144 - PERCEPTION OF A GROUP OF ELDERLY BY NASF ABOUT THE BENEFITS OF PHYSICAL ACTIVITY FOR HEALTH

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doi:10.16887/88.a1.144

1.INTRODUCTION

The population of elderly people is increasing every day in Brazil and in the World, in several countries this population has already surpassed 7% of the total population, which has been awakening the search for new studies geared to the needs of this group of individuals. By the year 2000, there were 600 million people over the age of 60, it is estimated that in the year 2025 the population of the elderly will be over 1.2 billion and 2 billion by 2050, currently about two thirds of the elderly are living in developing countries and in 2025 will be 75% (WHO, 2016).

As the above-mentioned author, with the increase in world population, and with birth rates declining, the growing increase in the world's elderly population, especially due to the increase in life expectancy and health concern, is well-known. Thus, there is a need to ensure better conditions in the promotion of the health of the elderly that allow aging with dignity. The aging process is accompanied by a series of physiological changes occurring in the body, as well as by the appearance of chronic degenerative pathologies, among other factors of inadequate life habits, may precede the appearance of these diseases (TREVIZAN; BRIGHETTI; SOUZA, 2009).

The National Policy of the Elderly, and brings in one of its guidelines the importance of healthy aging. Therefore, it includes the development of actions that orient the elderly and individuals in aging processes regarding the importance of improving their functional abilities, through early adoption of healthy living habits and elimination of harmful behaviors to health (ANDRADE, 2007).

The regular practice of physical activity can provide innumerable benefits to the quality of life in several age groups, about which studies analyze the association between physical activity and quality of life or the effects of physical activity practice on specific domains of quality of life by associating the specific domains of quality of life by associating the "physical and mental domains" these aspects are observed more frequently in individuals seeking a good quality of life (PUCCI et al., 2012). In view of the foregoing, the following question was raised: What is the perception of a group of elderly people regarding the benefits of physical activity for health?

For Camacho and rabbit (2010), aging is a physiological process in which it gradually reduces functional activities. Thus, the need arises to maintain these activities through the practice of physical activity. According to Gobbi et al (2008) it has become a simple, economical and effective strategy both to reduce health-related costs and to potentially mitigate a possible cognitive and functional decline or even reverse them.

In this way, physical exercises are important to keep the elderly active and increase their willingness for day-to-day activities. Its regular practice makes it possible to prevent falls, which is accentuated with age. It also contributes to the reduction of anxiety and control of depression and makes the elderly learn and know their body and their functions better (CARVALHO, PAPALÉO NETTO, 2012).

In light of the above, the realization of this study will enable us to understand a little more about the perception of a group of elderly people regarding the benefits of physical activity for health, on the face of it we believe that this work can contribute significantly for academics and professionals in the area can identify factors that negatively affect the perception of these elderly people regarding the theme discussed here.

This study aims to analyze the perception of an elderly group attended by NASF regarding the benefits of physical activity for health.

METHODOLOGY

It is a descriptive and exploratory research, with quantitative approach. The research will take place in the city of Patos-PB, in a group of elderly people assisted by the NASF.

The study population consisted of 20 (twenty) elderly people attended by the NASF. The sample was made with 100% of the individuals interviewed, by association respecting the inclusion and exclusion criteria. Be 60 years of age or older; Attend NASF for at least 6 months; Accept the participation of the research signing the Term of Free and Informed Consent (TCLE). Exclusion criteria: Does not fit the study profile; not accepting to participate in the survey. For data collection, a questionnaire previously elaborated with objective and subjective questions was used in accordance with the objectives formulated for this research (IPAQ / WHOQOL-Bref.

Initially, the project was registered in the Brazilian Platform and then submitted to the CEP for possible approval by the Research Ethics Committee through the Platform website. The data were collected in the NASF with a group of elderly people attended by the researcher in an appropriate environment to have interference in the responses, where the average time will be 15 minutes. A pre-prepared questionnaire (APPENDIX B) divided into two parts will be used, the first will address socio-demographic issues and the second part will address issues related to the objectives of the study.

