EXERCISE IS MEDICINE: ELDERLY, 
THE FORGOTTEN AGE GROUP IN AFRICAN COMMUNITIES

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Abstract:
The World Assembly on Ageing (1982) in Vienna recommended that social, cultural and leisure activities are necessary for the elderly and should be provided by each country. This study was motivated by an unfair situation the elderly found themselves living in, that is, a sedentary life-style which is prone to chronic diseases. The elderly are left out not enjoying the health significance of physical activities. Contemporary research findings have also invigorated this recommendation by concluding that exercise is medicine. In light of this philosophy, the objectives of this study were to identify right sport and exercise activities for the elderly, to examine the experiences of the elderly people in Zimbabwe and come up with solutions to sedentary lives, since it is common among the elderly to live passive lives in the comfort of their families, and as such, this age group is prone to diseases yet according to AIDS/HIV activists, these elders are the ones bearing the brunt of AIDS/HIV as guardians of orphans and vulnerable children whose parents have perished because of this deadly disease. This study employed a case study as the design method and it was a pure qualitative research which used interviews and documentary analysis as data generating instruments. The major findings of this study were that old aged people are eager and capable of doing sports and exercise, lack of infrastructural provision deters old aged people from doing sport and exercises. It is the African culture that does not motivate old people to do sport. There is lack of knowledge on benefits accrued from doing sport and exercises. The study recommends African states to take initiative to introduce sport for the old aged people. Families should be educated on benefits accrued by the elderly if they participate in sporting life style.

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Keywords: the elderly, ageism, sport, exercise, Alzheimer’s disease

1. Background of the Study

Sport and exercise activities have long been a preserve for young ages in most African communities with only older members of the white families in African countries seen taking sport and exercise as a hobby. The sociological perspective is that African cultures do not encourage elderly people to participate in sport and exercise as these elderly members of society are crowned with much respect and a host of family advisory responsibilities.

The passive life style experienced by the elderly has rendered them weak and prone to chronic diseases, for instance; cancer, obesity, blood hyper-tension, sugar diabetes, Alzheimer’s disease and others, (Caplan and Smith, 2005). The research findings from World Health Organization (WHO) 2014 report show that it is the old aged who consume most of the African countries’ health budgets by frequently being under disease attacks. The philosophy ‘exercise is medicine’ applies to all ages, younger or older; therefore, it should be that once African community elderly people are motivated to practice sport and exercise, families and governments would be relieved of health budgetary constraints. The Bible says “a merry heart does good like medicine”, (Proverbs 17:22), therefore, since sport brings happiness, it is imperative that even the old people should enjoy doing sport to control other chronic diseases that attack them due to stress.

Some countries like America, motivated by the consciousness of maintaining appropriate levels of health led to legislative amendment of the Older Americans Act as long back as 1975 (Moran, 1979 in Davis, Kimmet and Auty 1986) to include “services designed to enable older persons to obtain and maintain physical and mental well-being through programs of regular activity and exercise”, (World Assembly on Ageing 1982, Vienna). This epitomizes the efforts by other countries to consider healthy life-style for the usually forgotten age group, unfortunately in underdeveloped African countries the old age group is predominantly not recognized in terms of urging them to participate in sport and exercise life-style, the reason being that there is no economic gains from sponsors and media do not cover any sport for the elderly.

Zimbabwe government recognizes the inclusion of all age groups in sport and exercise activities since it is a signatory to the International Declaration of Human Rights. Programs like Sports for All, and Community Sport, are evidence of efforts to this consideration. It is unfortunate that economic instability, cultural beliefs, poverty, lack of knowledge and negative attitude, influenced the elderly not to partake sport and exercise activities, hence this study aimed at coming up with types of sport activities
and exercises suitable to the elderly and ways to encourage them to do sport and exercise as it is their human right. This study took an advocacy/participatory worldview as the appropriate pathway to mitigate factors that militate against old people’s participation in sport and exercise life-style in an African perspective. The study will benefit the old aged people to remain fit and healthy as former architects of a better future generation. Family members shall enjoy reduction of medical bills they incur when constantly referring the old people to hospitals because of chronic illnesses. Therefore, exposing the suitable types of sport and exercises that elderly people could be motivated to undertake became the beacon of this study.

