

## REPRESENTAÇÕES SOCIAIS DE MULHERES IDOSAS SOBRE O ENVELHECIMENTO

### SOCIAL REPRESENTATIONS OF ELDERLY WOMEN ABOUT AGING

### REPRESENTACIONES SOCIALES DE LAS MUJERES MAYORES SOBRE EL ENVEJECIMIENTO

Hanna Gadelha Silva<sup>1</sup>, Jéssica de Menezes Nogueira<sup>2</sup>, Edson Batista dos Santos Junior<sup>3</sup>, Daisy Teresinha Reis Coutinho<sup>4</sup>, Maria Célia de Freitas<sup>5</sup>.

#### RESUMO

**Objetivo:** Apreender as representações sociais de mulheres idosas sobre o envelhecimento. **Método:** Trata-se de uma pesquisa exploratória, descritiva, qualitativa e fundamentada na Teoria das Representações Sociais. O estudo foi realizado com 10 idosas, utilizando-se, como coleta de dados, um Formulário Sociodemográfico e a entrevista em profundidade. O material discursivo foi organizado com o auxílio do *software* IRAMUTEQ 0.7 e analisado, por meio da interpretação da Análise de Similitude. **Resultados:** O termo *não* foi o que mais se destacou e apresentou um maior número de conexões com os termos: *andar, direito, passear, sair, conversar, amigo, missa, igreja, querer, sentir, pensar, cuidar, olhar, comportamento, dentro-casa, antes, agora, diferença*. Desse modo, as idosas ancoraram o termo *envelhecimento* às perdas funcionais e limitações, relacionadas a atividades que não conseguem mais realizar, em decorrência do envelhecimento. As idosas também ancoraram o envelhecimento, principalmente, nos aspectos negativos físicos (*doença, osteoporose, remédio, cansaço*), psicológicos (*triste, estresse, medo, sofrer*) e sociais (*desrespeitar, abandonar, respeitar, criar, filho, neto*). **Conclusão:** Por fim, a Enfermagem pode desenvolver cuidados e ações educativas, a partir das demandas sociais identificadas pelas representações sociais das mulheres idosas.

**Descritores:** Envelhecimento; Idoso; Mulheres; Enfermagem.

#### ABSTRACT

**Objective:** To understand the social representations of elderly women about aging. **Method:** This is an exploratory, descriptive, qualitative research based on the Theory of Social Representations. The study was carried out with 10 elderly women, using a sociodemographic questionnaire and the in-depth interview to collect the data. The discursive material was organized on *software* IRAMUTEQ 0.7 and analyzed by interpreting the Similitude Analysis. **Results:** The word "not" was the one that stood out the most and had a greater number of connections with the terms: *walking, straight, riding, going out, talking, friend, mass, church, wanting, feeling, thinking, taking care, looking, behavior, indoors, before, now, difference*. Thus, the elderly women related the word *aging* to functional losses and limitations, with respect to activities that they can no longer perform due to aging. The elderly women also anchored aging mainly to the negative physical (disease, osteoporosis, medicine, tiredness), psychological (sad, stress, fear, suffering) and social aspects (disrespecting, abandoning, respecting, raising, child, grandchild). **Conclusion:** Finally, nursing can develop care and educational actions based on the social demands identified by the social representations of elderly women.

