

Model and Activity Development in Adult Health Promotion Foundation, the Adult Health Learning Center, Wat Santiwiewek Takian Sub – District, Kabcherg District, Surin Province

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Abstract: The objectives of this research were: 1) to study the requirements and taking care of adult health in the adult health, learning center of Wat Santiwiewek, Takian sub-district, Kabcherg district, Surin Province; 2) to develop models and activities in the adult health promotion foundation; and 3) to analyze the means in the adult health promotion foundation in the adult health learning center of Wat Santiwiewek, Takian sub-district, Kabcherg district, Surin Province. This work is qualitative research. Document studying, in-depth interviews, and a focus group with 20 key persons were used. The Data was analyzed by content analysis and analytic induction. Results indicated that 1) The needs and health care of the elderly health learning center of Wat Santiwiewek, Takian sub-district, Kabcherg district, Surin province had found that the elderly need to be healthy and free from diseases. They should have a healthy diet and need to have recreational activities. 2) the development of model and activity in the adult health promotion foundation had found that there are three forms and activities for enhancing the well-being of the elderly: (1) physical well-being, (2) mental and intellectual well-being, and (3) social well-being. 3) Guidelines for enhancing well-being had found that: - 1) physical aspects include encouraging the elderly to understand the health, 2) psychological and intellectual aspects, including encouraging the elderly to participate in activities with others, and 3) social aspects, i.e., encourage activities with their families. The community should encourage the elderly to attend merit-making temples for achieving peace of mind.

Keywords: Adult Health, Promotion Foundation, Learning Center, Wat Santiwiewek, Surin Province

1. Introduction

According to the 12th National, Economic and Social Development Plan (2017 - 2021), it is approximate to the population of Thailand, 2010 – 2040. The middle and late-aged elderly are likely to increase and reflect an increased burden on health costs. Simultaneously, many older people still do not have enough income to support the elderly, which grows from 10.3 million (16.2 percent). In 2015, it was 20.5 million (32.1 percent) in 2040. Although older people are increasingly involved in the labor force, there is not enough income for expenses due to low savings and a significant income source. On this connection, there is 78.5% of the total revenue coming from the child's support. [1] In this point, section 3 and section 54 of the Constitution of the Kingdom of Thailand B.E. 2540 (1997) [2] have the essence of "individuals who are over 60 years of age and do not have sufficient income to receive state assistance", and in Section 5, Section 80 also states that the state must provide relief for the elderly, the poor, the disabled or the disabled and the disadvantaged to have a good quality of life and self-reliance. Also, organizations support elderly activities under the Thai elderly declaration, which provides fundamental factors for living and provides love, generosity, care from families, community societies, and learning opportunities to develop their potential continuously. If we look back at the past, therefore, it can be seen that the National Economic and Social Development Plan No. 7 (1992-1996) has adopted an elderly policy combined with the approach of improving the quality of life of the population. The agency has delayed redundancy services and, crucially, does not indeed respond to the needs of the elderly. [3] Therefore, the actual improvement of the quality of life of the elderly depends on the ability of individuals, which is the driving force for the well-being of life. It can be said that the government has seen the importance of the elderly from the past to the present.

In 2014, a Thai health survey by the Office for National Statistics found that 31.7 percent of older people suffer from hypertension nationwide, including diabetes. There is 13.3 percent of heart disease, 7.0 percent of heart disease, and 2.5 percent due to the prevalence of chronic diseases from these statistics. They had affected progression more severely, if not managed systematically. Additionally, part of the elderly still does not take care of themselves, which 17.8% exercised consistently enough, 33.0 percent smoked and drank 17.8% and 16.7% of alcohol, respectively. Only 21.8% of fruits and vegetables are eaten. As for the ability to pursue a career, only 12.2% of occupations were found to pursue careers. Due to the problem, the elderly lacked self-care and received little attention to development from stakeholders. Suppose left as such without research and development studies to

encourage older people to promote greater self-health. The burden of caring for the elderly with long-term problems will increase and continue to affect future generations' development. Therefore, all divisions of Thailand have taken into account the issues of the elderly [4]. It has consequently lacked action to promote the self-health of the elderly systematically and sustainably.

