

## Old-old people living in the community:

### The contribution of perceived and mental health besides the objective health

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**Introduction:** people aged 80 years and over are the segment of the age population that grows faster, and it is expected that in 2050 this group will represent 3,4% of the total population of the world (153 million of people) (UNO, 2002). To live long life constitutes a challenge to the self and to the community (Paul, 2007), therefore is important to consider the quality of life of these persons. Health is a major component of quality of life, often associated to its objective aspect, related with physical health (eg. number of diagnosis) and functional health (disability in ADL and IADL) (Schneider, et al., 2004), and, less often, associated with its mental component (Pinquart, 2001). Health self-perception allows an overall assessment of health status and is considered an important indicator of mortality in old age (cf. Wurm, Tomasik, Tesch-Romer, 2008). The dynamic between the health status, which declines with age, and health self-perception, is one of the great contradictions of the literature addressed to the very old (Pinquart, 2001). In order to understanding this paradox it is necessary to study and take in account the influence of other factors, including the influence of the psychological distress. **Methods:** data from a cross-sectional survey of elders, recruited through announcements in local newspapers, living in the community in Portugal were used. The sample consists of 991 participants, 698 women (70.4) e 293 men (29.6), with ages between 65 and 101 years (mean of 74.1, SD 6.5). It was used the General Health Questionnaire (GHQ-12; Goldberg and Hillier, 1979), as a single index of psychological distress, the Questionnaire on Health and Lifestyles (Paúl *et al.*, 1999 - adapted), and a questionnaire about sociodemographic information. **Results:** there is a significant association between subjective health, objective and mental health with age groups: 65 - 69 years (n=290), 70 - 79 years (n=494) and 80 and more years (n=207). The more significant results are related with perceived health, that improves with advancing age, 34.1% of the persons that consider their health as good or very good are of the first age group (65-69), 42.3% are in the second (70 - 79) and 47.7% have 80 or more

years old. In mental health, the prevalence of psychological distress on the total sample was of 26.8% and there is an increase with advancing age, between 23.1% (65 – 69 years), 25.7% (70 – 79 years) and 34.8% (80 and more years) ( $p < 0.005$ ). Correlation analysis of the old-old people shows a higher significant association between perceived health and psychological distress.

**Conclusion:** the heterogeneity of old people and the old-old profile should be recognized in the gerontological studies, in the definition of policies and in the development of interventions. In advancing age, mental health is an important issue, that influence the way persons perceived that health. Strategies that focus the promotion of the psychological well-being should complement the ones who promote physical health.