NEW HORIZONS: A LOOK AT THE OLD PROFESSIONAL CARE OF THE INDIGENOUS

As in the general population, the growth of the indigenous population is happening, and relatively, this group tends to age. Indigenous elderly people share the needs that are universal in the aging process, whose physiological changes that occur in this process can lead to a decrease in functional capacity in the medium and long term, making them more susceptible to fragility and dependence on care⁽¹⁾.

The data on Brazilian indigenous elderly people are still fragmented, with discrepancy between them, which leaves us doubts about who and how these individuals are⁽²⁾. With the existence of health care policies for the elderly and indigenous peoples in Brazil, in which implementation involves the involvement of several health professionals, it is possible to notice the importance of professional care carried out with this population.

Professional care should provide care permeated by situations that contribute to the preparation of the indigenous elderly to face the limitations they may present in the course of their lives, so that practices are based on strategies that lead to a successful old age. In this way, it is imperative that the care provided involves both scientific and cultural aspects, since culture influences the search for healthier behaviors, as well as determining how much a society views the elderly and the aging process.

To carry out the care taking into account the culture, it is necessary to preserve the beliefs and values that do not affect the state of health of the assisted population. If such beliefs are detrimental to health care can be permeated by negotiation in which the professional health system and the popular system adapt to a beneficial or satisfactory health, seeking to combine the two types of care, scientific and popular⁽³⁾.

In order to consolidate transformations in the daily life of individuals, health professionals must bring about the restructuring or re-organization of cultural care, with changes or modifications of cultural life styles to new, different and beneficial to family health. The professional health system replaces the care of the popular system introducing new care not known by the family / popular system⁽³⁾.

Care will be culturally beneficial or congruent when the health professional knows the culture of the client and their ways of taking care of, and directing their practice to the standards, lifestyles, beliefs and cultural values of the individuals assisted, considering the individual as a participant in the planning and Actions of their own care⁽³⁾.

An important aspect in health care for the indigenous elderly is intersectoriality, in which the professional system seeks support in the social organs of the community, forming partnerships with churches, schools, families and leaderships, in order to mobilize the population to promote health and actively participate in the care of the elderly.

Therefore, professional care for the indigenous elderly is not an isolated, closed act in itself, but it encompasses a series of intertwined and interrelated factors, requiring skills and training that transcend scientific techniques and knowledge, and a cross-cultural understanding is needed to capture a vision of world on assisted society.

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