

Original Article

Social representation of older people in relation to physical activity and health at old age: a qualitative study

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Abstract

The phenomenon of aging requires a series of adjustments by individuals to the new nuances of everyday life. Aging represents a gradual, dynamic, natural and inevitable process that occurs throughout life. This study was carried out with the purpose of exploring the social representations built around the quality of life of older people who participate in sports workshops oriented around physical activity and health. The study was developed in 2017 during the months of August-November, and it is a qualitative investigation that used conventional content analysis, with 30 older adults from the Maule region, Chile, participating in the investigation. Data were collected through four focus groups, which were recorded, transcribed, and then analyzed with a content analysis approach, by means of the Nvivo 10 software. The data analysis allowed the emergence of two main categories of physical activity and quality of life, which are displayed through six subcategories: socialization, new learnings, role of the teacher, benefits, diversity of exercise and physical difficulties. The results showed that older people highlight the need to generate socialization processes through participation in sports-recreational workshops, recognizing the role of the teacher in learning new activities and exercises. On the other hand, they highlight the benefits it generates for their health and quality of life, the systematic practice of physical activity, social participation, coexistence and interaction with other people, which allows for greater independence and autonomy. Therefore, it is suggested that more qualitative studies should be conducted in this age group, with the aim of understanding how older people live this fundamental stage of their lives.

Keywords: Social representation, older adults, physical exercise, quality of life

Introduction

The terms aging, and old age are commonly used synonymously, although they refer to different phenomena. In view of this, it is necessary to define them, since they are very diverse, endowed with different meanings and, therefore, susceptible to multiple interpretations (Beard, et al., 2016). Aging is a non-pathological natural process, also called senescence, which consists of a progressive loss of functional capabilities. In disease situations, it can indicate a pathological process, also called senility. Therefore, this process is not directly associated with the existence of disease situations, which indicates a difference between the processes of aging and getting sick (Conde-Sala, Portellano-Ortiz & Calvó-Perxas 2017).

The expansion of the elderly population has reached historical figures and tends to increase even more in the coming decades. By 2050, one in six people worldwide (16% of the population) will be over 65, compared to one in 11 in 2019 (9%). The projected proportion of the population aged 65 and over, will double between 2019 and 2050 in North Africa and West Asia, Central and South Asia, East and South-East Asia, and Latin America and the Caribbean. By 2050, one in four people living in Europe and North America could be 65 and older. The number of people 80 and older is projected to triple, from 143 million in 2019 to 426 million in 2050 (Beard, et al., 2016).

According to data from the National Statistics Institute (INE), Chile will have an increase in life expectancy in both sexes, reaching at the end of the projected period, in 2050, 83.2 years for men and 87.8 years for women, which is a clear example of the aging process of the population, which translates into fewer births and a growing population of older adults, specifically the population aged 65 and over, which will represent 25% of the population in the year 2050 (INE 2018).

The phenomenon of aging, which was previously conceived in a negative and static way, as a synonym of losses and decay, began to be perceived as a process that occurs throughout development and that can be investigated (Cheung & Wu, 2014). In addition to the active aging perspective, adopted by the WHO (2011), highlights some theoretical proposals on aging such as the positive aging proposal (Bartholomaeus, et al., 2019), which implies aging well in physical, social and mental aspects, in domains such as cognitive functioning,

subjective well-being; motor functionality, or social participation issues that tend to the multidimensional understanding of the phenomenon of aging (Fernández-Ballesteros, 2011).

The aging process and old age can be represented in different ways. Therefore, although they are experienced around the world, it is not possible to conceive of them from a single point of view, since even the problems related to aging change depending on the context. Therefore, it is necessary to consider the social actors and the situations in which they occur. Furthermore, cultural factors can be decisive for understanding the social representations of older people with respect to old age, because they are subject to the changes generated in societies (Alves, et al., 2016).

