The impact of retirement on the quality of life of the elderly*

REPERCUSSÕES DA APOSENTADORIA NA QUALIDADE DE VIDA DO IDOSO

LAS REPERCUSIONES DE LA JUBILACIÓN EN LA CALIDAD DE VIDA DEL ANCIANO

Líria Núbia Alvarenga¹, Luciana Kiyan², Bianca Bitencourt³, Kátia da Silva Wanderley⁴

ABSTRACT

The purpose of this qualitative study was to understand how the elderly experience retirement and the effects of retirement on quality of life. Content analysis was on thematic categories obtained through semistructured interviews with elderly retirees who attended the Geriatrics Department at Hospital do Servidor Público Estadual - São Paulo (Brazil). Six individuals were interviewed. Positive attitudes facing retirement were predominant. The meaning given to retirement and planning skills were essential to understand the retirement experience. Furthermore, the change in environments, emptying of routines, and the availability of food are factors that appear closely related to the changes in eating habits and in body weight. Therefore, retirement is a time marked by changes in the social, emotional and nutritional aspects of life for the elderly, with either positive or negative effects, depending on the meanings that were attributed.

KEY WORDS

Retirement. Aged. Quality of life.

RESUMO

Trata-se de um estudo qualitativo, com objetivo de compreender como o idoso vivencia a aposentadoria e suas repercussões na qualidade de vida. A metodologia adotada foi a análise de conteúdo, a partir de categorias temáticas obtidas por meio de entrevistas semiestruturadas com idosos, aposentados, que freqüentam o Ambulatório do Serviço de Geriatria do Hospital do Servidor Público Estadual - SP. Foram entrevistados seis indivíduos, sendo predominante o relato de atitudes positivas frente à aposentadoria. Observou-se que o significado atribuído a aposentar-se e a capacidade de planejamento foram determinantes para o modo como a aposentadoria foi vivenciada. Mudança de ambiente, esvaziamento da rotina e disponibilidade de alimentos apareceram como fatores atrelados a alterações no hábito alimentar e também no peso corporal. Logo, a aposentadoria é um momento de mudanças nos aspectos sociais, emocionais e nutricionais dos idosos e que repercutem de forma positiva ou negativa conforme os significados que lhe são atribuídos.

DESCRITORES

Aposentadoria. Idoso. Qualidade de vida.

RESUMEN

Se trata de un estudio cualitativo, con el objetivo de comprender como el anciano vivencia la jubilación y sus repercusiones en la calidad de vida. La metodología adoptada fue el análisis de contenido, a partir de categorías temáticas obtenidas por medio de entrevistas semiestructuradas con ancianos, jubilados, que frecuentan el Ambulatorio del Servicio de Geriatría del Hospital del Servidor Público Estatal - SP. Fueron entrevistados seis individuos, siendo predominante el relato de actitudes positivas frente a la jubilación. Se observó que el significado atribuido a jubilarse y la capacidad de planificación fueron determinantes para el modo como la jubilación fue experimentada. Cambio de ambiente, fin de la rutina y disponibilidad de alimentos aparecieron como factores relacionados a alteraciones en el hábito alimentar y también en el peso corporal. Luego, la jubilación es un momento de cambios en los aspectos sociales, emocionales y nutricionales de los ancianos y que repercuten de forma positiva o negativa conforme los significados que le son atribuidos.

DESCRIPTORES

Jubilación. Anciano. Calidad de vida.

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^{*} Extract from the study "Repercussões da aposentadoria na qualidade de vida do idoso", Geriatrics Outpatient Clinic at "Francisco Morato de Oliveira"State Public Servants Hospital, São Paulo, 2007. ¹ Nutricionist. Specialist in Clinical Nutrition by GANEP - Human Nutrition. São Paulo, SP, Brazil. Ina_alvarenga@yahoo.com.br ²Psychologist, graduated from São Marcos University. São Paulo, SP, Brazil. Liciana.kiyan@yahoo.com.br ³Nutritionist graduated from University of São Paulo, SP, Brazil. bianca_bitencout@yahoo.com.br ⁴Ph.D. in Clinical Psychology. Professor of the Psychology Course at Faculdades Metropolitanas Unidas, responsible for the Hospital Psychology course. Internship supervisor in the area of Psychological Counseling at Teaching-Clinic, Faculdades Metropolitanas Unidas. Chief of the Psychology Division at State Pubic Servants Hospital, São Paulo, SP, Brazil. katizpsi@uol.com.br



INTRODUCTION

An increase in life expectancy associated with a reduction in fertility rates constitutes a phenomenon called demographic transition. This phenomenon entails the progressive aging of the world's population, which is also observed in the Brazilian people⁽¹⁾. Although it is a natural process, aging causes anatomic and functional alteration, affecting the health of the elderly, and consequently their quality of life⁽²⁾.

