



PRODUCTION OF THE KNOWLEDGE ON ELDERLY PEOPLE AND SOCIAL CENTERS

PRODUÇÃO DO CONHECIMENTO SOBRE IDOSOS E CENTROS DE CONVIVÊNCIA LA PRODUCCIÓN DEL CONOCIMIENTO EN LAS MAYORES PERSONAS Y LOS CENTROS DE CONVIVENCIA

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ABSTRACT

Objective: to investigate the production of knowledge about the elderly people in social centers. **Method:** it is a systematic review, which had as research question: What is the production of knowledge about older people who attend community centers? It was performed in databases Scientific Electronic Library Online (SciELO), Latin American and Caribbean Health Sciences (LILACS), and in the Brazilian journals *Textos sobre Envelhecimento* and *Revista Brasileira de Geriatria e Gerontologia*, between May and July 2010. Seventeen articles met the inclusion criteria of the study. From exploratory reading of the articles, we used a form with the following variables: work's title, author, study subject, objective, methodological approach, geographical characteristics where the study was conducted, year of publication, article type, area of production descriptor used, the database, database, it was carried out a cataloging of the main results, with subsequent assembly of the database of research. Then, we performed the quantitative analysis of data, which were organized into spreadsheets on Microsoft Office Excel 2007. The results were expressed by numerical representations, following the systematic distribution by simple frequency, through absolute and percentage values in a table. The discussion on results was held under the specialized literature. The authorships of the articles were preserved. **Results:** we analyzed seventeen productions, with 100% of Brazilian researches, concentrated in the Northeast and Southeast (35.3%) in the states of *Minas Gerais*, *São Paulo* and *Paraíba* (17.6%). Public Health researchers have developed 20% of the articles, followed by nursing investigators (16%). The predominant studies are about profile of elderly participants in social groups, and social representation of the elderly about aging and environmental education (23.5%). **Conclusion:** the scientific literature on the elderly in social centers is still inexpressive. So, it is needed to foster this research because of the importance of these spaces to promote active aging and life quality. **Descriptors:** Elderly; centers of coexistence and leisure; demographic aging; nursing.

RESUMO

Objetivo: investigar a produção do conhecimento sobre as pessoas idosas nos centros de convivência. **Método:** revisão sistemática, que teve como questão de pesquisa: *Qual a produção do conhecimento sobre idosos que frequentam centros de convivência?* Realizada nas bases de dados *Scientific Electronic Library Online* (SciELO), *Literatura Latino-Americana e do Caribe em Ciências da Saúde* (LILACS), e nos periódicos brasileiros *Textos sobre Envelhecimento* e *Revista Brasileira de Geriatria e Gerontologia*, entre maio a julho de 2010. Dezesete artigos atenderam aos critérios de inclusão do estudo. A partir de leitura exploratória dos artigos, que se utilizou um formulário com as seguintes variáveis: título da obra, autor, objeto de estudo, objetivo, abordagem metodológica, características geográficas onde foi realizado o estudo, ano de publicação, tipo de artigo, área de produção, descritor utilizado, base de dados, foi realizado o fichamento dos principais resultados, com posterior montagem do banco de dados. Em seguida procedeu-se a análise quantitativa dos dados, que foram organizados em planilhas no Programa Microsoft Office Excel 2007. Os resultados foram expressos por representações numéricas, seguindo a distribuição sistemática por frequência simples, valores absolutos e percentuais apresentados em tabelas. A discussão foi realizada à luz da literatura. **Resultados:** foram analisadas dezessete produções, sendo 100% investigações brasileiras, concentradas no Nordeste e Sudeste (35,3%), nos estados de Minas Gerais, São Paulo e Paraíba (17,6%). Pesquisadores da Saúde Coletiva desenvolveram 20% dos artigos, seguidos pelos de Enfermagem (16%). Predominaram estudos sobre perfil dos idosos participantes de grupos de convivência e Representação social do idoso sobre a velhice e a educação ambiental (23,5%). **Conclusão:** a produção científica sobre idosos nos centros de convivência ainda é inexpressiva. Necessita-se fomentar esta investigação devido à importância desses espaços para promoção do envelhecimento ativo. **Descritores:** idoso; centros de convivência e lazer; envelhecimento demográfico; enfermagem.

