

# Nursing care for people living with HIV/AIDS: reflection in the light of self-care theory

**RESUMO |** Objetivo: Analisar as evidências científicas de como a Teoria do Autocuidado pode ser utilizada na assistência de enfermagem ao paciente com HIV/AIDS. Método: Revisão integrativa da literatura realizada entre agosto e setembro de 2022 mediante a Biblioteca Virtual em Saúde (BVS) /Biblioteca Regional de Medicina (BIREME) e MEDLINE/PUBMED por meio dos descritores: Autocuidado (Self Care); HIV (HIV) e Teoria de Enfermagem (Nursing Theory). Foram selecionados para a revisão 10 artigos, através de buscas realizadas em intervalo atemporal. Resultados: A teoria do autocuidado possibilita uma análise da construção ou mudança de uma realidade ao paciente com HIV/AIDS, cujo propósito é a apreensão de atitudes de práticas que proporcionem a autonomia e, promova uma saudável relação com o outro, social e com o meio. Conclusão: A teoria do autocuidado viabiliza subsídios teóricos proporcionando ao enfermeiro a realização de um atendimento qualificado e que atende as necessidades individuais dos pacientes com HIV/AIDS.

**Descritores:** Autocuidado; HIV; Teoria de enfermagem.

**ABSTRACT |** Objective: To analyze the scientific evidence of how the Self-Care Theory can be used in nursing care for patients with HIV/AIDS. Method: Integrative literature review carried out between August and September 2022 using the Virtual Health Library (VHL) / Regional Library of Medicine (BIREME) and MEDLINE/PUBMED using the descriptors: Self-Care; HIV (HIV) and Nursing Theory. Ten articles were selected for the review, through search carried out in a timeless interval. Results: The theory of self-care enables an analysis of the construction or change of a reality for the patient with HIV/AIDS, whose purpose is to apprehend attitudes of practices that provide autonomy and promote a healthy relationship with the other, social and with the quite. Conclusion: The theory of self-care provides theoretical support, providing nurses with qualified care that meets the individual needs of patients with HIV/AIDS.

**Keywords:** Self Care; HIV; Nursing Theory.

**RESUMEN |** Objetivo: Analizar las evidencias científicas de cómo la Teoría del Autocuidado puede ser utilizada en el cuidado de enfermería a pacientes con VIH/SIDA. Método: Revisión integrativa de la literatura realizada entre agosto y septiembre de 2022 a través de la Biblioteca Virtual en Salud (BVS) / Biblioteca Regional de Medicina (BIREME) y MEDLINE/PUBMED utilizando los descriptores: Autocuidado; VIH (VIH) y Teoría de Enfermería. Diez artículos fueron seleccionados para la revisión, a través de búsquedas realizadas en un intervalo atemporal. Resultados: La teoría del autocuidado posibilita un análisis de la construcción o cambio de una realidad para el paciente con VIH/SIDA, cuyo propósito es aprehender actitudes de prácticas que brindan autonomía y promuevan una sana relación con el otro, social y con el bastante. Conclusión: La teoría del autocuidado proporciona sustento teórico, proporcionando a los enfermeros cuidados calificados que atiendan las necesidades individuales de los pacientes con VIH/SIDA.

**Palabras claves:** Autocuidado; VIH; Teoría de Enfermería.

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**INTRODUCTION**

The Human Immunodeficiency Virus (HIV) causes the Acquired Immunodeficiency Syndrome (AIDS), responsible for the gradual deterioration of the immune system, mainly affecting CD4+ T lymphocytes (LT), macrophages and dendritic cells.<sup>(1)</sup> The infection causes a reduction in the number of LT-CD4+ through several mechanisms, including apoptosis of bystander cells, viral death of infected cells and the death of LT-CD4+ through CD8+ cytotoxic T lymphocytes that identify infected cells. When the number of LT-CD4+ drops below the acceptable threshold, the body loses cell-mediated immunity, becoming progressively more susceptible to opportunistic infections.<sup>(2)</sup>

