

PERCEPTION OF LEISURE AMONG INSTITUTIONALIZED ELDERLY

PERCEPÇÃO DE IDOSOS INSTITUCIONALIZADOS SOBRE O LAZER

PERCEPCIÓN DE ANCIANOS INSTITUCIONALIZADOS ACERCA DEL OCIO

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Objective: identify the leisure activities performed at a long-term care facility for the aged and understand the elderly's perception of the leisure. **Method:** descriptive and qualitative study undertaken between January and April 2013, involving 15 institutionalized elderly. The data were collected through semistructured interviews, analyzed based on the principles of thematic interpretation and discussed in the light of Foucault's theoretical framework. **Results:** the understanding of leisure for the elderly was linked to psychological wellbeing. The leisure activities practiced were mostly artistic, intellectual, manual, physical and social and were promoted by the community external to the institution. Elderly people with sensory, motor or cognitive deficits faced difficulties and/or were unable to participate actively in the activities. **Conclusion:** the leisure activities at the institution brought benefits to the elderly but were permeated by power relations.

Descriptors: Aged. Homes for the aged. Health of Institutionalized Elderly. Leisure activities. Geriatric nursing.

Objetivo: identificar as atividades de lazer realizadas em uma Instituição de Longa Permanência para Idosos e apreender a percepção dos idosos acerca do lazer. *Método:* estudo descritivo e qualitativo realizado entre janeiro e abril de 2013 junto a 15 idosos institucionalizados. Os dados foram coletados por meio de entrevistas semiestruturadas, analisados pelos princípios da interpretação temática e discutidos à luz do referencial teórico de Foucault. *Resultados:* o entendimento do lazer para os idosos estava vinculado ao bem-estar psicossocial. As atividades de lazer praticadas eram em sua maioria artísticas, intelectuais, manuais, físicas e sociais, as quais eram promovidas principalmente pela comunidade externa à instituição. Idosos com déficits sensoriais, motores ou cognitivos tiveram dificuldade e/ou foram impossibilitados de participar ativamente das atividades. *Conclusão:* as atividades de lazer realizadas na instituição proporcionavam benefícios aos idosos, contudo eram permeadas por relações de poder.

Descritores: Pessoa idosa. Instituição de Longa Permanência para Idosos. Saúde do idoso institucionalizado. Atividades de lazer. Enfermagem geriátrica.

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Objetivo: identificar las actividades de ocio realizadas en una Institución de Larga Permanencia para Ancianos y aprehender la percepción de estos acerca del ocio. Método: estudio descriptivo y cualitativo, entre enero y abril de 2013, junto a 15 ancianos institucionalizados. Datos recolectados por medio de entrevistas semiestructuradas, analizados por los principios de la interpretación temática y discutidos a la luz del referencial teórico de Foucault. Resultados: el entendimiento del ocio para los ancianos estaba vinculado al bienestar psicosocial. Las actividades de ocio practicadas eran en mayoría artísticas, intelectuales, manuales, físicas y sociales, las cuales eran promovidas principalmente por la comunidad externa a la institución. Ancianos con déficit sensoriales, motores o cognitivos tuvieron dificultades y/o no pudieron participar activamente de las actividades. Conclusión: las actividades de ocio realizadas en la institución proporcionaban beneficios a los ancianos, pero estaban permeadas por relaciones de poder.

Descriptor: Anciano. Institución de larga permanencia para ancianos. Salud del anciano institucionalizado. Actividades de ocio. Enfermería geriátrica.

Introduction

Advances in medicine, the increasing life expectancy and falling fertility rates are making the elderly population more and more numerous. So much that, for the first time in history, the number of older people has surpassed that of children up to five years old worldwide⁽¹⁾. Associated with this, there has been an increasing demand for services that provide care to individuals of this age group, such as Long-Term Care Facilities for the Elderly (LTCF), for the collective housing of elderly people with or without family support, in order to ensure their freedom, dignity and citizenship of these⁽²⁾.

