

108 - THE CONTRIBUTION OF THE SOCIAL MOTRICITY DUE TO THE REINTEGRATION OF ELDERLY PARTICIPANTS OF PROJECT PELC HEALTH LIFE: LIVING AND COEXISTING AT "CASA DO CAMINHO SIMÃO PEDRO" IN MANAUS CITY

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Introduction

AGING

"On the same way that there is not an universal definition for "age" also there is no concept for "aging".

Here you are some tries of definitions:

· Aging is an irreversible change of the living substance as a function of time (BÜRGER 1957,2).

· Aging is a general designation for an amount of manifestations, which lead to a shorter expectation of life with the increasing of age (CONFORT, in FROLKIS 1975,14).

· Aging is a biological process, with multiple regular evolution, that lead, inevitable, to the limitations of the adaptable possibilities of the organism and the increasing of the possibility of dying (FROLKIS 1975, 15).

· Aging is a consequence of changes, that the individuals show in a peculiar form, with the progress of adult time of life until the end of it (SINGER 1981, 19)." (WEINECK, 2000).

Nóbrega et al (1999) affirm that occurs considerable changes in the cardiovascular system and muscle-skinny, recommending that the physical activity keep and/or the better situation of the bone mineral density, prevent the loss in the bone mass, make the strength better, the muscle mass and the articulation flexibility, decreases the falling incidences, the risk of fractures and the mortality of Parkinson's disease keepers.

As pear Etchepare et al (2003) in accordance with Meireles (1999) the aging process starts since the conception, it is a dynamic and progressive process that the modifications as the morphological as the functional, biochemical and psychological determine the progressive loss of adapting atmosphere capacity, therefore it causes a bigger incidences of pathological process.

"According to Zimerman (2000), the damaging of the organism through the years is inevitable. Despite of aging is not considered an ill it is a time that the human being is very opened for them. As pear Mazo (1998) Brazil is passing for a time that people are coming into elderly faster. Data point out that, since XXI century, the country will have the sixth biggest population of elderly in the world and the major problem is elderly are motive of prejudice, because they are considered unproductive then forgot by the society." (ETCHEPARE et al, 2003).

The aging process vary a lot between people and it is influenced as the lifestyle as for genetic factors. Aging experts believe that the human being, in general, could live until 115 and 120 years if the lifestyle and their genetic profile were ideal". (NOVAIS e VIANNA, 2003).

Etchepare (2003) quotes Leite (1996) who affirm that aging is a general physiologic process, so far a little unknown, affect the cells and the system formed by them, as the tissue components as the collagen.

Massaud and Corrêa (2001) quote Willmore and Costill (1998) who affirm that the aerobic capacity decreases inn 30% to 40% between the ages of 20 to 65 years old.

Massaud and Corrêa (2001), mention that the tax of power reduction is about 5% each decade in men, after 40 years old. Concerning to active women these losses start after puberty.

"The increasing of the adipose tissue probably is due to the changes, imposed to the aging time, in the sensitivity of the adipose tissue faced to the hormones lipolitically active (KATHER/ SIMON 1979, 1297)." (WEINECK, 2000).

Massaud and Corrêa (2001) affirm that a great quantity of sexagenarian men and women double or triple the quantity of fat in their bodies. Life without physical activity also accelerates the loss of minerals in the bones, mainly in women on the time of postmenopausal. The articulations become less stable and the flexibility decreases, noticeably, increasing the risks of fractures and articulation troubles in the same way that the age forwards.

"The mobility of the spine, through the decreasing of the elasticity of the linking muscles, is well limited (PODRUSNJAK/ MÜHLBACH 1978, 435). At the age, moreover, happens an atrophy of the active and passive locomotors, which damages the support function, and an increasing of the conjunctive tissues to the adipose." (WEINECK, 2000).

It occurs a decreasing in the number of active nervous cells and a loss of about 10% in the velocity of the conduction of the nervous impulse. It means that the movements the reactions become slower. (MASSAUD e CORRÊA, 2001).

According to Weineck (2000) the expectation of a man life is determined by the capacity of developing, or disposal for insufficiency, of their weakest vital organ.

