61 - Consequences of physical activity for the health of the elderly

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Introduction

According to Simões (1994), about 20% of the Brazilian population is composed of people over 60 years of age. This is the result of a reduction in the mortality rate associated with the increase in life expetancy. Thus, a new space emerged and it must be occupied by this share of the population. As a consequence, many programs for senior citizens have been developed by several institutions.

Currently, preventive and therapeutical measures are being taken to improve the senior citizens' quality of life, with the motor activity being the one receiving the most attention. Under this perspective, the "Oficina do Corpo" Project is a place which is open to issues concerning the elderly's motor ability, aiming at delaying, optimizing and/or compensating the consequences of the changes due to the aging process. Thus, it is of foremost importance to provide the Third Age with integrated sensory-motor experiences for the exploration of the physical environment using the senses of touch, kynesthesy, sight and hearing. These activities will certainly contribute to the development and improvement of body/space perpection. The objectives the Project are to:

- a) highly value the multiplicity of physical activities, stimulating creativity and spontaneousness, according to personal and social traits;
 - b) favor self-esteem and self-awareness of the intrinsic compensatory potential of the elderly;
 - c) stimulate and maintain body awareness, which can increase the perception of the body in space and time;
 - d) improve mental and physical fitness by means of physical and fun exercises;
 - e) contribute to a healthy aging process with quality of life.

This study suggests that, for the human being to develop satisfactorily, it is necessary that s/he acquires and preserves body consciousness and knows how to use the space and time s/he has and the speed at which with s/he can do something. It it important to mention that we are not searching for a "quick fix", but a proposal of an effective and systematic action to be developed for the elderly people concerning their physical and social activities.

1. Theoretical and Empirical Considerations

The United Nations Oganization (UNO) considers the time between 1975 to 2025 as the "Age of Aging", due to the striking growth of this fraction of the population (60 years old or over) when compared to the global population in all countries, developed or not.

According to demographic data made public in 2002 by the Brazilian Institute of Geography and Statistics (IBGE), the Brazilian citizens over 60 years old amounted to, in 1990, approximately ten million. The statistics estimate, for the year of 2025, a population of elderly people who will place Brazil as the sixth country in the world with most people in third age group (GEIS, 2003).

All over the world, both developed and developing countries have had success in reducing significantly the mortality rate. This fact is specially due to improvements in basic life conditions, such as hygiene, sanitation, urbaniztion, vaccines, nutrition, improvement of working and housing conditions, among others. The most evident index of these changes caused by longevity can be obtained by the modifications in the profile of *causa mortis*, since the number of people who can live long years with better quality of life is constantly growing. Besides these, there are the environmental factors which relate to eco-circunstances, from childhood to the old age, in which family and community environments, in their biologic, phychologic, social, cultural and economic aspects which interact with the human being. The behavioral factors some linked to society and others to each single individual manifest themselves in people's lifestyles: sedentariness, obesity, eating habits, smoking, alcohol and other contingencies, including stress.

The development of the human being is a continuous process which starts in their conception and is followed by subsequent metamorphoses in stages until the person is old. Fonseca (1998) stated: "de uma imaturidade característica, o ser human caminha para uma maturidade", winning and integrating several acquisitions in order to deal with the reality, culminating in the Third Age. Aging is a normal process and should be seen naturally, not as a disease. People get old according to a genetically preprogrammed development added to the way they live and the lifestyle of each person. This process is inevitable and in the stage of life which demands the most adaptation, because it ends a set of somatic, psychic, affective and psychomotor changes. The older people are a specific group which gets more numerous each passing day and has more distinction in society.

In the XX century, there was a clear and extraordinary growth of the elderly population all over the world and this trend shall continue in the XXI century. Consequently, the need to understand how and why the human being grows old and dies is becoming more and more present. These issues are deeply rooted and spread among the members of different societies.

