

## COVID-19 AND THE MENTAL HEALTH OF ELDERLY PEOPLE PARTICIPATING IN COMMUNITY CENTERS



<https://doi.org/10.56238/arev6n3-219>

Submitted on: 18/10/2024

Publication date: 11/18/2024

**Simone Cristina Campos<sup>1</sup> and Lara Simone Messias Floriano<sup>2</sup>**

### ABSTRACT

The present study focuses on the importance of the participation of elderly people in Community Centers for mental health. In an attempt to understand the subject to be researched, as well as the themes interconnected to this process, including the discussion of concepts necessary for a better understanding of the object, it was necessary to read specific readings in the area of gerontology, mental health, pertinent legislation and COVID-19, in addition to topics such as coexistence groups; the recent change that occurred in terms of basic social protection, which was the reorganization of social assistance services; Service of Coexistence and Strengthening of Bonds; among others. This research aims to investigate the perceptions of the impact of COVID-19 on the mental health of older people participating in the Community Centers. With a qualitative approach, based on the dialectical critical method, the research included an exploratory literature review and semi-structured interviews with users of eight Community Centers for the elderly, located in the city of Ponta Grossa/PR, totaling sixteen people interviewed of both sexes. To support the organization of information, the IRAMUTEC software was used, in the sense of constituting the textual corpus, building the word cloud and the similarity tree. The analysis of the results followed the procedures of the content analysis proposed by Bardin (1977) and then the categorization of the data was carried out contemplating three chronological phases: 1) pre-analysis; 2) exploitation of the material; 3) treatment of results, inference and interpretation. Through data analysis, it was possible to capture, with the results in the form of answers, how elderly people participating in the Community Centers had their mental health affected by the consequences left by the COVID-19 pandemic. The interviews were duly allowed by the elderly people, who were also previously informed about the objectives and procedures of the research. It was concluded that the Community Centers for the elderly is an extremely important place, which can provide human emancipation, prevent isolation and social exclusion and is also an environment in which participants can interact with each other, share life experiences, in addition to achieving active and healthy aging.

<sup>1</sup>Bachelor of Social Work

Doctorate student in the Graduate Program in Applied Social Sciences at the State University of Ponta Grossa

Email: 240301800002@uepg.br

ORCID: 0009-0002-9477-4789

LATTES: <http://lattes.cnpq.br/5187633677751192>

<sup>2</sup>Nurse and Psychologist

Adjunct Professor at the University

State of Ponta Grossa (UEPG)

Dr. in Sciences from the University of São Paulo (USP)

E-mail: rslfloriano@uepg.br

ORCID: 0000-0003-4801-2767

LATTES: <http://lattes.cnpq.br/8103745365093367>

**Keywords:** Community Center. Aging. Elderly Person. Mental health.

## INTRODUCTION

On March 11, 2020, the World Health Organization (WHO) declared the COVID-19 pandemic. Indicators pointed to the elderly population as the most vulnerable to the disease, due to comorbidities, pre-existing chronic diseases, and senescence that weakens the functioning of the body, lowering its immunity (Bravilhieri et al. 2002, p.9), as they are more vulnerable to diseases.

According to the Statute of the Elderly Person (Law 14.423, of July 22, 2022), every person aged 60 or over is legally considered an elderly person. For the WHO (2020), the elderly were considered the group at highest risk of contamination by COVID-19, imposing isolation, as a safety and prevention measure, the first to enter the social isolation protocol.

In addition, an elderly population, which actively seeks to perform physical activities, participate in life in society such as: in the Community Centers, Open Universities of the Third Age, interact with other people, seeking good coexistence and socialization, is certainly contributing to their physical and social well-being and thus contributing to their balanced mental health.

People over 60 years of age are increasingly working longer in their professions, collaborating in the care of the home and family, and we observed that after the pandemic, as a support for the care of grandchildren, participating in social life, and often as a supporter, ensuring the livelihood of the whole family, being the only source of income left in this period. The aging process contemplates the chronological factor of human development, which everyone is subject to experience, showing that the way it happens is very discriminative and personal, as it varies from individual to social context, being influenced by issues of culture and gender (IRIGARAY et al., 2008. p. 33).

The elderly person who seeks activities in the community centers is the one who arrives at the SUAS with varied demands, but who is active and there finds a space where support is offered to improve the quality of life through physical and leisure activities, with the objective of increasing well-being and quality of life through physical activities, conversation circles, exchange of experiences, which are activities carried out at CECON, through the Services of Coexistence and Strengthening of Bonds (SCFV).

Its purpose is to intervene socially in the demands of the elderly, planning and creating challenging situations, which stimulate them in the construction and reconstruction of their individual, collective and family histories and experiences. The service aims to strengthen family and community relationships, in addition to promoting the practice of

physical, leisure, playful, cultural activities, valuing the sense of collective life, thus strengthening the mental health of those who attend community centers. In this scenario, the loss of family income during the pandemic could aggravate social and health inequalities, affecting the lives of older people, which can also be affected by physical and social isolation, fear of contracting the disease, fear of death, loss of friends and close ones, generating a high degree of psychological suffering and, focusing on the emergence of anxiety and depression.

In view of this, this research arose from the concern about the consequences of the COVID-19 pandemic on the mental health of elderly people participating in Community Centers (CECON), due to the safety measures imposed in Brazil, with the sanitary hygiene protocol and the decree of social isolation during this pandemic period. Understanding that, in the case of social isolation for the elderly, this "[...] it is considered a public health problem, as it increases the risks of cardiovascular, autoimmune, and neurocognitive diseases, and can lead to disorders such as depression and anxiety", compromising mental health (BRAVALHIERI et al. 2021, p.16).

We corroborate Bravanhieri et al (2021, p.18), where they point out that the pandemic has had consequences in the lives of older people in all aspects, especially in the emotional aspect, directing the need for research that deepens the perceptions that the impact of the pandemic has left on the mental health of these people. In this context, the present study has the following research question: What is the perception of the impact of COVID-19 on the mental health of elderly people participating in community groups located in the municipality of Ponta Grossa/PR?

