45 - THE PROJECT ORIENTATION PRACTICE PHYSICAL EXERCISES IN ILHÉUS – (OPPEI): EXPERIENCE IN PROMOTING HEALTH

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1. INTRODUCTION

Currently practices corporal / physical activities have been primarily used as a strategy for health promotion. Therefore we can highlight events that are practically milestones that contributed to this process:

* International Conference on Health Promotion held in Ottawa (Canada) in 1986, presented a paper that surely contributed to improving the health of all from the year 2000.

* World Health Organization (WHO) in 2004, during the 57th World Health Assembly endorsed the Global Strategy on diet, physical activity and health, with the primary objective of reducing risk factors for Chronic Non-Communicable Diseases and (NCDs).

* The National Health Promotion - NHP, published in 2006 - Prioritization of incentive practices corporal / physical activity in the National Health Promotion considers the importance of being valued public spaces of coexistence and production of health, social inclusion and strengthening the autonomy of the individual and the right to leisure outside the context of the epidemiological relevance of the topic physical activity (Brazil, 2006).

In line with new strategy to promote health begins to emerge above programs and / or projects to promote physical activity available to the Brazilian population, which adapt to the propositions of the national policy of promoting health, such as: SOE - Service Orientation Exercise to Rezende (1997); “Agita São Paulo” (MATSUDO et al., 2002); Education Program through the Health and Physical Exercise and Sports (FERREIRA and NAJAR, 2005) and OPPEI - Orientation Practice Physical Exercises (DUARTE et al., 2009 and 2010). All aimed at promoting health and especially the process of enabling people to act to improve their quality of life and health, including greater participation in control of this process.

Depend on the type of project and / or proposed program seems to exist "principles" common among them, such as influencing the future population for a conscious, prepared with quality of urban life; advocating exercises for balance, flexibility and muscle strengthening activities aerobic (with moderate intensity for at least 30 minutes) furthermore proposed activities should be at least three times a week, being the ideal five days a week.

Matsudo and your workgroup already evidenced these principles and described this type of health care with the following motto: "... lead sedentary people a range of information so that assume an active lifestyle, not leaving out those people who already fit this model. "For this reason the program proposes that people" sedentary "people become" active "-people" somewhat active "in people" more active ", the" most active "on" athletes "and they already are" athletes "to remain at this level throughout life (CELAFISCS, 2002).

One factor that deserves mention in this discussion is that there are contributors to the spread of these programs / projects from city to city, state to state. Featuring state bodies and control of public health statistics constantly reminded by clinical and hospital care launched on the network and systematically organized by DATA-SUS that a large portion of the Brazilian population, working or not, is presenting symptomatically, problems of injuries health (diabetes, hypertension, high levels of bad cholesterol, obesity, stress, osteoporosis, etc..) which professional experts, researchers, scholars and authorities in the area of health, such injuries attributed to the phenomenon of inactivity, regarded as the "evil century. " (NETTO and BANKOFF, 2007). But we can not forget that this phenomenon involves the aspects of health, quality of life and well-being, always in transformation to propose alternatives and closest possible to intervene with the different social realities existing today in our country, to contribute to this human being, no longer just in the traditional way, but as a whole being / social (holistic).

Starting from these first fruits and the project needs extension Orientation Practice Physical Exercises in Ilhéus - OPPEI also aims to guide and encourage regular practice and proper exercise. In addition to providing its practitioners (indirectly) to combat sedentary lifestyle, assist in the prevention and treatment of chronic diseases not transmitted.

2. MATERIALS AND METHODS

The physical spaces selected for the implementation of physical exercise is one of the parking lots located on Avenida Soares Lopes center and the module (Figure 1) gymnastics academy model in outdoor Avenue Junior Lomanto spit in the neighborhood in the city of Ilhéus/BA. All local ample ventilation by being near a beach or bay city. The guided physical activities are offered free of charge by students of Physical Education, State University of Santa Cruz in Ilhéus, Bahia, under the guidance of teachers of the course at the same institution. For purposes of defining the working group met the target in this project are individuals of both sexes aged 18 to 65 who attend the physical space in pre-established times.

