

Active and productive ageing of older adults, a look at its influencing factors

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ABSTRACT

Active and productive aging is a continuous process of physical, biological, and social development of the human being, which is formed every day in order to achieve the well-being of the individual. The objective of this research is to identify the factors that influence active and productive aging of older adults, particularly in the communities of El Placer and Yamana of Lauro Guerrero parish, Paltas canton, Loja province. This was a cross-sectional, descriptive, mixed methods field study, considering the population registered in the Type A Lauro Guerrero Health Center. The participants in this study were older adults aged 65 years and over; the sample was based on inclusion criteria of 45 people. Analyses were performed by linear regression based on the Integral Geriatric Scale of the Department of Public Health and semi-structured interviews processed using the EViews 9 program. The results were as follows: 43% were women, 65% had no high school education and 81% lived with relatives with whom they had a good relationship. In terms of physical health 70% of the participants were able to perform basic daily activities independently, in terms of social well-being, 72% showed lower social risks due to active participation in society and family. 78% of the older adults in this study used the cell phone as a means of communication, 85% used television and 10% used the radio, then it is concluded that there is a correlation between physical, mental and social well-being and the use of social networks.

Keywords: Active aging, Influential factors, Older adult, Media.

1 INTRODUCTION

Aging is a period in which people respond to productive, social, cultural, economic, biological, temporal, psychological, and anthropological processes, so it is considered a relatively new phenomenon to study. Ageing can be analysed from different perspectives, which allow us to look at it from the specific social and historical contexts that determine the status and life scenarios of older adults.

Urban ageing is one of the main demographic challenges that attracts the attention of governments, academia, and society as a whole, given that it is a process that is configured in the



economic, social and relational spheres of the individual, since it involves multiple spaces and elements that coexist with social dynamics.

Currently, old age is a phase of the life cycle that attracts the attention of countries, especially in Latin America, because the process is urgent and procedures must adapt to changes. Insurance, the provision of services, ensuring dignified, active and productive ageing and the well-being of older populations are just some of the issues that need to be reconfigured as the population ages. The concept of old age is characterized by a gradual decline in physical strength that leads to a noticeable and progressive decline in psychological activities, which is based on the process of organic aging, as pointed out by De Carvalho and Andrade (2000) cited by . (Maya Díaz, 2018)

This is because aging can be studied in different disciplines. From a biological perspective, changes in aspects of the chain cycle and functions of the organism are considered, while from a psychological perspective, changes in mood and personality are also considered. However, one of the most important aspects to cover is the social sphere, since it includes, in addition to relationships with family and society, the social participation of the elderly, their socioeconomic status and population growth. (Satorres Pons, 2013) (Satorres Pons, 2013)

"In this way, old age has a comprehensive or multidimensional vision that is also related to well-being." "Aging results from the integration of various molecular and cellular damage over time." (Mena, 2013) (World Health Organization, 2022)

The Organisation for Economic Co-operation and Development (OECD) warns that 40% of the population will be over 65 by 2050 in Japan, Portugal, Spain, Greece and South Korea, while in China the number of people over 65 will triple. The number of people aged 60 and over will increase from 962 million in 2017 to 2.1 billion in 2050 and 3.1 billion in 2100. (Padilla Góngora et al., 2017)

Thus, she pointed out that, although more males than females are born, there is a certain feminization in the aging population. This is the result of higher mortality in men. Advances in medicine and nutrition have increased longevity around the world, largely due to a decline in mortality. Pérez Díaz (1999)

Active and productive ageing is an essential resource for harnessing the potential of quality of life. It is a life-spanning process that includes the inherent capacities that manifest themselves in a person's physiological and psychological changes and in the social environment of older people. In addition, the development and maintenance of functional capacities in old age and continued participation in the family and society can systematically create a sense of belonging and social well-being (World Health Organization, 2023)

Active and productive ageing optimises the opportunity to maintain and improve physical and mental health, has a multidimensional perspective and has more to do with social well-being than the absence of disease.



A good old age is associated with life satisfaction and physical activity and productivity over the years. In addition, it is related to cognitive development that develops through experience and communication, the ability to interact with society, and the performance of daily activities at home. (Petretto et al., 2016)

In terms of quality of life, it means being cared for and protected with respect, being supported by a family, achieving well-being, respecting one's position as a human being, because it is a right, it is up to them to develop and carry out their daily activities in the environment, resulting in a satisfactory ageing assured. (Huenchuán , 2018)

As they age, today's older adults feel less alone and need new relationships supported by social media and their standing by:

- ✓ Contributing to the community you belong to makes your life positive, productive, and well.
- \checkmark It increases intellectual activity, and can even help prevent dementia in old age.
- ✓ Strengthening social networks during longevity leads to happiness, mutual support, and protection from addiction, which can include family, friendship, and social support for physical and mental health through emotional support, which can positively influence mental health and quality of life. (Alejandra Clemente, 2003)

Positive ageing is understood as a way to maintain healthy habits in old age and thereby improve quality of life. It is an opportunistic process that benefits the physical, psychological, and social well-being of older people and is considered a predictor of quality of life.

