
Multimed 2026; 30: e3258

Systematic review

Educational preparation of informal caregivers of dependent older adults in Granma. A systematic review.

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ABSTRACT

The transition towards the aging era is already a reality, currently posing a challenge for countries as it details establishing political, social and health strategies to address it. In order to identify scientific publications focused on the educational preparation of informal caregivers of dependent older adults in Granma, a systematic review was conducted on 77 articles published in Spanish, obtained from reliable sources indexed in databases addressing the topic. Inclusion criteria were: qualitative and quantitative studies, experimental, descriptive quasi-experimental studies, and systematic reviews published in article format, written in Spanish; published in the period from January 2021 to October 2025. Exclusion criteria were: studies on informal caregivers of patients under 60 years of



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age who were not dependent, gray literature, undergraduate theses, articles without access to full text, those with few references, not published in the established period, opinion/information articles, conference presentations, communications to congresses, and bibliographic reviews. Results were obtained from 74 articles in Google Scholar database and 3 in regional SciELO, concluding that there is evidence of only one publication in Granma during the study period, demonstrating the need to address this topic within the scientific community to understand the situation of informal caregivers in the province and establish governmental actions and health policies due to demographic aging.

Keywords: Informal caregiver; Elderly friar; Family caregiver; Educational intervention.

Received: 24/11/2025

Approved: 30/03/2026

Introduction

The transition to an aging population is already underway, and it currently presents a challenge for countries, requiring them to establish strategies, social policies, and health policies to address this era. According to the World Health Organization, by 2030, one in six people worldwide will be 60 years of age or older, and by 2050 this number will have doubled (2.1 billion). The number of people aged 80 and over is projected to triple between 2020 and 2050, reaching 426 million. (1)

It is important to note that as we age, the likelihood of experiencing several conditions simultaneously increases. Old age is also characterized by the emergence of various complex health conditions commonly known as geriatric syndromes, which result from a decline in health due to various causes related to the body or the environment. (2)

On the other hand, population aging is one of the main demographic phenomena in Latin America and the Caribbean and the world. In 2022, 88.6 million people over 60 years of age lived in the region, representing 13.4% of the total population, a proportion that will



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reach 16.5% in 2030, and life expectancy is projected to continue increasing in the future, reaching 77.2 years. (3)

According to the 2024 Demographic Indicators Report by the Cuban National Statistics Office, as of December 31, 2023, the country had 10,055,968 inhabitants, a figure that decreased by 9,748,007 inhabitants in December 2024. In Granma province, the population decreased from 768,222 in 2023 to 749,285 at the end of 2024. The average age was 41.5 years for both sexes. In the municipality of Bartolomé Masó Márquez, the population decreased from 45,485 to 44,436 inhabitants in 2024. The sex ratio was 1,068 men for every 1,000 women. (4)

Thus, the main cause of population aging is the decline in female fertility. The other contributing factor, although to a much more variable degree, is emigration for various reasons, especially of young people, a component that has increased in importance in recent times in several countries, such as Cuba. (5)

The consequences affect different aspects: economic, with fewer people of working age (active, productive) and, as a result, a “contraction economy”; a smaller proportion of children and young people (dependent groups in the present, but future workers); reduced incomes, due to the real amount of their limited pensions; health situations, with a greater burden on health services of all types and levels, including a proportion of dependent people, an increase in devastating chronic diseases; the overloads and “burnout syndromes” in caregivers, with a deleterious impact on the sick and the generation of new problems for families already burdened by the weight, in addition to other consequences of sociocultural and legal aspects. (5)

Furthermore, population aging is intrinsically linked to the emergence of increasing needs for the individual, relating to the concept of dependency. In the socio-health field, the most widely accepted definition is that provided by the Council of Europe, which describes it as “the state in which people find themselves who, due to reasons related to the lack or loss of physical, mental, or intellectual autonomy, need significant assistance and/or support in order to carry out the ordinary activities of daily living.” Moreover, a factor

interconnected with dependency is its duration, which has led to its care being termed “long-term care.” (6)

It is worth highlighting that the progressive aging of the population and the increasing functional dependence in older adults have generated a pressing need for care within the family environment. (7) The primary caregiver assumes responsibility for providing help and care that meets the basic and instrumental activities of daily living of the dependent older person. In this sense, they assume a role for which they are not technically trained and do not receive financial compensation or adequate social recognition. (8)

In light of the above, this review is carried out with the objective of identifying scientific publications aimed at the educational preparation of informal caregivers of dependent elderly adults in Granma.

Methods

A systematic review was conducted following the recommendations of the PRISMA 2020 statement in articles published from 2021 to October 18, 2025 in the Granma province.

Phenomenon of interest:Scientific publications in medical journals indexed in databases that address the issue of deficiencies in the educational preparation of the informal caregiver.