Social representations are characterized by the way in which social groups elaborate, construct and organize meanings on a given stimulus produced by the social environment. They are, in themselves, an action that creates conditions for the relationship between the social subject or group and the object (Jodelet, 2011). Thus, the Theory of Social Representations consists of a scientific theory, which seeks to investigate the processes that allow individuals to build and explain social objects through social interaction. According to what was stated by Moscovici, the unknown generates imbalance and tension, mobilizes emotions (Moscovici, 2017). In view of this, it is necessary that the unknown content be associated with some content that is already part of the universe of the individual or group. Thus, social representations are conceived as a cognitive and emotional process, and are formed with the aim of making familiar what is unusual. Social representations correspond to needs and practices that are extremely necessary for social life, just as technique and science are necessary for professional practices (Ferreira, Tura, Silva & Ferreira, 2017).

To successfully age, social activities are necessary, in addition to stimulating good physical and mental functioning (Tavares, et al., 2017). Several studies have suggested that older people tend to associate their quality of life with the following aspects: the practice of physical exercise, access to leisure, carrying out intellectual activities, and living with the family, the community and society (Forte et al., 2015; Vanleerberghe, et al., 2017). On the other hand, interpersonal relationships play an extremely beneficial role in the quality of life for the elderly, both family ties and old relationships, as well as those new friendships built in community groups (Gouveia, et al., 2016). Health-related quality of life then represents the way in which older people perceive their health, translating the subjective well-being of the individual into several domains, namely, physical, the ability to perform tasks, psychological, referring to emotional and mental well-being and social, the ability to relate to people (Dunsky, 2019; Machón, et al., 2017; Kováčiková, et al, 2020). The above, since older people experience different changes related to age, which determine their functional status and ultimately their quality of life.

Some studies indicate that social representations of health in old age can be linked to factors related to economic, social aspects such as access to health services and subjective factors such as appearance, autonomy and well-being (Alves, et al., 2016; Moreno, et al., 2016; Hipolito, de Oliveira & Gomes, 2016). In this sense, independence and autonomy emerge as fundamental aspects of quality of life, since they represent a subjective evaluation of the subject's own physical, psychological, social and spiritual functioning (Wachelke & Contarello, 2010).

Studies on the social representations of aging allow us to identify a wide variety of meanings attributed to old age (Fernandes & Andrade, 2016). However, it can be seen that thinking about this object has gradually changed, indicating a new definition of the elderly (Wurm, Tomasik & Tesch-Römer, 2010). In this context, it is considered of vital importance to understand how older people think, act and interact, as well as to reflect on their life experiences. The aim of the study is to explore the social representations built around the quality of life by older people who participate in sports workshops oriented to physical activity and health.

Materials and Methods

This research is a qualitative-interpretive study (Flick, 2018; Bernard, Wutich, & Ryan, 2016), it was carried out in the Maule-Chile region, between the months of August and November of the year 2017. The selection of the sample was carried out through intentional sampling. With the idea of looking for those who have an enriching experience with respect to the object of study, older adults, men and women who actively participate in a physical activity program called Sports-Recreational Workshop for the elderly, dependent on the National Institute of Sports Chile (IND). The inclusion criteria to participate in the study were older adults over 60 years of age; residents of the four provincial capitals of the Maule region, Chile: Curicó, Talca, Linares and Cauquenes; people who have been in physical exercise programs for at least two years; people registered with the Sports-Recreational Workshops for the elderly financed by IND and elderly people who expressed their willingness to participate in the study through informed consent. As exclusion criteria we can mention older people with less than two years of physical exercise in IND workshops, older people with chronic diseases that make them physically dependent

The focus group was chosen as a methodological resource due to its flexible characteristics, with the understanding the technique as an interactive process between the researcher and the interviewees. The aim of the focus group is to gather information about a specific topic, and the subjects feeling free to open other possibilities of inquiry from a previously established script (Rosenthal, 2016). The interview script was prepared by the research team and the validation was carried out by a panel of five expert judges. The focus groups were

held in a room of the respective centers for older adults, set up with tables, chairs, and coffee service. In this instance, the researchers presented the purposes of the research, and each one of those involved was consulted about their willingness to participate in the study, before data collection, the researchers obtained a written informed consent to guarantee the confidentiality of the names of the people, taking privacy into account and emphasizing voluntary participation, and their authorization was requested to record the group interview, in order to safeguard the ethical aspects of the study.

