

AGING AND HEALTH IN RURAL ENVIRONMENTS: A SYSTEMATIC LITERATURE REVIEW

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ABSTRACT. In the world scenario, the estimate is that Brazil will be the sixth country in the world in number of elderly people by 2025. The article proposed here is a systematic review of the literature, of the main aspects pointed out about the health of the elderly population, who live in the rural areas, in surveys carried out in Brazil in the last five years. In the months of march to june 2020, articles indexed in the databases of PePSIC, BVS-Psi and SciELO were searched. 24 articles were found and, after the exclusion process, 14 articles were obtained for this systematic review. All selected articles were published in national magazines. Of these, four are in nursing magazines; one in the area of physical education; three in journals with an emphasis on public health; two in an epidemiology journal; three in gerontology journals and one in a journal related to professional health education. Based on the analyzed studies, it is possible to understand the specificities related to the health of the elderly population living in rural areas: environmental conditions, difficulties in accessing health services, race and gender inequalities in our country, such as the main aspects that interfere in the quality of life. Studies on the health of the rural elderly population mainly focus on self-perception of health conditions and quality of life.

Keywords: Aging; health; rural context.

ENVELHECIMENTO E SAÚDE EM AMBIENTES RURAIS: UMA REVISÃO SISTEMÁTICA DA LITERATURA

RESUMO. No cenário mundial, a estimativa é de que o Brasil seja o sexto país do mundo em número de pessoas idosas até 2025. O artigo aqui proposto é uma revisão sistemática de literatura, dos principais aspectos apontados sobre a saúde da população idosa, que vive no meio rural, em pesquisas realizadas no Brasil nos últimos cinco anos. Foram pesquisados, nos meses de março a junho de 2020, artigos indexados nas bases de dados da PePSIC, BVS-Psi e SciELO. Foram encontrados 24 artigos e, após o processo de exclusão, obtiveram-se 14 artigos para essa revisão sistemática. Todos os artigos selecionados foram publicados em revistas nacionais. Destes, quatro se encontram em revistas da área da enfermagem; um na área da educação física; três em periódicos com ênfase em saúde coletiva; dois em revista de epidemiologia; três em revistas de gerontologia e, um em periódico relacionado à educação profissional em saúde. A partir das pesquisas analisadas pode-se compreender quais são as especificidades relacionadas à saúde da população idosa residente no meio rural: foram apontadas as condições ambientais, as dificuldades de acesso aos serviços de saúde, desigualdades de raça e gênero existentes no nosso país, como os principais aspectos que interferem na qualidade

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de vida. Os estudos acerca da saúde da população idosa rural se centram majoritariamente na autopercepção das condições de saúde e da qualidade de vida.

Palavras-chave: Envelhecimento; saúde; meio rural.

ENVEJECIMIENTO Y SALUD EN AMBIENTES RURALES: UNA REVISIÓN SISTEMÁTICA DE LA LITERATURA

RESUMEN. En el escenario mundial, la estimación es que Brasil será el sexto país del mundo en número de ancianos para el año 2025. El artículo aquí propuesto es una revisión sistemática de la literatura, de los principales aspectos señalados sobre la salud de la población anciana, que vive en zonas rurales, en encuestas realizadas en Brasil en los últimos cinco años. En los meses de marzo a junio de 2020 se realizaron búsquedas de artículos indexados en las bases de datos de PePSIC, BVS-Psi y SciELO. Se encontraron 24 artículos y, tras el proceso de exclusión, se obtuvieron 14 artículos para esta revisión sistemática. Todos los artículos seleccionados fueron publicados en revistas nacionales. De estos, cuatro están en revistas de enfermería; uno en el área de educación física; tres en revistas especializadas en salud pública; dos en una revista de epidemiología; tres en revistas de gerontología y uno en una revista relacionada con la educación sanitaria profesional. A partir de los estudios analizados, es posible comprender las especificidades relacionadas con la salud de la población anciana residente en áreas rurales: condiciones ambientales, dificultades para acceder a los servicios de salud, desigualdades raciales y de género en nuestro país, como los principales aspectos que interfieren en la calidad de vida. Los estudios sobre la salud de la población rural anciana se centran principalmente en la autopercepción de las condiciones de salud y calidad de vida.

Palabras clave: Envejecimiento; salud; medio rural.

