

## **Characteristics and Challenges of Population Aging: A Bibliographic Review**

Elaine Cristina da Silva<sup>1</sup>, Maria de Fátima Quintal de Freitas<sup>2</sup>

<sup>1</sup>(Post Graduate Program in Education / Federal University of Paraná, Brazil)

<sup>2</sup>(Post Graduate Program in Education / Federal University of Paraná, Brazil)

Corresponding Author: Elaine Cristina da Silva

---

**Abstract:** *This article aims to present the characteristics and challenges of population aging in Brazil, indicated in the scientific literature of the years 2000 to 2012. A review of the bibliography was carried out in the online sciELO database comprising the years 2000 to 2012. Some findings point to a prevalence of studies in this field related to: understanding of old age in its biological, physical and psychological aspects; the social role of the elderly; challenges and possibilities of coping with human aging and its personal and social impacts. The different approaches that study this phenomenon have considered it with a heterogeneous dimension and result of several interrelated aspects, They point, therefore, to the need for more research in the field of aging in which these social actors are directly participants of research in this area.*

---

Date of Submission: 26-02-2019

Date of acceptance: 12-03-2019

---

### **I. SOME ASPECTS ON THE PHENOMENON OF POPULATION AGING**

Population aging is a phenomenon with greater visibility in recent decades, partly due to the increase in life expectancy at birth and the decrease in fertility rates. The Brazilian population configuration shows a continuous decrease of the young people along with the increase of the life time of the older ones. This phenomenon has been consolidating in Brazil and in the world, and has generated profound changes in daily life and established relationships, announcing new interactive and intergenerational scenarios marked by the predominance of more active age groups today, than decades ago<sup>1,2,3,4,5,6</sup>. Each year, augmented population aging contributes to a reversal in the age pyramid, where the youth base has declined, resulting in the oldest population base for the years to come<sup>1,2,4,5,6,8,9</sup>.

Research shows that today there are 600 million elderly people in the world that will reach 2 billion in the year 2025. Brazil will occupy the sixth place in the ranking of countries with the largest number of elderly population, reaching about 34 million people<sup>1,2,3</sup>. Data from the Demographic Census conducted in Brazil in 2010 and the National Household Sample Survey - PNAD<sup>4</sup> indicate that the country, at that time, has a population of about 21 million people aged 60 years or more, besides presenting a fertility rate below the level of population replacement required to guarantee the replacement of generations, which in the case of Brazil is 2.1 children per woman. Considering these aspects, together with the effects on the longevity of advances in technology, especially in the area of health<sup>7</sup> it is observed that the elderly group has occupied an important space in society in the last decades, whether in the perspective of public policies, or in the dimension of interpersonal relationships that take place in more private spaces. This indicates a series of demands and demands in terms of public health policies and active insertion directed at the elderly in today's daily life.

The representations that understand old age as a period of life considered unproductive and devoid of goals have been altered in the last decades, based on several studies and studies. There is a contemporary tendency to consider old age as a heterogeneous experience, determined and built socially and historically<sup>6,7,9,10,11</sup>. Understanding old age seems to be fundamental for society and the various public policy programs to consider aging as well as a process in which the effects can positively reach the various generational strata in an objective and subjective way, pointing to the possibility of building networks of collective coexistence, which strengthen the educational history of the generations and the social and scientific memory of society. It also means giving voice to the elderly<sup>3,7,9,12,13</sup> within a condition of active constructors of the social history of their times guaranteeing at least the cumulative character of the psychosocial knowledge present in daily life, to be transmitted intergenerationally.

This paper aims to reflect on current challenges and possible coping strategies in the process of human aging, based on the theoretical-empirical productions published in specialized publications in recent years. For this, a bibliographic survey was carried out regarding the aging process, and a review of the scientific literature was carried out in the form of articles published in the years 2000 to 2012, in Brazil and Latin America, in the

database of the Scientific Electronic Library Online - sciELO. The various subjects - theoretical and empirical - addressed in the articles were submitted to a content analysis with a posteriori categories, which allowed the systematization, comparison and analysis of the prevalent themes regarding the ways of understanding the aging process, in this period. In the following sections will be presented the methodological proposal of identification, selection and analysis of the bibliographic material; the thematic categories resulting from this analysis; the different comprehensive frameworks that aging has been receiving in the scientific literature; the social places assigned to the aging person; the challenges that emerge from the relationship between aging and society; and some reflections for the contemporary moment. In the last section, there is also the reference of all the articles that served as basis for this bibliographical review, and which are indicated in each moment in which allusion is made to its content.

## II. IDENTIFICATION AND SELECTION OF ARTICLES ON AGING

In the period between 2000 and 2012, 1,186 volumes / editions of various scientific journals were consulted one by one, ranging from two to twelve published numbers per year. The journals consulted (2,285) were distributed according to the classification of the National Council of Scientific and Technological Development - CNPq, namely: 681 in the area of Health Sciences; 1,317 in Human Sciences; 150 in Social Sciences and 83 in Applied Social Sciences.

In the first survey 152 articles were found, which in the end were selected 95 articles. In this second assessment, we excluded publications that involved individuals under 60 years of age and / or publications that referred to clinical trials, pathologies or reports of specific physical activities. In these 95 articles were sought methodological and conceptual comparisons between reports and, later, the articles were grouped following the common theme among them.

Although one article could address several themes, each article was inserted in the category where there was a prevalence of subjects related to the central topic expressed in the thematic category. Thus, for the purposes of classification, the central topic, prevalent or frequent in each selected, read and analyzed article was prioritized. Eleven main themes were identified, as shown in table 1, distributed in order of frequency in the themes: Quality of Life (with 15 articles), International Experiences (14), Gerontology (12), Functional Capacity (11), Social Role and Work (10), Education and Technology (10), Psychological Studies (7), Demographic Studies (6), Activities, Physical and Leisure (4), Coexistence Groups (3), and Institutionalized Elderly.

**Table nr 1: Main themes presented in articles published in specialized journals**

Categories	Number for articles
Quality of Life	15
Internatiopmal Experiences	14
Gerontology	12
Funcional Capacity	11
Social Role and Work	10
Education and Technology	10
Psychological Studies	7
Demographic Studies	6
Activities, Physical and Leisure	4
Coexistence Groups	3
Institutionalizes Elderly	3
Total	95 articles

In the theme "Quality of Life" studies addressed the quality of life in the elderly's own perception, socio-sanitary conditions, diseases related to life expectancy, social factors and the meaning of life for them <sup>12,14,15,16,17, 18,19,20,21,22,23,24,25</sup>. These studies began in 2005 and gained more intensity in 2008, with an average of three publications per year. Here, there was a predominance of qualitative studies about the participants' perception.

