

103 - EVALUATIONS OF PROGRAMS IN HEALTH PROMOTION: REFLECTIONS AND PERSPECTIVES FOR THE PHYSICAL EDUCATION IN OLD AGE

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INTRODUCTION

The aged population has been growing considerably and with projections to continue growing (BRASIL, 2003). Then, in the last decades the number of initiatives that take care of this population has spread, with several activities that intend, in general, to provide conditions for the time occupation in this period of life (NERI & CACHIONI, 1999).

In the physical education many initiatives were and are created to stimulate the active style of life by regular physical activities in order to provide the person a healthy old age. According to this, the programs have been done to justify the inclusion of physical education for the aged people considering the illness prevention, the morbidity comprehension and the increase of longevity through activities that emphasize and value good levels of physical aptitude, corporal composition and positive results on the execution of functional capacities (MATSUDO, 2004; PESCATELLO et. al, 1991; YAZAWA et. al, 1989; ZAGO & GOBBI, 2003).

However, these studies show as Farinatti (2002) affirmed, to a reductionist tendency inherited from the biomedical tradition in considering to the health in a negative way, that is, characterize the physical education with its value almost exclusively directed to the illnesses prevention.

In this preventive feature, the physical activity is restricted to the systemize practice, without reflection and with different kinds of activities patterns. Okuma (1998) has revealed in his study that equal patterns with unique formulas for all, have been seen as inadequate, regard the adhesion in any kinds of proposal.

On the other hand, alicerced practices through several evaluated aspects that value the knowledge, the educational process, the pedagogical aspects between teachers/students, ambient characteristics, among other factors can make more sense in the aged people's life.

According to this, Souza & Grundy (2004), affirm that the evaluation is a vital part to make the practices successful ones, because to verify if the activities are right to the population necessities is something essential for the programs adherence. *However, How should be done the evaluation in programs of physical education for aged people?*

In such a way, the objective of this work is to discuss and think about the evaluation in the programs of physical education for aged people fixing on the health promotion.

THEORETICAL REFERENCE - EXTENDING THE REFLECTION

The proposed theoretical reference will raise notes about the problem approached, trying to establish a reflection on the evaluated aspects in programs of physical education for aged people, considering essential to the Health promotion context.

Because when it is said about programs evaluation, normally what we notice in the physical education in accordance to the physical activities practices are the motions and activities repetition, without the worry on the educational process to the learning process, or better, with the objective to do in a self way, and reflect if the activity has relation or meaning with peoples life (SILVA JÚNIOR & VELARDI, 2005).

According to Betti (1996) the practice in the physical education must configure as a possibility of mediation between "theory and practice", between "the corporal done" and "the know-how on this done". Following the same thought, Silva Junior et. al (2006) considers that the idea of autonomy strength to the practice of physical activities is a primordial issue to make people choose and attend an activity that is pleasant and has relation with their lives.

In accordance with Buss (2003); Czeresnia (2003) it is essential to provide to the individuals conditions on the information access so that they can have coherent options of choice. Therefore, the perspective of the Health Promotion is an elementary alternative to carry through the evaluation that if done in a participated way, and not in an imposing and "verticalized" way as in the majority of the evaluations guided by the biomedicine rules.

This way, it is necessary to define health promotion, that in accordance to Brazil (2002, p. 19) "it is the process of capacitating in the community to act on the improvement of its quality of life and health, including a bigger participation on the controlling of this project." Then, the process to make people able, showing them the best way to have healthier options so that, acquiring a style of life that is right with their necessities is a primordial idea in this process.

The health promotion try to modify conditions of life to make them worth and adequate, this way it is pointed to the transformations on the individual process and taking decisions for being predominantly favorable to the quality of life and health, and orientate the group of actions and collective decisions that can favor the health and the improvement on the conditions of well being (BUSS, 2003).

To the programs on Health promotion, Rootman et. al. (2001) affirm that they must be lead by principles of empowerment, integrity, participation, intersectoriality, equility, sustentability and combination of multiple strategies to promote health as a formulation of public policies, organizational changes, social improvement, laws, education and communication.