2. Statement of the Problem

The elderly in African societies are evidently not partaking in sport and exercise life-style, rendering them prone to chronic diseases and overburdening the health budget of their countries as they are entitled to free health care. Is that a practice of their own making or there are other issues beyond their wishes? This study aims at unravelling factors that militate against participation of the elderly and coming up with suitable sport and exercise activities for the elderly from an African perspective.

3. Research Questions

1. Which factors militate against participation of the elderly in sport and exercise?
2. What is the health significance of sport and exercise to the elderly?
3. How do the elderly people perceive sport and exercise life-style from an African perspective?
4. Which suitable sports and exercise can elderly people engage in an African community?
5. How could the African elderly people be motivated to adopt a sport and exercise life-style?

4. Assumptions

It has been assumed that it was not possible to engage the elderly in sport and exercise activities as that was not necessary in African communities and the aged people are not interested in doing sport and exercises.
5. Significance of the Study

Once elderly people adopt a sport and exercise life-style in African communities, governments of these under developing countries would benefit immensely from a reduced health budgets which used to be overburdened by high hospital bills from these ailing age groups. The findings of this study shall be availed to community libraries and posted to advocacy groups for the elderly and to Old People’s Homes run by Ministry of Labour and Social Welfare in Zimbabwe. Other organizations and researchers will access this document on the internet for further insights.

6. Related Literature Review

6.1 Militating conditions

In Africa, providing for the sporting needs to older people has, up to date, had a low priority. The need for quality social and physical recreation program is essential. The term ageism was referred to by Butler and Lewis (1973) in Davis et al (1986) as a process of systematic stereotyping; a discrimination against people because they are old. A common but erroneous belief is that age is synonymous with disability. The fact is that there are some militating conditions surrounding the old aged people that deter them from sport and active life-style. Wilmore and Costill (2004) identified changes to body size and composition as having aggravating effects on elders to sport and exercise participation. Generally, at about 35 to 40 years of age the body experiences height reduction attributable to compression of the intervertebral disks and poor postures early in ageing. From about 40 to 50 years in women, and 50 to 60 years in men, osteoporosis becomes a deterrent factor. Osteoporosis refers to a severe loss of bone mass, leading to increased risk of bone fracture, (Wilmore and Costill, 2004).

Another disturbing condition is poor diet, a condition that might emanate from deteriorating economic life potentialities. Study by Janssen, Ross and Tramblay (2000) shows that 65 to 70 years of age people lose appetite and thus they don’t consume sufficient calories to maintain body weight. It was also noted that loss of body and muscle mass jeopardizes agility most needed in sport and exercise. From a sociological perspective, old age succumbs to cultural expectations that elderly people must dignifiedly behave and sport and exercise is for the young people.

From this study, it was also observed that lack of indoor sport knowledge among elderly persons is another contributing condition. Elderly people have frail and frequent ill bodies and that retard them from even doing exercises as that might exacerbate chances of injury.
Loucks and Heath (1994) argue that approximately 10% of the total number of muscle fibres is lost per decade after age of 50 years. These muscle fibres like Short Twitch (ST) and Fast Twitch (FT) fibres determine speed which is also an important aspect in sport performance. These and other conditions are contributing conditions against old age people for not or made to do sport and exercise.

6.2 Health significance to the elderly people
Ignoring the old age people and taking for granted that old aged people are of no relevance in the world of sport, has led sport authorities and governments not to mobilize sport resources for this group of people world-wide. Documentations from numerous investigations have noted a plethora of health benefits accrued by the elderly if engaging in sport and exercise life-style in their communities.

Skoll (1982) in Davis et al (1986) noted some health significance to elderly people that can accrue from sport and exercise participation. The findings are that, there is improved health status (measured in terms of reduced hospital admission and medical consultations) for older people following good health practices.

