

**NURSING AND GERIATRIC CARE IN THE ASEAN REGION: AN  
INTEGRATIVE LITERATURE REVIEW**

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**ABSTRACT**

*Geriatric care in the ten ASEAN country member is an essential area where a nurse must be equipped before actual cross-country practice. An integrative literature review was undertaken to examine literature about nursing and geriatric care to provide a picture of the current status of what and how nursing and geriatric care is in the said countries. Using Nursing and Geriatric Care word combination, ProQuest was able to return 24,252 hits. Full texts, peer-reviewed, scholarly journals and published within the year 2012-2017 were the inclusion criteria where a total of twenty-three documents was utilized in the review. Based on the gathered scientific papers, five (5) themes were derived composed of (1) Issues in Direct Geriatric Care; (2) Policies and Strategies to Improve Elderly Care; (3) Dementia as a threat to ASEAN Community; (4) The Plea of Informal Caregivers of the Elderly; and (5) Assessment tools used in Geriatric Care.*

**Keywords:** *ASEAN countries, geriatric care, nursing, integrative literature review*

## INTRODUCTION

The ASEAN Economic Community which was formalized in December 2015 prompted the creation of a single market production base in the region on toward the course of a full economic integration where its ten country members will become more competitive as a group and better able to achieve equitable economic development. The integration allows free flow of goods, services and investment, and capita and the free movement of businesspersons and skilled labor including professionals (ASEAN MRA, 2014). December 9, 2006, in Cebu City, Philippines was the date when the ASEAN Mutual Recognition Arrangement (MRA) on nursing services was signed where it aims to strengthen professional nurse capabilities. This is a collective effort of the ten ASEAN country members composed of Brunei Darussalam, the Kingdom of Cambodia, the Republic of Indonesia, Lao People's Democratic Republic, Malaysia, the Union of Myanmar, the Republic of the Philippines, the Republic of Singapore, the Kingdom of Thailand, and the Socialists Republic of Viet Nam. Its primary concern is to enhance cooperation and eliminate restrictions between and among members (ASEAN MRA, 2014).

Apart from the standard qualifications and requirements set by the ten convening countries is the reality that cultural differences may take possible hindrances a practicing nurse may experience as she travels to another host country and work as a professional nurse. Therefore, it is essential to gain basic understanding of the existing practices, norm, or issues of a particular concept common to the ten country members to be better equipped prior to the actual cross-country practice. Geriatric Care is one of the priority areas in Nursing. Asia currently faces a growing ageing population due to the ageing of the post-World War II 'baby boom' generation and increasing life expectancies. Asia accounted for only 44 per cent of the global elderly population in 1950, but by 2050, this share is projected to increase to 62 per cent (UN, 2004). These figures reveal the need to provide adequate attention to the needs of this age group and how this is considered by the ten country members of the ASEAN. It is assumed in this integrative review that through the research made and published that concerns Nursing and Geriatric Care coming from the countries

involved can provide a picture of the current status and illustrate the scenario of what nursing and geriatric care is all about on the said countries.

### **Statement of the Problem**

The study aimed to examine the literature on the current status of nursing and geriatric care in the ASEAN region. The key questions guiding the literature review were:

1. What peer-reviewed and full text literature exists about Nursing and Geriatric Care in the selected ASEAN countries?
2. What is the nature of that literature?
3. What are the research gaps in the peer-reviewed literature?

## **METHODOLOGY**

### **Research Design**

An integrative literature review was undertaken to examine public health literature about nursing and geriatric care in selected ASEAN countries.

An integrative literature review is appropriate for the diverse range of literatures published about nursing and geriatric care. This design was employed as it allows for the inclusion of both qualitative and quantitative research, and for data from theoretical and empirical literatures (Whittemore & Knafl, 2005).

### **Subjects of the Study**

The review consists of a comprehensive search in ProQuest database using two Medical Subject Headings (MeSH): Nursing and Geriatric Care conducted on 22 June 2017. On its website, it claims that ProQuest 5000™ is one of the most comprehensive multidisciplinary databases available online. It is an extensive general reference resource providing access to over 10,200 publications, with more than 6,020 of those in full text. The millions of articles in ProQuest 5000 give

users access to nearly all the ProQuest® periodical databases making it an unparalleled multidisciplinary research tool.