The data were analyzed through simple descriptive statistics, through tables and graphs using programs such as SPSS / Excel. The present study is governed by Resolution Nº. 466/12 of November 12, 2012 of the National Health Council, which deals with ethics in research involving human beings directly or indirectly, ensuring that the subject's privacy research will

be preserved as all rights over ethical principles as: beneficence, respect and justice (BRAZIL, 2012).

RESULTS

This sample is composed of 20 elderly women assisted by the Family Health Support Center, located in the neighborhood of Noé Trajano in the municipality of Patos - PB, the results are described in tabular form, presenting their characteristics and variables according to the survey of their questions.

Table 1 - Socio-demographic characteristics of the participants.

Description	Variables	f	%
Gender	Female	20	100
Age group	Average	25±2	-

Source: Research Data, 2017

As for gender, our study showed a predominance of the female population, 20 (100%) of the participants. As for the age group, it is observed that the average age of the participants is 64 years.

Table 2 - Characterization of the sample when the IPAQ

Classification of results according to IPAQ	Variables	f%	%
Physical Activity at Work Very Active	Very Active	1	5
	Active	2	10
	Irregularly active A - -	-	-
	Irregularly active B	2	10
	Sedentary	15	75
Physical activity as a means of transport	Very active 7 35	7	35
	Active 9 45	9	45
	Irregularly active A 1 5	1	5
	Irregularly active B 3 15	3	15
	Sedentary -	-	-
Physical activity at home	Very active	3	15
	Active 16 80	16	80
	Irregularly active A - -	-	-
	Irregularly active B - -	-	
	Sedentary 1 5	1	
Physical activity of recreation	Very active 7 35	7	35
	Active 7 35	7	35
	Irregularly active A 1 5	1	5
	Irregularly active B 5 25	5	25
	Sedentary -	-	-
TOTAL		20	100

Source: Research data, 2017.

Table 2 shows that physical activity at work shows that the sedentary lifestyle was characterized by 15 (75%) of the sample, 1 (5%) very active, 2 (10%) active, 2 10%) irregularly active B.

Regarding physical activity as a means of transportation, it was observed that 7 (25%) are characterized as very active, 9 (45%) active, 1 (5%) irregularly active A, and 3 (15%) irregularly Active B. With regard to physical activity at home, it was observed that 3 (15%) very active, 16 (80%) active and only 1 (5%) sedentary. On recreational physical activity, 7 (35%) very active, 7 (35%) active, 1 (5%) irregularly active A, and 5 (25%) irregularly active B.

Table 3 - Values obtained in the WHOQOL-Bref instrument questions

DOMAINS	*AVERAGE* STANDARD± DEVIATION
DOMAIN - PHYSICAL	84.3±10,14
DOMAIN - PSYCHOLOGICAL	85.6±11.40
DOMAIN - SOCIAL RELATIONS	89.2±12.42
DOMAIN - ENVIRONMENT	63.2±11.01
QUALITY OF LIFE	82.1±9.43

Source: survey data, 2017.

In terms of the WHOQOL-Bref domains, we found that the data had good averages in all domains, it was observed that the physical domain 84.3%, in the psychological domain 85.6%, in social relations 89.2% in the environmental domain 63.2%, on the quality of life 82.1%. The higher the percentage (closer to 100%) the better the quality of life.

DISCUSSION

In our study, the level of physical activity was evaluated through the International Physical Activity Questionnaire (IPAQ) - a long version composed of questions that address the domains Physical activity at work, physical activity as a means of transportation, physical activity at home, physical recreation activities.

Regarding the classification of the variables, the instrument used describes as follows (IPAQ, 2016). VERY ACTIVE: the one that fulfilled the recommendations of:

a) VIGOROUS: ≥ 5 days / wk and ≥ 30 minutes per session;

b) VIGOROUS: ≥ 3 days / wk and ≥ 20 minutes per session + MODERATE and / or WALK: ≥ 5 days / wk and ≥ 30 minutes per session.