The same author affirm that an external sign characteristic of aging is the decreasing of height, that can be due to the decreasing of the vertebral discs size, occurring a decreasing of the spine height, an increasing on the vertebral spine curve (aging curving) and a decreasing of the angle colodiafisarium of femur.

"Characteristic to the changes of age is still, definitely, the continuous decreasing of the sense organs functional capacity. These alterations are related to the nervous system aging (VERZAR 1965, 112)." (WEINECK, 2000).

Massaud and Corrêa (2001) put studies together due conducted elderly of a lot of authors that show a plenty of changes in the biological order, psychological and social while the aging process. Owing to the psychological and social factors the teachers must be more careful in order to help elderly to accept the changes in their bodies, accept the body (despite the difficulties) and make them rediscover the self-esteem.





PHYSICAL ACTIVITY AND BENEFITS TO ELDERLY

Nobrega et al (1999) contributing said that physical activity make physiological and psychological adaptations, such as: increasing of VO₂ max, bigger benefits of peripheral circulatory system, muscles-bound, better control of glucose, improve the lipids, reduce body weight, getting better the blood pressure at rest, the pulmonary function, march and balance, less dependency of diary activities, self-esteem and self-confidence.

The regular physical activity for elderly mainly the exercises that support themselves and strength exercises gets better the bone calcification, to prevent and treatment of osteoporosis. Furthermore increases the strength, muscles endurance, balance and flexibility, decreasing falls, fractures and theirs complications. (NÓBREGA et al, 1999).



SOCIALMOTRICITY

As pear Garcia (2004), the driving action is common denominator of identity, unity and specificity of Physical Education, whose practice sets a plenty of activities that consider: sports, games, gymnastics, struggles, dances etc. This point of view conceive Physical Education as a pedagogical practice that is supported by the scientific knowledge, whose is focused on in the movement and in the interaction, that the significant of the practices is centered on the noticeable manifestations in the motor behavior, so that in the relation sense and tactical of the conductions that present on the activities developing.

According to Spirduso (1995), the elderly sedentary, comes a lot of times from impositions of the social-culture, more than functional inability. The behaviors attributed to elderly, relates to the passivity and immobility, with reduced level of physical activity. Otherwise, is known that a large quantity of the physiological alterations and functional observed on elderly are a result of a nonexistence of stimulations than alterations attributed to aging (BARRY and EATHORNE, 1994). Studies have demonstrated that the positive contributions of the program of physical activity concerning to the general improvement of physical aptitude and functional of elderly (MOTA et al., 1995).” (SAFONS, 2003).

Neira (2005) affirm that the socialmotricity maked reference to interaction that more than one person, specially in the games and group sports where the results are richer.

Lozano (2005) quotes Castañer and Camerino (1991) who define the activity and men into three dimensions: introspective, which gives the possibility to recognize through the motricity; Extensive, that allow us interaction with others; and projective, which facilitates the relation with the social mean.

In accordance with the same authors, these three dimensions are related to the recreations world. Since the projective dimension can give emphasis to the development of the social abilities and communication, that will have a certainly improvement related to the life in society. More useful in order to improve these socialmotricities was the using of techniques that incentive the expression and communication, as oral and corporal, competitive games and activities which stimulate the creativity.

As pear Garcia (2004), this new pedagogical conception of socialmotricity emerges as the newest thought that is though the field of the Physical Education nowadays. To Parlebás, the term “psychomotricity” has merit of having directed the attention to the person as a susceptible being of developing their mental capacities trough the movement, it defends that psychomotricity when there is no interaction with others, but, when there is a interactive relation, it means a socialmotricity. While the psychomotricity alludes to the actions performed by a subject, the socialmotricity makes references to an interaction that participate more than one person, thus, its proposal about Physical Education present agreeable to the socialmotricity.

The socialmotricity is physical activity performed in group, everybody interacting together, as in games, plays, dances, all these activities make a very intense interaction among the participants which results to elderly more attention, feeling, a life lived only in the youth, make new friends, a new activity all of these brings happiness to elderly, a strong need of living more and better.



