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THEORETICAL NOTES ABOUT MALE GENDER AND ACTIVE AGING IN THE FIELDS OF HEALTH

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ABSTRACT

Gender helps in the construction of thoughts and attitudes, as well as contributes together cultural issues in the identity of the subjects. However, in the aging process these characteristics are lost, since the National Policy for the Elderly does not distinguish between genders. Objective: To analyze in the literature how gender perspectives are being approached during consultations with health professionals in the context of PHC. Method: An integrative review was carried out in the electronic search base of LILACS, BDENF, MEDLINE and SCIELO of the VHL with the following descriptors: Gender and Health, Aging and Interdisciplinary Area of Health. Result: After analysis, 20 articles were found, from which we cut into 03 studies that deal with: "Female Gender", "Male Gender", "Active Aging", "Gender, Aging and Health" and "Elderly, Attention Primary and interdisciplinary health area". Our clipping prioritized 03 three articles for discussion. Conclusion: The best approach during the consultation of the health professional when taking into account the gender issue is based on the theory of interpersonal relationships, which emphasizes the increase between the relationship, between the professional and the patient, the creation of trust and bond.

Descriptors: Gender and Health; Aging; Healthcare professional.

Introduction

Aging is a natural effect that every living being faces; it occurs simply over time and is a natural phenomenon caused by organic reduction and functional decrease (ERMINDA, 1999).

The Federal Constitution of 1988 created the Unified Health System (SUS) through Organic Law No. 8,080 / 90 and 8,142 / 90 (BRASIL, 2011). In 1996, the National Policy for the Elderly came into effect, which "ensures social rights for the elderly, creating conditions to promote their autonomy, integration and effective participation in society and reaffirms the right to health at the various levels of SUS care" (SILVA, 2016).

Primary Care emphasizes health promotion, prevention and rehabilitation programs, using public policies aimed at users. With this, care can be provided to young people, through actions as guidance to reduce the rates of future pathologies; or care for the elderly, understanding their limitations and developing the necessary care to delay disabilities and chronic diseases.

One of the authors is inserted in the context after experiencing, experiences obtained in the practical activities of the undergraduate course in Primary Care, and in the specialization in Geriatrics and Gerontology with functions developed at the Elderly Care Center (NAI), I could notice the assistance of the professional nurse. During youth or adulthood, health professionals provide care geared to the gender, analyzing specific items in men women. When thev and advanced age, they are inserted in the program aimed at the elderly, changing

the striking aspect of the history of each individual and, mainly, in attendance.

The study is based on the Theory of Interpersonal Relations, for the Practice of interdisciplinary areas of health by Hildegard Peplau, as it covers the interaction of individuals as a goal, ensuring respect, empathy and exchange of information, and with that, the bond can be established. For Peplau, specific branches of health, such as nursing, must consider culture and traditions in the adaptation process.

The study is justified by the scarcity of published material related to the strategies of nurses in primary care, together with the need to offer appropriate care to the limitations imposed by advanced age in relation to gender.

Population aging is a natural, worldwide and irreversible event. The age pyramid is growing fast when it comes to the elderly. José Alberto Magno de Carvalho, president of the Brazilian Association of Population Studies and the International Association in Demography, described to Columnist Daniel Buarque do G1, in 2011, that "there is a big increase in the proportion of elderly people in the world", approximately 893 million people over 60 years old¹.

Thus, when discussing the attributions of health fields provided to

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¹ In 2012, Küchemann, described that "Brazil is a country that is aging at a fast pace". The elderly population group is approximately 10.8% of the total population in 2010, according to the demographic census - IBGE. Of these, 55.5% are female (11,434,487), and 44,5% are male (9,156,112). With data extracted from DATASUS, from December 2015, the State of Rio de Janeiro had an estimate of 542,093 women over 60 years old; men over 60 years old were 375,560. In the Municipality of RJ there were, respectively, 270,424 elderly women and 166,349 elderly people.

the elderly, I intend to clarify how is the assistance appropriate to the health needs of the elderly, taking into account the female and male sex. Concomitantly, this relevant research is for professional community as it contributes to assistance improving the scenario, since their care is general and not specific to the elderly. The professional's lack of understanding in the face of advanced age and, related to gender, indicates that the professional needs to have a holistic look at women and men. aged in an integral, egalitarian and universal way.

