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PERCEPTION OF MAN ABOUT AGING

PERCEPÇÃO DO HOMEM ACERCA DO ENVELHECIMENTO

PERCEPCIÓN DEL HOMBRE ACERCA DEL ENVEJECIMIENTO

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ABSTRACT

Objective: to understand the masculine perception about the aging process. ***Method***: this is a descriptive, field study, with quantitative approach. The research scenario was the hospital complex of a Medical School. The sample size consisted of a homogenization filter for the age group, totaling 120 men. For data collection, a structured instrument was used for the analysis of the data used in the Excel 5-0 worksheet and Epi-info version 3.5.3, and domains related to self-perception were treated statistically. ***Results***: men are aware of the process of aging. They point out commitment and responsibility in caring for themselves, yet there is a fragility in recognizing the limitations arising from the aging process. ***Conclusion***: the need to implement preventive strategies to the disease and health promotion was identified, enabling interventions satisfactory to the male population. Also, the need for more studies that support these people and the way they are aging was identified. ***Descriptors***: Perception; Man´s Health; Aging.

RESUMO

Objetivo: compreender a percepção masculina acerca do processo de envelhecimento. ***Método***: estudo descritivo, de campo, com abordagem quantitativa. O cenário de pesquisa foi o complexo hospitalar de uma faculdade de medicina. O tamanho amostral foi constituído por filtro de homogeneização quanto à faixa etária, totalizando 120 homens. Para coleta de dados, utilizou-se um instrumento estruturado. Para análise dos dados, foi utilizada a planilha do Excel 5.0 e programa Epi Info, versão 3.5.3. Domínios referentes à autopercepção receberam tratamento estatístico. ***Resultados***: os homens evidenciam ter consciência do processo de envelhecer. Ademais, apontam comprometimento e responsabilidade no cuidar de si, contudo há uma fragilidade no reconhecimento quanto às limitações decorrentes do processo de envelhecer. ***Conclusão***: identifica-se a necessidade de implantação de estratégias preventivas em relação a doenças e de promoção de saúde, que viabilizem intervenções satisfatórias junto ao público masculino. Além disso, identifica-se a necessidade de mais estudos que abordem esse público e a forma como ele está envelhecendo. ***Descritores***: Percepção; Saúde do Homem; Envelhecimento.

RESUMEN

Objetivo: comprender la percepción masculina acerca del proceso de envejecimiento. ***Método***: estudio descriptivo, de campo, con enfoque cuantitativo. El escenario de investigación fue el complejo hospitalario de una Facultad de Medicina. El tamaño de la muestra fue constituido por filtro de homogeneización sobre el grupo de edad, totalizando 120 hombres. Para recolección de datos se utilizó un instrumento estructurado. Para análisis de los datos fue utilizada la planilla de Excel 5-0 y programa Epi-info versión 3.5.3, y dominios referentes a la autopercepción recibieron tratamiento estadístico. ***Resultados***: los hombres mostraron que tenían conciencia del proceso de envejecer. Mostraron comprometimiento y responsabilidad en el cuidar de sí, pero hay una fragilidad en el reconocimiento sobre las limitaciones decurrentes del proceso de envejecer. ***Conclusión***: se identifica la necesidad de implantación de estrategias preventivas a la enfermedad y de promoción de salud, que viabilicen intervenciones satisfactorias junto al público masculino. Además, se identifica la necesidad de más estudios que aporten este público y la forma que está envejeciendo. ***Descriptores***: Percepción; Salud del Hombre; Envejecimiento.

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INTRODUCTION

The Brazilian elderly population has shown an accelerated growth, as can be observed by demographic and epidemiological transition data. Currently, there are 20,590,599 million people aged 60 years old or more, 9,156,112 million of them are male.[1] This research addresses male aging since it is the most affected when it manages to reach old age.