In a mundial study about evaluation of health promotion programs Assis et. al. (2004), concluded that it is still few the number of initiatives that do the evaluation before starting and during the programs or that emphasize the aim of the health promotion in this context.

The issue of *empowerment* in a program is essential to be fixed on the aim of the health promotion (LAVERACK & LABONDE, 2000; VASCONCELOS, 2004). In accordance with Laverack & Labonde (2000), the programs that work on the perspective of the community empowerment are considered with a *bottom-up* approach - from down to up - contrasting the vertical programs, *top-down* - from up to down -, which are proposed from an institutional perspective, focused on questions related to the illness prevention and behavior changes, and on that the empowerment is seen an instrumental, besides, the initiatives are done based on the epidemiological patterns. On the other hand, the programs from down to up are initiated from a vision and perception of the community and consider the increase on the capacity and power as important results for the health

1 The term empowerment in accordance with Laverack & Labonde (2000); Vasconcelos (2004) is defined as a mean where people acquire a great control on the decisions that affect their lives; or changes for a better quality on the social relations of power. In this work, the term will be used this way, because there is no adequate translation to Portuguese.

improvement. According to Becker et. al. (2004), considering the empowerment as an increase on the power and autonomy of people and community, mainly from those submitted to relations of oppression, discrimination, and social domination, the community participation on the formulation and evaluation of the programs is essential to become them broken process of the improvement and social transformation.

In a study about the evaluation of a program Becker et. al. (2004), emphasizes that the participative construction is essential, the interaction between the technical action and the popular initiative form the structural axle that awards identity to this. Instead of the planning of actions from outside to inside, methodological opportunities are created for the generation of endogen interventions - protagonized by those who see the problems and the territory. In this sense, these transformations must occur on the physical education, such in relations with contents seen as the environment structure.

According to Bodstein et. al. (2004), the perspective to evaluate or describe the programs realization brings a huge contribution as it emphasizes the context importance and then, the social factors and political interests in the picture.

Ayres (2004) in his study affirms that the programs evaluation on health promotion should be inspired by the Practical philosophy tradition, because it supports and justifies the identity of a self comprehensive evaluation and social historical in what people participate of this reconstruction to achieve the necessities and human aspirations from this population.

Becker et. al. (2004), in a study structuralize an evaluation of a program called Patience Village in three complementary levels: The communitarian Diagnosis, its results and implications; the study of interventions realized by the inhabitants themselves, able by a participative methodology of planning and solutions of problems, and the systematization of reports and stories of the participants about the experiences had on the program.

This kind of evaluation stimulating the communitarian participation provides positives effects, allowing to the participants a sensible greater of control on its lives (VALLA, 1999). According to Laverack & Wallerstein (2001), they emphasize the empowerment programs and local development realized without this kind of worry do not reach its goals and consequently are not successful.

Pereira Lima et. al. (2004), had evaluate the effectiveness of the Program School of Parents, an initiative with evidence in the perspective of the Promotion of Health. The results found by the authors are strong favorable, because the actions are directed so that all the people participate actively on the construction and maintenance of the program. In the same study the authors had affirmed that the practices related to the physical activity deserve attention of the program, however, the main objective is focused to other priorities connected to the empowerment.

Another proposal of Evaluations of programs in a perspective of Health promotion was suggested by Bodstein et. al. (2004), what emphasizes the importance of partnership between public power, private initiative and social organizations. Besides it, it is known that the reference to the program realization must be evident to the context importance, considering the dimensions of the actors mobilization, the space for interlocations and the collective action among the local leaderships.

The evaluation of programs related to the aim on health promotion must take into consideration several important factors connected to health. Then, WHO (1998) apud Moyses et. al. (2004), relate that the group report promoted by the health mundial organization has established four aspects that must, necessarily, make part of these projects.