RESUMEN

Objetivo: investigar la producción de conocimiento sobre las personas mayores en centros comunitarios. **Metodología:** investigación bibliográfica, que tenía la pregunta de investigación: *Cuál es la producción de conocimiento sobre las personas mayores que asisten a los centros de la comunidad?* Se realizó sobre la base de datos *Scientific Electronic Library Online*, América Latina y el Caribe de Información en Ciencias de la Salud y en revistas y textos sobre el Envejecimiento Diario de Geriatria y Gerontologia, a través de un formulario, de mayo a julio de 2010. Diecisiete (17) artículos asistió a los criterios de inclusión de esta revisión sistemática. Tras la lectura, construyó las siguientes categorías de análisis: trabajo de título, autor, tema, objetivos, enfoque metodológico, las características geográficas donde se llevó a cabo el estudio, el año de publicación, tipo de artículo, área de producción, base de datos de descriptor utilizado. **Resultados:** se analizaron diecisiete producciones, con 100% de la investigación brasileña, concentrada en el Nordeste y Sudeste (35,3%) en los estados de Minas Gerais, Sao Paulo y Paraíba (17,6%). De Salud Pública de investigadores han desarrollado un 20% de los artículos, seguido por la enfermería (16%). Los estudios de perfil predominante de los participantes de edad avanzada en los grupos sociales, y la representación social de las personas mayores sobre el envejecimiento y la educación ambiental (23,5%). **Conclusión:** la literatura científica sobre las personas mayores en centros de la comunidad es aún modesta. Así que hay que fomentar la investigación debido a la importancia de estos espacios para promover el envejecimiento activo y de calidad. **Descriptor:** Anciano; centros de ocio y convivencia; envejecimiento de la población; enfermería.

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INTRODUCTION

Over the last 60 years, the Brazilian population over 60 years old has increased of an accelerated manner. This population will more than triple over the next forty years (four decades), from fewer than 20 million, in 2010, to approximately 65 million, in 2050.¹

The growth of the quantitative of very elderly people, in the next 30 years, will result in greater absolute numbers of weakened elderly, although there is a reduction of weakened elderly, due to the actions of prevention of diseases and improvement in care practices.² As a result of this increase, it is necessary to understand that the aging process cannot be seen as a period of decline or as the source of all problems of the society.³ In this sense, the social centers emerge as opportunities to perform actions directed to health care for the elderly.

When considering the addition of this segment of the Brazilian population and the social impact resulting from this process, it should become indispensable the adoption of new conceptions of care to this population, which aims to encourage social participation and promote experience of active aging. It is following this perspective that actions should be directed to the health of the elderly, having as central focus, the practices of health promotion, however, with no deficits in specialized care and services directed to the elderly people.⁴

It becomes necessary to consider the physical, psychological and social aspects, as well as the guarantee of autonomy as impact factors on the life of the elderly. These determinants keep interference in the practice of activities of this population along with community, encouraging family support, and the search for alternatives to improve of the active aging.⁵

The aging of the population also presents itself as concern for the State, since it demands the formulation and adoption of policies directing the social and economic needs of the elderly, which are able to corroborate the promotion of the active aging, in order to ensure respect for the rights, preferences, abilities and dignity of the elderly people.⁴

The World Health Organization proposes, how health policy, the promotion of the active aging, which aims to allow individuals to recognize the potential for physical, mental and social welfare throughout the life. This

proposal demands actions from the authorities, non-governmental organizations, private industries, and health and social service professionals, seeking to promote social contact networks for the elderly, involving in this process community groups, volunteer work, neighbors, family caregivers and programs that promote interaction between generations and services.⁶ It is considered that these spaces act against the proposal for the promotion of the active aging, which aims to preserve the capabilities and development potential of the individual, providing a new dimension to the old age.⁷