From this question, we observe the factors that corroborate the advancement of the longevity of the elderly person, which can also be impacted on mental health. Thus, the hypothesis of this research is: Participation in CECON is important for the maintenance of the mental health of the elderly who are part of these groups, and the perceptions of the impact of COVID-19 in this context.

The present research has the following general objectives:

- To investigate the perceptions of the impact of COVID-19 on the mental health of elderly people participating in the Community Centers in the municipality of Ponta Grossa/PR; and as specific objectives:
- Understand participation in activities at the Community Center for the mental health of the elderly;

- To identify perceptions of the impact of COVID-19 on the mental health of older people participating in CECON;
- To analyze the contribution of CECON to the mental health of the participating elderly people.

The proposal of this research emerges from the intention of starting the discussion about participation in activities in Community Centers for the mental health of the elderly. This research is justified by facing an emerging problem in the pandemic period, which is a growing demand for the care network, when it comes to the mental health of the elderly. This public is seriously affected in periods of social isolation.

According to a UFRN survey, carried out on 02/16/2022, social coexistence improves people's mental health. Family and community life is a right expressly provided for in the Statute of the Elderly (art. 3), and must be guaranteed by the family, community, society and the Government with absolute priority. The level of satisfaction of older people in living with other people can increase in intensity throughout life, improving quality of life. In groups, the opportunity arises to establish new friendships, expand knowledge and remove loneliness.

## **METHODOLOGY**

It is a bibliographic, documentary and field research of a qualitative nature, using the authors and legislation that deals with this theme, according to MINAYO (2008, p.16), who highlights that in qualitative research, the important thing is objectification, because during scientific investigation it is necessary to recognize the complexity of the object of study. The author points out that qualitative approaches are more appropriate for scientific investigations of groups, delimited and focused segments, of social histories from the point of view of social actors, of relationships and for the analysis of discourses and documents.

Thus, our choice was exploratory qualitative research, which is dedicated to the construction of knowledge on a topic that is still unknown, allowing the production of hypotheses for reading that reality, as the theme (perceptions of the impact of COVID 19 on the mental health of the elderly) is little addressed from the perspective of researchers and professionals themselves.

The analyses will follow the procedures of the content analysis. For BARDIN (1977, p. 31), content analysis can be understood as, "[...] a set of techniques for analyzing communications". We used as an instrument of data collection, the semi-structured

interview, with 5 (five) open and closed questions, in addition to information about the profile of the users participating in the CECON.

In this sense, 5 open questions were elaborated, to give the interviewee the opportunity to speak in greater detail about the subject and make it possible to discuss the research theme (MINAYO, 2014, p. 14); as well as objective questions in the sense of characterizing and outlining a profile of who we are researching. The interviews were conducted with elderly people participating in the CECON, located in the city of Ponta Grossa/PR, respecting the ethical aspects regarding voluntariness and the signing of the Informed Consent Form.

The universe of the research is represented by the 8 (eight) CECON that serve elderly people, totaling approximately 250 (two hundred and fifty) users. It was decided to list 2 (two) people per CECON, of both sexes, if any, using as inclusion criteria, the elderly person who participates for the longest time in the equipment; who has cognitive understanding to answer questions; even so, if the tie remains, we use the age criterion, thus, the oldest person attending CECON, comprising the research. As an exclusion criterion, people who started their participation in the groups from 2023 onwards.

Considering the treatment of the empirical information collected in the interview, initially with the transcription and fidelity of all the subjects' statements; then the textual body was carefully and exhaustively organized; and then begin the analysis of the data obtained, which took place in two different moments. In the first moment, the construction of the word cloud and the analysis of similarity were carried out with the help of the Textual Analysis software IRAMUTEQ (R Interface for Multidimensional Analysis of Texts and Questionnaires) and in the second moment the content analysis was used according to Bardin.

In this context, we highlight the IRAMUTEQ Software as a facilitator in the treatment of data for qualitative research. Using programming language, IRAMUTEQ performs lexical analysis of textual bodies that the researcher wishes to analyze. According to Almico and Faro (2014, p. 727), IRAMUTEQ is "a computerized method for text analysis, which seeks to apprehend the structure and organization of discourse, informing the relationships between the lexical worlds most frequently enunciated by the subject", In addition, it allows the graphic representation of the most expressive words in the textual corpus through the word cloud (RAMOS; FILE; AMARAL-ROSA, 2018, p.21). The "word cloud," while simpler, is meaningful and visually appealing.

However, it is essential to emphasize that IRAMUTEQ is used exclusively for data processing, and the interpretation of these is the responsibility of the researcher (BUENO, 2018, p.08). Through "similarity analysis", it is possible to infer the connections between the data. By creating a word tree, this analysis establishes central nodes in which it is possible to relate other stemmed words and establish connections based on their semantic roots.

Similarity Analysis provides a visualization of the connections between shapes through a tree-shaped illustration, based on graph theory (SANTOS et al., 2017, p.3). After the pre-analysis, the exploration of the material was carried out, which is nothing more than the "[...] systematic administration of the decisions taken [...] consists essentially of operations of codification, discount or enumeration, according to previously formulated rules" (BARDIN, 1977, p. 95). The last phase consists of the treatment of the results, condensing and presenting relevant information, inferences and confrontation of the results with the previously collected material, also indicating reflections for future analyses. The present research was approved by the UEPG CEP and all ethical aspects were respected. It is intended to bring the research carried out in the 8 CECON (Living Centers for the elderly), in the city of Ponta Grossa-PR, in order to demonstrate the perceptions of the impact that the COVID-19 pandemic has brought to the mental health of the elderly who attend the CECON. The survey was conducted in December 2023.

