

**35 - BODY IMAGE IN THE ELDERLY**

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**"Body is culture - an expression of its basic themes. A complete understanding of any human body gives us a more complete understanding of the culture materialized within". (HELMAN, 2003:28).**

The diverse ways by which the body explains health problems in biological, psychological and social situations and/or changes, are concerns that guide my academic itinerary. The term body image has been used to understand the various forms employed by individuals to assess and use their body, consciously or not (HELMAN, 2003:24). From this investigation, we recognize that the body assumes a set of essential meanings for health and sickness, mainly when perceiving and interpreting attitudes symptoms, actions and reactions, feelings and fantasies in the influence of the sociocultural environment in which the elderly find themselves. How does the environment alter, influence or transform way of life in old age? If this is possible, then the social researcher is on the right path in identifying what influence the environment exerts on the health and physical vigor of the elderly.

We understand body image as a set of sensations constructed by the senses (hearing, sight, touch, taste), whose purpose is to transmit experiences that individuals live through during the course of their lives. It is their experience reference, the cultural marks of their lives which they carry as their own cultural and social identity. Health in the elderly, therefore, has been assuming greater prominence at the scientific debates in which I have been taking part, mainly because it expresses the concern of society in general and academicians with health in old age, through the study of how the elderly live within the groups in which they find themselves and how this reflects on their body image.

This information is captured and organized by the body when defining areas of pain and anxiety, in the information and influences operationalized when they experience physically and psychologically the essence of their image. According to Douglas (1973:93-112), "there is a two-way relation between the physical and social imaginary, one influencing the other". And this has had repercussions on sensations, perceptions and motivations when "shaping" the body to the stimulations standardized by esthetics.

When we think about health in the elderly, a good indicator of health care would be to examine the essential points of individual and subjective aspects involved in the body, with quality of life as a determinant factor. Fernandes (1996:25-26) states that "quality is above all an attitude". An attitude that must involve the inner structure of the body itself along with its mysteries as well as the external possibilities that will influence this position. Thus, following in the steps of Csordas (1993:135-56), "body and culture are not really separate. To a great extent, individuals incorporate the culture in which they live". In general, quality of life is an attitude of understanding the culture materialized by the body itself in expressing what it is requested to do.

As can be perceived, the body as a basic and current theme of understanding the culture materialized within it should be emphasized in order to comprehend the representations acquired when creating and maintaining relation networks with time and space, while types of cultural pressures are involved. According to Maturana (1997:22), " representation is the representation of an object in a subject that does not depend on it, and causality involves the idea of transmitting something between the subject and the object [...]" . In this, old age has suffered, both in the development of the body itself and in the categories generally imposed on it when it is perceived as capacitated or not by sociocultural groups.

Body changes in old age, that is, how these individuals interpret, through body image, the lifestyle category imposed upon them and their reaction to these physical changes, is a reality that will provide us with various insights about the elderly within their social context.

In Fisher's (1968:113-16) definition this includes " their collective attitudes, feelings and fantasies with respect to their own body [...], the manner by which they learned to organize and integrate their body experiences". This phenomenon is relevant, since international estimates indicated the existence of approximately 500 million severely debilitated individuals in the world<sup>1</sup>. Since then, this number has increased considerably in old age, due to culturally inherited labels and stigmas. Almeida (1999:42) reports that aging represents the urgency of new problems at the end of adult life, since the body undergoes natural aging and suffers the consequences of a life that may not have been properly conditioned for a healthy old age.

Body image is the focus of meanings to be interpreted beyond the natural and physical limits of the skin, allowing an interaction with culture when describing the changes that arise in old age in the acquisition and improvement of the human being. The definition of culture herein emphasizes " systems of shared ideas, systems of concepts and rules and underlying meanings that are expressed in the ways that human beings live" (KEESING, 1981:68).

In this perspective, quality of life, besides attitude, poses an increasing challenge for understanding the present emphasis on quick solutions to health care in old age. A rethinking about managing the solutions related to attention to the body is needed, including the physical presence of other people, requiring what Maturana & Varela (2001:267) affirm as being a permanent vigilance against the temptation of certainty, an attitude of preserving quality of life.

Way of life has been influencing many aspects of life, including the body when faced with sickness, pain, levels of behavior, language, perception, image - possibly having, according to Helman (2003:13), important implications for health and for health care. For health derives from how individuals see the world around them and how they fit within this world. This view, which is sometimes loaded with prejudice on the part of both the elderly themselves and society, must be reassessed and rethought in order that we may modify the opinions of individuals about the elderly and those of the elderly themselves, thus giving priority to care of the body in the search for health.