**Descriptors:** Aging; Elderly; Women; Nursing.

#### RESUMEN

**Objetivo:** Comprender las representaciones sociales de las mujeres mayores sobre el envejecimiento. **Método:** Esta es una investigación exploratoria, descriptiva, cualitativa basada en la Teoría de las Representaciones Sociales. La investigación se realizó con 10 mujeres de edad avanzada, utilizando un cuestionario sociodemográfico y una entrevista en profundidad para la recolección de los datos. El material discursivo se organizó con el *software* IRAMUTEQ 0.7 y se analizó mediante la interpretación del análisis de similitud. **Resultados:** El término "no" fue el que más se destacó y presentó una mayor cantidad de conexiones con los términos: *caminar, derecho, dar una vuelta, salir, hablar, amigo, misa, iglesia, querer, sentir, pensar, cuidar, apariencia, comportamiento, adentro, antes, ahora, diferencia*. Por lo tanto, las ancianas asociaron el término envejecimiento a las pérdidas y limitaciones funcionales, relacionadas con actividades que ya no pueden realizar debido al envejecimiento. Las mujeres de edad avanzada también asociaron el envejecimiento principalmente con los aspectos físicos negativos (enfermedad, osteoporosis, medicina, cansancio), psicológicos (tristeza, estrés, miedo, sufrimiento) y sociales (falta de respeto, abandono, respeto, crianza, hijo, nieto). **Conclusión:** Finalmente, la enfermería puede desarrollar acciones educativas y asistenciales basadas en las demandas sociales identificadas por las representaciones sociales de las mujeres mayores.

**Descriptorios:** Envejecimiento; Anciano; Mujeres; Enfermería.

<sup>1</sup>Enfermeira pela Universidade Estadual do Ceará. <sup>2</sup>Doutora em Enfermagem pela Escola Anna Nery de Enfermagem da Universidade Federal do Rio de Janeiro. Docente da Universidade Federal do Piauí. <sup>3</sup>Mestre pela Universidade do Estado do Rio Grande do Norte. Doutorando em Cuidados Clínicos de Enfermagem e Saúde da Universidade Estadual do Ceará. <sup>4</sup>Mestre em Cuidados Clínicos em Enfermagem e Saúde. Doutoranda em Cuidados Clínicos em Enfermagem e Saúde pela Universidade Estadual do Ceará. <sup>5</sup>Doutora em Enfermagem Fundamental pela Escola de Enfermagem de Ribeirão Preto da Universidade de São Paulo. Docente da Universidade Estadual do Ceará.

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## INTRODUÇÃO

Population aging today is a global reality and a challenge for nursing and society. The number of people over 60 in Brazil is expected to grow faster than the world average. While the number of elderly people will double in the world by the year 2050, it will almost triple in Brazil<sup>(1)</sup>. This new reality has increasingly required transformations in Brazilian society to offer quality of life to the elderly and build new paradigms for aging, in addition to formulating plans to undo the myths and stereotypes of old age.

Another demographic phenomenon in Brazil is the feminization of old age, that is, the higher concentration of women in this age group. The gender ratio for the elderly population is about 0.8, indicating that there are approximately 80 elderly men per 100 elderly women. This occurs due to the higher male mortality rate<sup>(2-3)</sup>. The predominance of elderly women is still a recent phenomenon and, often, their needs remain little known.

Aging is a multifaceted process that includes biological, cultural, and social aspects. From this perspective, it is possible to perceive gender differences in aging. It is understood that female aging generates a dichotomy between losses, either with the appreciation of experience and wisdom, or by losses and changes of physical nature, such as diseases and body changes. Several factors cause women risks and vulnerabilities in old age, exposing social inequalities and differences in opportunities that affect elderly women, such as a higher probability of working in the informal sector, lower income and education levels, chronic diseases, disabilities and social isolation<sup>(4-5)</sup>.

Society's understanding of aging influences the behaviors and way individuals view old age and even the development of public policies and scientific research<sup>(1)</sup>. In this sense, grasping the way elderly women perceive aging is relevant to understand their behaviors, ideas, feelings and thoughts. In addition, it broadens debates that can provide a new look at old age with a view to promoting healthy aging.

Thus, the importance, in Nursing, of studying the demands of old age based on theoretical references that are concerned with understanding the construction of aging, from common sense. Therefore, the Social Representations Theory (SRT) was the reference chosen for this study, because it favors the

knowledge on the meaning of social phenomena of the group and, thus, enable interventions.

Social representations are a form of socially shared knowledge that is a common reality to a group. They guide and establish the conducts, opinions and beliefs of social groups<sup>(6)</sup>. The proposal of SRT is that, always, there is someone's (subject) representation about something (object). To generate a social representation, an object must have a "cultural relevance" or "social thickness". Thus, it becomes a legitimate study object of science, since it presents a relevance for social life<sup>(7)</sup>. In the case of this study, the subjects of special interest will be the older women and the object will be aging.

