

OPTIMAL EXERCISE TO INCREASE THE QUALITY OF LIFE OF THE ELDERLY IN RESIDENTIAL CENTERS

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Abstract

What old age really is, how it manifests itself, and how it can be delayed, are questions that plague scientists who think about our purpose. Of course, we are not looking for answers to these questions, we just want to show that regular exercise positively influences the body that has reached this stage of life. Because aging is an irreversible process that we will all face at some point, the vast majority of individuals have difficulty transitioning from maturity to aging, because this process involves significant changes both physically and mentally and socially. People who go through this process may face a crisis, some of them even developing suicidal thoughts. Addressing this issue I want to contribute to the scientific substantiation of exercise programs designed for the elderly, who live in the specific conditions of residential centers. On the other hand, they want to contribute to the improvement of their quality of life by spending the best time in the center, amid awareness of the benefits of exercise. Consequently, in order to develop "tailored" exercise programs to suit the specific needs of the elderly, it is necessary to identify and classify biomarkers and behavioral markers regarding fitness, cognitive behavioral abilities and fragility of the elderly population to third.

Keywords: *elderly; old asylum; physical exercise*

Introduction

What old age really is, how it manifests itself, and how it can be delayed, are questions that plague scientists who think about our purpose. Of course, we are not looking for answers to these questions, we just want to show that regular exercise positively influences the body that has reached this stage of life.

The last cycle of life begins in 65 years. The aging process involves a special interaction and interinfluence between biological and mental changes and it is found that the rhythm

and depth of the latter are of great importance in the installation of the 3rd age. From this point of view, the cycle of old age is not homogeneous. Several stages can be identified, between which there are significant differences.

Some researchers believe that there are three stages of old age: the stage of transition to old age between 65 and 75 years, the stage of average old age between 75 and 85 years and the stage of old age or longevity when over 85 years of age.

Regardless of the pathologies that appear with advancing age, physical exercise is the ideal "cure" for a healthier life and offers the possibility of prolonging it, keeping under control the psychomotor degradation of the elderly.

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Issues addressed

At the mental level, the aging of the nervous system is noticeable. "Irrigation and oxygenation of the brain is difficult, and the neurons enter an irreversible process of atrophy. There is also a slight decrease in the volume of the brain." (Verza 1994). Dividing memory into two, short-term and long-term, it is much harder for the elderly to remember a recent action compared to a memory from their youth, this symptom being called hypomnesia. Also, unfortunately, the ability to concentrate and intelligence begins to decline.

At the physical level, aging "attacks" the cells, tissues and elasticity of the skin, the latter becoming thinner and paler. At the muscular level, their tone decreases and the heart, which is the main muscle of the body, begins to undergo changes that can lead to heart attack. Decreased exercise capacity leads to joint and bone pain because their mobility decreases. There are also changes in the diet because it gives up fatty foods that lead to thickening of blood vessels. Also from a physical point of view, old age is a linear process that all existing living organisms face, with the exception of man. Old age is a more difficult period to adjust to retirement, which sometimes involves financial difficulties, declining health and physical strength, the loss of loved ones, a change in

lifestyle. All these can promote the onset of mental disorders, depression being along with anxiety and insomnia among the most common.

Research objectives and tasks

The objectives of the research will be:

- Defining a model of quality of life for the elderly in residential centers;
- Characterizing the quality of life of the elderly from the perspective of physical activism;

- Development of the methodology for teaching physical exercises in old age.

The tasks of the research are:

- Studying the specialized literature;
- Identifying the target group, signing collaboration protocols with residential centers;

- Development of exercise programs;

- Analysis of the level of physical activism of people in residential centers;

- Development and implementation of the exercise program for the elderly;

- Evaluation of the results of the exercise program;

- Writing scientific papers and doctoral thesis.

Research hypotheses

Against the background of the relationship between the benefits of exercise and the institutionalization status of the elderly, the general hypothesis of the research aims to highlight that the systematic exercise of exercise can contribute to increasing the quality of life of the elderly in residential centers, by improving physical condition, emotional tone. and social relations.

Research methods

In this paper we used the questionnaire method offering the possibility to study opinions, attitudes, motivations, aspirations, in a word on human subjectivity, in relation to the life of the elderly in residential centers (Chelcea, S., MărgineanI., Cauc , I., 1998). It will also apply to administrative and care staff in residential centers.

