

85 - PSYCHOLOGICAL ASPECTS OF AGING IN WOMEN LIVING IN VALE DO SINOS, BRAZIL.

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INTRODUCTION

According to the World Health Organization (WHO, 2002), Brazil will have the sixth largest elderly population in the world in the year 2025, a result of the accelerated growth of this population segment in our country and in the world in general. Many of these people will be women because of their longer life expectancy. From a life-cycle perspective, the cumulative health of elderly women will largely depend on their life styles and behaviors.

The Brazilian Institute of Geography and Statistics (Instituto Brasileiro de Geografia e Estatística - IBGE) (BRASIL, 2000) classifies the elderly as people older than 60 years regardless of their clinical or private life history. Although this definition may serve as a starting point for the study of aging, each woman's health is different, and age should not be the only parameter to explain classifications, diagnosis, treatment, justifications, discrimination and diseases of old age.

Women as a group live longer than men, and survival rates for women affected by the main causes of mortality are greater than those found for men in all ages. Men have a 1.12 to 7 times greater risk of dying due to the following causes: heart attack, stroke, cancer, respiratory disease, accident, liver cirrhosis, suicide, homicide, and AIDS (HAYFLICK, 1997).

The feminization of old age and its implications for public policies are discussed by Nogales (1998), who claims that female longevity is not always seen as an advantage. A longer life expectancy exposes women to biological debilitation caused by chronic diseases, whereas men die earlier. Moreover, many old women are widows, live alone, have no working experience in the formal work market, and are less educated. Debert (1999), however, claims that, from a more optimistic gerontological perspective, old age and widowhood may represent a time of independence and achievement for old women today.

The concerns with the declines and losses of aging may cause anxiety or health problems depending on how they are perceived. However, if aging is perceived as greater wisdom, it is considered a gain (FREITAS et al., 2006). These concerns are evident in middle age, when one of the central issues is the perception that the amount of time lived is greater than the time ahead, and when some life evaluations begin to be made, although still incompletely and reluctantly (DAVIDOFF, 2001). Some of the great common concerns of middle age are to keep healthy and to preserve a young appearance and good performance, which psychologists call physical monitoring, and to adopt protective measures, such as physical exercises, vitamins, diets, hair dyeing, and use of cosmetics. The same author also indicates that climacterium, defined as the period of declining reproductive function that culminates in menopause, may cause several debilitating physical and emotional symptoms, as well as depression at times, in middle-aged women. Social and parental factors also contribute to the psychological aspects of women in this age group, such as children leaving home and the cessation of their role as a mother, particularly for those that had only that role.

According to Santos (2000), however, old women are more dynamic, impulsive, productive, creative and spontaneous, and have a greater capacity for empathy and less resistance to different situations than men older than 70 years. Neri (2001) reported that depression rates are 3 times lower among 65-year-old people than among adults and middle-aged people.

Body functional changes occur gradually and result in psychological losses, which are not classified as a disease for a healthy person (FREITAS, 2006). Hayflick (1997) reports that at 80 years one cannot run as fast as at 20, which indicates an actual psychological loss, but is not a sign of disease for a healthy 80-year-old person; rather, it indicates a gain in wisdom as our bodies wisely persuade us to avoid stressing exercise. Hundreds of other similar losses are not signs of any disease, but part of the normal aging process.

The marked increase in mean female life expectancy should be followed by improvements in women's quality of life, and the multidimensional aspect of this construct should be included in a discussion of old age. The WHOQOL Group (1995) defines quality of life as an individual's perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns.

At the same time, structural concepts of multidimensionality, socionormative evaluation, products of person-environment interactions, and temporality, associated with quality of life in old age, led to the development of a widely known model in the international gerontology literature. This model is composed of four conceptual dimensions: (1) behavioral competence, evaluated according to the degree of preservation of the ability to perform basic daily living activities (DLA) and instrumental daily living instrumental activities (IDLA); (2) environmental conditions, which refer to actions to create friendly environments and include instruments, equipment, and building adaptations; (3) perceived quality of life, reported diseases, use of medications, pain and discomfort, changes in cognition and self-efficacy in the physical and cognitive domains; and (4) psychological well being. The psychological dimension reflects personal evaluations about relationships and their dynamics based on three central aspects: (1) they belong to the scope of private experience; (2) they include both global evaluations and evaluations of separate domains, such as physical and cognitive health, sexuality, family relations, and spirituality; and (3) they include cognitive (e.g., satisfaction) and emotional (e.g., positive and negative affect) assessments (NERI, 2001). Moreover, Baltes et al. (1999) suggested a two-dimensional model, called daily living competences, that focuses on the management of practical life demands, which are prerequisites for independence and autonomy.