Introduction

From the second half of the 20th century until 2025, estimates indicate that the number of elderly people worldwide will grow by 223% (Organização Mundial da Saúde, 2005). Given this, the World Health Organization (WHO) points to population aging as one of humanity's greatest achievements and also one of its greatest challenges due to the need to design programs, actions, and public policies related to the social and economic demands arising from this global phenomenon.

Currently, there are programs and policies concerned with the health of the elderly associated with a comprehensive view of the subject, which prioritizes the understanding that health means physical, psychological, and social well-being. Such policies and programs are based on the notion of active aging, which aims to "[...] increase the expectancy of a healthy life and the quality of life for all people who are aging, including those who are frail, physically disabled and who require care" (Organização Mundial da Saúde, 2005, p. 13).

Thus, the importance of the growth of this population group highlights the interest, according to authors such as Rosset, Pedrazzi, Roriz-Cruz, Morais and Rodrigues (2011), in the peculiarities of the health-disease process and the importance of prevention at all levels of health care. Not only to reduce the final costs for the health system but mainly due to the social importance of the phenomenon of longevity, due to the peculiarities of this age group. Thus, the authors reinforce that more studies should be carried out to examine the

psychological, cultural, socioeconomic, and epidemiological particularities of the aging population.

In the Brazilian context, there are endless realities to be understood, due to the heterogeneity of the national territory. Thus, the need to understand the demands of each context is highlighted, so that strategies can be designed that aim at the quality of life, health promotion, and autonomy of elderly people in different cultures and different territories, with a view to active aging. Based on this understanding, the present study investigated through a systematic review of the literature, the main aspects of the health of the elderly population living in rural areas, in research carried out in Brazil over the last five years. Although access to information related to preventive measures and individual well-being, as well as the increase in the level of education, have provided a portion of the population with the possibilities of longevity and a healthier life, a large part of the world's population is still deprived of these (Areosa & Freitas, 2020).

Currently, some studies highlight health and well-being issues in the aging process in different populations, such as the indigenous population (Gallardo-Peralta & Sanchez-Moreno, 2019), the LGBT+ population (Paulo & Esgalhado, 2020), the black population (Oliveira, Silva, Silva, & Thomaz, 2014), the population living in urban contexts (Almeida, Nunes, Duro, Lima, & Facchini, 2020) and rural contexts (Areosa & Freitas, 2020), among others.

The social and cultural context, combined with chronological, biological, and psychological aspects, constitute the factors involved in human aging, which is a heterogeneous process (Schneider & Irigaray, 2008). Therefore, in order to think about active aging, defined by the Organização Mundial da Saúde (2005) as a process that aims to improve the quality of life of elderly people through the optimization of health, participation, and safety opportunities, the different aspects must be considered in studies, programs and policies related to this population.

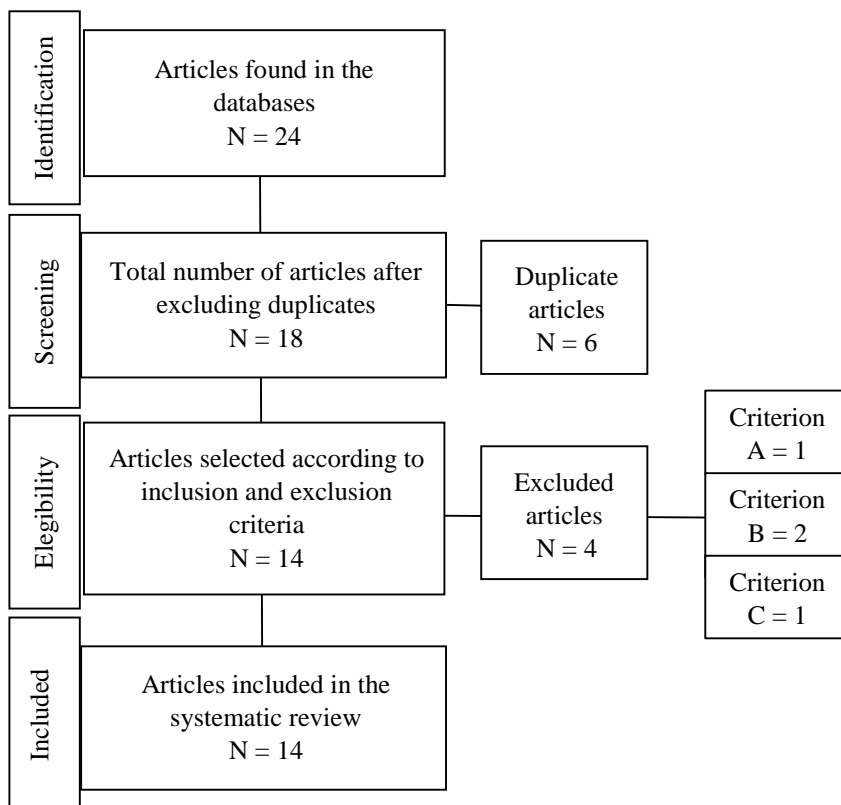
Studies related to the health of elderly people living in rural areas are still scarce, that is, this is a topic that has been poorly and only recently explored since the studies carried out are mostly focused on the elderly population living in urban areas (Konzen & Freitas, 2019).