Figure1. Photo module gym outdoor Pontal Islanders.

Photo: Mary Melgaço (August/2012)

The methods that are being used in this project are one (1) anamnesis, as an initial form of contact necessary to obtain as much information as possible to the actual prescription of exercise. In anamnesis seeking information about the purpose of the exercise evaluated; history of physical activities and exercises, past and present, history of chronic degenerative diseases in the family, personal history of diseases, previous and current, use of medications, such as smoking habits, alcoholism, etc.. (2) The anthropometric measures used in the evaluation of the project participants (weight, height, waist circumference (WC), hip circumference (HC), age, sex) have been and will be collected by students from the physical education of SUSC bound the extension project as interns. To this end, we created a standardized data collection procedures previously established in order to minimize possible errors intra and inter. (3) Application questionnaire International Physical Activity Questionnaire "IPAQ" (PARDINI, et al., 2001) from which responses conducted individually with each practitioner has to estimate: the control of physical activity, physical condition considering also the coronary risk factors. (3) are offered free guidance on walking, stretching, aerobics, step and fitness gym located as physical activity practices with pre-booked; physical activity at least three times a week with 50-minute lessons and now orientation exercises on the equipment module.

Importantly, the individual who is participating in the project signs extension the term informed consent form, which indicates the purpose of the questionnaires and use of data in publications, and they are guaranteed anonymity. All data have statistical processing of information obeying the computerized package Statistical Package for Social Science (SPSS), version 7.51.

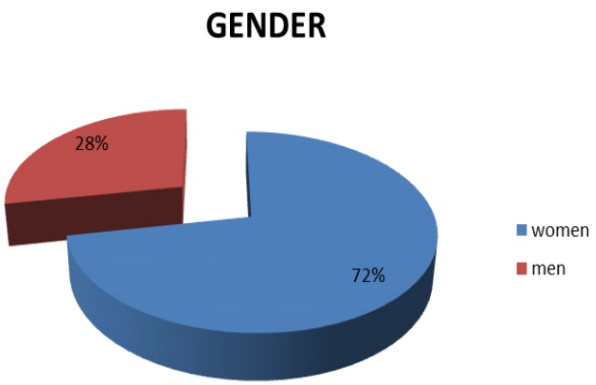
3. DISCUSSION OF RESULTS

This study because it is characterized more as a strategy for promoting an active lifestyle programs as mentioned above also follows the suggestions of research interventions focusing on change in physical activity level of the population, checking the changes of the population that accesses the project . For both the data collected during the project are described and analyzed below.

The data (graph 01) show the vast majority (72%) of women practitioners in our project, we try to mitigate the fact that, since after the change activities for the modules the number of men practitioners has increased gradually. Fact entirely justified perhaps by inserting equipment activities in the future that may be established with the continuation of studies. This suspicion can be confirmed due to the male audience is participating in greater numbers perhaps an allusion to weight machines academies. But we can not let infer that the ideal independent or allusion is happening elsewhere, this project does not summarize the most distinctive female aesthetic or vigorous activity (strength) more male characteristic.

Importantly, regardless of the model proposed by the project (with or without gymnastics apparatus) suggest exercise of low intensity, long duration and regularity weekly basics for beginners (regardless of gender) in physical exercise as well as health promotion. All these design paradigms that will gradually break when it becomes better known and publicized in the community. Completing the literature reminds us that regardless of gender adoption of an active lifestyle is a multicausal phenomenon and can be influenced by positive experience with physical activity from adolescence, among other factors (ISO-AHOLA and ST. CLAIR, 2000).