The articles grouped in "International Research and Experiences" focused on studies that use information from different countries <sup>26,27,28,29,30,31,32,33,35,35,36,37,38</sup>. Among these countries are Mexico, Colombia, Cuba, Barbados, Spain, Sweden, France, Portugal, Italy and Canada. Concerns about population aging seem to go beyond the borders and are the subject of discussions, reflections and planning of countries, especially Latin American countries like Mexico, which stood out with the largest number of publications in this period.

In "Gerontology" were grouped studies on science, technique, knowledge and reflections on old age <sup>39,40,41,42,43,44,45,46</sup>. Although there were a large number of lines of research and researchers on the subject of aging, no production was found that addressed psychosocial aspects from the perspective of community social psychology and its relation with education, considering it as a pedagogical way of formation human. related to aging.

In the "Functional Capacity" category, the identified work<sup>47,48,49,50,51,52,53,54,55,56</sup> dealt with the developmental tasks of the elderly adult; different levels and the prevalence of functional disability; definitions and forms of measurement (scales, dimensions and classifications) of the functional disability that is being used; cognitive performance of healthy elderly with low schooling; dementia or depression; modifications in the profile of some skills; memory and metamemory; age well, even in the presence of vulnerabilities; situations of dependence and reduced functional capacity; difficulties in the instrumental activities of the daily life of the elderly, directly related to the possibility of a more efficient community participation. It was noticed a predominance of quantitative studies aimed at the measurement of the different degrees of (in) functional capacity. Although not the authors' proposal, some considerations about possible interventions and / or strategies to cope with these dysfunctions, or even the positive dimensions of their antagonism, are not indicated, reinforcing the descriptive character of the measures presented in the articles. There is also a growth of these publications from the year 2008, with seven articles from the total selected for the period from 2000 to 2012.

In the category "social role and work" were collected papers that addressed the meaning of the aging process in the labor market; the construction of memory and the identity of retired workers from narratives of life histories; the perception of workers about the changes they experience in old age, in a context of social transformations; the use of time and everyday life; the characteristics of social support and the tasks performed by adults aged 50 years and over<sup>57,58,59,60,61,62</sup>. It was observed that these publications were regular since the year 2000, with greater presence in 2010. The publications reveal appreciation of work in life and show the difficulties encountered when it ceases to exist, suggesting coping strategies to feel useful and valued.

In the category "Education and Technology" the articles on challenges and contributions of the use of technologies and the role of education for the elderly were classified<sup>63,64,65,66,67,68,69,70,71,72</sup>. The scientific productions found since the early 2000s seem to reinforce the importance of lifelong education as a coping strategy for the elderly.

In "Psychological Studies", work on strategies and instruments for coping with the aging process, social representations, aging and development was gathered; resilience and the relationships between social psychology of aging with social psychology and developmental psychology. It was observed that these articles are more recent, as of 2009 focusing on the theme of resilience<sup>73,74,75,76,77,78,79</sup>.

"Demographic studies" was the theme of the category that grouped studies on the profile of people 60 years of age or older; on the new Brazilian demographic and epidemiological reality; the social and health consequences of aging; the challenges to public policies and the fiscal deficit of social security associated with the rapid aging process of Brazil<sup>3,4,80,81,82,83,84</sup>.

"Physical Activities, Health and Leisure" was the third thematic category that gathered the works on the social value, the emotional and health aspects involved in the physical activities and leisure of the elderly<sup>85,86,87,88</sup>. Four papers were identified that were published between 2003 and 2009. Different from the first two themes, the articles in this category appear from the year 2000.

The studies on "Coexistence Groups" covered mainly the activities carried out by the elderly and aspects related to the physical, social, psychological and economic dimensions<sup>89,90,91</sup>. These publications emphasized the participation of people in living groups, although the analyzes have, in the end, focused on the individual.

Articles in the category "Institutionalized Elderly" addressed the process of institutionalization; the life of the elderly within institutions and coping strategies<sup>92,93,94</sup>. The studies were of a qualitative nature and focused their analyzes on the singularity and subjectivity of each individual.

### **III. UNDERSTANDING AGING IN SCIENTIFIC PUBLICATIONS**

The review of these articles published from 2000 to 2012 made it possible to identify the main characteristics and challenges related to population aging, highlighting the heterogeneous character of this process involving many biopsychosocial factors.

The age transition of the world population is approaching a large-scale aging, the explanation of which is due to the decrease in fertility and the increase in life expectancy in the last decades.

Carvalho and Garcia<sup>81</sup> point out that since the 1960 there has been a very rapid and widespread fall in fertility in the country, and have warned of a process of aging of the population, faster and with deeper changes than in the first world countries. For example, Cesar *et al.*<sup>80</sup> found that in Brazil, people aged 60 years or older living in two poor municipalities in the north and northeast had inadequate housing conditions, access to insufficient goods and services, and high morbidity.

The phenomenon of aging as a concept presents a duplicity of interpretation and / or intention, Silva<sup>41</sup> identifies the category "third age" on the one hand, as the identity that represents an innovation and as such, it diversifies the possibilities of affiliation of the subjects and another; as the same corroborates for models and ideals that have become hegemonic in contemporary times. In this respect, one perceives a capitalist or even prejudiced intention of not wanting to call the old man an old man and from that, to create other terminologies

that seem to "masquerade" or reinforce the age prejudice instead of demystifying it. The researches point to the emergence of new terminologies in the attempt to defend the end of the dichotomy: old age = (equal) disease. Empirical studies such as de Santos et al.<sup>42</sup> point out that increasing age does not necessarily mean getting sick, because with preventive measures the elderly can be maintained in healthy conditions in the physical and cognitive domains, maintaining long-term autonomy of life. Also, in the presence of dysfunctions, early diagnosis and intervention can provide a better quality of life for the patient and his / her family.

The understanding about aging is pointed out by Moreira and Nogueira<sup>43</sup> as an ambiguous and also stigmatized experience, insofar as it means a negative stereotype, along with the refusal to bear a mark that depletes or excludes: being old. It seems that aging in a setting marked by the cult of youth and beauty imposes on individuals an aesthetic standard as ideal, transforming an "inevitable" biological phenomenon into a cultural phenomenon of the order of "undesirable." As a social characteristic, the aging process is related by Gorz<sup>46</sup> in three dimensions, namely: youth as postponement of responsibilities arising from social determinations; the relational formation of identity with reference to the introjection of a social role, and the alienating and inseparable perspective of being based on the adult world.

Understanding and discussion about aging is gaining increasing visibility as demographic transition challenges become one of the world's most pressing challenges, becoming a policy theme in both developed and developing countries<sup>84</sup>. The discussions point to the urgency of changes and innovations, with emphasis on the health care paradigms of the elderly, highlighting as key concepts, for public policies, autonomy, participation, care, self-satisfaction and the possibility of the elderly to act in different social contexts<sup>4</sup>. Studies<sup>3</sup> also suggest that the Brazilian public policy agenda prioritize the maintenance of the functional capacity of the elderly, health conditions monitoring, preventive and differentiated health and education actions, qualified care and multidimensional and integral attention. In the financial framework, Wong and Carvalho<sup>82</sup> warned about the transition of the age structure, in the defense that, if the current per capita transformation of the government is maintained, the difference between revenues and expenses will increase and will cause an unbearable deficit mainly in the social security system. The crisis of the social security system is increasingly present in the public policy discussions on the eminent labor and social security reforms that are being implemented in Brazil and generate a division of opinion.