According to data from the 2021 HIV/AIDS Epidemiological Bulletin, released by the Ministry of Health (MS), 13,501 new cases were recorded in 2021 across the country, making it possible to analyze increasing rates in their spread.<sup>(3)</sup> In view of this, HIV/AIDS represents a serious public health problem, due to its pandemic character and severity.<sup>(4)</sup>

The Ministry of Health emphasizes the importance of the nursing team in HIV prevention and in the assistance provided to people living with HIV/AIDS (PLWHA) in Primary Care (AB), emphasizing that they need to be well informed and ade-

quately trained to understand the problem that covers the assistance to the individual and to perform an appropriate posture, in order to articulate with the professionals the assistance to the patients.<sup>(5)</sup>

In this bias, the Federal Council of Nursing (COFEN) informs that nurses play a key role in the prevention, diagnosis and monitoring of users in health services, especially in primary care, with regard to epidemiological surveillance, with the task of providing through its knowledge and actions, acting as a protagonist in the planning, organization and operation of health services, as well as carrying out rapid tests and reporting cases.<sup>(6)</sup>

It is in this scenario that the need for the application of nursing theories arises that evidence directions of the views on the health-disease process, in addition to the praxis in therapeutic care. Theories refer to an articulated and communicative definition of invented or discovered reality (central phenomenon and relationships) in nursing with the purpose of characterizing, explaining, predicting or prescribing nursing care.<sup>(7)</sup>

Thus, with a view to assisting patients with HIV/AIDS, models and theories have been used, with the idea of elucidating facts related to care, guide artifices that respond to the needs and interests of the people involved and equip the nursing professional to promote patient care to take care of himself, since AIDS is a chronic disease that requires personal care to improve the quality of life and prolong its survival.<sup>(8)</sup>

Among the nursing models and theories used in the development of nursing care for PLWHA, the Self-Care Theory of Dorothea Orem is inserted.<sup>(8-9)</sup> This model is made up of three interrelated theories: Self-care theory; Self-Care Deficit Theory and

Nursing Systems Theory. In addition, it presents three self-care requirements spread by Orem: universal, development and health deviation, being used as an instrument to help nurses in promoting care practice, operating as an orientation for the systematization of nursing care.<sup>(10)</sup>

Orem's general theory of self-care is commonly used in Brazilian nursing, as it presents fundamental elements in the development of care, due to its adaptation in different scenarios in care and in professional nursing practice.<sup>(11)</sup>

This study is of great relevance as the application of Orem's Theory, the theory of self-care, can contribute to nursing care in the care of patients with the HIV/AIDS virus. The decision to investigate this theory is justified by the fact that personal care (self-care) is essential for people living with HIV, in order to ensure improvements in the quality of life, health and well-being of the individual.

In view of the above, the present work aims to analyze the scientific evidence of how the theory of self-care can be used in nursing care for patients living with HIV/AIDS.

**METHOD**

This is a descriptive study, with a qualitative approach, through an Integrative Literature Review (ILR), to analyze the applicability of Orem's Theory. The RIL emerges as a methodology that provides the synthesis of knowledge and the incorporation of the applicability of results of significant studies in practice, basically constituting an instrument of Evidence-Based Practice (EBP).<sup>(12)</sup>

The study followed six stages for its development: 1) elaboration of the guiding question; 2) search or sampling in the literature; 3) data collection; 4) selective and critical

analysis of included studies; 5) discussion of results; and 6) presentation of the integrative review, accordingly.<sup>(12-13)</sup>

For the elaboration of this study, the PICO strategy was used<sup>(14)</sup> to elaborate the following guiding question (P= Patient living with HIV/AIDS; I= Self-care Theory Co= Nursing Care), namely: How can the theory of self-care contribute to nursing care for patients living with HIV/AIDS?