It connects socio-emotionally through extensive social networks and community mediation in leisure, cultural and recreational activities, which becomes an additional commitment to increase the participation of older adults in the home and community. (Carmona Valdés & Ribeiro Ferreira, 2010)

When considering the experience of working in urban and rural areas with long-lived residents, the interest arose in conducting this study, which aims to identify factors related to the productive active aging of the elderly, especially the 2021-2022 social networks in the communities of El Placer and Yámana during this period.

Older people, generally aged 65 and over, are considered a sensitive and vulnerable group in need of public policies, social support and active and productive participation in society. This ageing will depend on the socio-demographic characteristics, physical, psychological and social well-being of the elderly, in addition, it also depends on family relationships, friendships, the appropriate use of information and communication technologies and family support.



2 PROBLEMATIC CONSIDERATIONS

According to the World Health Organization by 2050, 80% of older people will live in lowand middle-income countries. "In 2019, 37% of older people lived in East and Southeast Asia, 26% in Europe and North America, and 8% in Latin America and the Caribbean." In addition, in terms of life expectancy, women who make up 54% of the world's population aged 60 and over and 61% of the population aged 80 and over live longer than men. (World Health Organization, 2022) (United Nations, 2019) (Yunus, 2020)

According to data from the State Office of Statistics and Censuses, marked changes are observed in the population pyramid, specifically 46.1% of men are elderly and 53.9% of women. This is associated with an increase in life expectancy and a decrease in the birth rate. (Economic Commission for Latin America and the Caribbean, 2004)

Active and productive ageing is based on the life course and functional aspects, i.e. the functional capacities that maintain well-being in old age and where functional capacity is the ability to perform tasks and function in daily life and is determined by factors specific to the individual, such as genetic variation, lifestyle, health, and environmental factors.

In addition, older adults are adapting to physical, mental, and social changes, considering the most representative physiological changes are a reduced ability to change heart rate and blood pressure in stressful situations. It also relates to wellness, which includes topics such as happiness, life satisfaction, and total satisfaction. (Mexican Institute of Social Security, 2011)

Older adults seek a higher functional standard of living with the ability to perform basic activities of daily living and be independent, while functional changes in older adults manifest as reduced attention, working memory, and movement disorders, but staying active and sitting less than 8 hours a day reduces the risk of age-related diseases and accessible places are needed to pass the time, as well as appropriate health programs and community interventions. (Osorio Blanco, 2017)

Public policy must promote programs that address basic needs, define a long-term vision that goes beyond the government's mandate, and guide the process of change based on relevant social realities so that the aging process is dignified and autonomous. and social participation. (Organization of American States, 2015)

Active and productive aging involves regular physical activity, improving the quality of life as you move throughout your life. Exercise provides older adults with optimal physical, mental, and social health during positive aging. (World Health Organization, 2002) (National Institute On Aging, 2023)

Active ageing is an essential resource to harness the potential of quality of life and generate a positive impact on society through paid and unpaid activities, creating better personal well-being by



engaging in enjoyable, appropriate and safe exercise at each age to maintain independence by being associated with a decrease in age-related diseases. (Ramos Monteagudo et al., 2016)

The elderly population is multicultural and has different values where faith is one of the spiritual aspects that is realized through religion. Believing in God as a protective factor helps maintain family unity, maintain friendships, and prevent loneliness. Older people become religious because they believe they are nearing the end of their lives, which can lead to better mental well-being, as well as interaction with friends, social support, and participation in religious activities can bring high self-esteem and optimistic meaning to life. (Reyes Ortiz, 1998)

The personal development of older people is a means of growth and training for life, as well as the enjoyment of independence, which ensures better living conditions and personal well-being. (Sandoval Mora, 2018)

Lifelong learners build skills and knowledge independently in hands-on activities and add years of active life to the aging process. That is why any training activity carried out at any stage of a person's life cycle for personal, social and/or professional reasons allows them to improve their knowledge, skills, abilities and/or theoretical or practical qualifications. (González et al., 2009)

In Ecuador 60% of people live in poverty and extreme poverty, making them vulnerable to degenerative diseases, malnutrition, mental health problems and violence. Among older adults, 23% suffer from some disability and 18% suffer from depression, especially among women. (Scoops, 2023) (Ministry of Public Health of Ecuador, 2018)

In terms of education, 33.1 per cent of women are illiterate, 57 per cent of older adults have primary education and 27 per cent have no formal education, with a higher proportion among indigenous and Afro-descendants. In particular, it points out that: (Ministry of Public Health of Ecuador, 2018) Maldonado Ruiz, 2018)

According to data from the 2010 Population and Housing Census, there were more than 940,000 people over 65 years of age in Ecuador, representing 6.5% of the national population, and by 2017 it was estimated that there would be 1,180,944, or 7% of the population (p. 2).