## **RESULTS**

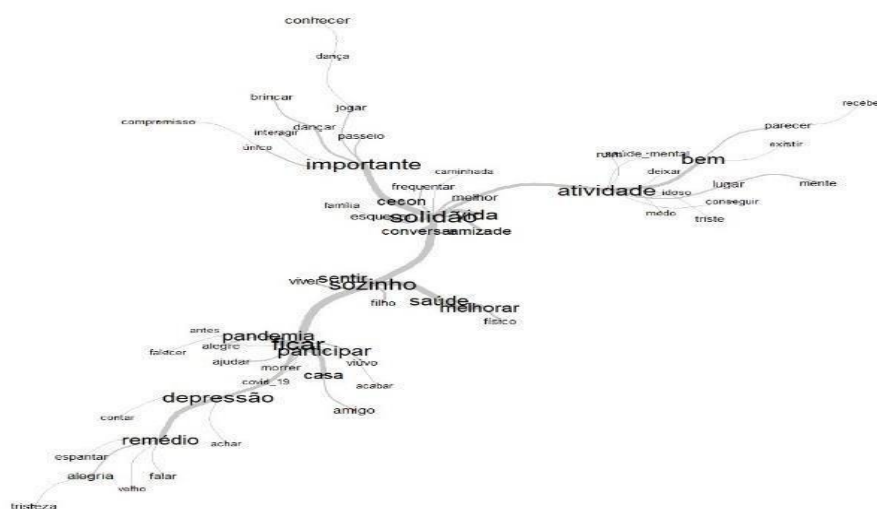
### **SIMILARITY ANALYSIS**

From the Analysis of Similarity or Similarities, which makes it possible to locate existing competitions between words, indicating their connections ( RATINAUD; MARCHAND, 2012, p.22), it is observed that the terms: "loneliness", "important", "activity", "alone"; "health", "pandemic"; "depression" and "medicine" organize different forms of its understanding, being strongly related to the words: "alone"; "CECON"; "important"; "activity"; "improve"; "participate"; "house"; "friend"; "joy" and "sadness".

In addition, the analysis shows elements related to the well-being that the CECON provide for the mental health of the elderly people who attend there, despite a lower frequency, the terms "know"; "walk", "dance"; "mental health"; "well"; "conversation"; "friendship"; stand out and give meaning to the aforementioned terms. It should be noted that more than 18,394 words were part of this analysis.



### Similarity Analysis



Source: Prepared by the author, based on the IRAMUTEQ software, 2023

With the intention of carrying out an in-depth analysis of the results obtained by both the word cloud and the similarity analysis, revealing significant insights into the essential themes that emerged in this study. The words that appeared with the greatest significance were: "loneliness", "CECON", "activity", "pandemic"; "alone"; "mental health", "depression" and "medicine" reveal the fundamental pillars of this discussion, shedding light on the complexities of the scenario of perceiving the importance of coexistence for the mental health of the elderly in CECON.

The convergence between the visual representation of the word cloud and the patterns identified by the similarity analysis promises to provide a more holistic and rich understanding of these interconnected topics, outlining promising paths to improve care practices, especially considering the challenges posed by the pandemic and the increasing demands for adaptation.

We bring to the show, the perspectives of the elderly people participating in the CECON, with regard to mental health in these living spaces. The face-to-face interview took place on a day and time stipulated by the CECON professionals, in order not to jeopardize the activities already planned.

After the presentations, they were asked: why did you look for CECON? it is evident that the terms alone, loneliness and depression are predominant in the statements of the vast majority of people, showing that of the 16 elderly people interviewed, 75% of the people are clear about this feeling, and consciously seek alternatives by participating in the meetings at the CECON, to overcome the situation in which they find themselves; and 25%



of the people, perhaps because they did not understand the purpose of the questions, rambled in the answer, as shown in the last 4 statements demonstrated here.

Social isolation contributed a lot to the elderly feeling alone, but it was a necessary measure. Our concern is for the elderly to remain in this condition, and not to resume their activities before the pandemic, passively accepting, and refraining from seeking alternatives to resume activities in living spaces.

I looked for it because even though I had a husband, I felt alone. [...] I tried to interact with people, meet other people, learn new things, participate in activities, outings, parties, celebrations [...], (interviewee1)  
[...] I found myself alone at home, I have 2 children who don't live here, I was left without having and knowing what to do with my life, then they recommended me to come here to participate [...] (Interviewee 2)  
[...] I'm alone, I had 8 children, but I don't have contact with any. [...] Then I came here, I really like coming here, I participate in everything here is very good, it "clears" my head, I feel better when I'm here [...] (Interviewee 3)  
[...] I've been participating for a long time, well before the pandemic [...] I looked for it, because I was depressed and at the health center they indicated it to me here [...] (interviewee 4)

Evidence from recent epidemics shows that social isolation and quarantine measures are associated with increased depression and anxiety in the general population (WONG et al, 2020, p.6). Studies carried out in the context of the COVID-19 pandemic corroborate the results found previously, showing an increase in the prevalence of mental disorders in the population, especially in the elderly (Pecoits et.al. 2020, p.13).

Furthermore, the authors reinforce that [...] social isolation and loneliness are serious risks to public health, and although they are underestimated, they already affected a significant portion of older people even before the pandemic, especially those living alone (PECOITS et.al. 2020, p.13). With the effects of COVID-19, the number of elderly people who are socially isolated has increased even more, since, before the pandemic, many of them who lived in the community actively participated in social activities, which were suspended by the restriction measures.

Although 25% of people did not respond punctually to what was questioned, the importance and benefits that CECONs contribute to mental health in their lives are clearly observed.

I've been going here for 42 years. There is no bad time here, and it is very important to have this space to improve our physical and mental health. (interviewee 12)  
I've been going to it for more than 30 years since I retired, [...] I looked for a place where I could fill my time and my head with good things. (interviewee 13)

[...] To distract, it is a pleasure to be together with people. (interviewee 16)

We can observe in the statements of the interviewees that loneliness and depression are categories that appear in most of the statements, which is the reason for the search to participate in the CECON. Talking about loneliness is not easy, studies in the area of mental health have sought definitions for loneliness. Among these concepts discussed can be defined as the state of feeling lonely, thus resulting in isolation.

Loneliness is a feeling that is usually painful and distressing, which leads to a malaise in which the person feels alone, even if surrounded by people, because he thinks that he lacks support, especially of an affective nature. Loneliness is a complex creation and can easily be confused with isolation, difficulty in communication, abandonment, among others.

