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COMMUNICATION BETWEEN THE ELDERLY AND FAMILY IN CONVIVIALITY GROUPS

COMUNICAÇÃO ENTRE IDOSO E FAMÍLIA EM GRUPOS DE CONVIVÊNCIA

COMUNICACIÓN ENTRE EL ANCIANO Y FAMILIA EN GRUPOS DE CONVIVENCIA

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ABSTRACT

Objective: to analyze the communication between the elderly and the family of the residents of social groups. **Method:** qualitative, descriptive, exploratory study with 33 elderly participants of an extension project. The semi-structured interview was used to collect data. The Content Analysis technique was used in the Thematic Analysis modality. **Results:** four categories (conformations, concepts and meanings of family, types of communication, communication barriers and communication strategies) emerged from the discourses. It was identified that the elderly have the concept of extended family beyond the blood ties. Spaces of coexistence for the third age and participation in religious centers supply the need for social and family exchange. It was evidenced that the conventional telephone is a strategy to facilitate family communication, in addition to family events / dialogue. **Conclusion:** it was verified the need to strengthen intra-family communication in the elderly who attend social spaces, stimulating communication strategies to prevent family isolation, despite social interaction. **Descriptors:** Communication; Aged; Family; Geriatric Nursing; Health Promotion, Interpersonal Relations.

RESUMO

Objetivo: analisar a comunicação entre idoso e família dos frequentadores de grupos de convivência. **Método:** estudo qualitativo, descritivo, exploratório, com 33 idosos participantes de um projeto de extensão. Utilizou-se a entrevista semiestruturada para a coleta de dados. Empregou-se a técnica de Análise do Conteúdo, na modalidade Análise Temática. **Resultados:** emergiram, dos discursos, quatro categorias (conformações, conceitos e significados de família, tipos de comunicação, barreiras de comunicação e estratégias de comunicação). Identificou-se que os idosos têm o conceito de família ampliado para além dos laços sanguíneos. Espaços de convivência para a terceira idade e participação em núcleos religiosos suprem a necessidade de troca social e familiar. Evidenciou-se que o telefone convencional é uma estratégia facilitadora da comunicação familiar, além de eventos familiares/diálogo. **Conclusão:** constatou-se a necessidade de potencializar a comunicação intrafamiliar nos idosos que frequentam espaços de convivência estimulando estratégias de comunicação para prevenir o isolamento familiar, apesar da interação social. **Descritores:** Comunicação; Idoso; Família; Enfermagem Geriátrica; Promoção da Saúde; Relações Interpessoais.

RESUMEN

Objetivo: analizar la comunicación entre el anciano y la familia de los asistentes de grupos de convivencia. **Método:** estudio cualitativo, descriptivo, exploratorio, con 33 ancianos participantes de un proyecto de extensión. Se utilizó la entrevista semiestructurada para la recolección de datos. Se empleó la técnica de Análisis del Contenido, en la modalidad Análisis Temático. **Resultados:** surgieron, de los discursos, cuatro categorías: (conformaciones, conceptos y significados de familia, tipos de comunicación, barreras de comunicación y estrategias de comunicación). Se identificó que los ancianos tienen el concepto de familia ampliado más allá de los lazos sanguíneos. Espacios de convivencia para la tercera edad y participación en núcleos religiosos suplen la necesidad de intercambio social y familiar. Se evidenció que el teléfono convencional es una estrategia facilitadora de la comunicación familiar, además de eventos familiares / diálogo. **Conclusión:** se constató la necesidad de potenciar la comunicación intrafamiliar en los ancianos que frecuentan espacios de convivencia, estimulando estrategias de comunicación para prevenir el aislamiento familiar, a pesar de la interacción social. **Descritores:** Comunicación; Envejecido; Familia; Enfermería Geriátrica; Promoción de la Salud; Relaciones Interpersonales.