This research is also relevant to theory, due to the scarcity of articles and research published in electronic search bases with the referred theme, since there are few studies carried out in the junction of Gender and Health, Aging and health fields in article format.

METHOD

The Integrative Literature Review is conceptualized as a synthesis of information and application of studies analyzed in evidence-based practice, as it provides an analysis of scientific research in a broad and systematic way, in which it has been used for research in the spheres of health (SOUZA, 2010 and SOARES, 2014).

In the review, the publications found in the search base were studies produced with rigor and precision by the authors, examining the methods used and synthesizing the results (LIMA, 2010).

Initially, the descriptors used were "aging; gender and health", in which 223 articles were found. When adding the

Explanatory table: Results and discussion

filters, 68 were found, and 4 publications were selected. When using the descriptor "aging; health approaches "2,751 articles were found. With the filter, 464 were found. Of these, 11 were chosen. By inserting "gender and health; interdisciplinary health area ", 3,038 articles were found and 464 were selected with a filter, using 5 articles.

By associating all three descriptors, "aging; gender and health; interdisciplinary health area ", only 28 publications were found. With the filter, 14 files emerged, however, no publication found covered the proposed theme.

The inclusion criteria that were adopted were the time frame from 2012 to 2017, journals written in Portuguese, Spanish and English, full text available and in article format. In addition, it had the following criteria for elimination analysis: publications prior to the year 2012; duplicity and texts that escaped the theme, as an example: articles that had the central theme of transsexuality, homosexuality, HIV / AIDS, urinary incontinence. depression. falls. menopause, nutritional status, physical performance, cancer or violence.

It is worth mentioning that, the works that were repeated in more than one grouping, were considered as just one file. After analyzing the electronic database, a total of 20 articles were found. For organizational reasons, we decided to extract, for analysis, only 3 surveys in our explanatory board.

ARTICLE	OBJECTIVE	METHODOL OGICAL ASPECTS	RESULTS	GENERAL CONSIDERATIO NS
ALBUQUERQUE, GA et. al., Man in primary care: nurses' perceptions about the implications of gender on health. Anna Nery School Revista de Enfermagem ,, 18 (4). Oct-Dec. 2014.	Understand the perception of nurses about the implications of gender issues in men's health.	Qualitative research, carried out with 10 nurses inserted in Primary Care.	According to the nurses' perception, there is little demand from the male segment.	There are weaknesses in the performance of health services before the male audience.
BERTOLINI, Daniele Natália Pacharone; SIMONETTI, Janete Pessuto. The male gender and health care: the experience of men in a health center. Anna Nery School Revista de Enfermagem. 18 (4): 722-727. Oct-Dec 2014.	Understand how men in a Health Center behave in terms of health care.	Qualitative study, carried out in a School Health Center that selected for convenience and interviewed 15 male individuals	Four central ideas emerged that portray the reasons for seeking the service, health problems, attitudes towards these problems and participation in the activities of the unit.	These individuals are assiduous, are concerned with following the recommendations received and use individual care, preferably, due to lack of time, but show interest in participating in group activities.
BIDEL, Regina Maria Rockenbach; TOMICKI, Camila; PICHLER, Nadir Antonio; PORTELLA, Marilene Rodrigues. Active aging in the conception of a group of nurses. Revista Kairós Gerontologia, 19.	Describe active aging through the perception of a group of nurses.	It is an exploratory and descriptive qualitative research, carried out with nurses who work in Basic Health Units.	The results obtained in the focus groups revealed that there are different conceptions about active aging.	There are multiple conceptions about active aging, and all of them must be considered before closing in on an understanding.

Source: Prepared by the authors.

Notes on the Male Gender and Active Aging

This category deals with the Male Gender, which is shaped through the culture and construction of each citizen's personal life as a strong, brave and independent man. In recent years, there has been a growing increase in studies on Male Gender and Health, with low adherence to health services in this category being notorious.

