



QUALIDADE DE VIDA EM IDOSOS

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QUALIDADE DE VIDA

- Termo utilizado a partir da II Guerra Mundial
- Pós-guerra: aumento da economia mundial e mudanças sociais
- Necessidade de avaliar qualidade de vida nos EUA e Europa
- Conceito problemático: pessoas diferentes avaliam coisas diferentes.

Bowling, 2005

CONCEITO

- Qualidade de Vida
- ✓ Grau de satisfação ou insatisfação sentida em relação a vários aspectos da vida. Abrams, 1973
- ✓ Quantidade de prazer e satisfação que caracterizam a existência humana. Andrews, 1974

Qualidade de Vida

- Percepção do indivíduo de sua posição na vida, no contexto da cultura e sistemas de valores nos quais vive e em relação aos seus objetivos, expectativas, padrões e preocupações.



Qualidade de Vida

WHOQOL

1. saúde física
2. estado psicológico
3. níveis de independência
4. relacionamento social
5. características ambientais
6. padrão espiritual

OMS, 1999



Qualidade de Vida

- Natureza objetiva do meio ambiente, do estado funcional ou do estado psicológico?
- Natureza subjetiva?
- Como o profissional de saúde ou um familiar avalia essas dimensões?
- Percepção do respondente que está sendo avaliada?

Qualidade de Vida

Diferentes categorias etárias, diferentes características
e níveis de saúde



Diferentes prioridades

Bowling, 2003

Qualidade de Vida

Indicadores Sociais

- Transporte
- Assistência Médica
- Taxa de criminalidade
- Moradia
- Relações Interpessoais



Indicadores Pessoais

- Satisfação com a vida
- Alimentação
- Recursos financeiros
- Relações familiares
- Saúde



PERGAMON

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SOCIAL
SCIENCE
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MEDICINE

The disability paradox: high quality of life against all odds

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Abstract

This paper builds on the work of Sol Levine to examine a disability paradox: Why do many people with serious and persistent disabilities report that they experience a good or excellent quality of life when to most external observers these individuals seem to live an undesirable daily existence? The paper uses a qualitative approach to develop an explanation of this paradox using semi-structured interviews with 153 persons with disabilities. 54.3% of the respondents with moderate to serious disabilities reported having an excellent or good quality of life confirming the existence of the disability paradox. Analysis of the interviews reveals that for both those who report that they have a good and those who say they have a poor quality of life, quality of life is dependent upon finding a balance between body, mind and spirit in the self and on establishing and maintaining an harmonious set of relationships within the person's social context and external environment. A theoretical framework is developed to express these relationships. The findings are discussed for those with and without disabilities and directions are given for future