The interview script was then applied with questions such as: what are the benefits that you perceive in your quality of life when participating in the IND workshops?; What exercises are your favorites and why?; How do you feel emotionally attending sports workshops?; What are the physical difficulties with age and what does physical exercise help to alleviate?; Do you like to share with people your age in an environment of physical activity? However, as the focus group progressed, other questions were asked based on the discourse of the investigated subjects. Theoretical saturation was achieved by reaching the saturation of the answer alternatives, that is, when the groups were not able to produce novelties in their discussions and no new information was found. In addition to using an audio recorder, manual observations were taken to clarify possible intentions of the older adults given at the time of the group interview, which had an average duration of 90 minutes.

For data analysis, content analysis was used, which allowed the data to be analyzed to identify common recurring problems and to identify the main themes that summarize the opinions that have been collected (Graneheim, Lindgren & Lundman, 2017). Content analysis was applied with the objective of analytically examining the transcribed material of the focus groups, dividing the text into relatively small content units and subjecting them to a descriptive treatment (Bengtsson, 2016), with the idea of converting the phenomenon of social representations of older people, on data that can be scientifically treated and build with them a body of knowledge regarding physical activity and health in old age. Following the content analysis guidelines, the focus group transcripts were read, and the recordings were listened to repeatedly in order to find the units of meaning, in terms of codes, inductively (Vaismoradi, Turunen & Bondas, 2013). The codes were reduced through the constant comparison method until categories and subcategories emerged. It should be noted that the dimensions were obtained from the review of the theoretical framework. Under these dimensions the codes were grouped and then the categories that were obtained from the systematic and repeated reading of the participants' reports. In this way, it was possible to access subjective experiences and the meanings that older people attribute to physical exercise, health and quality of life. For data treatment, the Nvivo 10 software was used.

To ensure the reliability and rigor of the data, the Guba & Lincoln criteria were used (Morse, 2015). Credibility was achieved when the participants reviewed the transcripts of the focus groups, collecting from the informants what they think and feel; confirmability refers to the way in which one researcher can keep track, or route, to what another did, consequently, a peer review of the work process and the results of the investigation was made. The transferability or applicability, gave an account of the possibility of extending the results of the study to other populations, for this a dense description of the place and the characteristics of the investigated subjects was made, emphasizing the methodology and context. The research was approved by the research ethics committee of the Universidad Autónoma de Chile, DIP 85-2016. Finally, the participants were asked to sign the written informed consent, and they were also informed about the ethical aspects of the study in terms of confidentiality (anonymity in the publication).

Results

In this section, the description and interpretation of the categories and codes that were obtained from the analysis of the focus groups are presented. Likewise, the units of analysis are presented (which were extracted from the stories), to account for the code and category obtained. Each presented story has a code that expresses the following nomenclature: Curicó Focus Group (FG-Co.); Talca Focus Group (FG-T); Linares Focus Group (FG-L); Cauquenes Focus Group (FG- Ca.), which are the cities of the Maule region, Chile, where the study was conducted. The tables below presents characteristics of the participants of the study, and categories that emerged from the focus groups.

Table 1 Characteristics of the focus groups.

City	Place	N	M	W	Age ranges
Talca	Sede Pobl. Nueva Horizonte	10	2	8	60-81
Linares	Salón parroquia Jesus Obrero	6	1	5	60-75
Cauquenes	Sede Comunitaria	6	1	5	60-75
Curicó	Gimnasio Municipal	8	2	6	60-80

Source: Own Elaboration

Table 2 presents categories, descriptors and codes that emerged from the analysis and interpretation of the background information collected, from the four focus groups carried out on the elderly.

Table 2, The theme, categories and sub-categories of the study.

Mega category	Categories	Sub-categories
Social Representations	Physical Activity	1.Socialization 2.New Learning 3.Role of the Monitor
	Quality of life	1.Benefits 2.Diversity of Exercises 3.Physical Difficulties

Source: Own Elaboration

Category: Physical Activity - Sub-categories: Space of Socialization

Old age should be understood as a stage of the life cycle; while aging is characterized by being a process that occurs throughout life. This is manifested when the investigated subjects express the following:

"And the other thing that we participate in all the activities that the IND offers, in all the gymnastic groups, we are going to participate with a choreography, and we always present ourselves, we have been in different places participating in what the IND organizes, so we share with other people" (FG-T).