Its meaning is so broad and complex that in the study of this theme two problems arise: that of establishing a concrete definition and that of objectively evaluating the extent of loneliness. Feelings of loneliness can arise in any age group, but they are particularly important not only because of their prevalence, but also because of their consequences. In the elderly, considering that loneliness can be emotional, when the absence of a close emotional attachment, while social loneliness can mean the absence of a social support network for the individual and fragile family and community bonds.

According to GOMES (2001, p.21), in psychological terms, a better concept of loneliness should consider at least the following aspects: lack of meaning and purpose in life; emotional reaction; unwanted and unpleasant feeling; feeling of isolation and separation and deficiency in relationships.

NETO (2000, p. 6) loneliness is a disturbing side of attraction. He also states that it is a painful experience that one has when social relationships are not adequate. Loneliness is a feeling that is usually painful and distressing, which leads to a malaise in which the person feels alone, even if surrounded by people, because he thinks that he lacks support, especially of an affective nature. MCNNIS; WHITE (2001, p 9) report that the elderly are especially vulnerable to feelings and states of loneliness, due to their decline in their physical health, which forces them to social isolation.

In addition to these, the loss of close family members and the proximity of death also contribute to this vulnerability. Feelings of loneliness can arise in any age group, but they are particularly important not only because of their prevalence, but also because of their consequences, in adolescents and the elderly, according to scientific data. Studies carried

out with elderly people highlight that sadness is the factor that most contributes to loneliness. Other direct factors that contribute to loneliness in old age and we should be aware of are: Widowhood; The departure of children from home (which characterizes the phenomenon of the empty nest); mourning; Depression that can impact the morbidity, mortality and quality of life of older people; The absence of loved ones, which in gerontology is called social abandonment and broken family and community affective bonds; Feeling of inner emptiness; Social isolation due to COVID-19.

Ageism present in the labor market; Unplanned retirement process; Socioeconomic problems. It is difficult to research and reach conclusions about loneliness, a phenomenon that expresses itself as a feeling, which only materializes and reveals itself through the expressions of the body, gestures, speech and variable and multiple silences as people and their ages are. For this reason, it is up to society, in its various instances, to try to get to know the elderly and preserve their dignity, and to the State to protect them and guarantee their legal rights. The family and the social support network of the elderly person also play an extremely important role in combating loneliness, since their presence makes the elderly individual feel more belonging to that cycle and more welcomed. Within these cases, the frequency of the feeling of loneliness is lower.

In people over 60 years old, the risks of developing depression increase because there are many factors that favor a depressive condition. It is at this stage that people go through the most significant social changes: loss of friends, relatives and spouses, retirement – which triggers a feeling of worthlessness, diseases that begin to emerge, loss of autonomy and mobility, sudden change in one's own self-image. Other more complex factors also tend to emerge after the age of 60.

In addition to loneliness, loss of vitality and autonomy, the doubts and anxieties of youth appear to "charge". Who would I like to marry? Did I choose my profession well? Should I have gone another way? Should it have been a better father or mother? Questions that can generate a negative feeling in many elderly people, who may not be prepared to deal with this passage of time in a new configuration of life.

In general, depression affects the elderly in two specific ways: those who have already had a depressive condition at some point in their lives, treated or not, and enter old age with depression; and those who develop the disease only at this stage, precisely because of the factors related to aging and already mentioned. In the second case, the

catalyst is usually the loss of their social role, making the elderly feel less integrated into the environment, less useful to the family and to society itself.

In this sense, we share PREVIATO (2019, p.2), when he highlights that the activities at CECON, with [...] the elderly living group is characterized by leisure activities, such as games, dances, manual activities and outings, which produce satisfaction in the participants, as they allow the exchange of affections, socialization and construction of bonds, in addition to enabling autonomy in choosing what they want to live, which allows the elderly to play a leading role [...]. They also point to the power of these spaces as an educational and training device, bringing new perspectives of inclusion and access to new work activities, for example, participation in handicraft, gastronomic, and cultural fairs. (PREVIATO, et. al, 2019, p.3).

Following the interview, the elderly people were asked about the importance of their participation in these activities for their mental health, we have the following:

It is very important. "Empty mind, devil's workshop". Here we do manual activities, circle dances, we move, laugh, make small talk, learn a lot, meet people who come here to talk to us, like you [...] (Interviewee 1)  
[...] It's good to know that there are people who look and care about us. We feel valued, we return home again, renewed, with a clean and light head! [...] (interviewee 2) • [...] It was very good, they helped me to start my life over. Slowly, but I made friends and I come here, I participate in meetings, activities, and I miss it when I stay at home. [...] I think that, if I didn't come here, I would have already given myself in life, loneliness is not easy! (Interviewee 3)  
[...] It's very important, without going to the CAPS, I need to interact, talk, do something to occupy my head. [...] And for the head, it relieves our mind to participate here. (interviewee 4)

It has been proven that the SCFV carried out in the CECON is of great importance for this elderly population, especially in the sense of having a physical space of reference, where the feeling of belonging is evident in the subjects' statements. The idea of thinking of alternatives to propose activities to the elderly has been around for a long time, but the reorganization of services, unifying them throughout the territory proposed in the social assistance typification is more recent. This service is extremely necessary, observing the satisfaction in the participation of the elderly people, according to their statements in the research.

The Coexistence Center for the Elderly is a place that, in addition to providing human emancipation, preventing isolation and social exclusion, is an environment in which the elderly can interact with each other, share their experiences, in addition to obtaining an

active and healthy aging, thus improving their mental health. According to VERAS (2005, p.10), the Community Center can provide the elderly with a reason to go out regularly and an opportunity for social contact, becoming a place for leisure activities and vocational and cultural education, which both serve to value the elderly as citizens and to demystify prejudices and stereotypes that surround old age and, thus, to build new possibilities to rework life.

Following the interview, were the interviewees asked what are their perceptions of the impact of COVID-19 on mental health in their participation in CECON activities?