Depending on the context, the body has been assuming the status of an investigation into the way individuals behave in real life. This process is increasingly a search for understanding the particular context consisting of elements that revolve around the problems and effects of old age. Kaplan & Sadock (1984:19) state that the term old age, depending on the author, includes the period around 60 years of age and the subsequent years. According to Almeida (1999:30), "aging is easily labeled as a separate entity, to which alternatives and objectives may be denied".

Taking into consideration that on the entire planet the number of individuals over the age of 60 years will more than double from 500 million in 1990 to around 1.2 billion in 2035 [...] with the majority of this growth occurring in Africa, Asia and Latin America (DESJARLAIS; EISENBERG; GOOD; KLEINMAN, 1995:207-27), it becomes a *sine qua non* condition for

understanding the bio/psycho/social paradigms, observing the body as a holistic territory of the "cure for the care practiced".

Thus, the body must not be considered isolatedly, but rather as a component of a complex mixture of influences that reflect themselves in beliefs and in the way of life of individuals. In agreement with Carvalho (2001:47), "the body has different meanings related to society, incorporating its specificities, repressed desires, on other occasions encouraged, according to the context in which it is inserted". Therefore, society must change its concept of seeing old age as a phase of sickness and disability. With prevention and follow-up, old age could cease to be a synonym of sickness and uselessness, becoming a phase full of teaching, health and well-being.

From this perspective, body image assumes the form of representation insofar as it seeks to depict the essential elements over which the symbolic establishes itself in the development of the space and time experienced during human existence. In the words of Maturana (2001:193), "a human being is not an individual, except in the context of the social systems in which he integrates himself, and without individual human beings there would be no human social phenomena". Rescuing individuals in old age would lead us, according to the author, to recognizing representation as a comment of the observer on the correlation between the organism and circumstance.

In the steps of Costa (1978:09), "[...] the body is perceived and is founded within a determinate social order and are legitimized by them". Confronting a system of body image in harmony with its circumstance and perceiving the correlation between quality of life and circumstance, would help us to understand to understand culture as a representation of these circumstances. This is possible because there is harmony between the organism and the circumstance.

Morreira (2000:1:80) affirms that: [...] there are only bodies that oblige my writings about them to pay attention to their particular concreteness [...] A body is only a body for being a body with life, a body with a particular and individually unique quality of moments and movements of tension [...]

To facilitate understanding, Helman (2003:24) divided body image concepts into four ample areas:

1. Beliefs about the concepts of shape and size of the body, including clothes and superficial decorating of the body;
2. Beliefs about the limits of the body
3. Beliefs about the inner structure of the body
4. Beliefs about the functioning of the body

Such ideas are influenced by the sociocultural environment and by individual factors and may have important effects on the health of the elderly. This means that the shape, size and adornments of the body, as well as age, gender, occupation and affiliation to certain groups, can transmit information about the position of an individual in society. Included in this form of communication are gestures and postures that vary from culture to culture and among groups of the same culture.

From these reflections, it can be observed that in this investigation culture assumes one of the means by which human beings organize and legitimize their society and provides a base for organizing their body. To a certain extent, it can be seen as a "lens" for perceiving and understanding the world and learning to live in it, discovering how to manage body needs and controlling time in benefit of individual health.

Thus, it is important to guide the elderly to accept their physical condition and make them aware of the importance and need of a set of actions that will transform their way of seeing the world and themselves, or offering them the care and attention required to lead a healthier and more active life. Our concern as researchers and professors is to produce and promote this existential awareness in the elderly.

