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ASSOCIATION BETWEEN HEALTH SELF-PERCEPTION AND LIFESTYLE OF CO RESIDENT ELDERLY PEOPLE

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ABSTRACT

Objective: This study aimed at assessing the relation between the health self-perception and lifestyle of co resident elderly people. **Methodology:** It was a descriptive and analytical study with a cross-sectional design, population-based, and quantitative approach. The participants were represented by 239 elderly individuals, carried out in Vitória da Conquista, Bahia. The data were collected by means of a Brazil Old Age Schedule multidimensional questionnaire. The level of significance adopted for data analysis was of 5% ($\alpha = 0.05$). **Results:** Concerned to the elder lies' lifestyle, 91.3% do not consume alcoholic beverages and 58.2% have never smoked; Respective to health self-perception, 53.8% considered their current condition as regular. It was observed a statistically significant association between health self-perception and the drinking habit (p=0.029), highlighting that within the ones that used to drink once or more times per week (n=18), 55, 5% (n=10) reported a good self-perception on their condition, while the ones that do not hold drinking habit (n-188), 30.3% (n-57) mentioned a good health self-perception. **Conclusion:** This work provided substantial information on health self-perception and lifestyle of coresident elderly people, evidencing a relation between drinking and their health self-perception.

INTRODUCTION

The population aging is a phenomenon that are causing notable consequences in society and a deep impact in the health systems. In Brazil, it seems the pace must be faster, regarding the world report on population aging published in 2015 by World Health Organization (WHO) where states that in the next 35 years the elderly citizens will increase from 23 million to 64 million, thus, will be classified as an elderly nation (OMS, 2015; CONTE, 2015). According to Brazilian Institute of Geography and Statistics (IBGE) data will also occur a

turnaround in the population profile predicted for 2030 year, when the integral and the percentual number of Brazilians who are 60 or older will surpass the 0-14 years-old children group (IBGE, 2016). The increase in human being longevity is related to the factors like mortality rate reduction, natality rate fall, and the augment in life expectancy, resulting in a demographic transition, and becoming an expressive subject in the point of view of scientific and public policies, leading researchers and social strategies promoters discuss on the challenges that human longevity will evoke in society (SAMPAIO *et al.,* 2017). The co residence can be considered one of the predictors for that growth of the elderly group since the family take a notable and substantial role as it represents the social context for these individuals, making the

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cohabitation reverberate as a positive way in elderly health. The co residence benefits parents and children and is explained through the mutual collaboration of the members in order to reach the collective well-being. It is important to emphasize, however, that the greater longevity brings co morbidities that reflect in their functional capacity with direct impact in physical, psychic, and social functions (LIMA, 2016). Therefore,it is valuable to remark that the lifestyle of this population can be a factor that may be influence in positive or negative way on this aging process and its consequences. Oliveira *et al.* (2012) stated that the lifestyle is a set of habits and customs that may exert important effects on human being health and is associated to features like attitudes, behavior, morals, and opportunities in their lifes. By deeply investigation on this increase in life expectancy and the possible lifestyle influence on this process, it is important observe the health self-perception of this population. The self-perception is applied in several researches as a tool for global investigation on elderly individual health condition what supports the understanding on physical and cognitive aspects, in an extended way, seen by his own perception (SILVA *et al.,* 2014). The seek for discovering the elements that affect the health perception helps to recognize what are the main determinants that corroborate to a more positive or negative perspective in an individual's health. Usually people that assume a less favorable condition report hold less healthy habits, evidencing physiological stress or physical capacity restriction, configurating as a prognostic of mortality. Those who assume and evaluate their health as good, present amore embracing idea than the simple and only the lack of diseases (SOUZA, 2012). Accordingly, it is valuable to identify if there is a relation between the lifestyle and the health self-perception, with a concern and objective of offering expressive and relevant information for the efforts to prevent possible negative impacts on health associated to the variables. It still can contribute to the development and effectiveness of elderly people health and social public policies, and intend toprovide in a direct and positive way to the society, working as intervention for science and health professionals.