Aging corresponds to the first morphobiological and psychosocial changes of adulthood until total decline and death. The speed and intensity of aging progression vary among individuals, being influenced mainly by genetic constitution, lifestyle and environmental factors. It is a natural process of the organism, resulting from the relation between the self, the mind, and society, not being considered as an illness.[2]

There are aspects that interfere with the way of looking at aging and, consequently, how the person will become in that environment. Successful aging results from the balance between the limitations and potentialities of the individual, depending on factors such as life history and how each understands the process of aging and old age.[3]

In the national literature, studies are more easily found relating to the perception of the elderly of their aging and how they can adopt measures within their old age to keep themselves healthy.[4] The elderly consider important the physical health, social health, emotional health, cognitive abilities, spirituality, adequate diet and exercise practice, financial stability, and consequently maintaining their autonomy throughout their lives to adapt to this stage of life.[5]

The male population has a series of factors that influence their aging process, such as high levels of morbidity and mortality due to preventable and preventable causes, lower life expectancy, less use of health services, and at-risk behaviors, such as smoking and alcohol consumption.[6] Also, there are no programs specifically targeted at adult men, contributing to the increased vulnerability of this unassisted population. Thus, healthy aging reflects how a man conducts his living.

Regarding the use of health services, it is observed that men seek them less frequently, but when they seek these services, they are related to healing practices.[7] They do not like to go to the doctor, causing diseases to be diagnosed later, and consequently reducing life expectancy.[8] Also, the male gender is considered to be invulnerable, hindering the perception that their actions may influence their future.[9]

The perception of aging consists of a functional process with progressive changes progressing through life and contributing to the individual being able to reflect how he will achieve this stage of life in a healthy way. Studies indicate that the individual´s perception of the aging process influences success at this stage of life so that self-perception can be an indicator of a successful old age.[11] Based on the preceding, this research aims to understand the male´s perception of the aging process.

METHOD

This is a field, descriptive study with a quantitative approach. The nature of this investigation seeks to analyze the facts as if they were external things; expressing reality, valuing mathematical precision and statistical models.[10]

The research scenario was the hospital complex of the Medical School of Marília (SP), Brazil, being the second largest employer in the municipality, with 2,300 workers. The workplace is a powerful scenario for accessing men since they few attend basic health units. The subjects of the research were the male workers who accepted to participate in the research. The sample size was determined by homogenization filter for the age group (20-29, 30-39, 40-39, 50-59 years old), and each age group consisted of 30 men, with a total of 120 men, who correspondent to 20% of male employees of this institution. It was possible to ensure the homogenization filter for age.

For data collection, a structured, self-administered instrument with questions of identification and perception about aging was used, translated and modified culturally into Portuguese[11], developed in Ireland and called the Aging Perceptions Questionnaire (APQ), applied as a psychometric scale.

This instrument identified the self-perception of aging from eight domains, seven of which evaluated the individual´s perception of the aging process, such are timeline that subdivides into the chronic schedule and cyclical time space, positive consequences, negative consequences, positive control, negative control and emotional representations. The eighth domain is the identity one, and it examines the experience of health-related changes.[12]

For analysis of the data, the Excel spreadsheet 5-0 and Epi-info version 3.5.3 program, and domains referring to self-

perception received statistical treatment were used.

The research project was submitted to the Research Ethics Committee of the Medical School of Marília for evaluation according to Resolution 466 of 2012 of the National Health Council and approved with CAAE N° 19363413.4.0000.5413. The investigated people participated in the collection of data through the clarification regarding the research, the guarantee of confidentiality and the free choice to participate or to cancel their permission at any stage of the research process.

RESULTS

As for the sociodemographic profile, it was possible to assure the age homogenization filter. Regarding the education of the 120 men interviewed, there was a predominance of men with complete secondary education 52.5%, followed by 40.8% men with complete higher education. Of those interviewed, 68.3% are married or are in a stable union. Regarding the income, 45.8% had monthly income above four minimum wages in force and only 0.8% a minimum wage.

The analysis of the experiences and opinions of the men about the aging process allowed the identification of aspects related to the timeline domains (chronic schedules and temporal space); positive consequences and negative consequences; emotional representations and positive and negative control. Data is described in Tables 1, 2, 3, 4, approving as follows: DT (fully disagree), D (disagree), NC/ND (not agree or not disagree) C (agree), CP (fully agree). Finally, the identity domain, whose data were described in a table correlating the physical changes and the aging process.

Table 1. Self-perception of aging in the timeline. Marília (SP), Brazil, 2014.