The searches were carried out during the months of August and September 2022 through the Virtual Health Library (VHL), coordinated by BIREME and composed of bibliographic databases produced by the VHL Network, such as LILACS, BDENF, SCOPUS, in addition to the Medline database and other types of information sources; and PUBMED (U.S. National Library of Medicine).

In the databases, terms in English and Portuguese were used, manuals by filing, highlighting items appropriate to the research theme. The descriptors were obtained from the Medical Subject Headings (MESH) and Health Sciences Descriptors (DeCS), as follows: Self Care (Autocuidado); HIV; and Nursing Theory (Teoria de Enfermagem), pesquisados através do operador booleano "AND".

The inclusion criteria of the articles were: publications in Portuguese, English and Spanish, available in full for free, without time cut (in order not to issue evidence related to the proposed topic).<sup>(15)</sup> Book chapters, abstracts, incomplete texts, technical reports and other forms of publication other than dissertations and complete scientific articles were excluded.

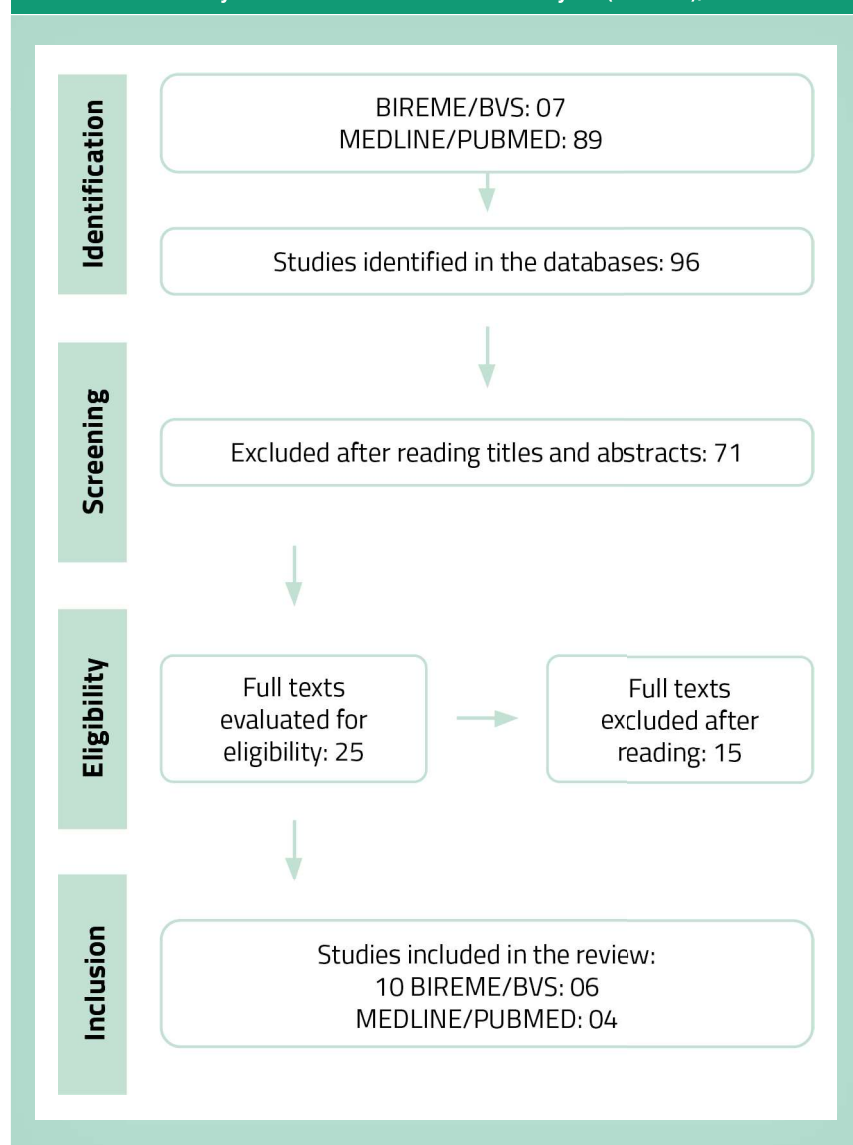
The level of evidence was evaluated with the Agency for Healthcare Research and Quality (AHRQ), which comprises the following levels: 1) Meta-analysis of multiple controlled studies; 2) Individual studies with an