MATERIALS AND METHODS

It is a descriptive and analytical study with a cross-sectional design, population-based, and quantitative approach. It is a branch from the project "FAMILIAR SETTING OF ELDERLY PEOPLE LIVING IN MUNICIPALITIES IN NORTHEAST AND SOUTHEAST OF BRAZIL", which was carried out by a propose in partnership set between the Health and Nursing Post-graduation Program from State University of Southwest Bahia and a Master's degree academics. This study is associated to the Research and Health Nucleus in the Elderly Person – NUPESI, which was developed in two Family Health Units (FHU) in Vitória da Conquista, Bahia. This municipality is located in Southwest Bahia region occupying a territorial area of 3204,257 Km^2, with population of 343,230 inhabitants (IBGE, 2015). In 2010, the number was of 306,866 dwellers, with 30,748 belonging to the 60 or older age group (IBGE, 2010). In this district, as National Register of Health Facilities (CNES) data shows, are implanted 43 FHUs. This units were chosen through simple draw. The study sample was constituted by 239 elderly people that were 60 or older, resident at urban zone in district of Vitória da Conquista, Bahia, registered in both selected FHU, living in co residence, and that presented appropriate cognitive condition assessed by the Mini Mental State Examination (MMSE). It is considered an elderly person

in coresidence, the one who lives together with his intergenerational family (one or more generation, i.e., children, or grandchildren and/or great-grandchildren, others) in the same dwelling unit (CAMARANO *et al.,* 2004). The MMSE includes 11 items that requires verbal responses to questions on spatial and temporal orientation, attention, reading, memory, calculations, naming, to follow verbal commands and copy a drawing (polygon). In the cognitive evaluation was utilized the MMSE in an adapted version, validated in Chile, by Icza and Albala, in 1999, from MMSE developed by Fosten *et al.,* 1975. It is the most employed parameter, as in researches as in clinical practice, for certifying the cognitive function evolution. The MMSE score can range from a minimum of 0 point, which indicates the highest degree of cognitive damage, toa maximum of 30 points, corresponding to the best cognitive capacity. The adopted cut point was of 13 points, with foundation in Brucki's work. It was cut off the ones who demonstrated a cognitive deficit according to the adopted parameters, and those who refuse to take part in the research. The data collection was performed in two steps. First, it was identified the number of elder lies registered in the FHU through inspection in the familiar registering sheets in order to know the individuals that live alone and the ones that core side with relatives. After that, obeying the sample size calculation, the following instruments were applied to the participants: the interview, by means of the semi-structured questionnaire containing identification data as age, gender, familiar arrangement, and a form about health condition. The Brazil Old Age Schedule (BOAS) questionnaire is a research tool that investigates aging multidimensional factors, based in other instruments that have recognized standards of validity and confidence. The BOAS originated from 8 major categories (general information, physical health, frequency of use of dentist and medical services, daily routine activities, social resources, economic resources, mental health, necessities and problems affecting the interviewed)(VERAS; DUTRA, 2008).Questions regarding health self-perception and lifestyle were present, as the examples: "How does you feel regarding general aspects of your life?", "What is the most important problem in your daily routine?". The mean, absolute and relative frequencies from the data collection were calculated, and the possible association between the variables was assessed by Pearson correlation test. It was adopted the level of significance of 5% ($\alpha = 0, 05$). This study takes part in awide research approved by the Ethics Committee in Research from State University of Southwest Bahia (CEP-UESB), whose report n° 102.641 was issued observing the Resolution n° 196/96 from National Health Council (NHC). Then, the inclusion of this work was requested, whereby was approved according to the Resolution n° 466/2012. The data production was performed after assent procedure from CEP-UESB and Municipal Secretary in Health of Vitória da Conquista, Bahia, allowing the research at the FHU. The participation of the elderlies was voluntary, and their permission was formalized through the Informed Consent Form signed in two copies, one for the interviewed and another for the researcher.

RESULTS

After wards the analysis of the inclusion and exclusion criteria, the study population total 239 elderly individuals. The average age was of 72.2 ±8.08, with 60 years-old the minimum and 95, the maximum age. It was ascertained greater frequencies for women (77.0%), married/cohabiting couples (42.6%), and the main level of education was only incomplete elementary school (46.4), according data in Table 1.

Table 1. Sociodemographic characteristics of elderly people coresident. Vitória da Conquista, 2018

Variables	% response	N	%
Gender	**100**		
Male		55	23.0
Female		184	77.0
Level of Education	**97.5**		
Illiterate		81	34.8
Incomplete elementary school		108	46.4
Complete elementary school		28	12.0
Complete middle school		5	2.1
Complete High school		10	4.3
Complete college degree		1	0.4
Marital status	**99.2**		
Never married		4	1.7
Married/cohabiting		101	42.6
Widowed		99	41.8
Divorced/separated		33	13.9

Source: Research data.