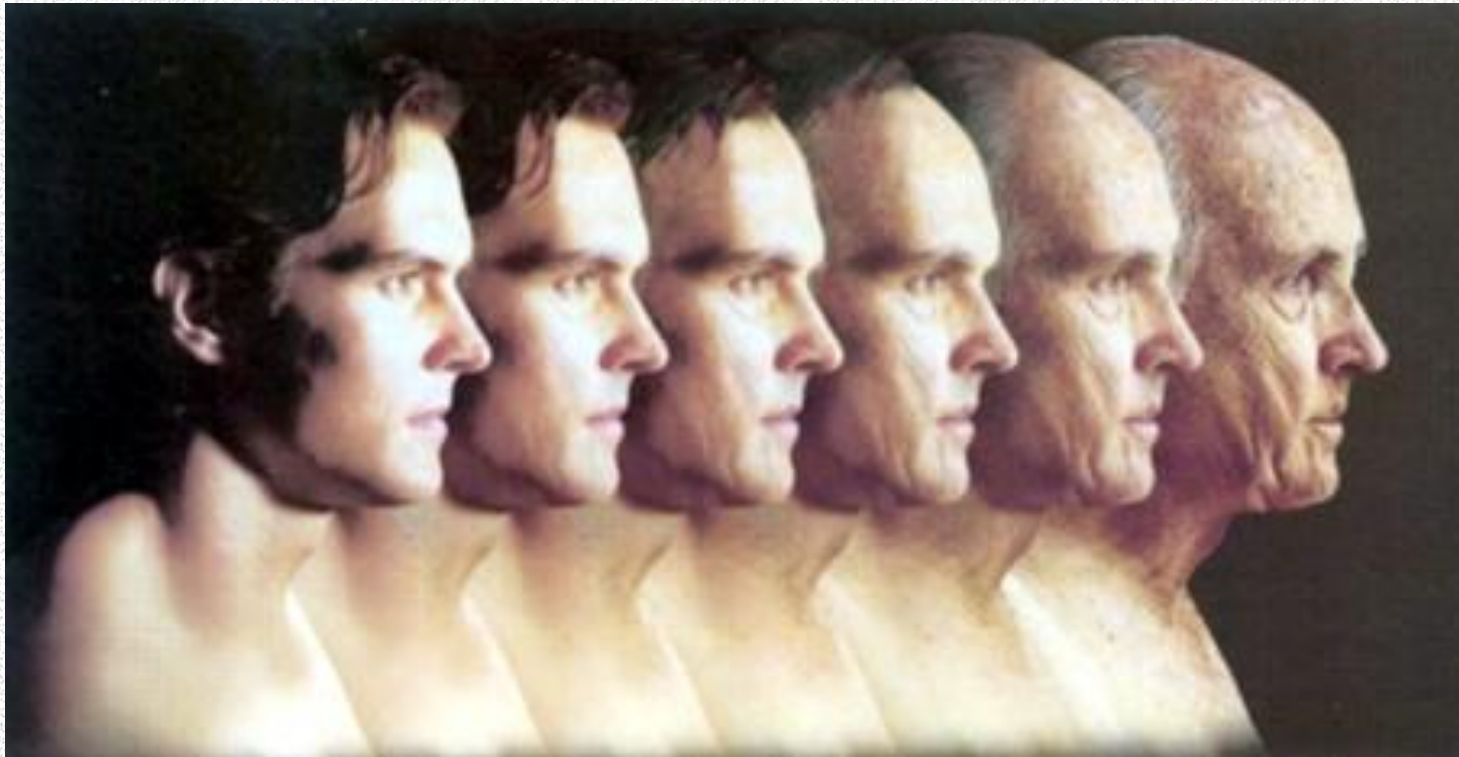
Qualidade de Vida

- Perspectiva subjetiva e multidimensional
- Velhice modifica os valores e necessidades que constituem a qualidade de vida
- Afastamento de abordagens que foquem em apenas uma dimensão (saúde)

Bowling, 2003

“A primeira verdade sobre Envelhecimento é que todos envelhecem.

A segunda verdade é que todos envelhecem de forma diferente”

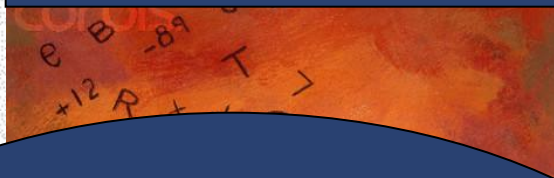
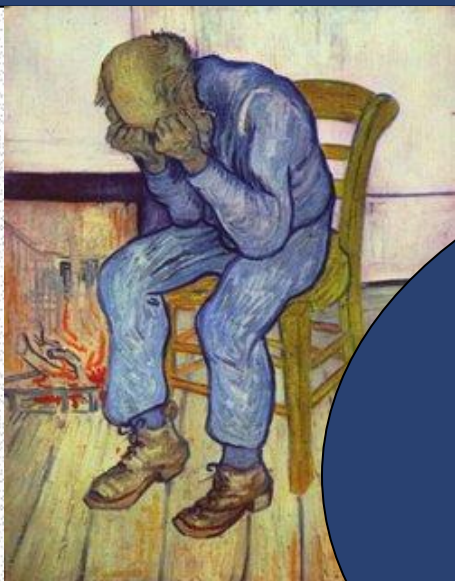


Spirduo, 2005

COMPORTAMENTAIS

COGNITIVAS

MOTORAS



QUALIDADE DE VIDA

AVD

INSTRUMENTAIS



Qualidade de Vida em Idosos

- Competência
Comportamental: saúde, atividades de vida diária, funcionamento cognitivo, comportamento social
- Ambiente objetivo: situação financeira, suporte e rede sociais
- QoL percebida: grau de satisfação com a vida em geral
- Bem-estar psicológico



Percepção Objetiva

Percepção Subjetiva

Qualidade de Vida em Idosos

Características Pessoais

- Saúde física
- Saúde Mental
- Bem-estar
- Funcionamento
- Independência

Circunstâncias Externas

- Condições socio-econômicas
- Trabalho,
- Meio-ambiente
- Relações sociais

TABLE 1. *Attributes that respondents said gave their lives quality (themes) and reasons given*