Graph 1: Relationship of gender participants OPPEI

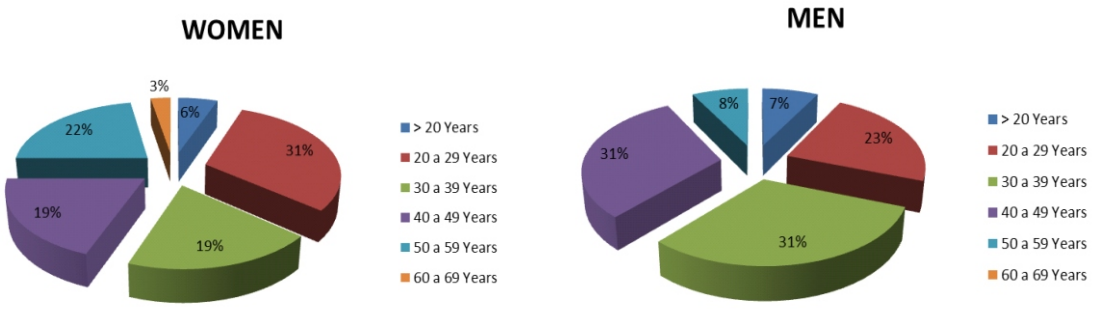


Currently it is almost a consensus among health professionals that physical activity is a key factor in the success of the aging process (MATSUDO, MATSUDO and NETO, 2001). However, our data to date is the profile of the prominent female participants (graph 2) is aged 20 to 29 years (31%) and 50 to 59 years representing another 31% of practitioners. We infer therefore that despite the scientific literature, media publicity and advertising prove the importance of physical activity in relation to age in this type of activity and free outdoor this female participation aware of its importance is not unanimity in the band growing old.

When the male gender is not unlike our data female. Featured found with 31% of the shares in the age group 20-29 years (graph 2). Without forgetting that this genre, as described above, the mobilization is much lower 28% (graph 1) when compared to females. So the lesser of evils by less demand for physical activity as a promoter of health is still much higher (graph 1) by women.

According to data reported by Andrade et al. (2000), it was found that three most common barriers for both sexes in small towns of the interior for physical activity that are: lack of location, lack of equipment and lack of suitable climate among others, but today Islanders can not receive justification of the population with such barriers, thanks to municipal incentives, the WHO Institute of Sustainability (IS) and the State University of Santa Cruz.

Graph 2: Profile of gender by age of participants OPPEI



When the parameter is height of participants despite the literature uses it as monitoring changes in economic standards of health and nutrition this variable (height) in our work is being captured for breeding with age and weight gaining body mass index (RMI) . Below the relationship (table 1) of RMI in adults (18 to 65 years) according to benchmark indexes that the World Health Organization (1995) uses.

Table 1: Relationship mass index (RMI) according to the WHO ideal.

SITUATION	RMI IN ADULTS
Underweight	Below 18,5
Ideal Weight	Between 18,5 and 25
Overweight	Between 25 and 30
Obese	Above 30

Thus our results are similar for both genders are all above the ideal RMI (table 02) recommended by WHO. Fact that allowed us to assess our planning exercises with low intensity and high number of repetitions, meets the needs of the project participants not only to have evidenced the need to reduce the current weight of the participants to improve RMI as well as the type of activity proposal improves metabolic profiles promoting health and quality of life.

According to Thomas and La Fontaine (1998) one of the greatest benefits of regular physical activity is the improvement of the lipid profile in the long term, the kind of exercise that most acts on lipoprotein metabolism is aerobic (BLAIR et al, 1996), it raises the blood concentration of HDL-C and HDL subfraction his, whose increase has been inversely associated with coronary heart disease (COUILLARD et al., 2001). Moreover, consistently reduces plasma concentrations of triglycerides, although the reduction of total cholesterol and LDL-c is controversial, as it is more efficiently when associated with weight loss and energy restriction. Practitioners of aerobic activity have lower concentrations than sedentary LDL subfraction and this has been associated with coronary heart disease (THOMAS and LA FONTAINE, 1998).

Table 2. Average body mass index of the participants OPPEI

Gender	Weight	Stature	RMI
Men	81,79 ± 20,24	1,74 ± 0,07	27,06 ± 7,1
Women	66,43 ± 13,85	1,59 ± 0,06	26,08 ± 4,7

* Data presented as mean ± standard deviation

In pursuit of more frameworks to characterize the profile of project participants and adaptation activities other data is captured measures of waist circumference and hip.