- [...] The pandemic was a very difficult period, [...] when it passed and we were able to resume life, as soon as it opened here I came back, [...] here is the best medicine for depression, even with restrictions at the beginning, we carried out some activities that relieved all that sadness, and today, I know that here for me is the best place, I try to participate in all the activities that are here, And with that it helps to clear my head of sad thoughts, and I don't let the boat fall. (Interviewee 1)
- [...] The pandemic was very sad, I was alone, without a wife, without being able to go out even to buy food. We get lost, we don't know how to start over. [...] After I came here, it seems that things were getting straight, [...] it seems that it clears our heads, they referred me to the health center, I consulted and I use medication for depression. (Interviewee 2)
- [...] The pandemic confined the elderly to their homes. Our head turned inside out, with no activity and no remedy. Loneliness is very bad. CECON fills a space in our life and the head works better. (Interviewee 3)
- [...] The resumption of activities was slow, we were still very afraid. But for sure, the pandemic showed a problem that we old people feel a lot, being alone, no one sees the elderly person, nor the family. (interviewee 4)
- [...] Those who were not sick in the head, with the pandemic stayed. [...] after I came to CECON and realized that it all seems very strange, it seems that I had to learn to live, and here we received all the support and welcome we need. (Interviewee 5)

It was unanimous in the statements, that is, 100% of the interviewees, that the COVID-19 pandemic substantially compromised the mental health of the elderly people attending CECON. In the reports, it is observed the difficulty in which social isolation, fear of death, lack of coexistence with family and other people modified the psychology of these people.

On the other hand, it shows the importance of these spaces in people's lives, in the sense of providing a successful aging and a set of proposals that contemplate integrality in the care of the elderly, striving for the thoughtful search for autonomy and independence in this phase of life through the fulfillment of their basic needs, going through the instrumentalization for political participation and the deconstruction of stereotypes that hinder the exercise of their fundamental rights.

Among the psychological effects that social distancing can trigger in this age group are insomnia, fear of being contaminated, anxiety, worries about their loved ones, and frustration for not knowing when the situation will be controlled. It is noteworthy that insufficient information and financial difficulty can contribute to the increase in these psychological effects (CANDORE, et al. 2019, p.4).

Aspects such as increased loneliness and reduced social interactions are risk factors for several mental disorders, such as geriatric depression (FIORILLO, 2020, p.7). According to PEREIRA (2020, p.3), other consequences of psychological states are panic attacks, post-traumatic stress disorder, psychotic symptoms, and suicide. On the other hand, for COSTA (2016, p. 9), psychological well-being can be enhanced, from the moment that elderly people are stimulated, even if in their homes, to perform some physical activities, memory activities, as well as to get closer to virtual reality, as a process of continuing education, through the use of storytteling.

Therefore, it is important to identify the biopsychosocial conditions of each elderly person, in addition to highlighting their vulnerabilities, in order to promote strategies that can contribute to active senescence. Among the strategies, COSTA (2016, p. 9) refers to the use of exergames as a modality of physical activity, which proved to be an important therapeutic alternative in the context of the COVID-19 pandemic.

We request an evaluation of CECON's activities, for your mental health, we have the following:

- [...]As I said, here is the remedy to ward off depression! The air here is different, the energy of this place infects the heart and our mind. (Interviewee 1)
- [...] As I said, here is the remedy to ward off depression! (Interviewee 2)
- [...] Here is a remedy to ward off depression! Thank God, there is a place like this.
- [...] I'm glad there's this place here for us seniors. (Interviewee 3)
- [...]I recommend it to everyone who asks. I can't stay here anymore. (interviewee 4)
- [...] Activities are very important for our mental health, we can sleep better [...]. (Interviewee 5)
- [...]I'm glad there's this place here for us seniors. You create a commitment with colleagues, with activities, this occupies the mind. For me, CECON is living well! (interviewee 6)
- [...]My mental health has improved a lot. [...] It helps fill my life. (interviewee 7)
- [...] Coming here every week makes life lighter, it's good for mental health. (interviewee 8)
- [...] It's very important, coming here to spend the day, relaxes the mind. (interviewee 9)
- [...] My mental health improved a lot, coming to have fun is the best medicine for depression. (interviewee 10)
- [...]Here is the only place we have with many activities. [...] I miss it so much when I can't come here. It's bad for my mental health, I can't even sleep. (interviewee 11)
- [...] It helped me understand grief, it brought me the will to live. (interviewee 12)
- [...] Here is the remedy for depression for loneliness, it becomes a family when ours



doesn't show up! (interviewee 13)  
[...] Very good, the elderly deserve to have a place of leisure, to forget sadness.  
Have something to do. (interviewee 14)

If, on the one hand, we celebrate the achievement of longevity, on the other hand, it is necessary to pay attention to the guarantee of the necessary conditions for the elderly person to live with dignity, because the old of today reveals the future human condition for the men of the present, who will be the old of tomorrow, of the future. Thus, it is not enough just to achieve more years of life, it is necessary to live them with quality. The propositions about the care policy, when referring to the elderly, are very good, however, for various economic, political and bureaucratic reasons, its total implementation has not yet been achieved. Still, it is a gain in the lives of these people, with the little they have, they are infinitely grateful.

At the end of the interview, we asked the interviewees for "a suggestion to improve the services offered to the elderly population in the municipality", we had the following:

[...]There's nothing to complain about, everything they do here is very good, especially to occupy our heads. Maybe a psychologist's visit, once a month to have a conversation, listen to some people who are a little depressed, or who are in difficulty, would be great! Also take more tours, trips, which before the city hall provided more, now we can almost never go out. (Interviewee 1)  
[...]Everything they do here is very good, especially to occupy our heads. To take tours, we go to CECON Nova Russia on Wednesdays, it is very good to interact with other people, we make more friends, with other men, before the city hall provided more, now we can almost never go out. (Interviewee 2)  
[...]Do more sightseeing in the city. (Interviewee 3)  
[...]It would be very important to have activity every day to occupy the routine of the elderly and improve our mental health every day. Also 1 doctor once a month to make an evaluation of us and 1 psychologist to talk to. (interviewee 4)  
[...]I didn't have any of that here, I can't complain or ask for anything else, everything here is very good for my mental health, it did me a lot of good to participate here in CECON. (Interviewee 5)  
[...]I suggest that you return to activities as before the pandemic. As it was at the time of FAPI, it was even better. (interviewee 6)  
[...]Taking more tours, trips is very enjoyable, even if you need to charge a little, we save some time, so we can go for a walk. (interviewee 7)

In general, the elderly are very satisfied with the participation of the activities in the CECON, improve?

