

# Elderly people's self-perception about their hearing conditions, their listening and their communication strategies

Autopercepção de idosos a respeito de suas condições auditivas, de sua escuta e de suas estratégias de comunicação

Autopercepción de ancianos acerca de sus condiciones auditivas, de su escucha y de sus estrategias de comunicación

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## **Abstract**

**Introduction:** Recent studies in the area of Speech Language Therapy have considered aging in addition to organic aspects, based on social participation and autonomy of the elderly person. In this sense, it is necessary to emphasize the role of language, conceived as a dialogic activity, in the promotion of active aging, which depends on the possibility of listening and being listened to. **Objective:** To investigate the self-perception of the elderly regarding their hearing conditions, their listening and their communication strategies. **Method:** Based on the dialogical analysis of the discourse, a semi-structured

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### **Authors' contributions:**

RTG e ACG – worked on the conception, aligning, analysis, data interpretation and final writing; GM, SK, IBS, ABP, APB, RT – worked on the research, methodology, analysis, data interpretation and final writing.

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**Received:** 25/07/2018

**Approved:** 08/06/2019

interview was conducted with seven elderly people, with and without hearing loss, participants of a Language Workshop that took place in a University located in Southern Brazil during the year 2016. **Results:** The statements produced by the participants show that the elderly use strategies for better listening, such as getting closer to the speaker, looking straight ahead and paying attention to the other. Regarding the self-perception of listening, some elderly people relate the fact that they do not listen to negative experiences in childhood and their years at school. **Conclusion:** The possibility or difficulty to listen, in the participants' perception, distances itself from explanations of organic character and indicates the importance of valorization and acceptance to the singular word of the other. Thus, this perception can serve as a reference to other professionals who work with the elderly, so that they can act, considering each elderly and their discursive productions as unique. This change of look can favor the autonomy, the quality of life and the social insertion of this part of the population.

**Keywords:** Elderly; Hearing; Speech; Language and Hearing Sciences; Communication; Language.

### Resumo

**Introdução:** Estudos recentes na área da Fonoaudiologia vêm considerando a velhice, para além de aspectos orgânicos, a partir da participação social e da autonomia da pessoa idosa. Nesse sentido, cabe ressaltar o papel da linguagem, concebida como atividade dialógica, na promoção do envelhecimento ativo, a qual depende da possibilidade de escutar e de ser escutado. **Objetivo:** Investigar a autopercepção de idosos a respeito de suas condições auditivas, de sua escuta e de suas estratégias de comunicação. **Método:** Tendo em vista a análise dialógica do discurso, foi realizada uma entrevista semiestruturada com sete idosos, com e sem perda auditiva, participantes de uma Oficina da Linguagem que ocorreu em uma Universidade localizada no Sul do Brasil, durante o ano de 2016. **Resultados:** Os enunciados produzidos pelos participantes evidenciam que os idosos fazem uso de estratégias para ouvir melhor, tais como aproximar-se do falante, olhar de frente e prestar atenção no outro. No que diz respeito à autopercepção da escuta, alguns idosos relacionam o fato de não ouvirem às experiências negativas na infância e aos seus anos na escola. **Conclusão:** A possibilidade ou dificuldade para escutar, na percepção dos participantes, distancia-se de explicações de caráter orgânico e indica a importância da valorização e do acolhimento à palavra singular do outro. Assim, essa percepção pode servir de referência a outros profissionais que trabalham com idosos, para que possam atuar, considerando cada idoso como único e suas produções discursivas como singulares. Essa mudança de olhar pode favorecer a autonomia, a qualidade de vida e a inserção social dessa parcela da população.