The male population has a tendency to maintain a patriarchal culture, based on beliefs and stories that men are synonymous with vigor, courage

and determination; consequently, the demand for care or the disease, shows a sign of fragility and invulnerability that it causes in the absence of self-care, reducing the male demand for health services (BORGES & SEIDL, 2012; SALIMENA et al., 2013; BERTOLINI & SIMONET, 2014; ALBUQUERQUE, 2014; ELIZONDO, 2015; COELHO, 2016).

According to Borges & Seidl (2012) apud Brasil (2008) and IBGE (2010), there are differences of some years lived by men: "And they have an average life expectancy around seven years less than that of women". The male population has a high mortality rate due to the adopted lifestyle, as they place themselves at higher risks, such as, for example, abuse of psychoactive substances, automobile accidents or accidents at work, in addition to the low demand for health services.

The National Policy for Integral Attention to Men's Health (PNAISH), the current program in force, was instituted by the Ministry of Health, through Ordinance GM / MS No. 1944, on August 27, 2009, in which it aims to qualify the health of this group in the face of that contributes assistance to comprehensive health care (SALIMENA et al., 2013; BERTOLINI & SIMONET, 2014; ALBUQUERQUE, 2014).

For men, it is shameful to seek help, as they feel embarrassed and inferior (BORGES & SEIDL, 2012; ELIZONDO, 2015). They are also resistant to the health service and, when they go, they want their stay to be brief; impatience and concern for work contribute to the low rate of adherence and emphasizes their own prejudice against health promotion, disease prevention and demonstrates

how aloof they are in relation to treatments. The search for help is often when chronic diseases are already installed and need constant monitoring (BERTOLINI & SIMONET, 2014; ALBUQUERQUE, 2014).

Thus, the demand for care is on a large scale for specialized services, and later, in inpatient units, generating a higher financial cost for SUS, since the primary care function becomes ineffective for this public (BORGES & SEIDL, 2012; BERTOLINI & SIMONET, 2014).

Coelho (2016), says that "Gender issues influence male conduct and life habits, producing ways of caring, becoming ill and aging". Vulnerability overlaps during old age for men, due to the irreversible conditions of some installed pathologies, since early care was excluded in youth.

When the elderly seek the health service, it is essential that they are welcomed and feel impacted to the point of wanting to return, being inevitable that the first visits have a way of conquering and adapting. The theoretician Peplau indicates that this service must be divided into four phases: orientation, identification, exploration and resolution to acquire profitable actions.

Active Aging

Category C, put at that time, addresses information about Active Aging, which can be conceptualized as a healthy lifestyle despite advancing age and that, for this, a set of functions is necessary, such as: psychological state, social relations, physical health, independence, among others, with the

objective of guaranteeing the quality of life during old age.

According to Borges & Seidl (2012), there are divergent risks of pathologies between the sexes, since the male gender dies earlier, however, the female is marked by chronic and degenerative diseases.

Coelho (2016) points out that in the health, disease and care process, the understanding of the socio-cultural context, age group and gender, are directly linked to the principles and personal experiences about the emergence of pathologies, in addition to being involved in the care models.

The passage of time, associated with aging, causes new challenges to be established and encompasses the understanding of the new conditions of old age in a positive way and as another phase of life to be added. In addition, the quality of life is aimed at the elderly who seek their independence and autonomy, and can be maintained or preserved as long as people remain active. (CAMPOS et al., 2015; BIDEL, 2016).

Active aging is based, regardless of the terminology used or the best definition, on the healthy aging process that guarantees functional capacity and allows the maintenance of activities; furthermore, it also allows for well-being in the face of advanced age (BIDEL, 2016). Thus, "Health care involves technical, political and ethical actions in welcoming people in the search to meet their needs" (COELHO, 2016).

Aging is not just a biological phenomenon, the demographic transition makes us rethink under the influence of the social factor coupled

with culture, and it is necessary to analyze the path taken to achieve quality of life (DARDER, 2012; CAMPOS et al., 2015; COELHO, 2016; BIDEL, 2016). In this view, health promotion arises to ensure that information is transmitted and service users develop skills to seek and improve their health, adapting to healthy lifestyles and thus guaranteeing satisfactory aging (DARDER, 2012; BIDEL, 2016; SOUSA, 2017).