The health of both old and young women depends, in any health program, on the priority assigned to prevention. Moreover, the several aspects of female multifunctional characteristics, that is, women's greater autonomy in everyday life, should also be analyzed. Current society demands that women divide between work, home duties and childcare, and special attention should be paid to factors that guide women's lives since birth: nutrition, weight, level of physical activity and of physical and emotional stress, and social life habits. Therefore, discussions about aging do not concern only old people because the aging process begins at birth, and old age indices are associated with life-long practices (ROMERO, 2007).

For a long time, psychology supported that adulthood was the age of stability, in contrast with old age, which was associated with decline. This may explain the recent origin of the scientific study of aging. Camarano (2002) claims that the concept of development as a phenomenon that occurs along the whole life was accepted by several researchers in the past, but science and culture were not ready to develop systematic studies about maturity and old age. Such ideas were latent in psychology until several sociohistorical and cultural changes opened up the opportunity for the systematic study of aging.

Most studies about old people are recent. Classical psychology books extensively discussed childhood and

adolescence, but dedicated very little attention to adulthood and brought almost no mention of aging. Population aging in Brazil is accelerated and intense, and one of our country's greatest challenges will be to provide care for over 32 million old people, most of whom have a low socioeconomic and educational level and a high prevalence of chronic and incapacitating diseases (FREITAS, 2000).

This study evaluated how women perceive positive and negative feelings, self-esteem, body image and appearance during aging.

METHODS

This cross-sectional descriptive study selected 664 women 18 to 80 years old from Vale do Sinos, Brazil, using convenience sampling. Participants were invited personally or by phone, and evaluations were scheduled. Free transportation was provided to those who were not able to travel to the data collection center.

Quality of life, a woman's perception of her position in life in the context of the culture and value systems in which she live and in relation to her goals, expectations, standards and concerns, was evaluated with the WHOQOL-100 questionnaire (WHOQOL GROUP, 1995), which assesses six domains: physical, psychological, level of independence, social relations, environment and spirituality, religion and personal beliefs. Items are grouped into 24 quality of life facets and one overall quality of life facet. This study used the facets that assess the psychological domain: positive and negative feelings, self-esteem, body image and appearance. The chi-square test and the SPSS 15.0 software were used for data analysis, and the women were divided into three groups: 18 to 39 years (adult, N=301); 40 to 59 years (middle age, N=267); and older than 60 years (old, N=96).

RESULTS AND DISCUSSION

Data showed that middle-aged women enjoyed life less ($p=0.00$) and experienced fewer positive feelings ($p=0.00$) than adult and old women.

According to Negreiros (2004), time changes happen in times of change for each generation or life phase, as can be particularly observed in middle-aged women. Middle age is seen as a period of transition between adulthood and old age. Middle-aged women go through moments of crisis associated with menopause, the fact that children are leaving home, and changes in physical appearance and in social and parental roles, which may have an impact on their perception of quality of life. Davidoff (2001) suggests that very self-centered women seem to be more likely to suffer from depression, alcoholism and other adjustment problems at work and in their marriage, because they are not capable of sustaining self-respect without continuous support from others. Although children and friends may still sustain their admiration in spite of the deleterious effects of time, the decline is evident and perceived by middle-aged women, and may cause a decrease in the perception of positive feelings, as seen in Table 1.

Table 1 - Analysis of facet 4 (positive feelings) in domain II (psychological domain).

