

AGEING IN LUSOPHONE COUNTRIES: THE IMPACT OF AGE-SPECIFIC LEGISLATION ON THE RECOGNITION OF RIGHTS

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Abstract

The ageing phenomenon of the 21st Century has led to an increased need of public policies to protect the rights of the older population. An example is the Law of the Rights of Older Persons, a Brazilian legislation. Some countries still lack this kind of legislation, which may cause more vulnerability among this population. The exercise of interpersonal rights in daily life requires recognition of general and specific duties, beyond the competence to exercise them. Considering that the first step in the exercise of rights is to recognize them, the goals of this descriptive study are: (a) presenting some exploratory and inferential data on the recognition of rights, from the responses of 60 elderly (30 Brazilian and 30 Portuguese) to an eight-item questionnaire regarding to the Law for the Rights of Older Persons, (b) discussing the importance of the elderly rights in the Brazilian and Portuguese contexts. In general, the Brazilian sample presented higher scores than the Portuguese sample for the recognition of three rights (priority assistance, free issuing of documents, reserved parking spaces) which might be related to the existence of a legislation in Brazil but not in Portugal. Both groups reported higher scores only of awareness of rights, medium scores for exercising rights and low scores for discrimination of unrespected rights and for mobilization of feelings of justice, which points to possible difficulties to claim for their rights. These findings may indicate that age-specific legislation is a necessary but not sufficient condition to prevent violence against the older persons. We discuss the importance of research and psychosocial interventions to promote the necessary skills for the older persons claim and defend their rights.

Key words: Lusophone countries, older persons, recognition of rights.

Introduction

In the last centuries, the decrease of the fertility rates and the increase of life expectancy have led to population ageing. According to the United Nations Population Fund (UNFPA, 2012), in 2010-2015, life expectancy is 78 years in developed regions and 68 years in developing regions, and by 2045-2050, it will reach to 83 years in developed regions and 74 years in developing

regions. In 2012, there were almost 810 million older persons, and projections for 2050 point to 2 billion older persons. Though ageing is a global phenomenon, there are marked differences between regions: for example, in 2012, 10 per cent of the older population (60 years and above) were living in Latin America and the Caribbean, and 22 per cent in Europe. By 2050, it is expected that 25 per cent of the population in Latin America and the Caribbean will be 60 years and over 34 per cent in Europe.

Although ageing process may vary within the countries, in all cases this process presents social, economic and cultural challenges at different levels: individuals, families, societies and the global community. Postmodernity has brought a new perspective, a new social ontology, and with it there were changes in how social relationships between groups and individuals were legitimized. Instead of modernity, the social body is not homogeneous and, as such, citizenship projects will have to be reconsidered taking into account the identity and group membership. Within this new context, we went from an „*awarded citizenship*“ granted by the modern nation-state, to a „*claimed citizenship*“ by different social groups including the group of elderly and young people (Cabral, 2013, Stoer & Magalhães, 2005).

Considering these challenges, since 2002 a number of countries have approved national policies, plans, programmes or strategies on ageing and older persons and some countries have approved age-specific legislation (UNFPA, 2012). Notwithstanding these preliminary and encouraging initiatives, in many countries older persons report a lack of consideration by the community, health professionals and family members, which indicates that disrespectful behavior, attitudes and ageism may result, among other factors, from lack of public knowledge about ageing and older persons (WHO, 2007). In some countries these changes have also led to the implementation of specific laws. Considered as a prerequisite for social change, knowledge about legislation (by the older persons) is still below the sufficient in different countries, such as Israel, USA (Doron & Werner, 2008), Brazil (Martins & Massarollo, 2010), which may predispose older persons to be vulnerable to violence, abuse and neglect.

According to the 2012 report from UNFPA, of the current 15 countries with more than 10 million older persons, seven of these are developing countries. For instance, in Latin America and Caribbean, during the 90s, some Latin American countries have developed and implemented age-specific legislation and programs (Huenchuan, 2006). Among these Latin American countries, there is Brazil, one of the emergent economies in the first decade of the 21st century beside Russia, India, China and South Africa. According to the Global Age Watch Index 2013¹, Brazil is ranked at the 31st position in a 91-country ranking. The current Brazilian population aged 60 or above is 21.6 million, which represents 10.9% of total population, and by 2050 Brazil will be the 5th oldest country in the world. According to this Index, for the *enabling environment* domain, Brazil ranks at 40, which represents 88% of people over 50 reporting social support of relatives or friends, but only 51% of the same group feeling safe walking alone at night in their neighbourhood. The lowest rank is for employment and education, at 68th (of a total of 91 countries), with only 21.1% of people aged 60 or over with secondary or higher education.