The theory of Hildegard Peplau describes that, countless changes occur in each individual differently, therefore, it is essential that there is clarification and understanding in all aspects, expanding to the history of life and culture, to establish trust and have applicability in the situations experienced of the people involved, thus ensuring the harmony of the biopsychosocial state.

Primary care interferes in the context related to health and under gender relations, as men and women deal differently in certain situations. It is evident that the professionals' knowledge about gender inequalities influences during the consultation and during the visits, enabling the guarantee of equity and integrality, and thus, the achievement of bond and trust.

Universality, accessibility, comprehensiveness, humanization and equity are clear examples of the principles of the National Primary Care Policy (PNAB), being characterized as a gateway to health services for users with actions based on protection, prevention and promotion, in addition to diagnosis, treatment, rehabilitation and health maintenance (SALIMENA et al., 2013; ALBUQUERQUE, 2014).

Adopting a healthy lifestyle can result in greater longevity for the elderly,

as it improves health and self-care conditions, good social participation, in addition to ensuring a more adequate maintenance of quality of life (CAMPOS et al., 2015; SOUSA, 2017). Thus, in old age it is necessary to maintain their autonomy and preserve their ADLs to achieve a healthy life and perform daily activities (GAUTÉRIO, 2013; BIDEL, 2016).

Peplau endeavored to ensure that the focus on care was based on individual interaction, between service users and health professionals, as it ensures confidentiality, delivery, trust and, ultimately, the strengthening of the bond between the parties involved. However, the context adopted during young life has repercussions during old age and is decisive for the choices of actions and the way the work will be carried out.

Final considerations

With the analysis of all the content covered in the present work, it is concluded that all the questions and inquiries were reached, as well as the question that guided this research was answered.

There are crucial terms that involve femininity and masculinity about the understanding of customs, models and patterns under the social interactions of individuals. Gender is a serious determinant of health. This issue has expanded and diversified the relations between men and women in view of the different living conditions of each citizen.

The best approach when consulting specific fields of health when taking into account the gender issue is based on the theory of interpersonal relationships, in which it emphasizes the

increase between the relationship of the professional and the patient, with a holistic view, issuing more opportunities to them, since the link between the parties involved takes shape and, consequently, the creation of trust and bond. Thus, the exchange of information contributes to the recognition of the factors that bring negative or positive marks to the patient and, from there, initiates the appropriate treatment, resolving all the weak points.

During the research, data were obtained that few studies in the field of health were developed on this theme. However, it was identified that it is necessary to meet the interests and needs of the elderly, addressing the history and lifestyle adopted, and contributing to the improvement of life and health conditions, since the culture and gender representations in old age have reflexes in understanding about health, illness and care.

Primary should care promote actions and strategies to prevent changes that may arise, and encourage the adoption of a healthy lifestyle to achieve active aging. It also needs to exercise educational practices with the main realities of health problems, as a stimulus, in addition to developing strategies with a focus on the autonomy and independence of the according to the specificities of each gender.

REFERENCES

ALBUQUERQUE; GA; LEITE, MF; BELÉM, JM; NUNES, JFC; OLIVEIRA, MA; ADAMI, F ...primary The man incare: nurses' perceptions about the implications of gender on health. Escola Anna Nery

Revista de INTERDISCIPLINAR AREA OF HEALTH 18 (4). Oct-Dec 2014. Available at http://www.scielo.br/pdf/ean/v18n4/14 14-8145-ean-18-04-0607.pdf> Accessed on January 26, 2018.

ALMEIDA, Vitória de Cássia Félix de; LOPES, Marcos Venício de Oliveira: DAMASCENO, Marta Maria Coelho. **interpersonal** Peplau's theory of relationships: analysis based on Barnaum. Revista da Escola de USP's INTERDISCIPLINARY AREA OF **HEALTH** vol.39 n.2. São Paulo: June, 2005. Available at: http://www.scielo.br/scielo.php?script=s ci_arttext&pid=\$0080-62342005000200011> Accessed on December 3, 2017.