Table 3: Waist-hip ratio for men

Age	Low	Moderate	High	Too High
20 A 29	< 0,83	0,83 a 0,88	**0,89 a 0,94**	**> 0,94**
30 A 39	< 0,84	0,84 a 0,91	**0,92 a 0,96**	**> 0,96**
40 A 49	< 0,88	0,88 a 0,95	**0,96 a 1,00**	**> 1,00**
50 A 59	< 0,90	0,90 a 0,96	**0,97 a 1,02**	**> 1,02**
60 A 69	< 0,91	0,91 a 0,98	**0,99 a 1,03**	**> 1,03**

Source: Applied Body Composition Assessment, 1996

The calculation of waist / hip ratio is second scholars healthcare a great indicator of body fat distribution (HSIEH and YOSHINAGA, 1995, LEE et al. 1995) in the identification of cardiovascular disease risk (HAN et al., 1995; LEAN et al., 1995), besides the advantage of simplicity and determination of measures based on easily obtainable. For both Tables 3 and 4 are references in the literature to analyze our data.

Table 4: Waist-hip ratio for women

Age	Low	Moderate	High	Too High
20 A 29	< 0,71	0,71 a 0,77	**0,78 a 0,83**	**> 0,83**
30 A 39	< 0,72	0,72 a 0,78	**0,79 a 0,84**	**> 0,84**
40 A 49	< 0,73	0,73 a 0,79	**0,80 a 0,87**	**> 0,87**
50 A 59	< 0,74	0,74 a 0,81	**0,82 a 0,88**	**> 0,88**
60 A 69	< 0,76	0,76 a 0,83	**0,84 a 0,90**	**> 0,90**

Source: Applied Body Composition Assessment, 1996

One important point we wish to emphasize is that the group of participants is heterogeneous and fluctuating justifiable since there was any kind of selection or requirement to join or remain in the project. Thus, as the table reference classification Waist / hip ratio (WHR) our data by age (Graph 3) highlight the female group than in the low profile only the age group of 20 to 29 years. The rest of the group profile in moderately aged ≤ 30 years and the profile of high or very high in groups including the aged

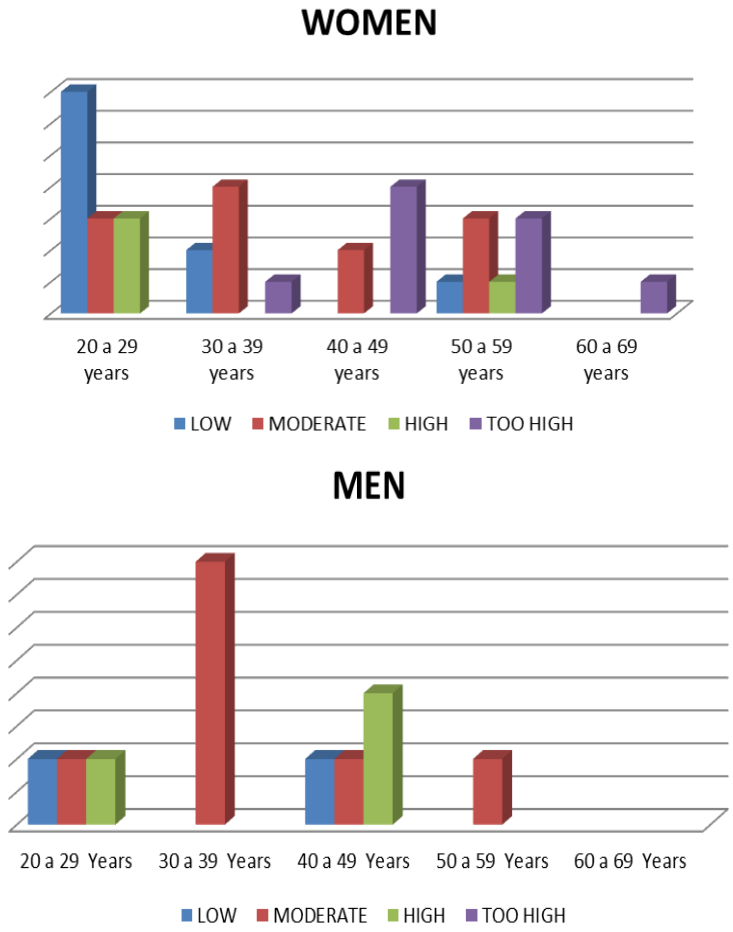
≤40 years.

