MEANINGS OF OLD AGE AND EXPECTATIONS FOR THE FUTURE FROM THE PERSPECTIVE OF THE ELDERLY

Significados da velhice e expectativas de futuro sob a ótica de idosos

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ABSTRACT

The purpose of this study was to understand the different meanings attributed by older adults to old age and their expectations for the future. This was a qualitative descriptive study of 34 older adults involved in senior activities in the urban area of Pau dos Ferros, a municipality located in the state of Rio Grande do Norte, northeastern Brazil. Using a semi-structured interview, the participants were asked about their perceptions of old age and expectations for the future. Two thematic categories emerged throughout the analysis process: ‘Meanings attributed to old age’ and ‘Expectations for the future’. The results showed that older adults’ perceptions of old age are constantly influenced by the individual experiences accumulated over a lifetime, and that the triad of old age, health, and disease, in the majority of cases, is the factor that most influences the responses. It is our hope that the present study will contribute to the development of further studies that include older adults’ perceptions of their own aging process, and that these studies will provide knowledge that will translate into benefits for older adults, whether they participate or not in group-based senior activities.

KEYWORDS: aging; aged; health of the elderly; senior centers.

RESUMO

Objetivou-se compreender os diferentes significados da velhice e as expectativas de futuro dos idosos. A pesquisa, qualitativa de caráter descritivo, foi desenvolvida em Pau dos Ferros, Rio Grande do Norte, com 34 idosos que frequentam grupos de convivência localizados no município. A coleta de dados ocorreu por meio de entrevista semiestruturada abordando os seguintes questionamentos: como esses idosos enxergam a velhice e quais são suas expectativas para o futuro? Da análise do material emergiram duas categorias temáticas: “Significados atribuídos à velhice” e “Expectativas de futuro”. Os resultados da pesquisa evidenciaram que as percepções dos idosos sobre a velhice são constantemente influenciadas pelas experiências individuais durante o processo de envelhecimento, e que a tríade velhice-saúde-doença, na maioria das vezes, é o que mais influencia nas respostas. Espera-se que este estudo sirva de subsídio para o desenvolvimento de outras pesquisas contemplando a ótica da população idosa a respeito do próprio processo de envelhecimento, e que tragam conhecimentos que possam ser convertidos em benefícios aplicados a esse público, tanto aos idosos que frequentam grupos de convivência quanto aos demais.

PALAVRAS-CHAVE: envelhecimento, idosos, saúde do idoso, centros comunitários para idosos.
INTRODUCTION

Examining older adults’ perceptions of their own aging process has been a recurring theme of research. Most studies indicate that there are two aspects to this subject: positive and negative perceptions of old age. Positive perceptions are related to living longer, achieving personal goals, gaining experience, learning from the experience, and planning future actions to achieve a goal, among others. Negative perceptions, in turn, are related to physiological changes and losses, increased susceptibility to illness, decreased work capacity, loss of autonomy, and closer proximity to death, among other factors that contribute to viewing old age as a painful event.1

When analyzing the aging process in its entirety, it is clearly noticeable that each person ages differently, and the pattern of senescence depends on the path taken to reach this point and on the social determinants to which one is subjected during aging.2 The efforts to maintain the elderly in the community have given rise to a variety of old age-related initiatives. An example is the senior centers, where older adults can come together for activities that enhance their dignity and quality of life, which encompasses physical, social, psychological, and spiritual well-being.2

The desire for better health status and social interaction is one of the reasons why some older adults choose to participate in group-based programs for the elderly, motivated mainly by the essential human need to interact with others. In general, participation in these group-based programs or community centers is seen as a way to avoid social isolation.3

From this perspective, we believe that older adults’ conceptions of themselves are extremely important for the reflection on issues related to old age and should be debated and exposed to the public, in an attempt to challenge the stereotypes associated with aging. Within this context, the purpose of the present study was to understand the different meanings attributed by older adults to old age and their expectations for the future.