Research results

The data collection was carried out in the AVIV Făgăraș residential center and the aim was to draw a parallel between the activities of non-institutionalized elderly people in the early 2000s and institutionalized people in 2022. We present the following results:

1. The daily activity of the elderly

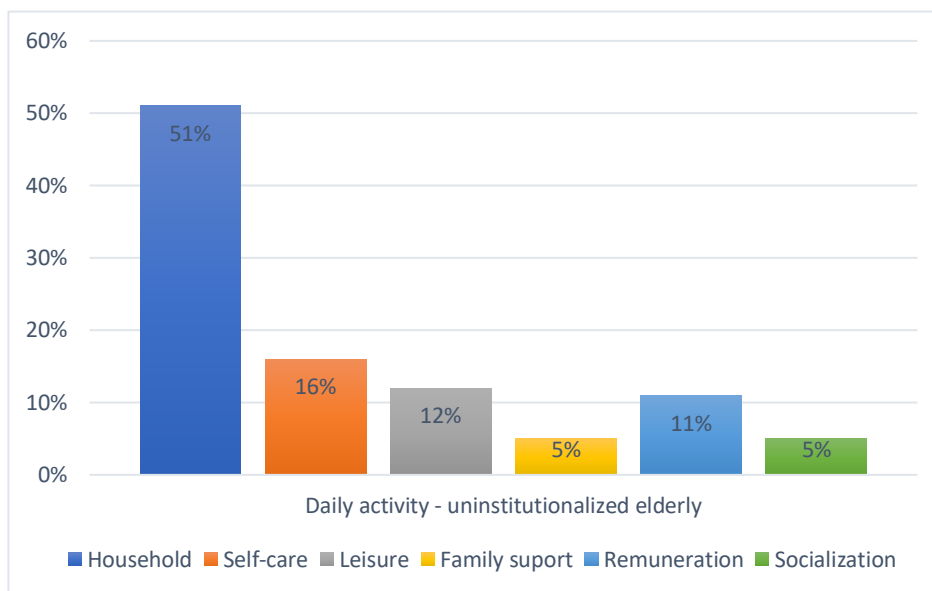


Figure 1 - Household Labor Force Survey (AMIGO 2002) pp. 98-99.

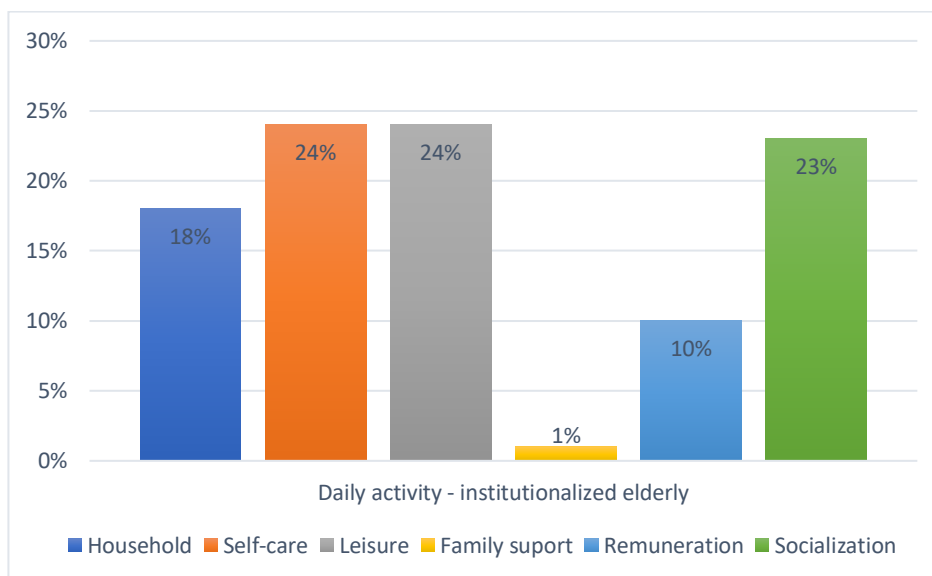


Figure 2 - Personal investigation carried out in the AVIV Făgăraș center

The purpose of this questionnaire was to check the activities that the elderly carry out in society. institutions pay attention to self-care and leisure activities. For people in residential centers, household chores refer to cleaning in the living space, help in the

kitchen or gardening. For the elderly in the centers, leisure means playing chess or backgammon in time, the non-institutionalized elderly do not show an increased interest in this type of activity.

In the attempt to reintegrate non-institutionalized elderly into society, it can be seen in the percentage of 11% of those who work to be remunerated, while the institutionalized elderly receive as remuneration facilities and permits for daily activities.

