



## RESEARCH ARTICLE

### LIFESTYLES OF THE ELDERLY IN THE CITY OF SAN FRANCISCO DE CAMPECHE

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#### ABSTRACT

The three major factors that affect health and that must be taken into account for a comprehensive action on lifestyles are: individual, social and environmental factors. These factors could be developed exhaustively, but in this approach to behavioral change in health we will stay in the analysis and development of those that are more affordable for the professional who works with older people, healthy behaviors such as: not smoking, not drinking in excess, Exercise are behaviors related to health that are learned, generated and developed within a given environment, which will give the keys to resources and limits, in a country, region or context produces certain lifestyles.

**Objective:** To identify the lifestyles of the Elderly.

**Method:** This research has a qualitative, descriptive approach, we studied 46 Seniors from different community or Gerontological Centers of the City of San Francisco de Campeche, the instrument that was applied is the questionnaire of Lifestyle made up of 12 sections that explores: Smoking, caffeine consumption, alcoholic beverages, physical exercise, hours of sleep per day and personal hygiene. The information obtained was analyzed using statistical methods. 67% (31) are women and 33% (15) are men, when asked the Elderly if they consumed caffeine such as coffee, tea or soft drink, 52% (24) Answered yes and 48% (22) answered that they did not consume it. 24% of the Elderly answered that if they used to drink alcohol frequently and 76% said that they did not usually drink these drinks, mostly women.

**Conclusions:** The use of caffeine as coffee, tea or soft drinks is an important factor. Ingestion of these products leads to obesity. In older people who drink alcoholic beverages, 24% said that they did not use these drugs And most are women. It is relevant the lifestyles of the Elderly and should recommend good personal hygiene, their hours of dreams at least eight hours.

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## INTRODUCTION

Lifestyles have three major factors that affect health and that must be taken into account for a comprehensive action on lifestyles are: individual factors, social factors and environmental factors. Each of these factors could be developed exhaustively, but in this approach to behavioral

change in health we will stay in the analysis and development of those that are more affordable for the professional that works with older people (Fernández et al., 2009). Individual Factors. They are all those aspects that have to do with the person intrinsically, from their behavioral forms, intellectual capacity, body variables, genetic factors, cognitive tendencies, among others. Social Factors. They include a multitude of variables, ranging from educational, economic, social support, unemployment, and cultural availability. Factors of the medium. These aspects are of a very broad range and can include from the climatic variables the variables generated by

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industrialization, such as pollution, overcrowding, health resources, a rural or urban environment, the existence of green spaces or Recreation (Fernández *et al.*, 2009).

### Lifestyles of Older Adults in Health Promotion

Aging is the final stage of life, individual aging has been present in all stages of social development, in modern society, in the early years of the new century, is witnessing a unique situation, more and more people surpass the chronological barriers that man has placed as a stage of old age and that converts population aging. Health promotion and disease prevention are all those actions, procedures and integral interventions, aimed at enabling the population, as individuals and as families, to improve their conditions for living and enjoying a healthy life and to stay healthy<sup>2</sup>. Lifestyles have been identified primarily with health in a biological plane but not health as a biopsychosocial spiritual well-being and component of quality of life. Lifestyles are determined by the presence of risk factors and / or protective factors for well-being, so they should be seen as a dynamic process that not only consists of individual actions or behavior, but also actions of Social nature (Fernández *et al.*, 2009).

### Healthy lifestyles in old age

In old age is presented longevity and acceptance of death, it is common to distinguish fear or resignation to face the fact of closeness to death. On the other hand, during it happen many events that generate changes both physical, psychological, cognitive and psychosocial, among others. These can be degenerative like the wearings of the bones, the aging of the skin, the discoloration of the hair, also its sensorial and psychomotor function. Likewise, as the cognitive functions, tend to deteriorate the most harmed most are memory and attention. Therefore, it is necessary to provide them with a pleasant and healthy life, so that they can enjoy a well-deserved old age (Arvizu *et al.*, 2011). It is necessary for the Elderly Person during the life to have the necessary care to face this stage with optimal health, and thus have less impact on the secondary aging. At this age, supervision and care in the activities of daily living must be adapted to every need that the person demands. Since the Elderly your sleep is very reduced, but constant during the day should be taken into consideration and distinguish between dream periods and insomnia, as it may be confused, but reflected in your mood and pace of life. Physical activity is an essential part that must be generated during old age, since a lot of studies show that aerobic and resistance exercises give great benefits to health, preventing diseases by giving density to their muscles and bones, reducing obesity, Hypertension, diabetes, among others providing a necessary well-being to reduce the impact or predisposition of diseases facilitates their autonomy. As well as reducing frequent back pains, joint pains (Arvizu *et al.*, 2011).