#### BIBLIOGRAPHIC REFERENCES

- ALMEIDA, C.R.V. *A cultura como agente de transformação da maturidade*. In: Anais do prêmio Banco Real de talentos da Maturidade. São Paulo: Metalivros, 1990.
- ARIÈS, Philippe. *História social da criança e da família*. Rio de Janeiro: Guanabara, 1978.
- BARROS, Myriam Lins de. *Testemunho de vida: um estudo antropológico de mulheres na velhice. Perspectivas Antropológicas da Mulher*. n.2, 1981.
- BARTHES, Roland. *The semiotic challenge*. Oxford: Basil Blackwell, 1993.
- BASSIT, Ana Zahira. *O curso de vida como perspectiva de análise do envelhecimento na pós-modernidade*. In: DEBERT, Guita Grin; GOLDSTEIN, D. *Políticas do corpo e o curso da vida*. São Paulo: Mandarim, 2000, p. 217-234.
- BAUDRILLARD, Jean. *A sociedade de consumo*. Rio de Janeiro: Elfus, 1995.
- BOSI, Ecléa. *Memória e sociedade - lembranças de velhos*. 3ª ed. São Paulo: Cia das Letras, 1994.
- BRUNER, J. *Acts of meaning*. Cambridge, MA: Harvard University Press, 1990.
- CAPRA, Fritjof. *O Ponto de Mutação*, São Paulo, Ed. Cultrix, 1992.
- CARVALHO, Y.M. *O mito da atividade física e saúde*. 3ªed. São Paulo: Hucitec, 2001.
- COSTA, A. M. *Riqueza de pobre: um estudo em antropologia da saúde*. Dissertação de Mestrado do departamento de Antropologia da Universidade Nacional de Brasília, 1978.
- CSORDAS, T.J. *Somatic modes of attention*. Cultural Anthropology, 8(2), 1993.
- DEBERT Guita Grin. *Família, classe social e etnicidade: um balanço da bibliografia sobre a experiência de envelhecimento*. BIB, Rio de Janeiro, n.33, 1992, p.33-49.
- \_\_\_\_\_. *A reinvenção da velhice*. São Paulo: EDUSP, FAPESP, 1999.
- DEBORD, Guy. *A sociedade do espetáculo*. Trad. Estela dos Santos Abreu. Rio de Janeiro: Contraponto, 1997.
- DEMO, Pedro. *Ambivalências da sociedade da informação*. Ciência da Informação, v.29, n.2, p. 37-42, maio/ago. 2000.
- DESJARLAIS,R; EISENBETG, L; GOOD, B ; KLEINMAN, A. *World Mental Health*. Oxford University Press, 1995.
- DOUGLAS, M. *Natural Symbols*. Penguin, 1973.
- ELHAJJI, Mohammed. *Novas estratégias organizacionais no cenário global*. Ciência da Informação, v. 28, n. 2, maio/ago. 1999.
- FEATHERSTONE, Mike; HEPWORTH, Mike. *Envelhecimento, tecnologia e o curso da vida incorporado*. In: DEBERT, Guita Grin; GOLDSTEIN, D. *Políticas do corpo e o curso da vida*. São Paulo: Mandarim, 2000, p. 109-132.
- FERNANDES, E. *Qualidade de vida no trabalho: como medir para melhorar*. Salvador, BA: Casa da qualidade, 1996.
- FISHER, S. *Body image*. In: International Encyclopaedia of The Social Sciences (D. Sills, ed.). Free Press/Macmillan, 1968.