METHODS

This qualitative descriptive study was conducted in the urban area of Pau dos Ferros, a municipality located in the state of Rio Grande do Norte, northeastern Brazil, at a distance of approximately 400 km from the capital, Natal.4 A total of 34 older adults attending local group-based programs for the elderly in three Social Work Reference Centers (SWRCs) and one community center voluntarily agreed to participate in the study.

Eligible participants were all adults aged ≥ 60 years involved in senior activities in the community who had no cognitive or mental impairment, as assessed by the Mini-Mental State Examination (MMSE). Those engaged in activities in more than one SWRC or community center were excluded. Written informed consent was obtained from all participants prior to their inclusion in the study.

Data collection occurred by means of scheduled visits at the SWRCs and community centers where senior activities were performed. The MMSE was administered as an initial screening instrument for eligibility to participate in the study. Using a semi-structured interview, older adults were surveyed for sociodemographic data and were asked about their perceptions of old age and expectations for the future.

Older adults were approached for participation while they were attending activities in the senior centers. In each instance, the researcher introduced himself to the elderly and explained the purpose of the study. Those who agreed to participate were taken to a separate room and interviewed individually. First, the potential participants received clear explanations about the study protocol and signed an informed consent form. The MMSE was then administered and those who achieved satisfactory scores were interviewed.

The MMSE was administered to 40 older adults, of whom only six scored below 23, which was the minimum score required for inclusion. Therefore, 34 respondents were considered cognitively and mentally able to participate in the study and were ultimately interviewed. The semi-structured interview consisted of an oral survey to collect sociodemographic data and a series of questions about the respondents’ perceptions of their own aging process and their expectations for the future.

Data were collected from October 22nd to November 25th, 2015. The MMSE took 5 to 10 minutes to administer, and each interview lasted from 5 to 10 minutes.

All data were compiled into a single database for analysis, and the questionnaires were stored. Data collected from the interviews were interpreted and analyzed by thematic analysis, which was divided into three stages:

1. pre-analysis: organizing the data set to be analyzed;
2. familiarization with data: reading and re-reading the material until becoming familiar with the content of the data; and
3. treatment and interpretation of data: comparing the data collected with data from the literature.

To protect the identity of the participants, their statements were identified with tree names and their age (e.g., Cherry tree, 65 years old).

This study was conducted as part of a senior research project in nursing entitled ‘Older adults’ perception of death:
An analysis in senior centers.’ The study was approved on September 28th, 2015, by the Research Ethics Committee of Universidade do Estado do Rio Grande do Norte (UERN) (registration number: CAAE 48993715.2.0000.5294).

RESULTS

Participants’ sociodemographic data

The sample consisted of 34 older adults, of both sexes, aged from 60 to 89 years. Most participants were white women aged 60-69 years (mean age, 74.5 years) who lived in the urban area of the town, mostly in the same neighborhood where the senior center they attend is located. Most of them were catholic, retired, and married, living harmoniously with their spouse and children in households with 1 to 4 people.

Thematic categories

Two thematic categories emerged throughout the analysis process: ‘Meanings attributed to old age’ and ‘Expectations for the future’. Each category contains four subcategories, as described below.

Meanings attributed to old age

Category 1 discusses how older adults perceive old age, including the formulation of different meanings through their participation in organized activities within a senior center. Four subcategories emerged from this category: ‘Old age, health, and illness’; ‘Old age and life cycles’; ‘Acceptance or denial of old age’; and ‘Social bonds and productivity’.

Old age, health, and illness

When asked about how they perceive old age, some participants answered that they perceive it as an intermediate stage between a ‘state of health’ and a ‘state of illness’. A negative perception of old age was evident from their statements under the concept of frailty:

It is a struggle... We struggle, but we get tired... We feel pain. (Sequoia, 80 years old);

For those who age healthily, old age is no big deal... Old age is bad because of diseases. (Chestnut tree, 76 years old);

We have to accept aging. I just don’t settle for being sick, but we have to accept that too (Hog plum tree, 69 years old).

