Self Care, Family Care and Quality of Life of the Elderly

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ABSTRACT

This research is a qualitative study which aims to investigate 1. Self Care of the Elderly 2. Family Care of the Elderly and 3. Quality of Life of the Elderly in the semi-rural and semi-urban Ban Pa Kan Community, Khlong Hae Municipality, Hat Yai District, Songkhla Province.

Data were collected through in-depth interviews with the target informants which were the elderly and their family members in the above-mentioned area.

The results show that, with regard to the Self Care of the Elderly, most are able to take care of themselves well when performing daily activities. The reason is that they are at the beginning stages of old age (60-69 years of age), and therefore are still physically strong enough to help themselves when getting food, having meals, going to the bathroom, sleeping and doing light exercise such as taking a walk, gardening, cycling, etc...

In regard to the Family Care of the Elderly, the elderly are taken care of with close attention by family members. This is due in part to the fact that the majority of the elderly live with their family members, and therefore it is convenient for the family members to provide proper care.

As for the Quality of Life of the Elderly, the key factors promoting a high quality of life for the elderly are financial status, having their own residence, being healthy, and a feeling of comfort that is derived from living with their family members.

Keywords: Elderly, Self Care, Family, Quality of Life
INTRODUCTION

Due to the success of the Population Policy in Thailand since the 3rd National Economic and Social Development Plan and the advancement of Health Systems, the birth rate of people had decreased to some point below the replacement level. This led to a longer lifespan for Thai people. And, the structure of Thai population changed drastically from what it used to be like in the past. The proportion of the senior citizens or the elderly (age 60 and up) increased to 5.4% in 1980, from 4.9% in 1970. And, it was forecasted to be 9.5% in 2011 (Office of the National Economic and Social Development Board under the Prime Minister’s Office, 2005: 2).

From the fact that the proportion of the elderly is increasing, there are some effects on the elderly themselves and the people around them. Being in the years of old age, the role and importance of the elderly in the society are more restricted. Their health and body are declining and this may also cause a poor state of mind and a bad mood for them. Some body abilities of them may be finished (Napaporn Seukseua, 2009: 22). Because of those changes taking place, the elderly are likely to encounter several health issues such as rheumatic diseases, digestive system diseases, diabetes, ocular diseases and so on (Jintana Songprasert, 1995). Therefore, the elderly should be alert to self care in order to prolong the good conditions of their body and prevent as many health problems as possible. The elderly should pay much attention to the way they eat, rest, do exercise and so on (Aramsri Tawornnurak, 2000: 20). In terms of the effects on the people around the elderly, there is a requirement for those people to provide proper care for the elderly always. This may not be done easily because presently in the society the family members (who are laboring-age people) have to go out to work in order to earn enough money for the family. Most of the elderly lack income from their living. And, there has been a tendency of getting married in the late years and having less children among Thai people, which
leads to a smaller size of Thai family units. As a result, one family member is supposed to take care of 6 old people. This can be explained better by saying that one grandchild is supposed to take care of 2 parents and 4 grandparents (Keua Wongbunsin, 2008: 9). Nevertheless, taking care of the elderly has always been a major role in the Thai society since the beginning. Especially in the rural areas, this concept or value of being grateful to the elderly for their parental role and taking care of them in return still prevails. And, most of the elderly in the rural areas live with their family members, spouses, children and grandchildren (Waree Kangjai, 1998: 18). From that fact that it is the role which the family members have to take, they are supposed to assist the elderly with daily activities, make sure that the elderly stay in normal conditions both physically and psychologically, and take the elderly to the hospital when needed. If the family members have a good understanding of health and mind conditions and alterations, and can provide proper care for the elderly in each particular situation, the elderly will feel content and live happily. It will also be an indicator of a high quality of life of the elderly.

From my own literature review, it was discovered that most research works had primarily studied the self care of the elderly, the quality of life of the elderly and the support of the family for the elderly. These issues were investigated both solely or comparatively. The areas studied were mainly urban and suburban/rural areas. Some works had examined both area types in comparison. In addition, some other works had studied specific places such as foster homes, clubs of senior citizens and so on. However, none of those works had investigated the self care, family care and quality of life of the elderly in a semi-rural and semi-urban area. To examine these was to see more sides of the elderly issue. And, studying a semi-rural and semi-urban area would reveal the way of living by the elderly in the changing world. From the reasons explained, this research of Self Care, Family Care and Quality of Life of the Elderly had
been conducted. The sample area chosen was Ban Pa Kan Community, Khlong Hae Municipality, Hat Yai District, Songkhla Province.