However, the quality of life perceived by a person or group reaches beyond physical health, necessitating a broad and complex analysis considering factors such as socio-economic level, emotional state, social interaction, intellectual activity, cultural values, lifestyle, employment and/or daily activities satisfaction, and the living environment⁽²⁾.

A successful aging process requires the maintenance of physical and mental functioning and involvement in social and relationship activities. Also, some recommendations make proposals regarding food intake and practicing physical and cognitive activities⁽³⁾.

Although in old age physical control highly influences the global quality of life of these people, the psychological and social changes in this life stage cannot be ignored. Retirement is thought to be the trigger for these alterations, since it represents social devaluation⁽⁴⁾ and the loss of professional identity.⁽⁵⁾

In our society, which is ordered by capitalist logic, working represents more than an income source for mankind. This human activity enables the subject to organize schedules and routines, establish plans, targets and

aspirations, build affection ties, exercise creativity, ensure independence, and express productivity⁽⁵⁾.

In addition, working is an important element of personal identity construction. This importance is revealed by the emphasis given to our professional occupation when we are introduced to someone. Working contributes to the construction of the social being, since *mankind is produced and reproduced by working*⁽⁵⁾.

Self-recognition and alter-recognition are linked to professional identity. They represent, respectively, the way the subject knows and recognizes himself and the way he is recognized by others. Therefore, professional identity is embedded in subjective values and socially shared values⁽⁶⁾, and this connection between working and the social environment reveals a dialectic relation. At the same time working contributes to the construction of the social being and the social aspect contributes to the construction of the professional being⁽⁵⁾.

By the same token, the values presented by the social environment are highly influential in retirement as they remind people of the imminent arrival of old age, and consequently being considered economically unproductive⁽⁵⁾.

In addition to social values, there are the subjects' intrinsic values that are interconnected with their life history, relation with society, and above all, with their professional role and their way of facing losses and adjusting to new situations. Therefore, if people build, throughout their lives, other sources of satisfaction beyond working, facing this phase can be easier, enabling a restructuring of their identity as a retired person.

Thus, for some people retirement is positively assimilated, leading to reorganization of life; for others, it is significantly damaging, affecting their psychic structure. These effects can manifest through feelings and symptoms like anxiety, depression, irritability, and general dissatisfaction resulting in a reduction in quality of life⁽⁵⁾.

In addition, retirement can have indirect repercussions on the cognitive functioning of the elderly person, since retiring subjects often go through an impoverishment of their social networks and daily activities. These factors are important in postponing the cognitive decline, because the

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richer the retired person's social commitment, intellectual stimulation and physical activities, the lower the risk of dementia⁽³⁾.

Elders' susceptibility to depression also represents a risk to their cognitive integrity. Many studies demonstrate that elderly people suffering from depression show low performance in memory tests, and even greater effects on executive functions associated with attention deficit and decrease in processing speed⁽³⁾.

Retirement repercussions related to emotional and subjective life also can interfere with eating patterns. The loneliness of the elderly population may cause them to lose interest in eating. Before retirement, eating moments were shared with working colleagues, and the time and location of meals were consistent and predetermined⁽⁷⁾.

Another factor influencing eating habits is the decline in income after retirement. More than 15% of elderly people are estimated to have a daily food intake of less than 1000 Kcal/day. In less economically favored populations, this proportion can be even higher. Buying power reduction can also result in consuming lower cost products, leading to monotony in eating habits⁽⁷⁾. Packaged foods such as candies and pasta, or those that are easily prepared, such as teas and toasts, are common among the elderly population. This behavior influences nutrition, creating a risk of inappropriate food intake.

Retirement can be seen as an event wrapped by a series of interconnected critical situations interfering in the quality of life of the elderly. With a view to these aspects, understanding how elders experience the retirement pro-



cess can aid health professionals' efforts to work with this population by bringing them closer to their reality.

AIM

The aim of this study is to understand the implications of the retirement process for the subjective experiences and eating habits of elders in a Geriatric Clinic of a general hospital.

METHOD

This is a qualitative study investigating how retirement affects elders' quality of life by examining emotional and nutritional quality.

The reference population for this study comprised elders from both genders who spontaneously came for consultation during the first two weeks of December 2007 in the Geriatric Service Clinic of Francisco Morato de Oliveira State Public Service Hospital, in São Paulo (SP).