experimental design; 3) Studies with a quasi-experimental design, such as studies without randomization with a single group pre- and post-test, time series or case-control; 4) Studies with a non-experimental design such as descriptive correlational and qualitative research or case studies; 5) Case reports or systematically obtained data of verifiable quali-

ty or program evaluation data; and 6) Opinion of respected authorities based on clinical expertise or expert committee opinions.<sup>(15)</sup>

The selected articles were exported to the Rayyan® Software, a free computational tool, for paired analysis of the references found and removal of duplicates. To minimize the risk of bias, the search was

**Figura: Flowchart of the study selection process according to Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA), 2022.**



Source: Search carried out by the authors (2022).

performed by the researchers on different computers independently. When discrepancies were evident, three researchers read the articles. In interpreting the results, a comparative reading between the articles was followed, analyzing their similarities and proceeding to the grouping.

The Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) flowchart was used, enabling the analysis of this review, assisting in the development of systematic reviews.<sup>(16)</sup>

The data obtained and described here are presented through a figure and chart for a better understanding of the findings.

**RESULTS**

Initially, 96 publications were identified, 07 in BIREME/BVS and 89 in PUBMED/MEDLINE and, after reading the titles and abstracts, 25 studies were selected because they met the guiding question and the proposed objective. Subsequently, the publications were read in full, and of these, 15 were excluded and 10 articles were selected to compose the final sample. The flowchart of the article selection process according to PRISMA is shown in Figure 1.

To enable the synthesis and analysis of the data, the selected studies were grouped in a table, gathering information regarding: author(s), type of study and main findings, as shown in Table 1.

Regarding the study method, qualitative research was predominant, accounting for 4 articles (40%), followed by 3 methodological studies (30%), 2 quantitative studies (20%) and 1 reflective study (10%).

**DISCUSSION**

From the reading of the main findings in the selected articles, the

**Table 1: Description of the articles selected for the integrative review, according to author(s) and year of publication, type of study, level of evidence and main findings, 2022.**

Author(s)/Year	Type of study	Level of Evidence	Main finds
Barroso et al., (2010) <sup>(8)</sup>	Qualitative study	5	Meleis' model made it possible to understand the usefulness of Orem's Theory for practice, research, education and administration.
Caetano e Pagliuca (2006) <sup>(17)</sup>	Methodological study	4	Even well-informed participants about their health status continue to adopt lifestyles that affect the efficiency and effectiveness of treatment, points considered relevant as self-care deficits.
Alencar et al., (2019) <sup>(18)</sup>	Quantitative study	4	Aspects related to the increase or decrease of self-care in patients living with the human immunodeficiency virus were evidenced. However, further studies are needed to emphasize the analytical character of these patients' self-care.
Lima et al., (2007) <sup>(19)</sup>	Qualitative study	4	The study showed the importance of Systematization of Nursing Care and the patient's decision to engage in self-care in order to provide an improvement in the pattern of the patient's response to the disease.
Santos et al., (2018) <sup>(20)</sup>	Qualitative study	4	The diagnoses represent conditions that make older women vulnerable to HIV/AIDS and are linked to their self-care practices. Operational definitions contribute to a systematic approach to care and greater clarity in its implementation.
Cunha e Galvão, (2010) <sup>(21)</sup>	Quantitative study	4	The nursing diagnoses obtained identified the main problems presented by HIV/AIDS patients, verifying deficits in self-care and in health education. The study contributed so that nursing interventions are appropriate and directed to existing needs.
Feijão et al., (2015) <sup>(22)</sup>	Methodological study	4	The adequacy of the nursing consultation instrument for people with HIV/tuberculosis co-infection was verified, in terms of organization into subdivisions and items.
Menezes e Rosa (2004) <sup>(23)</sup>	Reflective study	5	Health education practices make it possible to discuss people's quality of life, a permanent challenge for health professionals who seek solutions to minimize health problems promoted and accentuated by social inequalities.
Lopes et al., (2015) <sup>(24)</sup>	Qualitative study	5	Different scenarios and approaches for applying the theory were also evidenced, identifying its use aimed at various goals of self-care for women with HIV.
Oskouie et al., (2017) <sup>(25)</sup>	Methodological study	4	The main barriers to self-care in women with HIV/AIDS included social stigma, addiction, psychological problems, medication side effects, and financial problems.