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INTRODUCTION

World data shows that by 2050 there will be more than two billion elderly people and that every second, two people celebrate 60 years of age.¹ However, this phenomenon is not restricted to just increasing life expectancy, it occurs in a context in which the community and the family participate. These are an integral part of the environment in which daily life takes place and the processes of interaction and communication; include the home, neighborhood, and community, directly influencing health and / or imposing barriers or incentives that have implications for opportunities, decisions, and behaviors.²

Changes have been occurring in families where new family settings are a reality in the contemporary world. Multigenerational, single-parent homes, homo-affective couples, with or without children, and the geographic distance in which family members eventually reorganize family structure and dynamics. New conformations, concepts, meanings attributed, in short, new models are configured as the environment where the elderly live and interact at present.

When considering the family context, another aspect to be considered are younger generations migrating to growth areas in search of opportunities, which changes the family structure by weakening social safety nets² and numerically reducing those who could live / care for these elderly people when needed.

The change in the role of the woman who, in the past, was the caregiver of children and the elderly, and who nowadays constitutes an active work force in the search for better living conditions, emerges in the same way as a provision of care to the elderly in need. Thus, old models of family care are simply not sustainable.²

The family scenario undergoes new interactive arrangements since "longevity brings the possibility of a greater time of intergenerational family coexistence, which implies changes in the concept of family and family configuration, bringing with it challenges. In particular, those concerning intergenerational family relations, support and care, earnings and new needs and roles involving the components of the same family.

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Family coexistence is established by socio-affective exchanges in which interaction and the communication process are structural elements of such exchanges that will enable them to live together, seek support and

participate in family life. Interaction is understood as the ultimate goal of communication, the link through which its members express their needs and opinions.⁴ In the meantime, studies that evaluate the outcomes of the communication / interaction process in intergenerational coexistence and their impact become relevant in the life of the elderly, as well as in family dynamics.

Considering the communication / interaction between the elderly and their family, it is possible to understand the family situation by looking at the existing care demands, since the low level of support, low cohesion and the high level of conflicts have been pointed out as a dysfunctional family environment and that good family functionality is associated with a high level of support, cohesion and low level of conflict,⁵ elements that the process of communication and interaction that family members establish among themselves can contribute to the identification.

The problem lies in how to access the communicative and interaction dynamics of such family exchanges? Nurses can use as strategies, living groups, spaces for social exchanges and environments in which communication and interaction are the common mark of such spaces, because, usually, experiences, conflicts and lived joys and talk about life outside the group from which, not infrequently, family and family relationships are common themes in conversation.

In the search for health improvements and new friendships, they join the groups with benefits such as the guarantee of autonomy and independence, the possibility of a support network, the occupation of free time and the expansion of affective bonds⁶ that, the family members don't provide.

OBJECTIVE

- To analyze the communication between the elderly and the family of the residents of social groups.

METHOD

Qualitative, descriptive and exploratory study with elderly people attending a coexistence group, extension project of a federal public university located in the Brazilian Southeast, from June to July 2013.

This coexistence group is part of the extension activities of the Department of Social Work of this university. It has an interdisciplinary character, with the participation of professionals such as social

workers, physical educators, nurses, pedagogues, teachers of Portuguese and English language, computer science and volunteers. The activities developed focus on the morning and afternoon periods, daily. Examples include language workshops, fall prevention, theater, cognitive and social memory, citizenship, psychology and water aerobics.

The sample consisted of 33 elderly people. Inclusion criteria were: to regularly attend group activities and be able to express feelings and perceptions. Incomplete interviews, failure to meet twice scheduled, and elders with less than one year in the group were exclusion criteria.

The sizing of the number of participants was obtained by saturation sampling in qualitative research. The sample closure by theoretical saturation is operationally defined as the suspension of inclusion of new participants when the data will present, in the evaluation of the researcher, some redundancy or repetition, and it is not considered relevant to persist in the collection.⁷

The semi-structured interview was used based on the following question: "How do you communicate with your family?". The interviews were recorded and transcribed in their entirety and each interview had an average duration of 60 minutes. Participants were identified by assigning a numerical code from one to 33, according to the interview order.