The guidelines established by Resolution 196/96 of the national Council of Health of the Department of Health, regulating ethical care for researches on human beings, were fully observed⁽⁸⁾. The project was approved by the Research Ethics Committee of the institution, by means of protocol # 078/07.

People ranging from 65 to 75 years old who were fully aware of their mental activities, retired according to the State Public Service or the National Social Security Institute (INSS), and who had previously been employed either under the Labor Laws Consolidation (CLT) or as self-employed were invited to participate in this research.

The age bracket definition to participate in this research followed two criteria. The lower limit adopted was that used as a criterion for providing service in the Geriatric Clinic were the study was carried out. The upper limit of 75 years was established with the intention to minimize the influence of memory loss – a common feature of the aging process – in the study. The minimum age for retirement is 60 years old for men and 55 for women⁽⁹⁾, and participants would be asked to remember this period.

When approaching these elders, we provided an explanation about the aims of the study, ensured personal identity secrecy and the right to interrupt participation in case they found it necessary, with no consequences for their care in the Geriatric Clinic or any other service in the institution.

Participation formalities were ensured by signing the free and informed consent form.

Emotional and nutritional aspects of the quality of life were raised through a semi-structured interview. The interview was elaborated with a three-key question script: How was retiring? While you were working, did you think about retirement? and Did you notice any changes in your eating habits after retirement? The script also comprised a place for registering the age, gender and time of retirement of each participant. Secrecy was ensured by the use of name initials in the forms.

The interview was carried out in a room at the Clinic that was reserved for this purpose. Each participant's dialogue was transcribed during the interview by a second researcher in the room for this purpose only, without verbal participation.

The material collected was analyzed according to discursive contents and theme categories. This approach constitutes a method of content analysis in which the text is segmented and regrouped into categories according to analogical themes⁽¹⁰⁾. This method is applied to the understanding of latent contents and searching for the sense in the discourse. It prioritizes the meaning process, allows for the researcher to get closer to many aspects of the relations established by the subjects and their discourse.

The interview analysis followed three stages. First, the material collected was fully read. Then, meaning units were identified; in other words, content parts that were considered as key-ideas. Finally, these units were grouped according to their theme attachment in order to form emerging categories of the analyzed discourses.

RESULTS

Six people participated in the study. Time since retirement varied between 1 and 12 years. The female gender prevailed, represented by five participants as shown in Table 1.

Table 1 - Characteristics of the participants in the study - \tilde{Sao} Paulo - 2007

| Gender | Age (in years) | Time since retirement (in years) |
|--------|--|---|
| Male | 66 | 12 |
| Female | 67 | 4 |
| Female | 67 | 3 |
| Female | 66 | 1 |
| Female | 72 | 2 |
| Female | 68 | 8 |
| | Male Female Female Female Female | Male 66 Female 67 Female 66 Female 66 Female 72 |

Data analysis led to building three categories: Brief reflection about retirement, Retirement subjective experience, and Retirement repercussions on eating habits patterns.

Brief Reflection about retirement

Among the subjects interviewed, four stated that they had thought about retirement, expressing concerns about the future and ability to foresee and prepare for the approaching situation. The two following sentences express these attitudes:



No... I didn't think like that - So, I'll retire, I wasn't anxious about it, thinking that when it arrives, it's okay, I'll be happy (CPS).

Sure, I thought about it. We have to think about it, otherwise, how will we deal with it? I had to think about it to see how life would be (JGZ).

In contrast, the other two interviewees showed great difficulty on thinking about the retirement moment, postponing the event.

I didn't. I saw how people suffered about it and thought that I would have to go through the same thing (CMS).

I thought about it...I feared it a little, because working was good for me, I really liked what I did (ILM).

Retirement subjective experience

Among the six interviewees, four affirmed positive aspects regarding retirement. They associated it with the end of a stage – expressed in the first two sentences – or as a resting and preparation stage for a new life style – expressed in the next two sentences:

Oh, I felt okay, for someone who has worked for 30 years it's okay, right, we have to retire, for me it was normal, I can't say: *I will stop*. I do a lot of things, handcrafting, knitting...so I am not doing nothing (CPS).

Yes, I felt good, I was expecting it, because my work was continuous for 30 years. And it wasn't difficult because I worked 3 years in the market and 27 in public service. So it was fine, I was expecting it (MIN).

The first months were tough, you are used to working, and all of a sudden you are not working anymore, you become lost, agitated, walking side-to-side, and looking for something to do. But after 5 or 6 months, you get used to it, you become old no longer with strength (JGZ).

I had no more mind to work. At least I could live, eat. Being able to eat, it's okay. I had to stop working because of health problems. Now I go out, meet my friends (VML).