- Participation: Involve, in an appropriated way, in each stage, all those who are interested in the initiative being evaluated.
- Multiple methods: find an outline that uses elements from several disciplinal fields, regarding several procedures of datas collections.
- Capacitating: improve the people capacity, organizations and governors of solving relevant problems on health promotion.
- Fitness: Create a planning that takes into consideration the complex nature of the intervention and its impact in long term..

According to Moyses et. al. (2004), when it is about the evaluation of programs of Health promotion there is a great difficulty in this context, because there is a strong dependence of the community sector, such as it has a great diversity of social and health issues, using a great number of strategies. In this sense, qualitative mensurations of intermediate changes on the reality under intervention are necessary - if not direct, at least with the source of theoretical-methodological constructs that make any sense or keep some consistent relation with the phenomenon studied.

As a complex field and specialized action, the evaluation on Health promotion do not negate the discretions of scientific competence observed in the evaluative researches. However, it goes beyond, the instrumental rationality as it is orientated more by the community principles than the market or state ones, working on the dialectic between the regulation and emancipation, being, however, transdisciplinar and multicultural (PEDROSA, 2004).

Akerman et. al. (2004) affirm that the process of evaluation of programs on the perspective of Health promotion must be settled on values, principles and conditions, but even so, it must not be established an "orientation" to established what is coherent.

In a huge bibliographic review study done by Akerman et. al. (2004) they verified and pointed several aspects that must be considered related to the evaluation on Health promotion: It must respect and value the know ledges and local experiences; recognize and expose the cultural identities differences, social and economical among the different kinds of evaluation, such as populations, social groups, communities or individuals; the evaluation must use a balance combination of methods; techniques and qualitative instruments; based on the community potentialities; encourage the dialog and the reflection in order to facilitate all the forms of improvement of knowledge for all the involved, besides other important aspects.

All the present considerations demonstrate the importance of a deep study before the elaboration and starting of a program, being this way, a necessity to consider several aspects and not disconsidering the special focus on the main objective from those who suggest the action. In the physical education or even programs on physical activities, it means not be restricted only to physical evaluation, functional and behaviorists.

This model presented, with the other evaluations proposal on health promotion raise goals and challenge the traditional models, because they have a better global vision, humanistic and coherent with the bases from our existence principles. It is clear that even to a program of physical education directed to the perspective of health promotion, not all these factors are included at the same time, it would be an impossible task! But we must think of being englobing slowly and having always as a reference point the human being and from this, elaborate a serious proposal with their desires, necessities and wishes.

Many are the aspects more humanistic involved and presented on the perspective on health promotion, what brings the relations implicit with the pedagogy proposed by Paulo Freire, because it involves affection that go beyond the simple fact to provide something to somebody, but more, to provide something that has a relation and sense for your life, providing environments and conditions able to promote reflections about what people do, stimulating the creation of access to the

information through the education and maybe it will arise a true spirit of hope, happiness, love and joy.

Pedrosa (2004) affirms that the evaluation on health promotion must bring itself the notion of permanent action. In this sense, it must be radically decentral, ascendant, being its indagations originated in the space of the own intervention, in its context. It means, from inside to outside, in a way it contributes to the institutional democratization, the improvement on the capacity of politic learning and facing the responsible for the problems that are part of our lives - the biggest expression of health promotion.

CONSIDERATIONS

The theoretical reference take us to some considerations, however, not finals, because the subject and the study field are recent, and it needs, this way, new position aments, investigations and studies reports. However, it is noticed that the professional practice on the programs of physical education directed to elderly must be rethought, because by following the health promotion principles we consider the aged people as protagonists and not coadjutants on the planning and realization on programs of education/ physical activities for aged people. Because of this, the effective participation of the individuals and community on the choices and evaluations is essential to make possible to realize coherence among environments, population and pedagogical practice on the activities directed to physical education.

In this sense, the individuals capacitating through the accessibility to the information is essential to make them occupy their autonomy and think about the physical activity practice to establish know ledges that answer such questions: Why to do them? How to do? Where to do?