Analogously, in the following statements, old age is addressed as something positive in the absence of disease:

It is not as easy as it used to be, but we keep it up... (Cherry tree, 65 years old);

I’m getting older, right? So, what I see is that I’m healthy, I’m doing well, thanks God, to this day. (Mahogany tree, 60 years old);

I see myself as a happy person, I’m healthy. (Aroeira, 60 years old).

The participants perceived the aging process differently: some viewed it as a negative experience, by mentioning the typical diseases of old age, while some viewed it as a positive experience, attributing it precisely to the absence of diseases.

Old age and life cycles

From another perspective, some participants perceived old age as another stage of life to be experienced. For some of them, aging is necessary to complete the life cycle and make human beings begin to accept themselves as finite beings, as shown in the following statements:

I’m already old... I’m already at the end. (Acacia, 78 years old);

(...) we’re young and have to get old, right?! That means we’re lasting, that we have to live and we’re living. (Baobab, 69 years old);

(...) I do have to get old (Brazil plum tree, 61 years old).

Conversely, some participants still wanted to enjoy the gift of life regardless of the aging process and awareness of finitude, as shown in the following statements:

I still think it’s great. (Flamboyant, 72 years old);

I think I’ve lived all this time, thanks God, and I still want Him to lead me down other paths in my life... (Inga tree, 65 years old);

Some people say they will die because they’re old, I don’t say that, I want to live. (White fig tree, 61 years old).

Based on the participants’ statements, death is viewed as part of the life cycle and, given the time they have already
lived, death does not frighten them. They accept themselves as finite beings and view old age as the last phase of the life cycle.

Acceptance or denial of old age

Within a social context in which aging begins to be more clearly expressed, older adults also begin to accept old age and accept themselves as part of the aging process, as shown in the following statements:

I’m really proud to be this old, because, if you don’t want to get old, you will die young. (Oak tree, 72 years old);

It’s good, because the older you are, the longer you’re living, right? We’ll live until health is gone. (Olive tree, 64 years old);

I’m asking God to let me live for 100 years, because the older, the better. (Cedrus, 62 years old).

However, despite the recognition of aging as a part of life that is essential to complete the life cycle, some participants tried to deny this fact, as follows:

It happens the way God wants it to happen, right?! (Rubber tree, 75 years old);

Okay, I don’t consider myself an elderly person yet. I’m old, but I don’t consider myself an elderly person. (Bowdichia, 62 years old).

Some responses fall somewhere between acceptance and denial of old age, and may be understood as a conformist response to aging:

I see old age as something I have nothing to compare with, because I’m not young anymore and what I’ve experienced so far is good. (Juazeiro tree, 80 years old);

Old age is something we need to get used to, and deal with it with pleasure... Getting old is annoying, but it’s also good to learn how to age. (Walnut tree, 78 years old);

I can handle it, I’m satisfied. (Fig tree, 63 years old).

The participants’ statements indicate that they perceive and face the aging process daily in three different ways:

1. by accepting old age without psychological resistance;
2. by denying old age and considering it a bad phase;
3. by simultaneously accepting and denying the aging process.

Therefore, the main factor contributing to these statements in the face of the certainty of aging is the individual experience.

Social bonds and productivity

There are a variety of social representations of old age, but classifying it as an unproductive phase of the life cycle certainly is the most common representation and has led to the exclusion of older people from social life:

Being old is being lonely, that’s the way it is, it’s normal this way. (Araucaria, 89 years old);

Aging means that we get to an age we no longer have resistance to work. (Sandalwood tree, 78 years old);

Aging is good, but when we get old we get more tired... When we’re young, we’re willing to do everything, but when we get old, we’re not anymore. (Bonsai, 77 years old).