As for the understanding of aging, Kuchemann<sup>45</sup> highlights another challenge to be overcome: the model that elects women as the sole caregiver. Stressing the need to explore the possibilities of a model that allows an aging with citizenship, involving the performance of the family, the state and other actors of society.

In the education aspect, the challenge to be overcome is presented by Marques and Pachane<sup>67</sup> in defending a necessary rupture of the image of the pedagogue and education in the society concerned with childhood. Thus, to broaden the discussions regarding the elderly, including in the curriculum of thematic teacher training and discussions about the elderly.

#### **IV. SOCIAL "PLACES" ASSIGNED TO THE AGING PERSON**

Sousa<sup>95</sup> in an online portal "World Education" defines that, social status is linked to the different attributions that a subject can occupy within the society in which he lives. Already the concept social role appears precisely to explain what the rights and duties that this subject has to occupy a certain social status. From this definition we ask: What then was the status and social role of the elderly in society?

The articles researched in the literature review address some indicators that can define this status and social role of the elderly, covering: (a) Status and Social Role; (b) Occupation of Time / Free Time; (c) Social Relationships; (d) Education and Schooling; (e) Patterns of Beauty; (f) Expectation and Quality of Life.

The first indicator refers to work. In this perspective, Souza et al.<sup>57</sup> argue that capitalist societies overestimate their presence in the lives of human beings and that their absence as in retirement and / or unemployment, compromises the quality of aging. This is due to the lack of individual, social and economic skills and conditions to incorporate and prioritize other activities and values in their lives, that is, the difficulty in changing or (re) signification of a new social status / role.

The second indicator relates to free time occupation. In her study, Doimo *et al.*<sup>59</sup> found that the majority of the time spent by the surveyed women was for domestic activities, personal care and leisure time was devoted to passive leisure such as watching television, with little involvement in physical activities. On the other hand, Santana et al.<sup>85</sup> in his research on the occupation of time with physical activities identified three dimensions related to the social representations attributed by the elderly: psychological, social and biophysical, having the term happiness as the most cited in word evocations. In this study, physical activity was considered as "life with more health and quality". In relation to the leisure time occupation with leisure, Gaspari and Schwartz<sup>86</sup> revealed the recurrence of "positive growth" as the interpersonal relationship and mutual respect, contemplation, the sense of harmony with nature as a result of their research. Another reality present in the field of aging is the experience of the time of asylum elderly individuals, in this scenario, Pavan *et al.*<sup>92</sup> revealed that

half of the women surveyed chose to live in asylum, while others considered it as an "old man's deposit". The leisure and the time of these elderly women consists of domestic activities to "help pass the time".

The third indicator refers to social relations, in which Pinto *et al.*<sup>60</sup> identifies high social interaction scores in male elderly and in those with a higher level of schooling. As well as, smaller social support in women, illiterate, widowed or single and those with lower incomes. Carneiro *et al.*<sup>21</sup> reported that the elderly in asylum have lower social skills repertoire, lower social support network and worse quality of life. Resende<sup>41</sup> indicates that the greater the age, the greater resilience for ideas of independence and determination; the longer the participation time in groups of coexistence, the greater vitality; the higher the perception of social support, the greater the number of positive affects experienced; the more positive feelings they present, the higher the level of satisfaction with life; as they experience negative affects, they become more resilient. Gamburgo and Monteiro<sup>93</sup> reveal the early institutionalization and interdependence between the reasons for voluntary isolation and the situation of abandonment.

The fourth indicator refers to education, which is also present in other indicators cited here, regarding the trend of more precarious conditions of quality of life and independence of those elderly subjects, whose education rates are zero or below 5 years. Peres<sup>69</sup> in her research points out that, illiteracy affects the older population, black and brown, of female and rural residents. It also emphasizes the inexistence in Brazil of educational policies aimed at old age and illiteracy. Argimon and Stein<sup>47</sup> identified in their studies a decrease in cognitive performance with increasing age, with the lowest variation resulting from the factors of greater number of leisure activities and more years of schooling. Borges *et al.*<sup>89</sup> show that the majority of the participants in a cohabitation group are women, widows, with primary schooling, average age of 71.66 years, attending group for more than six years, evaluating their health as good, have at least a disease, present income of up to a minimum wage and the minority presents depressive symptoms. The low participation of men in educational activities and coexistence groups is observed by Coutinho and Acosta<sup>91</sup> arguing that this is due to the lack of interest in the practices, the little stimulating (repetitive) classes and the thought that while they can do activities they like do not see need to perform physical exercises.

The fifth indicator is associated with the idealization of a beauty pattern, Ludgleydson *et al.*<sup>76</sup> notes that the elderly idealize aesthetic patterns linked to beauty and that these are aggravated by the loss of physical strength and energy decay. Fernandes and Garcia<sup>18</sup> point out that some elderly women see their bodies as fragile, modified, sick and ugly, bringing them negative experiences. Others demonstrate satisfaction with their corporeal dimension, perceiving themselves still beautiful and preserved. As for the determinants according to them: there are aspects such as maternity, overload of domestic work and conjugal violence. Araújo *et al.*<sup>94</sup> identifies and compares social representations of old age in two antagonistic poles: on the one hand, experiences related to earnings and on the other to the inherent losses of old age. Thus, it may be suggested that the social representations of old age still comprise a negative connotation associated with the old-disease binomial.

The sixth indicator refers to the expectation and quality of life, Lima *et al.*<sup>14</sup> evaluates that the worst health-related quality of life scores are from older, younger, lower income, lower income schooling and evangelical religion. Banhato *et al.*<sup>96</sup> indicate that there are significant differences in cognitive assessment according to age, and thus, a better performance in verbal and executive skills. In this study, it is considered that schooling (6.4 years) influences performance. The results of this research also show that the life expectancy of men at age 60 was 19 years, 39% with mild functional disability, 21% with moderate functional disability and 14% with severe functional disability. At the same age, the life expectancy of the women was 22 years, 56% with mild functional disability, 32% with moderate functional disability and 8% with severe functional disability. In this same perspective, Romero *et al.*<sup>15</sup> show that the proportion of lost years of healthy life increases significantly with age, although women's life expectancy is higher than that of men, they live proportionally less years in good health. Moreover, Campolina *et al.*<sup>17</sup> revealed in their study that the increase of these morbidities concomitant with the increase in age significantly influence the various domains of the quality of life of the elderly.