Source: Search carried out by the authors (2022).

following thematic categories were elaborated for a better understanding of the discussions presented: 1) Use-

fulness of self-care theory in nursing care for PLWHA; and 2) Factors that hinder the performance of self-care



among PLWHA.

### Category 1: Usefulness of self-care theory in nursing care for PLWHA

Involved in the assistance to PLWHA, the nursing professional is able to help improve the quality of life of individuals through the nursing consultation, being responsible for instructing them to perform self-care. Consultation in this way is a specific activity of nurses who, using their professional autonomy, develop a care model to meet the health needs of patients, as established by Law No. 7,498/86, regulated by Decree No. 94,406/87.<sup>(17)</sup> Thus, the consultation must be based on a theoretical framework, being able to diagnose the needs of individuals, proceeding with the prescription of care and, thus, evaluating interventions with the carrier of the virus.<sup>(18-20)</sup>

Thus, it is evident that nurses play important roles in the development of appropriate strategies to encourage patients with HIV/AIDS to adhere to and maintain healthy self-care behavior.<sup>(8)</sup>

The application of Orem's Theory makes it possible to verify self-care deficits. The instructional education strategy guides conducts in the search for patient autonomy to be actively involved in their treatment, sharing with the nurse the responsibilities of performing care and the results obtained, although certain factors may limit their adherence to self-care, such as: disease imbalance; low education level; difficulties in behavioral changes, as well as abandoning bad habits and not adhering to routine exams.<sup>(21)</sup>

Nurses can systematize their practice with PLWHA, recognizing self-care deficits and equivalent diagnoses when performing the Nursing Care Systematization (NCS) through the Nursing Process

(NP), consisting of history, diagnosis, planning, implementation and evaluation, giving rise to individualized and appropriate care for each patient (FEIJÃO et al., 2015). Despite enabling the NCS, the application of Orem's Theory favors the creation of instruments for nurses to guide their practice, evidencing the relevance of theory to practice.<sup>(8,18,19,21)</sup>

It is also analyzed that the implementation of NCS to the individual with HIV/AIDS also makes it possible to assist institutions in the implementation of self-care diagnoses for patients, aiming to improve administration in health services.<sup>(8,22)</sup>

In view of the above, it is clear that nurses play a relevant role in promoting self-care, in addition to expanding their care and educational praxis to families and the community, considered essential support for people living with HIV/AIDS, as they contribute to their physical and mental balance of the patient.<sup>(21)</sup> With the commitment in the practices carried out, these professionals can expand the construction of possibilities for the subjects, transforming health education into a fundamental part of the construction of citizenship. To this end, it is essential to identify the best strategies for an educational approach, analyze potential and expand the capacity of individuals in the behavior of their self-care practices.<sup>(23)</sup>

### Category 2: Difficult factors in carrying out self-care among PLWHA

Living with HIV/AIDS demonstrates, in many cases, a compromise in the performance of the body structure, causing a health deviation that requires the patient to become an active agent of self-care, as HIV evolves into a chronic disease for which there is no cure.<sup>(8,18,21)</sup> Considered a major public health problem, care for

HIV-positive patients is a challenge from different perspectives, particularly due to the absence of an effective treatment that leads to a cure, in addition to the social and economic obstacles that impair adherence to the therapeutic regimen.<sup>(21)</sup>