A substantial part of the degenerative process attributed to ageing may be due to habitual inactivity rather than to true disease or any irreversible ageing process. The term “hypokinetic” disease is now used to describe diseases brought on, in part, by insufficient movement (Skoll, 1982, in Davis et al 1986))

Exercise (Skoll, 1982 in Davis et al 1986)) is also the trigger mechanism for activating body metabolism. It is true that regular physical activity helps reduce the likelihood of illness and accidents. The great benefit of maintaining physical fitness is the degree of independence it affords through improved cardio-respiratory functioning, strength and flexibility.

Caplan and Smith (2005) identified these long-term health benefits from sport and exercise life-style:
- Inactive people are twice as likely as active people to develop coronary artery disease and high blood pressure.
- Decreased cholesterol levels
- Decreased body fat
- Decreased risk of certain types of cancer, colon and breast cancer (Mugari and Masocha, 2015)
- Increased life expectancy
- Improved mental health
- Less likely to develop lung disorders such as asthma or bronchitis.

Knowledge about all these health advantages offered by just participating in sport and exercise by those elderly persons could be of great importance, unfortunately,
this literature and advocacy is not availed to most African communities. Among elderly people, Alzheimer’s disease is common. As some people enter old age, their brain cells degenerate so that they no longer appear to understand what is going on around them. However, (Jennifer, 2010) asserts that if the elderly are exercising, they are less likely to develop Alzheimer’s disease. This disease is shown by high incidents of forgetfulness. Given this background on health advantages, it is imperative and cheaper for African governments to engage the old aged people into sport and exercise activities so as to reduce medical bills gobbled by these senior citizens in the event of illness.

6.3 Sport and exercise perceptions by the elderly.
To most elderly people, literature is abound by different perceptions from old aged people that say females are worse not into exercise than male old aged people. This practice is gender based where fewer females engage in sport and exercise than their male counterparts, (Mugari and Masocha 2015, Michael et al 2000, Colley et al 1988). Another perception noted by Machael et al (2000) was that the tendency among everyone is to venture into a hobby that one finds more friends in, than where there is no growing friendship and family encouragement. This condition seems influential, meaning to say if old people find resource support from family members in terms of exercise equipment, driven to gym rooms, dart and chess rooms, they can be found active in sport and exercise. Evidence can be beer drinking as leisure life, you find old people in good numbers there in African communities maybe because they find more friends there, providing them with opportunity for self-efficacy and listened to. Participating in traditional dances by elderly people is considered a religious duty not leisure activity according to the old people in Shona societies.

6.4 Suitable sports and exercise for the elderly people
There are a plethora of suitable sport and exercise activities that older people could take part in, some are expensive, but this study is keen to identify cheapest activities. Caplan and Smith (2005:230) suggest regular walking, using stairs instead of lift, turn your coffee break into a walking break, add exercise to weekend plans. Dancing to traditional or modern music with little cousins in homes during story telling time is viewed as both a leisure and simple exercise activity for weaker bodies.

Nelson, Rejeski, Blair, Duncan, Judge, King, Sceppa (2007) recommend balance exercises, activities that increase body flexibility, activities that integrate preventive and therapeutic exercises, for instance, moderate aerobic activities that emphasise muscle strengthening.

The precise sport games could be darts at home, chess to keep the mind calculative, tsoro, nhodo, chest expands, sit-ups, stretches, squats, push-ups, archery and
short sprints (Eshuys, Guest and Lawrence, (1987), Amusa, Toriola and Onyewadume (1999). However, the fact is that, choice of sport and exercise depends on the previous orientation of the old person, age and availability of resources at home.