The social centers are environments designated for performing physical activities, socioeducational, artistic, cultural, and leisure actions. The elderly experience in these spaces old age with autonomy, of an active and healthy manner. The coexistence in group facilitates the expression, provides physical exercises and stimulates creativity, acting as a positive tool for the development of personal achievement, self-esteem, as well as the maintenance of functional capacity.⁸ The participation of elderly fosters new learning and regain of social relationships, which results in aging without loneliness and isolation⁹

The elderly person who participates in activities has the possibility of overcoming disabilities to deal with the multiple limitations and losses, through stimulus and execution of activities which aim at sensory training and development of creativity. These actions contribute to the maintenance, for the longest possible time, of physical, psychological and social independence. The participation in these spaces enables the possibility of exchange and interaction with people of the same generation, from which, often, abandonment and loneliness are replaced by new friendships, parties, trips and meetings.⁸

In the State of *Bahia* there are groups and social centers that are kept under the administration of the Secretariat of Social Development and Fight against Poverty - *Secretaria de Desenvolvimento Social e Combate à Pobreza* (SEDES). These spaces of care for the elderly are linked to the Urban and Social Center - *Centro Social Urbano* (CSU), which are located in the capital and in the countryside. At CSU is encouraged the community participation in social-educational activities, projects for strengthening of the citizenship and social development. Such space enables, also, participation in activities in the field of sports, culture, digital

inclusion, qualification, and income generation.¹⁰

Faced with the current demand of establishing a new area of health care for the elderly population, which is beyond the usual model of outpatient and hospitals, it is considered that the social centers are examples of practices that corroborate an innovative model of care, which have been proved as alternatives, when considering the high ratio between cost / benefit and its beneficial and encouraging results for their participants.¹¹

Since 1995, the School of Nursing from *Universidade Federal da Bahia* maintains university extension programs along with the social centers of the capital, for which develops several individual and group activities aimed at promotion of health and prevention of diseases and disabilities, by means of the education in health. In this experiment, we observed a significant participation of the elderly, the lack of other health professionals for working in these spaces and the absence of researchers interested in this theme.

OBJECTIVE

- Investigate the production of knowledge about the elderly people in social centers.

METHODOLOGY

It is a bibliographical search, of type systematic review, performed between May and July 2010. A systematic review is a form of research that uses as its data source the literature on a particular theme. The steps used in the review were:

1. Definition of the question.
2. Identification of the database to be queried and definition of descriptors and search strategies.
3. Establishment of criteria for selection of articles.
4. Conduction of search on the database chosen.
5. Definition of initial selection of articles.
6. Evaluation of all articles included in the review.
7. Preparation of a summary, providing the information contained in the articles.
8. Presentation of a conclusion.¹²

At first moment of this study, we performed the bibliographical survey subsidized by the following inclusion criteria:

scientific production on the elderly people in social centers. In the period of the last 15 years, from 1995 to 2009, were used the databases below: Scientific Electronic Library Online (SciELO) and the Latin American and Caribbean Health Sciences (LILACS), by means of access to Virtual Health Library (VHL) and, also, access of online journals: *Texts on Aging* and *Revista Brasileira de Geriatria e Gerontologia*, which was added to the search by virtue of being a specific journal of the area of geriatrics and gerontology and it is not available in the databases selected for this search.

The bibliographical research in LILACS and SciELO was guided by a descriptor corresponding to Medical Subject Headings (MeSH): social and leisure centers, and the following similar words: coexistence groups, senior citizens groups, coexistence groups and elderly, social groups for seniors citizens, social centers, elderly and experience group. The selection of articles in the journal *Textos sobre Envelhecimento* and in *Revista Brasileira de Geriatria e Gerontologia* was performed by reading the available publications and verification of adherence to the study object.

As inclusion criteria were established: complete scientific productions related to the theme of the elderly people who attend social centers; articles published in the databases above mentioned, in Portuguese and Spanish. The exclusion criteria were: studies not involving human beings; articles that addressed the coexistence groups composed of people of other age groups; researches that were not focused on the thematic "social centers", with only a population sample of elderly participants of these spaces; studies that were not achieved in their full version; review articles.