In this sense, when self-care is placed as a second option and is related to denial, self-care deficits are identified. Thus, self-care practices, considered the center of Orem's Theory, are essential for self-perception of health.<sup>(24)</sup>

Despite the existence of programs that offer good results against the HIV/AIDS epidemic, access to antiretroviral drugs is unlimited. However, offered for free, social and economic inequality causes adversities related to adherence. Furthermore, the excessive number of pills ingested per day and the unwanted effects are situations responsible for low medication adherence, implying self-care.<sup>(20)</sup>

In the context of changes in routine, it is noted that the family appears as a support in care and represents a passage of help to the individual with AIDS, above all, for collaborating for their physical and mental balance. In the meantime, representations attributed by the culture to the disease can harm the behavior of the family, which is able to support or discriminate and exclude PLWHA from the family group.<sup>(21)</sup>

However, the stigma to the individual with HIV/AIDS is capable of causing numerous consequences, such as loss of friendships and family connections, withdrawal from schools and jobs and lack of health care. Stigma is a chain of devaluation of HIV-positive people that may be associated with the non-disclosure of their HIV status. Thus, camouflaging the diagnosis leads the individual to perform less self-care and not seek health services to perform the treat-

ment.<sup>(18)</sup>

In a study carried out in Iran, between 2016 and 2017, evidence that social stigma, addiction, psychological turmoil, medication side effects and financial problems are the main barriers for women with HIV/AIDS, although adherence to treatment and self-care are emphasized as key factors for successful infection control.<sup>(25)</sup> The study demonstrates that the provision of adequate support and services, as well as a positive attitude in society, can contribute to adherence to self-care in young women with HIV.

There are several complicating factors and care deviation, such as: acquisition of opportunistic infections; problems in maintaining satisfactory food intake in addition to maintaining adequate sleep and eliminations; taste alteration and/or nausea due to side effects from the drugs in the treatment.<sup>(17)</sup> In this sense, individuals may experience weight loss, reduced muscle mass and fatigue. In addition to physical problems, there are psychological changes, such as lack of acceptance of self-image and low self-esteem, causing changes in lifestyle related to self-prejudice, frequent returns to the health service and unwanted effects of therapy. In addition to these, it is also pointed out that schooling reflects people's economic situation, which in turn plays an important role in PLWHA's medication adherence.<sup>(18)</sup>

Thus, the various perspectives of using the self-care theory established by Orem are perceived, because it points out several possibilities of analysis of the construction or change of a reality for the patient with HIV/AIDS, whose purpose is the apprehension of attitudes of practices that provide autonomy<sup>(19,23)</sup> and, in short, promote a healthy relationship with others, with society



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and with the environment.<sup>(23-25)</sup>

In view of the context, it is evident that understanding the factors that can interfere in the development of self-care favors the performance of professionals, especially nurses, who participate in the treatment of PLWHA. Thus, the magnitude of instruments for measuring self-care practices is emphasized, and can be used as methodological elements that contribute to the analysis of patients' responses to the performance of their self-care.

#### CONCLUSION

The study makes it possible to understand that the theory of self-care conceptualized by Dorothea Orem is fundamental in nursing care for PLWHA, given that it enables theoretical subsidies and provides nurses in their care practice to provide qualified care that meets the individual needs of patients. The articles analyzed in this review show in an understandable way how this theory of self-care is used in nursing care practice and how it contributes to the acquisition of adequate treatment for HIV-positive patients in carrying out self-care.

However, the need for adequate implementation of systematized nursing care for individuals with HIV/AIDS is emphasized. Thus, the theoretical framework adopted by Orem's Theory of Self-care facilitates patients to perceive their organic, psycho-affective, social, cultural and spiritual aspects, and allows nurses to identify appropriate actions that enable the self-care capacity of carriers of the infection. In this sense, the use of theory provides an improvement in the individual's quality of life, in his capacity and in the autonomy of the care performed by himself. 🙌

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