In Brazil, the elderly living in LTCF represent a small part of the population over 60 years old⁽³⁾. They are a source of concern though, due to their physical, social and psychological vulnerability⁽⁴⁻⁵⁾. As a result of the institutionalization, these individuals experience conflicting situations, ranging from the distance from living with family and friends, adaptation to the norms and routines the institution imposes, to the worsening state of health⁽⁶⁾.

In this sense, leisure emerges as care for the institutionalized elderly in order to provide pleasurable experiences, mainly associated with pleasure and personal well-being⁽⁷⁾. Leisure, besides being an effective stimulus of the elderly's adaptation to the institutionalization process, presents benefits related to the maintenance and/or improvement of the cognitive and functional capacity⁽⁷⁾, reduction of depression

rates⁽⁸⁾, strengthening of confidence and self-esteem, creation of a social support network⁽⁹⁾ and improvement of quality of life⁽¹⁰⁾.

In accordance with the above, the current legislation that defines the LTCF's operating rules determines that their various functions include the need to promote conditions for the practice of leisure, especially through physical, recreational and cultural activities. To fulfill these demands, it is also recommended that there be one professional with a higher education degree and a workload of 12 hours per week for every 40 elderly people⁽²⁾.

Despite the acknowledged importance of leisure for the elderly and legal recommendations for its practice in LTCFs, Brazilian research indicates that less than 40% of these institutions offer such activities⁽³⁾. It is emphasized here that the institutionalization model is surrounded by power relations, which are seen as a form of disciplinary control, with the aim of homogenizing individuals' behaviors and minimizing "disorders"⁽¹¹⁾. In the institutional context, roles characterized by dependence, physical space and limited hours for activities are observed, with individuals being subject to established standards and routines⁽¹¹⁾, which do not always provide appropriate conditions for the practice of leisure and its liberating and selfless characteristics⁽¹²⁾.

In view of this reality, the interface of leisure in the context of LTCF needs further investigation,

especially with regard to the development of these activities and the way the elderly understand this practice. The objectives of this study were to identify the leisure activities performed at a LTCF and to apprehend the elderly's perception of leisure.

Method

Descriptive study with a qualitative approach and based on the theoretical framework of Foucault's power relations⁽¹¹⁾. It was developed at a philanthropic LTCF in the Northwest of Paraná, which has 85 elderly residents and is maintained by community donations and resources stemming from the residents' pensions.

The physical structure of the LTCF consists of two floors. The independent elderly live on the upper floor, the elderly dependent for the basic activities of daily living on the ground floor. On the ground floor, where the dependent and independent elderly spend much of the day, there is a lounge equipped with tables, couches and a television. Around the LTCF, there is a reasonably large space where fruit trees, vegetables and greens are grown with the help of some elderly. In the same space, there is an Old-Age Gym (OAG). This is where the leisure activities with the elderly usually take place.

From Monday to Thursday, there is no fixed schedule of leisure activities. These are performed according to the availability of the professionals who work there. On Fridays, in the afternoon, these activities are mainly carried out by students linked to university extension projects, but without a predefined schedule of what will be offered. At weekends, the activities are offered by volunteers external to the institution and, therefore, also without previous programming. Thus, the activities do not occur in a systematized way, but according to the availability of the people who offer them.

The choice of the study site was due to the fact that it was the activity area of one of the researchers in an extension project. The elderly were selected by convenience and the interviews took place in the premises of the LTCF. Inclusion

criteria were: to have lived at the institution for at least three months and to be able to answer the research questions, after obtaining the minimum score on the cognitive assessment test Mini-Mental State Examination (MMSE). The cutoff point used was a score below 20 points for illiterate elderly; 25 points for the elderly with one to four years of study; 26.5 for the elderly with five to eight years of study; 28 points for the elderly with 9 to 11 years of study; and 29 points for the elderly with more than 11 years of study⁽¹³⁾. Older people with communicative disability were excluded, as this would make it impossible to apply the MMSE.