Method

The methodological guidelines for the preparation of systematic reviews provided by the Ministry of Health recommend structuring the research question in the format of the PICO acronym, in which each letter refers to the following components, respectively: Population (P), Intervention (I), Control (C) and outcomes (O) (Brasil, 2012). In this systematic review, the aim was to research the elderly population (P) on health-related issues (I), to verify their consequences in the rural context in question (O). The Control (C) component was not used in this review, since it does not fit the profile of the selected articles, since no experimental studies with control groups were found. Through a qualitative study based on a literature survey, articles indexed in the PePSIC, BVS-Psi, and SciELO databases were searched from March to June 2020. The keywords 'Aging' AND 'Health' AND 'Rural environment' were crossed and the search was carried out in the mentioned databases, with restrictions regarding the years of publication of the articles, including only those published between 2015 and 2020. The inclusion criteria were: A) addressing aging in rural areas as a central theme; B) articles that address, albeit not centrally, the theme of the health of the elderly population. The exclusion criteria were divided into A, B, and C, being: A) articles not published between 2015 and 2020; B) articles that do not address the

theme of aging as a central theme and C) studies carried out outside the Brazilian territory. From this, the material found in the databases was screened by reading the abstracts of the articles, to check their adequacy to the inclusion and exclusion criteria previously established. After this, duplicate articles were removed and the final version of the database was used for data extraction. The following information was extracted from the selected articles: 1) year of publication; 2) journal of publication; 3) country of publication; 4) method; 5) participants; 6) main findings, and 7) outcome. These data were divided into two tables, from which an explanatory summary of the studies was made. The selection of the analyzed articles was carried out according to the steps explained in Figure 1.

Figure 1. Selection of articles analyzed in the systematic review.



Source: Prepared by the authors for this study (2020).

Results

Based on the criteria selected to search for articles on the topic, a total of 24 articles were found with the keywords 'Aging' AND 'Health' AND 'Rural environment' as descriptors in the SciELO, PePSIC, and BVS-Psi databases, between the years 2015 and 2020. After removing duplicates, 18 articles were obtained for evaluation according to the inclusion and exclusion criteria. Still, in the exclusion stage, one article was removed by criterion A, as it had not been published within the period selected for the systematic review, although it still appears in the database as belonging to the year 2019; two were removed because they did not address aging as a central theme (criterion B), and one was discarded because it was not a study carried out in the Brazilian territory (criterion C), totaling four articles removed by the exclusion criteria. Thus, 14 articles were retained to be part of this systematic review.

The selected articles were published between 2015 and 2020, with two of them published in 2019, six in 2018, one in 2016, and five in 2015. All selected articles were published in national journals. Of these, four were published in nursing journals; one in a physical education journal; three in journals focusing on public health; two in an epidemiology journal; three in specialized journals in the field of gerontology and, finally, one in a journal with themes related to professional health education.

The methodologies used in the articles were diverse, with ten of them being quantitative, three qualitative, and one mixed. Among the qualitative studies, two of them used methodologies inspired by ethnography, and one of them was based on Paulo Freire's research itinerary. Of the quantitative studies, two were cohort studies, seven were cross-sectional, and one combined a cross-sectional study with a cohort study. Finally, the article that employed a mixed methodology groups quantitative and qualitative techniques to describe and analyze the selected categories intersectionally.

Regarding the participants in the selected articles, 13 studies were restricted to the elderly population (60 years or older), and one focused on men suffering from chronic cardiovascular disease, without an age marker. Of the 14 selected articles, ten focused exclusively on the rural population; one presented a mixed sample (urban and rural population); one corresponded to the urban area of the municipality of Canindé, state of Ceará, Brazil, and two used data from the SABE Study, conducted with the population of the municipality of São Paulo, state of São Paulo, Brazil. More details about the population are listed in Table 1.