For a successful aging, Lima *et al.*<sup>14</sup> defend the appreciation of the elderly's own perception and, even in the presence of comorbidities and reduced functionality, it is possible to identify elderly people with high levels of satisfaction and good quality of life. In this perspective too, Irigaray and Trentini<sup>19</sup> point to an association between quality of life and positive affects, health and independence, which were considered as positive factors, besides positive affections, health and good financial conditions, considered as promoters of well-being. As social factors, health and family problems appear to be detrimental to well-being. Thus, it is observed that quality of life seems to be determined by multiple factors, which include physical, psychological and social aspects.

## V. CHALLENGES BETWEEN AGING AND SOCIETY

The large-scale population aging consequently results in innumerable challenges posed by age and society to the long-lived ones themselves, but also to society as a whole with regard to the necessary structural change in the face of this new reality.

Some of the articles researched attempt to present some of these strategies of confrontation, identified in the spheres of:

- (a) Public Policies;
- (b) Psychological Interventions;
- (c) Social Support;
- (d) Individual strategies and;
- (e) Education, Physical Activities and Technology;
- (f) Coping strategies offered to the Aged Asians.

On the strategies that refer to public policies, Fernandes<sup>83</sup> argues that the debate between the family, intergenerational solidarities and social policies in the face of this new challenge of population aging is the way to find better solutions and, diversity of problems. Already, Patricio *et al.*<sup>13</sup> argue that longevity depends on the clash between harmful factors that kill life and healthy factors that generate and preserve life. On these factors, according to the author's lack of social control and the state make the vision of the future pessimistic. In addition, Laranjeira<sup>62</sup> points out the need to construct positive images about aging, in the fight against the traditional models of decline and the demystification of old age. This being possible through the enhancement of the complexity and heterogeneity that can be anchored in the paradigms of citizenship and social plurality, when the new strategies aimed at the construction of a new era on old age are applied.

As a proposal of psychological intervention, Maia *et al.*<sup>40</sup> indicates the proposal of a clinic with old people that starts from the interest in this stage of life, in relation to the presence of a moralizing discourse and hegemonic modes of subjectivation that qualify it as the rotten band of life.

Most publications point to and defend education, technology and physical activities as the main strategies for coping with the challenges posed by aging. On technologies, Miranda and Farias<sup>63</sup> argue that the Internet for the elderly is an effective means of disseminating information about health and physical activities. As well as, it is considered a form of leisure and an important tool for prevention of social isolation or depression by stimulating brain activity. The appropriate use of the network contributes positively to the well-being of the elderly by their informative and playful profile as well as by the learning process. In the same vein, Padilla and Padilla<sup>64</sup> point out that technology, information and communication help promote family and social integration, personal autonomy and quality of life. And yet the use of the internet has consequences for the digital citizenship of the elderly in the expansion of the internet<sup>65</sup>.

Specifically referring to education, Unicovsky<sup>66</sup> argues that it is the main means to overcome challenges imposed on the elderly by age and society, through a continuing education, educational programs have enabled the elderly to update, acquire knowledge and participate in activities cultural, social, political and leisure activities. Still on education, we note the significant presence of Open Universities in the Third Age, Alencar and Carvalho<sup>64</sup> discuss the contributions from the Piauí experience at the University Open to the Third Age (UNATI) are fundamental for promoting the quality of life of those who they grow older. Irigaray and Schneider<sup>65</sup> indicate a difference between depression and the time of participation in the Open University of the Third Age of the Federal University of Rio Grande do Sul (UNITI), revealing that it is possible to age well, with absence of depressive symptomatology and that participation in an open university for old age brings improvements to the elderly. The following year, Irigaray and Schneider<sup>72</sup> suggest that UNATI's participation time of more than one year acts as a possible protective factor against depression in the elderly and assists in the perception of a better quality of life in the physical, psychological and social domains. International data (Mexico) also reinforce the importance of education as a coping strategy, in which Carmona-Valdes and Ribeiro-Ferreira<sup>32</sup> indicate a positive predictive relationship of social activities and education with the personal well-being of the elderly. Thus, Melo *et al.*<sup>23</sup> emphasizes that educational work has as challenge the integration of dispersed knowledge of human and biological areas to popular knowledge, presupposing new interfaces of action in the health care model. On the other hand, considering that the average schooling of the Brazilian elderly varies between 5 and 6 years, we ask: what is the share of the elderly population and the socioeconomic level that these opportunities are reaching? Where and how are these educational offerings being made?

Regarding social support, Lima and Coelho<sup>77</sup> indicate that factors such as social participation, generativeness and family relationships influence the construction of a successful aging. On the other hand, factors such as stagnation and absence of social involvement seem to contribute to the appearance of psychopathological symptoms. This thesis is reinforced by Santana and Chaves-Maia<sup>85</sup> who demonstrate the concept friendship related to risk factors such as loneliness, depression, immobility and suicide. Silva and Gunther<sup>61</sup> conclude in their study that social expectations, social support and schooling are extremely important factors to offer resources in optimizing and compensating for successful aging.

Individual strategies for coping with the adversities of aging were identified in Beckert *et al.*<sup>25</sup> by reinforcing the importance of cognition both in maintaining physical care and in the opportunities for the elderly to acquire new information and skills in the environment in which they live. Or even in Teixeira and Neri<sup>22</sup> in the defense that successful aging is similar to the organizational principle that can be achieved by establishing realistic personal goals in the course of life.

Regarding the coping strategies of asylum elders, Pavan *et al.*<sup>92</sup> identify: religious rituals, artisan activities and walks.

It should be noted that the categories presented as coping strategies are not exclusive, since one perceives that one complements or integrates the other. It is also important to point out that although scientific publications point out a number of coping strategies to the challenges of aging, they are still insufficient in view of the complexity involved in this phenomenon and that other more specific strategies that are not addressed in this study (economic, for example).

## V. FINAL CONSIDERATIONS

It is observed that after the year 2000 there was an increasing number of publications and research in the field of human aging with its peak around the years 2010/11. This indicates a concern for the future of society that, in a few decades, will be living with population majorities of older people.

The results of the bibliographical review are mostly derived (77 articles / 81%) of qualitative productions, from which emerged reflections on the person who grows older in contemporary society. These concerns reveal a particular understanding of subjectivity, considering the person who grows old as a product and producer, not only in his personal history, but also in the history of his society and, effectively and potentially, a participant in it. In this sense, it becomes imperative to "know the individual both in what is specific to him" of his life and close interpersonal relations, "as in that he is a group and social manifestation" (p.19)<sup>97</sup>, expressing, through its subjectivity in everyday life, the project of humanity that emerges from its sociopolitical context<sup>98 99</sup>. It is considered that an analysis on the concepts of old age and the challenges indicated can contribute to a better understanding of the psychosocial reality of aging. This would help to avoid practices of conformism and naturalization of people's precarious life and reduction of alternatives for community living, often aggravated by the fragility of their health, by the reduction of the psychosocial support network and by the lack of economic and educational conditions.