From the application of the systematic review, we identified 17 scientific productions. From exploratory reading of the articles, we used a form with the following variables: work's title, author, study object, objective, methodological approach, geographical characteristics from where the study was conducted, year of publication, article type, area of production, descriptor used, database, it was carried out a cataloging of the main results, with subsequent assembly of the database of research. Then, we performed the quantitative analysis of data, which were organized into spreadsheets on Microsoft Office Excel 2007. The results were expressed by numerical representations, following the

systematic distribution by simple frequency, through absolute and percentage values in a table. The discussion on results was held under the specialized literature. The authorships of the articles were preserved.

It was not necessary to submit the research project to the Ethics Research Committee, because have been used secondary data and from public domain.

RESULTS

The results of this research showed 738 scientific papers, among these, 17 (2.3%) were related to the object of investigation. Of analysis, 58.8% were taken from the LILACS; 17.6% from SciELO; and the magazine *Textos sobre Envelhecimento* and in the *Revista Brasileira de Geriatria e Gerontologia* 11.8%, respectively.

This result shows that, even with the significant increase in life expectancy, and given the demands that emerge from this process, which require a new gaze directed to the health care, the production of scientific

papers on the elderly people in social centers still presents itself with little representation.

These findings are similar to those found in a study conducted in the databases SciELO, LILACS and CAPES portal, aiming to investigate the preventive and minimizing benefits of the aging effects, the participation of elderly in group of activities, through the analysis of scientific papers on elderly in senior citizens groups. This survey also found a number of little significance, 16 articles regarding to the study object to be investigated.¹³

With regard to the geographic origin of scientific productions selected, 100% were held by Brazilian researchers. The pattern of production, according to the Brazilian region, showed the highest concentration in the Northeast and Southeast regions of this country, represented by 35% for them both. The South and Midwest regions showed respectively, 24% and 6% of the researches; the lack of these researches was observed in the North region, as shown in the Table 1, below.

Table 1. Production of knowledge about elderly people and social centers, according to the regions of the country. Brazil, 2010.

Region	n	%
Northeast	6	35
Southeast	6	35
South	4	24
Midwest	1	6
Total	17	100

By identifying the areas of knowledge that conducted the research selected, it is shown in the Table 2 that the researchers of the Collective Health area stood out with 20% of the total of publications, followed by Nursing (16%), Psychology and Physiotherapy (12%)

them both, and Pharmacy and Occupational Therapy (8%) respectively. The category "Others" represented the following areas: Medicine, Nutrition, Speech, Physical Education, Production Engineering and Statistics, with (4%) for each one.

Table 2. Distribution of production of the knowledge on elderly people and social center, according to the area of knowledge of the researcher. Brazil, 2010.

Area of Knowledge	n	%
Collective Health	5	20
Nursing	4	16
Physiotherapy	3	12
Psychology	3	12
Pharmacy	2	8
Occupational Therapy	2	8
Others - 6 distinct areas	1	4

According to the Table 2, it is observed that most of the investigations have been developed by professionals who are part of the large area that is the Health Sciences, being presented, in just two articles, authorships from the areas of Production Engineering and Statistics. Furthermore, six papers were produced by more than one researcher and those with distinct professional activity area. This is an important

finding, given that the study of this theme is presented transversely in different areas of knowledge, which provides a more elaborated and differentiated analysis on the elderly and its social activities, from the perceptions of different investigators.

When we consider the importance of social centers in the existence of the elderly person, regarding to the favoring of social participation and active role at this stage of

life, it is essential to deepen the studies in this thematic universe in different areas of knowledge, entering in the human and social sciences, since the population aging promotes a direct interference in the organization of society as a whole, and its interdisciplinary approach is an essential tool for conduction in the practice of the full care to the elderly subject.

By analyzing the articles regarding to the methodological approach used by authors, we

found that 58.8% of the studies were conducted using a quantitative approach, 29.4% combined quantitative and qualitative methods, while 11.8% used a qualitative approach.

Regarding the current thematic trend that has been produced on the elderly people in the social centers, the studies were evaluated and their respective research objects also were categorized, as presented in the Table 3.

Table 3. Categorization of the investigation objects of the articles relating to elderly people and social centers. Brazil, 2010.