"I want to add the fact that we talk, we could add this same thing in the same gymnastics session, maybe because it socializes a little, maybe if any of us had a problem if we have confidence, we can tell it here between us" (FG-T).

"The emotional environment between us, I believe it very good, nobody gets angry, so if someone arrives with grief or a bad temper, it is removed, we dance, we do the exercises that must be done, We play and have fun, I enjoy gymnastics" (FG-Ca.)

According to the report of the key informants, the physical activity workshop offered by the IND for older adults is an excellent opportunity for participants to socialize, share, converse and ultimately translate into a space for personal and collective growth. In this context, the interactions with another person allow the development of the thoughts, feelings and motivations of the human being, and therefore, they become a space for socialization, hand in hand with personal and collective growth.

Category: Physical Activity -Sub-categories: New Learning

In the present study, the investigated subjects report that the systematic performance of physical activity allows them to develop new learning, when they propose the following:

"In the IND workshop, we always learn something new, they explain to us how we should feed ourselves, support each other, take care of our health and even walk, they teach us, but perhaps most importantly, here we learn to respect each other and love each other." (FG-L)

"Yes, one also needs to learn things that they have never done, for example yoga or tai chi, it is wonderful, and I didn't know it existed, it is a quieter, more relaxed activity" (FG-Co).

"We are all looking to be happy, so part of my happiness is being good with myself, so on that side maybe learning new things that can help us feel better in our years" (FG-L).

In this context, the subjects investigated declare that the sports workshop space has allowed them to develop new learning, since they have learned new physical practices, in addition to sharing with others with respect and tolerance, allowing them to live better. This conception allows a broader understanding of how the social representations of aging appear in the context of human relationships. Thus, during old age we consider the relationships and interaction between people as a privileged space for new learning.

Category: Physical Activity -Sub-categories: Teacher's Role

Adherence to PA practice by older adults may be related to factors such as health promotion, well-being, liking for physical activity and socialization processes, among other aspects. From this perspective, the role of the physical education teacher in intervention work with older people, in order to promote a healthy lifestyle, where key informants state the following questions:

"Teacher Sofia, for example, she places herself at our level, as old adults, and she has a lot of patience, no complains to say, it is very good, and there is a lot of respect among us" (FG-Ca).

"It is a very important characteristic, because the activities they do are for laughing, it is not just believing that it is only physical activity, the teacher in his class helps us to forget about our problems" (FG-T).

"Sometimes the teachers change the exercises, we tell them what we like, what we want, for example, one day we wanted to dance, and the teacher made us dance, five dances in a row, and we had a great time and we always chose that same teacher"(FG-Co).

According to the story of the elderly, a relevant aspect is that the prescription of physical exercise must be carried out by a professional in the area, in order to regulate the type of activity, intensity, duration, frequency and progression, in the well understood that working with the elderly requires certain considerations, due to individual preferences and age-specific limitations. Consequently, the respect and empathy shown by the teacher is essential to motivate older adults to practice physical exercise.

Category: Quality of life -Sub-categories: Health Benefits

According to the report of the investigated subjects, regular physical activity favors the expansion of the social and cultural network, maintenance of cognitive functions, decreased risk of depression and dementia; decrease in stress levels and improve sleep quality; improvement of self-image, self-esteem and increased enthusiasm and optimism. Older people in the study express the following health benefits:

"We older adults do well, we are still self-reliant, and several of us do not need help to do the exercises, because we feel that it does us good for our health, because we still do things at home" (FG-L).

"I am very grateful for this gymnastics program; because I started with my legs first, because I couldn't walk from the pain in my knees and I also had depression. With the exercise in the workshops the pain in my knees and hands began to pass, before I couldn't stab them and now I can hit punches (laughs) and my depression passed... the exercise did me very well" (FG-L).

"We as groups have been offered different workshops, crafts, sewing, but we have always chosen the gym workshop, because we feel that here our health improves, we feel better when walking, and the pains of old age just go away" (FG-Ca).

A good health-related quality of life in older people are due to several factors, namely good physical and mental health, life satisfaction, cognitive control, social competence, cognitive efficacy, continuity of family and work functions, interpersonal relationships, autonomy and independence, as stated by the investigated subjects, when reporting that physical activity helps them feel more self-reliant, reduces various types of ailments typical of old age and substantially improves their state of mind, a question that is re-configuring their social representations as they become more physically active and healthy.