From social representations of old women about aging, it is possible to identify the culture, values and beliefs that are behind the thoughts that guide their ways of living. Nurses play a fundamental role in providing care and educational activities in the face of the cognitive, social and psychological demands of the elderly<sup>(8)</sup>. Therefore, understanding the way the older women perceive aging favors future actions of clinical nursing care for older women and educational activities to enable active and healthy aging.

In view of this panorama, in the present study, the objective was to understand the social representations of older women about aging.

## METHODS

This is a qualitative research, based on the Social Representations Theory. In this study, we chose to adopt the procedural approach, which works with knowledge about the construction of representations through the processes of objectification and anchoring, two interconnected sociocognitive processes that form social representations<sup>(6)</sup>. In the anchoring process, unknown ideas are associated, in something already known, from life history and popular thought, comparing and classifying into categories. On the other hand, the objectification consists of reproducing a concept in an image, making concrete the knowledge about the object<sup>(7)</sup>.

The research was conducted with elderly women who attended an Activity Group for the elderly, in a *Centro de Referência de Assistência Social* (CRAS), in the city of Fortaleza, Ceará, which was mediated by professionals linked to CRAS. The research adopted the following inclusion criteria: being 60 or older, being independent, healthy and

having participated in the workshop for at least one month. Exclusion criteria: elderly women with a frequency of less than 80%.

The researcher initially attended a workshop meeting for adaptation, explaining the objective and methodology of the research to the elderly women and workshop coordinators. The group consisted of 10 elderly women and, after talking with the workshop coordinators, it was evident that all the elderly women participated frequently, and no one would be excluded. There were also no refusals and, therefore, all 10 of the elderly women constituted the research sample.

The instruments used in data collection were: a sociodemographic form and an in-depth interview that were both elaborated by the researcher. In the sociodemographic form, there were questions related to age, marital status, education, occupation, family income, number of children, religion, and time of participation in CRAS workshops. For the study of social representations, it is necessary to know the participants and their context, since we are influenced by the thoughts and actions of the other components of our social group.

The in-depth interview technique was used, using a semi-structured guide. This type of data collection strategy can be conceptualized as an in-depth interview, as it reinforces the unlimited possibilities of expression of the interviewee on the proposed theme and the resulting associations, capturing the study subjects' objects of representations<sup>(9)</sup>. Therefore, this technique allows deepening the dialogue and an interpretation of the participants' discourses. The instrument contained the application of questions related to aging, exploring what the elderly women thought and how they acted about aging.

The researcher attended the five workshops, and, after the end of the meetings, the women were invited to participate on data collection. The collection was carried out between March and April 2018. The workshops were held twice a week, and, after each meeting, interviews were conducted individually in a room reserved for the research, by the workshop coordinators, and recorded with the consent of the women and then transcribed. The average time of each interview was 10 minutes.

The organization of the data from the sociodemographic form was carried out by tabulating it in the Microsoft Office Excel 2016

program, calculating the absolute frequencies and organizing it in a table to characterize the sample.

The discursive material produced by the in-depth interviews was literally transcribed and organized with the help of the SOFTWARE IRAMUTEQ (Interface of R pour les Analyses Multidimensionnelles de Textes et de Questionnaires) 0.7, version alpha 2, R 3.1.2., which performs statistical analysis of texts and word tables. The analysis was developed by means of the interpretation of the Analysis of Similarity and discussion with the literature on the theme, which is based on graph theory to identify the co-occurrences between words and indicate the connection between words<sup>(10)</sup>.

From the analysis of the transcribed verbal material, processed by IRAMUTEQ and analyzed by the researcher, we can understand the processes of anchoring and objectification of the subjects, a group of women who speak with knowledge from their experience of aging and old age. Thus, it was possible to group contexts that determine representations shared among the women, organizing a social thought produced in relation to a given phenomenon, in this case aging. In the discussions, according to the procedural approach of SRT, relationships can be established on the construction process of old age, containing the beliefs, values, specific desires and ways of living of the elderly women anchored in the dichotomy of losses and gains, peculiar to this phase of the life cycle.