3 JUSTIFICATION

National and global demographic changes have led to an increase in the number of older people, most of whom lead independent lives and continue to work, so they remain active, but do not contribute enough to society and the family, thus their social rights and family contribution. they are limited. This will have a social impact on adults to achieve active and healthy ageing until the end of life, because older people are part of the family and the family is their support.



Positive and healthy ageing means participation in society according to one's own needs, desires and abilities, it means the opportunity to make the most of good physical health, emotional well-being and a good social environment.

Older people are a member of the community and the more experienced, who also need social support, to promote active aging and prevent Alzheimer's disease. It is a commitment of the health professionals, social actors, health committees and medical students of the Lauro Guerrero parish, because the results obtained recognize the factors that lead to active aging, especially related to social networks, so that people in this age group can receive dignified and priority treatment and social participation.

Currently there are no studies on similar topics at the national level, relevant factors must be evaluated, especially social networks, as they influence positive aging. How living with older adults with whom they have been connected since childhood and existing relationships with their peers, close family, and interactions with them influence positive and productive aging.

4 ACTIVE AGEING

Active ageing is based on health, commitment, safety and lifelong learning, and it is also related to the following factors: restrictions, companions and lifestyle of older people. Proactive behavior in older adults occurs due to motivation, autonomy, or the pursuit of personal satisfaction. (Caring , 2014)

Aging is a continuous process of human development, it is a physical, biological and social development that is determined every day and is carried out according to the abilities of each person, regardless of age, proactive activity is associated with enthusiasm and energy, and work allows them to feel independent and receive social support, mainly from the family. (González Bernal & De la Fuente Anuncibay, 2014)

Productive aging is any activity performed by older adults that produces goods or services (whether paid or unpaid) or develops the capacity to produce those goods or services. The biological changes of aging are the result of molecular and cellular damage during life. A gradual decline in physical and mental abilities can worsen the disease and eventually lead to death.

Long-lived older people develop diseases when exposed to inappropriate external behaviors and environmental factors. Aging occurs throughout life and in different ways, one of them being related to the maintenance of physical vitality, enjoyment of life and mental capacity in old age. Another form of aging is loss of motivation and isolation due to aging that is affected by the subjective barriers of each individual, family, and society. (Quintero Osorio, 2011) (Mejía, 2021)

Active ageing is based on everyday activities in which individuals and society engage in activities that change their behaviour and the environment in which they live. Older women are more



involved in their social environment, which gives them autonomy that they don't have in other parts of their lives. On the other hand, men who are detached from working life and live longer have greater motivation for active aging. (Carmona Valdés & Ribeiro Ferreira, 2010)

The term active refers to the long-term social, economic, cultural, spiritual, and civic participation of older people individually and collectively, in addition, adaptive approaches are fundamental processes of selection, optimization, and compensation that enable the achievement of life goals. (Sevilla Caro, 2015)

Healthy ageing is seen as a complacency in life associated with happiness and depends on lifestyle and health promotion through integrated health care. This better aging is supported by various factors that affect personality development.

Healthy aging is the process of developing and maintaining functional capacities for well-being in old age given that there are gender differences in women, which are mainly reflected in the age of first pregnancy, number of children and older people are diagnosed with more diseases, but this is not a factor that influences healthy aging. (Pan American Health Organization, 2021)

4.1 WELL-BEING OF OLDER ADULTS

A multidimensional approach to well-being: integrating needs from different areas of daily life and the personal, emotional, spiritual and physical domains. The well-being of older adults is very important during this stage of life. It results from the synthesis of past, present, and future value experiences to promote a sense of contentment and control despite comorbidity and is associated with vitality. (Aponte Daza, 2015)

Satisfactory subjective well-being is related to cognitive dimensions in older adults. This is determined by perceived health, social support, the presence of depressive symptoms and gender, family cohabitation, social relationships and life achievements results in learning that adapts to perceptual changes with age facilitated by emotional relationships. (Mella et al., 2004)

Subjective well-being spans the whole of life and determines the satisfaction of basic needs, while social support predicts better health. The different life cycles require a process of adaptation and there is no defect in cognitive abilities, this allows you to continue carrying out daily activities without losing autonomy, allowing you to live a normal life and an existence that is a process of active aging.