Characteristics	%				
	D T	D	NC/ ND	C	CP
Domain - Timeline					
I am aware that I am aging all the time.	4.2	10.8	10.8	48.3	25.8
I am always aware of my age.	1.7	5.8	5.8	59.2	27.5
I always call myself old.	35.0	41.7	13.3	5.8	3.3%
I am always aware of the fact that I am getting older.	5.8	7.5	11.7	54.2	20.8
I feel my age in everything I do.	25.0	35.0	15.8	19.2	3.3
My experience with aging is cyclical: sometimes it worsens, and sometimes it improves.	16.7	40	21.7	19.2	2.5
My awareness of getting older goes back and forth in cycles.	20.0	43.3	17.5	18.3	0.8
I go through phases where I feel old.	24.2	44.2	10.8	17.5	3.3
My awareness of getting older changes a lot from day to day.	28.3	50	10.8	10.8	0.0
I go through phases where I see myself as old.	28.3	44.2	10.0	14.2	3.3

As for the fact of being aware of being aging all the time, 48.3% of men reported that they agreed with this point. Regarding being aware of age in all they perform, 59.2% of men reported the agree.

Of those surveyed, 41.7% disagreed if they rated themselves as old. While 54.2% said, they know they were aging.

Facing the awareness of getting older going back and forth in cycles, 43.3% of the interviewed claimed to disagree that this occurs. In relation of feel the age in everything they do, 35% disagreed that this happens. About going through phases that feel like old, 44.2% revealed not to agree.

In what is perceived in the consciousness of being old change much from one day to another, 50% of the men disagreed.

When questioned, going through phases in which they see themselves as old, 44.2% disagreed to think it at times of their life. Throughout the experience with aging is cyclical, sometimes improving or worsening 40% reported to disagree with this fact.

Table 2. Self-perception of aging in the positive and negative consequences. Marília (SP), Brazil, 2014.

Characteristics	%				
	D T	D	NC/ ND	C	CP
Domain - Positive consequences					
As I get older, I gain wisdom.	1.7	5.0	5.8	54.2	32.5
As I grow older, I continue to grow as a person.	3.3	0.8	5.0	55.0	35.8
As I get older, I appreciate things more	3.3	5.8	15.8	45.0	29.2
Domain - Negative consequences					
Aging limits the things I can do.	5.0	21.7	16.7	42.5	13.3
Growing old makes me less independent.	7.5	35.8	24.2	25.0	6.7
Growing old makes everything much more difficult for me.	13.3	54.2	19.2	10.8	1.7
As I get older, I can participate less and less in activities.	14.2	55.8	12.2	15.0	2.5
As I get older, I no longer deal so well with the problems that arise.	23.3	55.8	12.5	5.8	1.7

In the fact that aging provides wisdom, 54.2% said they agree. Considering aging makes the person continue to grow as a person 55% of men revealed wake up. Thinking about the aspect of enjoying things as they get older 45% said they agree.

As for the fact that aging limits the things that can do, 42.5% of men affirm they agree that this occurs. Faced with the fact that aging makes them less independent, 35.8% of them disagreed.

To understand that aging can make things harder, 54.2% of men disagreed. As for the fact that aging is related to the lower activity practice and, in the perception of not dealing so well with the problems that arise, 55.8% of the men disagreed, respectively.

Table 3. Self-perception of aging according to emotional representations. Marília (SP), Brazil, 2014.

Characteristics	%				
	D T	D	NC/ND	C	CP
Domain - Emotional Representations					
I get depressed when I think about how aging can affect the things I can do.	26.7	35.8	14.2	15.0	7.5
I get depressed when I think how aging can affect my social life.	30.0	41.7	10.0	11.7	6.7
I get depressed when I think about getting old.	32.5	52.5	4.2	9.2	1.7
I worry about the effects that aging can have on my relationships with others.	21.7	38.3	14.2	23.3	2.5
I get angry when I think about getting old.	38.3	45.8	8.3	4.2	2.5

Of those interviewed, 35.8% of men disagreed that they were depressed when they think how aging can affect the things they can do. The result of being depressed in thinking how aging can affect their social life, 41.7% disagreed.

According to the result found, 52.5% of men disagreed being depressed as long as they think about aging. Analyzing the fact of worrying about the effects that aging exerts on their relationships, 38.3% of the respondents disagreed with this questioning.

When it comes to getting angry when they think about aging, 45.8% disagreed.

Table 4. Self-perception of aging to positive and negative control. Marília (SP), Brazil, 2014.