**Palavras-chave:** Idoso; Audição; Fonoaudiologia; Comunicação; Linguagem

### Resumen

**Introducción:** Estudios recientes en el área de la Fonoaudiología vienen considerando la vejez, además de aspectos orgánicos, a partir de la participación social y de la autonomía de la persona mayor. En este sentido, cabe resaltar el papel del lenguaje, concebido como actividad dialógica, en la promoción del envejecimiento activo, la cual depende de la posibilidad de escuchar y de ser escuchado. **Objetivo:** Investigar la autopercepción de ancianos acerca de sus condiciones auditivas, de su escucha y de sus estrategias de comunicación. **Método:** En vista del análisis dialógico del discurso, se realizó una entrevista semiestruturada con siete ancianos, con y sin pérdida auditiva, participantes de un Taller del Lenguaje que ocurrió en una Universidad ubicada en el Sur de Brasil, durante el año 2016. **Resultados:** Los enunciados producidos por los participantes evidencian que los ancianos hacen uso de estrategias para oír mejor, tales como acercarse al hablante, mirar de frente y prestar atención al otro. En lo que se refiere a la autopercepción de la escucha, algunos ancianos relacionan el hecho de no oír a las experiencias negativas en la infancia ya sus años en la escuela. **Conclusión:** La posibilidad o dificultad para escuchar, en la percepción de los participantes, se aleja de explicaciones de carácter orgánico e indica la importancia de la valorización y de la acogida a la palabra singular del otro. Así, esa percepción puede servir de referencia a otros profesionales que trabajan con ancianos, para que puedan actuar, considerando cada anciano como único y sus producciones discursivas como singulares. Este cambio de mirada puede favorecer la autonomía, la calidad de vida y la inserción social de esa parte de la población.

**Palabras claves:** Personas de edad avanzada; Audición; Fonoaudiología; Comunicación; Lenguaje.

## Introduction

Aging is a reality for the population in most countries around the world. Even though substantial improvement in health parameters of the observed populations in the 20<sup>th</sup> century is far from being equally distributed in diverse countries and socioeconomic contexts, aging is no longer the privilege of a few. In Brazil, 2015 data from the Brazilian Institute of Geography and Statistics estimate that 33.7% of its population will be constituted by elders<sup>1</sup> until 2060. In view of these data, government policies oriented to elders started to consider their functional capacity, their need of autonomy and their social participation.

Regarding elderly people's functional capacity, aging brings about biological changes, such as, vision loss, chronic-degenerative diseases and hormone decline; psychological changes, such as dependence on other people in activities of daily living; and social ones, usually related to productivity and family income decrease<sup>2</sup>. Another important biological change is age-related hearing loss.

In Brazil, that loss has been cited as the most frequent cause for hearing impairment among the elders, and may hinder oral communication as well as social interaction. Age-related hearing loss is usually bilateral, symmetric, slowly progressive and neurosensory most of the time. It is a multifactorial impairment, influenced by genetic and environmental factors, with noise, pharmacological use and some chronic pathology, such as renal failure, diabetes and hypovitaminosis standing out<sup>3</sup>.

Studies<sup>4,5</sup> point to the significant impacts of age-related hearing loss on elderly quality of life and welfare, relating them to depression and withdrawal. From the emotional standpoint, in addition to depression, such hearing loss may trigger negative feelings, such as frustration, embarrassment or guilt for not being able to communicate efficiently<sup>6</sup>. Moreover, elders' self-esteem, feelings of exclusion and social withdrawal are connected to their difficulties in listening to other people during speaking interactions.<sup>7</sup>

Speech Language Therapy, studies<sup>5,8</sup> commonly relate hearing loss and old age only to organic aspects, which occur during the aging process, and to their negative effects on that population's quality of life. Furthermore, some studies refer to age-related hearing loss, specifically addressing aspects about the efficient use of hearing aids<sup>7,9</sup>.

However, it is worth mentioning that despite old age features organic losses, this life stage must not only be defined by impairments and limitations, but also by the possibilities that elders have to participate and contribute to the community they live in<sup>10</sup>.

In view of that understanding, recent studies in the Speech-Language Therapy area have considered old age from aspects beyond the organic ones, focusing on their social participation, autonomy and active aging<sup>5,8,10</sup>. Such studies have pointed that elders' work may be grounded in health promotion, which stresses their protagonism by means of effective dialogical interactions, as well as discussions of themes of their interest, such as: aging, language, literacy, health, education, among others. That kind of work enables that a relationship network be built, in which each participant can organize and explain their ideas, influencing the others.<sup>10</sup>

In this sense, the role of language as a dialogical activity should be pointed out in its promotion of active aging<sup>6</sup>, understanding that, by means of the dialogue, people relate to each other in different cycles of life, influencing each other, participating and changing the community that they live in. Thus, in social relations, words work as a bridge between the speakers<sup>11</sup>, enabling them to be listened to and to listen to themselves.