2. Responsibility in the community

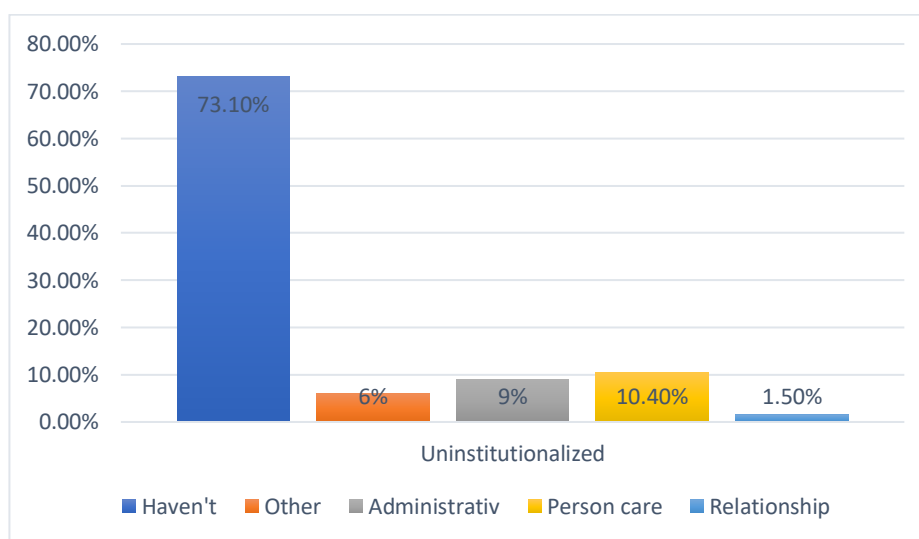


Figure 3 - Responsibilities of non-institutionalized older people in society - European Institute 2006

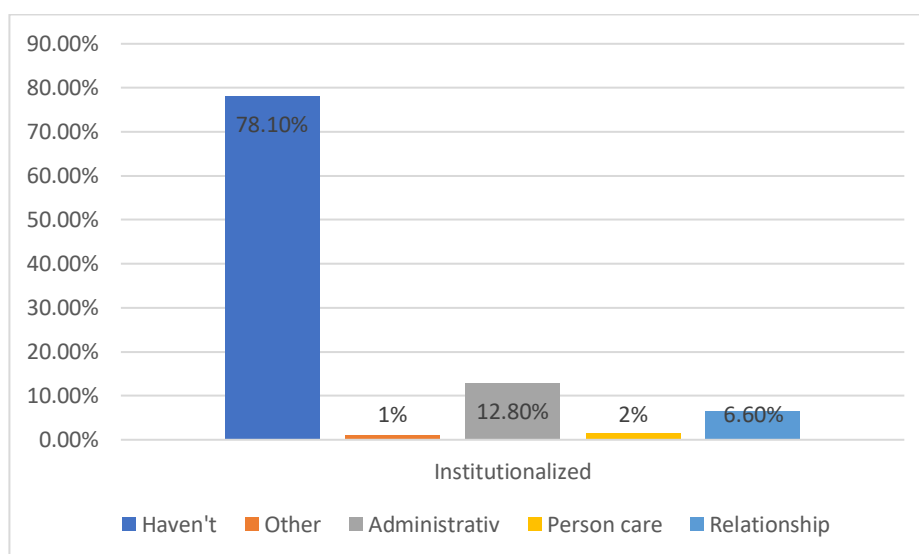


Figure 4 - Personal investigation carried out in the AVIV Făgăraș center

Through this questionnaire I want to show how involved the elderly are in the community and what responsibilities they have in this period of life. In conclusion, we notice the high percentage of non-involvement in the community of the two study groups, by community being understood the neighbors of the block or those of the house in the rural environment and the cohabitation community in the residential center. Unfortunately, a low percentage also appears in institutionalized people when it comes to administrative matters because any novelty should arouse their interest to solve it. With aging, people close to you try to create an environment conducive to living, which causes a significant decrease in stimuli and a physical, mental and social decline.

Conclusions

By presenting these data, I would like to lay the foundations for new research in the field of physical exercise practiced by the elderly, especially in residential centers.

First of all, through the brief presentation of the above mentioned information, we want to draw attention to new methods of physical exercise, with particular importance in determining a beneficial operational model for improving the physical and mental health of institutionalized people in residential centers.

Secondly, the physical exercise of institutionalized elderly people is a fairly topical research topic, as a result of which we want access to the new program of a large number of people in order to increase their average life and quality further in the coming years.

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