The impact of a group recreational games upon the quality of Social life and psychological depression among the elderly

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Introduction and research problem

The aging stage is one of the most age-related stages in which man predicts his nearness, which is generally characterized by a kind of physiological and psychological disorder, which is characterized by indolence, helplessness, isolation, sadness and great emptiness.

As the coldness of vitality and effectiveness of life gives a sense of sadness and despair for the elderly, especially when he feels the difference of changes that occur with the passage of time and at all levels and fields may be one of the most severe of these variables and the most sad and isolated is the lack of interaction with the family and community that lives. It is in him (25: 8) (41:16)

And that among the reasons which leading to the depression of the elderly are those related to the changes in physiological and functional, which occur at this age (60-70) years and taking a negative regression line in the functional processes of the various organs of the body. (58:14) (55:22)

Despite the importance of sports for all ages, which is confirmed by the results of research and studies all the time, many are looking As a kind of well-being, and few who take a lifestyle and continue to exercise regularly and despite their importance to everyone, the exercise For older people take special importance and become a necessity to be cared for for a better life for the elderly. (22:23) (95:17)

One of the major problems that experienced by older people is their loss of self-reliance and exercise. Regularly sports and get an appropriate degree of fitness can seniors meet their daily needs without The need to help someone.

Contrary to popular belief that exercise is not suitable for individuals in the large age Due to the decline of...
their physical strength and increased vulnerability. They are injured during exercise (74:11).

Depression is a medical, psychological, and social problem. From a medical point of view, depression is part of a multi-instrumental system, which is reflected in the difficulty of diagnosis and treatment. (74: 1) (55:15)

In terms of social, it lies in the increasing numbers of elderly at the present time accompanied by increased preoccupation of children with the burdens of life different, which gives the elderly to be another burden on them and this may feel isolated, where no longer need him and this is reflected negatively on his self - (7: 2), and he did not know how much.

Psychologically, the elderly feel and co-exist with feelings of loss worse than those related to the loss of the husband or friends,

Especially the friends of his youth and his mentors, as well as the loss of job and the ability to gain and loss of the goal of life, especially as he feels near the inevitable end. (105: 4)

That depressive images in the elderly are often mixed with physical symptoms such as malnutrition, gastrointestinal disorders and dementia,

Where they often complain of multiple areas of the body and lose appetite for food and drink are weak, and this may lead to urination in the body and the general condition. (77:21)

The importance of the present study lies in the fact that depression is generally a risk to the community and to varying degrees.

Cohen (2003) emphasizes that the risk of depression in its morbidity indicates the risk of common and severe physical diseases such as cardiovascular disease.

And that the chances of recovery from physical diseases and dysfunction of the organ, which are often suffered by the elderly take longer if accompanied by depression, while the chances of recovery and rapid treatment when the patient is optimistic and cheerful (153: 6)

This may be due to the fact that the elderly tend to exaggerate their sense of pain, unwillingness to pursue medical treatment or to adhere to treatment plans and to take medication, which is reflected negatively on the chances of recovery from the diseases they suffer from. (78: 7)
Data from some studies indicate that 50 to 60% of the elderly suffer from old age depression, which in fact leads to work and research to identify the psychological nature of the elderly and to diagnose their dimensions.

As well as to study the psychological negatives associated with them, which helps to know the best way to deal with these. The sense of quality of life is relatively relative, because it is associated with certain subjective factors such as positive self-concept, satisfaction with life and work, social status, and happiness felt by the individual, as well as some objective factors such as available material resources, the environment, the health condition, the residential and functional situation, and the level of education.

Adaptation to physical, psychological and social effects is a major challenge for many elderly and is associated with satisfaction with life. The overall deterioration in physical, sensory and cognitive abilities is the most prominent feature of growth in the older age group. Many studies indicate that older people in residential care homes need social support, challenge, respect, self-understanding, acceptance and decision-making.

Donta Lun Dunnellon (2012) emphasizes the importance of caregiving services for the elderly in improving their sense of satisfaction with life, as it enables them to engage in new social relationships.

In the opinion of the researcher, the elderly stage may accompany the elderly from 60 to 70 years of some psychological changes as a result of low per capita income monthly and narrow the circle of social relations to separate from colleagues and friends, he lives a phase called "low optimism and psychological isolation," where sitting at home and lack of movement due to the existence of vital links in the elderly.