As teachers of Physical Education, the researchers have noticed that, for the human being to develop satisfactorily, it is necessary that s/he broadens and preserves his/her body awareness, using the space and time s/he has and how fast s/he will do the action. Thus, the notion of aging, when seen naturally and peacefully, can lead to a new perspective in the areas of Geriatrics and Gerontology, in that it stimulates the identification of the aspects of people's lifestyles, besides colaborating to healthier aging. Related researches can bring contributions to help people overcome the greatest challenge of the future, that is, "adding more life to the years and not only more years to life".

It is worth reminding that aging is not a mere passage of time, but the manifestation of biologic events which happen throughout life. To Hayflick (1997, p. 10), this process "representa as perdas na função normal que ocorrem após a maturaction sexual e continuam até a longevidade máxima para os membros de uma espécie. A pergunta essencial do envelhecimento é: por que envelhecemos?"

Thus, from the deliberations presented come the following questionings: the natural process of the human being continues the same, from life to death, from child to elderly? What do people think about this?

In western culture, aging is generally perceived as unwanted. Although a vast majority of people wants to live a long time, almost no one wants to be "old", word which has connotations of physical frailness, limited brain power, incompetence and loss of attractiveness. Terms like "person of age", "golden age", "best age", among others, are eufemisms which entail prejudice and discrimination, generally against older people, based exclusively on age. The media, in most cases, reinforce these myths about aging. It is noticeable that, from the sociological point of view, in the strongly capitalist western world, all this negative process intensifies with a decrease in the "value" of the human being in a time of life in which the pattern is that of beauty and productivity.

People live, thus, in a society of classes, with roles, functionss and pre-determined *stati*. In this scope, the value of the human being depends on factors relared to intelectual and produtive capacity. What is called "beautiful, healthy, strong, efficient,

productive..." is highly valued.

Even today, it is possible to see the strength present in this line of thought. In a society characterized by stigmas, aging is a significant problem. Goffman (1988) points out that the society establishes means to categorize people and pre-determine attributes considered common and natural to the members of each of these categories. In this context, the view of a "beautiful and perfect body" has become evident in several and different sectors of the society and, most of the times, anonimity is what is left for the "old body". Hayflick (1997) calls "ageism" the prejudice against the elderly. The author says that, to many scientists, this form of intolerance coexists with the belief that aging is something indecipherable and inevitable which is better to ignore.

It is really important to stress that the Brazilian society is still focused on youth, and the elderly represent today the group which is mostly affected by discrimination, as the studies by Canoas (1975), Salgado (1982), Haddad (1986) and Simões (1994) point out. The weight of this discrimination is clear in the stigma of disability and debilitation which is attributed by society in general. It can be said that in addition to prejudice against them, there is a deep loss in the worth attributed of the elderly. This statement leads the researchers to the following questioning: what do people think about this stage of life?

2. Methodology

This questioning emerged in the study group entitled "Body and Diversity" and motivated this descriptive research. The Extension Project called "Oficina do Corpo", which belongs to the "Pólo do Envelhecimento" of the Federal Univerity of Juiz de Fora (UFJF) was chosen as the focus of the study. The research had the investigation of the opinions of the people over 60 years old who attended the "Pólo" about "what it is to be old today" as its main objective. In the interviews, the subjects were requested to identify five characteristics related to the process of aging. Next, they were asked how they felt about doing physical activities. In the end, 30 interviews were carried out and analyzed.

The strategy used in the study was the "content analysis" which, according to Bardin (1977, p. 31), consists of a "set of analytical techniques of the communications". It aims at obtaining, by means of systematic processes and objectives of description of the content of the messages, indicators (quantitative or not) which allow the inference of knowledge concerning the conditions of production/reception (inferred variables) of these messages. The collection of samples comprised semi-structured interviews. The subjects of this research were 30 people over 60 years of age, both male and female. The semi-structured interviews had multiple-choice or essay questions about personal matters and representations of the body. The instrument was previously prepared and revised by the researchers and submitted to a group of six judges and doctors after the pilot study. Each interviewe told the researchers accounts about several matters. First, they talked about personal matters, such as age group, marital status, childen (if they have children or not), occupation (work), education. Second, they talked about data concerning health (medical treatment/folowup) and weekly physical activity this way the researchers knew whether and how often they practiced any physical exercise. Besides these items, questions on the meaning of aging, as well as on the practice of physical activity were made to a each subject of the research, namely:

- a) What is it like to be elderly today?
- b) Identify five characteristics related to the process of aging.
- c) How do you feel about the practice of physical activities?