Social relationships (81 %)	Social roles and activities (60 %) and other activities enjoyed alone (48 %)	Having health (44 %)	Psychological outlook/resources (38 %)	Home and neighbourhood (37 %)	Finances (33 %)	Independence (27 %)
Has partner/family/friends for: Closeness/social contact /compatibility/ companionship/ conversation Doing things together/ do things with Empowerment Intimacy/love Pleasure ¹ of company Practical & reciprocal help Security (to 'be there' if needed)/sharing responsibilities Self-esteem/feeling valued/'be nice to me'	Attends local events/ place of worship for contact/activities Mental pursuits for alertness Physical activity/ walking for exercise/fitness Eats/drinks out for enjoyment Gardening for pleasure ¹ Leisure activities ² for pleasure ¹ Clubs/local groups for contact Holidays/outings for pleasure ¹ Pet for enjoyment Music ³ for pleasure ¹ Reads for relaxation/ enjoyment TV/videos/music/ wildlife for pleasure ¹ Security Helps others ⁴ for enjoyment/feeling valued ⁵ /keeping 'busy'/preventing loneliness	Feel empowered in life Lack of restriction on life Freedom from discomfort/pain/ aches/difficulty sleeping Ability to: do things wants to do, own personal/domestic tasks Remain in own home Participate in social activities Go out for pleasure ¹ Take holidays/travel for pleasure ¹ Drive car Eat and drink what one wants	Positive outlook as leads to focus on: well-being/ satisfaction with/ acceptance of life Feeling lucky compared to other people Freedom from stress/ loneliness Good memories Looking forward Spiritual strength	Home/ neighbourhood gives: Pleasure Home close to friends/family for social contact Local amenities/ transport/council services for getting out/security/ convenience Lack of crime for security Neighbourliness for pleasure/social contact/security	Adequate to afford: Amusements/ hobbies/pastimes/ pets for pleasure Holidays/trips & car/ petrol to enable holidays/trips for pleasure ¹ Freedom to enjoy oneself Getting out/shopping Empowerment Basic essentials for security House repairs/ upkeep/bills for security Luxuries for pleasure ¹ Freedom from worry about money Security for future	Pleasure from being able to get out/have holidays/social contacts/activities Enjoyment of life as no-one else to consider Enjoyment from having no work restrictions on time Freedom of time/ work restrictions on life Freedom of independence: Still living in one's own home/looking after oneself and/or home Satisfaction of looking after oneself