We find that the biological clock inside the elderly is disrupted, begins to become sick health and gradually lose the ability to estimate time and his sense of excess that he is no longer productive and has become a burden on his family.

These feelings lead to loneliness and isolation and low level of optimism. The sense of narrowness of life and
this was confirmed by Saleh Mohammed al-Saghir (2008) (4), Mohamed Tamadr Taha (2006) (8).

Through the researcher's view of the studies and references to the relationship between depression and interaction with the community and family,

Whose results indicate the correlation level of depression personal variables of the individual, and the elderly role in the important Egyptian society, and attention to the psychological aspects of them are matters of interest to all. The researchers urged the researcher to carry out this study to learn about the impact of the recreational games program on the collective quality of social life and psychological depression in the elderly.

**Search Goal:**

The aim of the research is to identify the impact of a recreational program on the quality of social life and psychological depression among the elderly.

**Research hypotheses**

There are statistically significant differences between the averages of pre and post measurements in the quality of social life in the elderly and in favor of the research group.

- There are statistically significant differences between the averages of pre and post measurements in the quality of social life and psychological depression among the elderly.

**Research plan and procedures**

**Research Methodology**

The researcher used the experimental method of pre-post measurement for one experimental group.

**Research community**

The research society included the elderly in Cairo governorate and residing in the same role.

**The research sample:**

The research sample was selected by the elderly, aged 60-65 years, located at Dar Resala for the elderly, (38) elderly 6th of October in Cairo Governorate.

The experimental group was (15) elderly, in addition to (8) elderly, To conduct the exploratory experiment for research.

**Homogeneity of the research sample**

**Table (1)**

<table>
<thead>
<tr>
<th>The homogeneity of the research sample in the level of psychological depression and quality Social life in older persons</th>
<th>N = 38</th>
</tr>
</thead>
</table>

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<table>
<thead>
<tr>
<th>Variables</th>
<th>Tests</th>
<th>Measurement unit</th>
<th>Average</th>
<th>deviation</th>
<th>Mediator</th>
<th>Torsion coefficient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality of social life</td>
<td>Social happiness</td>
<td>degree</td>
<td>2.28</td>
<td>0.63</td>
<td>2.25</td>
<td>0.21</td>
</tr>
<tr>
<td></td>
<td>Social relations</td>
<td>degree</td>
<td>3.11</td>
<td>0.52</td>
<td>3.10</td>
<td>0.52</td>
</tr>
<tr>
<td></td>
<td>Psychological tranquility</td>
<td>degree</td>
<td>2.11</td>
<td>0.52</td>
<td>2.10</td>
<td>0.17</td>
</tr>
<tr>
<td></td>
<td>Social stability</td>
<td>degree</td>
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<td>0.52</td>
<td>2.25</td>
<td>0.36</td>
</tr>
<tr>
<td></td>
<td>Social respect</td>
<td>degree</td>
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<td>0.52</td>
<td>2.50</td>
<td>0.147</td>
</tr>
<tr>
<td></td>
<td>Total score of the scale</td>
<td>degree</td>
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<td>1.52</td>
<td>12.20</td>
<td>0.51</td>
</tr>
<tr>
<td>Psychological depression</td>
<td>Sadness and pessimism</td>
<td>degree</td>
<td>2.22</td>
<td>0.32</td>
<td>2.20</td>
<td>0.63</td>
</tr>
<tr>
<td></td>
<td>Guilt and dissatisfaction</td>
<td>degree</td>
<td>1.96</td>
<td>0.14</td>
<td>1.95</td>
<td>0.21</td>
</tr>
<tr>
<td></td>
<td>Suicidal tendencies</td>
<td>degree</td>
<td>1.44</td>
<td>0.21</td>
<td>1.40</td>
<td>0.58</td>
</tr>
<tr>
<td></td>
<td>Disorders and mental energy</td>
<td>degree</td>
<td>1.65</td>
<td>0.11</td>
<td>1.60</td>
<td>0.62</td>
</tr>
<tr>
<td></td>
<td>Illusory Illness And feeling stressed</td>
<td>degree</td>
<td>1.74</td>
<td>0.17</td>
<td>1.70</td>
<td>0.32</td>
</tr>
<tr>
<td></td>
<td>Feeling of blame and failure</td>
<td>degree</td>
<td>2.36</td>
<td>0.32</td>
<td>2.30</td>
<td>0.87</td>
</tr>
<tr>
<td></td>
<td>Psychiatric Depression Scale</td>
<td>degree</td>
<td>11.37</td>
<td>1.01</td>
<td>11.15</td>
<td>0.96</td>
</tr>
</tbody>
</table>

