

Physical-recreational activities to promote the incorporation of older adults into the circle of grandfathers

Actividades físico - recreativas para potenciar la incorporación de los adultos mayores al círculo de abuelos

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ABSTRACT

This research was carried out in the Sports Complex # 2, Bernardo area of the Yateras municipality; Aimed at solving one of the existing problems, promoting the incorporation of the elderly into the circle of grandfathers, their average ages range from 55 to 84 years, they have various pathologies such as: high blood pressure, diabetes, asthma bronchial, osteoarthritis among other pathologies associated with age. The fundamental objective of this research is to develop physical-recreational activities to promote the incorporation of the elderly into the circle of grandparents, and as a consequence, their relationships in the community are raised.

Keywords

Recreational-activities; Older adults;
Empowerment; Incorporation.

RESUMEN

Esta investigación fue desarrollada en el Combinado Deportivo # 2, zona Bernardo del municipio Yateras; encaminado a solucionar uno de los problemas existentes, potenciar la incorporación de los adultos mayores al círculo de abuelo, las edades promedias de ellos oscilan entre los 55 años hasta los 84 años, estos poseen varias patologías tales como: la hipertensión arterial, diabetes, asma bronquial, artrosis entre otras patologías asociadas a la edad. El objetivo fundamental de esta investigación es elaborar actividades físico-recreativas para potenciar la incorporación del adulto mayor al círculo de abuelos, y como consecuencia se eleve sus relaciones en la comunidad.

Palabras clave

Actividades-recreativas; Adulto mayor;
Potenciar; Incorporación.

INTRODUCTION

Previously, attention to the elderly in regards to physical activities, it can be said that it did not exist, since it was reserved for the wealthy or wealthy classes as well as the practice of sport in general. With the triumph of the Revolution, laws were enacted and sports programs were created aimed at promoting the practice of Physical Culture and Sports based on health. An example is the constitution of the Republic of Cuba that recognizes and declares that the State guides, encourages and promotes the practice of all its manifestations, as a means of education and contribution to the integral formation of citizens.

The Revolution has engaged in various tasks for the construction of our society, among which the promotion and development of Physical Culture in the town stands out, and it has opened up to all citizens the opportunity to incorporate it into the different facilities created by the effect.

In April 1979, the world health organization in its magazine "world health" refers to the elderly and states: "The generation of grandparents". With these words the concern of worrying about the rights of the elderly was revealed.

In Cuba, great importance is attached to Physical Culture and Sports as part of the education of our people, which is why both have reached the most remote areas in each of their manifestations, in a way that allows the development of social well-being and the health of our people in general. Life expectancy in our country reaches approximately 77 years of age, which is why the systematic practice of physical exercise by the elderly is necessary, which constitutes one of the objectives of INDER.

Population aging is an unavoidable fact in society and in our country every day it is more latent, since there is a continuous struggle to increase the standard of living, and as a consequence, the hope of this. We all have the concern of how we will be when old age arrives, or if we will reach it and more than this concern we should ask ourselves, what to do to reach a healthy and much more pleasant old age, or how can we avoid an old age full of pain and unhappiness? If we thought like this, we could find the appropriate answers in systematic practices in physical activities, the elimination of smoking and the regulation of our eating habits, all of which would contribute to the fact that this old age represents a normal stage of life for grandparents without current setbacks.

In both preventive and curative health programs, physical activity today plays a fundamental way to attend to the purposes that are aspired to be achieved in the curative measure.

In recent years, our country has carried out hard work to improve the quality of life of the elderly, with health promotion programs, the university for the elderly and the 120-Year Club, among others. In the bibliographic review carried out on various authors, (Maikel, R. 2013,36), (Enrique, D. 2009,43),

(Orledis, Ramírez .2010, 35) among others, they address the subject, but from a cultural perspective generalizing and in this case we are going to treat it with a preventive character.

Despite this effort, the population rejects said program for various reasons, which we intend to address in our research, carried out in the Sports Complex #2, Bernardo area of the Yateras municipality, where incorporation into grandparents' circles is very low with relation to the dispensary population in adults over 60 years of age.