From this condition of the problem and its importance, the researchers are interested in studying the model and activity development in adult health promotion foundation. The adult health learning center, Wat Santiwiwek Takian sub-district, Kabcherg district, Surin province in physical, psychological, and social well-being, will help know the needs and health care of the elderly. The model and activity development in adult health promotion foundation, the adult health learning center, Wat Santiwiwek Takian sub-district, Kabcherg district, Surin province, can accommodate future changes to be appropriate.

2. Research Objectives

1. To study the requirements and taking care of adult health in the adult health learning center of Wat Santiwiwek, Takian sub-district, Kabcherg district, Surin Province.
2. To develop models and activities in the adult health promotion foundation.
3. To analyze the adult health promotion foundation in the adult health learning center of Wat Santiwiwek, Takian sub-district, Kabcherg district, Surin Province.

3. Research Methodology

3.1.. Population, Samples, And Key Informants

1. Population includes the elderly of the Elderly Health Learning Center of Wat Santiwiwek Takian sub-district, Kabcherg district, Surin province, a total of 100 persons.

2. Samples include the elderly of the Wat Santiwiwek Takian sub-district, Kabcherg district, Surin province in number 20 persons which specific selection.

3. Key Informants include qualified persons used in group discussions to develop patterns and activities to enhance the well-being of the aging health learning Center of Wat Santiwiwek Takian sub-district, Kabcherg district, Surin province, which includes: director of the learning center, community leader, experts, scholars, 10 persons.

3.2. Research Tools

a. Qualitative Research: The researchers created a tool based on the conceptual research framework based on an in-depth interview form created by the researchers to collect interview data.

1. Documentary studies are conducted and collected from relevant evidence documents, guides for establishing elderly schools, research reports, minutes of meetings, relationship documents that illustrate ideas, and the Principles theories about the elderly.

2. Non-participation observation is a tool used to observe activities such as attending meetings, commenting, and participating in events. Observing planned operations Observation and evaluation of activities of the elderly health learning Center of Wat Santiwiwek Takian sub-district, Kabcherg district, Surin province

3. The interview form includes:

Part 1 General Information of Interview Respondents, Part 2 Information about the healthcare needs of the elderly. In Kab Cherng District, Surin Province, and Part 3 Comments and Other suggestions.

4. A specific group discussion form qualified for a specific group discussion to determine the model of activities to promote elderly well-being and guidelines for promoting elderly well-being, including the director of the learning center, community leaders, experts, and academics.

C. Data Collection Tools

Step 1: Collect qualitative research data with the elderly, who are targeted by in-depth interview observation.

Step 2: Synthesize the information from the interview to find patterns and activities for promoting elderly well-being.

Step 3: Take patterns and activities from stage 2 to discuss specific groups from qualified persons to analyze guidelines for promoting the well-being of the elderly.

D. Data analysis statistics:

Qualitative data analysis is the analysis and synthesis of data using content analysis methods.

4. Conclusion

Summary of the findings of the development of patterns and activities for promoting elderly well-being and guidelines for promoting elderly well-being from qualified persons in specific groups of conversations, including the director of the learning center, community leaders, experts, and academics. The researchers summarized the comments according to the objectives in the following order:

a. Education, needs, and health care for elderly health centers of Wat Santiwiwek Takian sub-district, Kabcherg district, Surin province had been found that the elderly needs to be healthy and free from disease. It is safe to have healthy food, and need to have recreational activities. They should have various knowledge about the types of drug use, and not smoking, a requirement to participate in Buddhist activities for the *Vipassana* (insight meditation) practice for gain the benefits in knowledge, and practice the proper profession. They should develop funny emotions, and stress-free activities to take care of their mental health, as well as participating in public activities for doing social activities. Participation in resolving conflicts tackling unfairness in society

b. The development of patterns and activities to enhance the well-being of the elderly of Wat Santiwiwek Takian sub-district, Kabcherg district, Surin province had been found that there are three forms and activities for enhancing the health of the elderly: 1) physical well-being consists of three activities are healthy, safe, non-toxic and healthy foods, 2) mental and intellectual well-being consisting of four activities: beauty, goodness, peace and consciousness, and 3) social well-being consisting of three activities: benefits, justice, peace.

c. Guidelines for enhancing elderly well-being at the wellness learning center of Wat Santiwiwek Takian sub-district, Kabcherg district, Surin province had been found that 1) Physical aspects include encouraging the elderly to understand healthy having and regular health check-ups, promoting physical activity, such as dancing, and encouraging them to see a dentist for oral health check-ups in every six months and annual health check-ups, 2) mental and intellectual health checks. The community should enhance understanding of the benefits of the elderly and encourage the elderly to attend merit-making temples. Meditate and listen to dhamma to achieve peace of mind.