The following are the inclusion and exclusion criteria applied to the identified articles:

### **Inclusion Criteria**

- The primary focus of the literature was about Nursing and Geriatric Care in selected ASEAN countries
- Literature was peer-reviewed
- Literature was in full text
- Literature published between January 2012- June 2017
- Literatures whose location is within ASEAN country members: Singapore, Malaysia, Thailand, Philippines, Indonesia, and Vietnam; Myanmar, Cambodia, Laos, and Brunei

### **Exclusion Criteria**

- Non-peer reviewed literature was excluded from the review.
- Literatures not in full text
- Literatures published on or before December 2011
- Literatures not in English language
- Literatures whose location is not within the ASEAN countries

### **Instrumentation**

The researcher utilized the PRISMA flowchart as well as the inclusion and exclusion criteria application to retrieve the articles necessary for the review.

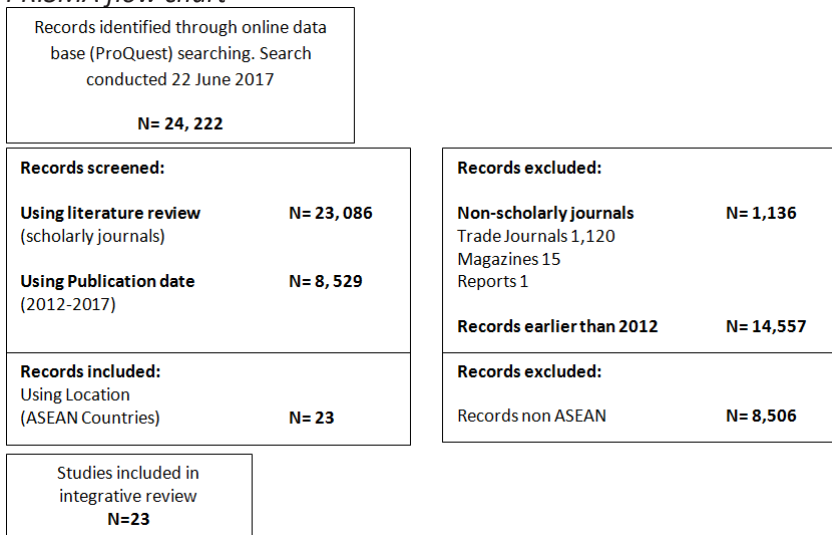
### **Data Analysis**

Thematic analysis was used by the researcher by analyzing the retained articles. Inductive reasoning and coding were utilized to identify the themes in the paper.

**RESULTS AND DISCUSSIONS**

Using Nursing AND Geriatric Care as the identified word combination search terms, ProQuest returned a total of 24,222 literatures of which are peer reviewed and in full text. After sorting the records into exclusively scholarly journals, 23,086 records were identified. An inclusion criterion was set in identifying useful literatures. These include publication date between 2012-2017. Location wise, the researcher opted the 10 ASEAN country members, however, only Singapore, Malaysia, Thailand, Philippines, Indonesia, and Vietnam are the countries identified to have studies related to the interest. A total of twenty-three documents passed the inclusion exclusion criteria included in the review.

**Figure1**  
*PRISMA flow chart*



The literature included in this review includes four (4) articles published in 2012, seven (7) in 2013, three (3) in 2014, three (3) in 2015, two (2) in 2016 and four (4) in 2017. These were sourced from BioMed Central (5), Ageing International (4), International Psychogeriatrics (3), PLOS One (3), International Journal of Clinical Pharmacology (1),

Complementary Therapies in Medicine (1), The International Journal of Sociology and Social Policy (1), Journal of Happiness Studies (1), Comprehensive Psychiatry (1), BioMed Research International (1), Journal of Cross-Cultural Gerontology (1), and Journal of Population Ageing and Journal of Aging Research (1).

Based on the gathered scientific papers, five (5) themes were derived which is composed of (1) Issues in Direct Geriatric Care; (2) Policies and Strategies to Improve Elderly Care; (3) Dementia as a threat to ASEAN Community; (4) The Plea of Informal Caregivers of the Elderly; and (5) Assessment tools used in Geriatric Care.