### Healthy life style

Lifestyle is a set of activities that a person, people, social group and family does daily or with a certain frequency; Everything depends on their knowledge, needs, economic possibilities, among other aspects. Today certain degenerative diseases have increased due to poor lifestyles; Among the main chronic degenerative diseases that stand out in Mexico are: Diabetes Mellitus, heart disease, hypertension, elevation in blood cholesterol levels and triglycerides (dyslipidemia),

among others. It is worth mentioning that 4 to 5 million people are diagnosed with Diabetes Mellitus and according to the National Health Survey (ENSA) is the leading cause of death in our country. These are linked to unhealthy lifestyles (consumption of alcohol, tobacco, poor diet, among others) (<http://www.omcsalud.com/articulos/un-estilo-de-vida-saludable>). When maintaining a HEALTHY lifestyle, activities that do not cause negative effects on health are involved, among which are: Correct feeding, practicing physical activity and proper management of stress. In favor of a correct diet !: Adopting a new style of eating means lowering the calorie content, and eating well means enjoying a good taste as well as good nutrition. This can be achieved by taking into account the following characteristics to ensure a healthy diet and therefore health:

**Complete:** includes food from each of the food groups: vegetables and fruits, cereals, animal foods and legumes; To ensure the ingestion of all necessary nutrients.

**Balanced:** maintains adequate proportions between proteins, carbohydrates and lipids (fats). Knowing that all nutrients are just as important for maintaining health.

**Sufficient:** seeks to meet the nutritional needs that each person requires and obtain a healthy weight. In the case of children, growth and development are favored at the appropriate speed.

**Varied:** it integrates different foods of each group in the meals.

Inocua means that the normal consumption of food does not imply health risks, because they are free from harmful micro-organisms, toxins and contaminants.

**Adequate:** according to the tastes and culture of the user, according to their economic resources (<http://www.omcsalud.com/articulos/un-estilo-de-vida-saludable>). Physical activity (A.F.) is defined as any bodily movement produced by the skeletal muscles that result in energy expenditure. Sixty percent of the world's population is sedentary. In Mexico alone, 7% of the population over 15 years of age does sport, in which only 35% do the recommended time (30 to 45 minutes). Sedentary lifestyle has been shown to be a risk factor for the development of chronic diseases, so leading a physically active life produces numerous health benefits.

Physical exercise is a category of FA, specific, free and voluntary, with planned, structured and repetitive body movements performed to improve or maintain one or more motor qualities, with the aim of producing a better functioning of the organism, for example: jumping, Swimming, running, throwing, among others. It will depend on the characteristics and conditions of each person. However, when planning an exercise program you should consider: 5 minutes of warm-up, 30 minutes of aerobic activity, 5 to 10 minutes of stretching and cooling. Therefore it is suggested to perform daily exercise for at least 45 minutes of aerobic type. Aerobic exercises are all those that increase your heart rate and breathing, you get a "shaking" and an increase in temperature therefore sweating. If the exercise begins to be part of life from childhood, the person will be strengthened to become an active adult; With this you will get throughout your life an optimal state of health and a healthy future. Many times it is thought that physical activity requires a lot of time, money and effort, however you can start exercising without having to pay for it, just take a walk at a

faster pace than normal around a park Or the colony, to dance moved music, to jump the rope, among others (<http://www.omcsalud.com/articulos/un-estilo-de-vida-saludable>).

### Healthy Lifestyles to Improve Quality Life in the Elderly

The lifestyles are part of each person, if we want to take care and watch over our health, there is nothing better than adopting the best lifestyles, this includes a good balanced diet loaded with lots of fruit and vegetables. Physical activity and sports are basic elements of healthy lifestyles. This impression has recently been reinforced by new scientific evidence linking these activities to a broad set of physical and mental health benefits. Inadequate nutrition characterized by excessive intake of foods such as fats and sugars, altered sleep patterns, alcohol abuse, smoking and illegal drugs, generate an increased likelihood of developing various heart diseases, high blood pressure, elevated blood cholesterol levels, Triglycerides, overweight, joint pain and muscle (<http://estilosdevidaparacuidartusalud.weebly.com>).