We are sure yes! If, on the one hand, we celebrate the achievement of longevity, on the other hand, it is necessary to pay attention to the guarantee of the necessary conditions for the elderly to live with dignity. The State has the duty to guarantee what is provided for in the typification of social assistance services in the improvement of services in CECON.



## DISCUSSION

The research demonstrated important data regarding the characterization of the elderly people participating in the CECON. In all, there were 16 elderly people of both sexes, who became users of the 8 CECONs. Age ranged from 60 years to 89 years (mean age = 65.37). The majority of the group interviewed, that is, 75%, is between 60 and 79 years old (12 people) and 25% of the interviewees, between 80 and 89 years old (4 people).

Of these, 75% answered that they are retired in a total of 12 people; 17.5% answered that 3 people receive a pension (widow) and 7.5% receive BPC (continuous pension benefit) 1 person. The majority or 75% of users are aged 60 to 79 years (12 people) and 25% of these are aged 80 to 89 years (4 people). Regarding gender, mostly female in the CECON, about approximately 10% of the 240 goals passed on to the 8 CECONs surveyed are from the male public.

Regarding marital status, 60% or 9 elderly people are widows, 2 single, 2 married and 3 separated. Other information could also be observed: the majority, that is, 87.5%, live alone, have children and grandchildren, but do not collaborate with their care; use daily medications for: hypertension, diabetes, cholesterol, anxiety, depression and insomnia. In the research we tried to contemplate both sexes: 50% male and 50% female.

Other studies also point to the predominance of women's participation in groups of people (BORGES; BRETAS; AZEVEDO; BARBOSA, 2008; CASCAES; FALCHETTI; GALATO, 2008; COUTO et al. 2018; LEITE et al. 2002; VIEIRA, 2013), including in specific groups of physical exercise (ANDRADE et al., 2014; BENEDETTI, MAZO; BORGES, 2012; HORTENCIO; SILVA; ZONTA; MELO; FRANCE, 2018; SILVA; CARVALHO, LIMA; RODRIGUES, 2011).

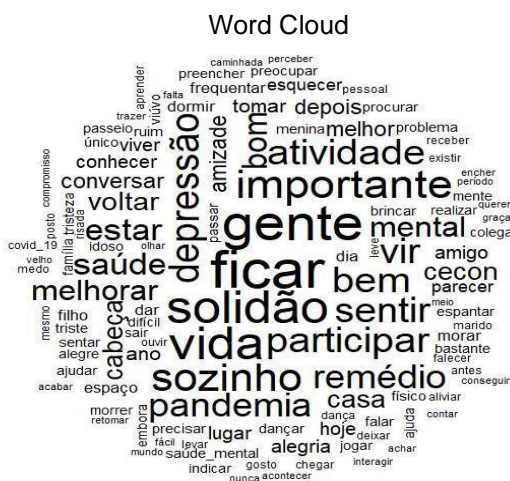
Vieira (2013, p.4) points out that the greater representation of the female sex may be related to the fact that women tend to adhere more easily to social, self-care and health projects. In the research by Andrade et al. (2014, p.3), whose objective was to investigate the perception of the elderly about living groups, the predominance of women was explained by male resistance to participating in the groups, the married women investigated answered that their partners did not participate because they maintained prejudices about being part of groups of elderly people. We present the results, according to Bueno (2018, p.2), with the analysis of the IRAMUTEC software, in two modalities: lexical analysis – word cloud and similarity analysis.

#### 4.1 IRAMUTEQ SOFTWARE

The use of a computer program had the advantage of coding, organizing and separating information, which allowed the quick location of the entire text segment used in qualitative writing. Using the word cloud method, which groups the words and organizes them graphically according to their frequency, some words such as: "gente e ficar" (people and stay) often appeared in the statements, associated with other words to give meaning to the speech – "we like to...; get well, get bad...", are not relevant to our analysis.

However, the word "loneliness" appeared 76 times, it was the one with the highest frequency, followed by the word "important and activity", which appeared 65 times; the words "depression, loneliness, life, alone"; The words "pandemic, medicine, health, mental, participate" appeared 63 times in the frequency of the corpus; the words "CECON, improve, head and talk", appeared 62 times. All the words can be observed more frequently in the statements of the elderly people who participated in the research.

It should be noted that the use of IRAMUTEQ is not a method of data analysis, but a tool to process them. Therefore, it does not conclude this analysis, since interpretation is essential and the responsibility of the researcher. Therefore, this material should be understood as a qualitative software for data analysis - lexicons - to assist and complement content analysis.



Source: Prepared by the author, based on the IRAMUTEQ software, 2023.

The words are randomly positioned, in such a way that the most frequent ones appear larger than the others, thus demonstrating their prominence in the

corpus of analysis of the research. For the purposes of this study, after the processing stages, the meanings of the words were interpreted through the speeches of the users who responded to the interview, thus the word "loneliness", a feeling reported by most elderly people, aggravated by the decree of social isolation, imported by the pandemic. It is evident in people's speeches the importance of attending CECON to get out of loneliness and improve their mental health.

## **CONCLUSION**

The present research aimed to investigate the perceptions of the impact of COVID-19 on the mental health of elderly people participating in the Community Centers in the municipality of Ponta Grossa/PR. The study showed the situation of social vulnerability experienced by the elderly in Brazil during and after the pandemic period, clearly observed by the subjects' statements, how much this episode added to the safety and social isolation measures interfered with the mental health of these people.

We understand that society must prepare itself to meet the needs of the elderly, as the increase in life expectancy and, consequently, in the number of individuals at an advanced age has not been accompanied by the creation of effective public policies with a view to providing a living condition, especially with a focus on mental health for this population segment. We also found that the pandemic negatively affected the family routine and leisure activities of all people, especially the elderly. It is necessary to adopt actions and strategies aimed at minimizing and/or reversing the negative effects linked to socioeconomic and psychological factors of these elderly people.