Then, it is considered that the evaluation on the programs of physical education directed to aged people be elementar for the pedagogical practice actions go beyond the systematized practice of the physical education, making a possible direct relation not only with the physical and functional capacities, but with the life of the aged people.

BIBLIOGRAPHY REFERENCES

- AKERMAN, M.; MENDES, R. BÓGUS, C. M. É possível avaliar um imperativo ético? **Ciência & Saúde Coletiva**, 9(3): 605-615, 2004.
- AYRES, J. R. Norma e formação: horizontes filosóficos para as práticas de avaliação no contexto da promoção da saúde. **Ciência & Saúde Coletiva**, 9 (3): 583-592, 2004.
- BECKER, D.; EDMUNDO, K.; NUNES, N. R.; BONATTO, D.; SOUZA, R. Empowerment e avaliação participativa em um programa de desenvolvimento local e promoção de saúde. **Ciência & Saúde Coletiva**, 9(3): 655-667, 2004.
- BETTI, M. Por uma teoria da prática. **Motus Corporis**, v.3, n.2, p. 73-127, 1996.
- BODSTEIN, R.; ZANCAN, L.; RAMOS, C. L.; MARCONDES, W. B. Avaliação da implantação do programa de desenvolvimento integrado em Manguinhos: impasses na formulação de uma agenda local. **Ciência & Saúde Coletiva**, 9(3): 593-604, 2004.
- BRASIL. Ministério da saúde. **As cartas da promoção da saúde**. Brasília: MS, 2002. Disponível em: www.saude.gov.br/bvs/conf_tratados.html.
- BRASIL. Ministério da saúde. **Estatuto do Idoso**. Brasília: MS, 2003
- BUSS, P. M. Uma introdução ao conceito de promoção de saúde. In: CZERESNIA, D. **Promoção da saúde: conceitos, reflexões, tendência**. Rio de Janeiro: Fiocruz, 2003.
- CZERESNIA, D. O conceito de saúde e a diferença entre prevenção e promoção. In: CZERESNIA, D. **Promoção da saúde: conceitos, reflexões, tendência**. Rio de Janeiro: Fiocruz, 2003.
- FARINATTI, P. T. V. Atividade Física, Envelhecimento, e Qualidade de Vida. In: V Seminário Internacional sobre Atividades Físicas para a Terceira Idade. São Paulo. **Anais**. p. 79-86, 2002.
- LAVERACK, G.; LABONTE, R. A planning framework for community empowerment goals within health promotion. **Health Policy Plan**. 15(3): 255-262, 2000.
- LAVERACK, G.; WALLERSTEIN, N. Measuring community empowerment: a fresh look at organizational domains. **Health Promotion International**. 16: 179-185. 2001.
- MATSUDO, S. M.; MARIN, R. V.; FERREIRA, M. T.; ARAÚJO, T. L. MATSUDO, V. Estudo longitudinal-tracking de 4 anos - da aptidão física de mulheres da maioria fisicamente ativas. **Revista Brasileira de Ciência e Movimento**. 12 (3): 47-52, 2004.
- MOYSÉS, S. J.; MOYSÉS, S. T.; KREMPEL, M. C. Avaliando o processo de construção de políticas públicas de promoção de saúde: a experiência de Curitiba. **Ciência & Saúde Coletiva**. 9 (3): 627-641, 2004.
- NERI, A. L.; CACHIONI, M. Velhice bem-sucedida e educação. In: NERI, A. L.; DEBERT, G. G. **Velhice e sociedade**. Campinas: Papirus, 1999.
- OKUMA, S. S. **O idoso e a atividade física**. 1ª ed. Campinas: Papirus, 1998.
- PEDROSA, J. I. S. Perspectivas na avaliação em Promoção da saúde: uma abordagem institucional. **Ciência & Saúde Coletiva**, 9 (3): 617-626, 2004.
- PEREIRA LIMA, V. L. G.; CAMPOS, N. Z. R.; ARRUDA, J. M.; BARROS, C. M. S.; TAVARES, M. F. L.; MEYER, M. C.; ZANDONADI, R. C. M. B.; Análise da eficácia de programas sociais de promoção da saúde realizados em condições macroestruturais adversas. **Ciência & Saúde Coletiva**. 9 (3): 679-696, 2004.
- PESCATELLO, L.S, DIPIETRO, L, FARGO, A.E, CASPERSEN, C.J, OSTFELD, A.M, NADEL, E.R. The impact of physical activity and physical fitness outcomes in older adults. **Medicine Science Sports and Exercise**, v. 23, p.21-23, 1991.
- ROOTMAN, I.; GOODSTADT, M.; POTVIN, L.; SPRINGETT, J. A framework for health promotion evaluation. In: **WHO - Europe Evaluation in Health Promotion: principles and perspectives**. Pp. 7-38. WHO - Europe, Copenhagen, 2001.
- SILVA JÚNIOR, A. P.; VELARDI, M. Reflexões sobre a importância de um Programa de Educação Física na Promoção da Saúde de Idosos. **Anais do XI Simpósio Multidisciplinar da USJT**; Centro de Pesquisa, 2005.
- SILVA JÚNIOR, A. P.; NAKAMURA, A. L. L.; LOUZADA, J. C. N.; VELARDI, M. Autonomia e Educação Física: Uma perspectiva à luz do ideário da Promoção da Saúde. **Conexões**, v.4, n.1, 2006.
- SOUZA, E. M. GRUNDY, E. Promoção da saúde, epidemiologia social e capital social: inter-relações e perspectivas para a saúde pública. **Cadernos de Saúde Pública**. V.20, n.5 Rio de Janeiro. Set/out. 2004.
- VALLA, V. V. Educação popular, saúde comunitária e apoio social numa conquista de globalização. **Cadernos de Saúde Pública**, 15 (sup. 2):7-14, 1999.
- VASCONCELOS, E. **O poder que brota da dor e da opressão: empowerment, sua história, teorias e**