Regarding the elderly people lifestyle, 91.3% reported no alcoholic beverage weekly consumption, and referring to smoking habits, 58.2% affirmed have never smoked, highlighting, however, that 33.3%, beside have not currently been smoking, have ever smoked (Table 2)

Table 2. Data referring to elderly people lifestyle. Vitória da Conquista, 2018.

Variables	% response	N	%
Average of days per weekthat consume alcoholic beverages	**86.6**		
None		189	91.3
Less than 1 day per week		4	1.9
1 day per week		1	0.5
2-3 days per week		10	4.8
4-6 days per week		1	0.5
Everyday		2	1.0
Smoking	**89.1**		
Current smoking		18	8.5
Ever smoked, but do not smoke anymore		71	33.3
Never smoked		124	58.2

Source: Research data.

It was noticed that 53.8% of the interviewed considered their health condition only as regular, besides that, in comparison to the 12 months ago, 41.5% referred it is equal to the current situation. It still has to be remarked that 58.2% mentioned their health state better than the others at the same age, as it is seenin health self-perception results brought in Table 3.

Table 3. Health self-perception of elderly people coresident. Vitória da Conquista, 2018

Variables	% response	N	%
Perception on the current health condition	**98.7**		
Excellent		3	1.3
Very good		10	4.2
Good		65	27.5
Regular		127	53.8
Bad		31	13.2
Perception on the current health condition in comparison with the last 12 months*	**97.5**		
Better		45	19.3
Equal		97	41.6
Worst		91	39.1
Perception on the current health condition in comparison with individuals at the same age*	**84.1**		
Better		117	58.2
Equal		52	25.9
Worst		32	15.9

*For this variable the diagnosis was self-declared.
Source: Research data.

Concerned to the relation between health self-perception and lifestyle of coresident elderly people, it was verified a statistically significant association between the current health self-perception and drinking habits (p=0.029), remarking that among the ones that used to drink once or more times per week (n=18), 55.5% (n=10) reported a good perception about his health condition, while among the those that did not present drinking habits (n=188), 30.3% (n-57) conveyed a good perception about his health condition (table 4).

Table 4. Relation between health self-perception and the lifestyle of elderly people coresident.Vitória da Conquista, 2018

Variables	Chi-square (p-value)
Current health self-perception x Smoking habits	0.953
Current health self-perception x Drinking habits	0.029

Source: Research data.

DISCUSSION

This research revealed sociodemographic characteristics similar to the ones found in others epidemiological studies in Brazil, demonstrating that the number of elderly females (77%) is greater than the male one(23%). It is also analogous to the work carried out by Silva *et al.* (2014), in Jequié, Bahia, which identify a percentual of 79% for the female population, by MEIRA *et al.* (2017) who ascertained a percentage of 58.8%, accomplished in Salto da Divisa, Minas Gerais, and in Fortaleza, Ceará, it was also detected a superior number of female participants of 62.9% by CLARES *et al.* (2011).This phenomenon is referred as the feminization of old age, and it may be consequence of the women healthier habits, lower exposure to the risk factors like smoking, alcoholic beverages, greater health care-seeking behavior, and the way on how they face illnesses, besides they hold superior recovering capacity than the men in all age range (FERNANDES *et al.,* 2009; MEIRA *et al.,* 2017). The marital status data conveyed that there was a predominance of married/cohabiting couples (42.6%), and widowed individuals (41.8%). These numbers support Uccella (2013) research in Campinas, São Paulo, in which 50.5% of the respondents were married/cohabiting people and 33.9% were widowed, and another one by Luz *et al.* (2014) carried out in Rio Grande do Sul, Rio Grande do Sul, wherein 53.8% were married/cohabiting individuals and 32.1% were widowed. This event may be associated with the progressive augment of the longevity and fact that this population prizes its morals, defending that the matrimonial bound is only one and for all life (ARAÚJO, 2003). It still can be noticed that the major part of the study sample is constituted by females, what influence in the significant number of widowers. For Silva *et al.* (2018) is common for the men experience new marriage after their wives' death. In contrast, the widowers stay without partner and are resigned with eternal grief, besides exclusively devotion to their household tasks and children care, and such cultural tradition is generally accepted and goes between generations. The level of education inquiry showed a low level of academic instruction among the participants. Most sample only has incomplete elementary school, computing a percentual of 46.4%, and not less important, the illiterate people reach the number of 34.8%. Such results are reinforced by other authors that evidence that, between the 1930 and 1950, educational life period of the sample, there was a discrepancy in school implementation and the middle school was available only for specific social segment besides the early introduction to the