### Healthy Habits and Lifestyles

It describes how body weight, physical activity, good personal hygiene and a clean environment influence our health. Explore what a healthy body weight is and how to achieve it by maintaining energy balance. It analyzes the importance of having a good physical condition and of carrying out physical activity in a regular way, to maintain the proper corporal weight and to have a good health. It explains how protecting us from disease-causing agents is important for maintaining good health and well-being (<http://www.fao.org/docrep/019/i3261s/i3261s10.pdf>). People have different attitudes and perceptions about size or body shape. Some cultures interpret excess weight as a symbol of beauty, health and wealth, while others see extreme thinness as beautiful and consider it the "ideal" body; So in some cultures thinness is considered a sign of illness or weakness. These extreme perceptions can lead to poor diet and poor eating habits because they are based on factors other than health and nutrition. In fact, good health, for most people, is related to average body size, because both fat and thinness pose a health risk. Desirable body weight is determined by age, sex and height. For example, men tend to have a larger bone structure and greater muscle mass than women and so, with similar height, men generally weigh more than women. In general, it is best to achieve and maintain good body weight and avoid the extremes of increasing or losing too much weight (<http://www.fao.org/docrep/019/i3261s/i3261s10.pdf>). Foods are stored in the body as fat that can be used as energy during periods when food is not available. A calorie is defined as the unit of energy provided by the food. This body's ability to store calories is very important for survival in times of famine and low availability of food, as can occur during periods between crops, emergencies and during illness. However, this ability to store fat puts people at risk of developing overweight and obesity if food intake is not adjusted to energy needs. The calories consumed need to maintain a balance with the calories used in the normal internal functions of the body, daily activities and physical activity. Spending more energy than that consumed in food for several months (negative energy balance) can lead to significant weight loss, which can lead to malnutrition. This occurs when people do not have sufficient food availability or when they intentionally reduce their intake of food over an extended

period of time for the purpose of losing weight. Consuming for a period of time more energy than the one used (positive energy balance) can lead to significant weight gain (<http://www.fao.org/docrep/019/i3261s/i3261s10.pdf>).

### Health and Lifestyle

**Smoking.** There are four million unnecessary deaths per year attributed to tobacco consumption in the world, which currently represent 11,000 deaths each day. By 2020, an estimated 10 million annual deaths from tobacco use are estimated, if the same pattern of exposure is maintained. The health effects attributed to tobacco smoke have been widely described in the scientific literature. It has recently been estimated that the history of smoking more than 25 cigarettes daily increases twice the risk of diabetes mellitus. Smoking is associated with the leading causes of death, those caused by diseases of the circulatory system and cancer.

**Alcohol.** According to national health surveys, more than 50% of the Spanish population claims to be a habitual consumer of alcohol. The percentages among the majors are lower and 70% never usually consume beer. Only a third consume wine almost every day and women hardly have habits of alcohol consumption, as in tobacco, the trend of alcohol consumption is decreasing, as two-thirds consume less than before. The decrease in the protection of alcohol and tobacco consumption among the elderly may be due to a logical response to situations of fragility or chronic illness, also a decrease in household income and not only to the follow-up of healthy guidelines (FUNIBER (Fundación Universitaria Iberoamericana)).

**Overweight.** With age, the proportion of people with a high body mass index increases, due to a relaxation of eating habits; Increases among people aged 50-74 years and recedes among the very elderly, aged 75 and over. Obesity is related to some causes of death such as cardiovascular problems, some type of cancer, diabetes and atherosclerosis. Being overweight has an undoubted impact on everyday functions and activities by reducing mobility such as walking, moving around the house, getting up, getting dressed, and so on.

**Physical activity.** The population generally performs a soft physical activity, of a routine nature and for the satisfaction of basic needs, such as buying or going for a walk. There has been a slight trend in recent years towards greater involvement in regular physical activities during the leisure period. Males are prone to regular physical exercise than females, the youngest in relation to the elderly and also those who have reached the highest educational level. The practice of exercise is higher among the inhabitants of regions of higher economic level due to a higher level of education and the offers offered by the urban environment to do physical activities (FUNIBER (Fundación Universitaria Iberoamericana)).