Aging produces adaptations due to the deterioration of physiological and biological functions, but it does not sufficiently change subjective well-being. A positive attitude towards ageing can improve physical and mental health, so psychosocial engagement leads to independence and long-term social integration.

Older adults who have negative attitudes about aging should be encouraged to change their behavior to improve their quality of life, and community cooperation promotes health. The daily



activities performed and social performance are determinants of age that contribute to the environment aimed at improving the productivity of older adults, this being the set of collective benefits at the social and economic level that are achieved through individual behaviors that influence the active and successful life of older adults. The role of maintaining social and productive participation in order to achieve a satisfactory quality of life and autonomy. (Huenchuán , 2018) (Mejía, 2021)

Work and leisure activities improve the quality of life of older adults, so it is associated with an optimal incidence of the disease and a reduction in the consumption of medications that affect health status. (Quintero Osorio, 2011)

Recreational activities include: personal, cultural, and social activities performed during leisure time for enjoyment and health benefit. Rest is one of the basic lessons of everyday life. This activity is associated with a sense of satisfaction and personal accomplishment, relaxation, doing what everyone wants to do, and discovering something of value. (Conde Sala, 2009)

The stages of the life cycle with a certain level of education influence better ageing through interaction with better conditions throughout life. Continuing formal education or literacy among older adults is a factor that promotes participation, promoting health and safety, leading to subjective well-being. (González Bernal and De la Fuente Anuncibay, 2014)

Participation in continuing education programmes supports and ensures autonomy and selfmanagement in old age and is an important part of active ageing. In addition, it improves cognition, mood, physiology, and function, thus restoring quality of life. Literacy can help develop more equitable, inclusive, and pragmatic policies to achieve the goals of independent aging by promoting health and commodities, as well as more accessible programs and better future health for older adults. (Mexican Institute of Social Security, 2011)

The education of the elderly is a continuous process aimed at achieving a satisfactory development of the personality and the culmination of the life project, which leads to a better quality of life, a dignified old age and an active integration into the family and society without dependency.

Lifelong learning leisure activities have positive effects on the mental health and well-being of older adults. High self-esteem is formed through independent participation in society. In addition, the acquisition of a healthy lifestyle and good cognitive function can allow adaptation to environmental demands. There are a variety of geriatric education interventions that have been evaluated for behavioral changes and risky activities. (Ramos Monteagudo et al., 2016)

Education includes learning about a healthy and balanced diet, household hygiene, recreational activities, and soothing recreation for healthy aging. Live a healthy life and avoid chronic non-communicable diseases. Educators are facilitators or guides of learning for each individual to perform their own actions and create continuous self-learning. Older people who learn to take care of



themselves and make changes to their lifestyle and health habits will be able to reduce morbidity and mortality and achieve active ageing. (Ramos Monteagudo et al., 2016)

5 SOCIAL MEDIA AND THE ELDERLY

Older adults need communication networks to participate in the communities in which they live, and the lack of social relationships is a risk factor for cognitive decline, coronary heart disease, and cerebrovascular disease since the internet has been associated with the presence of friends, which can provide suggestive well-being and promote health in older adults. Therefore, in order to achieve active ageing, greater communication with friends and neighbours through the Internet must be encouraged, and participation in projects at a social level is related to good communication and contributes to a better development of daily activities. (Sevilla Caro, 2015)

A support network for older adults is a factor in maintaining positive aging. In addition, it is clear that there is a higher level of communication between people who come to the market to make purchases.

The community should be age-friendly, with enough space and social connections as older adults participate in community planning processes to lead dignified and happy lives. (Mejía, 2021)

Introducing technology to older adults requires ongoing networking. To be properly complied with, it must be appropriate to the personal, family and social context, and indicate how it should be used. Older people use social media to create social support, friendships, and community connections – social networks of friendship in the community that facilitate participation in social activities and meals with peers where the family also provides social support in everyday life, which can lead to psychological well-being and avoid social isolation and loneliness. (Sevilla Caro, 2015)

Social support refers to the set of material, emotional, informative or accompanying contributions that a person receives or perceives from the different members that make up their social network.