It is clear from Table (1) that the values of torsion coefficients in the quality of life and psychological depression in question were limited to (+/-3). This indicates that the distributions are closer to moderation in all tests, indicating the homogeneity of the research sample.

**Data collection tools:**

(A) Instruments and equipment used:
- Resistameter to measure both length and weight of the research sample.
- Stopwatch to measure pulse rate (pulse / s)
- Medical balls + ropes + colored balls + hoops

(B) Data collection form:
- A questionnaire for measuring the quality of social life in the elderly (preparation of Amani Safa 2015)
- A form to measure the level of depression in the elderly. (Amel Jamil 2009)
- Expert feedback form on the proposed recreational program. (Prepared by the researcher)

**Proposed recreational program**

**Program Objective**

The proposed program aims at identifying the impact of a recreational recreational program on the quality of
social life and psychological depression among the elderly.

**Program development steps:**

After reviewing the references and studies related to the subject of the research, the researcher developed a vision for the program, which was presented to the experts in Annex 4, which resulted in the following:

- The total program time is three months with (3) recreational units per week.
- **The time of the recreational unit (50) minutes divided as follows:**
  - A: Warm-up (10)
  - B: Main part (30)
  - A: Closing (10)

- Divide the program into three stages to severely scale the load as follows:

**Contents of the proposed sports program:**

In order to achieve the goal of the recreational program, the content of the program was developed in a number of units aimed at improving the physical aspects within the recreation program. The content of each unit was divided as follows:

**A. The introductory part:**

Which aims to:

1. Preparing the body and preparing it physically, psychologically and psychologically to accept work in the next stage.
2. Try to reach the best ways to move to the next part with the introduction of the spirit of fun in the instructions to have a good impression of the participants.
3. Gradually increase recreational activities.
4. Good preparation to avoid injuries that may be exposed to the elderly and can be warm-up exercises in the following forms:

- **Warm up exercises**

**B. Main part:**

Which aims to maintain the physical and physiological condition of the elderly and this period of the most important periods in the program where the content achieved the desired goal and consisted of two stages were gradually given over the entire period of the program are as follows:

- **The first stage:**
  included many free physical exercise and exercise tools, which increase the efficiency of the work of large muscles, such as muscles of the arms and legs, trunk, abdomen and neck.

- **The second stage:**
  Which included many of the games recreational.

**C. Closing part:**

The researcher has considered that the main part follows a gradual cooling period using walking, swings and light running.

1. Access to the state of the body to the case of rest.
2. Choosing games to increase the attention of the individual.
and not to the performance, but the possibility of the resurrection performance again and the sense of the elderly marketing until the waiting time next.

*View and discuss the results*

**Table (2)**

<table>
<thead>
<tr>
<th>Measures</th>
<th>Variables</th>
<th>Measurement unit</th>
<th>Pre measurement</th>
<th>Post measurement</th>
<th>Differences between the two averages</th>
<th>Improvement rate</th>
<th>Value of &quot;T&quot;</th>
<th>Significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality of social life</td>
<td>Social happiness</td>
<td>Degree</td>
<td>2.28 0.63</td>
<td>4.18 0.33</td>
<td>1.90</td>
<td>83.33%</td>
<td>3.45</td>
<td>Significance</td>
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<td>Social relations</td>
<td>Degree</td>
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<td>5.84 0.2</td>
<td>2.73</td>
<td>87.78%</td>
<td>3.52</td>
<td>Significance</td>
</tr>
<tr>
<td></td>
<td>Psychological tranquility</td>
<td>Degree</td>
<td>2.11 0.52</td>
<td>3.95 0.85</td>
<td>1.84</td>
<td>87.20%</td>
<td>3.45</td>
<td>Significance</td>
</tr>
<tr>
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<td>Social stability</td>
<td>Degree</td>
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<td>3.78 0.62</td>
<td>1.52</td>
<td>67.25%</td>
<td>3.88</td>
<td>Significance</td>
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<td>Social respect</td>
<td>Degree</td>
<td>2.51 0.52</td>
<td>3.91 0.58</td>
<td>1.40</td>
<td>55.77%</td>
<td>3.65</td>
<td>Significance</td>
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<td>Total score of the scale</td>
<td>Degree</td>
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<td>21.66 0.66</td>
<td>9.39</td>
<td>76.52%</td>
<td>3.21</td>
<td>Significance</td>
</tr>
</tbody>
</table>