Categories of the investigation objects	n	%
Profile of the elderly people participants of coexistence groups,	4	23
Social representation of the elderly about old age and environmental education	4	23
Consumption of medicinal drugs by elderly in coexistence groups	2	12
Life habits and knowledge about disease prevention	2	12
Repercussions of the activities developed in the elderly groups	2	12
Relationship between physical activity level and health status of the elderly	1	6
Elderly coming from seniors citizens groups	1	6
Life quality	1	6
Total	17	100

In the selected articles, there was a prevalence of studies related to the profile of the elderly participants of social centers (23%). They discussed, among other matters, health conditions, epidemiologic profile, focusing on the most prevalent pathologies; lifestyle; socioeconomic status; and psychological aspects and conditions for performing the activities of the daily living.

The same percentage (23%) occurred in researches regarding social representation of the elderly about the old age and environmental education. From the investigation on this theme emerged representations of aging as synonymous of disease, as well as negative self-perception of aging process and dialogues among seniors, the environment and the possibilities of non-formal education as a stimulus for social participation of the elderly regarding the environmental aspects.

DISCUSSION

The social centers act as important tools for the old age. These spaces are characterized by their excellence, where social practices developed collaborate to the exercise of the citizenship by the elderly. These are types of place where they utilize their potentialities, where dialogue is possible, enables the realization of friendships and leisure times, and furthermore allow the restoration of positive self-image. Those aspects are, in general, not considered and valorized in the family context.¹⁴

The distribution of the works performed by Brazilian researchers may be directly related to the non-uniform location of the groups and research lines on human aging found in Brazil: 59.7% in the Southeast region; 21.5% in the South region; 13.9 % in the Northeast region; 4.9% in the Midwest region, with no record of these groups in the North region. There may be related, also, with post-graduate programs in geriatrics and gerontology in Brazil, which are prevalent in the Southeast and South regions of Brazil.¹⁵

The number of vacancies for master and doctorate courses is higher in the Southeast and South regions of Brazil, whereas they are more developed regions and have greater economic power and still remain prioritized by public policies in education and health, when compared with other regions of the country.⁴ It is worth noting the lack of research publications on this thematic in the Brazilian state of Bahia, it is a fact that demonstrates the value of this present study.

The use of methods in studies of health areas is permeated by valorization of the quantitative approach in works on frequency, incidence and prevalence of certain event, risk factors, clinical findings, diagnoses, advances in the treatment and impacts of diseases; life quality and lifestyle, among other facts investigated according to the positivist paradigm, following the mathematical establishment of the relations between cause-effect. In the qualitative approach, we could find issues concerning

meanings, psychological and social representations, perceptions, livings and experiences, cares, narrative review of the literature, among other themes anchored by phenomenology.¹⁶

In general, the findings of this study corroborate the aforementioned considerations, since correlating the methodological approach used by the works analyzed with their respective study objects, it is clear that, with regard to the participation of the elderly in the social centers, the studies that used the quantitative method investigated on the profile of elderly people focusing on health conditions, the most prevalent diseases, lifestyle, life quality of elderly; medicinal drugs consumption and life habits of these individuals.

Regarding the discussion about the human aging and the elderly across the field of the Collective Health, this is present since its inception, but, nonetheless, the thematic of aging has not had the necessary attention of public policy makers and managers. Since then, professionals that focus on aging as a field of professional practice and construction of knowledge have held a struggle, trying to rescue the social value of the elderly and the guarantee of the full citizenship for the older people.¹¹

As for the Nursing, this has been seeking discuss issues on the sociopolitical context, which interfere in several social sectors, having as one of the challenges in this process the population aging. This context, in health care for the elderly, set up itself in an area of knowledge essential for the health programs aimed at the general population, besides being a tool to transcend clinical and curative approach to the multi-professional and interdisciplinary acting.¹⁷

As human care is the essence of Nursing, it is fundamental to the practice of gerontogeriatric nursing that the concept on life quality assumes greater prominence than the concept on cure of the disease. The priority is to promote the health of the elderly, not worrying only with the pathological clinical picture.¹⁸

With regard to the professionals who conducted the researches, most of these were developed by researchers who are part of the large area of Health Sciences, being presented, in only two articles, the authorship of the areas of Production Engineering and Statistics. In addition, six works were produced by more than one researcher and those with a distinct professional area. This is an important finding, given that the study of

this theme is presented transversely in different areas of knowledge, which provides more elaborate and differentiated analysis of the elderly and their social performance, in the perception of different researchers.