6.5 Strategies to motivate the elderly people to adopt sport and exercise life-style

There might be some practices in other countries made to motivate old people to adopt a sport and exercise life-style which are not well documented up to date. However, this study has unravelled some ways to motivate the old people to participate in sport and exercise life-style. Some identified activities include formation of community exercise clubs, establishing gym cahoots in villages. In every Old People’s Home qualified exercise trainers should be employed. Schultzer and Graves, (2004) suggested increasing in-door sport and exercise activities. Mugari and Masocha (2015), recommend availing literature on benefits and effects of sport and exercises.

7. Study Methodology

This study employed a qualitative paradigm as it aims to investigate characters in their natural environments taking into consideration their culture, attitudes, behaviors and beliefs and perceptions that influence their sport and exercise participation. The qualitative method allowed the researcher to accommodate human experience, participants perspectives and their diversity and reflexivity of the researcher and the research, (Flick, 2010, Silverman 2011, Creswell, 2009). Also, the appropriateness of the participatory or emancipatory worldview as a lens for this study was achieved in this qualitative paradigm since the elderly people appear to be marginalized by the sport systems in most African countries and this study sought to liberate the old aged people so that they enjoy their basic human rights, (participating in sport and exercises)

8. Design

A case study was deemed an appropriate design for this qualitative research. In a bid to deepen the approaches to solicit adequate and relevant information with regards to participants’ attitudes, beliefs, perceptions, advocacies and complaints of the marginalized aged people, case study was most appropriate. This study concentrated on a smaller group of elderly participants in a single community known as Wedza Council Suburbs which was a manageable size; hence a case study was effective.
9. Population

Elderly people both females and males who lived in Wedza Council Suburbs and the surrounding villages of Chemhanza Mission, Muhwati and Mulemba made part of the population. Family members living with the aged people and former community sport administrators also constituted the participants group.

10. Sample and Sampling Procedures

A sample size of 50 participants, specifically, 30 old aged people, 10 family members looking after the old people and 10 former sports administrators in the locality were deemed an appropriate sample to be participants in this study.

10. Data Generating Instruments

The researcher made use of some community social gatherings and also visited some homestead to meet elderly people and interviewed them. Home visits were advantageous as it gave the researcher time to observe the participants in their natural environment and to read the medical documents kept by the elderly participants. Since the researcher was part of the community as a resident, the participants were at liberty to disclose the needed data, whilst at times some participants could go to the extent of show-casing their sport skills of disciplines they were good at during their active ages.

11. Discussion of Results

11.1 Factors militating against elderly people’s participation in sport and exercise

The data had shown that 90% of the old aged people sees no reason for doing sport and exercises at that age. The 10% cited fear to get injuries. These data might suggest that it is the African culture that has failed to orient its societies on the value of sport and exercise to older people. This might suggest the effect of osteoporosis, a disease that is common among old aged people which makes their bones weaker and leads to bone fracture as cited by (Wilmore and Costill, 2004)

It also emerged that 100% of the guardians of the old aged people reported that old people only eat their usual quantity of food when there is good relishes like meat (“Vanongodya zoakanaka kana paine nyama chete”). In poor families, meats products are not always readily available, so old people normally lose appetite a condition that nutritionists believe to lead to loss of body and muscle mass of the old people’s bodies. This condition contributes to body weakness and retards people to be active.
90% of the studied old people lacked knowledge of health benefits that can be accrued by anyone who participates in sport and exercises. This scenario has a negative bearing on level of motivation to participate in sports and exercise among old aged people particularly in African communities because of absence of literature on health benefits through sport and exercise, unlike in white communities.

It has been noted in this study that African culture expects the elderly to busk on sunshine always at home, sharing their wisdom to youngsters who gather around them to enjoy story-telling duties by elders as it is believed that that wisdom comes by age. This docility is construed to mean dignity among old aged people yet that makes them weaker, fragile, and prone to chronic diseases.

Lack of sport and exercise facilities and conducive sport and exercise environments were identified as militating factors also. These have been observed as true common scenario from the villages studied and these could be strong factors that kill the desire among family members to persuade elders to do exercise.