The value "T" is a tabular at the level of 0.05 = 1.951

**Table (3)**

<table>
<thead>
<tr>
<th>Measurements</th>
<th>Variables</th>
<th>Measuring unit</th>
<th>Pre measurement</th>
<th>Post measurement</th>
<th>Differences between the two averages</th>
<th>Improvement rate</th>
<th>Value of &quot;T&quot;</th>
<th>Significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychological depression</td>
<td>Sadness and pessimism</td>
<td>Degree</td>
<td>2.22 0.32</td>
<td>1.90 0.11</td>
<td>0.32</td>
<td>14.41%</td>
<td>3.58</td>
<td>Significance</td>
</tr>
<tr>
<td></td>
<td>Guilt and dissatisfaction</td>
<td>Degree</td>
<td>1.96 0.14</td>
<td>1.55 0.14</td>
<td>0.41</td>
<td>20.91%</td>
<td>3.52</td>
<td>Significance</td>
</tr>
<tr>
<td></td>
<td>Suicidal tendencies</td>
<td>Degree</td>
<td>1.44 0.21</td>
<td>1.10 0.32</td>
<td>0.34</td>
<td>30.90%</td>
<td>3.21</td>
<td>Significance</td>
</tr>
<tr>
<td></td>
<td>Disorders and mental energy</td>
<td>Degree</td>
<td>1.65 0.11</td>
<td>1.12 0.17</td>
<td>0.53</td>
<td>47.32%</td>
<td>3.87</td>
<td>Significance</td>
</tr>
</tbody>
</table>

Follow Table (3)
Significance of the differences between the pre and the post partum measurement in the level of psychological depression among the elderly N = 15

<table>
<thead>
<tr>
<th>Measurements</th>
<th>Variables</th>
<th>Measuring unit</th>
<th>Pre measurement</th>
<th>Post measurement</th>
<th>Differences between the two averages</th>
<th>Improvement rate</th>
<th>Value of &quot;T&quot;</th>
<th>Significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Illusory Illness And feeling stressed</td>
<td>Degree</td>
<td>1.74</td>
<td>0.17</td>
<td>1.22</td>
<td>0.32</td>
<td>42.62%</td>
<td>3.69</td>
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<td>Feeling of blame and failure</td>
<td>Degree</td>
<td>2.36</td>
<td>0.32</td>
<td>1.65</td>
<td>0.11</td>
<td>30.08%</td>
<td>3.21</td>
<td>Significance</td>
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<tr>
<td>Psychiatric Depression Scale</td>
<td>Degree</td>
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<td>1.01</td>
<td>7.32</td>
<td>0.21</td>
<td>35.62%</td>
<td>3.47</td>
<td>Significance</td>
</tr>
</tbody>
</table>

The value "T" is a tabular at the level of 0.05 = 1.951

Table (3) shows statistically significant differences between the averages of pre and post measurements in the level of psychological depression among the elderly, where the value of (t) of the table is greater than the value calculated at the level of significance (0.05).

Discussion of results. It is clear from Table (2) that the rate of improvement in the quality of social life measurement form ranged from (55.77%) to social change variable (87.20%) to the variable of social relations.

The researcher attributed these percentages to the fact that the program contains recreational activities. The social relations of the contribution of the program in strengthening the relations between the elderly, which played a major role in improving the psychological stability of the elderly in the dimension (social happiness - psychological reassurance)

The researcher explained the percentage of improvement in the social stability variable and the social assessment, which obtained (67.25%) (55.77%), which are the least affected by comparing the rest of the quality of social life questionnaire to the relative stability in that stage, Psychological, and so after the elderly work for public servants led to an acceptable state of social appreciation for these group.