In this sense, CECON has a fundamental role in the lives of these people, providing in addition to leisure, several other activities with the intention of strengthening ties with the community and socialization; the expansion of the support network through the bonds of friendships, which consequently can improve health mental.de improve their mental health. The improvement in psycho-emotional health is constantly reported by users during the meetings held as a routine at the community center, so we can observe how important this type of mental health care is.

In order to improve the psycho-emotional status of users, we can contribute to a better insertion of these in the community and the implementation of this type of space that

can help to demystify prejudices regarding mental impairment, in addition to preventing the occurrence of new crises.

It is also worth mentioning that this research revealed that social isolation and other safety measures imposed by the COVID-19 pandemic substantially affected the mental health of these people, interfering with their routines today. As observed in the statements, many of them have depressive, sleep, and anxiety disorders, reporting that after the pandemic the problems appeared.

We have a real framework of legislation for the protection and defense of the rights of the elderly, but there is still a need to legitimize the implementation of many of the existing laws, so that this growing population worldwide has the right established in CF/88, which is the right to age with dignity. In this vein, we include the Community Centers, which are the spaces provided for in the classification of the SUAS, where these elderly people are encouraged to participate in the groups, thus minimizing possible feelings of loneliness, and exercising the right provided for in the legislation, which is that of social coexistence.

Considering that the Community Centers provide an indisputable improvement in the mental health of these people, we verify the insufficiency of these spaces, not being able to meet the demand, in this sense, through public policies, it urgently needs to create discussion agendas and look after the elderly population that is without care alternatives, contrary to what is provided for in the legislation.

We recommend everyone to take care of their aging process, stay active to meet new people, strengthening their bonds and trying to use communication resources to keep in touch with their loved ones, because by fighting loneliness, you will be taking care of your health for greater longevity and better quality of life. Also pay attention to the tips that were mentioned for resilience strategies. We wish a longevity full of meaning for everyone.

Having completed this path, which resulted in the dissertation presented here, we hope that the reading of this study will be pleasurable, but also productive of discomfort and discomfort, and that these discomforts will be transformed into institutional, political and social actions, and displacements that stimulate conversation and contribute to a critical understanding of the mental health of the elderly people participating in the CECON of Ponta Grossa-PR, as well as present possible ways to identify and cope with the factors associated with common mental disorders at this stage of life.

In the face of a society that is constantly aging, it is of paramount importance to expand studies and references that give visibility to the issue of aging from the perspective

of discussing ways to sensitize the government, society and the family about the responsibility they have to guarantee the right to life with dignity and well-being.

The present study was based on Investigating the perceptions of the impact of COVID-19 on the mental health of elderly people participating in Community Centers in the municipality of Ponta Grossa/PR. As a result of the study developed with the elderly, it is of unquestionable importance and constitutes a relevant alternative for socialization and/or resocialization, improvement of quality of life and redefinition of their place in society, Consequently, improving their mental health, however, a more effective discussion is needed about it, in the sense of expanding services, thus being able to encompass all the elderly demand existing in the municipality.

When referring to the perceptions of the impact of COVID-19 on the mental health of these elderly people, it is clearly demonstrated how it affected their daily routine, their mobility, also demonstrating the insecurity that the whole process generated, making it difficult to resume life, visibly affecting the mental health of these elderly people.

On the other hand, we proved the importance of participating in CECON in improving the quality of life, consequently improving the mental health of these people. With regard to social interaction, living groups are of great relevance, since they can provide the elderly with quality of life, avoiding isolation and promoting socialization among the elderly, and should also develop activities involving the family and society.

## REFERENCES

1. Almico, T., & Faro, A. (2014). Enfrentamento de cuidadores de crianças com câncer em processo de quimioterapia. *\*Psicologia, Saúde & Doenças*, 15\*(3), 723–737. [http://pepsic.bvsalud.org/scielo.php?script=sci\\_arttext&pid=S1809-89082020000200015](http://pepsic.bvsalud.org/scielo.php?script=sci_arttext&pid=S1809-89082020000200015)
2. Bardin, L. (1977). *\*Análise de conteúdo\**. São Paulo, Brazil: Edições 70. [https://edisciplinas.usp.br/pluginfile.php/7105754/mod\\_resource/content/1/](https://edisciplinas.usp.br/pluginfile.php/7105754/mod_resource/content/1/)
3. Brasil, Ministério do Desenvolvimento Social e Combate à Fome. (2004). *\*Política Nacional de Assistência Social – PNAS\**. Brasília, Brazil: MDS.
4. Brasil, Ministério do Desenvolvimento Social e Combate à Fome. (2012). *\*Tipificação nacional de serviços socioassistenciais\**. Brasília, Brazil: MDS.
5. Bravalhieri, A. A. V., Oliveira, R. N., Batiston, A. P., Souza, P. A. B., & Christofoletti, G. (2022). Impact of social isolation on the physical and mental health of older adults: A follow-up study at the apex of the COVID-19 pandemic. *\*Dementia and Geriatric Cognitive Disorders*, 50\*(3), 279–284. <https://doi.org/10.1159/000525661>
6. Bueno, A. J. A. (2018). *\*Uma análise por meio do Software Iramuteq de teses e dissertações defendidas entre 2007 e 2017 com a temática de filmes comerciais no ensino de Ciências\** [Master's dissertation, Universidade Estadual de Ponta Grossa].
7. Cadore, E. L., Asteasu, M. L. S., & Izquierdo, M. (2019). Multicomponent exercise and the hallmarks of frailty: Considerations on cognitive impairment and acute hospitalization. *\*Experimental Gerontology*, 122\*, 10–14. <https://doi.org/10.1016/j.exger.2019.04.007>
8. Canoas, C. L. (1985). *\*A condição humana do velho\**. São Paulo, Brazil: Cortez.
9. Costa, N. P., Polaro, S. H. I., Vahl, E. A. C., & Gonçalves, L. H. T. (2016). Storytelling: A care technology in continuing education for active ageing. *\*Revista Brasileira de Enfermagem*, 69\*(6), 1066–1071. <https://doi.org/10.1590/0034-7167-2016-0422>
10. Dardengo, C. F. R., & Mafra, S. C. T. (2020). Os conceitos de velhice e envelhecimento ao longo da história. *\*Revista Brasileira de Geriatria e Gerontologia*, 23\*(2), e200013.
11. Fiorillo, A. (2020). Effects of the lockdown on the mental health of the general population during the COVID-19 pandemic in Italy: Results from the COMET collaborative network. *\*European Psychiatry*, 63\*(1), e87. <https://doi.org/10.1192/j.eurpsy.2020.89>