This Index also takes into account whether any national policy and or legislation related to older persons were introduced since 2002. In the case of Brazil, during the transition from the 20th to the 21st Century, there have been implemented the National Policy for Older Persons in 1994 and the Brazilian Law for the Rights of Older People in 2003. Those initiatives developed by the Brazilian Government are aimed to the fully and equally assurance of the rights for older persons, describing legal implications for unrespected rights.

Despite the recent legislation, Brazilian older persons still face some difficulties. There have been some reports of abuse (negligence, physical and/ or sexual violence, inhuman treatment) at some long term care facilities, which may lead to a decrease on physical and mental health, suicide and homicide (Jussana de Sousa, White, Soares, Nicolosi, Cintra & D'Elboux, 2010). According to the Brazilian Human Rights Secretary (2013), from 2011 to 2012, there was an increase of 199% of phone calls to *Dial for Human Rights* service for information and/or denounce about violence

1 Global Age Watch is the first Index that compares quality of life in older age in 91 countries, considering four domains: (1) income security, (2) health status, (3) employment and education, (4) enabling environment. Available data at <http://www.helpage.org/global-agewatch/population-ageing-data/country-ageing-data/?country=Brazil>

against older persons. The most prevalent kinds of violence against older persons in Brazil are: negligence (68.7%), psychological violence (59.3%), financial abuse (40.1%), and physical violence (34%). When linked to socioeconomic inequalities present in Brazil, these evidences highlight the importance of monitoring policies and programmes in order to ensure that those rights are actually being respected and the older persons are aware of their rights.

This is also a global challenge for the 21st Century, as many developed countries still lack a specific legislation for older persons and also are facing a severe economic crisis since 2008. This crisis enhances the perception of competition between generations for scarce services and resources and may lead aged people to even a more vulnerable situation, characterized by poverty and social exclusion. Among these most economically affected countries is Portugal, a lusophone² country as Brazil. This nation ranks³ after Brazil (34th place in the 91 - country rank) in the Global Age Watch Index 2013. Currently, in Portugal there are 2.6 million of older persons (24.4% percent of the population is over 60 years), which it is set to increase to 40.4% by 2050, making Portugal the second of 195 countries with older population by now and it is expected to be the oldest country in the world by 2050 (Cabral, 2013). According to Global Age Watch Index 2013, Portugal ranks at 17 for income security domain, however ranks at 76 for employment and education, with 16.5% of people aged 60 and over having secondary or higher education. Also, in Portugal it has not been introduced any national policy nor any legislation for older people since 2002. As other countries from the European Union, Portugal has undertaken reforms for their social security systems, and as Greece and Italy, Portuguese pension benefits have been reduced (UNFPA, 2012), which may lead to a worsening of the quality of life for older persons.

As seen in other countries, ageing in Portugal is related to an increase in the dependence level of older persons and consequently an increased likelihood of violence and abuse against elderly (Costa, Pimenta, Brigas, Santos & Almeida, 2009; Dias, 2005). According to the *Portuguese Association for Victim Support (APAV, 2013)*⁴, during 2000 and 2012, there was an increase of 179% support processes of older persons victims of crime and violence, as well as 14.139 notifications of violent acts, of which 80.2% were cases of domestic violence. Older women represented 82.2% of the victims, and 54% of them were 65-75 years old. As for the authors of violence, 68% were men and 21.6% aged 65 years or over. In 25.7% of these cases, victim and aggressors were spouses. When taking these data into account, it is possible to infer that Portuguese older persons – especially women – still are a vulnerable group to neglect, isolation and abuse, thus in need of a legislation that actually protects them .

An age-specific legislation is an important ingredient for the exercise of rights by the older persons, but not a sufficient condition. Thus, besides the importance of rights, we must also consider a number of other factors. Among these factors, we highlight the specific competence the older people have to deal with their interpersonal relationships, especially considering assertiveness. Inherent in the concept of assertiveness is the notion of interpersonal rights (Alberti & Eamons, 2008; Del Prette & Del Prette, 2001). In addition, Del Prette and Del Prette (2001) proposed that the effective exercise of rights requires knowledge and recognition of the importance of general and specific rights (Del Prette & Del Prette, 2001).