## MATERIALS AND METHODS

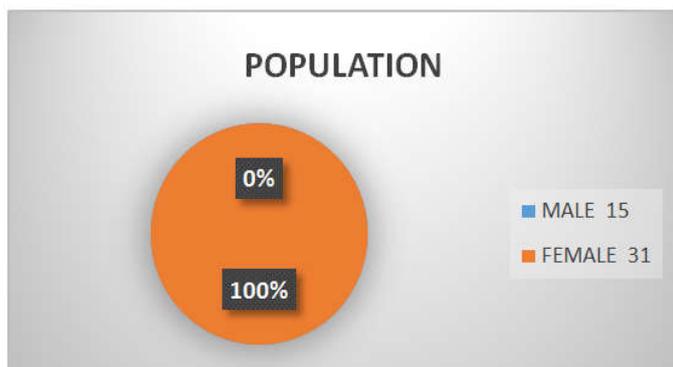
This research has a qualitative approach, descriptive scope that seeks to specify the properties, characteristics and profiles of individuals, groups, communities, processes, objects or any other phenomenon that is submitted to an analysis<sup>8</sup>. Of the population, as the group of people we studied<sup>9</sup>, this sample consisted of 46 Elderly people from different community or Gerontological Centers of the City of San Francisco de

Campeche, with a qualitative, descriptive and non-experimental approach. The Lifestyle questionnaire was applied, consisting of 12 sections that explore smoking, caffeine consumption, alcoholic beverages, physical exercise, hours of sleep per day and personal hygiene.10 At the time of applying the questionnaire, it was explained to the Person greater the purpose and relevance of the questionnaire, it is important that he respond correctly, he was explained that the data he provides will be confidential, he was specified the number of questions and the time of the application, and that the relatives should not remain. The information obtained was analyzed using statistical methods such as the Excell program.

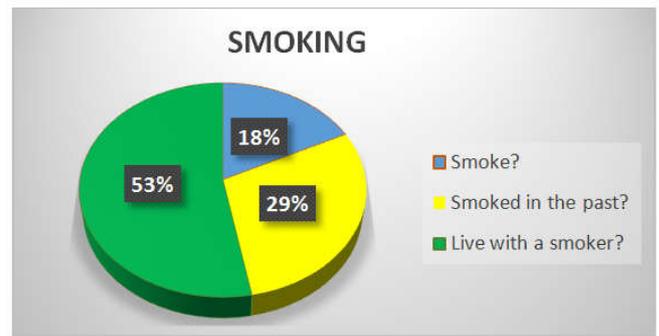
**RESULTS**

Once the data on the lifestyles of the Elderly are analyzed, the results will be described below. The population of people surveyed according to gender can be observed 67% (31) are women and 33% (15) are men, as shown in Figure 1. In graph 2 we can find where the elderly respondents are asked if they smoke, 18% (3) said yes, and the rest of the respondents answered no, 29% (5) commented in the past Had smoked, and 53% (9) answered frequently with a smoker. In Graph 3 we can find that the Elderly were asked if they consumed caffeine such as coffee, tea or soft drink, 52% (24) answered yes and 48% (22) answered that they did not consume it. In Graph 4, 24% of the Elderly respondents answered that if they used to drink alcohol frequently and 76% said that they did not drink alcohol in the past and most of them are women. When asked if they used to practice physical exercise frequently 37% of the Elderly surveyed said yes and they practice walking, gymnastics, yoga among others and 63% answered that they did not used to exercise in the past, These responses can be seen in Figure 5. In Figure 6 when referring to the hours of sleep a day in the last year, a Senior Person answered 5 hours for having insomnia problems, another said that 13 hours meant that he sleeps nap and 16 Seniors said that 8 hours What they sleep the normal thing.

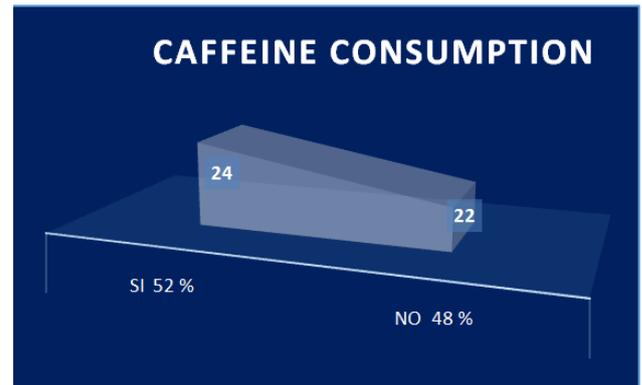
In Table 1, the Elderly Lifestyle Survey is asked about personal hygiene that is important especially when asked how often they bathe a week, 23 of them bathe 2 to 3 times, 14 said that from 8 to 14 times, 7 of them from 15 to 21 times and 2 from 27 to 28 times a week. When asked to cut their fingernails and toenails a month, 34 of these people say 1 to 2 times, 10 of them 3 to 4 times and 2 older people 8 to 9 times a month. When answering how often they brush their teeth a day, 3 of them answered that once, 22 answered that 2 times a day, 21 Elderly 3 times a day and 2 answered that 4 times.