labor market, thus impairing studies continuity (MEIRA *et al.,* 2014; PEDREIRA *et al.,* 2016). Meira *et al.* (2014) and Nogueira (2016) states that the illiteracy is considered an important and accurate indicator of socioeconomic level in a society, what supports these work's findings since most sample is represented by a low-income population. Referring to the lifestyle, specially related to the alcoholic beverage weekly consumption and smoking, it was concluded that an expressive majority do not ingest alcoholic beverages (91.3%) and do not smoking (58.2%), demonstrating concordance with the work of Nascimento *et al.* (2015) in Ibicuí city, Southwest Bahia, in which identified that 95.8% do not weekly consume alcoholic beverages and 88.4% do not have smoking habits, and additionally confirmed by Dutra e Silva (2014),performed in Uberaba, Minas Gerais, wherein 84.6% do not used to drink and 87.2% did not smoking. Conforming to Luz (2014), it is a significant and positive factor since both behaviors are seen as important public health problems, due to the fact that such products bear noxious substances causative of several pathologies and death worldwide, as well they difficult the recovering process of diverse health problems, social interaction and to achieve higher life expectancy. It is valuable to highlight that the population that has already smoked, but does not smoke anymore (33.3%) since it is known that these individuals are not exempt to the chronic injuries provided by tobacco. However, the tobacco consumption suspension attracts positive and meaningful results in any age, reducing the death risks, providing a better health status, accruing two or three years to the 65 years-old elderly people (GOULART *et al.,* 2010). Respective to the health self-perception it was revealed that more than half of population described its current health status only as regular (53.8%), and 41.3% declared as the same as a year ago, remarking, however, the ones that considered better than other individuals at the same age (58.2%). The obtained data resemble Lebrão e Laurenti (2005) and Silva *et al.* (2014) ones, where 60% declared dissatisfied with their own condition. Zanesco (2018) explains that several aspects are responsible for building the negative health perception among aging people in Brazil, they include level of education, incapacity and impossibility of performing daily routine activities, be diagnosed with chronic diseases, poor oral health, excessively pursuit for health services, medical appointments, and hospital admissions.

Macedo *et al.* (2018),in a secondary data analysis of the National Research in Health (NRH) performed by the IBGE, in 2013, observed that the most reported health self-perception status was the regular (42.8%), including elderly people from rural and urban area. He remarks that this more negative aspect is indirectly associated to a progression and proportion of the health disfunctions, to the impairment in their functionality, and to the decrease in their material goods and mental capacity for facing their illnesses. Concerned to the relation between the health self-perception and the lifestyle variables of the coresident elderlies, this work point out that there was a statistically significant association between the current health self-perception and drinking habits (p=0.029), highlighting that among those that drinking once or more times per week, 55.5% reported a good perception on their health, while for the ones who do not have drinking habits, 30.3% referred a good perception of their health. This singular result can be related to the psychological variables in which the alcoholic beverage consumption provides, for example, the perception of wellbeing, of leisure and satisfaction, reverberating in their health self-perception. It still has to be remarked that beside the fact that this study has not sought to identify the most ingest alcoholic drink type, it is demonstrated in other works that consumption of some kind of beverages as wine exert positive outcomes when ingest in a moderate way. Prado (2011) affirm that according with science findings it is plausive to conciliate the wine consumption to health benefits, combining a health food and wellbeing, if it is a moderate way.

Conclusion

This work allowed to compile expressive and valuable information on health self-perception and lifestyle of coresident elderly people, evidencing an association between the drinking habit and health self-perception. It was noticed the importance of comprehending the factors that impair to achieve longevity with a good perception on health condition, in order to implement policies concerned to prevention and health promotion, with the objective of maintaining a acceptable level health status in aging individuals. It can be mentioned as an example, polices and actions directed to nutritional orientation as well as those that reverberate in orientation about what is a healthier lifestyle, and in such way the coresidence be positively seen in favor of this group.

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