### **Issues in Direct Geriatric Care**

Majority of the literatures found are concerned with the physiological aspect of caring for the elderly. In hospitals and even after discharge, elderly patients have a higher incidence of mortality in ICUs wherein malignancy and renal placement before admission which serves as predictors (Mukhopadhyay et al., 2014). Two studies were found to discuss the prevalence and how to control and manage medication problems. Polypharmacy in the elderly leads to higher number of co-morbidities specifically those diagnosed with cardiovascular, endocrine, and gastrointestinal disorders as well as supplement use placing the old in conditions like Potentially Inappropriate Medications (PIMS) and Potential Drug-drug Interactions and increased healthcare utilizations (Lim et al., 2017). Through the STOPP and Beers Criteria, several issues were found that predisposes incidence of PIMS and this includes the lack of geriatric care experts and the need for healthcare providers for more training and education on medication safety (Chen et al., 2012). These research findings in Malaysia may likewise be applied to other countries to assess and validate the need to establish medication reviews and protocols, boost geriatric education and provide experts in the field. Nurses must be able to show respect, openness, authenticity, and inter-subjectivity to enhance the well-being of elderly (De Guzman et al., 2012). One study found that to enhance functional abilities of the elderly, they must have a good sense of being themselves. A concrete example is the ability to perform activities of daily living with independence (Arifin &

Hogervorst, 2015). One study proved that music therapy plays a crucial role in optimizing the quality of care provided by the carer during the early phase of the therapeutic relationship and improving quality of sleep in the old (Shum et al., 2014).

Regarding nursing homes, the research concluded that social factor is the main predictor of placement followed by dementia and the need for rehabilitation (Chen et al., 2013). The need social involvement is also deemed necessary to augment the need for psychological support in old age. Depression is also real in this age group as they experience challenges such as lack of emotional support and feelings of extreme loneliness especially among widows, lack of social interaction, cognitive impairments, and physical constraints such as illness and disabilities and even sleep disturbances (Rashid & Tahir, 2015).

### **Policies and Strategies to Improve Elderly Care**

The reality that elderly needs utmost attention and care is recognized by the literature found in this integrative review. The inevitable elderly frailty remains as the main cause for the common incidence of morbidities like fall, functional disabilities, and sometimes chronic illnesses like diabetes, stroke, and other cardiovascular concerns. To mitigate this dreaded situation, it is advised that policy makers must be to maintain a proactive government service that introduces policies focusing more on health promotion, risk reduction, and active social participation of elderly in society (Sihapark et al., 2014). In Thailand, majority receive funding for healthcare from a former employer or public health insurance. In spite of its availability, most still perceive it is limited and needs more services (Karlin et al., 2014). Another study suggests that raising the mandatory age of retirement may also be considered in reducing the prevalence of disability in the elderly (Khongboon et al., 2016). Although severe disabilities among elderly require long-term care, admitting them in nursing homes may not be an option if the government prioritizes strengthening its community resources through care planning and social support (Chen et al., 2013). Policymakers would also benefit from a proactive approach, which considers the effect of education on future disability

and demographic changes when planning healthcare services and designing labor market policies (Ansah et al., 2015). One remarkable strategy being practiced by Indonesia is its dissolving of health workers in the field to provide equitable security to the needs of the elderly across the country to serve the underserved regions particularly in rural areas (Kadar et al., 2013; Arifin et al., 2015). This practice conforms to the WHO recommendation in strengthening strategies to address rural retention and provide equitable access to health care across age groups. While it may be true that most professionals would prefer working in urban areas because of accessibility and professional growth, one study involving five Asian countries revealed that through early conditioning and upbringing, fresh graduates display more positive attitudes toward working in rural areas (Pudpong et al., 2017).

### **Dementia as a Threat to ASEAN Community**

This open opportunity given to the other rising ASEAN country members puts an advantage to both political and economic goals but somehow places health risk on the other end. The daunting effect of development places a county at risk for severe dementia as the population rises rapidly both in number and proportion such in the case of Singapore. Likewise, the tradition of caring for frail elderly in their homes by family members may be difficult to sustain because of decreased family size (Thompson et al., 2012). Example of which is Thailand whose rapid population growth of old age, the fewer number of children and as well as changes in women's roles in the society challenged tradition as women being the main elder care providers (Narknisorn & Kusakabe, 2013). Considering this, ASEAN countries must obtain care options that will counter or at least control this dreadful circumstance of the elderly. Prioritization must be provided to individuals aging 75 years and above, with no formal education or those who finished only up to secondary education, and with a history of stroke since they are at greater risk for dementia (Abdin et al., 2017).