Characteristics	%				
	D T	D	NC/ ND	C	CP
Domain - Positive control	4.2	5.8	2.5	53.3	34.2
The quality of my social life in old age depends on me.	4.2	5.0	5.0	55.0	30.8
The quality of my relationships with others in old age depends on me.	4.2	10.0	8.3	51.7	25.8
If I am going to continue living life fully, it is up to me.	1.7	9.2	14.2	54.2	20.8
As I grow older, there is much I can do to maintain my independence.	13.3	35.8	16.7	28.3	5.8
Domain - Negative Control	15.0	41.7	16.7	23.3	3.3
Decreasing the pace of life with age is not something I can control.	17.6	49.6	16.8	14.3	1.7
My mobility as I get older does not depend on me.	18.3	53.3	13.3	13.3	1.7

There were 53.3% of the men indicating that the quality of social life depends on themselves, 55% agreed to be responsible for the quality of relationships. To the result to live life fully is something that depends on themselves, 51,7% reported they agreed.

In the sense that, with the aging, there is much to do to maintain their independence, 54.2% of men agreed.

As aging depends on themselves for positive aspects, 50.8% agreed.

When analyzed self-perception for the rhythm of life is not something controllable with advancing age, 35.8% of men disagreed. As the perception of mobility does not depend on themselves as they age, 41.7% disagreed with this point.

Regarding their perception of not having control of loss of vitality or enthusiasm for life as they age, 49.6% of men disagreed.

For the effects that aging exerts on their social life, 53% say they disagreed with this.

Table 5. Showing the experience of physical changes related to aging. Marília (SP), Brazil, 2014.

Changes	Lived		Related to aging*	
	(%)			
	Yes	No	Yes	No
Problems with weight	52.5	47.5	19.2	66.7
Changes in vision	42.5	57.5	23.3	51.7
Back or herniated disc problems	28.3	71.7	13.3	65.8
Anxiety	21.7	77.5	5.8	70.8
Problems with sleep	20.8	79.2	7.5	70.8
Cramps	20.0	80	6.7	69.2
Pain in the joints	20.0	80.0	10.8	64.2
Reduction of the rhythm of life	17.5	82.5	10.8	65.8
Foot problems	14.2	85.8	10.0	62.5
Do not have mobility	13.3	85.8	9.2	62.5
Loss of strength	10	90	7.5	65.0
Problems with bones or joints	10	90	3.3	68.3
Heart problems	08.4	91.6	3.3	68.3
Loss of balance	07.5	91.7	6.7	64.2
Hearing problems	05.0	95.0	6.7	66.7
Breathing problems	05.0	95	3.3	69.2
Depression	03.3	96.7	3.3	68.3

*This question was answered by interviewees who experienced a physical change.

Regarding the changes related to health, 52.5% of respondents reported problems with weight, 19.2% of them related it to the aging process. There were 42.5% of respondents reporting changes in the vision, 23.3% of them correlated with the fact that they are aging.

About presenting back problems or herniated disc, 28.3% said have experienced this problem, and 13.3% included this aging alteration. Anxiety appeared in 21.7% of the men, of whom 5.8% considered this factor related to aging.

About sleep, 20.8% presented a difficulty, 7.5% expressed that this is related to the changes arising from the physiology of aging. When asked about cramps, 20% reported this difficulty and included 6.7% of men in constant aging.

Concerning joint pain, 20% reported this symptom. However, 10.8% reported being related to the aging process. Analyzing a reduction in the rhythm of life, 17.5% manifest changes, and 10.8% of them related this factor to aging. In foot problems, 14.2% reported changes and 10% related this to changes experienced because of constant aging. Regarding mobility, 13.3% presented,

which 9.2% related to the fact that they are aging.

In the aspect of loss of strength, 10% reported it, but 7.5% correlated it with the fact of aging. According to problems in bones and joints, 10% presented this problem and only 3.3% claimed that this factor is related to aging. Considering heart problems, 8.4% denied any related problems, of this 3.3% related this factor due to the continuous aging. Of the men, 07.5% presented loss of balance and related this to the continuous aging 6.7% of men.

Analyzing the hearing problems, 5% of the men presented difficulties, while they related a 6.7% to the aging, presenting here a bias about the percentage. 95.5% of the men do not have this problem.