The current scenario of rapid population aging imposes on society challenges and discussions regarding the construction of "solidarity, egalitarian, and ethically human relations"<sup>98</sup> (p. 73) and respect for human rights, as defended in various disciplinary fields, including community social psychology and popular education. We can therefore think of the possibility of carrying out research on the subject of aging with a view to a knowledge of the psychosocial dimensions of people who grow old and who participate as producers and products of their historical and social contexts<sup>97</sup>. In this direction, data from the bibliographic review in the selected period allowed us to perceive that many studies address the difficulties, fragilities or lack of some aspects that influence this period of life. Similar to the contemporary conception of childhood in relation to the elderly<sup>100</sup>, little is said about experiences in which a condition of "less" or "being in need of" is not taxed, or incapacity for something. In other words, it seems that because he is old, he has lost his history, his experiences, and almost his life, in such a way that few examples or experiences or cases of "active and participating elders" become object of scientific study considered relevant. According to the principles of community-based social psychology in Latin America, and emphasizing the construction of networks of community coexistence and collaborative psychosocial support, little has been explored in published research on these dimensions in everyday life and, in the perspective of community work<sup>101</sup>, are known to contribute to the strengthening of active and community participation in people's daily lives, regardless of age or gerontological factor.

It was also observed the need for research and productions about the main psychosocial concerns present in the articles, such as: effects of change in population composition, (in) functional capacity of older people, vulnerability, physical and psychological limitations, socio- early institutionalization, asylum process, negatively represented identity of old age, low level of schooling, low participation of men in groups, overvaluation of work in human life, leisure as a factor of depression in the elderly, as well as the urgency of changes and innovations in policies public<sup>8</sup>.

Associated with the principle of considering the daily lives of people in their psychosocial dimensions of participation and building community networks, it is also considered that education plays an important role in facing the challenges posed to people, and in particular, to the elderly. Education can, in this perspective, take the place of identity building as work occupies in people's lives, giving them other places and social values, especially when they "move away" from work by retiring or being seen as not being able to / ought to exercise it more<sup>102</sup>. Education would have the role of continuously recovering the historical construction of experiences and learning, allowing older people to be educators in an intergenerational process as well. As Paulo Freire

argued: "there are possibilities for different tomorrows. The struggle is no longer limited to delaying what will come or securing its arrival; we must reinvent the world"<sup>103</sup>(p.240).

## REFERENCES

- [1]. Velasco CG. Aprendendo a envelhecer – À Luz da psicomotricidade. São Paulo: Phorte, 2006.
- [2]. Cunha RRS. Um Estudo Psicossocial sobre a vida e as Aspirações de Mulheres com mais de setenta anos na cidade de Curitiba [Tese] Curitiba (PR): Universidade Federal do Paraná, 2008.
- [3]. Veras R. Envelhecimento populacional contemporâneo: demandas, desafios e inovações. Rev. Saúde Pública, 2009, v.43, n.3, pp. 548-554.
- [4]. Veras R. Fórum. Envelhecimento populacional e as informações de saúde do PNAD: demandas e desafios contemporâneos. Introdução. Rev. Caderno Saúde Pública, 2007, v.23, n.10, pp.2463-2466.
- [5]. Censo Demográfico 2010. Características da população e dos domicílios: resultados do universo. Rio de Janeiro: IBGE, 2011.
- [6]. Koehler ECS. Dimensões educativas e psicossociais da participação de idosos em programas de qualidade de vida: um estudo psicossocial sobre o ingresso e permanência [dissertação]. Curitiba (PR): Universidade Federal do Paraná; 2014.
- [7]. Neri AL, organizador. Desenvolvimento e Envelhecimento: Perspectivas biológicas, psicológicas e sociológicas. Campinas, SP: Papyrus, 2001.
- [8]. Beauvoir S. A Velhice. Rio de Janeiro: Nova Fronteira; 1990.
- [9]. Neri AL. Envelhecer num país de jovens. São Paulo: Unicamp, 1991.
- [10]. Debert GG. A antropologia e o estudo dos grupos e das categorias de idade. In: Barros, MML, organizador. Velhice ou terceira idade? Rio de Janeiro: FGV. p.49-69, 1998.
- [11]. Debert GG. A reinvenção da velhice: socialização e processos de reprivatização do envelhecimento. São Paulo: Fapesp. 1999.
- [12]. Lima MP. Gerontologia Educacional: Uma pedagogia específica para o idoso – Uma nova concepção de velhice. São Paulo: Ltr, 2000.
- [13]. Patrício KP, Ribeiro H, Hoshino K, Bocchi SCM. O segredo da longevidade segundo as percepções dos próprios longevos. Revista Ciência & Saúde Pública, 2008, v.13, n.14, pp 1189-1198.
- [14]. Lima MG, Barros MBA, César CLG, Goldbaum M, Carandina L, Ciconelli RMa. Qualidade de vida relacionada à saúde em idosos, avaliada com o uso do SF-36 em estudo de base populacional. Revista Caderno de Saúde Pública, Rio de Janeiro, 2009, v.25, n.10, pp. 2159-2167.
- [15]. Romero DE, Leite IC, Szwarcwald CL. Expectativa de vida saudável no Brasil, uma aplicação do método Sullivan. Caderno Saúde Pública, Rio de Janeiro, 2005, v.21, suppl.1, pp.S17-S18.
- [16]. Pereira RJ, Cotta RMM, Franceschini SCC, Ribeiro RCCL, Sampaio RF, Priore SE, Cecon PR. Influência de fatores socio-sanitários na qualidade de vida dos idosos de um município do sudeste do Brasil. Revista Ciências de Saúde Coletiva, Rio de Janeiro, 2011, v.16, n.6, pp. 2907-2917.
- [17]. Campolina AG, Dini OS, Ciconelli RM. Impacto da doença crônica na qualidade de vida de idosos da comunidade em São Paulo (SP, Brasil). Revista Ciências de Saúde Coletiva, Rio de Janeiro, 2011, v.16, n. 6, pp. 2919-2925.
- [18]. Fernandes MGM, Garcia LG. O corpo envelhecido: percepção e vivência de mulheres idosas. Revista Interface (Botucatu), Botucatu, 2010, v.14, n. 35, pp. 879-890.
- [19]. Irigaray TQ, Trentini CM. Qualidade de vida em idosas: a importância da dimensão subjetiva. Revista Estudos Psicologia (Campinas), Campinas, 2009, v.26, n. 3, pp. 297-304.
- [20]. Gonzalez LMB, Seidl EMF. O envelhecimento na perspectiva de homens idosos. Revista Paidéia, Ribeirão Preto, 2011, v.21, n. 50, pp. 345-352.
- [21]. Carneiro R, Falcone E, Clark C, Prette ZD, Prette AD. Qualidade de vida, apoio social, e depressão em idosos: relação com habilidades sociais. Revista Psicologia: Reflexão e Crítica, Porto Alegre, 2007, v.20, no.2, pp 229-237.
- [22]. Teixeira INDO, Neri AL. Envelhecimento bem-sucedido: uma meta no curso da vida. Rev. Psicol. USP, São Paulo, 2008, v.19, no.1, pp 81-94.
- [23]. Melo MC, Souza AL, Leandro EL, Mauricio HÁ, Silva ID, Oliveira JMO. A educação em saúde como agente promotor de qualidade de vida para o idoso. Revista Ciência & Saúde Coletiva, Rio de Janeiro, 2009, v.14, suppl.1, pp.1579-1586.
- [24]. Sommerhalder C. Sentido da vida na fase adulta e velhice. Revista Psicologia Reflexão e Crítica, Porto Alegre, 2010, v.23, no.2, pp 270-277.
- [25]. Beckert M, Irigaray TQ, Trentini CM. Qualidade de vida, cognição e desempenho nas funções executivas de idosos. Revista Estudos de Psicologia, Campinas, 2012, v. 29, n. 2, pp. 155-162.
- [26]. Plouffe LA. O enfrentamento das desigualdades sociais e gênero entre idosos no Canadá. Revista Caderno Saúde Pública, Rio de Janeiro, 2003, v.19, n.3, pp.855-860.
- [27]. Paskulin LMG, Aires M, Gonçalves AV, Kottwitz CCB, Morais EP, Brondani MA. Envelhecimento, diversidade e saúde: o brasileiro e o contexto canadense. Rev. Acta Paulista de Enfermagem, São Paulo, 2011, v.24, n.6, p. 851-856.