A diagnosis was made through surveys and interviews, which reflected that the work that is carried out from the base in the different health promotion circles is still insufficient to motivate the incorporation of grandparents into the circles, so that they can be provided with all the material and spiritual conditions so that through exercises they can improve their quality of life and thus increase their influence in the social structure. It was found that the most coincidental causes for which the elderly do not want to join the circle of grandparents are:

1. The recreational offers are not based on the tastes and preferences of the elderly in the area.
2. Insufficient incorporation of the elderly to the circle of grandparents of the Sports Combination # 2, Bernardo area of the Yateras municipality.
3. It is insufficient to take advantage of the potential of recreational physical activities to achieve the incorporation of older adults into the circle of grandparents.

The elements provided allowed us to determine the following research problem: How to promote the incorporation of older adults to the circle of grandparents of the Sports Combination #2, Bernardo area of the Yateras municipality? In order to solve this problem, it is proposed as: Objective: to develop recreational physical activities to promote the incorporation of older adults into the circle of grandparents of the Sports Combination #2, Bernardo area of the Yateras municipality.

METHODS

Theoretical level methods:

Analysis and synthesis: It was used to interpret the theory and its incidence in the irregularities that appear in the process, as well as the results of the different applied scientific instruments.

Historical - Logical: it was used to characterize the evolution of the process of incorporating the elderly into the circle of grandparents, its background and current trends.

Systemic Approach: it was used to analyze, understand and establish the links between the different theoretical foundations that make up the planned activities, their action plan and the integration between the components.

Empirical level methods:

Observation: It allowed to know the little incorporation of the elderly to the circle of grandparents of the Sports Combination #2, Bernardo area of the Yateras municipality in relation to the Physical Culture class in the elderly and the activities that take place in the sports area, observe their situation and behavior, as well as the personal relationships established between them.

Pre-experiment: it was used with the objective of evaluating the feasibility of the physical-recreational activities developed, comparing the final result achieved with the starting situation.

Survey: used for the collection of information that was used in a quantitative analysis in order to know and identify the magnitude of the problem. Through this method, it was possible to have a clear vision of the motives, interests and preferences of the older adults in the classes, as well as their personal criteria, family members and the community on the development of activities.

Interview: It allowed to know in depth the ideas, feelings and opinions of the older adult about the classes, the contribution to their health of the physical exercises and the activities carried out, determining the levels of motivation created in them.

Mathematical - statistical methods:

Percentage calculation technique.

The analysis based on percentages was carried out to quantitatively and qualitatively interpret the scientific methods applied in all the research, facilitating comparisons, based on the results of the surveys applied to the subjects under investigation. Cuba is one of the oldest Latin American countries. The magnitude reached in this order and the speed with which our population pyramid has been transformed constitute a concern in future years. Our country considers that this concern is a need on a global scale, which requires cooperative and supportive action that, drawing up national and international policies and strategies, tends to affectively materialize said aid.

In Cuba, from the year 1959, very serious work began from the social, legislative point of view, as well as medical assistance, which will guarantee health and social assistance for the elderly and the enjoyment of an old age with optimum quality. of life. The current life expectancy at birth is between 77 - 79 years, places our country in a privileged situation within the hemisphere and at the same time indicates the dedication of human and material resources that the Cuban state has made available to the entire population.

The fact that in this year 2020 this population has increased, and that the WHO has outlined important goals of "Health for All", so to speak, forces us to review and educate the current care programs for the elderly, if, in addition, We add that the new gerontological concepts exhibit great participation of the

family and the community and the old patterns of institutionalization are left out to be used when necessary, we will come to the conclusion that there are not enough human resources to guarantee this attention and that the State alone cannot take care of this increase.

Our first program arose in 1974, and in 1985 the family doctor care variant and his team were incorporated. Currently the needs and demands of the elderly assume higher categories and the traditional responses are insufficient.

The favorable socio-political structure in the country constitutes a potential help to condition all these premises in a new program, which, in addition to contemplating all of the above, is capable of ensuring the active participation of the family, the community, and political and non-governmental organizations in a collective work where the main protagonist was the elderly.