Maria BIDEL, Regina Rockenbach; TOMICKI, Camila; PICHLER, Nadir Antonio; PORTELLA, Marilene Rodrigues. Active aging in the conception of a group of nurses. Revista Kairós Gerontologia, 19 (Special Number 22, "Aging and Old Age"), pp. 207-225. ISSNe 2176-901X. São Paulo (SP), Brazil: FACHS / NEPE / PEPGG / PUC-SP. 2016. Available at https://revistas.pucsp.br/index.php/kairo s/article/download/32627/22531> Accessed 26 January 2018.

BITENCOURT, S. Gender and Aging: reflections on the body that has aged. Revista Kairós Gerontologia, 18 (2), pp. 443-458. ISSNe 2176-901X. São Paulo (SP), Brazil: FACHS / NEPE / PEPGG / PUC-SP. 2015, April-June. Available at: https://revistas.pucsp.br/ index.php / kairos / article / view / 28476/20000> Accessed on May 15, 2017.

BORGES, Lilian Maria; SEIDL, Eliane Maria Fleury. **Perceptions and Behaviors of Health Care Among Elderly Men**. Psychology: Science and Profession, 32 (1), 66-81 - 2012. Available at http://www.scielo.br/pdf/pcp/v32n1/v32n1a06.pdf> Accessed on January 26, 2018.

BRASIL, Ministry of Health. Ordinance No.

2,488, of October **21**, **2011**. Approves the National Primary Care Policy, establishing the revision of guidelines and rules for the organization of Primary Care, for the Family Health Strategy (ESF) and the Community Health Agents Program (PACS). Brasília: Ministry of Health, 2011a. Available at: http://bvsms.saude.gov.br/bvs/saudele gis/gm/2011/prt2488 21 10 2011.html> Accessed on March 9, 2017. BRAZIL, Ministry of Health. Health Care Department. Programmatic and Strategic Actions. Health care for the elderly and aging / Ministry of Health, Secretariat of Health Care, **Department** of Programmatic and Strategic Actions, Technical Area Health for the Elderly. -Brasília, 2010. 44 p.: il. - (Series B. Basic Health Texts) (Series Pactos pela Saúde 2006. ٧. 12). Available http://bvsms.saude.gov.br/bvs/publicac oes/atencao_saude_pessoa_idosa_envel hecimento_v12.pdf> Accessed August 10, 2017.

BUARQUE, Daniel. **Aging of the World Population Concerns Researchers.** G1 – World. São Paulo, 2011. Available at: http://g1.globo.com/mundo/noticia/20 11/10/ aging-of-world-population-concerns-researchers.html> Accessed on August 11, 2017.

CAMPOS , Ana Cristina Viana; FERREIRA, Efigenia Ferreira; VARGAS, Andréa Maria Duarte. **Determinants of active aging according to quality of life and gender**. Ciência & Saúde Coletiva, 20 (7): 2221-2237, 2015. Available at http://www.scielo.br/scielo.php?pid=\$14

81232015000702221&script=sci_abstract&t Ing=pt> Accessed on January 26, 2018.

Cardoso such Veronica Macedo;
OLIVEIRA, Rosane Mara Pontes de;
LOYOLA, Cristina Maria Douat. A linear
understanding of Peplau's theory and the
Principles of Brazilian Psychiatric Reform.
School of INTERDISCIPLINARY AREA OF
HEALTH at Escola Anna Nery, 2006.
Available at:
http://eean.edu.br/detalhe_artigo.asp?id=170 Accessed on December 3, 2017.

COSTA-JÚNIOR, Florêncio Mariano da; COUTO, Márcia Thereza; MAIA, Ana Cláudia Bortolozzi. **Gender and health care: Conceptions of professionals working in the outpatient and hospital context.** Sexualidad, Salud y Sociedad - Revista Latinoamericana ISSN 1984-6487 / n. 23 - pp.97-117 - ago. 2016. Available at http://www.scielo.br/pdf/sess/n23/1984-6487-sess-23-00097.pdf Accessed on January 26, 2018.