Ban Pa Kan Community is 5 kilometers far from the downtown of Hat Yai, and a semi-rural and semi-urban area. Within the size of 1.800 square kilometers, Ban Pa Kan Community has a mix of rurality and urbanity. Geographically, there are rice fields and rubber plantations. Most of the people live on doing agriculture. In regard to its urbanity, the cause is the expansion of the downtown. Highways and roads have been constructed in order to link Ban Pa Kan Community to the downtown of Hat Yai. Villages for sale have been built up in several spots. Other businesses also have been introduced to Ban Pa Kan Community, for example, convenient stores, restaurants, karaoke, etc... Consequently, there are new and more people coming to live in Ban Pa Kan Community, and it has become a community of diverse subcultures. With regard to the relationships among the people, there are still both the old traditional way where people live collectively with much interaction and the new urban way where people live individually with no interaction.

THE OBJECTIVES OF THIS RESEARCH

1. To study the self care of the elderly in Ban Pa Kan Community, Khlong Hae Municipality, Hat Yai District, Songkhla Province.
2. To investigate the family care of the elderly in Ban Pa Kan Community, Khlong Hae Municipality, Hat Yai District, Songkhla Province.
3. To examine the quality of life of the elderly in Ban Pa Kan Community, Khlong Hae Municipality, Hat Yai District, Songkhla Province.
THE RESEARCH METHODOLOGY OF THIS RESEARCH

This research is a qualitative study. Data were collected through in-depth interviews. There were 2 groups of target informants: the elderly and the family members. As for the group of the elderly, 12 people were selected from the results of the ADL (Activity of Daily Living) questionnaire. All of them scored higher than 12. In the group of the family members, 8 people were chosen from the families of the elderly. In total, the number of target informants for this research was 20 people. The sample area was Ban Pa Kan Community, Khlong Hae Municipality, Hat Yai District, Songkhla Province. The credibility of data was established by checking the accuracy of the contents with the informants several times throughout the research period. The analyzed data were brought back to the informants to check for correctness of understanding before the conclusion was made. The thoroughness of data was assured by interviewing each of the informants a few times, until the objectives of this research were answered. The interviews ended when the informants had given out all the information. In terms of data analysis, frequency distribution was used to analyze the personal data of the target informants. And, content analysis was used to analyze the data of self care, family care and quality of life of the elderly. To clarify, the messages or expressions from the interviews of the informants were analyzed, categorized in the respects of speech type and meaning, and topicalized by describing with quotes.

THE DISCUSSION OF THIS RESEARCH

Self Care of the Elderly in Ban Pa Kan Community, Khlong Hae Municipality, Hat Yai District, Songkhla Province.

From this research, it was found that the elderly in Ban Pa Kan Community are basically 60-80 years old. Most of them finished Grade 4 at school. In terms of self care, most of them are able to take care of themselves
with many things because they are mostly at the beginning stages of old age. As for eating food, they have 3 meals a day and primarily eat rice at every meal. It is their own belief that eating rice makes them full. Grandma Puifai said, “I eat rice 3 times a day, in the morning, at noon and in the evening. I don’t drink tea or eat something else instead of rice, although I can do that. I always need to eat rice.” Having rice as the primary food at all meals reflects the Thai way of life, especially in the rural areas. Thailand is a nation of agriculture with the rice business being on top. The majority of people in the rural areas live on doing agriculture. In Ban Pa Kan Community, in the past the elderly used to produce rice and rubber because of the geographic conditions. Therefore, having rice as the primary food at all meals was very important in order to give them energy for physical work. However, the majority of the elderly don’t work anymore because of their weaker bodies. Some of the elder have changed their way of eating. In stead of having rice for breakfast, they have soy milk, tea or oatmeal. They don’t have to have much energy for physical work anymore, so they don’t need to eat heavy food at every meal. This reflects a change in the Thai way of eating. The elderly have come to eat like people in the urban areas more. Some of them even have rice for breakfast and drink coffee later. The reason is that they are accustomed to doing it now and it makes them energetic. Grandma Gim said, “In the morning, I have a dish of rice and a cup of coffee after that. It makes me feel energetic. I do this every day, although I don’t need to. My friends only drink coffee and don’t eat rice. But, I like to eat rice first and then drink coffee.” The finding that the elderly have rice and coffee for breakfast indicates the mix of rurality and urbanity.