Inclusion criteria:

Qualitative and quantitative studies: experimental, quasi-experimental, descriptive, and systematic reviews published in article format, written in Spanish.

Of these, the following were taken into account:

- Educational preparation of informal caregivers in Granma.
- Educational preparation of the informal caregiver of the dependent elderly in Granma.
- Educational preparation of the informal caregiver of the dependent elderly adult from the community nursing in Granma.



Exclusion criteria:

- Studies focused on other informal caregivers of patients under 60 years of age who were not dependent were excluded.
- Grey literature and studies related to degree works, articles whose full text cannot be consulted, with few references, that are not published in the established period.
- This excludes information/opinion articles, conference papers and communications, and bibliographic reviews.
- Bias in the review process: To control for research bias, duplicate documents were excluded. To minimize selection bias, the authors conducted blind and independent appraisal following the PRISMA 2020 criteria.

Sources of information

The main sources of information were the databases: GOOGLE SCHOLAR, SCIELO. The terms from the health descriptor "informal caregiver", "dependent elderly adult", "nursing", "Cuba" and "Granma" were used, joined by the Boolean operator AND.

Selection of studies

The selection of studies, at the different stages, was carried out taking into account:

Title and summary.

Articles with abstract not available.

Screening was performed by reading the selected articles in full, and the selected articles of interest were included.

The result of the process of selecting the articles to be included in the study is presented in a flowchart provided by the PRISMA statement.



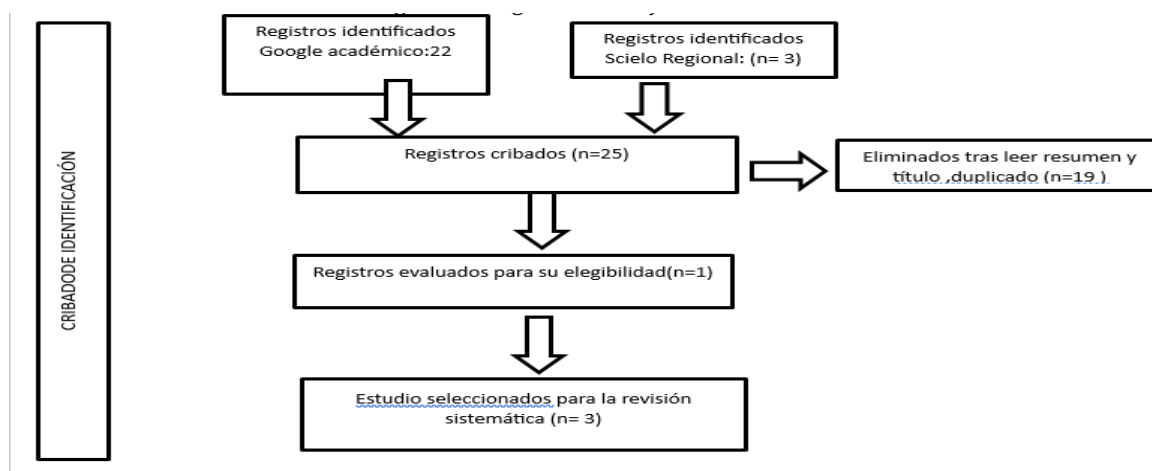


Fig. 1.PRISMA guideline flowchart.

Source: Flowchart created by the author.

Results

After conducting the literature search and applying the inclusion criteria, 74 results were obtained from the Google Scholar database and 3 from the regional SciELO database, for a total of 77 articles. All of these were reviewed to eliminate those found in more than one database and to identify those that corresponded to the objective of the study.

Three articles related to the present study were found. These investigations recognize that the role of informal caregivers in Cuba is fundamental, but, as in many countries, it remains invisible and unpaid. Although the State acknowledges the importance of families in the care of older adults, there is no formal system to provide financial support to unpaid caregivers. Furthermore, a search for articles from the last five years in the province of Granma yielded only one from the municipality of Bayamo.

The results of the systematic review:

1- Juana Celia Paneque Vanega, Yanelys Olivera Fonseca, Onelvis Moreno Mora, Niara Elia González Chávez, Ever Marino Olivera Fonseca. Educational intervention for caregivers of patients with dementia syndrome in rural areas. GBT No. 1. Original article. Granma, Bayamo, Cuba. 2021



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A quasi-experimental study was conducted using a training intervention to identify the level of knowledge and skills of caregivers regarding the basic needs for the care of patients with dementia. The study population consisted of 22 caregivers of older adults with dementia, belonging to the rural area of Basic Work Group No. 1 (GBT) of the Jimmy Hirzel Polyclinic in Bayamo. The study successfully improved the caregivers' level of knowledge and skills regarding the basic needs for the care of their patients and designed an educational intervention program for the caregivers. (9)

In accordance with the 2020 PRISMA statement (items 11 and 18), the risk of bias was assessed in the studies included in this review, considering the main methodological domains: participant selection, study design, measurement of variables, control of confounding factors, and presentation of results. Given the diversity of methodological designs, the assessment was conducted qualitatively by domain, following the recommendations for reviews that include observational and non-randomized studies.