6 PHYSICAL ACTIVITY

Daily activities started at an early age cannot promote active ageing. Physical activity improves function and quality of life and reduces addiction and frailty syndromes. This habit is associated with a lower incidence of disease and lower use of medications, so older adults perceive themselves as healthier physically and mentally (46). Consistent exercise and training can provide a satisfying body image. The perception of successful aging differs from that of those with sedentary lifestyles. (National Institute On Aging, 2023)



Older adults who participate in a physical activity program may shift their functional limitations to a pre-insanity state that changes as mobility and bodily function improve. Increased physical activity in older adults acts as a neuroprotective mechanism and provides protection against dementia.

Physical activity is any bodily movement produced by skeletal muscles that results in the consumption of energy that must be recovered. Adults over the age of 65 need weekly aerobic, muscle-strengthening, and balance activities to maintain strength. Regular physical activity can help you live independently, improve your quality of life, and prevent or manage chronic diseases. Regular physical activity can prevent aging and provide a better physiological state. Adherence to physical activity in older adults must have a regular intensity and a pleasurable emotional response to be sustained. (National Institute On Aging, 2023)

Active travel by bus, bike or walking increases physical activity among inactive people, which is associated with a reduction in obesity and active aging. Lower-intensity activity affects blood pressure and the incidence of hypertension. (National Institute On Aging, 2023)

7 PHILOSOPHICAL FOUNDATIONS

This research takes a philosophical approach based on the theories of the sociology of aging and old age. Theories of aging have been nourished by foreign sciences such as sociology, biology and psychology from which they have their theoretical approaches, in addition, the use of each theory in the formulation of public policies and sociological perspective that questions aging and old age is included. The sociological theories of the aging of the individual and society, from various epistemic reflections, occur at two fundamental levels: the micro-social, focused on the individual, and the personal interactions, the macrosocial.

7.1 LEGAL BASIS

According to the Constitution: (National Assembly, 2008)

Article 3.- The following are the primary duties of the State: To guarantee, without any discrimination, the effect of the enjoyment of the rights established in the Constitution and in international instruments, in particular education, health, food, social security and water for its inhabitants.

Article 32.- Health is a right guaranteed by the State, the realization of which is linked to the exercise of other rights, including the right to water, food, education, physical culture, work, social security, healthy environments, and others that sustain good living. The State shall guarantee this right through economic, social, cultural, educational, and environmental policies, and permanent, timely access, without exclusion, to programs, actions, and services for the promotion and comprehensive care of health, sexual health, and reproductive health. The provision of health services shall be



governed by the principles of equity, universality, solidarity, interculturality, quality, efficiency, effectiveness, precaution and bioethics, with a gender and generational approach.

Article 35.- The elderly, children and adolescents, pregnant women, persons with disabilities, persons deprived of liberty and those suffering from catastrophic or highly complex illnesses shall receive priority and specialized attention in the public and private spheres. The same priority attention will be given to people at risk, victims of domestic and sexual violence, child abuse, natural or manmade disasters.

Art. 36.- Older persons shall receive priority and specialized attention in the public and private spheres, especially in the fields of social and economic inclusion, and protection against violence. Older adults are considered to be those who have reached the age of sixty-five.

Article 37.- The State shall guarantee the following rights to the elderly: 1. Free and specialized health care, as well as free access to medicines (...)

Art. 360.- The system shall guarantee, through its institutions, the promotion of health, prevention and comprehensive, family and community care, based on primary health care, shall articulate the different levels of care, and shall promote complementarity with ancestral and alternative medicine.

Article 38.- The State shall establish public policies and programs for the care of the elderly, which shall take into account the differences of persons, communities, peoples and nationalities, and shall promote the greatest possible degree of personal autonomy and participation in the definition and execution of these policies.

In the same way, the Law of the Elder states: National Assembly (2016)

Art. 7.- The medical services of public and private establishments shall have geriatricgerontological care for the prevention, diagnosis and treatment of the different pathologies of the elderly and their operation shall be governed by the provisions of this Law, its Regulations and the Health Code.

8 ACTIVE AND PRODUCTIVE AGEING 8.1 PHYSICAL WELL-BEING

Active ageing is an important means of harnessing the potential of quality of life that positively affects society in paid and unpaid activities that improve social well-being and a sense of social belonging. It is the ability to perform a variety of complex tasks and assume social roles in daily life without direction, supervision or assistance, with the help of a physical evaluation we can detect, prevent and intervene early the risk factors of functional impairment, allowing the creation of an appropriate or personalized treatment plan for each elderly person and contains sensorimotor functions that allow the interpretation of sensory information to control oneself and others. objects in the



environment; It also requires processing skills to improve environmental events, management and problem-solving, and communication skills. (Ramos Monteagudo et al., 2016)