The researcher believes that exercise in general has an effective role on the psychological aspects of practitioners, especially the elderly, where the practice of group exercises and friction with peers generates a spirit of cooperation and joy among the individuals practicing and less sense of loneliness.

In this regard, Ayman Siddiq (2001) states that in order to reduce these changes that accompany age, physical activity should be given to
adults aged 55-65 years and above. Physical activity should include recreational activities, (Walking, grading) Home work for improving physical fitness, cognitive and psychological deterioration (149: 3)

The result is that those with high grades in the quality of social life have a sense of optimism and well-being, are satisfied with their existence, find life rewarding, and those with low scores are pessimistic, depressed, and depressed.

Thus, the first hypothesis of the research, which states that there are statistically significant differences between the averages of pre and post measurements in the quality of social life of the elderly and for the benefit of the research group.

Table (3) shows that there are statistically significant differences between the averages of the pre and post measurements in the level of psychological depression in the elderly where the value of (T) table is greater than the value calculated at the level of significance (0.05) and attributed the researcher to the result to the proposed recreational program where The practice of sports recreational activities in general has an active role on the psychological aspects of practitioners, especially the elderly, Since the practice of group activities and friction with peers generates a spirit of cooperation and joy among the practicing individuals and less feelings of loneliness.

In the opinion of the researcher that the age and its various effects are only natural changes that accompany the progress in life and lead to changes observed in the construction and function and increase in the exposure to disease pressure changes in aging involved in all systems of the body.

Thus, the second hypothesis of research, which states that there are statistically significant differences between the averages of pre and post measurements in the quality of psychological depression among the elderly.

**Conclusions**

1- The proposed recreational program has led to a reduction in the level of depression among the elderly.

2- The proposed recreational program has led to an improvement in the quality of life of the elderly.

**Recommendations**

- Implementation of the proposed recreational program for the development of satisfaction with the social life of the elderly.
- .Involve the elderly to the greatest extent possible with social activities and benefit from their experiences as this leads to the
enhancement of the quality of social life.
• Setting up social programs that will alleviate the grief of the elderly.
• Conduct more studies and research on the level of elderly social skills.
• Recommends the researcher to circulate the proposed program to clubs and homes for the elderly

References
1- Amani Mohammed El-Sfta: Effectiveness of a sports recreation program on the quality of social life in the elderly, published scientific research, Journal of Science and Arts of Physical Education, Faculty of Physical Education, Assiut University, 2015.
2- Ayman Mustafa Siddiq: Standardization of the trend towards life, published research, the first world seminar on mental health in the Islamic world, Yemeni Society for Mental Health in the Republic of Yemen, October 2001.
9- Hina Ahmad Hashmi, Maddy Malhotra (2012) : Correlational Study of Life Satisfaction and Hopelessness Among Adults, Lap Lambert Academic Publishing GmbH KG
11- Ibrahim Mahmoud Wagih: A measure of satisfaction with the study, Cairo, the Anglo-Egyptian Library, Cairo, 2006.
12- Kamiliya Zine El Abidine Abdel-Rahman: "The effect
of a recreational program on psychological compatibility among the elderly, Master thesis, Faculty of Physical Education, Tanta University, 2003.


15- Mohammed Tamadar Taha Abdel Rahman: "Anxiety and depression in the elderly who live alone and are attending clubs of the elderly as well as those living in the homes of the elderly, a field study, Faculty of Education, Ain Shams University, Cairo, 2006.

16- Owaied Sultan Al-Mishaan: "Study of differences in depression among adolescents and young people of Kuwait, the educational magazine, volume 10, No. 37, Kuwait University, 2000.


19-Saleh Mohammed Al-Sagheer: Social, psychological, economic and health determinants affecting the level of satisfaction with life in the elderly contracted, (analytical field study in Riyadh area), published scientific research, Journal of Educational and Psychological Sciences, University of Jordan, 2008.

20-Sherif Abdel Moneim Mohamed, "Effect of recreational activities on some physical, psychological and social aspects of the elderly in Menia Governorate, Master Thesis, Faculty of Physical Education, Minia University, 2005.