Here, hearing<sup>12</sup> means the sense of hearing, the ear itself, while listening means to be there for the other. Hearing is related to the linguistics of silence, to the code, the reduction of the enunciation to a sentence, the reduction of the sign to a signal, the monologism<sup>12</sup>. Hearing is usually practiced by professionals who carry out a job of standardization in the communicative universe, in which the verbal sign is reduced to the features of the signal or sound, that is, sounds, words and sentences are perceived in a monological way, out of the verbal interactions<sup>13</sup>. On the other hand, listening is understood as the attitude to give the other some time, to entertain yourself with the other's enunciations: listening<sup>12,14</sup>.

In view of the relevance that the act of listening takes on for social participation, the current study aims to investigate elderly people's self-perception on their hearing conditions, listening and communication strategies.

## Methods

It is an intervention research<sup>8</sup>, which delimits a joint construction of a space of opinion re-meaning, taking on an active and transforming nature of the reality. It is grounded in a dialogical perspective of the language, which, according to an author<sup>12</sup>, considers that the researcher analyzes and intervenes in the praxis/discourse of the involved subjects from his/her responsive status and authorship. In this perspective, research realm is seen as a place to produce discursive practices, which foster not only the re-meaning of the past, but also a future outlook. Thus, the creation of a dialogical space, to value the voices and involve the participants, is essential for the use of the written and spoken language, as well as for the re-meaning of each subject's life story<sup>8</sup>.

Seven elderly subjects participated in this study (real names withheld), taking part in an activity of language promotion by means of dialogical tasks. It should be pointed that this activity, called Language Workshop, is connected to the Speech Language Therapy Graduation Course and Master's Degree and Doctorate Programs of a university in Southern Brazil. In 2016, undergraduates, two language speech therapists and seven elderly subjects, with or without hearing loss, participated in this workshop. The elders signed a free informed consent form, and started attending the Workshop.

Participants' inclusion criteria were: age equal to or older than 60 years, participate in the Language Workshop, and not suffer from any neurological injuries.

Therefore, the participants in this research are seven elders, six females and one male. They are recognized by the following aliases: Maria, Sara, Raquel, Talita, Lia, Marta e Mateus. Participants' profile and hearing impairments are described below:

Maria: female, 85 years of age, widow, lives alone, concluded higher education. She features moderate, bilateral hearing loss. She wears a hearing aid.

Sara: female, 62 years of age, married, retired, lives with husband and son. High-school graduated. She has normal hearing.

Raquel: female, 66 years of age, divorced, retired, lives alone. She concluded higher education and has normal hearing.

Talita: female, 65 years of age, widow, retired, lives with her son. She did not conclude middle school (9 years). She features moderate, bilateral hearing loss. She is in the process of getting a hearing aid.

Lia: female, 85 years of age, single. She lives with a daughter and two granddaughters. She never attended school and has normal hearing.

Marta: female, 67 years of age, married, retired. She lives with her husband. She has incomplete high school level. She features moderate hearing loss in the right ear and anacusis in the left ear. She wears a hearing aid.

Mateus: male, 66 years of age, married, retired. He lives with his wife and a daughter. He attended until the second grade of elementary school. He features severe hearing loss in the left ear and moderate hearing loss in the right ear. He wears a hearing aid.

The Language Workshop was held throughout the year of 2016, a total of 25 weekly meetings, 90 minutes each, between February and December. The dialogical interventions carried out during the meetings were based on the elaboration of written and oral texts on some specific themes, such as: youth, childhood, and aging, among others. All meetings were audio recorded in mobile phones and transcribed by the undergraduates.

All texts written by the participants, during the second semester of 2016, were narratives on aging and elders' projects for the future. The process of text production comprises a discussion of each text by the group, questioning, pointing gaps, giving suggestions. After writing and re-writing each text, each elder's written production was changed into a book chapter, published as an e-book in social networks, titled: "Dê trela para a velhice" ("Pay attention to the elders").

In November, 2016, all the elderly participants answered a semi-structured individual interview, entailing 15 guiding questions, which investigated elders' self-perception on their hearing conditions, listening and communication strategies. The average time for the interviews was 30 minutes. The interview is understood here as an enunciation mechanism that promotes text production by the researched participants. In addition to these data, the enunciations produced during the meetings were also recorded.