The data collection was carried out from February to July 2006 by the researchers themselves, through direct contact with the sample from the UFJF. The interviews were recorded and fully transcribed later on.

3. Analysis of the Findings

On order to analyze the interviews, many contradictions were observed. Firstly, there was no consensus among the participants on the following issue: from what age can a person be called elderly? There were several different answers, such as: "an individual over 50", "person over 60 years of age"; "older than 65"; "I consider someone old after they turn the 70".

When talking about aging, most of the participants did so seeing the process as a symbol of "losses and privations", one which, with the passing of years, lessens your capacities, abilities and perceptions, or one when speed and agility not are priority anymore and the body is not "perfect" any longer.

In every manifestation of the behavior of the elderly, be it motor, perceptive, cognitive or social-emocional, the genetically programmed decline will happen from the cortex to the bone marrow, from the the more complex to the simpler, from the more voluntary to the more automatic, characterizing a vertical descendent disorganization. These changes should be seen as a consequence of the dialogical process of evolution and as human adaptation, which introduces the notion of development and of retrogenesis (FONSECA, 1998).

When the social view is contextualized, one can notice that the concretization of the aging stigma is born in the set of social relationships. The process of discrimination to which people are submitted when they grow old, in a broader social context, is an ethical problem which disguises itself in the pressupositions which determine incapacity or capacity and are a consequence of physical, sensorial and/or mental deprivations.

In the interviews, this fact can be confirmed by means of the accounts of the students enrolled in the "Oficina do Corpo" Project, whose names are fictitious in oder to protect their privacy: "[...] being old, in the society where we live, means being constantly discriminated" (DILMA, 64 YEARS OLD) and "[...] The elderly person is not respected, not are his/her rights." (JOSEFA 68 YEARS OLD).

The opinions of the interviewees about aging are very personal and show the way the senior citizen feels and is seen by the society:

Being old is not commom, it is to have prejudice against yourself (LUIZA, 67 YEARS OLD).

It is being like the object which society has but it does not work anymore (ANTÔNIO, 69 YÉARS OLD).

It is having experience but not having more vitality. It is having wisdom and not having more tenacity. It means having ideas and being senile at the same time (JOSÉ, 81 YEARS OLD).

Thus, by means of these statements, one can notice that the senior citizen is "out" of the production process because, economically, he/she does not exist or is simply a "burden" to those who work and produce. Similar treatment is given to children, or to people with disabilities when, theoretically, the inability to take responsibilities for not "producing" is imposed to them. According to Rosiski (1998, p. 115).

Some answers about the characteristics of the elderly show stereotyped views, generalizing some "chronic diseases" as behaviors typically related to this age group. Also, the idea that older people are usually sick people who stay at home, have hearing problems, are weak, sclerotic, talk to themselves and/or have difficulty moving about is recurrent. Next, some accounts of the interviewees on the issue of "what it is to be old" are transcribed:

- [...] for a long time, being old is living in solitude (JOSÉ, 81 YEARS OLD)
- [...] having a life which does not want to end (LUIZA, 67 YEARS OLD).
- [...] in general, sitting in a bench to talk and play with other old people (FABÍOLA, 61 YEARS OLD).
- [...] looking at yourself in the mirror and missing that young look (JOAQUIM, 71 YEARS OLD).
- [...] a person who is tired from having worked for so long and scarred by suffering (ANA, 68 YEARS OLD).

Among so many negative reactions, some positive points were mentioned by the people who talked about "what it is to be old".