The data were collected at the LTCF, between January and April 2013, through individual and semistructured interviews. The interview script contained questions regarding the perception about the meaning of leisure and its importance, as well as the activities offered, the participation and difficulties they encountered in practice. A pilot test was performed prior to the start of data collection. The interviews were recorded and transcribed in full.

To determine the number of participants, the data saturation criterion was used, that is, when the information became repetitive and the data were considered sufficient to meet the study objectives, the collection was closed off⁽¹⁴⁾. At the end, the survey involved 15 elderly, being 13 men and two women.

The data were submitted to thematic content analysis, which basically consists of pre-analysis, material exploration, data processing with its systematic organization in thematic units, construction of inferences and interpretation of significant categories⁽¹⁵⁾.

This study was carried out in accordance with current ethical legislation. The project received approval from the Standing Committee on Ethics in Research Involving Human Beings (COPEP) at *Universidade Estadual de Maringá* (UEM) under Opinion 160.445. The elderly received all the information about the study and signed the Free and Informed Consent Form (TCLE). The reports were identified by the letter I, referring to the word "interviewed", between parentheses,

followed by Arabic numerals according to the order of the interviews.

Results

The subjects in this study were 15 elderly, being 13 men and two women. The ages ranged from 60 to 92 years, with a mean of 74.6 years and the institutionalization time was between four months and six years. As to education, nine reported incomplete elementary education, four did not study, one had completed elementary school and one had completed high school.

Two categories emerged from the analysis: Leisure as a human need and its benefits in the institutionalization experience of the elderly; Promotion of leisure at the LTCF by the external community and the need to adapt the practice.

Leisure as a human need and its benefits in the institutionalization experience of the elderly

The concept of leisure for the elderly was related to fun, pleasure, hobby, rest and distraction. Leisure was not only seen as the right to enjoy pleasure amidst daily responsibilities, but as an inherent need in the life of any human being.

What matters is that we disconnect from things, from responsibilities. It is the rest of the head [...] The reason for recreation and leisure is that everyone is entitled to rest, because it takes a weight off people's shoulders [...] (18).

The practice of leisure activities gave space to pleasant experiences in view of the institutionalization, allowed the elderly to give a new meaning to life and positively influenced the adaptation to the routines imposed by the LTCF.

It is important for distraction. It's good, because the routine here is very boring; it's just that, that's all. (110).

I like to play games for distraction because we spend a long time doing nothing. (17).

Leisure activities were taken as a way to minimize, temporarily, some situations experienced by the elderly, such as the loss of loved ones, the feeling of abandonment by the

family and the coexistence with people who are not family members.

I like to participate, because you distract, spend the time that you do not even see. Spend the afternoon romping on anything, not just playing cards. Just like today, which is Saturday, listening to the boys singing, I think it's a pleasure. So time passes, you forget a lot of bad things; she forgets that she is alone in the world, that her relatives have all passed away. Relatives that I say are father, mother and brothers. (111).

It also brought opportunities for the elderly to engage in the environment they lived in, interacting with each other to create bonds of fellowship and friendship.

Promotion of leisure in the LTCF by the external community and the need to adapt the practice

In relation to the leisure activities carried out at the ILPI, mainly activities promoted by people external to the institution were identified. The activities offered were grouped in the following categories: artistic, intellectual, manual, physical, social and touristic.

Concerning the artistic activities, it was observed that theater plays were performed inside the institution; for intellectual activities, the use of television was mentioned as a way to keep up to date; in relation to manual activities, crafts were mentioned, such as drawings and paintings; with regard to physical activities, the gymnastics group was mentioned, held weekly by a teacher external to the institution, as well as activities in the OAG located within the LTCF facilities; social activities include playing cards, dominoes, bingo, dances and celebrations organized on festive dates; nothing was mentioned with regard to touristic activities.

The personnel bring quoits, bowling, fishing rod, kermesse, and games of dominoes, checkers and cards. They do bingo and we get a gift. For us it is a joy [...] Here is the kiosk, the playground and the OAG. So who can just go there and do the activities. (18).