Also according to the data of this study (Graph 3) Now for the male group highlighted that the low profile was not found in any of the age groups. The profile was highlighted in the moderate group of 30 to 39 years most participants identified at high and very high profile groups including aged ≤40 years.

The prospective studies says that abdominal fat distribution is influenced by age, BMI and physical activity among others (ROSMOND and BJÖRNTORP, 1999). Other studies show that localized fat in the abdomen is a risk factor for cardiovascular disease, diabetes and some types of cancers, such as breast, ovarian and endometrial (FOLSON et al. 1990).

Thus, given the data collected and scientific references cited above have some project participants are in low profile, ie, not in the risk range or so disqualifies the activities proposed in this project because it will find the proposed action to prevent . But it is necessary to emphasize once more that the intervention proposed by the project clearly meets well the participants as are mostly independent of gender in the age of risk for cardiovascular disease.

Graph 3. Profile Waist-hip ratio of participants OPPEI



4. LIMITATIONS OF THE STUDY

This study always present some limitations regarding the selection of participants, because it includes only people 18 to 65 years of age who voluntarily presents himself to the exercise proposed in this project.

A second limitation is that it is a public float where not everyone has a regular (weekly attendance of at least 90%) in practice and / or assessments facts that have been identified.

Furthermore, the variability and heterogeneity present during the course of the project. Despite this, our results allow some conclusions that represent characteristics of the public attended.

5. FINAL

As the project is in progress and not all data were analyzed in this article the results presented here now allows us to infer that the profile of the participants and the proposed objective we are operating under the principles of prevention, health promotion and improved quality of life.

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THE PROJECT ORIENTATION PRACTICE PHYSICAL EXERCISES IN ILHÉUS – (OPPEI): EXPERIENCE IN PROMOTING HEALTH

ABSTRACT

Currently in Brazil practices corporal / physical activities have been primarily used as a strategy for health promotion. For both public sectors, WHO's and universities become partners in promoting population health. Not unlike this proposal has the action in Ilhéus extension called oriented physical exercise (OPPEI) that aims to guide, encourage regular practice and proper exercise, besides providing its practitioners (indirectly) to combat sedentary lifestyle, assist in the prevention and treatment of chronic diseases not transmitted. The methods used in the project include data collection as: medical history, anthropometric measurements, questionnaire International "Physical Activity Questionnaire" (IPAQ), along with guidelines on free exercise equipment in module outdoor fitness, walking, stretching, aerobics; step gym and gym located at least three times a week with 50-minute lessons. The Statistical Package obey the computerized Statistical Package for the Social Science. As the project is in progress and not all data were analyzed in this article the results presented here now allows us to infer that the profile of the participants and the proposed objective we are operating under the principles of prevention, health promotion and improved quality of life.

KEYWORDS: Health, Physical Activity and Quality of Life.

ORIENTATION PRATIQUE DE CONCEPTION POUR L'EXERCICE À ILHÉUS: L'EXPÉRIENCE DANS LA PROMOTION DE LA SANTÉ

RÉSUMÉ

Actuellement dans les pratiques du Brésil activités corporelles / physiques ont été principalement utilisé comme une stratégie de promotion de la santé. Pour les deux secteurs publics, les ONG et les universités deviennent des partenaires dans la promotion de la santé de la population. Un peu comme cette proposition a l'action en extension Ilhéus appelé orientée exercice physique qui vise à guider, encourager la pratique régulière et l'exercice régulier, en plus de fournir ses praticiens (indirectement) pour lutter contre la sédentarité, favoriser la prévention et le traitement de maladies chroniques non transmissibles. Les méthodes utilisées dans le projet comprennent la collecte de données: les antécédents médicaux, les mesures anthropométriques, un questionnaire international "Physical Activity Questionnaire" (IPAQ), ainsi que des directives sur les équipements de remise en forme libre exercice de module extérieur, la marche, stretching, aérobic; salle de gym et salle de gym étape située à au moins trois fois par semaine avec des leçons de 50 minutes. Le Statistical Package Package obéir à l'informatique statistique pour les sciences sociales. Comme le projet est en cours et que toutes les données ont été analysées dans cet article les résultats présentés ici nous permet maintenant d'en déduire que le profil des participants et l'objectif proposé nous opérons dans le cadre des principes de prévention, de promotion de la santé et une meilleure qualité de vie.