When evaluating whether a right is respected or not, one must take into account the persons that are interacting – e.g., the individual whose rights were respected as well as the persons who have unrespect those rights. In a preliminary evaluation of older person's perceptions of their rights which was based on the concept of exercise of interpersonal rights proposed by Del Prette and Del Prette (1999; 2005), Braz (2007) developed an instrument for the assessment of recognition of rights, the Older Persons Law Recognition (OPLR). This tool was designed to evaluate eight items from the Brazilian Law for the Rights of Older Persons (Brazil, 2003) in four dimensions: (1) awareness of rights by the victims, (2) discrimination of conditions when rights were unrespected, (3) mobilization of feelings when rights were unrespected, (4) exercise of rights. When discuss-

2 Lusophone countries are those in which Portuguese is the official language.

3 A detailed description of Portuguese indexes is available at: <http://www.helpage.org/global-agemwatch/population-ageing-data/country-ageing-data/?country=Portugal>

4 Information available AT: http://apav.pt/apav_v2/images/pdf/Estatisticas_APAV_Pessoas_Idosas_2000-2012.pdf

ing the obtained findings, Braz (2007) had hypothesized that an existing age-specific legislation has enabled the awareness of those rights by older persons, but has not enabled the exercise of rights. In order to test this hypothesis, one could compare countries where there is legislation with countries that still lack of such legislation.

Problem of Research

Considering (a) ageing as a process with differences between developed and developing countries, (b) the current global economic crisis and its implications to the health care and active ageing, (c) the importance of age-specific legislation, (d) the evidences that older persons still have few knowledge about their rights, and (e) Portugal and Brazil will be among the five oldest countries by 2050 this study evaluated two Portuguese speaking countries, one that is developed, currently under an economic crisis, that lacks a specific legislation regarding to the older persons (Portugal) and other that is a developing country with an approved age-specific legislation (Brazil). The hypothesis of this study is that the existence of an age-specific legislation may lead to a difference in the recognition of rights. A comparison between Brazil and Portugal is justified by the fact that for three centuries (from 15th to 18th Century), Brazil was a Portuguese colony, thus these countries share many cultural aspects, as language (Portuguese), predominant religion (Catholicism) and gender relations, for example. In addition, they are facing the 21st century's challenges of promoting active ageing and protecting older persons rights in times of intense economic and demographic changes.

Methodology of Research

Sample of Research

Participants were 60⁵ persons (46 women and 16 men), ages from 60 to 90 years ($M = 70.07$, $SD = 6.68$), with low to medium educational levels. Within this sample, there were two groups, with 30 participants each: Brazilian Group (BR) and Portuguese Group (PT). The groups were not statistically equivalent (*Mann Whitney Test*), for gender (BR: 27 women and 3 men; PT: 19 women and 11 men; $U = -2.421$, $p = 0.15$) and age (BR: $M = 67.87$; $SD = 4.84$; PT: $M = 72.89$; $SD = 7.73$; $U = -2.000$, $p = 0.45$). Although the groups could not be considered equivalent, these differences were kept because they may reflect the different economic stage of these countries (in developing countries older population is younger than in developed ones). Within the Portuguese sample, there were also two groups which were very different from each other: union retirees, autonomous and / or living with their relatives, mostly in 3rd age, as well as institutionalized older persons, mostly in 4th age. These differences also reflect the heterogeneity among older person's groups.

Instrument

In order to evaluate the recognition of the older persons rights, it was used the Older Persons Law Recognition (OPLR), an 8-item paper-pen questionnaire developed in Brazil (Braz, 2007; 2010) and semantically adapted to Portugal with satisfactory internal consistence (BR: $\alpha = 0.912$, PT: $\alpha = 0.937$). The questions are based on specific items from the Brazilian Law for the Rights of Older People (Brazil, 2003), as: (1) priority assistance, (2) public policies for healthy ageing, (3) working without age-discrimination, (4) access to books, magazines and newspapers, (5) free issuing of documents, (6) reserved parking spaces, (7) representation of older people in the media, (8) protection against inhuman treatment.

Recognition of each right was evaluated by four dimensions: awareness, discrimination of unrespected rights, mobilization of feelings when rights were unrespected, exercise of rights. For each dimension, there were three alternatives of response that would range from zero to two points.

5 We recognize that this sample size may be a limitation of the study, but as this comparison between Brazil and Portugal was never performed before, we decided to run a preliminary exploratory study with a smaller sample in order to verify possible evidences of differences. At the discussing session we also take into account the implications regarding to the sample size.