GERHARDT, Tatiana Engel; SILVEIRA. Denise Tolfo. Research methods. Universidade Aberta do Brasil - UAB / **UFRGS** and the Technological Undergraduate Course - Planning and Management for Rural Development at SEAD / UFRGS. - Porto Alegre: Editora da UFRGS, 2009. Available at:

http://www.ufrgs.br/cursopgdr/downloadsSerie/derad005.pdf Accessed on July 24, 2017.

GESSA, Giorgio Di; GRUNDY, Emily. The relationship between active aging and health using longitudinal data from Denmark, France, Italy and England. Epidemiol Community Health 68: 261–267; 2014. Available at http://jech.bmj.com/content/68/3/261 Accessed on January 28, 2018.

GIL, Antonio Carlos. **Methods and techniques of social research** / Antonio Carlos Gil. - 6. ed. - São Paulo: Atlas, 2008.

KÜCHEMANN, Berlindes Astrid. **Population Aging, Care and Citizenship: old dilemmas and new challenges**. Scielo
Soc. Estado. vol.27 no.1 Brasília Jan./Apr.
2012. Available at:
http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0102-69922012
000100010> Accessed on August 10, 2017.

NEGREIROS, Teresa Creusa de Góes Monteiro. **Sexuality and gender in aging**. ALCEU - v.5 - n.9 - p. 77 to 86 - July / Dec. 2004. Available at: http://revistaalceu.com.puc-rio.br/media/alceu_n9_negreiros.pdf> Accessed on December 2, 2017.

WHO, World Health Organization. Active aging: a health policy. World Health Organization. Brasília: Pan American Health Organization (PAHO); 2005. Available at: http://dtr2001.saude.gov.br/svs/pub/pdfs/envelhecimento_ativo.pdf/ Accessed on May 25, 2017.

PADILHA, Alexandre. **Resolution No. 466, of December 12, 2012**. Published in DOU n° 12 - Thursday, June 13, 2013 - Section 1 - Page 59. Available at: http://conselho.saude.gov.br/resolucoes/2012/Reso466.pdf Accessed on 24 July 2017.

RAMIRES, Lula. **Travel as a metaphor for the search for identity**. são Paulo, n.2, p.6-15, mar, 2008.

RODRIGUES, Ana Margarida Serôdio Monteiro. The Fear of Aging (and the Role of the Gerontologist). Escola Superior de Educação João de Deus Degree in Social Gerontology (Monograph), Lisbon 2012. Available at: https://comum.rcaap.pt/bitstream/1040 0.26/3567/1/MONOGRAFIAFINAL.pdf> Accessed on December 2nd 2017.

SANTANA, Sely Costa de; et al. **Gender Differentials and Aging: A Literature Review.** Expanded Summary - Cbcenf.
Available at:
http://apps.cofen.gov.br/cbcenf/sistem
ainscricoes/arquivosTrabalhos/I19761.E8.T
4418.D4AP.pdf> Accessed on August 10,
2017.

SBGG. Brazilian Society of Geriatrics and Gerontology. **Active Aging**. Available at: http://sbgg.org.br/espaco-cuidador/envelhecimento-ativo/> Accessed on May 27, 2017.

SOUZA, Marcela; SILVA, Michelly; CARVALHO, Raquel. Integrative Review: what is it and how to do it?. Einsten, 2010. Available at: http://www.scielo.br/scielo.php?pid=S0080-62342014000200335&scipt=sci_arttext&tlng=en Accessed on May 15th, 2017.

TEIXEIRA, Ilka Nicéia D'Aquino Oliveira; NERI, Anita Liberalesso. Successful aging: a goal in the course of life. Psicol. UsP, São Paulo, Jan./Mar. 2008, 19 (1), 81-94. Available at: http://www.scielo.br/pdf/pusp/v19n1/v19n1a10.pdf Accessed on December 4, 2017.

VIANNA, Claúdia. **Contributions to the Analysis of School Education**. Revista Educação, São Paulo, n.2, p.6-15, mar, 2008.