This is a Doctorate Thesis presented in the Graduate Degree Program in Nursing and Health at the Federal University of Santa Catarina (UFSC). The author is a Nurse and a faculty member at the UFSC, dedicated to the study of the geronto-geriatric nursing care. The book shows the design of an explanatory theoretical model to understand the caring and being cared-for process as lived by the carer family of an aged and sick frail relative, in poor households, and urban outskirts, connected to a Health Center.

In a present and critical way, a picture is presented of the population aging process during the 20th century. The foundation was built from recent and presently accepted publications released by geronto-geriatrics scholars, as well as from statistic data and projections from the IBGE. Publications from the UNO and OPAS on the population aging and public health policies for the aged in Brazil are commented. Two questions of concern are raised: “What has been planned to promote and protect the aged in our country?” and “What kind of old age will we have in the future regarding human, social and health aspects?”

The author places the reader in the study, setting limits to and bringing the research into context. Aspects of the observed reality are described; personal and professional sensitivity are described, when the author exposes her distress and frustration face to reality and to the lack of solution for the cases under study.

Having to care, the central dimension of the study, implies having to be cared for. A relationship and a joint story of life of the carer family is supposed to exist with the elderly. Caring and being cared-for processes are described as seen by the aged who is cared for in a family home, living as a dependent, reacting or not to this condition, or moving towards a terminal phase. Also, as seen by the family member who has to care for an aged relative, in charge of and performing care with its resulting consequences, having simultaneously his/her own needs and obligations. The author finds out, and the families clearly speak in their accounts, how solitary, unending and lasting care can be,emasculating as dependency evolves; how much skill, force and emotional control is required. The caring task is seen as an imposition to the family member carer and also for the dependent aged. Care is seen as a moral duty shared in the social group.

In the Basic Health Unit, the Family Health Program (PSF) and the Health Community Agents Program (PACS), still being implanted, are able to map and detect problems, although still lacking effectiveness. The programs still basically turned to support women and children, do not have a systematized attention to the dependent aged, and are in want of continued evaluation and support to the families. Thus, families and their elderly relatives, after so many fruitless efforts, end up by losing faith in the service and going to hospital emergencies, a real test of strength and confrontation.

The author presents a diagnosis of public health services, and reveals also the feeling of impotence professionals have face to the low answering power of the system. Emphasis is given to the shortage of geronto-geriatric rehabilitation programs in these services. The poor attendance to the health of the aged population is seen to be a public health problem, reason why so many actions and recovery efforts are abandoned both by the elderly and their families.

The reading of this book, seemingly complex due to its items and sub-items, which gradually unfold, becomes interesting and provoking as those situations lived by the aged and carer families are presented. Transcription of statements made by families and the aged, full of realism and feeling, are like “living voices” in the text; these voices can be heard and felt with great intensity. These citations possibly make readers identify their own reality in the professional and/or family context.

Finally, the presented model argues the emerging social phenomenon, representing a contribution towards the reality lived by the sick or frail aged, and his/her carer family member, and points to the need to have public health policies written up to look after the specific needs of these clients. The book, questioning the future of those who are getting old in our country, inquires on the contribution geronto-geriatrics health professionals are able to make so as to change the present state of affairs. It is possible an answer can be found by hearing the voices of families and their aged ones, as presented in this book.

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