

# PERCEPTION OF PURPOSE IN LIFE OF ELDERLY WITH DEPRESSIVE SYMPTOMS\*

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**ABSTRACT:** The present study aimed to describe the way in which elderly with depressive symptoms perceive their purpose/meaning in life. It is a qualitative study with 17 elderly with depressive symptoms registered at a Health Care Service for Elderly Patients in a city in Minas Gerais. Narrative data were obtained through semi-structured interviews in April and May, 2013. The information extracted from the interviews were analyzed by Collective Subjective Discourse methodology based on the Theory of Social Representations. For the respondents, their quality of life was related to taking care of the family, sense of fulfillment or non-fulfillment, divine purpose, preservation of friendship and satisfaction with life. When the wishes and the knowledge of elderly individuals, built during their lives, are considered, understood and respected these individuals tend to have a positive perception of life.

**DESCRIPTORS:** Senior Community Centers; Aging; Perception.

## PERCEÇÃO DOS IDOSOS COM INDICATIVO DE DEPRESSÃO SOBRE O SIGNIFICADO DE VIVER

**RESUMO:** O objetivo desse estudo foi descrever a percepção dos idosos com indicativo de depressão sobre o significado de viver. Trata-se de pesquisa qualitativa, realizada com 17 idosos com indicativo de depressão cadastrados em uma Unidade de Atendimento ao Idoso de um município do interior de Minas Gerais. Os dados foram coletados por entrevista semi-estruturada, narrativa nos meses de abril e maio de 2013. As informações extraídas das entrevistas foram analisadas pelo método do Discurso do Sujeito Coletivo fundamentado na Teoria das Representações Sociais. Foram evidenciados que o significado de viver está relacionado a cuidar da família, sentimento de cumprimento ou não de missão, propósito divino, preservação da amizade, valorização e satisfação da vida. Quando a vontade e o saber do idoso, construídos durante sua trajetória de vida, são considerados, entendidos e respeitados, favorece uma percepção positiva no significado de viver para o idoso.

**DESCRIPTORES:** Centros de convivência para idoso; Envelhecimento; Percepção.

## PERCEPCIÓN DE LOS ANCIANOS CON INDICATIVO DE DEPRESIÓN SOBRE EL SIGNIFICADO DE VIVIR

**RESUMEN:** Resumen El objetivo de ese estudio fue describir la percepción de los ancianos con indicativo de depresión sobre el significado de vivir. Es una investigación cualitativa, realizada con 17 ancianos con indicativo de depresión registrados en una Unidad de Atendimento al Anciano de un municipio del interior de Minas Gerais. Los datos fueron obtenidos por entrevista semiestructurada, narrativa en los meses de abril y mayo de 2013. Las informaciones extraídas de las entrevistas fueron analizadas por el método del Discurso del Sujeto Colectivo fundamentado en la Teoría de las Representaciones Sociales. Fueron evidenciados que el significado de vivir está relacionado a cuidar de la familia, sentimiento de cumplimiento o no de misión, propósito divino, preservación de la amistad, valoración y satisfacción de vida. Cuando la voluntad y el saber del anciano, construidos durante su trayectoria de vida, son considerados, entendidos y respetados, se favorece una percepción positiva en el significado de vivir para el anciano.

**DESCRIPTORES:** Centros de convivencia para anciano; Envejecimiento; Percepción.

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## INTRODUCTION

The rapid aging of the population profound social, economic, cultural implications and a significant impact on health systems. Thus, new health policies were adopted and studies on aging based on the assessment of the biopsychosocial and spiritual spheres were considered of key importance<sup>(1)</sup>.

"Aging is a heterogeneous and complex experience, which is not defined by the chronological age, but rather by physical, functional, mental, health and subjective aspects"<sup>(2:740)</sup>. In this sense, constructs on significant forms of life that can be lived by individuals who are aging should be explored.

The process of aging can be composed of the relationship between life experiences, needs, purpose and sense, over the years. This interaction reveals the actions and expressions modified in every period of life, with subjective social meanings and senses).

Therefore, the meaning is the individual interpretation of social and historical productions. It is rather assessed in its emotional and symbolic aspects, i.e., need and motivation. Behavior is determined by the needs and the motivation of each individual in a given social context. Thus, the cycle is completed with the meaning, which is someone's ability to mean something that will bring satisfaction<sup>(3)</sup>.

The process of aging is a guided by the social perspectives and meanings that provide a stereotype of what it is to be an old individual. Therefore, experiencing the decline in the ability to perform daily activities lead to the search for new meanings in life regarding its psychosocial aspects, and when aging is perceived as something socially negative, it weakens lifelong internal mechanisms<sup>(4)</sup>.