Regarding social bonds in older age, one of the participants reported an exceptional experience, in which her experience of aging is limited to her condition of having ‘poor health’, as shown in her statement:

I have accepted it very well so far, because I’m well cared for by my family, I have poor health, but I’m very well treated and, also, I’m a person that always respect the others to be respected as well, right? When I come back home from the places where I participate in senior activities, I always say: I don’t know why old people keep saying they are not respected, I’m respected by everyone. (Angico tree, 78 years old).

Unfortunately, this is a reality experienced only by a few elderly people, as described by the participant herself while questioning why other elderly people are not respected. Nevertheless, older adults deserve to be respected, because respect has a much broader sense and is the base of the pyramid of rights of the aged.

EXPECTATIONS FOR THE FUTURE

Category 2 discusses the expectations for the future of older adults attending group-based activities in senior centers
in a small town in northeastern Brazil. Four subcategories emerged from this category: ‘Uncertainty and conformism’; ‘Longevity’; ‘Goal setting’; and ‘Pessimism’.

Uncertainty and conformism

When asked about their expectations for the future, some participants showed uncertainty and left this decision to God alone, as shown in the following statements:

- Only God knows about the future... From now on, only God knows how many years I'm going to live. (Walnut tree, 78 years old);
- If it was on me to decide, I'd like to be much better in the future, but only God knows how my future will be. (Chestnut tree, 76 years old);
- All I ask God is to keep me as I am. (Willow tree, 60 years old).

The participants’ statements reveal that they want to live longer, but, despite their desire to do so, God is the one who will define their remaining time of life. As a result, they have no expectations for the future, since God’s will is primary and the human desire is secondary. Therefore, expectations revolve around accepting God’s will and, while waiting for that to happen, the elderly ask Him for more days of life.

Some participants conformed to aging and had no expectations for the future, denoting a somewhat forced acceptance of old age and awareness of finitude, as shown in the following statements:

- None. (Rubber tree, 75 years old);
- I think nothing will change. (Bowdichia, 62 years old);
- Oh, if we try to picture ourselves older... Today I don't do that anymore, I'm already old, I'll just leave it the way it is. (Trumpet tree, 60 years old).

Longevity

In an increasingly long-lived society and in the face of widespread diffusion of technological innovations, some participants felt more hopeful about the future, as shown in the following statements:

- I hope to live for at least 90 years, but it's getting close. (Araucaria, 89 years old);
- From now on, I just want good things. Health and many years of life to care for the people who will take care of me. (Brazil plum tree, 61 years old);
- I hope to become an old lady, to be as old as my dad was, he was 89 years old... (White fig tree, 61 years old).

Based on the participants’ statements, the decision-making power is transferred to God, as they ask Him to let them live longer and healthy so that they can make good use of this opportunity, despite their own desires:

- If it’s God’s will, I want to live a few more years and I hope He gives me the strength and courage to carry on. (Pacara Earpod tree, 80 years old);
- Oh, I want God to keep me healthy... (Oak tree, 72 years old);
- I hope God gives me a few more years... I don’t know how much long I can take it, but we have to ask for many days of life. We’re going to live until God is ready for us. (Baobab, 69 years old).

Goal setting

Despite all the limitations imposed by the aging process, some older adults still have dreams to fulfill. However, in view of the aging process, their expectations for the future are almost always defined in terms of being healthy and living longer to enjoy life, as shown in the following statement:

- There is only one dream I want to realize. Being healthy to buy my own place where I can live for the rest of my life. If God keeps me healthy, I will realize this dream. (Fig tree, 63 years old).

Despite aging, the dream is nourished daily for ultimate fulfillment, but, for this to happen, the participant asks God for health so that this goal can be achieved.

