INTRODUCTION
A The Brazilian population is growing older and not always this aging occurs in a healthy way, making this population needs special attention. Therefore, we seek to understand how the relationship between public policies for the health promotion of the elderly and their effectiveness with the population occurs.

The objective of this study is to investigate the public health promotion policies of the elderly in Brazil, to investigate two health promotion projects and to encourage healthy living habits and physical exercise for the elderly in the city of Ananindeua in the State of Pará and check with the elderly how the practice of physical exercise contributes or not to their health.

With regard to health care in the Unified Health System (SUS), we see daily in the news the precariousness of hospitals and health units, without medical staff, inadequate physical structure, lack of resources, among other aspects. Assuming that health is a constitutional right, it is the State's duty to subsidize this right and public policies are directed to that purpose. Inform the population about the prevention and treatment of diseases that affect the elderly.

In addition to the common diseases such as hypertension, diabetes, cardiopathies, the elderly are affected by sarcopenia, which is the reduction of muscle mass, thus causing loss of strength and functionality, preventing the elderly from performing basic daily activities (PIERINE et al., 2009). The practice of physical exercise is of fundamental importance for both prevention and control of diseases that affect this population.

Table 1. Projects of public policies focused on the health of the elderly.

<table>
<thead>
<tr>
<th>Nº of law/Ordinance</th>
<th>Date</th>
<th>Project Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Law nº 8.842</td>
<td>4th of January 1994</td>
<td>Ensures social rights to the elderly, creating conditions to promote their autonomy, integration and effective participation in society and reaffirming the right to health in the various levels of SUS care.</td>
</tr>
<tr>
<td>Ministerial Order No. 1355 of 1999</td>
<td>1999</td>
<td>National Health Policy of the Elderly This policy assumes that the main problem that can affect the elderly is the loss of their functional capacity, that is, the loss of physical and mental skills necessary to perform basic and instrumental activities of daily living.</td>
</tr>
<tr>
<td>Ordinance 10/2002</td>
<td>28th of April 2002</td>
<td>Organization and Implementation of State Health Care Networks for the Elderly As part of the operationalization of the networks, the standards for registration of Reference Centers for Health Care for the Elderly (Ordinance No. 249 / SAS / MS, 2002), which are General Hospitals and Reference Centers for Health Care for the Elderly.</td>
</tr>
<tr>
<td>Law nº 10.741</td>
<td>1st October 2003</td>
<td>Statute of the Elderly The Elderly Statute breaks the response of the State and society to the needs of the elderly population, but does not have the means to finance the proposed actions.</td>
</tr>
</tbody>
</table>

This study contributes to an explanation about the public health policies of the elderly in Brazil and also on the importance of physical exercise as prevention and control of chronic pathologies. Aiming to show the relation of the public policies focused on the health of the elderly and their effectiveness with the population.

METHODOLOGY
The study was composed of a bibliographical research, with an empirical analytical approach, of the applied type regarding its nature, that in the approach of the problem is qualitative, exploratory and explanatory, making a survey of the main public policies, focused on the health of the elderly in Brazil, analyzing their respective effectiveness in the elderly population. Visits were carried out in two (2) places that develop works aimed at practicing physical exercise with elderly people (Seringal Park and IDEAS), both in the city of Ananindeua-Pará, Brazil, with the objective of interviewing the elderly people who attend these spaces, to collect data such as: sex, age, weekly frequency to space, and reports of benefits from physical exercise through
There was no significant pathological relationship between variables and sites.

Figure 1 presents the most frequent responses of the two groups (seniors of Seringal and seniors of Ideas) when asked "What benefits did physical activity bring to you during the time you are attending the project?"

Figure 1. Perception of individuals about the benefits of physical activity.

Note: QS: quality of sleep; QoL: quality of life; RD: reduction of pain; DIS: provision.

Figure 2 shows the weekly frequency with which the Seringal and Ideas group perform some physical activity.

Figure 2. Weekly frequency of physical activity performed by individuals from both groups.

Note: s: week; the values are displayed as a percentage.

In the study area of Seringal Park, we have a sample (n) equal to 10, where 20% of the sample is composed of males and 80% of females, aged 60 to 75 years and weekly frequency to space between 1 and 5 times, where 100% of the sample reported to have had some kind of benefit with the practice of physical exercise. Still within this sample, we identified that 30% are diabetic, 70% hypertensive 100% of the sample reported to feel some type of corporal pain joint inflammation (arthritis, arthrosis, rheumatism, fibromyalgia) and/or spine.

The space Seringal Park, located in the city of Ananindeua in the State of Pará, Brazil, is formed by a 12,000 m² green area, where it has an outdoor gym, trails and a playground, which unfortunately does not live its best moment, because it is...
maintained by the public power and the space does not receive the necessary care and maintenance to welcome its visitors properly. The use of space is free and open to the general public seven days a week. The space is a very wooded area, the Seringal Park does not provide any kind of assistance to the elderly who frequent it. There is no health professional, social service or a simple guide to provide some kind of care or information. The appliances that make up the outdoor gymnasium structure, present in this space, are in a state of abandonment, rusty, in a dangerous condition of use. In order for the elderly to use this space, they depend on the voluntary work performed by some physical education professionals, who take turns during the week, providing assistance and support in the prescription, orientation and monitoring of physical exercises and recreational activities.