For the data treatment, the Content Analysis technique was used, thematic analysis type, following the phases: pre-analysis, material exploration, treatment of results, inference and interpretation of findings.⁸ The analysis of the interviews allowed to identify four categories: conformations, feelings and meanings of family, types of communication, communication barriers and communication strategies.

The ethical and legal aspects recommended by Resolution No. 466/12 on research with human beings were respected, and the research was approved by the host institution and by the local research ethics committee under number 246,268 of 05/10/2013.

RESULTS

It was observed that 88% were female; 73% were between 60 and 70 years of age; 63% had incomplete fundamental schooling and 18% had higher education. Regarding the family

composition, it was identified that 54.5% lived with relatives and 45.5% lived alone.

Conformations, feelings and meanings of family

In this category, the conformations of homes and the meanings attributed by the elderly to the concept of family, as well as the feelings that permeate family interactions, are exemplified. Multigenerational, single parent households and elderly couples living alone were identified.

- I live with my husband, a couple of children and a grandchild and I am very happy. (A23)*
- I live alone, but I have relatives (...) I have sisters, I have a niece. (A22)*
- I live with my wife and I live very far away from other relatives. (A20)*
- Currently I am living alone, but with family supervision. (A17)*
- I live with my children and my husband at home. (A16)*
- I live with my son and daughter-in-law. (A13)*
- I live with my youngest daughter and raise a nephew. (A11)*
- I only live with God and nobody else. (A5)*

Family relations, according to some reports, were experienced in an environment of unity, respect, love, dialogue and mutual support contributing to the maintenance of healthy affective bonds. Thus, the relevance of the family to the well-being of the elderly emerges.

- All are united. Everyone comes together, there is peace and love between us. (A31)*
- Family is a nucleus, made up of people. There you get emotionally involved, have several affective factors. (A30)*
- Family is love, understanding, affection. (A29)*
- My family is an example, we are together in the hour of joy, as in sadness. (A3)*

In spite of the meaning of family, it was possible to identify new attributes that characterize it in which the concept of family was extended beyond the biological or consanguineous component, affectivity being one of the elements. The elderly incorporated the affective component to the notion of family and extra-familial spaces, such as churches and coexistence groups, were referred to as family beyond the social aspect.

- The biggest family I have first is God, as it is here (reference to the group of coexistence), which are my friends, my teacher. (A13)*
- Family can be the family in the church, because it's family, is not it? And my physical family too. (A32)*

I do not consider myself without family, because I have millions of friends here in the group. (A10)

Family for me is very important (...). They are bonds of blood, they are bonds of friendship, of love. (A8)

However, traditional family meanings and concepts were cited by the surveyed elderly revealing that, although the concept of family is undergoing an update, traditional visions have been identified.

Family is the reunion of the children with the husband, the parents if they are still alive, brothers, nephews, anyway. (A6)

Family for me is everything. I live with my wife from Monday to Friday; at weekends the grandchildren, the son-in-law, adds. (TO 1)

It is a union of husband, wife, children. (A31)

Family is father, mother, son, brother. who live together in one house. I live above, they live below, thank God we live very well. (A26)

Family for me consists of husband, wife and children. The remainder are in parentheses. (A12)

The benefits of belonging to a cohabitation group that was sometimes attributed as a family by the elderly were also highlighted. Attending a cohabitation group constitutes a potential intervention for the construction of links and stimuli to communication / interaction and active social coexistence with the potential to provide an incipient socio-family coexistence. It is observed, by the reports, which gains are referred in function of developing activities in the extension project.

The group was a great fit for my life (...) here it improved my self-esteem, that I was almost in depression. (A22)

My kids told me to bring a mattress here to UFF know! It's wonderful here, I come every day. (A25)

This space here for me that I'm attending is a blessing because we stay at home for no reason. Just think about what? In trouble. Ah! I'm in pain here and there... And then I come here, eight thirty in the morning every second Friday, and I only leave five hours, five and a little. I do Yoga, I speak English, I do my workshops, nine workshops, very good. (A26)

◆ Types of Communication: implications for family interaction

Using different means of interaction can enhance the elderly's communication with the family. The conventional telephone, however, has stood out as the most used and is deduced that it is because the communication medium is less complex and easier to access. It was

identified the informatics being little used by the elderly in their communicative processes, if compared to the telephone. Nevertheless, adapted elderly people were identified and using social networks and technologies.