The research was approved by the Ethics Board on Research from Universidade Tuiuti do Paraná, protocol number 102/08.

## Results

Subsequently, the study results are presented, organized in two thematic axes, according to the study objective. The first evidences the communication strategies used by the elders during the social interactions, and the second describes participants' self-perception on their hearing conditions and listening.

### Axis 1 – Communication strategies used during the social interactions

This axis aims to explain how the elders affected by hearing loss or not, make use of strategies to interact better and follow their socioverbal practices. Therefore, they were asked about their strategies for better participation in social interactions. The most representative enunciative excerpts, collected during the interview and/or meetings, were selected for analysis.

#### Chart 1. Elders' enunciations on the communication strategies used during their social interactions

**1-Mateus-** "I have to approach the person as near as possible, or if he/she is talking to me, he/she has to be looking at me. Like that, I get everything. You see the movement of their lips, and hearing a bit, you find the word and can answer it".

**2-Talita-** "I think I pay more attention. Listening and not paying attention doesn't work."

**3-Sara -**"I usually try to silence. I usually get here and clean up my mind so that I can listen to what is going on here, because I like to focus on what I do (...)".

**4-Mateus-** "In the beginning, I couldn't be in noisy, crowded places. Until I got adapted to. That took years."

**5-Talita -** "Mainly at children's birthday. They keep inviting me, but I don't go because of that, all that noise. Children come and speak to me, I don't understand. Church party has also a lot of acquaintances, then lots of people talking, music, and all gets mixed up in my head."

**6-Maria-** "I poke her and ask what was going on, mainly when everybody is laughing (...)".

**7-Marta-** "I think, with the hearing aid, I can hear well (...) I find it hard when I sit near someone on the bus, and they speak to me at the side I don't wear the hearing aid...I end up asking them to sit by the side that I wear the hearing aid (...) The same on the phone...Sometimes, it's harder for me to listen... In parties, I end up setting myself apart, for being hard to understand when many people talk at the same time... I don't like to keep asking them to repeat what they said when I don't know them well... when I can, I try to get closer to the order to listen to more."

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Regarding the results from the first axis, on the strategies used by the elders during their social interactions, it was observed in enunciation 1, by Mateus, that one of his strategies is to look at the speaker during the interactions, and face him. To this participant, the strategy enables him to participate in the discourse more actively. It should be clarified that Mateus suffers from hearing loss, and stated, during the interview, that he does not make use of lip reading. However, by elucidating that the person must be looking at him during their dialogue, it can be assumed that he uses lip reading as a strategy to facilitate his understanding of the other's speech.

In enunciation 2, by Talita, her strategy is to pay more attention, that is, to be more attentive to the situation and the interactional context. As for enunciation 3, by Sara, who has normal hearing, she also states that she needs to keep silent in order to understand what is going on in the group, that is, focus on what is going on.

Enunciations 4 and 5, by Mateus e Talita, refer to the difficulty in listening understanding in noisy settings. This is observed as a common complaint among people with hearing loss, and in the case of the study participants, that draws them away from social situations.

In enunciation 6, formulated by Maria, her mentioned strategy is to search for help of those around her in order to participate in dialogical interactions more actively. That participant features hearing loss, thus, when people talk at the same time, she cannot follow their conversation.

Regarding strategy mentioned in enunciation 7, by Marta, she refers to turn to the side that she has milder hearing loss in order to follow the conversations. Such enunciations evidence the difficulties faced by elders with hearing loss during their daily lives, that is, how the hearing loss affects their social interaction in daily life, as for example, on a bus or on the phone.

### *Axis 2- Elders' self-perception on their hearing conditions and listening*

This axis is related to elders' self-perception on their hearing conditions and listening. Excerpts from participants' speech were selected for being representative of the analyzed thematic. From the participants' enunciations, three sub-thematic axes were found:

- Hearing possibilities in childhood;
- Relation between hearing and schooling;
- Perceived changes after participation in dialogical activities.