HANSEN'S BACILLUS

The Hansen, the designation adopted in Brazil to “leper”, is a chronic infection disease provoked by Bacillus resistant-alcohol-acid (r-a-a) and Gram-positive, classified by *Mycobacterium leprae*. Because it was described as Hansen in 1874, the *M. leprea* is also known by Hansen's Bacillus. (BEIGUELMAN, 2002).

According to Lastória and Putinatti (2004) the disease transmtion occurs of individual to individual, infected by Hansen's bacillus, in other words, people in treatment or be cured do not transmit the disease. Causes irreversible sequels, leading the person to the isolation fearing peoples` prejudice, principally people that do not know the disease transmtion.

Objectives

Effective acting in aging process with elderly participants in the Project Health Life: Living and Coexisting at “Casa do Caminho Simao Pedro” and call attentions about the importance to practice the socialmotricity in order to reintegrate elderly people with Hansen's Bacillus sequels.

Methodology

The research was performed with 35 elderly with Hansen's Bacillus sequels participants in the Project PELC Health Live: Living and Coexisting at “Casa do Caminho Simao Pedro”, in “Colonia Antonio Aleixo” neighborhood in Manaus City. Informal questions was done in the end of the practical class about possible alteration of their diary routine, how they

felt after practical class performed on the project, if they did the same exercise passed during practical classes at home, and others questions.



Results

In elderly groups that activities are done in group, the activity acceptance is easier than others because it has social facts involving everyone in one activity, all people make exercises and developing the self-confidence, affectivity and sociability, as the socialmotricity make the elderly not be useless as when they used to stay at home alone doing anything, without interaction and passing coexisting with the same age people that pass with the same experiences and enjoying their freedom to do things that before not doing, or that thinking not be doing because their families, or their age's motor difficulties because their ages or no activities with socialmotricity.

During the physical activities with elderly the Project PELC Health Life: Living and Coexisting at "Casa do Caminho Simao Pedro" we can see that the students participated more effectively in socialmotricity activities. In the beginning, we had to give incentive and till participate with students to have everyone to participating. Today this participation happens without these incentives, we develop their movement and affective autonomies, they till device about activities that they like to do, as beyond they like to realize something beneficial to their health, the social interaction occurred through proposed activities that helps their psych state. We have some cases that the elderly do not have security to walking with his prothesis, and think that they cannot do anything with it and refused to get out of their whell chair and do not go out of their houses. After a lot of class, talks and incentives by teachers and colleagues, nowadays everyone has this ability developed, and walking with his prothesis and have more mobility than before increasing their autonomy and self-confidence. They learned to face their own prejudice accepting their differences, being more receptive with others touch. Improving their physical, psychosocial state we are contributing to their wellness, reintegrating in society.



Final considerations

The elderly is the most important object of socialmotricity researches, because they are the ones whom suffer with this psychosocial modifications brought by age, as low self-esteem, social isolation, in their homes the relatives do not have the same likes, the same opinions, their close-knit relatives leave parent's house to have a family, and other factors, decreasing their social relations.

Owing to what we have observed, the socialmotricity is today the great proposal of Physical Education which makes the rescue of elderly identity, turning them in a more active as physically as socially. The socialmotricity is unquestionably an effective mean to turn an elderly person into a participant of physical activity program in group in a healthier, active and happy individual, improving considerably their reintegration in the society.

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ABSTRACT

This research, of qualitative character, was performed with 35 elderly participants in the Project PELC Health Life: living and coexisting at "Casa do Caminho Simão Pedro" in Manaus City, and aimed acting effectively in aging process calling attention to social motricity importance to social reintegration of elderly people with Hansen sequels. This program was developed twice a week and consisted in physical activities, dances, recreations, movies, walks, art workshops and lectures, easily accepted to group and involved everyone. We verified a relevant improvement in general state of the group, self-esteem, in affective considerations, autonomy and sociability. Improving the psycho and social of elderly, we are benefiting their wellness and promoting their independence to perform daily activities and society reintegration.