Different findings were observed from this systematic review on the health of the elderly population living in rural areas, in research conducted in Brazil and published in the last ten years.

Table 1 - Data extraction: year, journal, country, methodology, and participants.

| Year | Journal | Country | Methodology | Participants |
|---|--|---------|-------------------------------|---|
| Burille, A. <i>et al.</i> (2018). | Saúde e Sociedade | Brazil | Qualitative. | Rural community in a municipality in the state of Rio Grande do Sul. |
| Burille, A., Gerhardt, T. E. (2018). | Physis: Revista de Saúde Coletiva | Brazil | Qualitative. | Rural community in a municipality in the state of Rio Grande do Sul. |
| Ferreira, J. P., Leeson, G., Melhado, V. R. (2019). | Trabalho, Educação e Saúde | Brazil | Quantitative and qualitative. | 500 elderly people, living in the rural area of São Paulo. |
| Garbaccio, J. L. <i>et al.</i> (2018). | Revista Brasileira de Enfermagem | Brazil | Quantitative. | 182 elderly people, aged at least 60, living for up to 54 years in the rural area. |
| Gomes, M. M. <i>et al.</i> (2015). | Revista de Saúde Pública | Brazil | Quantitative. | Data from the SABE study. |
| Lange, C. <i>et al.</i> (2018). | Revista Brasileira de Enfermagem | Brazil | Qualitative. | 17 elderly people living in a rural area of a municipality in southern Brazil. |
| Mendes, J. M. <i>et al.</i> (2015). | Revista Kairós Gerontologia | Brazil | Quantitative. | 104 elderly people living in a rural area of the municipality of Jequié, state of Bahia. |
| Pedreira, R. B. S. <i>et al.</i> (2016). | Revista Kairós Gerontologia | Brazil | Quantitative. | 85 elderly people from rural areas in the Brazilian Northeast region. |
| Pegorari, M. S. <i>et al.</i> (2015). | Revista da Educação Física/UEM | Brazil | Quantitative. | 850 elderly people living in rural areas. |
| Pereira, D. S., Nogueira, J. A. D.; Silva, C. A. B. (2015). | Revista Brasileira de Geriatria e Gerontologia | Brazil | Quantitative. | 5,214 elderly people living in the urban area of the municipality of Canindé, state of Ceará. |
| Preto, L. S. R. <i>et al.</i> (2018). | Revista de Enfermagem Referência | Brazil | Quantitative. | 435 elderly people living in rural areas. |
| Santos, J. L. F., Duarte, Y. A. O.; Lebrão, M. L. (2019). | Revista Brasileira de Epidemiologia | Brazil | Quantitative. | Data from the SABE study. |
| Sousa, F. J. D., Gonçalves, L. H. T., Gamba, M, A. (2018). | Revista Cuidarte | Brazil | Quantitative. | 130 elderly people living in urban and rural areas. |
| Teixeira, F. N. <i>et al.</i> (2015). | Revista Brasileira de Epidemiologia | Brazil | Quantitative. | 498 elderly people from Carlos Barbosa, state of Rio Grande do Sul. |

Source: Prepared by the authors for this study (2020).

Discussion of results

An intersection significantly found in the studies analyzed is the gender relationship and how it interferes with how men and women treat their health differently and the care they take of it. The social category of gender was constructed critically to address sexual roles, “[...] a prescriptive relationship category composed of multiple elements with different meanings, although they all have in common the fact they refer to the specificity of psychosocial traits and characteristics linked to the sexual dichotomy/binarity” (Caravaca-Morera & Padilha, 2017, p. 1306).

Thus, among the findings of Burille, Gerhardt, Lopes and Dantas (2018), constructed through a study carried out with 12 men living in rural areas who self-reported cardiovascular problems, the authors highlight three categories of predominant male subjectivities: 1) not thinking or talking about the disease; 2) shame of depending on someone; 3) when you are old, it is not the same thing.

The authors observed in the statements of rural men that, as they grow older, they consider the fact that they spend more time in the domestic space and have a lower capacity for material reproduction as situations of imprisonment, accompanied by great discomfort, mainly because they are occupying a place that they consider to belong to a woman. Furthermore, they observed that, in rural areas, being away from the world of work, whether due to illness or retirement, commonly has negative repercussions for men, since work is often considered a source of renewal, prestige, and recognition. Finally, the study concludes that prescriptions related to masculinity “[...] can cause harm to the physical, mental and social health of men, especially in old age, when the boundaries between what is desired and what is possible to achieve become more pronounced” (p. 444), and emphasizes the need for a sensitive and accurate view of actions to promote men’s health, which takes into account the particularities of this category.