- [28]. Wong R, Espinoza M, Palloni A. Adultos mayores mexicanos en contexto socioeconómico amplio: salud y envejecimiento. *Rev. Salud Pública México*, 2007, v.49, suppl.4, pp.s436-s447.
- [29]. Mehía-Arango S, Miguel-James A, Villa A, Ruiz-Arregui L, Gutiérrez-Robledo LM. Deterioro cognoscitivo y factores asociados en adultos mayores en México. *Revista Salud Pública de México, Col. Santa María Ahuacatitlan*, 2007 v.49, suppl.4, pp.s475-s481.
- [30]. Montoya-Arce BJ, Montes-de-OcaVargas H. Los adultos mayores del Estado de México en 2008. Un análisis sociodemográfico. *Revista Papeles de Población, Toluca*, 2010, v.16, n.65, pp.187-231.
- [31]. Gonzalez CA, Ham-Chande R. Funcionalidad y salud: una tipología del envejecimiento en México. *Salud Publica México, Cuernavaca*, 2007 v.49, suppl.4, pp.s448-s458.
- [32]. Carmona-Valdes SE, Ribeiro-Feirreira M. Actividades sociales y bienestar personal en el envejecimiento. *Pap. poblac [online]*. 2010, vol.16, n.65, pp.163-185.
- [33]. Membrado M. Experiencias de envejecer y experiencias urbanas: un estudio en el suroeste francés. *Revista Alteridades, México*, 2010, v. 20, n. 39, pp.57-65.
- [34]. Galban PA, Soberats FJS, Navarro AMD, Canel GMC, Oliva T. Envejecimiento poblacional y fragilidad en el adulto mayor. *Revista Cubana Salud Publica, Ciudad de La Habana*, 2007, v.33, n.1, pp. 0-0.
- [35]. Rodrigues-Barbosa A, Miranda LM, Vieira-Guimarães A, Xavier-Corseuil H, Weber-Corseuil M. Age and gender differences regarding physical performance in the elderly from Barbados and Cuba. *Revista Salud Publica*, 2011, v.13, n.1, pp. 54-66.
- [36]. Sousa L, Galante H, Figueiredo D. Qualidade de vida e bem-estar dos idosos: um estudo exploratório na população portuguesa. *Revista Saúde Pública, São Paulo*, 2003, v.37, pp.364-371.
- [37]. Zea herreral MC. La experiencia del Aula Universitaria de Mayores: enseñanza-aprendizaje de cuidado y autocuidado. *Medellín, Columbia. Rev. Invest. Educ. Enferm.*, 2009, v.27, n.2, pp.244-252.
- [38]. Sousa RG. Status e Papel Social. *Portal Mundo Educação [internet]: 2018 [acesso em 11/08/2018]*. Disponível em: <https://mundoeducacao.bol.uol.com.br/sociologia/status-papel-social.htm>
- [39]. Prado SD, Sayd JD. A pesquisa sobre envelhecimento humano no Brasil: grupos e linhas de pesquisa. *Revista Ciência & Saúde Coletiva, Rio de Janeiro*, 2004, v.9, n.1, pp.57-67.
- [40]. Maia GF, Londero S, Henz AO. Velhice, instituição e subjetividade. *Interface (Botucatu), Botucatu*, 2008, v.12, n.24, p.49-59.
- [41]. Silva LRF. Autonomia, imperativo à atividade e "máscara da idade": prerrogativas do envelhecimento contemporâneo. *Psicologia & Sociedade*, 2009, vol.21, n.1, pp. 128-134.
- [42]. Santos FH, Andrade VM, Bueno OF. Envelhecimento: um processo multifatorial. *Revista Psicologia em Estudo*, 2009, v.14, n.1, pp.3-10.
- [43]. Moreira V, Nogueira FNN. Do indesejável ao inevitável: a experiência vivida do estigma do envelhecer na contemporaneidade. *Revista de Psicologia da USP, São Paulo*, 2008, v.19, n.1, pp.59-79.
- [44]. Mauritti R. Padrões de vida na velhice. *Revista Análise Social, Lisboa*, 2004, n.171, pp.339-363.
- [45]. Kuchemann BA. Envelhecimento populacional, cuidado e cidadania: velhos dilemas e novos desafios. *Revista Sociedade e Estado, Brasília*, 2012, v.27, n.1, pp.165-180.
- [46]. Gorz A. O envelhecimento. *Revista Tempo Social, São Paulo*, 2009, v.21, n.1, pp.15-34.
- [47]. Argimon ILL, Stein LM. Habilidades cognitivas em indivíduos muito idosos: um estudo longitudinal. *Caderno Saúde Pública, Rio de Janeiro*, 2005 v. 21, n.1, pp. 64-72.
- [48]. Ochoa Angrino S, Aragon Espinosa L, Caicedo Tamayo AM. Memoria y metamemoria en adultos mayores: Estado de La Cuestión. *Revista Acta Colombiana de Psicología*, 2005, v.8, n.2, pp.19-32.
- [49]. Witter GP. Tarefas de desenvolvimento do adulto idoso. *Rev. Estudos Psicologia (Campinas)*, 2006, v.23, no.1, pp 13-18.
- [50]. Alves LCA, Leite IC, Machado CJ. Conceituando e mensurando a incapacidade funcional da população idosa: uma revisão de literatura. *Ciência Saúde Coletiva, Rio de Janeiro*, 2010, v.13; n.4, pp. 1199-1207.
- [51]. Camargos MCS, Machado CJ, Rodrigues RN. Expectativa de vida para idosos brasileiros em 2003, segundo níveis de incapacidade funcional. *Caderno Saúde Pública, Rio de Janeiro*, 2008, v.24, pp. 845-852.
- [52]. Santos JLF, Lebrão ML, Duarte YAO, Lima FD. Functional performance of the elderly in instrumental activities of daily living: an analysis in the municipality of São Paulo, Brazil. *Cad Saude Publica* 2008.
- [53]. Paradella EMP, Lopes CS, Lourenço RA. Adaptação para o português do Cambridge Cognitive Examination-Revised aplicado em um ambulatório público de geriatria. *Caderno Saúde Pública, Rio de Janeiro*, 2009, v.25, no12, pp 2562-2570.
- [54]. Braga LS, Macinko J, Proietti FA, César CC, Lima-Costa MF. Diferenciais intra-urbanos de vulnerabilidade da população idosa. *Caderno Saúde Pública, Rio de Janeiro*, 2010, v.26, n.12, pp. 2307-231.
- [55]. Silva HS, Lima AMM, Galhardoni R. Envelhecimento bem-sucedido e vulnerabilidade em saúde: aproximações e perspectivas. *Interface (Botucatu)*, 2010, v.14, n.35, pp. 867-877.
- [56]. Lima MG, Barros MBA, César CLG, Goldbaum M, Carandina L, Ciconelli RMa. Qualidade de vida relacionada à saúde em idosos, avaliada com o uso do SF-36 em estudo de base populacional. *Revista Caderno de Saúde Pública, Rio de Janeiro*, 2009, v.25, n.10, pp. 2159-2167.
- [57]. Souza RF, Matias HÁ, Bretas ACP. Reflexões sobre envelhecimento e trabalho. *Rev. Ciência Saúde Coletiva*, 2010, v.15, n.6, pp.2835-2843.