Category: Quality of Life -Sub-categories: diversity of exercises

Participation in regular physical exercise programs for the elderly provides favorable responses that contribute to healthy aging. Much has been studied regarding the adaptability of various biological systems, as well as the ways in which regular exercise can influence them. Participation in a regular exercise program, such as the physical activities mentioned by the study subjects, are an excellent option to reduce / prevent a series of functional declines associated with aging and that key informants recognize through their testimonials, emphasizing the extra motivation involved in performing varied routines.

"We don't want anything manual or anything about landscapes, we don't want a thing about crafts, but for good reason, it has to be physical work, because it helps us stretch our arms. All of these helps us to stretches our body" (FG-T).

"I think it is well-balanced. First we do standing exercises, move there, here, warm-up, and then a game comes, and then the exercises, sometimes we do dance, tai chi, yoga, ball work, etc. (FG-T).

"At least I don't like competitive things, I prefer to do things I like, as I am able to do them just, at my own pace, not doing competition, so the teacher plays games with our classmates" (FG-Co)

"Here in the workshop, all classes are different, for example, dance, then we finish the dance, with our hands we move the cane, the ball, we work with the ropes, we do abs, we do pilates, we play the little train, we use elastic bands so no class is the same, all different" (FG-Co).

Category: Quality of Life - Sub-categories: Physical Difficulties

The habitual practice of physical activity is characterized by being an important component of the lifestyle associated with the promotion of health and quality of life of the elderly population. Older people have increased their commitment to regularly participate in these physical activities, as expressed in the following stories:

"Because each one has different ailments, in my case, with shortcomings I walk a little slower and have little strength, that is, we do what we can without demanding more because they also consider us, basically it is an education for us to be better according to our possibilities" (FG-Ca).

"Young people want you to perform at the same pace as them, it is impossible, it is why I cannot go to the gym, because the teacher's rhythm is very demanding, and here in the workshop it is different, because there are some exercises that I cannot do for my low back pain but I can do others" (FG-L).

"It was before, when we were younger, we did not have the problems that we have now, for example, mobility, pain in the back, pain in the bones and joints, over the years many physical discomforts come" (FG-Ca).

The participation of older people in physical activity programs is not always an easy decision, due to the lack of motivation caused by any pathology or change in their physiological state, making it important and necessary to motivate them to improve the quality of life and health of the elderly, even with limitations. They point out as barriers the state of health, fear of falls and their consequences, lack of motivation or strength. On the other hand, lack of time is the barrier most often cited by adults. For the elderly, time would not be a barrier, because with retirement, they have more free time. Lack of participation in physical activity programs by the elderly can be associated with health problems, becoming a barrier to regular exercise.

Discussion

The results of the research showed that the social representations of the elderly regarding physical activity and health in old age are influenced by different factors. The data analysis revealed two categories and six subcategories, which were configured as follows: the category “physical activity” considered the themes associated with the socialization space; new learning and the role of the teacher. For its part, the category “quality of life” considered aspects associated with health benefits; diversity of exercises and physical difficulties. The study participants consider that participating in sports workshops constitutes a “socialization space”, since the level of interactive analysis promotes the development of social ties through daily relationships. In the dynamics of relationships, and social practices, since they include the construction and exchange of a set of knowledge and beliefs that arise mainly from communication between individuals and between groups, giving meaning to the daily reality they experience, thus configuring their representations about the reality they live (Moscovici, 2017; Gouveia, Matos & Schouten, 2016). Consequently, participation in the sports-recreational workshops developed by the IND, becomes not only an instance to carry out physical activity and improve health, but also a space for socialization with other people of their age.