The research was developed after the approval of the Research Ethics Committee of the *Universidade Estadual do Ceará* (UECE) under opinion number 2,523,087, on March 2, 2018. All principles related to ethics and legality of Resolution 466/2012 of the *Conselho Nacional de Saúde* (CNS) were respected, preserving the research participants, regarding non-maleficence, autonomy, and justice.

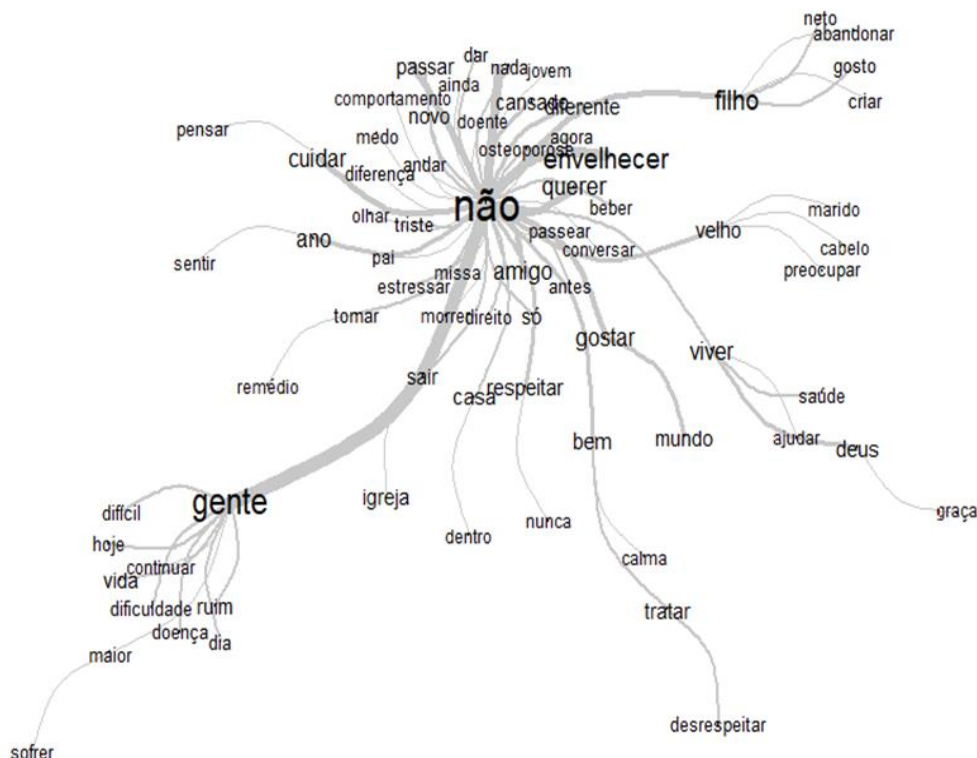
## RESULTS AND DISCUSSION

The study sample was a group of 10 elderly women, with a mean age of 75.9 years old, ranging from 61 to 92 years old. The predominant characteristics were having a low level of education (8), earning one minimum wage income (7), being widow (5), having Catholic religion (10), being retired (8) and having participated in workshops for more than 2 years<sup>(6)</sup>.

The similitude analysis of the answers from the interviews generated the maximum tree in Figure 1. The corpus was formed by the set of

interviews, with 87 text segments that allow identifying the connection of 78 terms.

Figure 1 – Maximum tree generated by the similitude analysis of the answers from the interviews.



Source: Extracted from software IRAMUTEQ, 2018.

The maximum tree shows that the words were polarized, around a term that stood out in the discourses and conferred greater centrality to social representations, the term *no*, located in the center with the highest number of co-occurrences between words.

