



Journal Homepage: - www.journalijar.com
**INTERNATIONAL JOURNAL OF
 ADVANCED RESEARCH (IJAR)**

Article DOI: 10.21474/IJAR01/7179
 DOI URL: <http://dx.doi.org/10.21474/IJAR01/7179>



RESEARCH ARTICLE

ACTIVE LIFE, OCCUPATION OF LEISURE TIME AND PUBLIC POLICIES IN THE AGING STAGE.

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Manuscript Info

Manuscript History

Received: 24 March 2018
 Final Accepted: 26 April 2018
 Published: May 2018

Abstract

The aging of the population is an issue on the public agenda due to the social and economic impact on the elderly. The present investigation has as an objective to know the active life and in use of the leisure time of the elderly that allow to the public policies to fortify the directed actions to improve the quality of life in the aging stage. Conclusion: Of the 70 older adults interviewed it was found that 35.7% practice physical activities such as walking, running and swimming, while 87.1% take their leisure time to watch television, followed by reading a newspaper, reading a book and watch movies. It was also noted that 86% live with a family member and the rest live alone, in economic security 24.18% work, 65.82%, is pensioned or retired and 10% do not receive any income.

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Introduction:-

The demographic change in societies is a constant, science and technology have become means that provide great benefits to the population, such as the reduction of mortality and fertility, this is how medical advances have lengthened the years of people's lives, however, it is important to point out that living longer is not necessarily accompanied by a better quality of life for the population, especially among vulnerable groups, among which are older adults, hence the emergence of spaces such as the economics of aging where economic analyzes provide knowledge and help for the design of planning, conformation and construction of public policies in favor of the elderly (Uriona, J. 2012).

The situation of the elderly has become a priority issue in the public agenda, especially in low-income countries, due to the great challenge that families face when they take care of the elderly in a generational way, becoming almost a legacy for their children, situation that generates a high degree of dependency in the elderly not allowing them to have an active aging, resulting in diseases such as heart disease, cancer and diabetes, often having several health problems at the same time, such as diabetes and heart disease (WHO).

Faced with the economic and social problems presented by the sector of 60 years and over, by demanding goods and services specific to their age, health services, economic protection, emotional and rehabilitation care, among other needs, to have an active life in a inclusive society and fair it, is very important to relate the leisure time and the daily activities of the elderly to know if the perception of the quality of life reflects an active aging.

In traditional societies. public problems and especially those of vulnerable groups are those that require greater public

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policies, Sojo, E. (2006) defines it "As a government action aimed at addressing or solving a problem related to the public interest", in which the three areas and orders of government are involved; considering the social, political, economic context both nationally and internationally in the country.

In the case of older adults, programs and actions have been designed by the government to meet the demands and needs of this group of the population in order to incorporate them into society in an active way, promoting mental health first and foremost, to be able to contribute productively and functionally in the field they are in, transmitting their experiences to present and future generations; and create a culture of independence and prevention to live with quality of life, reducing the risk of disease, isolation and marginalization. In response to this problem highlights the Pension Program for older adults of the federal government (SEDESOL) considered more relevant for the economic contribution to adults over 65 who do not receive pension or retirement, consisting of a bimonthly financial support, among other programs of prevention, sport, recreation, culture, etc.

This is how the government addresses the problem of aging in its agenda and therefore its study and the purpose of this research to propose public policies for active aging through training activities and personal growth.

Method:-

The present investigation is quantitative and descriptive type; aims to know the active life and the use of free time in the daily activities of older adults in the city of San Francisco de Campeche taking as a reference their income, educational level and health to know if they are achieving active aging with quality of life.

The obtaining of the primary data was collected through the application of a questionnaire to a sample of random non-probabilistic type, where 70 elderly people were interviewed, who attended health centers such as ISSSTE, IMSS and INAPAM.

The questionnaire consists of two sections, the first where sociodemographic data is collected and the second was oriented to obtain data on the socioeconomic status of the elderly.

Once the data and information of the questionnaire was obtained, the Microsoft Excel 2013 program was used for statistical processing and analysis.

Public policies and aging:-

The aging of the population must face intelligent and efficient public policies, whose success is reflected in a prosperous and equitable society, with human persons who share and understand that old age is a way of being or a stage of life of human development (García, J. 2012), in which physical and emotional changes are presented and that is not the reason why the quality of life of the people should change, but on the contrary, they should be prepared with the satisfiers and the health and protection services to attend the growing population of 60 years and over. The concern for care for the elderly is a global issue, says the United Nations Organization that "the aging of the population is about to become one of the most significant social transformations of the 21st century, with consequences for almost all the sectors of society, among them, the labor and financial market and the demand for goods and services (housing, transport, social protection...), as well as for the family structure and intergenerational ties. "

Such importance led the United Nations to declare the year 1999, as the International Year of the Elderly and with this invites reflection especially to the Latin American countries that register a strong tendency to increase this sector of the population and where the policies public and social have not had a transformative impact, with effective programs that generate opportunities and meet the needs and rights of older adults.