QUESTION	AGE GROUPS			Asymp. Sig. (2-sided)
	18-39 years	40-59 years	60 years or older	
F4.1) How much do you enjoy life?	3.26	3.52	3.63	0.00
F4.4) How much do you experience positive feelings in your life?	3.58	3.64	3.81	0.00
F6.2) How much confidence do you have in yourself?	3.78	3.88	4.03	0.01

No significant differences were found in feelings of sadness or depression, usually associated with old age. Old women had the fewest negative feelings, such as bad mood, despair, anxiety and depression ($p=0.03$); they also were the most optimistic in relation to the future ($p=0.00$), which can be seen in Table 2.

Table 2 - Analysis of facet 8 (negative feelings) in domain II (psychological domain).

QUESTION	AGE GROUPS			Asymp. Sig. (2-sided)
	18-39 years	40-59 years	60 years or older	
F4.3) How optimistic are you in relation to the future?	3.31	3.63	4.02	0.00

Neri (2001) reports that the prevalence of anxiety decreases after 65 years in comparison with middle age and early adult life. According to Romero (2007), a woman's mood affects her mental health, and loneliness or dependence on other members of the family may severely affect mental health. In our study, old women were better adapted to these changes and had more positive feelings than younger women.

Finally, the questions about self-esteem, body image and appearance showed that old women had fewer concerns about physical appearance ($p=0.00$), were more confident ($p=0.01$), and more satisfied with themselves ($p=0.00$) than the other age groups, as can be seen in Table 3.

Table 3 - Analysis of facets 6 and 7 (self-esteem, body image and appearance) in domain II (psychological domain).

QUESTION	AGE GROUPS			Asymp. Sig. (2-sided)
	18-39 years	40-59 years	60 years or older	
F6.3) How satisfied are you with yourself?	3.58	3.71	3.95	0.00
F7.3) Is there anything in your appearance that makes you dissatisfied?	2.25	2.60	2.76	0.00

The constant search for eternal youth is often seen in the 40-59 group, who take special care of their physical appearance, which directly reflects on their self-esteem. Such search is not observed in old women, who seem to have already adapted to changes caused by time and overcome this common and evident concern about keeping a youthful appearance seen in middle age.

Contrary to previous beliefs, the rates of most psychiatric diseases are lower in old age than in middle age and adult

life, and few psychiatric diseases are found in the beginning of old age (NERI, 2001).

Debert (1999), however, holds the optimistic view that old age and widowhood may represent a time of independence and achievement for women today. According to Davidoff (2001), although the challenges of advanced old age may be frightening, most old people face them successfully. This may be explained by the fact that old people are usually not alone and perceive that other people in their age group have similar problems. Moreover, losses tend to occur gradually and chronically, which will promote a gradual adaptation and preparation to certain events, and will make adjustment easier.

CONCLUSION

Each woman has her own rhythm to absorb changes and crises at each age, according to life peculiarities and different stimuli as they come from different social groups (NEGREIROS, 2004). Although women have different psychological problems in all the phases of their life cycle, this study found that old women had more favorable and optimistic perceptions.

Middle age crises may positively promote adaptation and preparation for a calm and healthy old age. Old women showed that they were able to deal with their positive and negative feelings better than women in the other age groups, maybe because of the experiences that they accumulated along life. In conclusion, successful aging depends on the path followed along all life and on the factors that guided this journey. This process may be metaphorically described as a garden: we sow in adult life, we check what sprouted and what has to be replaced or fertilized in middle age, and we reap the fruit and flowers in old age.

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PSYCHOLOGICAL ASPECTS OF AGING IN WOMEN LIVING IN VALE DO SINOS, BRAZIL.

ABSTRACT

Quality of life is an important element in the analysis of physical and emotional life, and the multidimensional character of this construct should be investigated. This study evaluated women's perception of positive and negative feelings, self-esteem, body image and appearance during aging. This cross-sectional descriptive study enrolled 664 women 18 to 80 years from Vale do Sinos, Rio Grande do Sul (RS), Brazil, who were selected using convenience sampling. The WHOQOL-100 questionnaire was used to evaluate quality of life. This instrument is made up of different facets grouped in six domains: physical, psychological, level of independence, social relations, environment and spirituality. We used the psychological domain facets: positive and negative feelings, self-esteem, body image and appearance. The chi-square test and the SPSS 15.0 software were used for statistical analysis, and women were divided in three groups: 18 to 39 years (adult, n=301); 40 to 59 years (middle age, n=267); and older than 60 years (old, n=96). Data showed that middle-aged women enjoyed life less (p=0.00) and experienced fewer positive feelings (p=0.00) than adult and old women. Old women had fewer negative feelings, such as bad mood, despair, anxiety and depression (p=0.03); they also were the most optimistic about the future (p=0.00), the least concerned with problems associated with physical appearance (p=0.00), had the greatest confidence (p=0.01), and were the most satisfied with themselves (p=0.00). Although women have different psychological problems in different life phases, this study found that old women had more favorable and optimistic perceptions and knew how to deal with their positive and negative feelings better than women in the other age groups.

