

Ways of living in old age: lessons from the FIBRA Study

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In December 2020, coinciding with the peak of the COVID-19 pandemic, the United Nations General Assembly (UN)¹ declared the beginning of the Decade of Healthy Aging (2020-2030), in support of actions in favor of an egalitarian society for all ages, in all nations around the world. This is a far-reaching global initiative that focuses on older adults, unifying the efforts of governments and international entities, in order to improve the quality of life of these populations. Despite the health, economic and humanitarian crises caused by the COVID-19 pandemic, and despite prevailing socioeconomic inequalities between nations, and against the resurgence of war in the cradle of Western civilization, the UN initiative, supported by the World Health Organization, comes at an opportune moment. It is essential to create and encourage public policies that promote the well-being of aging populations in different population contexts.

The demographic process of human aging, beginning in the nineteenth and twentieth centuries and experienced worldwide over the last few decades, has brought with it different ways of aging. These trajectories are strongly influenced by social determinants and by the individual experiences of older adults throughout their life course. The health and functionality of older adults are heavily impacted by the socioeconomic adversities experienced in the course of their lives and by the cultural heterogeneity of the environment in which they live. As a result of these influences, important differences are observed between population groups in terms of health outcomes and levels of physical performance and functional capacity. Apart from the purely biological aspects, these differences are a reflection of gender inequalities and experiences of adversity lived in childhood, adulthood and old age. Among these, we should mention the experience of hunger in childhood, social gender role discrepancies, domestic violence, and financial abuse in adulthood, as important risk factors associated with declining health, functionality, and well-being in older adults.

Since the second half of the twentieth century, an accelerated process of demographic aging has been taking place, with profound repercussions in various spheres of Brazilian society. A series of distinct characteristics of this process can be enumerated, including urbanization and the feminization of old age. Since Brazil is a country of continental dimensions, full of cultural nuances and marked by social inequalities, mainly and particularly in the area of health, the population aging process in Brazil presents in a heterogeneous and complex manner.

Different aging phenotypes are observed in the presentation of geriatric syndromes in the Brazilian population. Through its publications over the last 15 years, the FIBRA Study², one of the most important population-based studies on frailty developed in Brazil and funded by the National Council for Scientific and Technological Development (CNPq), has been providing important evidence concerning the strong influence of the environment on the presentation of clinical status linked to aspects of health and functionality in

older adults. Previously observed in another epidemiological study conducted on populations with different aging profiles³, this data contributes to explanations concerning the clinical presentation of comorbidities and functional decline in this population.

Professor Anita Liberalesso Neri of the State University of Campinas, one of the coordinators of the FIBRA Study, has provided us with scientific publications that provide important evidence regarding the profile of aging and its nuances in Brazil. She established continuity in the FIBRA Study through the formation of cohorts of older adults and through longitudinal observation of the changes in various aspects of health status and functionality, in population subsamples from the original study. To achieve this, FIBRA data from the city of Campinas, SP, and Ermelino Matarazzo, a district located in the east side of the city of São Paulo (SP), were used originally collected from older adults who participated in the baseline survey in 2008 and 2009 and who were interviewed again between 2016 and 2018. This follow-up initiative gave rise to a new wave of important publications for Brazilian gerontology.

In this issue, the Revista Brasileira de Geriatria e Gerontologia publishes a set of articles originating from the results of the cohorts studied in the FIBRA Study. The collection of works was opportunely called *Modos* de viver a velhice [Ways of living in old age], and was designed to draw attention to the heterogeneity present in the aging process. The content of the articles published in this issue offer the reader an in-depth look at advanced old age (80 years old or over) in part of the texts, compared with early old age (72 to 79 years old). Likewise, it invites us to analyze several dimensions of aging: frailty, functional capacity, mobility in the living space, activity, oral health, depression, cognitive deficit, social relationships, social participation, satisfaction, neuroticism, and purpose in life.

Herein, results of clinical and psychosocial interest can be found, including the effects of the association between frailty and depressive states on the survival and mortality of this population. Another finding of interest in clinical practice reveals that the ability of older adults to move among the various levels of living spaces can be a viable tool in screening for frailty and the risk of sarcopenia. According to another study published in the collection, the presence of urinary incontinence negatively influences social life, while clinical and psychosocial initiatives for people with this condition can result in a decrease in the negative psychological effects and a reduction in social isolation.

The articles draw attention to the different implications of population aging and the different modes of aging in this country. Reading the articles should enable productive reflection on the need to develop new approaches to efficient and effective community intervention for the Brazilian older adult population.

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