services.

References:

1. Andrade LOM, Bueno ICHC, Bezerra RC, Silva RM. (2012). Atenção Primária à Saúde e a Estratégia Saúde da Família. In Campos GW S, Bonfim JRA, Minayo MCS, Akerman M, Junior MD, Carvalho YM,

- organizadores. Tratado de saúde coletiva (pp 845-901). São Paulo (SP): Hucitec.
2. Pereira, RPG. (2016) Enfermagem Baseada na Evidência: Um desafio, uma oportunidade. In Vieira CM, Sousa C, coordenadores. Cuidados de Enfermagem de Reabilitação à Pessoa ao Longo da Vida (pp 101-111). Loures (PT): Lusodidacta.
 3. Barbosa D, Taminato M, Fram D, Belasco A. (2014). Enfermagem baseada em evidências (pp 02-07). São Paulo (SP): Atheneu.
 4. Sackett DL, Rosenberg W M, Gray JA, Haynes RB, Richardson WS. (1996). Evidence based medicine: what it is and what it isn't. British Medical Journal, 312:71-2. Retrieved from: <http://www.bmj.com/content/312/7023/71?variant=extract&eaf=>.
 5. Rospowowski K, Alexandre NMC, Cornélio ME. (2014) Adaptação cultural para o Brasil e desempenho psicométrico do "Questionário de Prática Baseada em Evidências". Acta paulista de Enfermagem, 27 (5), 405-411. Disponível em: dx.doi.org/10.1590/1982-0194201400068.

FRAILTY SYNDROME IN ELDERLY ATTENDED IN AN OUTPATIENT SPECIALTY CLINIC

Luciane Patrícia Andreani Cabral; Clóris Regina Blanski Grden; Pollyanna Kássia de Oliveira Borges; Vanessa Regina de Andrade; Jacy Aurélio Vieira de Sousa; Carlos Eduardo Coradassi

The aging process contributes to the increase of chronic diseases and disabilities, highlighting the frailty that can be defined as a syndrome which shows many causes and is characterized by a decrease in strength, endurance and physiological function, collaborating to make the individual more vulnerable to dependence and/or death (MORLEY, et al., 2013). Studies on frailty have aroused interest in researchers in the area, health professionals and health managers, as it is a public health problem with significant repercussion on the high costs of assistance. Researchers point out that the frailty syndrome is more frequent in women (CURCIO; HENAO; GOMEZ, 2014; CHEN et al., 2015), which are more exposed to unfavorable physical, psychological and social conditions, stress factors that interfere in the state of general health and contribute to the increase of accumulated deficits throughout life. In view of the foregoing, this study aimed to evaluate the frailty syndrome in the elderly women attended in the ambulatory of a teaching hospital. This cross-sectional study was carried out with 252 elderly women who were waiting for appointment in an outpatient clinic between October 2015 and March 2016. It was applied the Edmonton Frailty Scale (ROLFSON et al., 2006) for data collection. These data were analyzed by *Stata* software version 12 and described by measures of frequency, mean and standard deviation (SO). The association between variables was verified through simple linear regression (Fisher tests and Student's t), significance level of $p < 0,05$. The project received a favorable feedback from the Ethics Committee on Research in Human Beings, registry CAAE: 34905214.0.0000.0105. The results showed a predominance of married women (44.4%), low education (50%), minimum wage (68.6%), and residence with family members (51%). Regarding the frailty syndrome, 60 (23.8%) of the elderly women were considered non-fragile, 77 (30.6%) apparently vulnerable to frailty, 73 (29%) had a slight frailty, 33 (13.1%) presented moderate frailty and 9 (3.6%) presented severe frailty. There was a significant association between frailty and the variables age ($p = 0.021$), low level of education ($p = 0.001$), and residence with family members ($p = 0.013$). It was concluded that almost half of the sample had some kind of frailty, which shows the importance of the early