Negative interpretations on aging are based on the self-perception of feeling young in an aged body. Thus, aging can be accepted or denied by the elderly<sup>(5)</sup>. On the other hand, old age can provide new positive and productive experiences in life<sup>(6)</sup>. Some elderly people can experience old age as a healthy life cycle<sup>(7)</sup>. The perceptions of the elderly about their aging process affect their psychological dimension, physical health, including aspects related to mortality<sup>(2)</sup>.

Given the importance of how elderly perceive their lives, this study aimed to describe the way in which depressed elderly individuals assisted in a

Health Care Service for Elderly Patients perceived meaning in life.

## METHODS

Qualitative descriptive study that provides health professionals with an opportunity to understand the meaning, beliefs and values that determine human behavior<sup>(8)</sup>.

The study was conducted in *Centro de Convivência para idosos* (Senior Community Center) called *Unidade de Atendimento ao Idoso – UAI* (Health Care Service for Elderly Patients) of a city in the inland of the state of Minas Gerais. The criteria for the selection of the participants were 60 years of age or older, allow audio recording of the interview and with score indicating depressive symptoms.

Data were collected in April and May 2013. Initially the participants were selected using the abbreviated form of the Geriatric Depression Scale, adapted in Brazil that consisted of 15 closed questions answered by yes or no and a score ranging from 0-15. A score higher than 5 points indicated depression. Thus, of the 317 elderly assisted at the UAI, 98 had depressive symptoms. Of these, 30 elderly individuals with a higher score that indicated more severe depression were selected, and 17 participated in the study.

Data were collected using narrative semi-structured interviews, with guiding questions: "What is the meaning of your existence? What does it mean to exist in your opinion?".

The interviews were previously scheduled and were conducted at the UAI, according to the availability of the participant, before, during or after the routine activities.

The information extracted from the interviews were analyzed based on the Collective Subject Discourse (CSD) methodology. This model of analysis is characterized by the organization and tabulation of the qualitative data obtained in the interviews with members of a specific collectivity, and participants are asked to express themselves freely. It consists in analyzing the verbal material collected: the individual answers to a given question, based on the Theory of Social Representations structured by the elements belief, opinion, etc., which are arranged to convey a message about reality<sup>(10-11)</sup>.

The significant excerpts of these messages are the key expressions (KE). The synthesis of the

discursive content in a given key expression is called central idea (CI), which allows the creation of categories that group answers with similar discursive contents. The synthesis speeches that compose the CSD where the thought of each group appears as an individual discourse are obtained through the KE and CI <sup>(12)</sup>.

Each recording was heard, transcribed, and the discourses were divided into four central ideas, as follows: CI I – Family; CI II – Purpose of life; CI - III Practice of Values; CI – IV Satisfaction with life regarding autonomy. Thus, the Collective Subject Discourse was structured based on the key-expressions of each central idea. The respondents were identified by letter “E” followed by an Arabic numeral, E1 until E17.

The present study is part of a larger study titled “*Aplicabilidade da técnica de solução de problemas como forma de intervenção junto aos idosos*”, (Applicability of the troubleshooting technique as a form of intervention with elderly), which was approved by the Research Ethics Committee with Humans of Universidade Federal do Triângulo Mineiro, under protocol no 2316/2012. Each participant signed the Free Informed Consent form according to Resolution CNS 466/12<sup>(13)</sup>, after being informed about the purposes of the study and their right to anonymity and confidentiality and to discontinue their participation at any time.

## RESULTS

According to the reports of the participants, the purpose of life of the elderly is associated to caring for the family, the house and performing household chores. Being useful and help their family members in their daily activities is essential for the elderly. The sense of fulfillment or non-fulfillment and of the divine purpose was clear in the discourses. The preservation of friendship is a key aspect for the elderly and, finally, satisfaction with life was observed in most discourses. A

### CI - I: FAMILY

Through CI synthesis, the elderly want to live with their families to remain active.

CSD – I: *It's about being with my family. Helping them solve their problems. I can be very useful to them, take care of my grandchildren, of my children. They are doing well.* (E1, E2, E4, E12, E17)

### IC – II: PURPOSE OF LIFE

The discourse concerns the way in which the elderly perceive of their lives, with a purpose,

a mission to be fulfilled that is inspired by spirituality.