ACTIVE: those who have complied with the recommendations of:

a) VIGOROUS: ≥ 3 days / wk and ≥ 20 minutes per session; or:

b) MODERATE or WALK: ≥ 5 days / wk and ≥ 30 minutes per session;

c) Any added activity: ≥ 5 days / wk and ≥ 150 minutes / wk (moderate + vigorous walk).

IRREGULARLY ACTIVE: those who perform physical activity but insufficient to be classified as active because they do not comply with the recommendations regarding frequency or duration. To accomplish this classification, the frequency and duration of the different types of activities (moderate + vigorous walking) are added. This group was divided into two subgroups according to whether or not some of the recommendation criteria were met:

IRREGULARLY ACTIVE TO: one that meets at least one of the criteria of the recommendation regarding frequency or duration of activity:

a) Frequency: 5 days / week

b) Duration: 150 min / week

IRREGULARLY ACTIVE B: one that did not meet any of the criteria of the recommendation regarding frequency or duration. 4. SEDENTARY: one who did not perform any physical activity for at least 10 continuous minutes during the week.

As for the participants, all of them are of the female gender, we can highlight that this public has been emphasizing in the last years, mainly in the search of means that allow a better quality of life and reduction of the risks for the onset of chronic and cardiovascular diseases, diabetes mellitus and arterial hypertension, besides being an additional stimulus for social interaction, since the activities practiced in the NASF are of a collective nature, which allows the interaction between the subjects.

The practice of physical activity, appropriate to individual conditions and with proper education, brings physical,

psychological and social benefits, contributing to the maintenance of physical and cognitive functions, and consequently promoting greater independence in old age.

The World Health Organization, from the beginning of the 1990s, found that measures of quality of life are of particular importance in health assessment, both from an individual and social perspective (SALES; FERREIRA, 2011).

Even with the scientific evidence of the importance and benefits of physical activity for the elderly population, this population continues to present a physically less active age group, that is, with the advancement of age, there is a tendency to decrease the practice of physical activity (ALENCAR et al., 2011).

The elderly are classified in Brazil as those who are 60 years of age or older. This public is more susceptible to non-transmissible diseases and diseases, such as cardiovascular diseases, diabetes and arterial hypertension, which compromise their health and their well-being (NERI, GUARIENTO, 2011).

Considering the IPAQ, consider the metabolic expenditure, duration, frequency and intensity of physical activity, surely this is the main reason in which a great difference between the characteristics and variables present in the results of this research, as well as the practice of physical activity.

As for physical activity at work, it is noted that the sedentarism stood out among the participants. The high number of sedentary individuals in this issue can be justified by the fact that many are included in a group where the income comes from social benefit such as retirement and or pension, so the vast majority have no profession.

When comparing our study with that of Carvalho et al (2010), we found that there is similarity between the data obtained in both surveys in section 1, where it addresses voluntary or paid work, where 32.5% of the women reported performing some kind of paid or voluntary activity outside the home.

Tribess, Junior, Petrosk (2009) identified in their study that the relation transport, physical activity, is closely linked in the form of displacement in which an individual performs from one place to another, whether walking or cycling, to go to work, church , or fair, it was found that the mean time between elderly women in this question is greater than 10 continuous minutes per session.

Throughout life, women are considered active people, this is due to the fact that in the day to day they perform the domestic tasks, it is estimated that the average time in which it is taken to the domestic tasks is approximately 4 hours per day, divided into mild, moderate and vigorous activities, leading to high energy expenditure (AINSWORTH, 2010).

About recreational physical activity TRIBESS (2009), found data similar to ours when we added the levels of physical activity practiced by elderly women, the researchers identified that 38.9% of the women studied performed leisure and recreational physical activity of at least 10 continuous minutes, such practice helps to maintain the functional and aerobic capacity of the practitioner.

Elderly individuals who practice physical activity preserve their functional capacity by the life history and the daily activities that they perform. However, the process of functional loss with aging is significant and rapid, so physical activity must be inserted into the daily life of this elderly person, as a way of reducing the consequences evidenced by the continuous aging process (MAITÊ et al., 2012).