KEY WORDS: Quality of life. Aging. Gender.

DES ASPECTS PSYCHOLOGIQUES DANS LE PROCESSUS DE VIEILLISSEMENT DE FEMMES HABITANTES À LA RÉGION DU VALE DO SINOS/RS

RESUME

La qualité de vie est un important élément dans l'analyse physique et émotionnelle des individus, ce qu'il faut souligner à ce concept un caractère multidimensionnel. Le but de cette étude est d'évaluer la perception des femmes pendant leur processus de vieillissement par rapport aux sentiments positifs et négatifs, à l'estime de soi, à l'image corporelle et au schéma corporel. Il s'agit d'une étude interprétative, d'un échantillon de 664 femmes, de groupe d'âge de 18 à 80 ans, habitantes au Vale do Sinos, Rio Grande do Sul (RS), Brésil, sélectionnées par convenance. Pour analyser la qualité de vie, on a utilisé le WHOQOL-100 qui fait l'évaluation en six domaines (physique, psychologique, niveau d'indépendance, rapports sociaux, environnement et religiosité). Chaque domaine est formé de différents facteurs. On a particulièrement utilisé les suivants facteurs du domaine psychologique : des sentiments positifs et négatifs, l'estime de soi, l'image corporelle et le schéma corporel. L'analyse statistique a été réalisée par le test du Chi2 avec SPSS, version 15.0. L'échantillon a été divisé en trois groupes : 18 à 39 ans (jeune, n=301), 40 à 59 ans (âge moyen, n=267) et plus de 60 ans (vieux, n=96). Les résultats ont précisé que les femmes du groupe d'âge moyen ont montré moins sentiments de profiter de la vie (p=0,00) et moins sentiments positifs (p=0,00) que le

groupe des jeunes et des vieux. D'ailleurs, on a vérifié que dans le groupe de plus de 60 ans (vieux) il y a eu un plus bas taux de sentiments négatifs comme du mauvais humour, du désespoir, de l'inquiétude et de la dépression ($p=0,03$). En outre, ce groupe a été le plus optimiste par rapport au futur ($p=0,00$), le plus confiant ($p=0,01$) et il a eu le plus bonne estime de soi ($p=0,00$). Les femmes de plus de 60 ans ont eu le plus bas taux de problèmes d'image corporelle ($p=0,00$) par comparaison aux autres groupes d'âge. On peut conclure que les femmes les plus âgées (groupe de plus de 60 ans) ont présenté une perception plus optimiste de la vie, car elles ont expérimenté les meilleurs gains de sentiments positifs et négatifs que les femmes jeunes et d'âge moyen.

MOTS-CLES : Qualité de vie. Processus de vieillissement. Femmes.