Here, a social representation appears strongly, a stereotype constructed in our society of what the role of men and women is, and the statements characterize that as men grow older and no longer have the same productivity, they feel bad, compare themselves to women, and sometimes get sick.

In a study on the interrelations between male subjectivity, aging, rural areas, and chronic illness, Burille & Gerhardt (2018) use Honneth's Theory of Recognition to analyze how recognition is produced in love, rights, esteem, and solidarity among ten men living in rural areas, aged 60 or over, with chronic illness. The authors point out that recognition through love was strictly related to the issue of care, which is experienced not only in a positive way, since, according to the study participants, it marks their vulnerabilities and limitations about self-sufficiency, especially for the exercise of rural work. Regarding recognition through rights, the findings indicate that retirement and access to health services are essential. Authors such as Oliveira & Aquino (2017) point to the importance of the fact that retirement represents the certainty that every month they will receive a fixed amount of money on an agreed date, a fact that did not occur before and which brings relief to the daily lives of these people, who suffer declines in their health in old age.

The authors point out that retirement, in the participants’ view, also expresses a double face: it generates recognition - through the historical rescue of rural workers' rights and the recovery of gaps left by the state concerning medications for the treatment of chronic diseases - but it also produces suffering, as it is not a gain derived from work and when extended to women, it leads to relational changes seen as negative. Women start to receive their own money/rural retirement payment, which sometimes refers to the first time they have their own income, since in most agricultural properties men are the ones who sell and

manage the family's money and this fact can change the power relations established throughout coexistence.

As for recognition through esteem and solidarity, the authors point out that the group manifests the identities of settler, worker, and German as reinforcing a sense of belonging to a community, which triggers a network of solidarity and provides a feeling of safety. With these findings, Burrile & Gerhardt aim to contribute to the production of recognitions that generate public policies that pay attention to singularities, often forgotten or neglected, whether by the state or even by academia.

Considering the issue of old age in rural areas as the initial problem of the study, Ferreira, Lesson and Melhado (2019) seek to deepen knowledge about the elderly population through analysis and description of the social conditions related to race/ethnicity, gender, class and education of a sample of 250 women and 250 men, in which 50% of the sample identified themselves as 'white' and 'black', all aged 60 or over, living in rural areas and users of the Unified Health System. As general information, the authors present the following data: predominant income of one minimum wage; 59.4% declared themselves illiterate, 23.8% with incomplete elementary education, 15% with complete elementary education, and 1.8% with complete high school. The authors present results that indicate that in relation to women and men, self-declared white or black, of the same age group, self-declared black women are in a position of greater vulnerability concerning education and income, which demonstrates the gender and race/ethnic inequalities existing in Brazil.

They also highlight the fact that women, especially those who self-identify as black, because they have a lower proportion of retirement income than men, resort to informal work much more than men in old age, to fill the gaps left by social security. With the results presented, the authors intend to oppose the false idea, celebrated since the 1988 Constitution and its adjacent policies – such as the National Policy for the Elderly and the Statute for the Elderly –, of a discontinuity in generational inequalities, especially concerning the rural elderly population. Inequalities are many, as are the vulnerabilities of the elderly population, and this article shows a facet that is already perceived with black women in other age groups, which is again reproduced in old age, that is, that they are the most unassisted and unprotected by public policies in our country.

In a cross-sectional study with a sample of 182 elderly people aged at least 60 years and living in the rural area of the central-west of Minas Gerais for up to 54 years, Garbaccio, Tonaco, Estêvão and Barcelos (2018) sought to evaluate the quality of life and health of this population. The profile obtained in the sample indicated that the average age was 69 years old, 50.5% were female; 70.3% were married; 87.9% were retired; 51.6% were farmers; 25.8% were housewives; 54.9% stated that they did not currently work; 54.9% had incomplete elementary education, with the ability to read and write; 74.2% could read and write; 96.2% stated that they owned their own home. The authors reported that the younger elderly population, those under 69 years of age, married, who had lived in rural areas for a shorter period and were born in urban areas, presented a satisfactory quality of life. On the other hand, the elderly people who stated that they could not read or write, who received financial assistance, had poor memory assessment and were dissatisfied with life, as well as those who evaluated their memory as very good, who lived alone, were smokers and did not receive care when sick, presented unsatisfactory quality of life indices. The results obtained in this study led the authors to the conclusion that the elderly population living in rural areas in the center-west of Minas Gerais presents a good quality of life and health since they indicated satisfaction with life and easy access to health services. Nevertheless, they point out that, as in any other population, there is a part of these people who need more

attention. It is noteworthy that understanding the quality of life of the elderly population living in rural areas is facilitated by knowledge about how the factors that influence aging and health are present in the daily lives of this population.