## **Chart 2.** Elders' enunciations on their hearing conditions and listening

### **1) Listening possibilities in childhood**

**8-Raquel:** "At mealtimes, I had three brothers, you only ate at the table. My dad, if you said something, would make that face that scared you to death. Now, imagine 3 quiet children... this doesn't happen. At that time, children were not quiet either. Then, at mealtime, you were just eating, eating there, looked at your brother, and felt like laughing. If you uttered a word, if you said something, ugh!!!!"

**9-Maria:** "A child couldn't speak at the table, a child was not listened to, a child didn't know what he/she was saying."

**10-Marta:** "I couldn't listen to anything my parents... the adults were talking. Don't do this, don't do that, and didn't explain why. I feared my dad, it wasn't respect, it was fear."

### **2) Relation between listening and schooling**

**11- Talita:** "I hear what people say, but I can't listen to what they say. I don't understand (...) Any daily subject. I recently realized that. It seems that I don't follow others' reasoning. I think that's because I have little schooling."

**12- Mateus:** "It was a hard time for a child at school... but I could learn how to sign my name... and then, with the time, you got life wisdom... you grow older and you start watching things... people. I lost the learning of listening a bit because I have little schooling...but you go along with God, and everything turns out nice."

**13- Lia:** "You know... I happen not to understand... but I don't understand because I don't have any schooling (...) you know that difficult word? I can hear well... but I don't know what it means."

**3) Perceived changes after participating in dialogical activities**

14- **Talita:** "I want to be better, because I came out of my shell, when I came here, I wanted to go back to studying, my desire is to stay out of my shell."

15- **Maria:** "Due to some childhood traumas, I've always had low self-esteem...my nieces told me I was a writer, I thought... Poor girls... just to please me (...) I've NEVER dared to think of myself as a writer... even when I make poetry... people read and tell me it's beautiful, and I end up thinking that it's just to please me...when I got to this group...I was really lost...scared...I'd never heard about that...but I was wonderfully taken in".

16- **Marta:** "I already said in the group that once I wanted to write a book about my life... I remember everything, since I was 2 years old...But a friend talked me out, saying that it was very hard to write a book...better forget that (...) After the workshop, I decided to write... I've already bought a pocketbook to start taking down".

**1) Listening possibilities in childhood**

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It is perceived in enunciations 8, 9 and 10, that during their childhood, those participants refer to their difficulties in speaking during their moments among their families, as they did not have space to take a stand, they did not feel that they were listened to within family settings. As for enunciations 11, 12 and 13, they related the fact of having difficulty in listening to their little schooling.

Regarding the changes that took place after their participation in the language workshop, enunciation 14, by Talita, shows that the proposed dialogical intervention had positive effect on her, making her pursue old dreams. Thus, after the talks held in this setting, where she stated that she was not listened to, and did not have the chance

to attend school, she made up her mind and went back to studying.

Still concerning the positive outcomes of their participation in the language workshop, enunciations 15, by Maria, and 16, by Marta, show the role of dialogical activities, in which they felt they were taken in and valued by their discursive productions and life experiences.

## Discussion

Before discussing the two thematic axes, formerly presented, it is worth analyzing briefly the aspects related to the participants' social profile. Although this study was carried out with seven participants, the sample profile corroborates other studies. Thus, it can be observed the female prevalence among the elders in Brazil. Data from the Brazilian Institute of Geography and Statistics<sup>1</sup> point that such a prevalence can be attributed to the fact that women not only live longer, but also they search for healthcare services more often and, in general, they develop a sharper perception on their health status. A research study<sup>15</sup> shows that the main explanation for the difference in gender lifespan, in Brazil, is that violent deaths strike male population more acutely. By violent deaths, it is understood those mainly caused by car crashes and homicides. Alcohol abuse is a significant factor for the occurrence of violent deaths.

Concerning the level of schooling, it is evidenced significant diversity among the participants in this workshop: an elderly female has no schooling; an elderly female and an elderly male have incomplete middle school, and another elderly female has incomplete high school; an elderly female has complete high school; and two elderly women concluded higher education. A study<sup>16</sup> points that little schooling among the elderly population is probably due to the educational status in the country when those participants were in their school age.

Regarding these elders' hearing, this group comprises three elders with normal hearing, and four of them featuring hearing loss. Age-related hearing loss, evidenced in the participants<sup>7</sup>, may seriously hinder these elders' social interaction<sup>17</sup>.