- [...] being happy to see other generations being formed (JOAQUIM, 71 YEARS OLD).
- [...] a special person, with great capacity to teach the young a little bit about life (LIDIÁ, 69 YEARS OLD).
- [...] having joy of living (ANA, 68 YEARS OLD).
- [...] knowing how to make the most of one's moments, making the best use of the knowledge one has (JOSÉ ANTÔNIO, 68 YEARS OLD).
 - [...] searching for new accomplisments (MARIA, 71 YEARS OLD).

Regarding the second part of the research, that is, knowing how the senior citizens felt about practicing physical activities, the subjects of the research know and are aware of the scientific evidence, pointing out the benefits of an active lifestyle for the maintenance of the functional capacity and physical autonomy throughout the aging process.

According scientific data presented by McCardley et al. (1993), the participation in an exercise program leads to a reduction of 25% in the cases of cardiovascular diseases, 10% in cases of stroke (CVA), chronic respiratory disease and mental diseases. Perhaps, the most important is the fact that the physical activity reduces the number of people who are unable to take care of themselves from 30% to 10%, besides playing a fundamental role to make the adaptation to retirement easier. However, when developing a physical activity program for the elderly, it is important to, whenever possible, search for a holistic view of this individual with the improvement of the physical capacity and, at the same time, try to maximize social contact and to reduce their psychological problems besides stimulating their cognitive functions, and not forgetting their health limitations. Also, it is of foremost importance to observe the existence of associated pathologies (diabetes, obesity, arterial hipertension, etc.), because it is common for the elderly to have more than one pathology. Still, it is necessary to relate the effects of the medication being used with the physical activity and, whenever possible, promote the exchange of information with physicians throughout the physical activity program.

It is important to mention some accounts of the subjects which concern the practice of physical activity, which makes the researchers say that they are on the path to fully achieve the objectives of the Project:

- [...] I had a problem of depression and this was changing as a consequence of the classes. The will to come to dance was growing. I had a lot of joy, euforia and, with them, depression went away (MARIA, 64 years old, student for 1 year and three months).
 - [...] I am happier, more joyful. I feel very well when I dance (MARCIA, 67 years old, student for two years and a month).
- [...] After I started dancing, I cut down on my depression medicine because I feel much better, as if I were taking the medicine (FLORIPEDES, 74 years old, student for a year and seven months).

An interesting case which attracted the atenção of the researchers was that of a student who was recovering from a serious case of meningitis. After being released from physiotherapy and from the neurologic treatment, she looked for the activities of the Project. According to the student, ballroom dancing was the only physical activity which she had done after the disease and that the dance helped her to reach one of the greatest challenges after the disease: crossin Barão do Rio Branco avenue by herself, with her own effort.

[...] I always liked to dance, I've always danced a lot since I was a child carnival, and everything. Then I said: I won't be able to dance. But here, with the classes... In the first classes, I came with a walking stick. My husband would bring me, support me. I could not go either up or down the stairs by myself, not even with the stick and, little by little, day by day, I naturally stopped using the stick. [...] The dance classes give me a lot of physical balance. [...] With the dance I got calmer, more confident. I used to cry a lot, but now I do not, I just laugh (FRANCISCO, 59 years old, student for a year and three months).

Accounts like these show the importance of emphasizing the promissing concepts about adaptative competence in the old age. Thus, we conclude that the physical activity in the Third Age, especially in the Pólo of Aging of the UFJF by means of the ballroom workshop, has reached its goals with a highly positive balance due to the number of people interested in joining it and the maitenance of the number of students who actively participate in the Program. The quality of life in this age implies the adoption of many criteria of biological, psychological and social-structural nature.

In this Program, we are not looking for a "quick fix", but rather a proposal of an effective and systematic action to be developed with people in the Third Age when it comes to physical and social activities.

Conclusion

The conclusions point to the fact that people in the Third Age first identify the negative aspects of aging concering the following: physical (white hair, wrkinles); biologic (diseases, difficulty moving about and tiredness); psychologic (impatience, sadness and solitude). Later, they identify the positive aspects, which are related to experience and to wisdom. After practicing physical activities for at least a year, these people report improvements, such as the will to do daily activities, higher self-esteem and more joy to live. However, what attracted the attention of the researchers were the ambiguities and controversies in the answers, showing the senior citizens' difficulty in accepting the process of aging naturally and as an inevitable stage of life.