MOTS-CLÉS: la santé, l'activité physique et la qualité de vie.

DISEÑO GUÍA PRÁCTICA PARA EL EJERCICIO EN ILHÉUS: EXPERIENCIA EN LA PROMOCIÓN DE LA SALUD

RESUMEN

Actualmente en Brasil actividades prácticas corporales / física se han utilizado principalmente como una estrategia para la promoción de la salud. Por tanto el sector público, las ONG y las universidades se conviertan en socios en la promoción de la salud de la población. No a diferencia de esta propuesta la acción de extensión orientado a Ilheus llama ejercicio físico que tiene como objetivo orientar, fomentar la práctica regular y correcto ejercicio, además de proporcionar a sus practicantes (indirectamente) para combatir el sedentarismo, ayudar en la prevención y el tratamiento de las enfermedades crónicas no transmitidos. Los métodos utilizados en el proyecto son la recolección de datos como: historia clínica, mediciones antropométricas, el cuestionario internacional "Cuestionario de Actividad Física" (IPAQ), junto con directrices sobre el equipo libre ejercicio de la aptitud módulo al aire libre, caminar, estiramientos, aeróbic; gimnasio paso y gimnasio situado al menos tres veces a la semana con clases de 50 minutos. El paquete estadístico computarizado obedecer el Paquete Estadístico para las Ciencias Sociales. Dado que el proyecto está en marcha y no todos los datos se analizaron en este artículo los resultados presentados aquí, ahora nos permite inferir que el perfil de los participantes y el objetivo propuesto estamos operando bajo los principios de prevención, promoción de la salud y una mejor calidad de vida.

PALABRAS CLAVE: Salud, Actividad Física y Calidad de Vida.

PROJETO ORIENTAÇÃO A PRÁTICA DE EXERCÍCIO FÍSICO EM ILHÉUS (OPEFI): EXPERIÊNCIA NA PROMOÇÃO DE SAÚDE

RESUMO

Atualmente no Brasil as práticas corporais/atividades físicas têm sido utilizadas prioritariamente como estratégia de promoção da saúde. Para tanto setores públicos, ONG's e universidades tornam-se parcerias da população na promoção da saúde. Não diferente desta proposta em Ilhéus tem a ação extensionista denominada orientação a prática de exercícios físicos (OPEFI) que tem por objetivo orientar, incentivar a prática regular e correta de exercícios, além de propiciar aos seus praticantes (forma indireta) o combate ao sedentarismo, auxiliar na prevenção e no tratamento de doenças crônico-degenerativas não transmissíveis. Os métodos utilizados no projeto incluem coleta de dados como: anamnese, medidas antropométricas, questionário Internacional “Physical Activity Questionary” (IPAQ), além de orientações gratuitas sobre exercícios nos aparelhos do módulo de ginástica ao ar livre, caminhada, alongamento, ginástica aeróbica; ginástica de step e ginástica localizada pelo menos três vezes por semana com aulas de 50 minutos. A estatística dos dados obedecerá ao pacote computadorizado Statistical Package for the Social Science. Como o projeto está em andamento e nem todos dados foram contabilizados neste artigo os resultados aqui apresentados já nos permite inferir que pelo perfil dos participantes e o objetivo proposto estamos atuando sob os princípios da prevenção, promoção da saúde e melhora da qualidade de vida da população.

PALAVRAS CHAVES: Saúde, Atividade Física e Qualidade de vida.