ASPECTOS PSICOLÓGICOS EN EL PROCESO DE ENVEJECIMIENTO DE MUJERES HABITANTES DE LA REGIÓN DE VALE DOS SINOS/RS

RESUMEN

La calidad de vida es un elemento importante en el análisis de la salud física y emocional de los individuos, siendo necesario resaltar el carácter multidimensional de ese constructo. El objetivo de la investigación fue evaluar la percepción de las mujeres durante su proceso de envejecimiento con relación a los sentimientos positivos y los negativos, auto-estima, imagen corporal y apariencia. Se trata de un estudio interpretativo con muestra de 664 mujeres, de 18 a 80 años, habitantes en la región de Vale do Sinos, Río Grande del Sur (RS), Brasil, seleccionadas por conveniencia. Se utilizó el WHOQOL-100 como Instrumento de Evaluación de Calidad de Vida, que evalúa seis dominios: el físico, el psicológico, el nivel de independencia, las relaciones sociales, el ambiente y la espiritualidad. Cada uno de estos dominios se constituye de diversas facetas. Se utilizaron, específicamente, las facetas del dominio psicológico: los sentimientos positivos, los negativos, la auto-estima, la imagen corpórea y la apariencia. Para el análisis estadístico se utilizó un teste qui-cuadrado a través del SPSS-versión 15.0, en que la muestra fue separada en tres grupos: de 18 a 39 años (adultas, $n=301$), 40 a 59 años (edad madura, $n=267$) y mayores de 60 años (ancianas, $n=96$). Los resultados señalaron que las mujeres de edad madura presentan menor sentimiento de aprovechar la vida ($p=0,00$) y experimentan menos sentimientos positivos ($p=0,00$) que las adultas y que las ancianas. Las ancianas, por su vez, son las que menos presentan sentimientos negativos como el mal-humor, el desespero, la ansiedad y la depresión ($p=0,03$), son las más optimistas con relación al futuro ($p=0,00$), son las que menos se molestan con problemas relacionados con la apariencia física ($p=0,00$), presentan mayor confianza ($p=0,01$) y están más satisfechas consigo mismas ($p=0,00$); comparadas a las de otros grupos etáricos. Se concluye que, a pesar de las mujeres presentaren diferentes problemas psicológicos en todas las fases del ciclo vital, se puede identificar con este estudio que las ancianas demuestran una percepción más favorable y optimista, por tanto, demuestran saber lidiar mejor con sus sentimientos positivos y negativos que las mujeres de los demás grupos etáricos.

PALABRAS CLAVE: Calidad de Vida. Proceso de Envejecimiento. Género.

ASPECTOS PSICOLÓGICOS NO PROCESSO DE ENVELHECIMENTO DE MULHERES RESIDENTES NO VALE DO SINOS - RS

RESUMO

A qualidade de vida é um elemento importante na análise da saúde física e emocional dos indivíduos, tornando-se necessário ressaltar o caráter multidimensional deste constructo. O objeto de pesquisa deste estudo foi avaliar a percepção das mulheres durante o seu processo de envelhecimento em relação aos sentimentos positivos e negativos, auto-estima, imagem corporal e aparência. Trata-se de um estudo interpretativo com amostra de 664 mulheres, de 18 a 80 anos, residentes no Vale do Sinos, RS, Brasil, selecionadas por conveniência. Utilizou-se como instrumento para avaliar a qualidade de vida, o WHOQOL-100, que avalia seis domínios (físico, psicológico, nível de independência, relações sociais, ambiente e espiritualidade). Cada domínio é constituído por diversas facetas. Utilizaram-se, especificamente, as facetas do domínio psicológico: sentimentos positivos, negativos, auto-estima, imagem corporal e aparência. Para a análise estatística se utilizou teste qui-quadrado através do SPSS-versão 15.0, onde a amostra foi separada em três grupos: 18 a 39 anos (adultas, $n=301$), 40 a 59 anos (meia idade, $n=267$) e acima de 60 anos (idosas, $n=96$). Os resultados apontaram que as mulheres de meia idade apresentam menor sentimento de aproveitar a vida ($p=0,00$) e experimentam menos sentimentos positivos ($p=0,00$) do que as adultas e idosas. Já as idosas são as que menos apresentam sentimentos negativos, como mau-humor, desespero, ansiedade e depressão ($p=0,03$), são as mais otimizadas em relação ao futuro ($p=0,00$), são as que menos se incomodam com problemas relacionados à aparência física ($p=0,00$), apresentam maior confiança ($p=0,01$) e estão mais satisfeitas consigo mesmas ($p=0,00$); comparadas às outras faixas etárias. Conclui-se que, apesar das mulheres apresentarem diferentes problemas psicológicos em todas as fases do ciclo vital, identifica-se neste estudo que as idosas demonstram uma percepção mais favorável e otimista, portanto, demonstram saber lidar melhor com seus sentimentos positivos e negativos do que as mulheres das demais faixas etárias.

PALAVRAS-CHAVE: Qualidade de vida. Processo de envelhecimento. Gênero.