Today's older people have the possibility to, if aware of it, enjoying life with more pleasure, doing - or not - many activities which were previously an obligation, since aging affets the capacity and response of the organism, but does not reduce the possibility of having plasure.

It is important to state that the idea of aging is related to the environment where the person lives. If the senior citizen is accepted by the family, s/he will liver better as a consequence. It is believed that family and social relationships, as well as the way of acepting aging, influence how people get old. Therefore, it is necessary to awake in order to accept, understand, reeducate and reabilitate the person in the Third Age, besides taking on a policy of human rights which guarantees the same educational, occupational, leisure, and well-being opportunities to all citizens. Thus, it will be possible to open the debate about the elderly, their bodies - as well as aging - contributing to other projects which aim at improving the health and the quality of life of this population.

Also, it is necessary to think about the reeducation of the "older bodies" which are socially deactivated, swamped by the idea of a sick depressed and insecure old age, in order to find another possibility: the evolutional-active live, turned to the recuperation of the "body" which receives information and which is changing and being used to the accomplishment of ones objectives.

The quality of life, in the old age, implies in the adotion of many criteria of biological, psychological and social-structural nature. Neri (1993) points out the following as determining elements or indicators of well-being in this phase of life: longevity, biological health, mental health; satisfaction, cognitive control, social competence, productivity, activity, cognitive efficiency, social *status*, income, continuity of family and occupational roles - in addition to the maintenance of informal relationships in the primary groups (especially the friends network).

The notion of aging, when seen of naturally and calmly, can lead to new perspectives in the areas of Geriatrics and Gerontology, since it stimulats the identification of the aspects of people's lifestyles and helps people have a healthier aging process. Investigations like this can contribute to overcome the great challenge of the future, that is, that of "adding more life to the years and not only more years to life."

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CONSEQUENCES OF PHYSICAL ACTIVITY FOR THE ELDERLY HEALTH

Abstract: The Extension Project named Body Workshop is part of the Interdisciplinary Pole in the Sector on Ageing Issues of the Federal University of Juiz de Fora (Universidade Federal de Juiz de Fora). It focuses on work with motor activities both through Movement and Expression. In 2006, a research was conducted and, in it, 30 people over sixty years old were interviewed. It was aimed at investigating what the meaning of "being elderly nowadays" is and "how they felt in relation to the practice of physical activities." The conclusions pointed out to the fact that people in this age group identify, firstly, the negative points of ageing in relation to the following aspects: physical (grey hair, wrinkles); biological (diseases, difficulty to move about and tiredness); psychological (impatience, sadness and lack of affection). After this, they identify the positive aspects, which appeared related to both experience and wisdom. It should be pointed out that, after the practice of physical activities for at least a year, these people reported improvements, such as disposition to daily activities, a higher self-esteem and more joy of living However, what has drawn the researchers' attention were the ambiguities and controversies in the answers, once they demonstrated some difficulty in naturally accepting, the ageing process as an irrefutable phase of life.