8.2 MENTAL HEALTH

The psychological evaluation of the elderly is a multidimensional, multidisciplinary evolutionary diagnostic process that aims to develop an individual comprehensive treatment plan that includes prevention, treatment, rehabilitation and follow-up, and to optimize the use of resources to achieve the psychological state. (Silveira et al., 2016)

8.3 SOCIAL INTEREST

It addresses the relationship between older adults and their environment and identifies opportunities for the appropriate use of social support systems, the well-being of older adults can vary depending on how socially integrated and connected a person is, as opposed to how isolated and lonely they are; Thus, a person with an active social life is able to maintain a sense of belonging and continuity within the group. (González et al., 2009)

8.4 FAMILY RELATIONSHIPS

The family is a social relationship and a good correlation between its members, which plays a central role in the subjective well-being of older people as an active member of the family and society, family relationships are constantly strengthened. The family plays a crucial role in the lives of older people since support and care promotes positive and healthy aging that leads to a better quality of life at the end of a person's life cycle. (Economic Commission for Latin America and the Caribbean, 2004)

Older adults have close friends or family members who can provide them with social resources such as support and help in decision-making, older people express a desire to be useful and valuable to society and to pass on knowledge to future generations. In addition, being more sociable and productive can help you stay healthy, social participation has a positive effect on the physical, psychological, and social well-being of older people and allows socially integrated people to maintain their independence in the community environment for longer. (Mexican Institute of Social Security, 2011)

9 TECHNOLOGY AND THE ELDERLY

Older people believe that the use of technology can improve their quality of life, its use favors communication, energizes relationships and favors personal development and autonomy. The impact on personality development and self-definition promotes a more positive attitude in older people, as



well as the integration of information and communication technologies into the daily lives of older people is an opportunity for social integration. Their self-esteem and personal skills are improved by opportunities for information, communication and leisure. (Sevilla Caro, 2015)

10 METHODOLOGY

The approach was mixed, where figures on sociodemographic characteristics and physical, psychological, and social assessments were analyzed on a comprehensive geriatric scale. Qualitative data collected through semi-structured interviews and observations were used to derive phenomena that explain active aging behaviors in the communities of El Placer and Yámana in the Lauro Guerrero Parish.

By studying the different lifestyles of older people in rural areas, active ageing was achieved and the factors that influence positive ageing and therefore favour other factors were analysed. Qualitative research involves the experiences of individuals. The study was field-based, because the information was obtained through a family registry and the application of an extensive geriatric scale and semi-structured interviews with elderly people in the district of El Placer and Yámana in the parish of Lauro Guerrero.

10.1 LEVEL OF RESEARCH

The type of study was descriptive cross-sectional, as measurements were taken during a given study period. This study determined the incidence of a particular event in the study population and informs interventions. A cross-sectional study involved the collection of data on a given population.

This type of research was used to identify the factors that particularly affect the social networks of active aging of the elderly population in the districts of El Placer and Yámana in the municipality of Lauro Guerrero, and together to study the phenomenological changes in the area.

10.2 POPULATION AND SAMPLE

The study population is predefined by defining certain data as 65 years and older, men and women from the districts of El Placer and Yámana, Lauro Guerrero Parish, who are active and have social networks between September 22, 2023 and October 23, 2023. The total corresponded to 45 individuals, 19 females and 26 males.

10.3 ETHICAL CRITERIA

The Numberg code for medical research on human subjects emphasizes the voluntary consent of the subject, which is essential to conduct any type of research, the data subject must be fully aware of his or her freedom to decide whether or not to participate in the experiment and it is the responsibility



of the researcher to inform about the type, duration and purpose of the experiments, as well as the advantages and disadvantages, as well as the possible benefits and risks or health effects that may be observed during or after the experiments are conducted. (Amaro Chelala and Gonzalez, 1998)

In this study, the confidentiality of participants' information was respected by coding the data.

11 RESULTS

The study was carried out among 45 people in active aging, predetermining the district of El Placer and Yámana, parish of Lauro Guerrero. The following sociodemographic characteristics were presented:

- Age as the time that has passed since the person was born to the present
- Sex: It is a biological characteristic that allows us to classify men and women.
- Educational levels are the different levels of formal education that exist in the education system and that a person can achieve.
- Marital status refers to a person's situation in relation to their partner.
- Cohabitation is the ability to live with other people.

12 CONCLUSIONS

A large proportion of the older adults in the parish of Lauro Guerrero have active aging, which becomes a potential community factor closely related to social support and the different means of communication, as confirmed by a high comprehensive geriatric score.

In relation to school, most older adults reach a basic level that promotes the stimulation of the cognitive environment that allows the use of communication tools.

In the study, most older people achieve adequate physical, mental, and social well-being through participation in household and community activities.