estratégias. Ed. Paulus, Rio de Janeiro, 2004.

YAZAWA, R.H, RIVET, R.E, FRANÇA, N.M, SOUZA, M.T. Antropometria e flexibilidade em senhoras praticantes de ginástica aquática. **Revista Brasileira de Ciência e Movimento**, v.3, p.23-29, 1989.

ZAGO, A. S.; GOBBI, S. Valores normativos de aptidão funcional de mulheres de 60 a 70 anos. **Revista Brasileira de Ciência e Movimento**; v.11, n.2, p.77-86, jun. 2003.

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EVALUATIONS OF PROGRAMS IN HEALTH PROMOTION: REFLECTIONS AND PERSPECTIVES FOR THE PHYSICAL EDUCATION IN OLD AGE.

ABSTRACT

In The physical education is increasing the number of implantation on initiatives with the proposal to promote the physical education practice for old aged. However, most part of the intervention programs for the aged people is created based on epistemological models, which characterize the group based on the prevalence or universal incidence and generalized of determiners of diseases considered as characteristics of this fase of life, being that, guided by the biomedical model rules. Besides, it predominates on the implantation and working of the programs a verticalized pattern and tax. Then, the objective of this work is to discuss and think of the evaluation of the physical education programs for old aged under the health promotion. The theoretical reference pointed some directions towards the programs evaluation discussed on the Health promotion; the aged person must act in a participative and critic way on the programs evaluation; a previous analyze on the several aspects helps on the activities choice; strengthen the idea of capacitating to the aged people to make them have autonomy on their choices, participation in the activities where the pedagogical practices actions go beyond the systematized practice of physical education.

Key - Words: Programs of physical education, Health promotion and old aged.

ÉVALUATION DES PROGRAMMES DANS LA PROMOTION DE LA SANTÉ : RÉFLEXIONS ET PERSPECTIVES DE L'ÉDUCATION PHYSIQUE DES PERSONNES AGÉES.