5. Discussion

The results of the model and activity development debate in adult health promotion foundation, the adult health learning center, Wat Santiwiwek Takian sub-district, Kabcherg district, Surin province.

5.1. Physical aspects:

The results showed that: The elderly want to stay healthy. Exercise regularly, eat healthy foods, keep your body clean and have annual check-ups. Always check body. However, the physical promotion activities should encourage the elderly to understand healthy eating and regular check-ups. They should promote physical activity such as wood dance, which helps maintain the movement of joints in line with Mintra Siriwan [5] to mean that the elderly are 60 years of age or older. Retirement or retirement from a full-time job It must adapt to deteriorating physical and psychological changes in the ability to continue living happily and in line with the concept of Eliopoulos. [6] It mentioned that aging causes physical changes, causing the functioning of the body's systems to change in a deteriorating way, such as decreased flexibility of blood vessels. The immune system has a decrease in function. Therefore, the elderly can cause diseases, especially chronic diseases. Age-related health problems often cause chronic diseases. The elderly includes hypertension, diabetes, arthritis, asthma, paresis, and disability.

5.2. The Mental and Wisdom Aspects:

The results showed that: The elderly want to accept contributions to society and be respected by members of their families. Mental or intellectual promotion activities should build understanding with the elderly as they enter the elderly to adapt happily to the elderly society, and should encourage activities with others. Socialize, adjust your mindset. Always remind yourself not to take heart and to forgive others, which is consistent with the concept of Laddawan Singkhamfu [7] which mentions that Quality of life is a feeling of satisfaction and happiness in an individual's life according to the condition in which they live. It is recognized and decided by the person under the concept of Chanpen Niamin [8] It has been said that the loss of a loved one. This is because a friend dies or a person who is a close relative or partner who dies from causing the elderly to feel isolated, taken from their loved ones, causing sadness easily and in line with the concept of Apichai Mongkol and group [9] has mentioned a happy or distressed state of mind. Their health conditions Physical illnesses that affect the psychological side and mental illness

C. Social Aspects: The results showed that: The elderly need to get the attention of others. Be part of social families and groups, and support social and play a role in society according to their aptitudes. In addition to that,

the elderly need to participate in merit-making, meditation practicing, and listen to the Dhamma. Social promotion activities should encourage the elderly to exercise regularly, to do activities with family, friends, to have good physical health, and to encourage the elderly to attend merit-making temples. meditation and listening to dhamma to have good mental health, which is consistent with the research of Kaniknan Yoksakul [10] Studies on the participation of the elderly in health activities showed that the elderly participated in the activities and participated in a total of 5 procedures. At the stage of analyzing the problems, most of the samples were sick with headaches, insomnia, loss of appetite, hypertension, finding out that it was caused by having an unhealthy body, weakness, lack of knowledge to do. Overworked loneliness planning for the elderly, interested in the most appropriate posture activities, the practice has organized 8 healthy activities. In the follow-up stage, the assessment showed that the elderly had improved physical, mental, and social health. The elderly uses the group process as a stimulus to create health activities that truly meet the needs which affect continuity and sustainability and are consistent with the research of Wanchai Noichan [11] to study about “the improving healthcare capabilities. The self-esteem of the elderly in Ban Pong Nuea In Hang Dong District, Chiang Mai province, the elderly was found to participate regularly, including persuading their children or neighbors to participate in activities, and that the elderly had built good relationships with each other, allowing the elderly to join in the increased exercise and as a model for bringing exercise groups to keep the elderly healthy.

6. Suggestions

1. The School of Aging or Takian Sub-District Administrative Organization should take the needs or forms and health promotion activities seriously so that the elderly receives thorough care.
2. The relevant authorities should support the resource factors involved in enhancing the well-being of the elderly.
3. The Sub-District Administrative Organization should establish activities to enhance the well-being of the elderly clearly and continue to do so that the elderly is aware to maintain physical, mental, and intellectual health and social aspects.
4. The elderly must be aware of problems with themselves and cooperate to learn how to solve problems together with the relevant authorities.
5. The health-enhancing activity should be further realized in the changes of the body of the elderly by age, there may be learning activities, preparing to die so that they can understand the reality of life and be able to face problems effectively

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