When we consider the importance of the social centers to the existence of the elderly, regarding the favoring of social participation and active role at this stage of life, it is essential to deepen the studies in this thematic universe in different areas of knowledge, entering in the human and social sciences, since the population aging promotes a direct interference in the organization of society as a whole, and its interdisciplinary approach is essential tool for the conduction in the practice of the full care to elderly person.

As for the study object of the selected articles, there was a prevalence of studies related to the profile of the elderly participants of meetings in social centers (23%). They approached, among other matters, health conditions, epidemiologic profile, focusing on the most prevalent diseases, lifestyle, socioeconomic status, and psychological aspects and conditions for performing activities of the daily living.

The same percentage was of researches regarding the social representation of the elderly about old age and environmental education. From the investigation on this theme emerged representations of aging as synonymous of disease, as well as negative self-perception of aging process and dialogues among seniors, the environment and the possibilities of non-formal education as a stimulus for social participation of the elderly regarding the environmental aspects.

In general, some results of these productions showed that the participation of the elderly population in the social centers is positive and beneficial. These centers enhance the functional capacity of the elderly, favor an active aging, minimize the effects and / or the appearance of pathologies that emerge over the years.^{7,8} It should highlighted that researches on this theme still not emphasize the benefits of social centers in the lives of the elderly people, which is configured as a lack of knowledge on the thematic.

The activities performed in these groups provide the practice of autonomy and self-confidence, improvement of self-image, social participation, which are strengthen factors that enable active aging.⁸

The new demographic and epidemiological reality of Brazilian society highlights the urgency of changes and innovation in the health care paradigms for the elderly and requires new structures, with different proposals, which could provide an effective organization of the health system, so that the elderly can enjoy integrally the further years provided by the advancement of the science. It is understood that this living is most important, since it adds additional quality to the further years of life. Autonomy, participation, care, self-satisfaction, can act in varied social contexts and development of new meanings to the life in old age represent, currently, key concepts for any policy aimed at elderly people.¹⁹

The coexistence groups of elderly can be important means for that the health actions achieve a significant number of elderly.⁷ The Nursing, working in these spaces, can contribute to identification of the need for the health care of the elderly person who attends a social center.

The coexistence groups of elderly may be an important means for information on the three levels of the health care, in order to report on the prevention and control of major health problems of aging. The inclusion of social groups in campaigns and public health measures aimed at the elderly should also not be disregarded.⁷

The elderly need to feel that, much more than technique, there is compassion, respect, companionship and wisdom. Thus, health workers must be trained to care for the elderly, providing comfort, emotional support and welfare.²⁰ With the increase of life expectancy, it is necessary the qualification of services, particularly, in the training of professionals involved in the dynamics of the elderly care.²¹

The development of researches on human aging will contribute significantly to the understanding of different issues related to the elderly person, in addition, to comprehend its capability to conduct the aging process with life quality.²² These people expect that the increase in the duration of their lives comes together with a better quality, so they can remain actives.¹⁸

It is in the perspective of promoting health and a full care of the elderly that social centers should act, supporting the development of models of health care for the elderly that overcome traditional practices, considering in this process the health promotion, maintenance or restoration of

autonomy and independence of the elderly person.¹¹ This study points out to the possibility of utilization of social groups, as means to increase the life quality and the provision of services to the elderly people.⁷

CONCLUSION

This study aimed to investigate the production of knowledge about the elderly in social centers and enabled apprehending a tendency for studies of quantitative nature (58.8%), with predominance in the Northeast and Southeast regions of Brazil (35%) and in scenarios of Public Health (20%), followed by nursing (16%).