Uriona (2012), points out that aging is currently an unprecedented phenomenon due to its accelerated dynamics in regions such as Latin America, the Caribbean and other developing regions, which makes it a challenge to meet needs health, employment, productivity, personalized attention, by virtue of functional impairments within contexts of greater survival, where a greater number of longevity is recorded, also affirms that it is in old age that the safety of this group of the population It becomes more fragile due to the lack of monetary resources which prevents them from accessing many essential satisfactions that any human being should have.

Derived from the studies of international and demographic organizations, the levels of government already consider the elderly as a sector of the population in a vulnerable situation, in the case of the State of Campeche, the state development plan 2015-2021 establishes in the section Combating poverty and assistance to vulnerable groups reducing social inequality and advancing towards an inclusive and equitable society, overcoming social backwardness in order to improve the quality of life of the poorest and most vulnerable segments of the population, through articulation of public policies that reduce inequality in the most vulnerable social sectors, as well as evaluate and transform the normative and institutional frameworks to generate new specialized models of care for the Disabled, Women, Youth, Older Adults and Indigenous Peoples. In the case of older adults, the objective is to improve the quality of life through actions such as facilitating access to health, food and safety services, promoting their insertion in activities that improve their income and building alternatives for their social welfare.

The complex situation of older adults has given rise to new approaches such as active aging, a model based on the theory of activity proposed by Hauighurst and Ibretch (1963), which considers that staying active as much as possible before the changes themselves a new retirement or retirement situation is an adequate resource for well-being, this model is disseminated by WHO, noting that active aging is conceived as a process of optimization of opportunities for health, participation and social security that guarantees the quality of life of the elderly (Gañan, A. and Vallafriela I., 2015).

The active aging approach considers that the daily activities and intergenerational relationships of the elderly must be formative, in such a way that they provide learning and competencies necessary to access culture as a form of personal growth.

The possibility of the realization of an active personal and intellectual life taking advantage of leisure time in the aging stage will undoubtedly contribute to the quality of life of older adults and for this already has institutions and organizations that offer workshops, conferences, activities cultural and sport, appropriate for this stage of old age, in this sense it is important to design public policies for the stratification of these activities according to the age and preference groups of the adult population.

In terms of public policies in favor of building an aging culture, INAPAM establishes as a foundation the ethical and normative premise of considering older adults as holders of rights and not as a vulnerable group that is subject to protection (CEPAL 2006). It also promotes Active and Healthy aging with actions and programs where public policies are aimed at providing the means and opportunities for the Elderly for the enjoyment of a healthy old age, through activities and events of recreation, recreation, association and of participation, which directly contribute to their well-being and self-esteem, this policy responds to the recommendations issued by the World Health Organization (WHO) in resolution EB115. R, in which he urges Member States to develop and evaluate public policies and programs that promote active and healthy aging.

WHO argues that countries can cope with aging if governments, international organizations and civil society enact policies and programs with the participation and security of older citizens. All this makes it possible to realize their potential for physical, social and mental well-being throughout their life cycle and to participate in society according to their needs, desires and abilities, while providing them with adequate protection, security and care.

It is clear that active aging will be related to economic security to have the means to satisfy their immediate material needs such as food, housing, as well as their self-esteem, since it allows them to remain independent in decision-making, play roles significant and participate in collective life as citizens with full rights (Jiménez, 2009).

Public policies on economic security are aimed at encouraging the participation of the older adult population in the formal sector, generating better opportunities for self-employment and achieving greater coverage of the retirement and pension system.

The income necessary to ensure a good quality of life in old age depends on many factors, such as age, health status, cohabitation situation, previous consumption patterns and resources provided by the State through services, benefits or subsidies (OOISS, 2009).

The pension systems play a key role in guaranteeing the economic security of older adults because, according to the Ibero-American Social Security Organization, OISS, 2009, they are the most important public policy instruments to address vulnerability in old age, from which other generations also benefit.

It is also essential in this stage of life social protection and the rights of the elderly, the first to guarantee the minimum needs of the elderly, such as health, food, shelter and housing to improve their levels of well-being, especially of those who are in conditions of vulnerability or social disadvantage, understood as poverty, disease, disability, discrimination, abandonment and defenselessness and in terms of rights guarantee and extend effective protection of the human rights of the elderly, especially to ensure the equality and non-discrimination based on age.