- GIDDENS, Anthony. *Sociologia*. 6º Capítulo: Sociologia do Corpo: saúde, doença e envelhecimento. 4ª Edição. Lisboa, Fundação Calouste Gulbenkian, 2004.
- GROISMAN, Daniel. *Velhice e história: perspectivas teóricas*. Cadernos do IPUB, v.1, n.10, p. 43-56, 1999.
- \_\_\_\_\_. *A velhice, entre o normal e o patológico*. Mimeo. No prelo.
- HELMAN, C.G. *Cultura, saúde e doença*. 4ªed. Porto Alegre: Artmed, 2003.
- JOHNSON, N; MANDLER, J.M. *A tale of two structures: underlining and surface forms of stories*. Poetics, 1980.
- JOVCHELOVITCH, S; BAUER, M.W. *Entrevista narrativa*. In: BAUER, M.W; GASKELL, G. Pesquisa qualitativa com texto, imagem e som: um manual prático. Petrópolis, RJ: Vozes, 2002.
- KAPLAN, H.I; SADOCK,B.J. *Compêndio de Psiquiatria Dinâmica*. Porto Alegre: Artes Médicas, 1984.
- KEESING, R.M. *Cultural anthropology: a contemporary perspective*. Holt, Rinehart & Winston, 1981.
- KINTSCH, W.; VAN DIJK, T.A *Toward a model of text comprehension and production*. Psychological review, 1978.
- MATURANA, H. *A ontologia da realidade*. Belo Horizonte: Ed. UFMG, 1997.
- \_\_\_\_\_. *Árvore do conhecimento: as bases biológicas do entendimento*. Campinas, SP: Editorial PSYII, 1995.
- MATURANA, H; VARELA, F.V. *A árvore do conhecimento: as bases biológicas da compreensão humana*. São Paulo: Palas Athenas, 2001.
- MEIHY, José Carlos Sebe Bom. *Manual de História Oral*. 4ª Edição, São Paulo, Edições Loyola, 1996.
- MINAYO, Maria Cecília de Souza. *O desafio do conhecimento. Pesquisa qualitativa em saúde*. 8ª Edição, São Paulo, Editora Hucitec, 2004.
- MITCHELL; W.J.T. *One narrative*. Chicago, IL: Chicago University Press, 1980.
- MOREIRA; W.W. *Qualidade de vida: complexidade e educação*. Campinas, SP: Papirus, 2001.
- MORIN, E. *O cinema ou o homem imaginário*. Lisboa: relógio D'Água Editores, 1992.
- MOTTA, Flavia de Mattos. *Velha é a vovozinha: identidade feminina na velhice*. 1990. 183 f. Dissertação (Mestrado em Antropologia Social) - Programa de Pós-Graduação em Antropologia Social, Universidade Federal do Rio Grande do Sul, Porto Alegre.
- OLIVER, M. *The politics of disablement*. Macmillan, 1990.
- PEIXOTO, Clarice. *Entre o estigma e a compaixão e os termos classificatórios: velho, velhote, idoso, terceira idade*. In: BARROS, Myriam Lins de. *Velhice ou terceira idade?* Estudos antropológicos sobre identidade, memória e política. Rio de Janeiro: Fundação Getúlio Vargas, 1998, p. 69-84.
- PROPP, V. *Morphology of folktales*. Austin, TX: Austin University Press, 1928.
- QUÉAU, Philippe. *A revolução da informação: em busca do bem comum*. Ciência da Informação, v. 27, n. 2, p. 198-205, maio/ago. 1998.
- RICOUER, P. *The narrative function*. In: MITCHELL, W.J.T. (ed.) *On narrative*. Chicago University Press, 1980.
- SILVA, J.C. *O corpo se entretece no olhar*. In: GALENO, A; CASTRO, G; SILVA, J.C. (orgs.) *Complexidade à flor da pele: ensaios sobre ciência, cultura e comunicação*. São Paulo: Cortez, 2003.
- RIESMAN, C.K. *Narrative analysis*. Newbury Park, CA: Sage, 1993.
- SCHUTZE F.. *Narrative representation kollektiver schicksalsbetroffenheit*. In: LAEMMERT, E. (ed.) *Erzaehlforschung*. Stuttgart: J.B. METZLER, 1983.
- \_\_\_\_\_. *Die technik des narrativen interviews in interaktionsfeldstudien*. University of Bielefeld, departament of Sociology, 1977.
- SFEZ, Lucien. *A saúde perfeita: crítica de uma nova utopia*. São Paulo: Loyola, 1996.

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#### **AGED And The CORPORAL IMAGE**

Our focus of investigation decays on the transformations of the body in the oldness. Transformations that can be concret (anatomic and physiological) and symbolic or representational. The body as fundamental reality in the determination of the personal or social identity is a decisive factor to people's life style. In the old-age, this life style goes necessarily through many changes; some of them because of functional incapacities bore for the age. But old-age cannot be seeing or felt just as senility or a period of deficiencies that foregoes death. In this context, the concept of body image as a social and psychological construction that reflects faces is approached: an auto-image and an image that society has on the body of old-aged people. Confronting these two sides, there is an old-age that needs to be thought from the deconstruction of valid models of health linked to traditional medicine, of biomedical models, connected to several stereotypes and reductions. But how this old person lives, how he or she forms the body image along the trajectory into society? Before the possible answers found in this narrative, we can infer to the discussion of what would be the quality of life in the old-age, what, on the other hand, takes us to the discussion of what is a healthy life.

The body image, therefore, assumes a focus of meanings to be explained, beyond the natural and physical limits of the skin, allowing us to describe the changes that occur in the oldness, in the acquisition and improvement of the human being. In this perspective, quality of life, besides attitude, assumes the value of growing challenge for understanding the actual emphasis offered in the quick solutions to caring old-aged people. It is proper, therefore, in this context, to think again about the managing of these solutions on the attention to the body including the physical presence of other people. In the awakening of this new conscience, the narrative assumes, in this investigation, the method of research. Nothing is more convenient than having how to insert the body image based on the cognitive stock of knowledge generated by the stories, lending its cultural mark to the organization of life experiences.