CSD – II: *Does God have a plan for me and brought me here? God has a plan for me, and that's why I'm still alive. To live means to have a mission to fulfill. I have to find out my mission in life and fulfill it. I feel that I have fulfilled my mission regarding my children. Now my mission is to be happy. The important thing in our lives is that we all come to earth with a mission and a purpose. Thank God, everything is fine!* (E4, E7, E15, E16)

### CI - III: PRACTICE OF VALUES

The discourse refers to the importance of helping and loving people.

CSD – III: *It is about contacting everybody. It's about loving. I have to focus on friendship. If you can help, then you help. If not, you do what you can without harming anyone. I can make other people happy. I like to make people happy, and there is a lot of people that depend on me, and I'm very grateful for this, because friendship is very important for me. People must focus more on friendship and love. They need to love.* (E2, E4, E8, E10, E12, E13, E16, E17)

### CI – IV: SATISFACTION WITH LIFE REGARDING AUTONOMY

The discourse shows the importance attached by the elderly to remaining active, making choices and being able to perform them.

CSD – IV: *It is about being aware that I am in good condition. Health come first. The things I do at 75: I walk around the town and go everywhere alone. It's also my way of eating, of living, it's about having my own place in the world; I'm always pleased with myself, and this is fantastic. I value life, I like it very much and cannot complain about life. I love to live. To live is to be happy and at peace. It is rewarding.* (E1, E2, E3, E4, E5, E6, E7, E8, E9, E10, E11, E12, E13, E15, E16)

## DISCUSSION

The construction of the synthesis discourses stressed the purpose of life from the perspective of the elderly, based on the importance of taking care of the children and the family, identification and fulfillment of a mission, destination by God, making and maintaining friends, respecting and loving people, doing the things that you like, feeling well and having a place in the world.

In a study conducted in Brazil and Spain aimed to describe the similarities and differences



perceived and felt by the elderly, most participants in the two countries reported that their family members were the most significant people for them<sup>(14)</sup>. For the elderly, living with their family members can promote a sense of belonging to a group. The emotional support provided by the family and the bonds of love established in family relationships promote successful aging<sup>(6)</sup>.

For Brazilian elderly friendships provide a significant support outside the family circle, but are also present within the family context, among relatives, and others. The Spanish attach more importance to friendships within the family. The survey concluded that satisfaction and self-esteem are reinforced when the elderly participate in activities of community groups or when they have social interaction, since new friends can be made and maintained<sup>(14)</sup>.

A study conducted at Universidade de Santa Cruz do Sul-RS with the purpose of investigating family and friendship relationships of elderly of both genders who attended community groups of support to elderly and services attached to that institution stressed that the relationships with the families and friends were strongly associated with the preservation of self-esteem and with positive self-perception among the elderly<sup>(15)</sup>.

Family life provides an environment of support and intimacy, which generates a growing sense of belonging. Despite the major changes occurred in the contemporary families, the family environment remains a place of affection and protection to the elderly<sup>(16)</sup>.

As thinking beings, humans seek to understand the meaning of life, through spirituality, in order to be able to cope with their difficulties<sup>(17)</sup>. Experiencing spirituality may provide, at any stage of life, a deeper understanding of the universe, favoring the ability to cope with the daily activities<sup>(1)</sup>.

Spirituality is closely related to a more positive and successful aging, in many aspects<sup>(18)</sup>.

Being/feeling old or not being/not feeling old depends on the ability (functionality) of elderly individuals to provide self-care and on their level of social activity<sup>(19)</sup>.

This study aimed to identify the role of autonomy in the self-assessment of health in elderly and found that it is associated with a greater ability of elderly of controlling their minds and bodies, identifying and solving problems, favoring positive self-perceptions and greater

well-being<sup>(20)</sup>.

Besides, the elderly have greater willingness to perform pleasurable activities<sup>(19)</sup> even when they face health and financial problems, in addition to the limitations of aging<sup>(21)</sup>.

## FINAL CONSIDERATIONS

This study revealed a positive perception of the purpose of life among the elderly. The elderly individuals who remained active and had social interactions were optimistic, since despite the adversities, they realized the meaning in their lives. When old age is regarded as a natural phenomenon by the elderly, they realize that this period of life is a period of reflection and maturation.

The greater understanding of the circumstances of aging by health professionals is very important. When the experiences and knowledge of elderly are considered and respected, they are more likely to have a positive perception of the meaning of life.

During nursing appointments, nurses are responsible for investigating the daily social interactions of the elderly patients related to the preservation of their autonomy and independence, providing counseling and guidance on practices that promote health and establishing bonds that favor the establishment of a relationship based on an understanding and sympathetic approach.

The limitations of this study include the difficulties in conducting the interviews in a quiet and private environment and the limited availability of time of the elderly.

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