RÉSUMÉ

Dans l'Éducation Physique est croissante l'augmentation d'implantations initiatives destinées à promouvoir la pratique de l'activité physique pour les personnes âgées. Néanmoins, la plupart des programmes d'intervention pour la population âgée est créée sur base de modèles épidémiologiques, qui caractérisent le groupe sur base de la prévalence ou incidence universelle et généralisée déterminante de maladies considérées comme des caractéristiques de cette phase de la vie, étant ainsi guidée par des directives du modèle biomédical. En outre, prédomine dans l'implantation et le fonctionnement des programmes un modèle "verticalisé" et impôt. Donc, l'objectif de cette étude est discuter et refléter sur l'évaluation des programmes d'Éducation Physique pour personnes âgées sous le prisme de la Promotion de la Santé. Le référentiel théorique a indiqué pour quelques directions devant à l'évaluation des programmes réglés dans la perspective de la Promotion de la Santé : la personne âgée doit agir de forme participative et critique dans l'évaluation des programmes ; une analyse préalable de plusieurs aspects assiste dans le choix d'activités ; fortifier l'idée de qualification des personnes âgées pour qu'ils puissent avoir de l'autonomie dans leurs choix ; participation dans les activités dans lesquelles les actions de la pratique pédagogique dépassent la pratique systématisée de l'activité physique.

Mots-Clés : Programmes d'Éducation Physique, Promotion de la Santé et Personnes âgées.

EVALUACIÓN DE PROGRAMAS DE LA PROMOCIÓN DE LA SALUD: REFLEXIONES E PERSPECTIVA LOS EN EDUCACIÓN FÍSICA DE ANCIANOS

RESUMEN

En Educación Física las iniciativas destinadas a los ancianos han sido ampliadas, pero en gran parte son elaboradas e desarrolladas con base en la epidemiología e en los índices de enfermedades mas comunes en esta población. Esto implica en la aplicación de practicas que se orientad por modelos biológicos. En estas practicas de actividades físicas, la verticalización de las acciones es una regla. El intento de este escudo es reflexionar acerca de la evaluación de programas de educación física para ancianos en la perspectiva de la promoción de la Salud. El referencial teórico apunta para una evaluación participativa e critica de los ancianos participantes de las actividades así como una ampliación de las propuestas de actividades, e del desarrollo del empowerment de los ancianos.

Palabras-llave: Programas de Educación física, Promoción de la Salud; ancianos.

AVALIAÇÃO DOS PROGRAMAS EM PROMOÇÃO DA SAÚDE: REFLEXÕES E PERSPECTIVAS PARA A EDUCAÇÃO FÍSICA DE IDOSOS.

RESUMO

Na Educação Física é crescente o aumento de implantações em iniciativas destinadas a promover a prática da atividade física para pessoas idosas. Entretanto, a maior parte dos programas de intervenção para a população idosa é criada com base em modelos epidemiológicos, que caracterizam o grupo com base na prevalência ou incidência universal e generalizada de determinantes de doenças consideradas como características dessa fase da vida, sendo assim guiada pelos cânones do modelo biomédico. Além disso, predomina na implantação e funcionamento dos programas um modelo "verticalizado" e imposto. Portanto, o objetivo deste estudo é discutir e refletir sobre a avaliação dos programas de Educação Física para idosos sob o prisma da Promoção da Saúde. O referencial teórico apontou para alguns direcionamentos frente à avaliação dos programas pautados no ideário da Promoção da Saúde: o idoso deve atuar de forma participativa e crítica na avaliação dos programas; uma análise prévia de vários aspectos auxilia na escolha de atividades; fortalecer a idéia de capacitação dos idosos para que possam ter autonomia em suas escolhas; participação nas atividades em que as ações da prática pedagógica transcendam a prática sistematizada da atividade física.

Palavras-chave: Programas de Educação Física, Promoção da Saúde e Idosos.