It was noted that the few leisure activities offered occurred only on specific days and times, according to the availability of collaborators external to the institution, who are responsible for providing these practices to the elderly.

Look, we do not have many activities here, no. Today, which is Saturday, for example, there are plenty of things. They come to sing, play, but not much during the week. Sometimes someone comes to play cards, paint, talk. I like that because you spend a few hours differently with the people there, without thinking much. (11).

Participation in the few leisure activities incorporated into the LTCF routine was restricted to the elderly who did not have physical, sensory or cognitive deficits.

I am unable to participate in the activities. I do not participate in the games, because I have difficulty walking. There are people who have a lot of difficulty to do the activities, because they do not walk or use a walker. So it's hard! People who do not see and do not speak also have difficulty. (16).

The presence of cognitive deficit interfered negatively in the practice of leisure, by affecting the social interaction with the people around.

I think that, if there were sensible people who could talk about past stories, but there are no such people here. There is no one here to talk to. (14).

90% of the people here have a screw loose. I like to talk about soccer, and I know a lot, but nobody understands much. (15).

Functional limitations also have a negative influence on participation in leisure activities and one way found by the LTCF, in order not to totally exclude the elderly who are not able to participate actively, was to take them to watch and enjoy the leisure activities practiced by others.

Most of us participate in the activities, but most just looking, listening, because doing is difficult, as many are unable to. To dance, for example, not everyone dances. When it is in the hall, they take all the wheelchairs to have a look. (13).

Added to these difficulties are frequent disagreements while participating in games, due to competitiveness, which sometimes diminished the elderly's adherence to this type of activity.

In games here, one wants to be cleverer than the other, makes fun and ends up ruining things. The comrades fought and turned away and that's why I avoid playing dominoes. (11).

Game generates a lot of fighting. I started to play with some guys there, but they made trouble and so I stopped. I've seen them fighting with others and I thought it would be better to stop participating. (19).

The lack of participation of the elderly in leisure activities, because they do not like the

activity offered, because they have deficits and because of disagreements with colleagues, entails a smaller number of participants in practices that require a greater number of people, so that they cannot take place.

The elderly, despite accepting the standards and routines imposed when it comes to leisure, emphasized the need for other options, such as soccer, swimming pool activities, pool table and more visits from people external to the institution. Those activities are not only required to fill vacant time, but also because the elderly recognized the positive repercussions of leisure in their lives.

Discussion

The elderly, before being institutionalized, built their life in society, in an independent environment and with their own dynamics. By living at an LTCF, their way of life is reinvented based on the requirements imposed by the institution, as they have limited physical space, rules, routines and prohibitions⁽¹⁶⁾. Thus, being in an LTCF means experiencing a context of domination, exercised by regulations established by the system⁽¹⁷⁾ and imposed by the professionals who work there, who dictate what should or should not be done⁽¹⁸⁾.

The institutional context does not allow a space for dialogue between the people who establish standards and the elderly, and this means that the users of the system do not have the autonomy to carry out only those activities that are to their liking⁽¹⁸⁾. An example is that the leisure activities the research participants cited were those offered by the LTCF and the external collaborators and not the activities they demanded, merely pointing out the need for others besides those already offered.

In line with what was observed in this study, a study conducted with 97 elderly people from seven different LTCFs showed that most of the leisure activities are restricted to the physical environment of the institution, which were mainly watching television, reading, participating in games and crafts. In addition, 39% of the

individuals reported that the institution did not offer leisure activities or that these were not fit for their health conditions, or, moreover, that they did not feel like doing them⁽¹²⁾.

It is considered that the low diversity of leisure activities and their non-adaptation to the needs of the elderly, besides being linked to the power relations exercised by the institutional system, are influenced by a possible inappropriate number of employees to meet the demands of the residents. This is probably due to the financial and human resource constraints faced by philanthropic institutions⁽¹⁷⁾ and causes a burden of tasks⁽⁷⁾ and prioritization of the biological needs of the elderly to the detriment of leisure⁽¹²⁾.