Lay theories of quality of life in older age

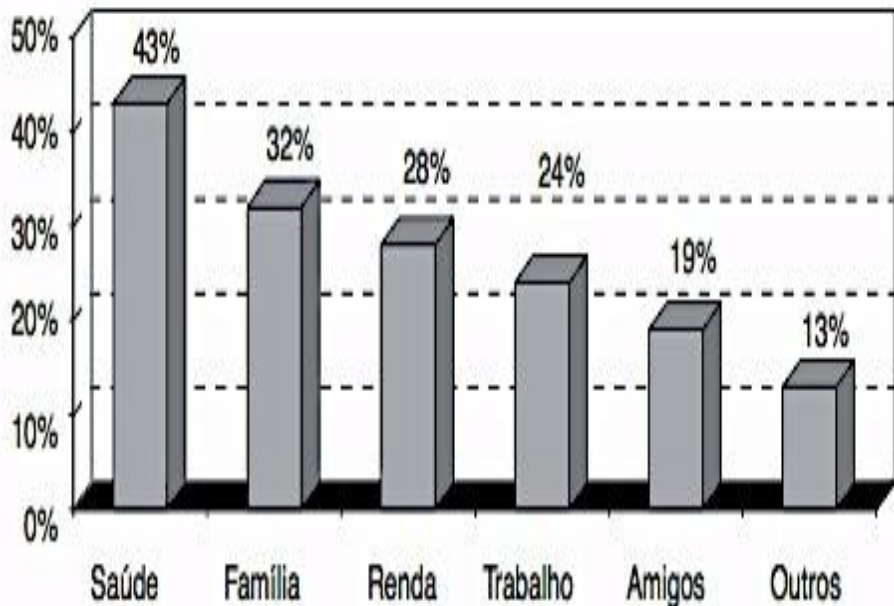
ANN BOWLING* and ZAHAVA GABRIEL*

Elderly people's definition of quality of life

A definição dos idosos de qualidade de vida

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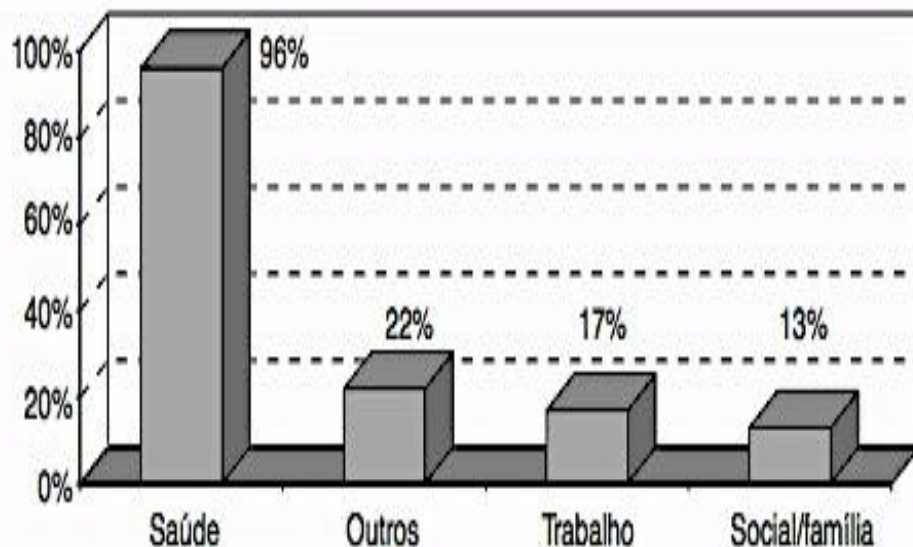


Health Family Income Work Friends Others

Note 1: There were 53 subjects who mentioned at least one determinant of a good quality of life.

Note 2: The percentage represented the rate of the 53 subjects who mentioned that domain.

Figure 2 - Why would you say that? (Determinants of a Positive quality of life)



Health Others Work Social Family

Note 1: There were 23 subjects who mentioned at least one determinant of a bad quality of life.

Note 2: The percentage represented the rate of the 23 subjects who mentioned that domain.

Figure 3 - Why would you say that? Determinants of a negative quality of life.

Spouse-caregivers' quality of life in Alzheimer's disease

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ABSTRACT

Background: The relationship between sexuality and quality of life (QoL) of spouse-caregivers remains unclear. We designed this study to evaluate the relationship between sexual satisfaction and spouse-caregivers' QoL, and to determine the influence of the clinical characteristics of people with dementia (PWD) on spouse-caregivers' self-reported QoL.

Methods: Using a cross-sectional design, 54 PWD and their spouse-caregivers completed the QoL in Alzheimer's Disease scale (QoL-AD), questionnaire on sexual experience and satisfaction (QSES), Mini-Mental State Examination (MMSE), Clinical Dementia Rating scale (CDR), Assessment Scale of Psychosocial Impact of the Diagnosis of Dementia (ASPIDD), Pfeffer functional activities questionnaire (FAQ), the Cornell scale for depression in dementia (CSDD) and Zarit burden interview (ZBI). Univariate and multivariate regression analyses were conducted to identify the factors that influenced the spouse-caregivers' QoL ratings.

Results: We did not find a significant difference in QoL between male and female spouse-caregivers ($p = 0.71$). We also found that 13% of males and 48.1% of females demonstrated moderate to severe sexual dissatisfaction. However, we did not find a significant correlation between spouse-caregivers' QoL and sexual satisfaction ($p = 0.41$). The linear regression indicated that impaired awareness and lower QoL of PWD were significantly related to spouse-caregivers' QoL ($p = 0.000$).

Conclusions: The spouse-caregivers' QoL is influenced by awareness of disease and PWD QoL. Our study would be helpful for the development of adequate psycho-educational approaches to increase spouse-caregivers' QoL, considering the specificities of the couples' relationship.

Psychosocial impact of early onset dementia among caregivers

Impacto psicossocial da demência de início precoce em cuidadores

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Financially, it has become even more difficult because we both worked. Then, he stopped working and I had to deal with our business all by myself. I cannot do anything else. And I just keep the clients that we had before he got sick. I cannot start anything bigger, because I don't have any help, because of him, you know. Because I have to look after him (...) I had to start living with my mom as well, because we don't have our own house and paying rent isn't that easy. So, I started living with my mom. (Caregiver 5)

QUALIDADE DE VIDA EM IDOSOS

- Avaliação não deve se restringir à saúde
- Melhor conhecimento das características dos diferentes grupos que compõem a população idosa.
- Desenvolvimento de ações direcionadas às diversas dimensões da qualidade de vida

Obrigada!

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