Another finding of the study is related to the ability of older people to develop a “new learning”. In this sense the healthy aging process allows promoting and maintaining functional capacity, so they must know what they are capable of doing, and learning is one of the paths to follow. By continuing the learning process, older people can acquire knowledge and skills to control their health, adapt to their aging process, such as retirement, widowhood or caring for another person, maintain their identity and preserve interest in life (Farajzadeh, Gheshlagh & Sayehmiri, 2017). This is the approach proposed in the World Health Organization document, when it indicates that learning is a fundamental ability of older people (WHO, 2015). Another relevant sub-theme expressed by the study participants is the “role of the teacher” who directs the physical activity session as reported by the informants, mentioning the empathic attitude of the teacher, and the possibility of modifying and enriching the work in the sessions. In this sense, the physical education professional has a primary role in the adherence of older people to PA programs. Teacher’s health promotion methods, as well as motivational stimulation, significantly influence the adoption of a training style, healthy and active life in old age, a question that the key informants rescued in the present study and are consistent with that reported in the literature (de Carvalho, et al., 2017; Brandão & Garces, 2015).

The results of this study are aligned to the latest research in the area in terms of the “health benefits” in the elderly as a result of physical activity (Beard, et al., 2016; Farajzadeh, Gheshlagh & Sayehmiri, 2017). The analysis of the research data allows us to affirm that the regular practice of physical exercise in the elderly promotes physiological well-being in aspects such as glucose control, better sleep quality, improvement of physical capacity related to health, the reduction or prevention of some pathologies such as osteoporosis and postural deviations and the improvement of muscle strength (Ruaro, et al., 2019). Physical activity also improves psychological well-being in terms of relaxation and reduction of anxiety and stress levels, improvement of mood, cognitive improvements and social well-being, which leads to the elderly to achieve multiple benefits to their health, feel safer, more socially cohesive and integrated into their respective communities (Li Ci, Lin Ch, Lin W, 2014). In older adults, the practice of regular physical exercise reduces the risk of falls and prevents or delays the onset of chronic diseases associated with aging. In addition to the benefits already mentioned, the practice of physical activity in the elderly has a favorable effect on increasing oxygen consumption, improving glycemic control, reducing ailments, increasing the basal metabolic rate, improving of balance and gait, the reduction of the risk of falls and fractures (Tyndall, Clark & Anderson, 2018; Huxhold, Miche & Schüz, 2013). In this sense, participation in regular physical exercise programs for older people provides favorable responses that contribute to healthy aging. Much has been studied in relation to the adaptability of various biological systems, as well as the ways in which regular exercise can influence them (Hale & Marshall, 2017; Teixeira-Salmela, 2016).

Among other research results, older adults report that physical activity improves their quality of life, when they perform a “variety of exercises”. In this sense, light to moderate intensity training can be effective for improving endurance in the elderly. While a recent manual from the American College of Sports Medicine recommends a lifestyle with light to moderate intensity activities to optimize health, these same intensities may be necessary to promote adaptations in the cardiovascular system and reduce risk factors of cardiovascular diseases (Issa, Kilpi & Webber, 2016). Thus, initiating and maintaining a program of light to moderate intensity physical activity over a long period of time in older people can decrease the rate of age-related decline in many functions physiological, which ultimately benefit quality of life (de Souto-Barreto, et al., 2016). Within the subcategory “physical difficulties”, the study participants report those aspects that prevent them, on occasions, from a systematic practice of physical exercise. In this regard, studies on aging indicate that older adults see it as a process of loss in various areas of life, with the decrease and the end of the rhythm of work, the weakening and physical and psychological decline and the loss of relationships social issues, an issue that they attribute to the difficulties of age (Anton, et al., 2015). In view of this scenario, it should be noted that older people are capable of rediscovering the value of exercise and physical activity in order to overcome the difficulties of their age.

On the other hand, from the moment that the elderly begin to participate in a physical activity program, a significant step towards a positive change in attitude can be identified (Whitehead & Blaxton, 2017). Despite

the social and physiological benefits derived from exercising, insertion and adoption of older people to physical activity and / or sports program is still restricted. There are factors that influence this adoption and it is important that they be identified. This is the first step to intervene and thus reduce social restriction, health risks associated with inactivity and a sedentary lifestyle.³² Barriers can be real or perceived and can represent a significant negative influence on the adoption of the practice of physical activity by long-lived people (Bonsdorff&Rantanen, 2011;Tkatch, Musich& MacLeod, 2017). The opinion of the participants about aging itself is positive; since they recognize a good state of health, optimism and resignation to face this process. In addition to the existence of bigger opportunities and possibilities of autonomy and independence to carry out activities, both physical and leisure.