Look, I put a little note under the cups saying some nice words to them ... and I phone the one who lives far away. (A07) Phone, note, eye to eye, everything has its moment. (A28)

Cell phone, or sometimes ticket, when my cell phone is unloading, and I need to leave in a hurry, then I put a note under the door, and it works. (A27) It's phone, e-mail, people call, I have Twiter (...) we're communicating. (A24)

Verbal, as well as non-verbal, language was cited as a major yearning for the elderly, that is, the need for contact and presence and the act of speaking with their close interlocutor were present on the plane of desire. In some discourses, the proximity established in the communication emerged as a relevant factor to the interaction and the familiar coexistence.

Sometimes I use cell phones, because I'm very much on the street, but I go personally, I think it's better for me personally, we see well inside the eyes of the person, how a person acts how he behaves in the way people come and talk. (A13)

I go personally ... the most appropriate is communication, eye to eye together. (A16)

Personally or over the phone. (A33)

I liked to communicate myself when I walked, but now I'm not going anymore, I'll call. (A9)

◆ Communication Barriers

The communication barriers category presents situations that hinder or diminish quality, that is, the effectiveness of communication between the elderly and their family. It is noted that the elderly show, as interference in communication, personal barriers, individualism, family conflicts and physical distance.

I relate more by email, because my son is very closed and does not like to talk on the phone, it hurts a lot, because sometimes I miss him, I want to talk, but he is very laconic, it is very difficult for him to talk. (A08)

I am the head of the house and they come all to me ... I give an order everyone has to obey. (A23)

I think nowadays there is a lack of dialogue ... parents do not care anymore ... it's such a thing to want to work, work, work, and forget that they have children, women forget that they have a husband, a husband Forget that you have a wife. There has to be

a day and time for us to sit down and talk, that dinner table or lunch. (A25)

Question of daughter-in-law quarreling with her son out of jealousy (...) I get angry, that's kind of a barrier. I wrote her a letter so she could solve the problem there and not bring it to me. (A28)

These interferences are interrelated with the very personal barriers of the elderly as the rigid personality and the difficulty in adapting to contemporary changes.

These appear as limiting to family communication as expressed in the following statements.

They treat me very well ... but the elderly are always elderly, understand? The elderly are always the elderly! (A27)

Look, those who live nearby, my barrier is talking about dating them, I avoid. (A7)

I feel deficient in the coexistence of them (of the children), I am extroverted and they are very contained, so I want to talk more, talk more, they already more reserved. (A32)

The reports indicate the intrinsic complexity of family relationships associated with personal characteristics. In the speeches, we also observed the influence of the context of the behavioral changes of the postmodern world, leading to a decrease in the interaction among family members, such as the frequent exchanges of partners of the younger family members.

◆ Communication Strategies

This category deals with the strategies that the elderly used to promote socio-family interaction. Events such as lunches, walks, birthday parties and meetings promoted an environment conducive to communication / family interaction, contributing to intergenerational coexistence. The events allowed for affective exchanges producing feelings of well-being and belonging.

When I want to get them together, I use my stomach, I do something tasty and everyone comes. (A11)

Sunday lunch, birthday and parties (...). We always meet on those dates and on a family birthday. The family is very big, so every Sunday we go home to each one. (A02)

At Sunday lunch (...) meeting the whole family, this is already sacred. (A25)

When it's a talk for everyone, I make a lunch and I invite everyone. (A15)

Maintaining family cohesion seems to be configured as a strategy that maintains proximity and coexistence and, therefore, interaction. The elderly show that constant dialogue has allowed family demands to be known, which translates into a valuable strategy for socio-family exchanges.