From this investigation, it could be glimpsed the low percentage of articles addressing this thematic universe, a fact which raises the need to encourage professionals and researchers from different fields of knowledge to correlate the investigation objects with new social reality: the aging of world and Brazilian population, considering the coexistence spaces for the elderly.

The results achieved by means of this research demonstrate as innovative proposal for this segment of the population its coexistence in the social centers. The outcomes highlight the feasibility and benefits of the inclusion of the elderly in these centers for the social action of these individuals and its personal improvements, with respect to the achievement of years in an active and participatory manner, where the meeting and the relationship maintained with others ones contribute, significantly, for the establishment of the life quality of the elderly.

When we consider that aging is a current and rising characteristic of world and Brazilian population, it is essential to investigate the multiple determinants and conditioning aspects of the human aging. Information about this process, on the increase in life expectancy, and the social repercussions, needs and demands, as well as being incorporated into public policies, they are necessary to be ensured through the implementation of projects and social programs that consider the new demographic profile of the elderly population, with the possibility of providing, essentially, the promotion of a qualified and satisfactory aging.

In this sense, it should include the encouraging the implementation of the social centers for the elderly person, in order to

foster greater development of these strategies in the perspective of aging with quality, autonomy, social participation, and, especially, with the development of actions consistent with the active aging and the practice of health promotion.

These reflections show an important field of action for the insertion of Nursing, which highlights as an acting profession in the health care of the elderly person, with an emphasis on health promotion and prevention of diseases and disabilities, which still has little expressive performance in these spaces

Faced with population aging and the longevity in Brazil, it is expected that this study will contribute to the possibility of a new gaze to the elderly inserted in the context of the social center, encouraging further studies on the thematic investigated, focusing on the benefits that these spaces provide to the lives of the elderly people.

REFERENCES

1. Banco Mundial. Population aging: is Latin America ready? Directions in development. Washington, DC: The World Bank [Internet]. 2011 [cited 2012 Jan 12]. Available from: http://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2011/01/07/000356161_20110107011214/Rendered/PDF/588420PUBOPU11public10BOX353816B0.pdf
2. Veras RP. Experiências e tendências internacionais de modelos de cuidado para com o idoso. Cienc saude colet [Internet]. 2012 [cited 2012 Jan 05];17(1):231-8. Available from: <http://www.scielo.br/pdf/csc/v17/n1/v17n1a8.pdf>
3. Caldas CP, Berterö CM. Living as an oldest old in Rio de Janeiro: the lived experience told. Nursing Science Quarterly [Internet]. 2007 [cited 2012 Feb 12];20(4):376-83. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/17911337>
4. Menezes TMO, Lopes RLM. Produção do conhecimento sobre idoso longo vivo: 1998-2008. Rev enferm UERJ [Internet]. 2009 [cited 2012 Feb 12];17(4):569-74. Available from: <http://www.facenf.uerj.br/v17n4/v17n4a20.pdf>
5. Tavares DMS, Côrtes RM, Dias FA. Qualidade de vida e comorbidades entre os idosos diabéticos. Rev enferm UERJ [Internet]. 2010 [cited 2012 Jan 10];18(1):97-103. Available from: <http://www.facenf.uerj.br/v18n1/v18n1a17.pdf>
6. World Health Organization. Active ageing: a policy framework. Spain: WHO; 2002.
7. Borges PLC, Bretas RP, Azevedo SF, Barbosa JMM. Perfil dos idosos frequentadores de grupos de convivência em Belo Horizonte, Minas Gerais, Brasil. Cad Saúde Pública [Internet]. 2008 Jan [cited 2010 Jan 05];24(12):2798-808. Available from: <http://www.scielo.org/php/index.php>.
8. Menezes TMO. Ser idoso longo vivo: desvelando os sentidos do vivido [tese de doutorado]. Salvador (BA): Universidade Federal da Bahia; 2009.
9. Capitanini MES. Solidão na velhice: realidade ou mito? In: Neri AL, Freire AS, organizadoras. E por falar em boa velhice. Campinas (SP): Papyrus Editora; 2000. p. 69-80.
10. Secretaria de Desenvolvimento Social e Combate à Pobreza- SEDES [Internet]. [cited 2010 Feb 08]. Available from: <http://www.sedes.ba.gov.br/sitesedes/about/>.
11. Veras RP, Caldas CP. Promovendo a saúde e a cidadania do idoso: o movimento das universidades da terceira idade. Ciênc saúde coletiva [Internet]. 2004 [cited 2010 July 04];9(2):423-32. Available from: <http://www.scielo.org/php/index.php>.
12. Sampaio RF, Mancini MC. Estudos de revisão sistemática; um guia para síntese criteriosa de evidência científica. Rev Bras Fisiot [Internet]. 2006 [cited 2012 July 13];11(1):83-9. Available from: <http://www.scielo.br/pdf/rbfis/v11n1/12.pdf>
13. João AF, Sampaio AAZ, Santiago EA, Cardoso RC, Dias RC. Atividades em grupo: alternativa para minimizar os efeitos do envelhecimento. Textos Envelhecimento [Internet]. 2005 [cited 2011 Jan 05];8(3):397-410. Available from: <http://revista.unati.uerj.br/scielo.php>.
14. Araújo LF, Coutinho MPL, Saldanha AAW. Análise comparativa das representações sociais da velhice entre idosos de instituições geriátricas e grupos de convivência. Psico [Internet]. 2005 [cited 2011 Ago 22];36(2):197-204. Available from: <http://revistaseletronicas.pucrs.br/ojs/index.php/revistapsico/article/viewFile/1390/1090>
15. Prado SD, Sayd JD. A pesquisa sobre envelhecimento humano no Brasil: grupos e linhas de pesquisa. Ciênc saúde coletiva [Internet]. 2004 [cited 2009 Oct 01];9(3):