Key-Words: elderly, ageing; physical activities; health

INFLUENCE DE L'ACTIVITÉ PHYSIQUE À LA SANTÉ DES PERSONNES ÂGÉES

Résumé: Le Projet d'Extension intitulé "Officine du Corps" c'est une partie integrante du Pôle de Vieillisement de l'Université Fédéral de Juiz de Fora (UFJF). Il a pour but travailler avec des activités motrices a travers de l'Expression et du Mouvement. En 2006, il a été réalisée une investigation avec 30 personnes qui ont plus de 60 ans. Elles ont participé d'une enquête. Les enquêteurs ont investigué la signification de l'expressions suivantes: "être une personne âgée aux jours actuels" et "comme ces personnes se sont senties en ce qui concerne à la pratique de l'activité physique." Les conclusions ont montré que les personnes âgées identifient, premièrement, les points négatives du vieillissement, en ce qui concerne aux suivants aspects: physique (cheveux blancs, rides); biologique (maladies, difficultés de la locomotion et lassitude); psycologique (impacience, tristesse, carence). Depuis, elles identifient les aspects positives qui ont apparu concernant l'experience et la sagesse. Après la pratique des activités physiques pendant, approximativement, un année, ces personnes ont dit qu'elles ont amélioré leur état de santé, tel comme la disposition pour faire les activités quotidiannes, elevation de auto-estime et majeur joie de vivre. Cependant, ce qui a plus appellé l'attention de l'enquêteurs il a été les ambiguïtés et les controverses dans les réponses, car les personnes âgées ont montré des difficultés pour accepter, avec naturalité, le processus du vieillissement comme une phase irréfutable de la vie.

Mots-clefs: Personnes âgées; Vieillissement; Activité physique; Santé.

INFLUENCIA DEL ACTIVIDADES FISICAS EM LA SALUD DEL MAYOR

Resumen El proyecto de Extensión con el título "oficina del cuerpo" es parte integrante del pólo interdisciplinario del área del envejecimiento de la Universidad Federal de Juiz de Fora (UFJF). Tiene como objetivo, trabajar con actividades motoras a través de la expresión del movimiento. En 2006, fue realizada una ivestigación en la que 30 personas de más de 60 años fueron entrevistadas. Se pretendió investigar lo que significaba para ellas "ser mayor en los dias atuales" y "como se sentian en relación a la práctica de la actividad física". Las conclusiones apuntaron para lo hecho de que las personas en esta edad identifican, primeramente, los puntos negativos del envejecimiento con relación a los seguientes aspectos: físicos (pelos blancos, arrugas); biológicos (enfermedades, dificuldad en la locomoción y cansancio); psicológico (impaciência, tristeza y carencia). Después, ellas identifican los aspectos positivos, los cuales apareceron relacionados a la experiência y a la práctica de lãs actividades físicas por lo menos um año, esas personas relataron mejoras, tales como disposición para las actividades diárias, elevación del auto estima y mayor alegria de vivir. Sin embargo, lo que más llamó la atención de los pesquisadores fue con relación a las ambigüidades y controvérsias en las respuestas, una vez que demostraron dificuldad en aceptar, com naturalidad, el proceso de envejecimiento como fase irrefutable de la vida.

Palabras Chaves: Mayor; envejecimiento; actividades físicas; salud.

INFLUÊNCIA DA ATIVIDADE FÍSICA NA SAÚDE DO IDOSO

Resumo: O Projeto de Extensão intitulado "Oficina do Corpo" é parte integrante do Pólo Interdisciplinar na Área de Envelhecimento da Universidade Federal de Juiz de Fora (UFJF). Tem, como objetivo, trabalhar com atividades motoras através da Expressão e do Movimento. Em 2006, foi realizada uma pesquisa em que 30 pessoas de mais de 60 anos foram entrevistadas. Pretendeu-se investigar o que significava, para elas, "ser idoso nos dias atuais" e "como se sentiam em relação à prática da atividade física." As conclusões apontaram para o fato de que as pessoas nessa faixa etária identificam, primeiramente, os pontos negativos do envelhecimento, com relação aos seguintes aspectos: físico (cabelos brancos, rugas); biológico (doenças, dificuldades na locomoção e cansaço); psicológico (impaciência, tristeza e carência). Depois, elas identificam os aspectos positivos, os quais apareceram relacionados à experiência e à sabedoria. Ressalta-se que, após a prática de atividades físicas durante, pelo menos, um ano, essas pessoas relataram melhoras, tais como disposição para atividades diárias, elevação da auto-estima e maior alegria de viver. No entanto, o que mais chamou a atenção dos pesquisadores foi com relação às ambigüidades e controvérsias nas respostas, uma vez que os idosos mostraram dificuldade em aceitar, com naturalidade, o processo de envelhecimento como fase irrefutável da vida.

Palavras-chave: Idoso, envelhecimento, atividade física; saúde.