### **The Plea of Informal Caregivers of the Elderly**

Caring for elderly is more commonly happening in an out-patient



setting especially if the condition does not employ hospitalization and home care and rehabilitation is more appropriate. This, in turn, puts the challenge to most carers because of lack of formal training through theoretical and skill preparation. Several types of research have linked incidence of depressive symptoms to informal caregivers of the elderly (Malhotra et al., 2012; Vaingankar et al., 2016). Based on the gathered literature, there is an expressed need to educate these informal caregivers on how to effectively perform their tasks as direct care providers. By satisfying their unmet needs for information, services, respite, emotional and financial support, informal caregivers are better able to perform their task with quality and provide more effective management of elderly peoples' needs (Vaingankar et al., 2013).

### **Assessment Tools Used in Geriatric Care**

Several studies found relative to the concept of nursing and geriatric care are geared towards testing of new instruments utilized in the care of older persons. The Rhythm–Centered Music Making (RMM) was utilized to test its effect on the quality of life, depressive moods, sleep quality and social isolation of the elderly. Findings reveal that there is no statistically significant difference in the quality of life of the participants, however, it was recommended to evaluate its effect on qualitative components (Yap et al., 2017). Another study whose interest is on the cognitive aspect of the elderly is the development of the Neuropsychological Assessment for Mild Cognitive Impairment (NAMCI). This tool showed indications of being a reliable and valid instrument in determining mild cognitive impairments among Filipino older adults (Julom, 2013). Similarly, another instrument called The Elderly Dementia Questionnaire (EDQ) which is used as a new screening instrument for early dementia in primary care practice is found to be a promising alternative to MMSE (Arabi et al., 2013).

### **CONCLUSION**

Considering the results of the review, the researcher identified that there are research gaps in the topic of nursing and geriatric care in the ASEAN region.

No single literature focused on the entire ASEAN countries in their study. Majority of the literature are concentrated only in one specific country. There are limited literature discussing descriptive profiles of the country of study. There is no literature from the other ASEAN country members like Brunei, Cambodia, Myanmar, and Laos, which was used in this integrative review, hence, the need to have peer-reviewed studies related to Nursing and Geriatric Care to this date. More research is required to understand how each country provides and implements their geriatric care. Governmental plans and programs are not well explained and elaborated by the studies gathered. The economic inequity and health disparities between urban and rural sectors described in the literature would be better understood with operational or thorough descriptive research to address social, cultural, or economic issues to better enhance geriatric care in the ASEAN countries. Only literature from Singapore concerning informal caregivers were in this integrative review; the other nine countries may conduct a similar study to determine the needs of this neglected sector but provides a big part in the care and rehabilitation of the old. Qualitative studies were not found which may provide relevant information that cannot be measured by quantitative studies. There is a need to have more studies involving nursing and geriatric care since the majority of the literature found are medical. Studies involving geriatric nursing must be capitalized.

### **RECOMMENDATIONS**

Considering this review, the researcher recommends the following, that researchers will:

Consider the need to have peer-reviewed studies related to Nursing and Geriatric Care among ASEAN country members particularly Brunei, Cambodia, Myanmar, and Laos.

Conduct more research to understand how each country provides and implements their geriatric care.

Conduct operational or thorough descriptive research to address social, cultural, or economic issues to enhance geriatric care in the

ASEAN countries better.

Conduct a similar study to determine the needs of the informal caregivers of the older people among the ASEAN countries.

Conduct more qualitative studies regarding the issues and concerns affecting the health of the older people in the ASEAN countries.

Conduct more studies involving nursing and geriatric care.

### **Limitations of this review**

This review utilized only one source (ProQuest) and did not attempt to utilize other database sites or in Google scholar. Limitations of this review are the exclusion of non-peer reviewed literature. The literature included in this integrative review is quantitative using questionnaires, interviews, and secondary data in answering its research objectives. Only one literature is a discussion paper. There is much information that may be provided on the care of the old that may not have been discussed by the literature included in this review. Also, the ASEAN countries are not well represented since only six countries were found following the exclusion and inclusion criteria.

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