When questioned to respiratory problems, 05% presented this difficulty and, correlated with aging, 3.3% of these men. Finally, about depression, 3.3% of these men correlated with aging.

DISCUSSION

The self-perception of aging in the subscale of the timeline has allowed understanding that men are aware of aging and that it is part of a continuous process of life and it is inevitable to go through this process of loss over time.

When one thinks of a conscious vision, it is delimiting whether how much this man knows himself, the meaning of his life, his adaptive and controlling capacity, and his organization to achieve specific goals. Therefore, the conscious gaze the man perceives his aging process directly influences the way he will react to the natural losses of this process, as well as his ability to cope with changes that have occurred over the years and that intensify in old age.[13]

It was identified in this study that men correlate as a positive consequence of acquired life experiences and aging, a period that allows people to live harmoniously with the limitations imposed over the years and to remain active until the later stages of life, since this gives them intellectual gain and allows them to mature in relation to existence.

As the approach to this phase occurs, favorable moments are created to achieve new goals, to obtain better personal satisfaction, greater apprehension of knowledge and wisdom, consequently facilitating the achievement of established goals, better interpersonal relation, new achievements, enabling respect and reference to younger and family members, as is the case in Eastern culture.[14]

Some men have signaled a negative glance at the limitations that may arise with advancing age, expressing consequences. This perception is possibly related to the question of gender, because they consider themselves invulnerable, manly, strong and provident, which would allow us to say, from such observations, that it would be up to man to be strong. However, this constant gender issue pervades the behavior and the habits producing behaviors, which can result in carelessness with the body itself and little recognition of the natural losses of aging. This, of course, reflects in their adaptive capacity, hindering to better cope with and overcome this process of simultaneous losses, be they physical, social or psychological.

The studies show that the greatest adversities found in aging are related to functional incapacity (restriction, loss of abilities or difficulties), issues related to dependence and autonomy, that can cause, to a lesser or greater degree, physical, cognitive limitations, directly influencing in their adaptive capacity.[15] It is observed that the lack of understanding by the men of these implications, can result in greater suffering and overcoming difficulties, especially when they reach more advanced ages.

However, it is possible to take measures to maintain autonomy and functional capacity over time through a healthy and active lifestyle (practicing sports, adopting appropriate eating habits, avoiding risk behaviors, among others). That is, by encouraging them to take actions of health promotions that arouse the sense of care, and the understanding that they are subject to physiological, psychological and social changes. In this way, it will be possible to recommend old age well, delaying the appearance of symptoms characteristic of the mature age, as well as diseases.

The men in this study reported no depressive symptoms as they age. Certain psychoanalysts analyze the entrance into old age as a period marked by some event, some important loss to the subject that would undoubtedly evidence the proximity of finitude. It is emphasized that, as aging is perceived, people tend to show more frequent symptoms of sadness, as well as changes in affection and mood, often showing their dissatisfaction with this new stage of life that approaches each day.[16]

The men surveyed did not perceive aging as a negative emotional representation, and this fact enables to adopt preventive measures

that consolidate this positive outlook. Such perceptions make us reflect on conceptions, socially constructed, that can lead to greater attention, focusing guidelines in health services for men, so that they can reach maturity with a higher quality of life and aware of the reality of the losses.

The health programs for this genre are not yet well structured, and the actions described are focused on the chronic degenerative diseases, without articulation with the prevention and health promotion. In this way, it is important that there are an articulation and a greater incentive for this part of the population to participate in the services offered in society to contribute to a better well-being over time.

The quality of life is another aspect that arouses concern in men since they identify it that it depends exclusively on himself. They must consider that there is a need for a positive control to remain socially active, as well as to maintain their relationships by the way they live their lives over the years, acknowledging that their aging has positive aspects.

According to the literature, quality of life depends on the individual´s perception of their position in life within the context of their culture and the value system of where they live, and about their goals, expectations, standards and concerns. The concept groups to a certain extent the physical health of a person, their psychological state, their level of dependence, their social relations, their beliefs and their relationship with prominent characteristics in the environment. Therefore, for a successful aging, there must be a balance as well as a positive control of each of these factors over the years.[17]

Finally, this study enabled to verify the physical changes prevalent in men as they age. The weight gain was signaled more frequently.