These alternatives vary from *no* (zero) to *total* (two points) *awareness, discrimination, mobilization and exercise*. The alternatives were written according to the dimension under evaluation. For example, for *exercise of rights* dimension, there was a possibility of no exercise, a passive exercise (i.e., asking someone else to solve the problem) as well as an active exercise (i.e., performing an active role to solve the problem). In Table 1, there is a description of these alternatives as well as the internal consistency indexes (Cronbach's α) for the each dimension of the two versions (Brazilian and Portuguese) of OPLR.

Table 1. The four dimensions of Older Person's Law Recognition: internal consistency indexes and alternatives of response.

Dimension	Cronbach- α	Alternatives of response
Awareness	BR: $\alpha = 0.848$; PT: $\alpha = 0.781$	<i>This right does not exist / I am not sure if this right exists/ I think this right exists</i>
Discrimination	BR: $\alpha = 0.687$; PT: $\alpha = 0.821$	<i>I have never been through a situation when this right was unrespected / I am not sure if I have been through a situation when this right was unrespected/ I have been through a situation when this right was unrespected</i>
Mobilization	BR: $\alpha = 0.843$; PT: $\alpha = 0.918$	<i>I did not feel disrespected / I am not sure if I have felt disrespected / I did feel disrespected</i>
Exercise	BR: $\alpha = 0.919$; PT: $\alpha = 0.960$	<i>If this is (was) unrespected, I often do not do anything/ If this is (was) unrespected, I often ask someone to do something for me / If this is (was) unrespected, I do something myself</i>

Procedure

The researchers directly invited eligible older persons to participate in this study. They were informed about the goals and the procedures for the data collection. After their consent, which was reached by signing the informed consent term⁶, 30-60 minute individual sessions were scheduled. Participants answered the OPLR questionnaire under the supervision of the researchers, which presented standard instructions regarding the procedure of filling in the OPLR questionnaire. In addition, researchers asked the participants to provide information regarding to their gender and age. One has performed descriptive (frequencies, mean, standard deviation, median, percentiles), inferential (non-parametric tests for two independent sample) and internal consistency analysis with the IBM SPSS software, version 20.0.

Results of Research

This study aimed to evaluate and to compare the knowledge of rights in two samples from Brazil and Portugal. First, it is presented the result of the overall score in the OPLR (which is the sum of the total scores of the four dimensions), and the scores for each of the four dimensions of OPLR. Overall Score consists in the sum of the four dimensions and ranges from zero to 64 points. For each dimension, scores range from zero to 16 points.

⁶ The informed consent was a written document which consisted of two parts: the information sheet and the consent certificate. Participants were asked to sign it only if they accepted the terms and conditions of the research. Refusal rate was 0%.

Table 2. Brazilian and Portuguese scores in OPLR.

	Brazil	Portugal
Overall Score	M = 33.03, SD =14.245	M = 30.80, SD =15.192
Awareness	M = 10.00, SD =4.676	M =8.40, SD =4.606
Discrimination	M = 4.88, SD = 4.022	M = 5.40, SD = 4.446
Mobilization	M = 8.85, SD = 5.047	M =7.90, SD = 5.354
Exercise	M = 9.45, SD = 5.762	M = 9.37, SD = 6.162

In the overall score, both groups were located next to 32 points which is the medium point of the scale (BR = 33.03 and PT = 30.30). Nevertheless, the analysis of the four dimensions enables a better understanding of how the participants recognize their rights. For *awareness*, BR is at the superior quartile, and PT is slightly above the medium point. Considering that Brazilian government has introduced a specific legislation for older persons and that BR sample tended to report higher scores for awareness, this may be an evidence that supports our hypothesis of the impact of a legislation over people’s awareness of rights. For *discrimination*, BR and PT are in the inferior quartile, tending to report that they have never experienced a violation of that right in question or that they were not sure it happened. Taking into account the high rates of violence against older persons in Brazil and Portugal, one can infer at least two possibilities: (1) a difficulty to correctly discriminate a situation when rights were unrespected and (2) the fact that the members from these samples are more protected and less vulnerable to the violation of their rights. The scores for *mobilization* were next to the medium point for both BR and PT samples, indicating that participants tended to report that they were not sure about their feelings when these rights were unrespected. This finding, when associated with the previous one, may be also due to their difficulties to identify situations, which have occurred with themselves, when rights may be unrespected. In the last dimension, *exercise of rights*, BR and PT scores were also close to the medium point. Considering that three alternatives for this dimension, the sample tended, in general, to report that they tend to ask someone else to solve for them a situation of unrespected rights.