- [58]. Del Gado J. Velhice, corpo e narrativa. *Revista Horizontes Antropológicos*, Porto Alegre, 2010, v.16, n.34, pp.189-212.
- [59]. Doimo LA, Derntl AM, Lago OC. O uso do tempo no cotidiano de mulheres idosas: um método indicador do estilo de vida de grupos populacionais. *Revista Ciência Saúde Coletiva*, Rio de Janeiro, 2008, v.13, n.4, pp.1133-1142.
- [60]. Pinto JLG, Garcia ACO, Bocchi SCM, Carvalhares MABL. Características do apoio social oferecido a idosos de áreas assistida pelo PSF. *Revista Ciência & Saúde Coletiva*, Rio de Janeiro, 2006, v.11, n.3, pp 753-764.
- [61]. Silva IR, Gunther IA. Papéis sociais e envelhecimento em uma perspectiva de curso de vida. *Revista Psicologia: Teoria e Pesquisa*, 2000, v.16, n.1, pp.31-40.
- [62]. Laranjeira CA. “Velhos são os trapos”: do positivismo clássico à nova era. *Revista Saúde Social*, São Paulo, 2010, v.19, n.4, pp.763-770.
- [63]. Miranda LM, Farias SF. As contribuições da internet para o idoso: uma revisão de literatura. *Revista Interface (Botucatu)*, Botucatu, 2009, v.13, n.29, pp.383-394.
- [64]. Padilha GD, Padilha CAM. Tecnologias para o idoso. *Rev. Univ.Psychol*, 2008, v.7, n.3, pp.1657-9267.
- [65]. Vicente VAQ. Uma década desigual para os idosos que chegaram tarde ai ciberespaço. *Rev. Sociologia, Problemas e Práticas*, 2011 n.65, pp.51-68.
- [66]. Univovsky MAR. A educação como meio para vencer os desafios impostos aos idosos. *Rev. Bras. Enferm.*, Brasília, 2004, v.57, n.2.
- [67]. Marques DT, Pachane GG. Formação de educadores: Uma perspectiva de Educação de idosos em Programas de EJA. *Revista Educação e Pesquisa*, São Paulo, 2010, v.36, n.2 p. 475-490.
- [68]. Motta LB, Caldas CP, Assis M. A formação de profissionais para atenção integral à saúde do idoso: a experiência interdisciplinar do NAI – UNATI/UERJ. *Revista Ciência Saúde Coletiva*, Rio de Janeiro, 2008, v.13, n.4, pp.1143-1151.
- [69]. Peres MAC. Velhice e analfabetismo, uma relação paradoxal: a exclusão educacional em contextos rurais da região Nordeste. *Revista Sociedade e Estado*, Brasília, 2011, v. 26, n.3, pp.631-662.
- [70]. Alencar MSS, Carvalho CMRG. O envelhecimento pela ótica conceitual, sóciodemográfica e político-educacional: Ênfase na experiência piauiense. *Interface (Botucatu)*, Botucatu, 2006, v. 13, n.29, pp.435-444.
- [71]. Irigaray TQ, Schneider RH. Prevalência de depressão em idosas participantes da Universidade para a Terceira Idade. *Revista de Psiquiatria do Rio Grande do Sul*, Porto Alegre, 2007, v.29, n.1, pp.19-27.
- [72]. Irigaray TQ, Schneider RH. Impacto na qualidade de vida e no estado depressivo de idosas participantes de uma universidade da terceira idade. *Estudos Psicológicos (Campinas)*, Campinas, 2008, v.25, n.4, pp.517-525.
- [73]. Moraes ONP. Grupos de idosos: atuação da psicogerontologia no enfoque preventivo. *Revista Psicologia Ciência e Profissão*, Brasília, 2009, v.29, n.4, pp.846-855.
- [74]. Leonardi LC, Rodrigues AL. Caixa lúdica para ido-sos: processo de construção como procedimento clínico e sua contribuição na qualidade do vínculo. *Revista de Psicologia da USP*, São Paulo, 2012, v.23, n.2, 327-342.
- [75]. Dulcey RE. Perspectiva da psicologia social do envelhecimento e da vida: considerações críticas. *Revista Colombiana de Psicologia Social*, Bogotá, 2010, v.19, n.2, p.207-224.
- [76]. Ludgleydson ASAE; Amaral EB. Corpo e velhice: um estudo das representações sociais entre homens idosos. *Revista Psicologia: Ciência e Profissão*, Brasília, 2011, v.31, n.3, pp. 468-481.
- [77]. Lima PMR, Coelho VLD. A arte de envelhecer: um estudo exploratório sobre a história de vida e o envelhecimento. *Revista Psicologia: Ciência Profissão*, Brasília, 2011, v.31, n.1, pp.4-19.
- [78]. Fortes TFR, Portuguez MW, Argimon IIL. A resiliência em idosos e sua relação com variáveis sociodemográficas e funções cognitivas. *Revista Estudos de Psicologia (Campinas)*, Campinas, 2009, v.26, n.4, pp.455-463.
- [79]. Cardenas-Jimenez A, Lopes-Diaz A. Resiliencia en la vejez. *Revista Salud Pública*, Rio de Janeiro, 2011, v.13, n.3, pp.528-540.
- [80]. Cesar JÁ, Oliveira-Filho JÁ, Bess G, Cegiela R, Machado J, Gonçalves TS, Neumann NA. Perfil dos idosos residentes em dois municípios pobres das regiões Norte e Nordeste do Brasil: resultados de estudo transversal de base populacional. *Revista Caderno Saúde Pública*, Rio de Janeiro, 2008, v.24, n.8, pp.1835-1845.
- [81]. Carvalho JAM, Garcia RA. O envelhecimento da população brasileira: um enfoque demográfico. *Revista Caderno Saúde Pública*, Rio de Janeiro, 2003, v.19, n.3, pp.725-733.
- [82]. Wong LLR, Carvalho JA. O processo de envelhecimento rápido populacional do Brasil: Desafios sérios para como Políticas Públicas. *Rev. Bras. Popul.*, 2006 v.23, n.1.
- [83]. Fernandes AA. Velhice, solidariedades familiares e política social: Itinerário de pesquisa em torno da esperança de vida. *Revista Sociologia, Problemas e Práticas*, Oeiras, 2001, n.36, pp.39-52.
- [84]. Kalache A. O mundo envelhece: é imperativo criar um pacto de solidariedade social. *Revista Ciência & Saúde Coletiva*, Rio de Janeiro, 2008, pp.1107-1111.
- [85]. Santana MS, Chaves-Maia EC. Atividade Física e Bem-estar na Velhice. *Revista Salud Pública*, 2009, v.11, pp.225-236.
- [86]. Gaspari JC, Schwartz GM. O idoso e a resignificação emocional do lazer. *Revista Psicologia: Teoria e Pesquisa*, Brasília, 2005, vol. 21, n1, pp. 069-076.
- [87]. Uchoa E. Contribuições da antropologia para uma abordagem das questões relativas à saúde do idoso. *Rev. Caderno Saúde Pública*, 2003, v.19, n.3, pp.849-853.