Elderly people in the El Placer and Yámana districts of the Lauro Guerrero parish maintain good relationships with family and friends thanks to the use of mobile phones, which has strengthened communication.

13 RECOMMENDATIONS

Strengthen social support, the use of the media by the elderly to maintain active ageing, which promotes an adequate functional capacity.

Maintain formal education to stimulate the cognitive sphere through the creation of a club with recreational activities for older adults.



We strengthen the level of primary health care by increasing health workers' awareness of promotion and prevention to maintain the physical, mental and social well-being of older people and thus prevent addiction.

We ensure intersectoral work, create programs for the elderly, and strengthen social support networks with governmental and non-governmental organizations.



REFERENCES

Alejandra Clemente, M. (2003). Redes sociales de apoyo en relación al proceso de envejecimiento humano. Revisión bibliográfica. Centro Interamericano de Investigaciones Psicológicas y Ciencias Afines, 20(1), 30–60.

Amaro Chelala, J. R., & González, M. (1998). El consentimiento informado en la realización de ensayos clínicos. Revista Cubana de Medicina Militar, 27(1), 54–61. http://scielo.sld.cu/scielo.php?script=sci_arttext&pid=S0138-65571998000100010

Aponte Daza, V. C. (2015). Calidad de vida en la tercera edad. Ajayu, 13(2), 2077–2161.

Asamblea Nacional. (2008). Constitución de la República del Ecuador. In Registro Oficial (Vol. 449, Issue 20, pp. 25–2021). www.lexis.com.ec

Asamblea Nacional. (2016). Ley del Anciano. www.lexis.com.ec

Carmona Valdés, S., & Ribeiro Ferreira, M. (2010). Actividades sociales y bienestar personal en el envejecimiento. Papeles de Población, 16(65), 163–185.

Comisión Económica para América Latina y el Caribe. (2004). Población, envejecimiento y desarrollo. https://repositorio.cepal.org/server/api/core/bitstreams/f39b93d1-a314-4b11-b3c5-957a096e551d/content

Conde Sala, L. (2009). Los cuidados a personas con dependencia.

Cuideo. (2014). Envejecimiento Activo: Compromiso y rol de la Sociedad. https://cuideo.com/blog/envejecimiento-activo-compromiso-rol-sociedad/

González Bernal, J., & De la Fuente Anuncibay, R. (2014). Desarrollo Humano en la vejez: un envejecimiento optimo desde los cuatro componentes del ser humano. International Journal of Developmental and Educational Psychology, 7(1), 121–129. https://doi.org/10.17060/ijodaep.2014.n1.v7.783

González, D., Sosa, Z., & Reboiras, L. (2009). Las dimensiones del envejecimiento y los derechos de las personas mayores en América Latina y el Caribe. www.cepal.org/apps

Huenchuán, S. (2018). Envejecimiento, personas mayores y Agenda 2030 para el Desarrollo Sostenible. In Comisión Económica para América Latina y el Caribe (Ed.), Desarrollo Social. www.cepal.org/es/suscripciones

Instituto Mexicano del Seguro Social. (2011). Valoración Geronto-Geriátrica Integral en el Adulto Mayor Ambulatorio. http://www.imss.gob.mx/profesionales/guiasclinicas/Pages/guias.aspx

Maldonado Ruiz, T. (2018). Información estadística de casos referentes a personas adultas mayores llevados por la DPE. www.dpe.gob.ec

Maya Díaz, C. D. (2018). Aplicación de la terapia de orientación a la realidad para disminuir el deterioro cognitivo leve en el adulto mayor, que asiste al Centro de Salud Tipo C Chimbacalle en el periodo abril 2018 –septiembre 2018. [Tesis Tercer Nivel, Universidad Central del Ecuador]. https://www.dspace.uce.edu.ec/server/api/core/bitstreams/d00743ad-bf1e-42c4-ad96-829890705e6e/content



Mejía, G. (2021). Calidad de vida y felicidad en la persona adulta mayor.

Mella, R., D'Appolonio, J., Fuenzalida, A., Maldonado, I., & González, L. (2004). Factores Asociados al Bienestar Subjetivo en el Adulto Mayor. Psykhe, 13(1), 79–89.

Mena, A. C. (2013). Análisis multidimensional del bienestar de la población adulta mayor y efecto de las políticas públicas. In Ministerio de Inclusión Económica y Social. https://info.inclusion.gob.ec/phocadownloadpap/estudios/atencion_intergeneracional/2013/analisis_ multidimensional_del_bienestar_en_pam_y_efectos_de_las_politicas_publicas.pdf

Ministerio de Salud Pública del Ecuador. (2018). Lineamientos Operativos para la atención integral del adulto mayor.