Whatever problem I have, I tell my kids, anything they need to talk to me. (A04)

Every day I talk to my children, when it is not day, it is at night and every week is already arranged, one comes on Saturday, the other on Sunday, but they do not stop coming to see us, we are always talking about our problems. (A18)

I think that all families should try to be united, because having union, we overcome the problems; of disease, financial (...) the union is very important. (A21)

Agent participates in the problematic of each other even at a distance. If you need anything, one is ready to help the other; to give moral or even financial support. (A19)

DISCUSSION

The proportion of older women in the findings ratifies the gender issues involved in human aging and the characterization of the group as a space occupied predominantly by women. In this study, the greater male participation was of unmarried elderly, however, there were elderly couples attending activities. In another study, male participation was low and, to a large extent, they were accompanying their wives.⁹ There was almost the same percentage between living with the family and living alone. A similar result was found in another study.¹⁰

The conformations of homes pointed out by the elderly find a worldwide resonance, since the longer life and the smaller number of children make it more common for families to be multigenerational.^{2: 40} However, elderly and even elderly couples were identified as living alone. The implication of this finding is that the presence of fewer children and changes in the family structure threaten to reduce the support that the younger children² will need at some stage of life.

In addition to the factors mentioned above, family insufficiency may be enhanced by geographic mobility and the greater participation of women as a work force, reducing the availability of adult children willing to care for elderly relatives.²

The coexistence group provides an opportunity environment congruent with active aging. Thus, the elderly of the cohabitation group, by the environment provided by the activities and objectives, actively age by taking opportunities that arise during life to achieve and maintain health, an occupation rich in meaning, social relations, new skills, knowledge and material needs.²

In corroborating the feelings expressed by elderly people permeating family relationships, a study on family care and generational relationships identified that,

among Brazilian elderly, feelings of unity and concern about staying close to family members prevail.

However, each nationality may have a different view of the feelings that permeate such relationships. Among Lebanese, feelings such as respect, acceptance and religiosity were commonplace. For these, the elderly should be cared for in the family and not in nursing homes. In China, care is a tacit obligation. For Paraguayans, feelings like worry and zeal for the elderly are a reality. In France, elderly people in specialized institutions are common so that children can work and the latter believe that this is the best choice.¹¹ Thus, family life is permeated by cultural issues that must be considered in the gerontological approach.

The conception of the family can be identified as an essential unit for the elderly's living process, an affective institution, expressing the social normativity about it, characterizing family care for actions and interactions among its members to strengthen health and well-being of these.¹²

The concepts and meanings of families for the elderly in this study were varied. The coexistence group itself was characterized as a family environment. However, more traditional concepts have been referred to. Such family meanings show an adaptation and / or insertion, on the part of the elderly, in the questions of the contemporaneity when they extend their vision of family beyond the questions of kinship fruit of the historical-existential and sociocultural context of the subjects. Whatever the concept or meaning of family that these elderly people have, it is first and fundamentally preserved as a resource available to the elderly.¹²

It should be considered relevant that interaction is the ultimate goal of communication. However, it only exists through the message, the element of connection between the source and receiver. When one speaks, discourse is the message; when writing, writing is the message; when painting, painting is the message. Still, gestures, arm movements, expressions of the face as a message, the real physical product of the source coder are considered.⁴ Thus, in the messages established between the elderly and their relatives, the code, content and treatment⁴ given to messages.

The code refers to how elements are mastered and how they are structured, for example, in the Portuguese language, since old people were identified using written notes to communicate some information, and low schooling was a prevalent finding among

respondents. It reflects on whether the receiver of this message can decode it effectively and without noise, or even if it is the most effective way to communicate a need, when considering the intergenerational issues of the younger ones, who usually opt for the technology to mediate their communicative processes.