763-72. Available from:
<http://www.scielo.org/php/index.php>.

16. Turato ER. Métodos qualitativos e quantitativos na área da saúde: definições, diferenças e seus objetos de pesquisa. Rev Saúde Pública [Internet]. 2005 [cited 2010 July 26];39(3):507-14. Available from:
<http://www.scielo.org/php/index.php>.

17. Veiga KCG, Menezes TMO. Produção do conhecimento em enfermagem: a (in) visibilidade da atenção à saúde do idoso. Rev esc enferm USP [Internet]. 2008 [cited 2011 July 26];42(4): 761-8. Available from:
<http://www.scielo.org/php/index.php>.

18. Silva MG, Boemer MR. Vivendo o envelhecer: uma perspectiva fenomenológica. Rev Latino Am Enferm [Internet]. 2009 [cited 2012 July 13]; 17(3): Available from:

http://www.scielo.br/pdf/rlae/v17n3/pt_16.pdf

19. Veras R. Fórum. Envelhecimento populacional e as informações de saúde do PNAD: demandas e desafios contemporâneos. Introdução. Cad Saude Pública [Internet]. 2007 [cited 2010 July 26]; 23(10):2463-8. Available from:
<http://www.scielo.org/php/index.php>.

20. Furuya RK, Birolim MM, Biazin DT, Rossi LA. Integralidade e suas interfaces no cuidado ao idoso em unidade de terapia intensiva. Rev enferm UERJ [Internet]. 2011 [cited 2011 June 30];19(1):158-62. Available from:
<http://www.facenf.uerj.br/v19n1/v19n1a26.pdf>

21. Macêdo ARC, Alves DS, Silva Junior FJV da, Rocha FCV, Carvalho PMG. Evaluation of daily life activities in primary care after falls, in elderly persons. Rev enferm UFPE online [Internet]. 2012 [cited 2012 Mar 20];6(3):619-26. Available from:

http://www.ufpe.br/revistaenfermagem/index.php/revista/article/view/2289/pdf_1092

22. Lima TAS, Menezes TMO. Investigando a produção do conhecimento sobre a pessoa idosa longeva. Rev Bras Enferm [Internet]. 2011 [cited 2012 Jan 12];64(4):751-8. Available from:
http://www.scielo.br/scielo.php?script=sci_pdf&pid=S0034-71672011000400019&lng=pt&nrm=iso&tlng=pt

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