This program, in addition to offering agglutination in favor of the elderly, will be applicable at all levels of care, which include not only health, but also social security, sports, culture, and other legislation.

The Comprehensive Care Program for the Elderly consists of two subprograms that are described below:

- Community care.
- Institutional care.

Community Care Subprogram for the Elderly

This subprogram, sponsored by the National Directorate of Assistance to the Elderly, has the purpose of contributing to raising the level of health, the degree of satisfaction and the quality of life of the elderly, through prevention, promotion, assistance and rehabilitation actions carried out by the National Public Health System in coordination with other agencies and state organizations involved in this care, with the family, community and the elderly themselves as protagonists in the search for local solutions to their problems. Among the objectives pursued are:

Improve the health of the population aged 60 and over, increase active life, through preventive, curative and rehabilitative treatment for this group.

Create a modality of community gerontological care that contributes to solving socio-economic, psychological and biomedical needs of the elderly at this level.

Vaccinate all the elderly according to the National Immunization System.

Limits of this program:

Of space: it covers the entire country and is applied in all primary care social units that provide gerontology and geriatric care.

Of time: the program began to be applied in the 1st semester of 1997 and is readjusted annually.

The universe of work for this program includes the entire population over 60 years of age residing in the community.

Among the activities carried out to fulfill the objectives are:

- Incorporate the elderly into the Circle of Grandparents, to the practice of systematic physical exercise, cultural and social activities.
- Develop educational activities aimed at changing the image that the elderly has of themselves and of society, to promote healthier lifestyles, avoid alcoholism, a sedentary lifestyle, etc.
- Guarantee regular and systematic care in the doctor's office, at home, in the circle and grandparents' house, in the workplace and in polyclinics for all people aged 60 and over.

Precisely from these activities, the need arises to investigate the elderly and incorporate them into circles of grandparents to promote the systematic practice of physical exercises, improving their quality of life. It is significant to appreciate how in the second activity of this subprogram it is proposed to develop educational activities to promote healthier lifestyles and it is precisely this element that is a significant link in the development of our research, by linking the rest of the organizations and socializing agents in the I work with the elderly to increase their motivation towards the practice of physical exercises from their incorporation into the circle of grandparents.

It must be borne in mind that the term Older Adult passed through that of "elderly and old age" currently outdated concepts.

The adoption of the demographic categorization terms Older Adult and Third Age, to define this segment of the population refers, precisely, to their ability to maintain an attitude of validity, in opposition to the old denomination Elderly and Old Age whose connotation is associated with disability, invalidity and illness.

Old age and aging.

Old age is a stage of life, the closest to death, while aging is a continuous process that begins from the very conception of the human being. Some organs age faster than others. Research has determined that the mind is the last to age, or the one that does so more slowly, as long as it is kept in permanent exercise where physical activity plays a preponderant role.

Other definitions of old age. "Biologically speaking, it is the last stage of the development of the life cycle of the human being in relation to age. That is the scientific definition, but for sociologists, for social workers: old age is the stage of retirement, in which a series of induced affections occur, essentially, due to emotional aspects. The individual feels diminished, economically isolated, often with habitability problems and marginalized by society".

The prolongation of life and the existence of a growing number of elderly require that each individual and society as a whole adopt a new perspective on life, since new life cycles that were previously ignored must be included. That is, society and the individual himself need to learn to age. For society it means changing the cultural perception of the Elderly, it means enhancing his capacities and accepting his limitations.

Today, "Learning to age" for the individual means hastily grasping what life in old age can offer, accepting normal biological limitations and empowering the richly processed experience.

However, even today in the present and especially thinking about the future, the fundamental thing is that human beings change their perspective of life and then the meaning of Learning to Age is really "Learning to Live" the different stages, so that in order to face the 21st century, learning to grow old is just one more stage of Learning to Live the different vital cycles.

Aging has been transformed from a primarily individual problem to a fundamentally social one; that the prolongation of life has a double meaning: individually, being an elderly person requires a daily effort in order to successfully face the biological, psychological and social problems that appear during old age.