For each item it was calculated the three most reported rights at the four dimensions, for BR and PT sample. Those data are displayed at Table 3.

Table 3. The most reported rights at each dimension for BR and PT samples.

	Awareness	Discrimination	Mobilization	Exercise
Brazilian sample	Priority assistance (86.7%) Free issuing of documents (66.7%) Protection against inhuman treatment (63.3%) Access to books, magazines and newspapers (63.3%)	Unhuman treatment (30.0%) Unrespected priority assistance (23.0%) Age related offenses (20.0%)	Unhuman treatment (64.3%) Free issuing of documents (60.0%) Priority assistance (56.7%)	Public policies (56.7%) Priority assistance (53.3%) Age discrimination in working places (50.50%)
Portuguese sample	Public policies for healthy ageing (73.3%) Protection against inhuman treatment (58.6%) Working without age-discrimination (57.1%)	Non free issuing of documents (55.6%) Unrespected priority assistance (37.0%) Unhuman treatment (32.1%)	Unhuman treatment (32.1%) Free issuing of documents (55.6%) Priority assistance (37.0%).	Priority assistance (71.4%) Public policies (58.6%) Unhuman treatment (58.6%)

One should note that for all dimensions participants tended to report more frequently those items related to personal dignity, physical integrity and social mainstreaming. These reports are very similar to those found by UNFPA (2012) in a global survey with older persons from developed and developing countries. Also, for the third dimension, *mobilization of feelings*, the three most frequently situations of unrespected rights were the same for both samples.

Comparisons of these scores between Brazilian and Portuguese participants, pointed to similarities in the overall score and in three of the four dimensions (*Discrimination, Mobilization and Exercise of rights*), although Brazilian participants significantly self-reported higher awareness of rights than Portuguese did ($U = - 2.737, p = 0.006$).

When comparing both gender and country of origin separately, there was not any statistically significant difference for these five scores. Controlling for gender, Brazilian women presented higher overall scores ($U = - 1.987, p = 0.047$) and awareness scores ($U = - 3.144, p = 0.002$) than Portuguese women. Considering the small Brazilian male sample ($n = 3$), this comparison was not made for men.

Comparisons between these groups for the eight rights in the four dimensions, showed overall similarities between the BR and the PT samples for five of the eight items. For the following items, the Brazilian sample self-reported higher *awareness* scores for the right of priority assistance ($U = - 3.889, p < 0.000$), free issuing of documents ($U = - 2.002, p = 0.045$) and reserved parking spaces for older persons ($U = - 1.161, p = 0.002$), as well as higher *discrimination* of situations when the right of free issuing of documents was unrespected ($U = - 4.408, p < 0.00$). Although not statistically significant, BR sample also reported higher scores than PT sample for the discrimination of unrespected priority assistance ($U = - 1.947, p = 0.052$), which was very close to the significance level. Overall, findings suggest that legislation is an important but not sufficient condition for the actual – and active – exercise of rights by older persons.

Discussion

Considering two countries with historical and cultural proximity, it was hypothesized that the existence of an age-specific legislation only in Brazil but not in Portugal would lead to differences between these countries for the recognition of rights by older persons. There were differences between the BR and PT samples for the overall awareness of rights as well as for the awareness of two rights and the discrimination of one situation of unrespected right. In all cases, the Brazilian sample reported higher scores of awareness and discrimination than the Portuguese sample. Though this is an exploratory study with modest results, these findings are towards our hypothesis and also present an evidence that the existence of the Law for the Rights of Older People (Brazil, 2003) has some impact in older persons recognition of their rights. When older persons (a) have legislation that supports them and (b) are aware about their rights, they are more prone to identify when these rights are unrespected, thus they will be able to exercise their rights. Although there is a certain distance between being aware about rights and exercising these rights, awareness is a necessary – but not sufficient - condition for the exercise: it is an important empowerment tool for a group that is frequently very vulnerable and unrespected.

These differences between the Brazilian and Portuguese sample may also reflect dissimilar concerns presented by these two nations. According to Doron and Werner (2008), every country differs in terms of legal system and consequently there may be diverse sets of rights for older people. In a review of 113 countries' age-specific policy changes (UNFPA, 2012), it was found that in developed countries a higher concern about increased costs on health care, long term care provision and the sustainability of existing pension systems. On the other hand, developing countries seem to be more concerned about physical space for social policies relating to health and income security and the impact of the recent demographic changes on poverty education. Different concerns may lead to different policies, thus leading to different perceptions and exercises of rights.