We notice that, to the lexicon, *no*, shows the greatest number of connections with the terms: *walking, straight, riding, going out, talking, friend, mass, church, wanting, feeling, thinking, taking care, looking, behavior, indoors, before, now, difference*. Thus, the elderly women anchored the term *aging* to functional losses and limitations, related to activities that they can no longer perform, due to aging, such as walking, riding, leaving home, going to Mass.

The structure of the social representation of aging is revealed subjectively, from a perspective of gains (experience and wisdom) and losses (illness, limitation, loneliness). A study involving social representations of different age groups found that losses, such as physical health losses or losses of the family and social network, are very relevant for the elderly<sup>(11)</sup>.

Among the other terms that connect to *no*, we identify *sick, fear, tiredness, osteoporosis, sad, dying, taking medicines, stressing, alone, difficulty*. By observing the elements associated with the term *no*, we can distinguish some subsets of meanings. *People connect to difficulty, difficult, today, life, continue, disease, suffer, bad, day, greater*.

In view of an overview of all the lexicons pointed out by the women, we can observe that, in this study, they anchored aging in negative elements that related to physical (disease, osteoporosis, medicine, tiredness) and psychological (sad, stress, fear, suffer) and social (disrespect, abandon, respect, raise, son, grandson) aspects.

Social representations pointed out in the interviews showed that the women anchored aging, mainly due to its negative aspects and limitations. Many of them describe that chronic conditions decrease their functional capacity and well-being. Elderly women in a study also emphasized the activities they would want to perform, but that they could not, due to age. Aging marks the lives of elderly women with new

changes to which they need to adapt. These changes can reduce the satisfaction of elderly women with life, such as loss of skills, tiredness, restrictions and health problems<sup>(5)</sup>.

Similar data were found in another study, in which elderly women anchored aging, more often, only to the functional aspect of the human body, with negative associations of limitations and losses<sup>(12)</sup>. One study described that elderly people understand the concept of health, involving autonomy, functional capacity and attitudes of coping, change and adaptation to the adversities of life<sup>(13)</sup>. This emphasizes the focus on the functional and physical aspects of aging representations. Therefore, elderly women anchor the idea that aging causes health problems and that it is necessary to live with them and treat them.

Therefore, for elderly women, positive aging is one that allows women to continue performing tasks they have always performed, especially household chores and the role of caregiver of their family members, roles that are present in their lives<sup>(14)</sup>.

In addition, other relevant aspects in the structure of the social representations of the elderly women are social relations and living in society. It is revealed by elements that have a stronger connection with each other, enabling the formation of some groups of meanings: *before-well-treat-calm-disrespect*, *never-respect*, and *son-grandson-abandon-like-raise*. During the interviews, some situations reported that the elderly women are well treated by family members, but also disrespected by society.

In studies, living with the family was identified by the elderly as the best alternative in old age. The family was anchored as an expression of fundamental support and appreciation of affectivity, while children abandonment and intergenerational conflicts are highlighted as something unwanted<sup>(15-16)</sup>. Another study found this desire for family life, especially in the discourses of elderly women when compared to the elderly men, since, for many of the women, family was the main investment throughout life, and remains in old age<sup>(17)</sup>.

It is also important to highlight that the representation of Brazilian society, supported by values traditionally attributed to the family, anchors family as an essential institution for the elderly survival and care<sup>(16)</sup>. One study described that social representations of the elderly about family highlight aspects such as union,

companionship, support, respect, and care. Thus, the family environment has the purpose of welcoming and sheltering. On the other hand, a relationship of dependence with the family was identified, which reveals a possible association with the stigma of old age as a period of decline and disability<sup>(18-19)</sup>.

Moreover, aging was objectified by the elderly women, in the figure of the elderly, being personified in family and friends, which is possible to observe, through the elements *husband*, *father*, *friend*. A study conducted with adult and elderly women also identified the objectification of both age groups in the elderly family figures<sup>(15)</sup>.