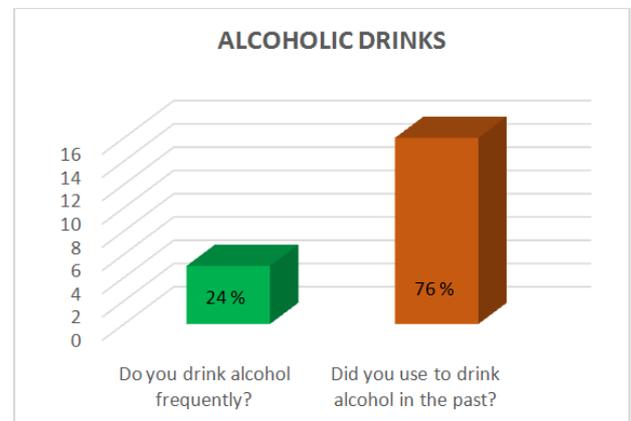
Graph 1. Total population of the people surveyed



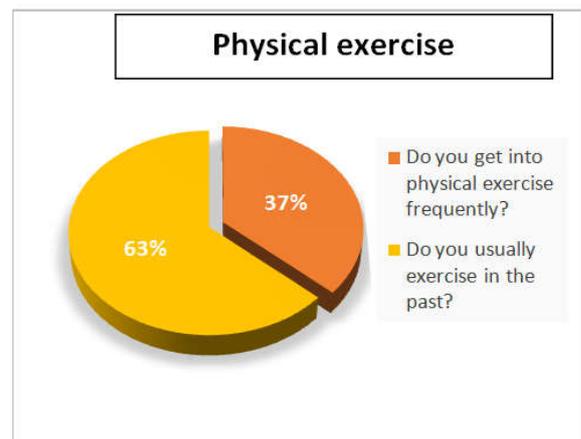
Graph 2. Smoking in the INAPAM Club and Gerontological Module



Graph 3. Caffeine Consumption in the Elderly



Graph 4. Consumption of Alcoholic Beverages in the Elderly



Graph 5. Frequency of Physical Exercise in the Elderly



Graph 6. Hours of sleep per day

**Conclusion**

After analyzing the results we can see in the population surveyed that the female gender predominates more than the male gender, with a 67 of the female gender and 33% of the male gender. A relevant fact is the use of caffeine as coffee, tea or soft drinks, the intake of these products causes obesity, in the elderly who ingest alcoholic beverages 24% said that if and 76% answered that they do not usually ingest these and the Most are women. It is relevant the lifestyles of the Elderly and should recommend good personal hygiene, their hours of dreams at least eight hours.

**REFERENCES**

Arronte Rosales, A; Beltán Castillo, N; Mendoza Núñez, V. Gerontología Comunitaria

Arvizu, Salgado, M; Vega Argote, M. Gerontología. Un Enfoque Interdisciplinario. Universidad Autónoma del Estado de Hidalgo. Pachuca, Hidalgo 2011.

Dr. Supo José. 2015. Como empezar una tesis. Primera edición. Editorial Bioestadístico EIRL. Perú

Fernández B. R. 2009. Gerontología Social Ed. Pirámide; Madrid, España. Pag.475 – 476

Fernández, Larrea, N. y Cols. Estilos de Vida, Bienestar subjetivo y salud de los ancianos. www.bvs.sld.cu/revistas/mgi/voll6-1-00/mgi02100.htm-32k, 2000, revisado 20.08-2008.

FUNIBER (Fundación Universitaria Iberoamericana)

Hernández, S; Fernández, C; Baptista, P. 2010. Metodología de la Investigación, Quinta edición. Editorial Mc Graw-Hill: México, D.F.

<http://estilosdevidaparacuidartusalud.weebly.com/>

<http://www.fao.org/docrep/019/i3261s/i3261s10.pdf>

<http://www.omcsalud.com/articulos/un-estilo-de-vida-saludable>

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