In the first thematic axis, which refers to the strategies used by the elders during their social interactions, one participant, suffering from hearing loss, stated that she uses lip reading as a strategy. It should be clarified that lip reading is the act

of understanding the words by interpreting the speaker's articulatory movements<sup>18</sup>, helping people who suffer from hearing impairments to visualize the words, apart from hearing them. However, this strategy depends on several factors, such as speech speed, the speaker's articulation, the knowledge of the articulated words, which, in general, makes that only 25% of the speech can be understood using this strategy<sup>18</sup>.

Two other participants, with and without hearing loss, explained that they needed to pay more attention to the other's speech, that is, they should be more attentive to the situation and interactional context. This strategy, used by the hearing impaired, or those with normal hearing, can be analyzed in light of Bakhtin's concept of responsive understanding<sup>19</sup>, which refers to the dialogical response or the silent response. However, it is understood that the response may not follow the enunciation, because the responsive understanding can be effected in the following way: soon after the action (compliance with the understood order, command and others); by means of the silent responsive understanding, also called delayed responsive understanding, in which what was said, it is only responded in the subsequent speeches<sup>19</sup>.

It should be elucidated that speech understanding of the other occurs in a precise, concrete context, thus, we do not actually utter or listen to words, but to truth or lies, good or bad things, significant or ordinary ones, pleasant or unpleasant, etc. The word is always loaded with content or an ideological or experienced meaning<sup>11</sup>. Thus, by participating in group activities, hearing impaired or not, we understand the enunciations, and only respond to those that echo ideological resonances in ourselves or that are life-concerning.

In this sense, active-responsive understanding searches for meaning in the speech of the other, a more or less intense process to the extent that the listener's speech is loaded with more or fewer language resources. Understanding the other means to get in tune with the other, even by disagreeing with them. When we get understood by the other, our words correspond to theirs. Therefore, in the process of active and responsive understanding, the other's speech triggers the inevitability for the pursuit of the meaning(s), and such pursuit, in turn, makes "who understands" take a stand, being oriented by the enunciation of the other<sup>12</sup>.

Regarding the strategy mentioned by two participants in face of their difficulties to hear in noisy settings, a study on hearing loss among the elders elucidates that when they do not understand what is said, they tend to give up daily activities, which may cause feelings of loneliness, unhappiness, and detachment<sup>5</sup>. Thus, it is common for the elders with hearing loss to seek quieter settings, with fewer people and possibilities of social interaction, as stated by Talita in enunciation 5.

Another issue pointed by Mateus, in enunciation 4, is concerned with the hearing aid fitting which, according to him, had been a long process. These data differ from another study, which shows that after 30 days wearing a hearing aid, significant changes occur in elders' social life<sup>9</sup>. To Mateus, the process took many years, which evidences the importance to consider each elderly subject as unique, as each one has his/her own story, and space, which cannot be taken by any other. By perceiving each person as unique, with his/her own existence, the speech language therapist may push each individual to take a stand, to respond by his/her own existence<sup>10</sup>.

In relation to the strategy of asking for help to the nearest individual, mentioned in enunciation 6, Chart 1, it was used by the participant practically all the moments during the meetings. When that occurred, the speech language therapists, who participated in the dialogical activities, observed whether only that strategy was enough for Maria to participate actively in the dialogical interactions, or if it was necessary to explain again what was being discussed, by turning to her. It was perceived, during the meetings, as that participant suffered from hearing loss, when many people spoke at the same time, she was not able to follow. However, that did not prevent her from participating in the discursive interactions due to her hearing loss. Probably, for being taking in and valued by the other participants from the group, Maria was compelled to participate in the dialogical activities during all the meetings.

Maria's enunciation also evidences that the listening process goes beyond organic issues of having impairment or not, elucidating that listening is not a passive activity, only dependent on the integrity of the hearing system. Listening moves the subjects, making them speak, facing what they do not know, their doubts about themselves and the world<sup>12</sup>.

Maria reported, during the interview, that she takes part in a painting group, in which she practically does not use any strategies to listen to and participate because she thinks that most subjects discussed there are not interesting. She even says that she removes her hearing aid due to the noise, when the other participants speak at the same time.