This is a quasi-experimental study designed to evaluate an educational intervention for caregivers of older adults with dementia. A high risk of selection bias was identified due to the use of a small ($n=22$), non-probabilistic sample from a single rural setting. A high risk of confounding bias was also found, as potentially influential variables such as educational level, prior caregiving experience, and available family support were not controlled for.

The risk of bias in measuring outcomes was assessed as moderate to high, due to the lack of information on the validation of the instruments used and the standardization of the evaluation process. No losses to follow-up were reported, so the bias due to incomplete data was considered low. A moderate risk of reporting bias was evident, as the report primarily emphasized the favorable results of the intervention.

Risk of overall bias: high.

Risk of bias by type of outcome

The analysis by type of result showed that the results related to the caregiver's knowledge and skills present a high risk of bias, associated with limitations of the quasi-experimental design and the measurement of the variables.

Limitations of the study



This review has limitations that should be considered when interpreting its results. First, the available evidence is based on observational or quasi-experimental studies, which increases the risk of bias and limits the possibility of establishing causal relationships. Furthermore, the study was conducted in specific geographical contexts, which restricts the generalizability of the findings to other populations.

Discussion

Demographic changes have led to an increase in people with multiple health conditions, resulting in a greater demand for healthcare. (11) It is important to note that the United Nations General Assembly declared the period 2021-2030 as the Decade of Healthy Ageing, “a key strategy for achieving actions aimed at building a society for all ages.” Key areas of this global strategy are established that aim to:

- Changing the way we think, feel, and act towards age and aging.
- Ensure that communities foster the capabilities of older people.
- To offer integrated, person-centered care and primary health services that are responsive to older people. (12,13,14)

The authors note that Cuba is one of the most aged countries in Latin America, with 25% of its population over 60 years old according to recent estimates. This aging population has created a growing demand for health services, social assistance, and support for caregivers. However, the economic sustainability of the Cuban social system faces significant challenges, affecting both older adults and their caregivers.

Cuba is a country with a rapidly aging population, and its causes and consequences are being studied. Health strategies and policies have been implemented to promote healthy aging. One example is the creation, at the beginning of this century, of the 120-Year Club, a section of the non-governmental organization (NGO) Caribbean Medical Association, founded by Professor of General Surgery, Eugenio Selman Housein Abdo, a renowned physician. This club includes volunteers of all ages, with the purpose of bringing together



all those who "decided" to reach 120 years of age with a satisfactory quality of life and supporting them in this personal commitment through the solidarity of its members and the community. They held several annual congresses starting in 2004, which they called "Successful Longevity," where they shared experiences with various movements of a more or less similar nature to those created in the Caribbean region. (15,16)

Espinosa Brito (5), in his research, addresses important aspects to consider regarding the current situation in Cuba that affect older adults, especially those who are dependent and their informal caregivers. Due to changes related to "the new era," the serious context of social inequality, and the country's unfavorable economic situation, with the resulting difficulties in the daily lives of older adults, new forms of discrimination against the elderly have emerged. Among these, three complex and unimaginable reasons can be mentioned, which this author refers to:

- The late arrival to the mass availability and correct use of information and communication technologies (computers, tablets and cell phones), the adaptation to the new digital transformations of society, especially those related to daily, frequent and often changing procedures that include communications, management, errands, paperwork, collections and payments, magnetic cards, ATMs, despite the efforts made to avoid these "inconveniences". (16)
- The rising inflation, accentuated after the so-called "economic reorganization" of the country, in which this vulnerable group of people has been one of the most affected.
- The sudden increase in the abandonment of elderly relatives, due to the recent large exodus of younger people abroad, with evident negative changes in "traditional Cuban filial piety," leaves many older adults in a greater state of loneliness and vulnerability. (16) The economic crisis is also related to a growing migration of young people seeking opportunities abroad, which aggravates the situation of older adults and caregivers in Cuba.