These findings are in concordance with those from another study with Brazilian Sample (Martins & Massarollo, 2010) in which older persons pointed that they were entitled to public transportation, priority assistance, reserved seats, access to health and overall respect. In this study, only 49.2% of the sample reported to fully know their rights. Studies from other countries as the USA (AARP, 2000) and Israel (Doron & Werner, 2008) report similar results regarding the below to sufficient level of knowledge about age-specific rights, which indicates that promotion of recognition of rights by the older persons is still a global challenge.

There is a substantial body of empirical evidences stating gender differences in ageing as well as the influence of gender over the life course in terms of access to resources and opportunities. Ac-

According to UNFPA (2012), older women worldwide are usually more likely to experience discrimination, poor access to jobs and healthcare, subjection to abuse, denial of the right to own and inherit property, and lack of basic minimum income and social security. In addition, violence and abuse against older women often occur in the immediate family but it remains even less visible in society than violence against younger women. Some statistics from Portugal seem to confirm this trend, while in Brazil there is still a lack of information about violence against older women. In this study, Portuguese women reported lower scores for overall recognition and for awareness of rights. These lower scores might be related, in some extent, to higher probabilities of being a victim of aggression. Due to a smaller number of men within the Brazilian sample ($n = 3$), it was not possible to perform comparisons between Brazilian and Portuguese men.

Notwithstanding the social relevance of these findings and their potential contribution to the discussion and evaluation of the existing age-specific public policies, this study has some limitations. One of them is the sample size, that constrains the range of statistical analysis and the generalization of these results. As these initial results seem to support our hypothesis, further studies should collect data from a broader sample, and even from other lusophone countries, as Angola, Mozambique, Cape Verde, Guinea-Bissau, São Tomé and Príncipe and East Timor. The second limitation is the different proportion of women and men, specially within the Brazilian sample. The second limitation is also regarding to the sample: in Brazil, the ageing process strongly varies from one geographic region to the others – this BR sample is from São Paulo state, the richest one in Brazil – then future studies should make a comparison between regions. In this sample, although some socioeconomic variables were collected, it was not evaluated the socioeconomic status. Considering that the educational level of the sample was low, it is possible to indirectly infer their socioeconomic status, but this variable may be important to compare the recognition of rights between different groups – wealthier persons could have more access to information thus may have higher recognition of rights. Finally, the number of items may be sufficient only for partial and preliminary evidences.

It is important to take into account that those reported differences may also reflect the fact that the older generation is a heterogeneous group, possibly with different levels of vulnerability. Considering in particular, differences between third and fourth age, women and men, those who still live autonomously and those who are institutionalized, thus highlighting the need of diverse policies and intervention strategies. Therefore, planning and introducing programmes and intervention models for the promotion of older person's rights must address variables as age, sex, ethnicity, education, income and health (UNFPA, 2012).

Conclusions

Considering ageing as a challenge of the 21st century, this study has compared the recognition of age-specific rights by older persons from countries in different economic situations (i.e., one is a welfare state currently on an economic crisis, and the other is a developing country with an emergent economy) but both with considerable socioeconomic inequities, thus with potentially diverse implications on the public policies regarding the elderly. Differences were found in some aspects of recognition of rights, thus indicating that a specific legislation may increase the older person's awareness of rights. These findings are the first of this kind to provide a perspective of older person's recognition of rights through a comparative approach in Portuguese speaking countries experiencing different economic challenges.

In general, the higher scores reported by the BR sample when compared to the PT sample indicates that age-specific policies are important and should be implemented in countries that still lack this kind of legislation. Even important, the legislation itself is not a sufficient condition for the actual protection of rights: both groups reported low scores for discrimination of unrespected rights as well as modest scores for mobilization of feelings and exercise of rights when unrespected. Beyond legislation, there must be a combination of both public policies and programmes in order to promote older person's awareness of their rights, in terms of the rights they are entitled to and also should expect to receive. In addition, in order to attain this goal, it is necessary to broadcast the older person's rights to the society as a whole: older persons themselves, younger family members, health professionals (such as physicians, nursing staff, and therapists), human resources specialists,

policy makers, economists. In addition, interventions, such as Social Skills Training should be a useful and already effective proven resource for the promotion of rights for older persons (Braz, Del Prette & Del Prette, 2011).

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