As a result of the fact that the population of older adults has experienced notorious growth in response to numerous factors that have come together to sustain a greater life expectancy, the United Nations has considered, through different organizations, the elaboration of general policies that directly benefit the living conditions of these people. The plans and programs undertaken worldwide by UNESCO in the area of culture and education are highlighted, as well as those developed by the World Health Organization (WHO), which have placed special emphasis on preventive health, for the benefit of a higher quality of life.

The Second World Assembly on Aging in 2002, held in Madrid (PAHO/WHO, 2002), convened 142 member countries of the United Nations in order to assess the state of progress of the recommendations of the Plan of Action on Aging of the First Assembly held in Vienna in 1982 (United Nations, 1982) and approve a political declaration of the governments and an international action plan that would improve the living conditions of the elderly population.

The need to develop the care policy for the elderly makes the highest leadership of the government of our country, and in commemoration of the X Anniversary of the World Assembly on Aging, decide to increase efforts and stimulate the necessary responses for Cuba to comply with the principles and recommendations on aging in the United Nations Assembly, made in New York in 1992, and in this way provide the optimal quality of life to our elderly. Among these efforts, the foundation of the Ibero-

American Center for the Third Age and the launch of a new Comprehensive Care Program for the Cuban Elderly stand out.

The Ibero-American Center for the Third Age (CITED) was founded on May 7, 1992, during the activities of the First Central American and Caribbean Congress of Gerontology and Geriatrics, by Cuban President Dr. Fidel Castro Ruz, who expressed in the opening ceremony: "... The most humane thing that society can do is take care of the elderly".

In 1990, the United Nations established the celebration of "Elder Adult Day" every October 1, a commemoration that is celebrated throughout the planet in various ways. Favoring the realization of a human, social and spiritual environment within which all people, particularly the elderly, can live fully and with dignity, is the basic principle of Cuban society. Our elderly, from the integral vision of the human being, are duly appreciated and welcomed by all, because in Cuba their space is recognized with joy and disposition.

The traditional methods and resources used in other times, such as the asylum, in its mission to provide care to the elderly, are not enough today.

Population aging is one of the greatest triumphs of the Cuban revolution, but at the same time one of its greatest challenges, which is why the government has put into practice in the 1990s, a comprehensive care program that responds to the specific needs of the elderly in terms of health and social security.

According to official sources, there are currently more than 14,000 grandparents' circles in Cuba, or groups that are generally formed at the neighborhood level, either for recreation or for day care. In addition, there are some 170 homes for the elderly and a home care plan, which serves some 100,000 people who live alone.

It is also valid to point out the numerous services for this age group, including home care that already exceeds 96 thousand beneficiaries and is carried out jointly by the Ministries of Public Health and the Ministry of Labor and Social Security.

Physical activity practices for the elderly population have become common and necessary practices. We want to highlight the possibility of taking into account some key methodological criteria, to initiate this type of proposal; and contribute to improving the life chances of these people, leading them to enjoy the activity and making it part of their daily activities.

In most specialized centers, sports and recreation institutes, both national and local; fitness centers, gyms, and others of this type; We know that they have programs for the elderly, oriented from physical

activity, that help them improve their standard of living and their organic and physical conditions from these activities.

Generally, also, there are no logical proposals that account for the way in which these population groups are involved, and more so with a consistent methodological characterization, which ensures compliance with the objectives for this population.

Anatomical-physiological foundations of aging:

It begins at the moment of conception.

In adulthood one begins to suffer the organic deterioration of evolution. At this point in life, the maturity of organic functions stops, but from then on an involuntary period begins from which no one can escape. Among its fundamental characteristics we have:

1. It is an irreversible phenomenon that includes structural and functional changes.
2. It is common to all species, although it also depends on the socioeconomic conditions in which the individual has developed as a social being.
3. Causes a decrease in the ability to adapt.
4. The increase in the probabilities of death as time goes by, as a final consequence of the process.

Sciences that study aging are:

Gerontology: Study of aging and the factors that influence it.

Geriatrics: deals with the care of the elderly and the diseases that are seen in them most frequently.

PAHO Classification of Aging:

- Third age 60 years.
- Older Adult over 65 years' old.
- Fourth Age 80 years and over.

The increase in old age creates a type impact:

Political, social and economic.