The elderly in Ban Pa Kan Community cook their own food or supervise the cooking of their family members. They don’t like to eat ready-made food. This supports the research work of Saowapa Pornsiripong et al. (1996). It describes the nature of rurality that the elderly prefer eating the food that they cook themselves or their family members cook for them. They find it tastier.
The majority of the elderly in Ban Pa Kan Community like to drink warm water and they boil the water before drinking it. The reason is that in this community people still consume underground water and it is not clean enough yet for drinking. They need to boil the water in order to purify it first. The elderly in Ban Pa Kan Community choose to do light exercise. They perform things that they are good at and suit their ages. They are aware of their health issues when doing exercise. The most common ailments found are blood pressure diseases, diabetes and rheumatic diseases. And, the most common ways to do exercise are taking a walk, doing aerobics, gardening, cycling and going to places. These activities are easy to do on their own. And, there is a lot of space for the elderly to do exercise in Ban Pa Kan Community, either at their own houses or somewhere nearby. They like to do exercise in the morning because of the preserved nature in the community, fresh air and light traffic. However, there are also some of the elderly who still work and consider it doing exercise. Grandma Puifai said, “To sell things is to do exercise for me. I’m not sweaty, but I don’t get pains.” Grandma Jai said, “I don’t do exercise at all, but I cut the grass. That’s the same as doing exercise, I think. I get sweaty doing that.”

The elderly take a shower once or twice a day, depending on the weather. They do their own laundry. As for resting, most of the elderly in Ban Pa Kan go to bed approximately at 9 p.m. and get up before 6 a.m. The reason why they go to bed late could be that they take a nap during the day and watch TV before bedtime. This is an example to indicate that Ban Pa Kan Community is changing in terms of technological advancements. The most popular TV programs among the elderly are news, teachings of Buddhism (Dharma) and soap operas. The finding supports the research work of Saowapa Pornsiripong et al. (1996). It explains that the period of time for sleeping by the elderly is approximately 6-10 hours. But, the research work of Sawittree Limchaiarunreuang (1993) describes something different. It says that the elderly
go to bed early and get up early. The period of time for sleeping by the elderly is shorter, 4-6 hours each night.

With regard to their excretory system, most of the elderly go to the bathroom once a day in the morning, and don’t have trouble. If there is a problem, it will be constipation because they don’t drink enough water each day. When having this problem, the elderly will stay in the bathroom until the problem goes away, take medicine or do nothing. Another interesting issue is tobacco smoking and local whiskey drinking. This issue involves the elderly who are male only. Their attitudes towards tobacco smoking and local whiskey drinking are worth examining. They prefer smoking tobacco to smoking cigarettes because tobacco is cheaper. They also want to help the local people who produce it. They smoke tobacco and drink local whiskey in part to socialize with friends in the community. Some of them drink local whiskey before their meals, for they believe that it helps their digestive system. Grandpa Kit said, “It costs me 15 baht per month to smoke tobacco. I buy it from the local. If you ask me why I don’t smoke cigarettes, I’d say that I want to promote the local businesses on agriculture. If I don’t buy things from them, they will not produce more. And, if you ask me if it’s bad for my health, I’d say that it’s not too bad. I have to smoke tobacco because I have to socialize with my friends. For example, when I go to a funeral, the others start smoking and I am supposed to join them. There is always the first one and then the others follow. People smoke their own tobacco and I smoke mine. Actually, I can live without smoking it. But, I am the leader of the community here. If my people drink local whiskey and I don’t or they buy tobacco for me and I don’t smoke it, it will be an uncomfortable situation for everybody. So, I choose the middle road, smoking and drinking occasionally. The others won’t be displeased.” Grandpa Kit again said, “I drink local whiskey as medicine because it helps my digestive system. Old people don’t really have acids anymore. And, I only drink it at dinner, just at one meal.” Nevertheless, in reality tobacco smoking and local
whiskey drinking are very bad for people’s health, and it’s even worse for the health of the elderly. Their bodies are declining from the weakness of the immune system and other systems. They are likely to get sick more easily than those who are younger than them. Therefore, the elderly should stop doing these things which might affect their health in a bad way. Or, they should at least reduce the occasions to do these things.