Another strategy reported by the elders was to approach the speakers and turn to the side in which they can hear better. Those strategies were mentioned in another study<sup>7</sup>, which shows that the elders, who have age-related hearing loss, experience decrease in hearing sensitivity and a reduction in the speech intelligibility, impairing their process of social interaction. When such a hearing loss affects high-pitched sounds, the perception of consonants becomes very hard, especially in noisy settings. Despite the agreement with the study, it is necessary to point out that, during the social interactions, people with or without hearing loss must have a responsive understanding to the speech of others, otherwise their understanding decreases.

In the axis two, where the significance given by the elders to their hearing conditions and listening is analyzed, it can be perceived that the participants relate their own listening to their childhood, to their level of schooling, and to the impact of participating in the workshop on their lives.

When the elders related their difficulty in listening to the scarce space they had to be heard at their homes, it must be considered that the experiences along their lives bring about processes of language appropriation and positioning in face of their unique life stories. Thus, in each situation of interaction with the other, each individual is at a certain moment of his/her unique trajectory, carrying certain possibilities of interpretation and re-meaning of former experiences<sup>20</sup>. Childhood is a time where experiences occur, with decisive and configuring outcomes throughout the further development<sup>20</sup>, along each subject's life.

In addition to their little chance to speak in family settings, these elders tend to associate their difficulty in listening to their little schooling. According to studies<sup>21-23</sup>, adults with low schooling tend to feature a way of thinking based on their individual experience, as well as on their concrete relations, observed in their daily lives, while those better educated, they operate in a dissociated way from concrete situations, usually making more elaborated reflections about certain issues.

Concerning the changes that occurred to them after their participation in the language workshop, some enunciations point out that the dialogical activities, proposed to the group, had positive effects on their social interaction. Thus, it can be inferred that the group activities, held during the Language Workshop, fostered the space so that several participating voices echoed during the meetings<sup>24-26</sup>. Each word produced by a group participant is perceived to expect a counter-word from the listeners, thus this concerted call established between the one who speaks and the one who listens to, brings about situations that shake up established positions, expand the knowledge on discussed subjects, promote reflections, leading the participants of the dialogues to new stand points<sup>25-27</sup>.

The workshop was also mentioned by the group participants as a space of taking people in and value them, thus it can be claimed that those participants could re-mean their own aging and history from the social relations established there. By analyzing such enunciations in Bakhtin's perspective, one can realize that the enunciated words, within certain social context, constitute a bridge between the speakers<sup>11</sup>, and it is by means of that bridge that each elder, listening and being listened to, may build new ways to his/her own aging, acknowledging him/herself as a social contributor<sup>28,29</sup>.

The analysis of the enunciations, produced by the elders during the meetings in the language workshop, evidences that listening depends on the intention of considering the other's word, history and opinions. In other words, listening entails to understand the meaning of the enunciation, realizing that the word receiver is active and part of a responsive position, by means of the encounter of words. Therefore, each living enunciation, even that from the one who starts speaking, is understood to be an active response, and each understanding is, in turn, a response, even before the listener responds to it<sup>11</sup>.

## Conclusion

From the analysis of enunciations of participants in a Language Workshop, it can be concluded that all elders, hearing impaired or not, make use of strategies for social interaction, among those mentioned, looking at the speaker, paying attention to the speaker, asking for the other's help, approaching and setting apart from interactional

situations. Despite the use of such strategies, during dialogical interactions, it should be pointed out the importance of the responsive understanding, that is, to be there for the other, and to the extent that it occurs, to feel part of that, taken in, as it occurs in the Language Workshop.

Regarding the self-perception of their hearing conditions and listening, it was possible to observe that the participants do not relate their impairment to organic aspects. On the contrary, in the analyzed enunciations, it was evidenced that the research participants relate the fact of poor hearing to negative childhood experiences and their little schooling.

The results in this study can be considered groundbreaking, as they go beyond aging in an organic perspective, and address it in a dialogical perspective, considering subjects in their singularity. Thus, these results can be a reference to other professionals, who work with elderly individuals, so that such professionals' interventions can consider each elder as unique, and his/her discursive productions as singular ones. Such a change in perspective may favor the autonomy, quality of life and social insertion among this share of population.

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