- [88]. Brigeiro M. "Envejecimiento exitoso" y "tercera edad": Problemas y retos para la promoción de la salud. *Revista Investigación y Educación em Enfermaria*,
- [89]. Borges PLC, Bretas RP, Azevedo SF, Barbosa JMM. Perfil dos idosos frequentadores de grupos de convivência em Belo Horizonte, Minas Gerais, Brasil. *Revista Caderno Saúde Pública*, Rio de Janeiro, 2008, v.24, n12, pp2798-2808.
- [90]. Resende MC, Ferreira AA, Naves GG, Arantes FMS, Roldão DFM, Sousa KG, Abreu SAM. Envelhecer atuando: bem-estar subjetivo, apoio social e resiliência em participantes de grupo de teatro. *Revista de Psicologia*, Rio de Janeiro, 2010 v22, n.3, pp591-608.
- [91]. Coutinho RX, Acosta MAF. Ambientes masculinos da terceira idade. *Revista Ciências Saúde Coletiva*, Rio de Janeiro, 2009, v.14, pp1111-1118.
- [92]. Pavan FJ, Meneghel SN, Junges JR. Mulheres idosas enfrentando a institucionalização. *Revista Cadernos Saúde Pública*, Rio de Janeiro, 2008, v.24, n.9, pp.2187-2189.
- [93]. Gamburgo L JL, Monteiro MIB. Singularidade do envelhecimento: reflexões com base em conversas com um idoso institucionalizado. *Revista Interface (Botucatu)*, Botucatu, 2009, v.13, n.28, pp.31-41.
- [94]. Araujo LF, Coutinho MPL, Santos MFS. O idoso em instituições gerontológicas: um estudo na perspectiva das representações sociais. *Revista Psicologia & Sociedade*, Porto Alegre, 2006, v.18, n.2, pp.89-98.
- [95]. Sousa RG. Status e Papel Social. *Portal Mundo Educação* [internet]: 2018 [acesso em 11/08/2018]. Disponível em: <https://mundoeducacao.bol.uol.com.br/sociologia/status-papel-social.htm>
- [96]. Banhato EFC, Leite ICG, Guedes DV, Chaoubah A. Cognição de idosos: estudo a partir da FAB – Forma Abreviada da Wecher-III. *Revista Psicologia Reflexão e Crítica*, Porto Alegre, 2012, v.25, pp. 96-104.
- [97]. Lane STM (organizadora). *Psicologia Social – O Homem em Movimento*. 8ª Ed. São Paulo: Brasiliense, 1989.
- [98]. Freitas MFQ. *Psicologia na comunidade, psicologia da comunidade e psicologia (social) comunitária – Práticas da psicologia em comunidade nas décadas de 60 a 90 no Brasil*. pp. 54-70. Livro: *Psicologia Social Comunitária – Da solidariedade à autonomia*. 16ª Ed, Rio de Janeiro, Vozes, 2010.
- [99]. Freitas, M. F. Quintal de. (In)coerências entre práticas psicossociais em comunidade e projetos de transformação social: Aproximações entre as Psicologias Sociais da Libertação e Comunitária. *Psico (PUCRS. Impresso)*, Porto Alegre, v. vol 1, n.n. 1, p. 47-54, 2005.
- [100]. Andrade AN. A criança na sociedade contemporânea: do ainda não ao cidadão em exercício. *Psicol. Reflex. Crit.* [online]. 1998, vol.11, n.1, pp.161-174.
- [101]. Flores Osorio JM. Metodología y Epistemología de la Investigación Psicosocial. Ver. *Información Psicológica*. n. 78, p. 71-79, 2002.
- [102]. Freitas MFQ. Educação de jovens e adultos, educação popular e processos de conscientização: intersecções na vida cotidiana: *Rev Educ*, Curitiba, n. 29, 2007 p. 47-62.
- [103]. Freire P. *À sombra da mangueira*. São Paulo: Olho d'á-gua, 1995.

IOSR Journal Of Humanities And Social Science (IOSR-JHSS) is UGC approved Journal with Sl. No. 5070, Journal no. 49323.

Elaine Cristina da Silva. "Characteristics and Challenges of Population Aging: A Bibliographic Review." *IOSR Journal of Humanities and Social Science (IOSR-JHSS)*. vol. 24 no. 03, 2019, pp. 37-47.