In the space researched ideas, we had a sample (n) equal to 10, where 10% of the sample was composed by males and 90% by females, aged between 60 and 66 years, which maintains a regular frequency in the space of 2 to 3 times per week, where 100% of the sample reported having had some benefit from physical exercise. The pathological analysis of this sample shows that 20% have diabetes, 50% hypertension and 70% reported having some type of body pain from joint inflammations (arthritis, arthrosis, rheumatism, fibromyalgia) and/or spine.

The ideas space, also located in the city of Ananindeua in the State of Pará, Brazil, is a private, non-profit space that welcomes free of charge the elderly population of the region, providing them with various workshops and activities such as water aerobics, hiking, theater workshops, dances, stretching, gymkhana, psychosocial and pedagogical accompaniment.

In Brazil, not always what is in the law, is fulfilled, accomplished and applied correctly, as we would like it to be. Our article 196 of the Federal Constitution (CF-1988), says that "health is the duty of the State and right of all," he still emphasizes that "health actions and services should be of public relevance, one of its guidelines the priority service for preventive activities." The State, in fact, offers us health services, but unfortunately it is precarious, insufficient to meet the needs of its needy and inaccessibility to most of the elderly.

The priority service for preventive activities, which is contained in the guidelines of article 196 of our Federal Constitution, which occurs, is delivered to the population with all disclosure and exposure that the opportunity affords, but in a short time the place is left without care, without support and the elderly are afraid of enjoying the space, because they hurt, fall, cut, and the space made to take care of health ends up harming them.

If there is no kind of voluntary service or service provided in public spaces for preventive health activities, these spaces simply do not work, are abandoned, deteriorated by time, looted and forgotten by the public power. Private spaces for preventive health activities are always the best option for those who can attend it; unfortunately these private spaces are few for the huge demand of elderly people who need to use it.

CONCLUSION
Based on the data obtained in the research it can be verified that there are several Laws that govern the health insurance to the elderly, public policies are placed in them, but their effectiveness is small, we perceive then that the relationship that occurs between the public policies for promotion of the health of the elderly and its effectiveness with the population is a political relationship with a promotional purpose of exposing the political act, with a date of eminent validity, where maintenance is briefly discontinued. The national project focused on the practice of physical exercise was from Health Academy (Outdoor Gym). The two spaces surveyed (public and private) show that the elderly who practice physical activity understand the importance of the activity and report improvements in their health, the public space visitors rely on the voluntary contribution of teachers who assist them in the activities, otherwise they would be able to use a space which, due to lack of proper maintenance, would pose a danger and risk to their health. In private space this type of problem does not exist, the service has quality, activities and various services are offered. The pathological indexes collected in field research among the elderly who attend the public space are greater than the elderly in the private space, showing the importance and necessity of encouraging more private spaces in this context. The problem is the shortage of private spaces for the health of the elderly, it would be of fundamental importance that partnerships between public and private power be established with the purpose of providing suitable and qualified spaces for the preventive health care of the elderly.

BIBLIOGRAPHIC REFERENCES


EFFECTIVENESS TOWARD THE POPULATION

In order to understand how the relationship between public health policies of the elderly and their effectiveness with the population occurs, we analyze the public policies focused on the health of the elderly, their laws, compliance and effectiveness with the population. This research project was carried out through a bibliographical research and a field survey, carried out in two spaces, one public and one private, with (n) sample equal to 10 elderly people in each space visited. We performed a general anamnesis where the following variables were collected: gender, age, weekly frequency and effects from physical exercise practice. We performed an anamnesis to detect preexisting diseases such as: diabetes, hypertension, and body pains from joint inflammation (arthritis, arthrosis, rheumatism, fibromyalgia) or / or spine. We observed the following results: 20-30% of the sample in the two spaces were diabetic, 50-70% hypertensive, 70-100% presented body pains, age 60-75, women became 90% of public space visitors and 80% of the participants in the private space, the sample reported attending the spaces from 1 to 5 times a week and 100% of the sample reported having obtained some kind of benefit through physical exercise, the lower percentiles refer to the private space, which as observed has lower pathological indexes than the public. The relationship between the public health policies of the elderly and their effectiveness with the population occurs in a promotional way, with subsequent public neglect.