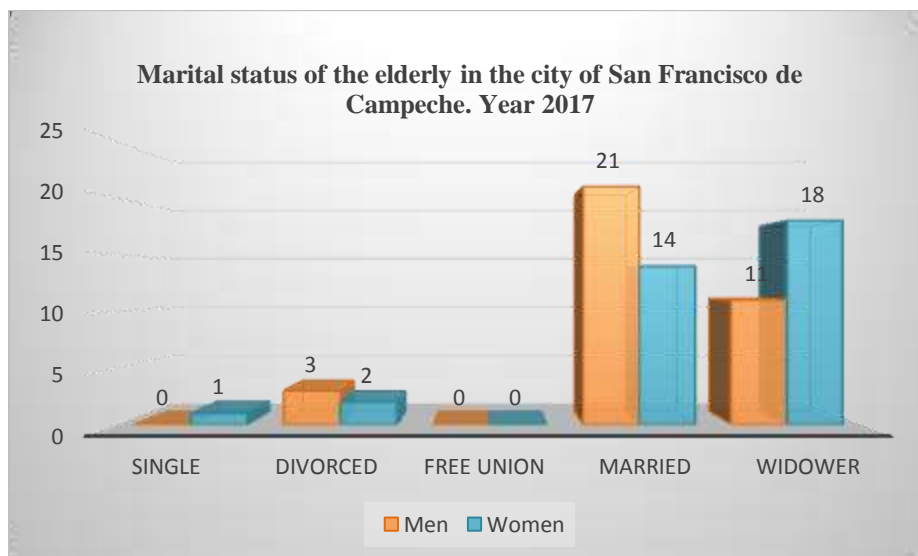
The population aging process encourages, in the first place, to reconcile the needs and interests of the groups of society to move towards full integration, "where each person, regardless of age, with their own rights and responsibilities, has an active role to play "(United Nations, 1995b).

In our country, the Law on the Rights of Older Persons is the basis of national public policy in favor of people aged 60 and over. It establishes the criteria and the provisions of its application, as well as the obligations that correspond to the dependency of the public administration. The participation of the States, municipalities and delegations is essential for its fulfillment, and make it enforceable throughout the national territory. That is why through state representations of INAPAM, coordinated actions are carried out with state and municipal governments to guarantee the protection of human rights (SEDESOL, 2010). Its objective is to dignify the elderly by creating spaces that contribute to people having a healthy old age.

The actions are progressing, with the sum of public, private and educational institutions, in the latter have created specific professions for the care of this sector of the population, as is the case of the Degree in Gerontology and Physiotherapy taught at the University Autónoma of Campeche, whose collaboration is of great significance in offering special services and attention to the elderly.

Results:-

The sample consisted of 70 adults over 60 years of age living in the city of San Francisco de Campeche, it was considered the same number of men and women, with an average age of 71.95 years, in an age range of 65 to 88 years, predominantly 65 years of age in both sexes, reaching 60% of older adults who have more than 64.99 and less than 69.59 years. Marital status as shown in Figure 1, predominant among people aged 60 and over is married, with 50% of the total, where the number of men is greater than that of women, followed by the percentage of widowed persons with 41.4%, women predominating (18) in this situation and finally with percentages lower than 10% are divorced (7.1%) and single (1.4%).



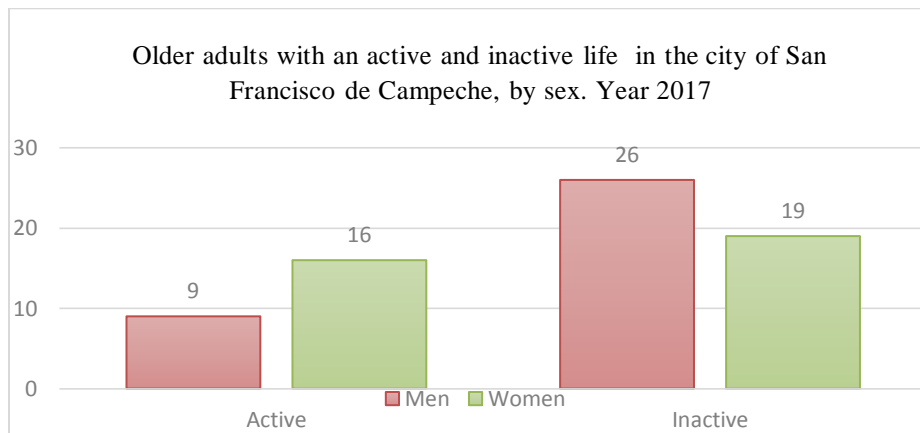
Graphic 1:- Civil status of the elderly in San Francisco de Campeche.