It is observed in the data contained in this research, that the percentage of elderly people framed in the very active and active profile is considerably satisfactory, which shows that they have good physical fitness, when comparing with their age.

It is important to emphasize that relatively active elderly people tend to present better conditions to perform daily life activities, thus enabling them to live independently, since the more active the subject is, the lower their ability to limit (ASMS, 2013).

Physical activities performed in a small amount, and in light intensity, besides activities whose accomplishment is less than three times a week is associated with problems related to the difficulty in the mobility of elderly adults (MATSUDO, 2006).

Elderly people who are considered physically active and who perform physical activity tend to present a better quality of life compared to other elderly people who do not perform physical activity, even if physical activity is started at a later stage, it is evidently observed that there is a significant increase in the quality of life and motor recovery of those who practice it, well comfortable their functional autonomy (BORGES; MOREIRA, 2009).

It is verified that the quality of life of the participants of this study evaluated from the WHOQOL-Bref is considered satisfactory, which may indicate that the participants in this study are satisfied. Older women practicing physical activities present better means in all domains of the WHOQOL-Bref, in addition to general quality of life in relation to those women who do not practice physical activity (GORDIA, 2007).

There are numerous concepts of quality of life, some of which consider man as biopsychosocial being and citizen with expectations and needs. Satisfaction of basic needs, human rights and health demands, as well as the reduction of socioeconomic inequalities and the improvement of living and working conditions are essential precepts of human quality of life (FERRARI, WADI, FERRARI, 2013).

To meet these theoretical demands, the World Health Organization (WHO) convened a group of researchers in an attempt to develop a clear and concise concept of quality of life. The efforts of this group resulted, in the mid-1990s, in a definition, meaning quality of life as "the individual's

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PERCEPTION OF A GROUP OF ELDERLY BY NASF ABOUT THE BENEFITS OF PHYSICAL ACTIVITY FOR HEALTH.

The population of elderly people is increasing every day in Brazil and in the world, in many countries this population has exceeded 7% of the total population, sparking the search for new studies focused on the needs of this group of individuals. This study aims to: analyze the perception of a group of elderly about the benefits of physical activity for health. This is a descriptive and exploratory character, with PN approach. The results show that the physical activity at work, note that the sedentary stood out among the 15 participants (75%) of the sample, 1 (5%) very active, 2 (10%), 2 (10%) irregularly active b. how much physical activity as a means of transportation, it was observed that 7 (25%) are characterized as very active, 9 (45%), 1 (5%), and 3 active irregularly (15%) irregularly Active B. With regard to physical activity at home, it was observed that 3 (15%) very active, 16 (80%) active and only 1 (5%) sedentary. On physical activities of recreation, 7 (35%) very active, 7 (35%), 1 (5%) active, and irregularly 5 (25%) irregularly active B. Regarding domains obtained through the WHOQOL-Bref, we have good data medium in all domains, note that the physical domain 84.3% 85.6% psychological, social relations 89.2%, 63.2% environmental, on the quality of life 82.1%. The higher the percentage (closer to 100%) better quality of life. It was observed in this study that the studied population presents important data regarding the practice of physical activity, especially with regard to good quality of life. Therefore, the physical educator acts as intermediary, taking sports to the community, providing the practitioner wellness, bio psychological and social, it is necessary to conduct new studies to reach a larger audience, and that your data can guide physical education professionals in order to promote a better quality of life among the elderly population.

Key-words: Physical Activity. Elderly. NASF. Health.