For the other two interviewees, retirement was experienced as a negative event due to a decrease in income - as illustrated by the first sentence - and as the end of useful life, as stated in the second sentence:

I felt like that: better than nothing, half a loaf is better than none. I had to accept it, like I do today. I have my children who help me, if they didn't I don't know what would've become of me (CMS).

I felt bad, really bad, I became depressed. Because I worked with great joy, I felt I could go with it a little further. So, at the moment of retirement, I felt like that, a good-for-nothing, not worth anything (ILM).

Retirement repercussion on food habits patterns

Three interviewees related changes in their eating habits to retirement. The main alterations reported were a lack

of consistency in the time of meals and the consumption of high calorie products, as follows:

When I worked, I had lunch and dinner at the company. At least one of the meals I had at the company (JGZ).

At home, we eat more, maybe we eat things that we wouldn't eat if we were at work (MIN).

I started like that, eating around (...) Not exaggerating in the quantity of food, but in junk food. I started taking a lot of soft drinks (ILM).

Also, two interviewees mentioned that after retirement they gained weight. This weight gain in the after-retirement period – as the following sentence – can occur due to the difficulty in keeping a healthy diet at home, the reduction of physical activities or lack of concern about physical health:

- (...) I gained many pounds... and can't go on a diet, at home I am always eating something, at work, just coffee (MIN).
- (...) I gained weight and it is hard to lose it. Your anxiety leads you to exaggerate in food (ILM).

DISCUSSION

When a social compound is based on utility values, as in the case of modern society, the absence of a proposed model in its organizational and relational frames affects the quality of life and social integration of its population. With this in mind, the relationship between work, retirement and senior citizenship reveals a subjective dimension and social implications that reach beyond the interpretation of statistical data and economic parameters⁽¹¹⁾.

Retirement, in a broad sense, is a transition process initiated as soon as the subject is aware of its occurrence. The period prior to retirement can be characterized by two preparation moments: *remote phase* and *proximal phase*⁽¹²⁾. In the first phase, retirement is seem in a positive way, but perceived as a distant and abstract event. In the proximal phase, time pressure and the imminent cessation of working are seen in more detail⁽⁶⁾.

Planning post-retirement life by reorganizing one's time to include new experiences in family life, leisure activities, socio-community life, and even in a new job, whether paid or voluntary, provides a more objective way to deal with the frustrating conditions to which many elders are exposed.

Lack of planning can create difficulty in adjusting to new circumstances, and is associated with negativity and reluctance to consider any subject related to retirement⁽⁵⁾.

Lack of planning can cause anxiety and loneliness related to the difficulties of obtaining satisfaction and personal achievement after disconnecting from one's professional occupation, even when the retired person was dissatisfied with that occupation⁽⁵⁾.



In the analysis phase of this study, lack of planning was perceived to directly influence the way retirement is experienced. Subjects that currently suffer the most from the retirement situation were those who reported more difficulty thinking about and reflecting on retirement during their economically active period of life.

The reaction of a person facing retirement is directly connected to their life history, their relations with society, particularly in their professional role, and their way of dealing with losses and adjusting to new situations⁽⁵⁾. We can briefly perceive how a subject will face the disconnection from work if we understand the role it occupies in his life.

Often, the process of leaving formal work co-exists with the aging process and with the occurrence of illness. Although these conditions provide social justifications for stopping work, concurrent physical, psychological and social losses make the decision of retiring difficult and ambiguous⁽¹¹⁾. In some cases, retirement can lead the subject to understand that a specific stage in development, that of old age, has been reached. In other words, retirement signals the aging process⁽¹²⁾.

A study that interviewed subjects one month before retirement and six to eight months after retirement demonstrated that people who considered retirement as a transition step to old age did not continue with major aspirations and new projects. However, when working had been stressful for them, subjects in the same study experienced retirement as a resting and leisure period, demonstrating an easier acceptance of the end of professional life⁽¹²⁾.

The retiring process can also be experienced as an interruption imposed by the external world, generating frustrations and feelings of emptiness, since working was strongly associated with identity⁽¹²⁾. Thus, when retirement is experienced negatively, it can affect the subjects' personal identity structure.

The retirement period can also be a great source of tension when associated with a decrease in buying power. Poverty is aggravated, making it difficult even to provide for basic daily needs⁽¹²⁾. For most Brazilian elders, retirement worsens their socio-economic condition and lowers their quality of life.

Also, it is worth noting that although retirement frequently worsens financial status, subjective factors such as the desire for acknowledgement and feeling useful within a social compound based on people's productive value are the main justifications for continuing ties with work. This compound is structured around the category of working and it does not offer other identification parameters that allow for making daily routine meaningful and valuable, unless they are related to professional activities⁽¹¹⁾.