In the meantime, among the activities that may help in the better domain of the code, literacy workshops, schooling and improvement of computational technologies/digital media are identified, since schooling influences communication skills, as well as the articulation of words and writing, which are also determinants of communicative effectiveness.^{4,13}

The content of a message refers to the material chosen by the source to express its objectives. In statements, information, conclusions taken and points and views arranged in a given order,^{4, 13-5} there must be coherence in the content to express meaning. When communicating, the elderly print a characteristic way of demonstrating their style of communication, making decisions about how they will select and dispose of both the content and the code^{4,13-4,16}, thus seeking the interest and understanding of their interlocutor.

Thus, there must be consistency in the delivery of the message so that it can be achieved when it is decoded. It was noticed that, sometimes, the elderly use messages of certain form depending on the source (children and relatives) aiming at a closer coexistence.

On the types of communication, these are channels, vehicles through which messages must go from one point to another between the source (the elderly) and its recipient (family). It was observed that verbal communication, words expressed through speech or writing, is consistently used by the surveyed elderly. However, this is accompanied by non-verbal communication: gestures, silence, facial expressions, body posture, as well as the desire for affective physical contact and closeness expressed by proxemics and touching.¹⁵

The communication process of the elderly and their family is permeated by attitudes when interacting, that is, communication suffers the influence of liking or not, of wanting or not to associate with, to identify or to dissociate from. All these conceptions are influenced by the world view of each family component and translated into favorable or unfavorable attitudes to communication.⁴ Such attitudes can be

understood as noises / barriers that influence the communication process, diminishing the communicative effectiveness,⁴ and, consequently, the interaction, when they produce detachment, conflicts and when the differences are not resolved.

Therefore, if both attribute positive value to intra-family communication, this can translate into favorable attitudes towards each other, reducing family conflicts, as pointed out in the speeches. This favors coexistence and diminishes individualistic attitudes. Otherwise, distancing is strengthened.

When the sender and the receiver, that is, the elderly and their relatives have positive and positive attitudes towards each other, they become less critical and more likely to communicate / interact,^{4,13-6} reducing conflicts and favoring coexistence and diminishing, including physical distance, which is a barrier to family communication / interaction. The findings of intergenerational conflicts may be due to differences in social and cultural values between generations.¹²

Likewise, personality, which influences how each individual treats the messages he emits and receives, just as culture influences the personality,^{4,16} must be considered. How family members perceive themselves and what value and status they attribute to coexistence will determine the quality of communication / family interaction. Thus, each individual has their world view of communication that is present in the way they interact.

To discuss this problem in the groups of coexistence opportune, the elderly, to reflect how their peers seek solutions and the maintenance of a healthy family atmosphere by the management of conflicts in which harmonic and respectful communication / interaction as a strategy can reduce the distance between the members family, when there is the proposal of "getting along" made possible when important elements of this family structure are recognized.

Despite the use of technology, the results of this study are in line with another that investigated the aptitude and knowledge of the elderly to use digital media. The justification for non-use or restricted use was in the belief that they could harm the computer and / or handle it incorrectly, as well as the fear of losing files or of not having computer problem solving skills.¹⁷ During the activities in the groups of coexistence, it is fundamental to guide the elderly in the news in the world of computing favoring the

increase of confidence and reducing blockages that still exist within them.

In view of the problems encountered, it is important to mention that another important nursing action would be to extend the participation of families in the coexistence groups, a possible and low-cost strategy that would promote pleasant communication and interaction between the elderly and their family, inviting them to commemorative and expanded activities, as well as volunteer work in the project..

CONCLUSION

Empowering the elderly to acquire communicative skills, such as the use of various means and types of communication (verbal, nonverbal and distance), can contribute to a more effective communication by reducing barriers that interfere with family interaction.

Barriers to communication usually arise as personal difficulties, of his own personality and of the distance between his members or for geographic issues, or for the incipient handling of technologies that would favor a virtual approach, for example. Strategies such as parties and family events have provided an environment for healthy coexistence.

As a limitation of the study, the sample is local. However, studies are recommended to investigate the subject of communicative skills in the elderly, as well as their training and evaluation in the family context, so that the strategies pointed out by the elderly can be tested in a gerontological nursing care plan.

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