PERCEPTION D'UN GROUPE DE PERSONNES ÂGÉES PAR NASF SUR LES AVANTAGES DE L'ACTIVITÉ PHYSIQUE POUR LA SANTÉ

La population de personnes âgées augmente chaque jour au Brésil et dans le monde, dans de nombreux pays cette population a dépassé 7% de la population totale, déclenchant la recherche de nouvelles études centrées sur les besoins de ce groupe d'individus. Cette étude vise à: analyser la perception d'un groupe de personnes âgées sur les bénéfices de l'activité physique pour la santé. C'est un caractère descriptif et exploratoire, avec l'approche PN. Les résultats montrent que l'activité physique au travail, notons que les sédentaires se démarquent parmi les 15 participants (75%) de l'échantillon, 1 (5%) très actif, 2 (10%), 2 (10%) irrégulièrement actif b . Combien d'activité physique comme moyen de transport, on a observé que 7 (25%) sont caractérisés comme très actifs, 9 (45%), 1 (5%), et 3 actifs irrégulièrement (15%) irrégulièrement actifs. En ce qui concerne l'activité physique à la maison, il a été observé que 3 (15%) très actifs, 16 (80%) actifs et seulement 1 (5%) sédentaires. Sur les activités physiques de loisirs, 7 (35%) très actif, 7 (35%), 1 (5%) actif, et irrégulièrement 5 (25%) irrégulièrement actif B. En ce qui concerne les domaines obtenus grâce au WHOQOL-Bref, nous avons support de données dans tous les domaines, notez que le domaine physique 84,3% 85,6% psychologique, les relations sociales 89,2%, 63,2% environnement, sur la qualité de vie 82,1%. Plus le pourcentage (plus proche de 100%) est élevé, meilleure est la qualité de vie. Il a été observé dans cette étude que la population étudiée présente des données importantes concernant la pratique de l'activité physique, notamment en ce qui concerne la qualité de vie. Par conséquent, l'éducateur physique agit en tant qu'intermédiaire, faisant du sport à la communauté, offrant au praticien du bien-être, bio psychologique et social, il est nécessaire de mener de nouvelles études pour atteindre un public plus large, et que vos données puissent guider les professionnels de l'éducation physique. promouvoir une meilleure qualité de vie parmi la population âgée.

Mots-clés: Activité physique. Personnes âgées NASF. Santé. Título/Resumo em Espanhol

PERCEPCIÓN DE UN GRUPO DE MAYORES POR NASF SOBRE LOS BENEFICIOS DE LA ACTIVIDAD FÍSICA PARA LA SALUD

La población de personas mayores aumenta cada día en Brasil y en el mundo, en muchos países esta población ha superado el 7% de la población total, lo que ha provocado la búsqueda de nuevos estudios centrados en las necesidades de este grupo de individuos. Este estudio tiene como objetivo: analizar la percepción de un grupo de personas mayores sobre los beneficios de la actividad física para la salud. Es descriptivo y exploratorio, con el enfoque PN. Los resultados muestran que la actividad física en el trabajo, tenga en cuenta que los sedentarios se destacan entre los 15 participantes (75%) de la muestra, 1 (5%) muy activo, 2 (10%), 2 (10%) irregularmente activo b. Cuánta actividad física como medio de transporte, 7 (25%) resultaron ser muy activos, 9 (45%), 1 (5%) y 3 irregularmente activos (15%) irregularmente activos. Con respecto a la actividad física en el hogar, se observó que 3 (15%) muy activos, 16 (80%) activos y solo 1 (5%) sedentarios. En actividades físicas recreativas, 7 (35%) muy activo, 7 (35%), 1 (5%) activo e irregularmente 5 (25%) irregularmente activo B. Con respecto a las áreas obtenidas a través de WHOQOL- En resumen, tenemos soporte de datos en todas las áreas, tenga en cuenta que el campo físico 84.3% 85.6% psicológico, las relaciones sociales 89.2%, 63.2% del medio ambiente, en la calidad de vida 82.1% . Cuanto mayor sea el

porcentaje (más cercano al 100%), mejor será la calidad de vida. Se observó en este estudio que la población del estudio presenta datos importantes sobre la práctica de la actividad física, especialmente con respecto a la calidad de vida. Por lo tanto, el educador físico actúa como un intermediario, practica deportes en la comunidad, ofrece bienestar al practicante, es biosociológico y social, es necesario realizar más estudios para llegar a un público más amplio, y que sus datos pueden guiar a los profesionales de educación física. Promover una mejor calidad de vida entre la población de edad avanzada.

Palabras clave: Actividad física. Ancianos NASF. Salud. Título/Resumo em Português.