Using data obtained by the SABE (Health, Well-being, and Aging) Study, conducted between 2000 and 2006, Gomes, Turra, Fígoli, Duarte e Lebrão (2015) analyzed the association between socioeconomic and health conditions in childhood and mortality in elderly people. The sample of this study consisted of 2,004 elderly people, of which 1,355 were survivors and 649 died. As a result of the study, the authors observed that the mortality rate was significantly higher for elderly males and the oldest age group. They showed that the higher the level of education and socioeconomic status, the higher the survival rate. The highest mortality rate was found for those who self-assessed their nutritional status as poor, widowers, smokers, those who did not practice physical activities regularly, and those who regularly consumed alcoholic beverages. Regarding the regions inhabited by the population studied, the authors indicate that the mortality rate was 26.6% lower for those who lived at least five years in urban areas up to the age of 15, compared to those who lived in rural areas. Gomes et al. (2015) conclude that the environmental conditions of children and the creation of opportunities in early adulthood contribute significantly to greater survival at older ages.

In a qualitative study, guided by Paulo Freire's research itinerary, which consists of thematic investigation, decoding, and critical unveiling, Lange et al. (2018) carried out six culture circles with a sample of 17 elderly people living in the rural area of a municipality in southern Brazil, to understand how they promote their autonomy within the perspective of active aging. Regarding the profile of the study participants, the authors indicate that the average age was 70 years; the average education level was 3.3 years of schooling; one did not have retirement benefits, and nine continued to work as farmers. According to the authors, all of them had some kind of illness, with 14 reporting high blood pressure and all undergoing medical treatment. The authors highlight two main significant themes obtained through culture circles carried out for the study, namely: joint pain and participation in groups. The study demonstrated that, for the participants, joint pain is an obstacle to autonomy, while senior dancing is a facilitator of autonomy promotion. Based on the results obtained, the authors conclude that the elderly population considers that their emancipation necessarily depends on their physical capacity to perform activities of daily living. This conclusion is directly related to the concept of active aging proposed by the WHO and brought up in the introduction of this article when it points to the relationship between lifestyle and health conditions.

In a cross-sectional study with 104 elderly people living in rural areas, Mendes, Rocha, Santos, Vasconcelos e Diniz (2015) aimed to analyze the factors related to subjective memory complaints in this population. The study found a higher prevalence of memory complaints in elderly men, aged 60 to 79 years, single, illiterate, with an income of up to one minimum wage, who reported black skin color; however, the variables did not present statistically significant associations. The authors also indicate that 87.5% of the elderly people who reported a positive health perception did not present a risk of subjective memory loss, and point out that this indicator was prevalent among individuals who self-reported regular and negative health status, those with hypertension, and those with a sedentary lifestyle. In conclusion, the study highlights the significant prevalence of memory-related complaints among the elderly individuals studied. Therefore, they point to the need for greater attention from health professionals in the assessment and prevention of such problems. Finally, to better understand the factors associated with subjective memory

complaints, they recommend expanding studies on the subject, especially concerning the elderly population living in rural areas. However, even without being able to demonstrate a significant relationship between the study variables and memory loss, researchers on the subject warn that people with greater difficulties in their lives, and fewer opportunities for adequate nutrition and schooling, are more likely to have earlier memory loss.

In order to assess the prevalence and factors associated with frailty in the elderly population living in rural areas, Preto, Conceição, Amaral, Figueiredo e Preto (2018) conducted a cross-sectional study with 435 elderly people classified according to the frailty phenotype. The authors point out that the study sample was mostly female (62.3%), with an average age of 74 years. The condition of 'being frail' prevailed in 23.3% of women and 15.9% of men. Furthermore, the authors highlight that marital status and retirement are sociodemographic factors associated with the condition of frailty. They observed that frail individuals are older than pre-frail individuals, and the latter are older than non-frail individuals. A large part of the sample had vision difficulties, hearing problems, and swallowing problems, factors that the authors point out are associated with the condition of frailty. Among the factors associated with frailty found in the study, the authors also highlighted the presence of hospitalizations in the last year, the use of walking aids, the use of a greater number of medications, more comorbidities, and a worse average score on instruments that assess functional independence for the execution of basic and instrumental activities of daily living. They concluded that the variables most associated with frailty were the Charlson Comorbidity Index (CCI) score, the scores on the Lawton and Brody scale (LBS), age, and the number of medications used daily.