11.2 Knowledge of health significance of sport and exercise among the old people
Availability of this knowledge was below 30% among the elderly participants as compared to those aged 50 years and below. Lack of this knowledge could be a contributing factor on the basis that there is no motivation on the part of the affected old aged groups and part of those guardians who are family members. If they knew health opportunities like free from chronic diseases, free from Alzheimer’s diseases, from mental stress etc., most families would finance and encourage their old aged people to opt for sport and exercise life-styles. It was discovered that 100% of the homes visited had no any sport facilities even those for in-door sports and exercise activities. From two interviewed, a common verbal utterance was “isuwo hedu kuwaniswa imba kana chivanze chekutambisa” (that is to have a space to waste). The statement drives a point home that old people should not be given a place for sport and exercise as this is sheer waste of valuable space.

11.3 Perceptions of the old people on sport and exercise
It has been noted that old people have a negative attitude towards doing sport exercise, citing fear to get injuries, lack of orientation to the benefits accrued by participating in sports exercises, and absence of a cultural capital (Bourdieu, 1993). Old people associate sport and exercises with lack of dignity which is common to young ones.

11.4 Suitable sport and exercises for the old people
It emerged from the discourses that there are certain sport and exercise suitable to old aged people. The effect of maturation during old age has a reverse effect unlike to
young people. Games like chess, snooker, darts, walking, traditional games like tsoro, nhodo, have little energy requirement among old aged people, therefore make them suitable. Nhodo and datts received least number of players among elders as they said, “haticha nange kwazvo”, (we cannot take an aim now). It is true from observations that old aged people could be lacking stability to stand and throw arrows to the target, probably due to poor eye-sight and muscle coordination.

11.5 Ways of motivating the elderly to do sport and exercise

It has emerged that it is difficult to motivate old aged people to do exercises and participate in simple sport activities because they see their efforts as not paying anything since they always conclude that their life is heading towards nowhere. However, observations have shown that if games which involve their friends of the same age are made available nowhere else but within the comfort of their homes and initiated by their grandchildren as funny activities seeking past knowledge as demonstrators of heroism, these old age people could parade exercises. We were experts boys and girls!, we could play like this!, I could run to catch hares by foot, football I could kick too high!”(Taiveshasha vazukuru, taitamba tichidai----, ndaibata tsuro nemakumbu ini, bhora ndairova seizvi----richienda mudengadenga!”. These statements symbolised their motivation to show case their past capabilities.

12. Conclusions

- It is not correct to believe that old aged people are not eager and are not capable of doing sport and exercises, but lack of infrastructural and facilities provision deter them from sport and exercise life style.
- The study concludes that African culture does not motivate old aged people to continue doing sport and exercise as this active life style is construed to weaken dignity and respect among elders of the society.
- Fragility among old aged people is a deterrent condition for elders to exercise and do sport activities.
- Working in home gardens and fields is the only exercise done by old aged people that satisfies them and their guardians.
- There is lack of knowledge about health benefits accrued from continuing sport and exercise even at old age.
- Old age is strongly viewed as next to death by both the aged people and the general people in African culture and pooling up of sport resources for the elderly is taken as waste of valuable money and time which should be meant for the young people.
• Simple and easy African traditional games are not taken as sport games by guardians/family members of the elderly, but as irrelevant past time activities, yet they are also necessary for the elderly since they can be done at homes.

13. Recommendations

The study has made the following recommendations:
• The African governments should take an initiative through ministries of sport and recreation to introduce sport for the old aged people i.e. for 60 years and above at national level so that grass root sports structure could also be motivated to introduce sports competitions for the elderly.
• Family members and their communities should be educated about health benefits accrued by their elderly people if they participate in sporting life style and that will make every household to provide sport facilities for this forgotten age group.
• Simple and easy traditional games should be encouraged and recognized as important sport activities for the elderly.
• Neighbouring communities for the elderly could compete against each other.
• Sports administrators in communities should invigorate the introduction of a positive attitude among African communities towards accepting the old age as an important age group that contributed to the development of today’s nationhood, therefore leaving them out from sport and recreational activities is absolutely cruel.

References