According to the literature, the weight gain occurs mainly around 40 to 60 years old, with a decrease after 70 years old, and in men, the mass of fat increases by a ratio of 1.5%.[18] There are some factors that explain why this happens: with the advancement of age, there are important changes in body composition, favoring a reduction of lean mass and increased fat, and hormonal changes appear that decrease metabolic activity.

Also, the literature shows that energy homeostasis is controlled by a humoral-systemic that minimizes the conflict of small fluctuations in energy balance, and leptin is a decisive component of this control, secreted in proportion to the fat mass. Leptin acts on receptors expressed in the hypothalamus to induce feelings of satiety and regulate energy balance.[19]

Several conditions are capable of interfering with the action of leptin, and among them two factors stand out: decreases in energy reserves of the organism and aging, which would lead to an increase in the central resistance to this hormone and propitiate the weight gain.

It is important to emphasize that there are other factors that may also contribute to an increase in adipose tissue, such as the quality of food, and the lifestyle to be sedentary or not, resulting in hormonal changes, in greater or lesser weight gain, as measured that the person grows old.

Another change of relevance cited by the participants of this study was in the vision, which according to the literature, it is linked to one of the first systems to suffer the consequences of the process of aging, the sensory system. With advancing age, the cornea progressively loses transparency, and the lens, an intraocular lens, which is normally transparent in childhood, is becoming yellow. Impaired vision also results in: presbyopia - slower “far-near” accommodation capacity, reduced visual acuity individually at night. These alterations due to the normal process can evolve into possible etiologies such as cataracts, glaucoma, and macular degeneration, so it becomes very important that as the years go by, there is concern about any signs of visual deficit, which begins to have a more significant decline from the age of 40.[20]

Problems in the back and herniated disc appear soon after these two changes cited. Loss of muscle mass is a strong indication of the loss of mobility and functional capacity of the aging individual. The neuromuscular system in the human being reaches its full maturation between 20 and 30 years old, after this period, it undergoes a process of gradual decline. Also, there is a change in the skeletal structure, as the person grows older, the disks that separate the vertebrae undergo several alterations: loss of water that is important for shock absorption, alteration of the bone mineral density of the vertebrae, facilitating and propitiating the compression in the intervertebral discs that reduce the length of the spine and leads to the appearance of spinal problems and disc hernias.[18]

Understanding that over the years there are changes and that these are part of the process of living is important for a man to seek and adopt measures that may contribute

to delaying or minimizing the consequences of the aging process, as well as having a healthier aging possible. We can see that men understand that changes occur. However, few relate the fact to the advancing age, and this reinforces the need for a greater focus on issues of health promotions as a way of orientation to explain that such changes are related to all these aspects that involve human aging.

CONCLUSION

The importance of this research was to understand the male perception, gender marked by prejudices, stereotypes related to his health, over the years, about senescence, considering that this gender is little assisted by the health sector, and there is a need to adopt more active measures in prevention and health promotion, which arouse in men greater care with them and also bring them closer to the services available in the health network, since they are the ones that use these services the least.

The method used was adequate to ensure the success of the objective; all invited men accepted to participate in the research. The questionnaire applied was easy to understand and required little time, not compromising the service.

As for the homogenization filter used, it was observed that there were no significant differences between the age groups and the domains. Otherwise, the cross-correlation of the age-related responses was used. However, a bias was detected in the identification domain in the physical alteration because there was no agreement on the percentage found when correlated with aging, which may be justified by a lack of attention or error of the interviewees in completing the questionnaire.

It was possible to perceive that the men signal to be aware of the process of aging, as well as that this process offers intellectual gains through the experiences acquired as it goes through the phases of life. These still few evidence depressive symptoms. They point out commitment and responsibility in caring for oneself, but there is a fragility in recognizing the limitations arising from the aging process.

From the data obtained, it is clear that a greater incentive in the educational practices and insertion of these men in matters related to their health is important, especially in the aspects that involve the limitations that can arise with the process of aging. This can occur through the effective idealization of strategies linked to disease prevention and health promotion that are worked over the years will make it easier to accept the natural limitations of the aging process by looking at old age in a more positive way, going through this process more easily and with a higher quality of life. However, it would be interesting to displace new research to deepen aspects raised in this theme, which still lack studies in the national literature.

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