Using a methodology based on the Health, Well-Being, and Aging (SABE) study and its cohorts, Santos, Duarte and Lebrão (2019) evaluated the associations between previous conditions and the health of older adults. The authors investigated three cohorts of the SABE study, called A, B, and C, composed of members born in the five-year periods from 1935 to 1950. The sample of the aforementioned study consists of 426 people in the year 2000, 298 people in the year 2006, and 355 people in the year 2010. As significant results of this analysis, the authors present the following points: 1) the most recent cohort (C) presents a better health assessment than the reference cohort (A); 2) males evaluate their health as better than females; 3) individuals with 12 or more years of education evaluate their health as 'Good' to a greater extent when compared to those with no education; 4) people who have not spent at least five years of their lives in rural areas before the age of 15 are more likely to rate their health as 'Good'. The authors conclude that understanding the influence of past causes on the self-assessment of the health of elderly people is significant for individual and collective care for the elderly. This conclusion can be associated with the concept of quality of life, which is a multidimensional concept with a subjective aspect in which each person assesses their quality of life based on aspects that are relevant to them and crucial to their assessment. It is worth emphasizing that, according to the Organização Mundial da Saúde (2005, p. 1406), "[...] the individual's subjective perception of their position in life within the context of the culture and value system in which they live must be following their goals, expectations, standards, and concerns".

Based on a cross-sectional study conducted with 130 elderly individuals (65 urban residents and 65 rural residents) served by the family health program in the municipality of Benevides, located in the northern region of Brazil, Sousa, Gonçalves and Gamba (2018) aimed to describe the functional capacity of this population. Comparative data between urban and rural areas show that in the urban area, the majority were female (55.4%), with an average age of 73 years, married (36.9%), and with incomplete primary education

(44.6%); in the rural area, 60% were female, with an average age of 67.8 years, married (58.5%) and with incomplete education (73.8%). According to the study, the majority of the sample, in both urban and rural areas, with no statistical difference, demonstrated some degree of dependence. The results of the study show that elderly people in urban areas had a better score, although not very significant, for preserved functional capacity. This difference is justified by the authors with the assumption that there is better access to health services in urban environments compared to rural areas. Finally, they point out that a detailed assessment of the functional capacity of the elderly population is relevant for controlling and maintaining active and healthy aging.

In a cross-sectional study with 85 elderly individuals living in a rural area of a municipality in northeastern Brazil, Pedreira, Andrade, Barreto, Pinto e Rocha Jr. (2016) observed the factors associated with negative self-perception of health in this population. The sample showed an average age of 73 years, the majority (58.82%) were female, illiterate (63.53%), lived with someone (78.82%), were Catholic (67.06%), and self-reported as 'single/other' (56.47%). The authors observed that negative self-perception of health was reported by 55.29% of the population studied. When considering health conditions and lifestyle habits, the authors found that negative self-perception had a significant association with the variables 'sleep disorders', 'high blood pressure', 'back pain', and 'smoker'. In conclusion, the authors highlight self-perception of health as a good indicator of the living conditions and health of elderly people, since this, by considering subjective issues about determining health status, is relevant in identifying the needs of this population in a more in-depth manner, not only through an analysis of the presence/absence of diseases or their functional status.

In order to determine the relationships between health conditions and quality of life with the practice of physical activity (PAF) during leisure time among the rural elderly population, Pegorari, Dias, Santos e Tavares (2015) applied a cross-sectional, observational, and analytical household survey to a sample of 850 elderly people living in the rural area of the municipality of Uberaba, state of Minas Gerais, who did not present cognitive decline. As a result, the authors showed that inactive elderly people presented a greater indication of depression and a higher number of morbidities and that the practice of physical activity during leisure time was associated with higher scores in the physical, psychological, and environmental domains. Based on these findings, the authors conclude that encouraging the practice of physical activity during leisure time is relevant concerning increasing the quality of life and improving the health conditions of the rural elderly population.