**KEYWORDS:** Body, Quality of Life, Old-Aged People, Oldness.

### **ÂGÉ Et IMAGE CORPOREL**

Que notre centre de recherche se délabre sur les transformations du corps dans l'oldness. Transformations qui peuvent être concret (anatomique et physiologique) et symboliques ou représentationnel. Le corps en tant que réalité fondamentale dans la détermination de l'identité personnelle ou sociale est un facteur décisif au style de vie des personnes. Dans la vieillesse, ce style de vie passe nécessairement par beaucoup de changements; certains d'entre eux en raison des incapacités fonctionnelles sont ennuyeux pour l'âge. Mais la vieillesse ne peut pas voir ou sentir juste comme le senility ou une période des insuffisances qui renonce à la mort. Dans ce contexte, le concept de l'image de corps comme construction sociale et psychologique qui reflète des visages est approché: une automobile-image et une image que la société a sur le corps des personnes vieux-âgées. Confrontant ces deux côtés, il y a une vieillesse qui doit être pensée du déconstruction des modèles valides de la santé liés à la médecine traditionnelle, des modèles biomédicaux, reliée à plusieurs stéréotypes et réductions. Mais comment cette personne âgée vit-elle, comment il ou façonne-t-elle l'image de corps le long de la trajectoire en la société? Avant que les réponses possibles aient trouvé dans ce récit, nous pouvons impliquer à la discussion de ce qui serait la qualité de la vie dans la vieillesse, ce qui, d'autre part, nous porte à la discussion de ce qu'est une vie saine. L'image de corps assume, donc, un centre des significations à expliquer, au-delà des limites normales et physiques de la peau, nous permettant de décrire les changements qui se produisent dans l'oldness, dans l'acquisition et l'amélioration de l'être humain. Dans cette perspective, la qualité de la vie, sans compter que l'attitude, assume la valeur du défi croissant pour comprendre l'emphase réelle offerte dans les solutions rapides à s'inquiéter les personnes vieux-âgées. Il est approprié, donc, dans ce contexte, pour penser encore à la gestion de ces solutions sur l'attention au corps comprenant la présence physique d'autres. Dans le réveil de cette nouvelle conscience, le récit assume, dans cette recherche, la méthode de recherche. Rien n'est plus commode qu'ayant comment insérer l'image de corps basée sur les actions cognitives de la connaissance produites par les histoires, prêtant sa marque culturelle à l'organisation des expériences de la vie.

MOTS-clés: Corps, qualité de la vie, personnes Vieux-Âgées, Oldness

### **ENVEJECIDO E IMAGE CORPORAL**

Nuestro interés de la investigación baja otra vez en las transformaciones del cuerpo en el oldness. Transformaciones que pueden ser concretas (los anatómofisiológicas) y simbólicas o representacionais. El cuerpo mientras que la realidad básica en la determinación de la identidad personal o social es un factor determinativo al estilo de la vida de la gente. En el oldness, este estilo de los pasos de la vida necesariamente para muchas transformaciones, algunas de ellas en el resultado de las incapacidades funcionales traídas por el oldness. Pero, el oldness no se puede ver o sentir solamente como el senility o período de deficiencias que preceden la muerte. De este contexto, el concepto de la imagen corporal se acerca como construcción social y psicológica que refleja las caras: una automóvil-imagen y una imagen que la sociedad tiene del cuerpo del viejo. En la confrontación de estos facetas, reuniones que un oldness que necesita para ser pensada de desconstrucción en de los modelos eficaces de la salud a la medicina tradicional, del modelo biomédico, ató a los estereotipos y a los reducidos diversos. ¿Pero como vive éste viejo, como construcciones su imagen corporal a través de su trayectoria en la sociedad? Delante de las respuestas posibles encontradas en las narrativas, podemos deducir para la pelea de eso que vendría ser la calidad de la vida en el oldness, qué, por otra parte, le toma nos la pelea de ésa viene ser vida saludable. La imagen corporal, por lo tanto, asume el foco de los significados que se interpretarán, más allá de las fronteras naturales y de la comprobación de la piel, permitiéndonos que describen los cambios que ocurren en el oldness, en la adquisición y perfectioning del humano. En esta perspectiva, la calidad de la vida, más allá de la actitud, asume el valor del desafío de aumento para entender el énfasis actual ofrecido en las soluciones rápidas los cuidados del oldness. Cabría, por lo tanto, en este contexto uno (a re)pensar los gerenciamientos de estas soluciones en la atención al cuerpo incluyendo la presencia corporal de la gente. En wakening de esta nueva conciencia, las narrativas asumen, en esta investigación, el método de la investigación. Nada más oportuno tener en cuanto a la inscripción la imagen corporal del capital del cognitivo del conocimiento generado para las historias, prestando su carácter cultural en la organización de las experiencias vividas.

Palabra-llave: El cuerpo, calidad de la vida, envejeció.