In Cuba, according to the 2024 Statistical Yearbook of Health, the resident population was 9,748,007; 25.7% (2,056,438) of the population was over 60 years of age, placing the country among the most aged in Latin America. The province of Granma accounted for 20% of this population, and Bartolomé Masó Márquez had a resident population of 47,507, with a predominance of males among those over 60 years of age, and over 9,392 (19.7%), which poses significant challenges for the health and social protection systems. (17,18)

Population aging has increased the demand for long-term care, making informal caregivers key figures in supporting dependent older adults. Home care allows these individuals to access healthcare in their own homes. (19) Nursing staff, as a pillar of the health system, must have adequate knowledge to educate and guide caregivers. (20)

Community nursing constitutes the link between the health team, the individual, the family, and the community itself. This staff is focused on caring for, supporting, and accompanying people in improving their living conditions and maintaining their health. (21) To provide nursing care for caregivers, a training strategy must be designed to help them provide appropriate care to older adults. This strategy should begin with actions that facilitate their performance in the community. (22)

Community nursing staff, as the population's first point of contact with the health system, can assist in the training of informal caregivers; however, they need support and time. Training geriatric nursing assistants to collaborate with the primary care team nurse would be effective, as the latter carries out several programs and functions that limit their priority attention to caregivers, and they must continue this work even after the caregiver is trained. (23) As Professor Castell Florit argues, this problem requires the application of intersectoral collaboration with economic and social systems; therefore, it can hardly be resolved through actions solely by the health sector. It should be noted that much remains to be done for those who perform caregiving duties, although legal progress is perceived in the new Family Code in Cuba. (24)

Currently, the authors argue, the draft labor code is being debated, and it should address the issue of informal caregivers who do not receive financial compensation, many of



whom have had to stop working to care for their family members. Given that demographic aging is irreversible, it is clear that this problem is complex and difficult to resolve, making it essential to take action and establish a solid foundation for the training of informal caregivers.

In the opinion of the authors of this article, the scientific community must urgently address this issue, since this review shows that in the last five years only one article related to informal caregivers was published in the province.

Taset Álvarez, et al. (25) in their study conducted in the municipality of Guisa, Granma province, refer to the knowledge of what its inhabitants feel and think, since they are influenced by a culture that leads them to be a vulnerable group. The cultural factor modulates the impact that the caregiving situation can have on family members who care for a dependent elderly person.

In Cuba, there is state interest in family caregivers of the elderly due to the progressive aging of the population; however, they constitute a little-seen group since their vulnerable status has been little studied. They are mostly primary family caregivers, women, and older adults, and if we add to this the fact that in many cases they are families with a precarious socioeconomic situation, in specific rural contexts, marked by a patriarchal culture, their condition would be further aggravated.

In the study by Figueredo Tornés, et al. (26) the issue is addressed from the municipality of Niquero where the vulnerability of family caregivers is evident, in this case they are caregivers of cancer patients to which family care is added in the terminal phase.

At the Jimmy Hirzel Polyclinic in the municipality of Bayamo, a study was conducted on the level of knowledge and skills of caregivers regarding the basic needs for the care of patients with dementia syndrome. Initially, a poor assessment (88.41%) was obtained regarding preparation, which subsequently improved to good (88.23%) after the intervention. This demonstrates the effectiveness of caregiver preparation. (9)

In Cuba, public policy for the care of the elderly has focused on state responsibility, but it has been impossible to reduce the tendency for families to provide care. Nursing homes



have fallen short of their capacity to meet the growing demands of an aging population. This necessitates the implementation of social measures to address this phenomenon.

Furthermore, it is important to point out that current health programs do not adequately consider the role of the family caregiver, as well as the need for care and protection for these individuals, who are generally very close to old age and who, in this process, suffer physical, mental, and emotional exhaustion conditioned, among other factors, by a lack of tools and knowledge to perform this function. (26)

It is important to note that there are state programs for the care of the elderly, such as the Casa de Abuelos (Grandparents' Home), which provide temporary or long-term shelter for seniors. However, the number of geriatric institutions is limited, and most dependent older adults continue to be cared for by their families (i.e., informal caregivers), which places an additional burden on families, especially in the context of economic crisis.

The disadvantages of family caregivers are related to a lack of knowledge about a task that requires specialized skills. Caring for elderly or sick relatives creates various problems for caregivers. Sometimes the dependency arises suddenly, and other times the caregiver gradually witnesses their relative needing more and more help to move around. Either situation leads to physical and psychological strain, which embodies the specter of old age and is the elderly person's greatest worry.

Trends indicate that there is currently an imbalance between those in need of care, whose numbers are growing, and those able to provide it, whose numbers are dwindling. The current challenge is to ensure that the supply of care does not fall behind. The world is aging rapidly, and the challenge of providing humane care to older adults with health problems is becoming increasingly evident. The support they receive from close family members is one of the most important resources in their care and treatment. Educating these family members on how to care for older adults is undoubtedly beneficial in this regard.

Conclusions



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In summary, there is evidence of only one publication in Granma during the study period, which demonstrates the need to address the issue in the scientific community to understand the situation of informal caregivers in the province and to outline government actions and health policies aimed at addressing the consequences of demographic aging.

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Conflict of interest:

There are no conflicts of interest between the authors or with the publication of this work.

Authorship contribution



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