Through a quantitative, cross-sectional, home-based study, Pereira, Nogueira and Silva (2015) sought to map aspects related to health and quality of life in the perception of the elderly population living in the municipality of Canindé, located in the Central Sertão region of Ceará. The sample of this study, 372 elderly people, was mostly female, married, of mixed race, aged between 60 and 69 years, with incomplete elementary education, retired, and with an income of up to one minimum wage. Their results allowed the authors to observe that the majority of the sample had been in consultations and hospitalized in the last 12 months. This indicated a high prevalence of hypertension, diabetes, osteoporosis, anxiety, and cardiovascular diseases, even though the majority indicated their health and quality of life as 'good'. Furthermore, they observed that the psychological domains and social relationships were shown to be positive aspects of quality of life, while the environment was the aspect with the lowest average value. Due to the influence of the environment on good health conditions and quality of life observed in the study sample, the

authors point to the importance of building environments that promote health, quality of life, and longevity. Finally, they point to the need to develop health promotion actions for the elderly population of the Central Sertão region of Ceará.

In a cross-sectional study nested within a cohort study, Teixeira, Martins, Celeste, Hugo e Hilgert (2015) assessed the associations between resilience and oral health-related quality of life in a simple random sample of 498 independent elderly individuals living in the city of Carlos Barbosa, state of Rio Grande do Sul. The study sample had an average age of 70.95 years, the majority of whom were female (66.87%), living in urban areas (53.21%), married (64.06%), 45.92% had not completed primary school, 60.45% participated in groups, and most (58.43%) reported seeking dental care only because of oral problems. The authors point out that independent elderly individuals, living in rural areas and who are married are more likely to perceive the impacts on oral health. Based on these results, the authors conclude that it is necessary to broadly study people's potentialities and perceptions so that new findings can reveal what is truly relevant in promoting positive self-perception of oral health, as well as self-efficacy and empowerment about oral health. They understand that care for the elderly in Brazil has not been aligned with the growth of this population, which can influence their quality of life. Therefore, the authors indicate the importance of knowledge about how this population perceives their issues so that actions can be developed that truly meet their real demands.

Thus, to conclude this discussion, the quality of life in the different studies analyzed is associated with the health conditions of the elderly population, indicated as self-perception of living conditions and the context in which they live, remembering that the findings focused on elderly people living in rural areas.

Final considerations

Studies on the health of the rural elderly population mostly focus on self-perception of quality of life and health conditions, as well as on identifying which factors can promote or hinder positive self-perception about these markers. Among these factors, the importance of environmental conditions was frequently reported by the selected studies, which indicate that living in rural areas in the first years of life, due to the difficulty in accessing health services, is associated with negative self-perception of elderly people regarding their quality of life and health conditions.

The racial and gender inequalities in our country, which are responsible for the greater vulnerability of specific social groups, were also highlighted as significant factors in determining the quality of life and health conditions of the elderly population in rural areas. In addition, the gender issue was related to the perception of retirement in the rural context, since some identities prioritize recognition for work. Therefore, especially from the men's point of view, retiring means no longer being the provider through work, which was pointed out by them as something unfavorable. In this context, the retirement of rural workers, when achieved as a right by women, led to a change in gender relations, which is sometimes seen negatively by men. And supported by the reinforcement of identities based on gender inequalities, the changes in gender relations reflect impacts on the biopsychosocial health of the rural elderly population.

When talking about biopsychosocial health, the World Health Organization reinforces the importance of looking beyond the aspects of health and disease, but also of paying attention to social, emotional, and psychological aspects, beliefs, and environmental factors,

among others. All of these are associated with the quality of life and well-being of the population.

The physical capacity for activities of daily living was also identified as a determinant of the quality of life and health conditions of the rural elderly population since it is directly related to the possibility of autonomy through the performance of daily tasks. This concept of autonomy is related to the concept of active aging advocated by the WHO, which states that in addition to physical health conditions, it is necessary to seek conditions that keep people able to make their own decisions for longer.

The analysis of the selected articles sheds light on the specific needs and challenges related to the health of the elderly population. The scarcity of scientific publications in the area of psychology on the topic was highlighted, which is essential for addressing the issues involving the mental health demands of the elderly population.

Therefore, given these findings, further scientific productions on the health of the elderly living in rural contexts are necessary, as well as reflections and debates on the need and struggle for public policies, programs, and actions that address the demands of this population.

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Received: Nov. 17, 2020

Approved: Mar. 10, 2021