Pessimism

The negative perception of old age, always associated with illness, reveals a certain pessimism about the future, as shown in the following statements:

- About the future, that’s how I think: I have my life and a daughter who lives in São Paulo, I really want to visit her, but I don’t because I’m old now and my health is not as good as it used to be. (Sequoia, 80 years old);
My expectations.... to accept whatever comes my way and whatever God determines for my life. I know I won’t be that healthy, because I’m already not so healthy, and I think that, from now on, we’ll become weaker and, even if we want to work, we can’t... (Angico tree, 78 years old).

**DISCUSSION**

Aging is an individual process that involves intrinsic and extrinsic body changes, with a significant biopsychosocial and economic impact on the life of older adults. This stage of human development is also viewed as a moment of reflection for the individuals on their own existence, when they become aware of the experiences and losses suffered over the years. The meanings attributed by older adults to old age are mostly based on the positive and negative perceptions of the aging process and are concretized in the triad of old age, health, and disease, where the absence of disease translates into aging well, while the manifestation of typical morbidities associated with old age can make this stage of life particularly difficult.

Aging is also perceived by older adults as a period when human beings reach their peak of wisdom due to experiences accumulated over a lifetime, thus deserving the respect of the young. However, this process is also understood in terms of the decline in functional capacity, in a way that old age is viewed as a phase characterized by feelings of discouragement and sadness and a sense of dependency (both economically and in terms of care). In addition, aging is seen by older adults as part of the life cycle, representing a common process shared by all individuals as a step in their evolution as finite beings. However, it can refer to achievements accumulated over the years or to a painful event due to closer proximity to death and presence of disabilities associated with aging.

Survival to an old age is a determining factor in the decision to stop working, not only because of the increasing tiredness that is common to those aged 60 years and over, but also because of the capitalist nature of our society — since older people do not have as much vitality as before. Therefore, social bonds and the sense of productivity are often disrupted, excluding the elderly from the social scene.

From this perspective, participation in group-based programs for the elderly promotes their (re)insertion in society, since, when faced with the phenomenon of aging, many older adults lose their autonomy, social status, and work capacity. In addition, the participation of 60+ year-olds in group-based senior activities gives them many opportunities, such as the strengthening of autonomy, inclusion in collective projects, leaving the home environment to have fun, and the chance to carry out new life projects.

Social engagement of the elderly in these groups contributes to having future expectations and planning on how to achieve the desired goals that have once been set in the short, medium, or long term, but only now have the elderly been given the opportunity of free time to pursue them, generating satisfaction. However, older adults with poor health often suffer from a lack of expectations for the future, reflected in pessimism about aging. Due to uncertainty and conformism, they believe that their fate is in the hands of God. They put themselves in the position of being a passive observer rather than an active participant in their own lives, surviving into old age without expectations, hopes, or dreams — accepting from life whatever God decides.

In view of the foregoing, it is important to point out the need for strategies to promote quality of life in old age so that the elderly can age healthily and without morbidities that prevent them from enjoying this stage of life, with all the positive aspects that old age can bring.

**CONCLUSION**

The results showed that older adults’ perceptions of old age are constantly influenced by the individual experiences accrued over a lifetime, and that the triad ‘old age, health, and disease’, in the majority of cases, is the factor that most influences the responses. The future is a mystery, and as such, there may be a fear of thinking about it. Therefore, the participants’ expectations for the future were relatively low, revealing pessimism about aging. The participants also demonstrated uncertainty and conformism by accepting/believing that life events are determined by God. However, most of them expressed a wish for a long life, while wishing to be healthy in order to live well.

In this context, popular health education strategies are needed to disseminate knowledge about the aging process, in all its aspects, to society as a whole, in an attempt to help people to become less scared of this stage of life and to reduce manifestations of prejudice against the elderly.

It is our hope that the present study will contribute to the development of further studies that include older adults’ perceptions of their own aging process as well as their expectations for the future, given the paucity of scientific evidence on this topic. We believe that such studies will provide knowledge that will translate into benefits for older adults, whether they participate or not in group-based senior activities.

**CONFLICT OF INTERESTS**

The authors declare no conflict of interests.
REFERENCES