On the other hand, the anchorage of the elderly women differs from the new perspectives of old age focused on leisure, happiness, and freedom. Society overvalues youth, thus, good old age is seen as an extension of youth, presenting financial stability and time to perform pleasurable activities such as traveling, passing the idea that brings old age closer to a period of 'eternal vacation'<sup>(20)</sup>. So, the elderly person considered healthy would be the one active and who maintains their daily activities.

A study evidenced the idea that the older the age of the researches, the more positive aspects appeared in their statements. The elderly women portrayed old age as a moment of accomplishment, freedom and full of positive aspects. Free from family and social obligations, they began to prioritize their own desires and to carry out their projects<sup>(21)</sup>.

In another study, the elderly women reported that more study opportunities in the past could guarantee greater facilities in old age<sup>(5)</sup>, highlighting the impact of low schooling and socioeconomic inequalities in the lives of elderly women. It is important to emphasize that different social representations can be elaborated about the same object, such as aging. These differences are associated with the activities and cultural characteristics of certain groups. Therefore, in the study of social representations, it is relevant to identify the context's characteristics of the group<sup>(22)</sup>.

We emphasize that the elderly women in this study are characterized as a low-educated and low-income group. It is perceived how the social context in which elderly women are inserted implies the prevalence of functional disability in the elderly and, thus, has repercussions on their social representations. Low income, low schooling, older age and females have higher

proportions of functional disability<sup>(23)</sup>. It is essential to thoroughly understand these inequalities, to survey care demands, develop effective public policies and carry out interventions with the elderly population.

Healthy aging aims to increase the expectancy of a healthy life, maintain functional capacity and quality of life, including physical, social, and mental well-being. In addition, it allows continuous participation in social, economic, cultural, spiritual and civil issues of society<sup>(24)</sup>. Elderly women are more active in sociocultural activities, especially in religious services. However, they are less participative in leisure-time physical activities, especially women of older ages<sup>(25)</sup>.

Considering that the elderly women of this study anchored aging in their functional disabilities and in their negative aspects, it is important that nurses perform educational activities to promote the maintenance of functional capacity, quality of life and autonomy. For this, it is essential to plan actions that guide the improvement of activities of daily living and healthy ways of living. We can mention as relevant: physical activity, healthy eating, improvement of self-esteem and self-image, expansion of the social network, improvement of cognitive activity and self-care for prevention and control of diseases and injuries. To perform these activities, different educational approaches and methodologies can be used, such as: pedagogical guidelines during nursing consultation, home follow-up, counseling with motivational dynamics, educational groups, workshops and playful strategies<sup>(8)</sup>.

Therefore, nursing should seek care strategies through health education processes with women and society in general, to identify possibilities aiming at healthy aging, making old age a phase of life without stigmas or prejudices.

## FINAL CONSIDERATIONS

The study allowed to understand the social representations of elderly women about aging. We noticed that the elderly women anchored aging, mainly in their limitations and negative aspects. Thus, nurses should be attentive to changes in the aging process and assess the functional capacity of the women. Therefore, it is possible to elaborate actions to prevent limitations and disabilities, promoting the development of Activities of Daily Living and Functional Activities of Daily Living. It is also noteworthy the importance of groups of elderly

people, since social coexistence helps the adaptation to changes in the aging process.

In this context, it is the role of nurses, together with other health professionals, to perform interventions that promote healthy aging of women, making it possible to reach old age with conditions to live it fully. Social representations suggest information that will support nursing care, especially investment in health education actions with women and the general population.

It is concluded that nursing studies need to increasingly turn to the nuances of female aging. It is expected that the study can strengthen research on this theme and collaborate for the reflection of Nursing and society on female aging, demystifying prejudices and strengthening the positive image of elderly women.

Moreover, the limitation of the study was to its scope, given the small number of participants and the specific location of the study. Therefore, other studies may expand the possibilities of research with a larger number of participants and in other sociocultural realities.

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Mailing address:

Hanna Gadelha Silva

Universidade Estadual do Ceará. Av. Dr. Silas Munguba, 1700 – Itaperi, CEP: 60714-903, Fortaleza, Ceará, Brasil.

E-mail: hanna.gadelha@aluno.uece.br