Key words: Elderly, Public Policies, Physical Exercise

LES RELATIONS DES POLITIQUES PUBLIQUES TOURNÉES VERS LA SANTÉ DES PERSONNES ÂGÉES ET LA MISÉ EN PLACE AVEC LA POPULATION

Dans le but de comprendre comment s'agit la relation entre les politiques publiques de santé des personnes âgées et la mise en place dans la population, s'est analysé les politiques publiques existantes tournées vers la santé des personnes âgées, leurs lois, réalisations et mises en place parmi la population. Ce projet de recherche s'est déroulé par moyen d'une recherche bibliographique et d'une autre de chaque espaces, réalisée dans deux espaces, un public et un autre privé avec 10 personnes âgées dans chaque espace visité. S'est effectué une anamnèse général dont ces variables ont été collectées : sexe, âge, fréquence hebdomadaire et les effets de la pratique d'exercice physique. Et aussi une anamnèse pour détecter des maladies pré-existantes comme : le diabète, l'hypertension et s'ils présentaient des douleurs corporelles provenant d'inflammations articulaires (arthrite, arthrose, rhumatisme, fibromyalgie) ou colonne. S'est observé les résultats suivants : 20-30% de l'échantillon dans les deux espaces étaient diabétiques, 50-70% souffrant d'hypertension, 70-100% avec douleurs corporelles, âgés de 60-75, les femmes sont presque 90% des personnes fréquentant l'espace public et 80% de l'espace privé, l'échantillon a dit fréquenter les espaces 1 à 5 fois par semaine et 100% de l'échantillon a dit avoir déjà obtenu de quelque sorte de bénéfice à travers de la pratique d'exercice physique, les plus petits percentiles ce sont à l'espace privé, qui comme observé, maintient des indices pathologiques plus petits que l'espace public. La relation des politiques publiques vers la santé des personnes âgées et sa mise en place avec la population arrive d'une forme proportionnel, avec ultérieur désintérêt public.

Mots-Cliés : Personne âgée, Politiques publiques, Exercice physique.

LA RELACIÓN DE LAS POLÍTICAS PÚBLICAS ENFOCADAS A LA SALUD DE LOS ANCIONES Y SU EFECTIVIDAD PARA LA POBLACIÓN

El resumen

Para comprender cómo se produce la relación entre las políticas de salud pública de los ancianos y su efectividad con la población, analizamos las políticas públicas centradas en la salud de los ancianos, sus leyes, el cumplimiento y la eficacia con la población. Este proyecto de investigación se realizó a través de una investigación bibliográfica y una encuesta de campo, realizada en dos espacios, uno público y otro privado, con una (n) muestra igual a 10 ancianos en cada espacio visitado. Se realizó una anamnesis general en la que se recopilaron las siguientes variables: sexo, edad, frecuencia semanal y efectos de la práctica de ejercicio físico. Se realizó una anamnesis para detectar enfermedades preexistentes como: diabéticos, hipertensión y dolores corporales causados por la inflamación de las articulaciones (artritis, artrósis, reumatismo, fibromialgia) y/o columna vertebral. Observamos los siguientes resultados: 20-30% de la muestra en los dos espacios fue diabética, 50-70% hipertensa, 70-100% presentó dolores corporales, 60-75 años, las mujeres se convirtieron en 90% de las visitantes del espacio público y 80%. de los participantes en el espacio privado, la muestra informó que asistió a los espacios de 1 a 5 veces por semana y el 100% de la muestra informó haber obtenido algún tipo de beneficio a través del ejercicio físico, los percentiles más bajos se refieren al espacio privado, que, según se observa, tiene índices patológicos más bajos que el público. La relación entre las políticas públicas de salud de los ancianos y su efectividad con la población ocurre de manera promocional, con el consiguiente descuido público.

Palabras clave: Ancianos, Políticas Públicas, Ejercicio Físico.

A RELAÇÃO DAS POLÍTICAS PÚBLICAS VOLTADA PARA SAÚDE DO IDOSO E SUA EFETIVAÇÃO JUNTO À POPULAÇÃO

Resumo

Com o propósito de entender como ocorre a relação entre as políticas públicas de saúde do idoso e sua efetivação junto à população, analisamos as políticas públicas voltadas para saúde do idoso existentes, suas leis, cumprimentos e efetivações junto à população. Esse projeto de pesquisa ocorreu através de uma pesquisa bibliográfica e uma de campo, realizada em dois espaços, sendo um público e outro privado, com (n) amostra igual a 10 idosos em cada espaço visitado. Realizamos uma anamnese geral onde as seguintes variáveis foram coletadas: sexo, idade, frequência semanal e efeitos oriundos da prática de exercícios físicos. E realizamos uma anamnese para detectar doenças pré-existentes como: diabéticos, hipertensos, e se apresentavam dores corporais provenientes de inflamações articulares (artrite, artrose, reumatismo, fibromialgia) e/ou coluna. Observamos os seguintes resultados: 20-30% da amostra nos dois espaços eram diabéticos, 50-70% hipertensos, 70-100% apresentavam dores corporais, idade 60-75, as mulheres chegavam a ser 90% dos frequentadores do espaço público e 80% dos frequentadores do espaço privado, a amostra relatou frequentar os espaços de 1 a 5 vezes por semana e 100% da amostra relatou já ter obtido algum tipo de benefício através da prática de exercícios físicos, os percentis menores referem-se ao espaço privado, que como observado mantêm índices patológicos menores que o público. A relação das políticas públicas de saúde do idoso e sua efetivação junto à população ocorre de forma promocional, com posterior descaso público.

Palavra-Chave: Idoso, Políticas Públicas, Exercício Físico