Official retirement, when the subject retires due to reaching retirement age and not due to illness, represents

the closing of a formal career, opening doors for new choices and alternatives. For some people, there is an inevitable tendency to search for activities that will bring them into contact with new social groups, adjusting to a new psychosocial reality⁽¹²⁾.

In these cases, retirement is experienced as the conclusion of a stage and not as the cessation of general activities. People that have this ability can be identified as "reorganizers, since they plan for retirement, search for new working activities, and are able to keep being highly committed and active⁽¹²⁾.

Elderly people can keep being active in many different ways after retirement, since there is currently great concern for formulating public and social policies that will promote healthy aging of the population. One way to pursue such activity is through stimulating volunteer work.

Currently, volunteer work is considered as a mutual way of help in which volunteer elders help other people and at the same time consider themselves useful participants in society. This exchange also positively affects the health and quality of life of volunteer workers⁽¹³⁾.

Searching for new leisure activities and participating in senior citizens' universities and other groups are also ways to preserve positivity and emotional balance during senior citizenship and retirement. In Ribeirão Preto, for instance, in the Basic Health Units of the city, a program called PIC (Community Integration Program) was implemented. The program aims to encourage its participants to develop selfcare and an individual sense of responsibility for their own health. Also, it stimulates the participation of many community groups, integrating them into society(14). Although the program is not intended solely for elderly people, there are a significant amount of participants within this age bracket, and through their activities they are guided to reflect on their role as citizens in the Brazilian reality and to acquire new basic knowledge, attitudes and abilities aiming at behavioral changes.

As health concepts evolve, actions in this sector can be more effective when not restricted to hospital services, but when considering, above all, intersectional actions facing health decision makers⁽¹⁵⁾. Within this context, actions favoring healthy aging are those that motivate elders to be proactive by setting targets and reaching for them, accumulating useful resources for adjusting to changes and remaining actively involved in preserving their own well-being.

In summary, there is much evidence that individual lifestyle, considered as a compound of beliefs, values and attitudes expressed in daily life, has a major impact on general health, determining, for the great majority of people, how ill or healthy they will be in the long term⁽³⁾. Health actions regarding healthy lifestyle have emphasized the creation and maintenance of healthy eating habits as fundamental item for all life stages. The importance of this as-



pect can also be perceived in senior citizenship and in the periods before and after retirement.

However, understanding the act of eating is a difficult task, because it is one of the most complex human activities, involving not only nutrient intake, but also numerous emotions, in addition to the cultural meaning attributed to food. Consequently, anxiety, nervousness and unemployment frequently influence eating habits⁽¹⁶⁾.

During the retirement process, changes occur to the location and time of meals and the other people present during meals. In addition, due to income reduction, buying power is reduced resulting in changes in eating habits ⁽¹⁷⁾.

The retired elders' social circle reduction is another factor that can aggravate food intake alterations. Being away from work can lead to family and social loneliness, predisposing elders to lack of self-concern. This condition, in addition to the absence of stimulation – both internal and external – for buying and preparing varied and nutritional meals, can lead elders to inappropriate food intake, risking weight gain, obesity or malnutrition.

Retirement is frequently followed by substantial changes in life style. If the retired person does not balance food intake with new physical activities, weight gain can occur.

Studies report that obesity prevalence is higher among people in the 50-65 age bracket. Obesity is associated with a higher risk of chronic-degenerative diseases, such as type 2 diabetes and cardiovascular diseases⁽¹⁸⁾.

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FINAL CONSIDERATIONS

The present study demonstrated how retirement can be beneficial or detrimental, once these labels are connected to the meanings each person attributes to retirement.

Some of the interviewees mentioned that retirement broadened their social role, while others considered retirement a resting stage and had no plans for new life projects. Also, dissatisfaction when facing retirement was observed due to decreased income, low self-esteem and the end of retirees' perceptions of themselves as useful.

Another factor in the way retirement will be experienced is the existence of prior planning, because a retired person who has made plans is less exposed to frustrating conditions. It is important for planning to comprise a multidimensional vision, in which there is a balanced distribution of time between effectiveness, family life, leisure, socio-community participation and a reduced time working activity, paid or volunteer.

In addition, adopting healthy eating habits was a complex process for the interviewees of this study. The fact that food intake is connected to cultural, economical and social factors, present in the individual history of each subject, also complicates the after-retirement period.

Studies must be continued on this population in order to learn more about the feelings and perceptions of the elderly, understand the changes in their lifestyles resulting from the experience of retirement, and provide quality of life improvement.

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