Key-words: PELC Health Life, Social motricity and elderly

LA CONTRIBUTION DE LA SOCIOMOTRICITÉ DANS LA RÉINTEGRATION SOCIALE DES AGÉS PARTICIPANTS AU PROJET PELC VIE SAINE: VIVRE ET CONVIVRE DANS LA MAISON DU CHEMIN SIMÃO PEDRO DANS LA VILLE DE MANAUS

RESUMÉ

Cette recherche, à caractère qualitatif, fut réalisée avec 35 personnes âgées participantes au projet PELC- Vie saine: vivre et convivre dans la Maison de Pedro et Simão située dans la ville de Manaus, et a visé d'agir effectivement dans le processus de vieillissement en attirant l'attention sur l'importance de la socio-motricité dans la quête de la réintégration sociale de personnes âgées avec des séquelles de la lèpre. Le programme a été effectué deux fois par semaine et a eu des activités physiques, de la danse, des projections de films, des promenades, des ateliers d'arts et des cycles de conférences, tous très bien acceptés par le groupe et impliquant tous les âgés. On a pu constater une amélioration considérable dans l'état général du groupe en ce qui concerne l'auto-estime, les questions d'affectivité, d'autonomie et de sociabilité. En améliorant leur état psychique et social, on bénéficie également leur bien-être en favorisant leur indépendance pour la réalisation d'activités journalières et principalement pour leur intégration dans la société.

Mots-clés: PELC Vie saine, sociomotricité, ages

LA CONTRIBUCIÓN DE LA SOCIOMOTRICIDADE EN LA REINTEGRACIÓN SOCIAL DE LOS ANCIANOS PARTICIPANTES DEL PROYECTO PELC VIDA SALUDABLE: VIVIENDO E CONVIVIENDO EN LA CASA DEL CAMINO SIMÃO PEDRO EN LA CIUDAD DE MANAUS

RESUMEN

Esta pesquisa, de carácter cualitativo, fue realizada con 35 ancianos participantes del proyecto PELC Vida Saludable: viviendo e conviviendo en la Casa del Camino Simão Pedro situado en la ciudad de Manaus, e objetivó actuar efectivamente en el proceso de envejecimiento llamando la atención para la importancia de la sociomotricidade en la busca de la reintegración social de personas ideosas con séqueles de lepra. El programa fue desarrollado dúas veces por semana e hube actividades físicas, danza, actividades recreativas, proyección de películas, paseos, oficinas de arte e ciclo de palestras, fácilmente aceptas pelo grupo y envolviendo todos los ancianos. Verificó-se una mejora considerable en el estado general del grupo, en la auto-estima, en las cuestiones de la afectividad, autonomía y sociabilidad. Mejorando el estado psíquico y social de los ancianos, estamos beneficiando su bien estar y favoreciendo su independencia para realización de actividades diarias y su reintegración en la sociedad.

Palabra clave: PELC Vida Saludable, sociomotricidade, ancianos

A CONTRIBUIÇÃO DA SOCIOMOTRICIDADE NA REINTEGRAÇÃO SOCIAL DE IDOSOS PARTICIPANTES DO PROJETO PELC VIDA SAUDÁVEL: VIVENDO E CONVIVENDO NA CASA DO CAMINHO SIMÃO PEDRO NA CIDADE DE MANAUS

RESUMO

Esta pesquisa, de carácter qualitativo, foi realizada com 35 idosos participantes do projeto PELC Vida Saudável: vivendo e convivendo na Casa do Caminho Simão Pedro situado na cidade de Manaus, e objetivou atuar efetivamente no processo de envelhecimento chamando a atenção para a importância da sociomotricidade na busca da reintegração social de pessoas idosas com seqüelas de hanseníase. O programa foi desenvolvido duas vezes por semana e constou de atividades físicas, dança, atividades recreativas, projeção de filmes, passeios, oficinas de arte e ciclo de palestras, facilmente aceitas pelo grupo e envolviendo todos os idosos. Verificou-se uma melhora considerável no estado geral do grupo, na auto-estima, nas questões da afetividade, autonomia e sociabilidade. Ao melhorar o estado psíquico e social dos idosos, estamos beneficiando seu bem estar e favorecendo sua independência para realização de atividades diárias e sua reintegração na sociedade.

Palavras-chaves: PELC Vida Saudável, sociomotricidade e idoso.