- Age Effects.
- Lose height.
- Gain then lose weight.
- Acquire a protruding chin.
- Kyphotic Back.
- Drooping chest.
- Wrinkled skin.
- Hair loss and teeth.

- Prone to debut with new diseases.
- Social consequences of aging.
- Family isolation.
- Marginalization in the community.
- Dependence.
- Social burden.
- Melancholia.
- Death.

It is good to establish guidelines that will help to carry out the activities considering what conditions older adults present from their physical functions.

Level I: Physically Incapable Adults.

Level II Physically Fragile Adults.

Level III Physically Independent Adults.

Level IV Physically Active Adults.

Level V Adult Athletes.

This author, (Daure, 1989), reports that there are older adults who are aware of the aging process, have an adequate self-assessment of their characteristics and real possibilities and are willing to actively assume their role. (p. 171 of Developmental Psychology)

He also highlights, as new psychological formations of this age, the role of wisdom and experience in these subjects, which constitute a privilege of mature and elderly people.

Benefits offered by recreation and physical activity in older adults:

- Cope with handicaps and physical limitations.
- They recover knowledge and traditions that enhance the perception of self-esteem in the elderly.
- Prevention of physical problems or neutralization of the consequences of aging.
- Enhances creativity and artistic and aesthetic capacity
- Grants psychomotricity and mind-hand coordination.
- Well-being and personal satisfaction.
- Transmits their knowledge and experiences, contributing to their own personal training, stimulation of higher psychological processes and contribution to new generations.
- Fosters communication, friendship and interpersonal relationships.
- Promote awareness of utility and self-esteem.

- Physical-recreational activities to promote the incorporation of older adults into the circle of grandparents.

Bearing in mind that health, longevity and quality of life depend on biological characteristics, lifestyle, the environmental context in which one lives and the health system determine the dimensions of quality of life, such as: physical health, the psychological state, social and environmental relationships, level of independence that must be taken into account when working with the elderly, among others.

The premises for satisfactory aging must be kept in mind, since the practices of physical activities maintain a good level of gait and balance, control life with a good level of autonomy, it is possible to be optimistic with absences of depression, thus raising the indicators of quality of life.

During the development of the research carried out in the Bernardo community of the Yateras municipality, the entire sample of older adults in the area, made up of 59 grandparents, was used, which represents 100% of the population; of which 40 do not attend the circle of grandparents, of them 31 which represents 77.5% correspond to the female sex and 9 for 22.5% to the male sex. They range in ages ranging from 55 to 84 years, they have several pathologies such as: arterial hypertension, diabetes, bronchial asthma, osteoarthritis. Belonging to the Sports Combination # 2, Bernardo area of the Yateras municipality.

In addition to this sample, 1 community sports activist and 5 recreation teachers with more than 12 years of work experience in the field were taken.

Main results obtained with the proposal.

At present we can say that in the observed classes a higher level of motivation is perceived on the part of the grandparents, as well as their participation and acceptance in the different activities organized, this of course associated with the variety of exercises, games that facilitate the construction of knowledge of the skills to work and the social participation of the participants. It should be noted that the enrollment of the group of 19 has permanently increased to 23, but the most important thing to note is that, even when other grandparents are not officially incorporated into the enrollment, their active participation in all the socialization activities called exceeds the 30 participants systematically.

Result of the final interview applied to recreation teachers.

5 recreation teachers who have more than 12 years in this specialty and 10 related to the elderly were selected. In relation to the results on the evaluation of the proposal to contribute to the incorporation of the elderly into the circle, the evaluation of the dimensions, yielded the following results:

- Convenience of recreational physical activities: 100% placed it in rank 5, very adequate.

-Practical implication of recreational physical activities in the community, 80% (4) were located in rank 5, very adequate and 20% (1) in rank 4, adequate, they allude that there are other factors that threaten its good development.

-Regarding whether it allows solving a problem regarding the motivation and incorporation of the elderly into the circle of grandparents in the community, 100% (5) valued it in range 5, very adequate. In addition to this, the teachers refer to the fact that for the evaluation of the activities and in general, the subject most committed to recreational physical activity should be considered to a greater extent, which is the older adult himself.