12. Gomes, A. (2021). \*Solidão: Uma abordagem interdisciplinar pela ótica da teologia bíblica reformada\*. São Paulo, Brazil: Mackenzie. [www.mackenzie.br/fileadmin/mandenedora/CPAJ](http://www.mackenzie.br/fileadmin/mandenedora/CPAJ)
13. Instituto Brasileiro de Geografia e Estatística. (2020). \*Projeção da população do Brasil por sexo e idade para o período 1980-2050\*. [http://www.ibge.gov.br/home/estatistica/populacao/projecao\\_da\\_populacao/metodologia.pdf](http://www.ibge.gov.br/home/estatistica/populacao/projecao_da_populacao/metodologia.pdf)
14. Irigaray, T. Q., et al. (2008). Maus-tratos contra idosos em Porto Alegre, Rio Grande do Sul: Um estudo documental. \*Estudos de Psicologia (Campinas)\*, 25\*(3), 544–551. <https://www.scielo.br/j/estpsi/a/NRPqNTFChMTKkTgkQ3KBqsN/?lang=pt&format=pdf>
15. McInnis, G. E., & White, J. (2001). A phenomenological exploration of loneliness in the older adult. \*Archives of Psychiatric Nursing\*, 15\*(3), 128–139. <https://doi.org/10.1053/apnu.2001.23751>
16. Minayo, M. C. S. (2008). \*O desafio do conhecimento: Pesquisa qualitativa em saúde\* (13th ed.). São Paulo, Brazil: Hucitec.
17. Neto, F. (2000). \*Psicologia social\* (Vol. II). Lisboa, Portugal: Universidade Aberta.
18. Organização Pan-Americana de Saúde. (2020). \*Folha informativa sobre COVID-19\*. <https://www.paho.org/pt/covid19>
19. Pecoits, R. V., et al. (2020). O impacto do isolamento social na saúde mental dos idosos durante a pandemia da COVID-19. \*Revista da AMRIGS\*, 65\*(1), 101–108. [https://repositorio.pucrs.br/dspace/bitstream/10923/20322/2/O\\_impacto\\_do\\_isolamento\\_social\\_na\\_sade\\_mental\\_dos\\_idosos\\_durante\\_a\\_pandemia\\_da\\_Covid19.pdf](https://repositorio.pucrs.br/dspace/bitstream/10923/20322/2/O_impacto_do_isolamento_social_na_sade_mental_dos_idosos_durante_a_pandemia_da_Covid19.pdf)
20. Pereira, M. D., Oliveira, L. C., Costa, C. F. T., Bezerra, C. M. O., Pereira, M., Santos, C. K. A., et al. (2020). The COVID-19 pandemic, social isolation, consequences on mental health and coping strategies: An integrative review. \*Research, Society and Development\*, 9\*(7), e567974141. <https://doi.org/10.33448/rsd-v9i7.4141>
21. Previato, G. F., et al. (2019). Grupo de convivência para idosos na atenção primária à saúde: Contribuições para o envelhecimento ativo. \*Revista Fun Care Online\*, 11\*(1), 173–180. [file:///C:/Users/User/Downloads/6869-Texto%20do%20Artigo40207-2-10-20181227%20\(1\).pdf](file:///C:/Users/User/Downloads/6869-Texto%20do%20Artigo40207-2-10-20181227%20(1).pdf)



22. Ramos, F. P., et al. (2018). Fatores associados à depressão em idoso. \*Revista Eletrônica Acervo Saúde, (10)\*, e239. <https://doi.org/10.25248/reas.e239.2018>
23. Ratinaud, P., & Marchand, P. (2012). Application de la méthode ALCESTE aux «gros» corpus et stabilité des «mondes lexicaux»: Analyse du «CableGate» avec IRaMuTeq. \*Actes des 11eme Journées internationales d'Analyse statistique des Données Textuelles\*, 835–844. <https://login.seamead.com.br/22seamead/anais/arquivos/295.pdf>
24. Salgado, M. A. (2007). Os grupos e a ação pedagógica do trabalho social com idosos. \*A Terceira Idade, 18\*(39). <http://cev.org.br/biblioteca/os-grupos-eacao-pedagogica-trabalho-social-com-idosos/>
25. Santos, V., Salvador, P., Gomes, A., Rodrigues, C., Tavares, F., Alves, K., & Bezerril, M. (2017). Iramuteq nas pesquisas qualitativas brasileiras da área da saúde: Scoping review. In \*6º Congresso Ibero-Americano em Investigação Qualitativa\* (pp. 392–401).
26. Schneider, R. H., & Irigaray, T. Q. (2008). O envelhecimento na atualidade: Aspectos cronológicos, biológicos, psicológicos e sociais. \*Estudos de Psicologia (Campinas), 25\*(4), 585–593. <https://www.scielo.br/j/estpsi/a/LTdthHbLvZPLZk8MtMNMZyb/?lang=pt&format=pdf>
27. Veras, R. P. (2005). Estratégias para o enfrentamento das doenças crônicas: Um modelo em que todos ganham. \*Revista Brasileira de Geriatria e Gerontologia, 14\*(4), 779–785. <https://doi.org/10.1590/1809-9823.2005.140412>
28. Wong, S. Y. S., et al. (2020). Impact of COVID-19 on loneliness, mental health, and health service utilisation: A prospective cohort study of older adults with multimorbidity in primary care. \*British Journal of General Practice, 70\*(700), e817–e824. <https://doi.org/10.3399/bjgp20X713021>