The findings of the present study are in line with the conclusions of Ferreira, Tura, Silva, & Ferreira (2017) who investigated the social representations of the quality of life in old age and found relationships of this object with physical, psychological, social and spiritual aspects. That emphasize independence and autonomy as positive and fundamental aspects of the quality of life. On the other hand, the study subjects consider aging as a natural and inevitable process, data similar to those found by Wachelke&Contarello (2010) who investigated the social representations of old age for the elderly and this mention of the aging process was also obtained as part of the life cycle. Actions linked to physical aspects such as caring for the body and psychological aspects related to caring for the mind are mentioned. There is also a strong mention of active aging, carrying out activities to keep busy and the issues that determine the health-related quality of life of the elderly (Li CI, Lin CH, Lin WY. 2014). In the same vein, previous research on the social representations of aging also verified the search for quality of life, permeated by negative aspects such as illness situations, and carrying out activities as a means to face the difficulties of old age (Alves, et al., 2016; Ferreira, et al., 2017). These health actions are directly related to the concept of active aging disseminated by the World Health Organization (WHO, 2015) which aims to promote the health, autonomy and independence of the elderly population. Participants also point out that care must be taken of the various spheres of physical, emotional, spiritual and social health. A similarity with the concept of successful aging is also observed, since the participants mention in their speeches the compensation for the loss of skills, such as carrying out various activities more slowly, and the value of the skills that are maintained, such as maintenance lucidity (Cheung & Wu, 2014). Studies on social representations of the elderly, allow an approach with the aging process, through the understanding of the social reality experienced by the elderly, in the well understood that old age has stood out as a category social and has become increasingly relevant in different social contexts (Farajzadeh, Gheshlagh&Sayehmiri, 2017).

A Among the strengths of the research carried out, the possibility of holding four focus groups in the provincial capitals of the Maule region stands out, and the high interest in participating by the elderly. This is a situation that allows for a significant number of testimonies associated with the representations of the elderly regarding their quality of life. In terms of limitations of the study, it is suggested to deepen the analysis through in-depth interviews, in such a way as to generate a data triangulation process and, on the other hand, to increase the sample of older adults in rural and urban sectors.

Conclusions

Aging is a process that occurs naturally in the final phase of the life cycle, the characteristics of this phase of life are: physical, social and psychological changes. The aging process is considered complex and variable, natural to all human beings, and can be progressive. The ability to perform numerous tasks is impaired, so that the gains and losses are variable in this age group, because it is relative from person to person. On the other hand, in terms of health, the epidemiological profile of the elderly population is characterized by the triple burden of diseases with a strong predominance of chronic conditions, the prevalence of high mortality and morbidity from external causes, and acute chronic conditions. However, it is important to note that this scenario does not necessarily mean a limitation of their activities, a restriction of social participation or the performance of their social function, as the results of this study show.

The subjects investigated in the present study state that physical exercise helps them improve their health and prevent the worsening of existing diseases. These data suggest that participants seek to take care of their own health when they enroll and participate in sports workshops; in which they receive guidance and strategies for disease prevention and health promotion aimed at achieving a healthier and more active aging process; consequently improving the quality of life, an issue that is reflected in the report of the key informants when pointing out the benefits they experience with the practice of physical activity in a systematic way. On the other hand, it can be said that most of the interviewed participants related physical activity in old age with positive aspects and consequently with the social re-significance of the aging process, since the quality of life of the elderly interviewed improves with practice of physical activity and with subsequent socialization processes. Consequently, continuing to inquire and research about the quality of life in older people, from their own experience, is an opportunity to understand this age group. In this sense, as a suggestion, it is proposed to complement the research by conducting individual interviews, in order to deepen the aspects that were addressed more generally during the focus groups.

In this sense, the research allowed to reveal that older people are aware of their potential, and that they live this stage with expectations, that they are capable of building new relationships and new learning, on the other hand, they are capable of identifying problems and constructing possibilities to overcome them. According to the data obtained in this study, the understanding of the quality of life of the elderly, exceeds the biological domain, and incorporates the relational, emotional and psychological aspects. The foregoing is relevant to adequately address policies and strategies aimed at this age group, taking into account the perspective and requirements of the actors themselves.

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