The LTCF professionals are responsible for meeting the biopsychosocial and spiritual needs of the elderly⁽¹⁴⁾, which include leisure. Due to the difficulties mentioned, however, we believe that the reality of the offer of leisure activities can be modified if the LTCF partners up with other entities. To give an example, with society, through a link with the economic system, as a way to obtain financial resources (through donations, bazaars, parties, raffles); with the educational system, through internships and extension projects maintained by universities, especially by health courses; with the health system, related to the link with program actions of the public primary health care service; and with the family system, referring to the family's integration in the LTCF's internal activities⁽¹⁹⁾.

The small number of women interviewed is explained by the fact that the institution has a larger number of men ($n = 62$) compared to women ($n = 23$), besides the fact that many of them did not reach the cut-off point established for the MMSE. The fact that only two women were interviewed leads us to consider that the activities identified, the benefits of their practice, the need for adaptation, and the desire to develop other activities that are not yet offered mainly permeate the experiences, experiences and preferences of male elderly.

It is important to consider here that women have a higher life expectancy than men, and this

is generally related to their increased health care and higher rates of mortality from external causes among young men. These factors contribute to the so-called feminization of old age, which refers to a larger number of elderly women in relation to men⁽²⁰⁾. Considering that the profile of the elderly population in the community does not reflect that of the institutionalized elderly, however, the feminization phenomenon of old age is not always observed in the LTCFs, with studies showing a higher prevalence of women^(4,21) and others of men^(10,22).

The principles governing the search of community-dwelling elderly men for social and leisure groups are in line with what the interviewees in this study mentioned, that is, search for pleasure and satisfaction, alternatives to have fun, get distracted or withdraw from the routine. The LTCF, therefore, is a space for social contact similar to those in the community. In addition, the bonds established there may entail more positive perceptions of health and quality of life⁽²³⁾.

Leisure activities that attract men with similar preferences, such as card games or dominoes, facilitate the establishment of social networks and identification among group members, which may minimize interaction difficulties among the elderly. It is worth mentioning that, although many do not participate effectively in the activities, observing and commenting on them enhances their union and, consequently, their socialization. Moments of tension occur during leisure practices, as portrayed in the statements. Those conflicts, according to a study carried out with elderly men participating in social groups, paradoxically strengthen relationships⁽²³⁾. Thus, we consider that, in a predominantly male LTCF, the aforementioned strategies may contribute to the development of pleasurable and significant activities.

This study is limited because only two women were interviewed, which occurred due to the difficulty in finding suitable persons according to the MMSE.

Conclusion

Based on the study, it can be concluded that the leisure activities offered at the LTCF were artistic, intellectual, manual, physical and social, without mentioning touristic activities. The elderly perceived leisure as activities that not only filled the vacant time but also had a positive impact on their lives. Among the few leisure options mentioned, most were provided by the community external to the institution and restricted to specific days of the week.

Leisure practices were not offered according to the elderly's preference, nor were they adapted to their physical, sensory and cognitive limitations. Even so, to those who participated, the activities provided psychosocial well-being, favored adaptation to the routines imposed by the institutionalization, the creation and maintenance of bonds of friendship and seemed to mitigate the negative aspects the elderly experienced, such as the feeling of abandonment by the family and the coexistence with people beyond their family.

This study contributes to the theoretical advancement of the theme leisure for institutionalized elderly and provides support to the setters of LTCF rules and routines and to professionals working in this context, so that they can understand the positive repercussions of leisure and can seek strategies to break, even if minimally, the power relations established by the institutional context. It is understood that, to this end, the elderly's opinions about the practices they like should be heard, in order to analyze whether they can be implemented in the LTCF and also to adapt them to elderly people with physical, sensory or cognitive deficits.

Collaborations:

1. conception, design, analysis and interpretation of data: Flávia Maria Derhun and Vivian Carla de Castro;

2. writing of the article and relevant critical review of the intellectual content: Flávia Maria Derhun, Vivian Carla de Castro, Pâmela Patrícia

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