This behavior indicates that it is the family that deals with and cares for 86% of the elderly in this stage of life (spouses, sister, children, grandchildren, nephews) and only 24% live only, in this last figure it is worth noting that more women live in this situation than men.

Of the 70 older adults, 77% receive an income for retirement, pension or social program and 23% do not receive any income, that is, it depends completely on the family, in this way the elderly obtain the basic satisfactions that they provide well-being, sharing it with their relatives, since in some cases they have direct dependents when they support grandchildren or nephews. It was also found that 66% are considered heads of family, even if they live with their children.

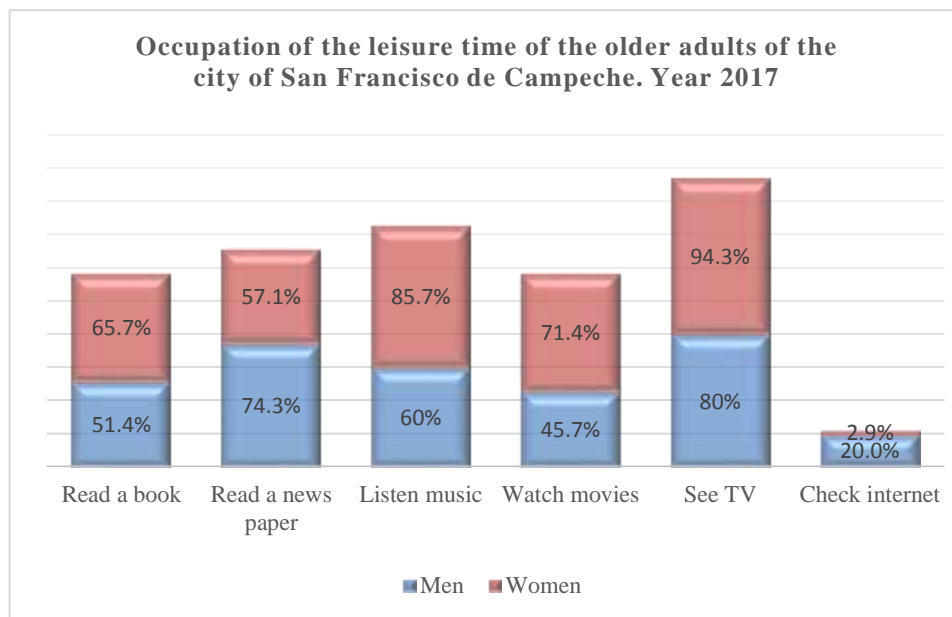
With respect to prevention, treatment and health care where older adults attend, it was found that 85.71% of the sample receives medical attention from a Health Institution, 58.85% being in the IMSS, 24.28% in the ISSSTE, and 4.2% in the popular insurance, the rest goes to the private doctor, in this way they are treated for the most part the diseases that 63% of the elderly suffer.

The study indicates that 65% of older adults do not practice any physical activity, ie they are inactive as shown in graphic 2, this could be related to 63% of older adults who also suffer from diseases of their age, they have been complicated with other diseases such as the alteration of the nerves combined with the heart, loss of consciousness, gastritis and colitis, also found that the diseases with higher prevalence is diabetes and hypertension.



Graphic 2:- Older adults with an active and inactive life in the city of San Francisco of Campeche.

Graphic 3 shows how leisure time occupies older adults considering sex, emphasizes in order of importance watching television, followed by listening to music, reading the newspaper, watching movies, reading a book (mostly the bible), and lastly check the internet despite the fact that 32.86% have such service at home.



Graph 3:- Occupation of leisure time of the Elderly of San Francisco de Campeche

The effect that public policies have had through actions and programs for an active and healthy old age, which includes activities and events for recreation, association and participation, to achieve greater well-being and self-esteem, does not seem to have favorable results, in this sense it was found that 96% of older adults do not attend a self-help group, which could indicate that they do not know the actions that the government is doing creating cultural, recreational and sports spaces such as INAPAM, ISSSTE and assistance centers, where courses of weaving, crafts, board games, sports, singing, among others, are taught, which would undoubtedly contribute to the use of leisure time and avoid diseases such as Alzheimer.

Conclusion:-

Given the evident population dynamism towards an aging population, as well as the reduced activation in the lives of older adults, spending more leisure time watching television, with the consequent negative effect on physical and mental health, which contribute to a lower quality of life, it is necessary to face challenges in health, economic, and welfare, promoting the active life and occupation of leisure time in public spaces planning recreational activities and culture according to the needs of the adult population, in this sense, they must be served by means of rational public policies that aim to maintain and preserve the functional capacity of older adults in a more inclusive society that takes advantage of human capital considering their abilities, occupying them in activities specific to their age and helping them to strengthen your intellectual capacity, etc.

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