National Institute on Aging. (2023). Beneficios del ejercicio y la actividad física | National Institute on Aging. https://www.nia.nih.gov/espanol/ejercicio/beneficios-ejercicio-actividad-física

Organización de Estados Americanos. (2015). Desigualdad e Inclusión Social en las Américas. www.oas.org

Organización de las Naciones Unidas. (2019). Decenio del Envejecimiento Saludable 2020-2030. https://www.who.int/docs/default-source/decade-of-healthy-ageing/final-decade-proposal/decade-proposal-final-apr2020-es.pdf

Organización Mundial de la Salud. (2002). Envejecimiento activo: un marco político. Revista Española de Geriatría y Gerontología, 37, 74–105. https://www.elsevier.es/es-revista-revista-espanola-geriatria-gerontologia-124-articulo-envejecimiento-activo-un-marco-político-13035694

Organización Mundial de la Salud. (2022). Envejecimiento y salud. https://www.who.int/es/news-room/fact-sheets/detail/ageing-and-health

Organización Mundial de la Salud. (2023). Década del Envejecimiento Saludable (2021-2030). https://www.who.int/es/initiatives/decade-of-healthy-ageing

Organización Panamericana de la Salud. (2021). Envejecimiento saludable. https://www.paho.org/es/envejecimiento-saludable

Osorio Blanco, N. de los Á. (2017). Grado de deterioro neurocognitivo en el adulto mayor con características clínicas de demencia, que habitan en el barrio Germán Pomares Ordoñez, Masaya [Tesis Tercer Nivel, Universidad Nacional Autónoma de Nicaragua]. https://repositorio.unan.edu.ni/15636/1/15636.pdf

Padilla Góngora, D., Remedios López, L., Aguilar Parra, J. M., Lozano Segura, M. del C., & Morales Montoya, A. (2017). El emprendimiento en adultos mayores y su entrenamiento como oportunidad para favorecer el envejecimiento activo. INFAD Revista de Psicología, 2(1), 33–40. https://doi.org/10.17060/ijodaep.2017.n2.v1.1106

Pérez Díaz, J. (1999). La feminización de la vejez. https://www.gerontologia.org/portal/archivosUpload/La_feminizacion_de_la_vejez.pdf

Petretto, D. R., Pili, R., Gaviano, L., Matos López, C., & Zuddas, C. (2016). Envejecimiento activo y de éxito o saludable: una breve historia de modelos conceptuales. Revista Española de Geriatría y Gerontología, 51(4), 229–241. https://doi.org/10.1016/J.REGG.2015.10.003



Primicias. (2023). Un 60% de adultos mayores vive en situación de vulnerabilidad en Ecuador. https://www.primicias.ec/noticias/sociedad/adultos-mayores-pobreza-violencia-vulnerabilidad/ Quintero Osorio, M. A. (2011). La salud de los adultos mayores.

Ramos Monteagudo, A. M., Yordi García, M., & Miranda Ramos, M. de los Á. (2016). El envejecimiento activo: importancia de su promoción para sociedades envejecidas The active aging: importance of its promotion for aging societies. Revista Archivo Médico de Camagüey, 20(3).

Reyes Ortiz, C. (1998). Colombia Médica Importancia de la religión en los ancianos. Colombia Médica, 29.

Sandoval Mora, S. (2018). Psicología del Desarrollo Humano II. In Universidad Autónoma de Sinaloa. https://dgep.uas.edu.mx/librosdigitales/6to_SEMESTRE/64_Psicologia_del_Desarrollo_Humano_II. pdf

Satorres Pons, E. (2013). Bienestar psicológico en la vejez y su relación con la capacidad funcional y la satisfacción vital. In Universidad de Valencia. http://hdl.handle.net/10550/26298

Sevilla Caro, M. (2015). Envejecimiento activo. Las TIC en la vida del adulto mayor. RIDE Revista Iberoamericana Para La Investigación y El Desarrollo Educativo, 6(11), 1–15.

Silveira, Y. P., Faez Menéndez, M., San, J., Borges, M., & Diaz Boloy, M. (2016). Evaluación funcional del adulto mayor y el proceso de atención de enfermería. Revista Información Científica, 95(5), 851–861. https://revinfcientifica.sld.cu/index.php/ric/article/view/78/2221

Yunus, G. (2020). En 2050 el número de personas adultas mayor será de 1.500 millones. https://www.aa.com.tr/es/mundo/en-2050-el-n%C3%BAmero-de-personas-adultas-mayorser%C3%A1-de-1500-millones/1994001