The results of the method by consulting recreation teachers correspond to the expected scientific-investigative expectation. The acceptance of the activities by the teachers was verified, it was confirmed that it is feasible to insert it in the community and certify the levels reached in this evaluation process.

Assessment guide for physical-recreational activities by recreation teachers.

Based on your professional competence, you have been selected to collaborate with the investigation in order to verify the assessment of the feasibility of the physical-recreational activities.

Personal data: age ____, years of work experience ____, years of experience in the recreation sector ____, position held or held by ____.

What are your general considerations about recreational physical activities? Of the dimensions to be evaluated, mark with an X.

5-Very adequate. ____ 4-Adequate. ____ 3-Inadequate. ____ 2-Not adequate. ____ 1- Not adequate. ____.

Dimensions / Indicators	5	4	3	2	1
Convenience of recreational physical activities.	5				
Practical implications of recreational physical activities in the community.	4	1			
Contributes to solving a problem regarding the incorporation of the grandfather into the circle.	5				

CONCLUSIONS

In relation to the results obtained and after a detailed analysis of the applied methods, we reached the following conclusions.



- The contextual historical background of the process of physical-recreational activities in the elderly demonstrated that it is necessary to contextualize it from scientific activity.
- The assumed theoretical supports allowed to base the scientific problem from the philosophical, biological, psycho-pedagogical and sociological aspects, accessing the elaboration of recreational physical activities and the foundation of the problem under investigation.
- The diagnosis made reflects shortcomings that lead to the low incorporation of grandparents into the community circle, as well as poor physical and functional status, all of which negatively affects their active intervention. The elaboration and application of the physical-recreational activities, has offered ample possibilities to increase their physical, mental and social well-being, positively influencing the incorporation of the elderly to the activities developed and their systematicity in the circle of grandparents.
- The acceptance of the recreational physical activities proposed by the teachers chosen for their assessment showed that it is feasible since it offers a range of options that increase the physical, mental and social balance of the elderly.

BIBLIOGRAPHIC REFERENCES

- Bartel, W. (1971). *Juegos Recreativos*. La Habana: Editorial Pueblo y Educación.
- Ceballo, D. J. (2001). *El adulto mayor y la actividad física*. Material digital.
- Álvarez de Zayas, C. (1995). *La escuela en la vida*. Ed. Pueblo y Educación.
- Arostegui, I. (1998). *Evaluación de la calidad de vida en personas adultas con retraso mental en la comunidad autónoma del País Vasco*. Universidad de Deusto.
- Autores, C. d. (1988). *La Cultura Física con fines Terapéutica*. Tomo II. Habana, INDER.
- autores, C. d. (2005). *Folleto de Teoría y Práctica de los juegos*. Material digital.
- Bárbara Valdés, D. N. (s.f.). *Orientaciones metodológicas*. Instituto Nacional de deportes, Educación física y Recreación. Dpto. Nacional de Educación Física para adultos y promoción de salud.
- Carvajal, M. F. (1999). *Diabetes Mellitus y ejercicio Físico*. Editorial Pueblo y Educación.
- Chacón Figueredo, A. R. (2006). *El ejercicio físico y las actividades complementarias: Su incidencia en la calidad de vida del adulto mayor*. T. de diploma.
- De la Paz Castillo, R. (2007). *Las actividades complementarias: Un reto a la calidad de vida del adulto mayor incorporado a los círculos de abuelos*. T. De diploma.

Dennis, R., Williams, W., & Giangreco, M. y. (1994). Calidad de vida como contexto para la planificación y evaluación de servicios para personas con discapacidad. Siglo Cero. noviembre., C. d. (2006). La Habana: Editorial Pueblo y Educación.

Popular, C. A. (1997). Gaceta Oficial de la República de Cuba. Ley 33 / 81. La Habana. ENPES.

Recreación, C. I. (1990). Manual de la masividad. La Habana, INDER.

Recreación, C. I. (1990). Manual de la masividad. La Habana, INDER.

Recreativos, C. d. (2006). Principios para planificar el programa recreativo. Libro electrónico. Documento de FUNLIBRE. ONG. Colombia.