

TO BE ELDERLY: THE BODY IMAGE OF AGING

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Body image is built by biological and sociocultural factors that differ over phases of life. The gradual loss of physical function in the elderly also is an aspect of interference in the conception of body image. It is a multidimensional concept which reveals the perception about body influenced by social constructs such as behavioral representations of personality and emotional states (Damasceno *et al.*, 2006).

Therefore the aim of this study was to analyze the sociocultural aspects and body satisfaction in the elderly as elements of their body image's building.

This research was characterized as descriptive with qualitative approach of data. The study sample included 25 elderly, female, who practice physical activity at the Master Vida Program of Escola Superior de Educação Física (ESEF) from Universidade de Pernambuco (UPE). The program's clients: adults and seniors who lives at Santo Amaro neighborhood and vicinity, city of Recife, Pernambuco State, Brazil. It is proposed seasons of physical activities like swimming, hidrogymnastics, body building and nutritional and dermatological guidance.

The selection of sample was characterized as non-probabilistic intentional. The subjects should be older than 65 years, to have more than 80% of attendance in project activities and to be an integrant of more than six months ago.

The Stunkard's figure rating scale was used for data collection (Scagliusi, 2006). It's widely used in studies with brazilian population to identify levels of body satisfaction (Coqueiro, Petroski, Pelegrini & Barbosa, 2008; Damasceno, Lima, Vianna, Vianna, & Novaes, 2005; Tribess, Virtuoso Junior, & Petroski,

2010). It was also realized a semi-structured interview that had questions about body perceptions and the biopsychosocial changes of aging, and the grounds of body dissatisfaction, when it presented. The participation in research was requested to people that met the inclusion criteria. And the data collection was realized in the activities place in a preserved space for interview to maintain the confidentiality of their responses.

The qualitative data were reviewed by the full transcript of the speeches and application of technique of Bardin discourse analysis (Bardin 2009), which does a categorization of responses, enabling the creation of thematic groups and identify key words. Numerical data were categorized and presented by descriptive statistic using the SPSS v10.0 for Windows. This research was approved by the ethics committee of CISAM / UPE, File No: 018/07. The participants joined the study voluntarily by signing of Informed Consent (IC) according to standards required by the Ethics Committee.

The thematic groups filed after the categorization of the results were: socioeconomic aspects, relevant daily activities, awareness of body limitations, body changing perceptions in the aging process, body satisfaction and ideal body image to elderly.

According to sociocultural characteristics, the study group consisted of 25 elderly, mean age 72.7 years, SD = 5.5 years. Observed prevalence of subjects who lived with their children, 45.2%, followed by the percentage of elderly who lived alone (25.8%) or with a partner (22.6%). About the source of income, 83.9% of sample is retirees or pensioners and working only 6.5%.

Among the relevant daily individuals activities, they said: household chores (80%), followed by "rest and sleep" (48%), participating in religious activities (44%), going to the doctor (32%), walking, gymnastics or dance, watching TV (28% each item). The limitations brought by aging did 63.3% of elderly did not do whatever they want. The main activities that they have difficulty of performance were taking heavy objects (20%), going anywhere and climb stairs, with 16% of each subject, and stoop (8%).

Fat accumulation (24%), physical endurance decreased (20%), balance loss, joint pain and lower limb pain (16% each item), were the greatest physical changes attributed to aging in the perception of the subjects. The main body characteristics reported as the object of body dissatisfaction were stomach

(32%), wrinkles and excess weight (16% each item), followed by breast size and presence of varicose veins in the legs (12% each item).

The percentage of 72% of subjects were dissatisfied with the body. Of these, 60% wish to have more lean body silhouette. The model of ideal body silhouette that predominated on choices was the silhouette 2 (48%), followed by silhouette 3 (20%) and silhouette 1 (16%). The representative percentage of the sample for selection of silhouette 1 and silhouette 2 presents a model of ideal body and preference for thin body. This fact requires attention with regard to maintaining these subjects health. The subjects chose the silhouette 3 (44%) as representative of their real body followed by silhouette 2 (14%) and silhouette 5 (14%).

Damasceno et al. (2006) said the elderly are less concerned with body image than the youngsters. However, studies conducted with this age group have also shown high rates of body dissatisfaction. Tribess et al. (2010), consisted negative perception in the elderly, highlighting its association with overweight and need for change the ideal model of body that refers to thinness. The subjects of their research showed 54% of body dissatisfaction, and 65.1% of dissatisfaction by body weight. In a study by Pereira, Teixeira, Borgatti, and Daronco (2009), the percentage of dissatisfied women was even greater because 74.2% of the women was dissatisfied with their bodies, of which 1.6% were dissatisfied with thinness and 72.6% for overweight.

The outcomes show high levels of body dissatisfaction in older women, mainly attributed to presence of unwanted aesthetic elements and physical limitations. However, the study subjects reported several activities that requires use of body structures, especially that needs walking. So it is not enough integrate them into programs that promote physical activity. It is also necessary that there are efforts to bring these people the knowledge of factors that interfere with their body perception. It will be more aware perception that will control the rates of body dissatisfaction in elderly people.

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