**Family Care of the Elderly in Ban Pa Kan Community, Khlong Hae Municipality, Hat Yai District, Songkhla Province.**

The people who take care of the elderly in Ban Pa Kan Community are primarily female because female people are better at giving care and comfort. Additionally, female people can understand the elderly better than male people. Usually, the male elderly are taken care of by their wives and the female elderly are taken care of by their children. This finding is supported by the research work of Malinee Wongsit and Siriwan Siribun (1998). Thai families in the rural are extended, and the elderly in most occasions live with their spouses and children. This finding is supported by the research work of Sopa Hoisang (1998). The majority of the elderly are capable of taking care of themselves and physically healthy. Therefore, there is not much care needed from the family members. The elderly can even help their family members with the housework such as cleaning, looking after grandchildren, gardening, growing plants like vegetables or flowers, taking care of the plants and feeding pets. This finding is supported by the research works of Pawadee Hemtanon (2005), Malinee Wongsit and Siriwan Siribun (1994) and Wannara Cheunwattana (2006). In Ban Pa Kan Community, some family members live near the elderly, if not living together. There is more chance for the elderly in the rural to interact with their family members. It is the style of living in the rural where all family members live close to each other or in the same village. This makes it easy for them to be
in contact with each other. It also helps maintaining the important role and status of the elderly in the family.

Basically for the elderly, the family members take care of food (buying, providing and cooking), health (taking to doctors, taking for check-ups/appointments), finance, clothes (buying, providing and cleaning) and traveling (such as taking to temples to make merits, taking to weddings, taking to funerals, taking to monk ceremonies, taking to meals outside, taking to friends, taking to tourist attractions, taking to shops and so on). This finding is supported by the research works of Sawittree Limchaiarunreuang (1993), Malinee Wongsit and Siriwan Siribun (1998) and Sopa Hoisang (1998). Most of the elderly are satisfied with the family care provided for them and do not ask for more things. The family members never complain or regret taking care of the elderly. Aunt Maew (Grandma Kim’s daughter) said, “I never regret taking care of her. Actually, I think it’s good that I have a chance to take care of her. When a daughter takes care of her parents, it’s an act of being grateful for their parental role and taking care of them in return. Some of my friends regret not having an opportunity to do this. They invite their parents to their houses, but old people prefer living in the rural. Another thing is that the family members enjoy the company of the elderly, too.” In the Thai society, it is very important to take care of the elderly in order to express the feelings of being grateful for their parental role in the past. It is obvious that in the rural the parents are closely bonded with their children. And, the children take care of their parents when getting old or sick. In addition, the fact that the elderly help looking after their grandchildren is another factor to create a strong bond between the elderly and the family members. This is different from what it’s like in the urban, where the grandchildren are sent to nurseries and there is no bond created between the elderly and the grandchildren.
Quality of Life of the Elderly in Ban Pa Kan Community, Khlong Hae Municipality, Hat Yai District, Songkhla Province.

From the research, it was revealed that the elderly in Ban Pa Kan Community have to have a good financial status in order to have a high quality of life. In other words, this means that they have to have enough money to spend on necessary items in daily life. The majority of the elderly wish for the stability of economy and consider money an important object for the living. They are in the agreement that money is crucial to the living and to have no money is to have no happiness. This indicates the fact that rural communities are gradually transforming themselves into urban communities. In the past, people in the rural used to rely on nature only for the living and they could live without money. However, in Ban Pa Kan Community at present the elderly cannot survive if they don’t have enough money for the living. Consumerism is making its way into several communities, nowadays. Money has become really important and necessary for the economy. If we don’t have money, we cannot survive. Things are exchanged only through money. Things are not just given and taken like what it used to be in the past anymore. Money is the object of priority, to the elderly and to everyone. The elderly feel happy when their children give money to them (Janpen Saengtianchai et al., 2001). Even so, some of the elderly choose to work and earn on their own. Although their children tell them to stop working, they are working still. The reason is that they feel more comfortable spending the money that they earn. Grandma Nian said, “I am happy to work and earn some on my own. I feel more comfortable to spend that money. It’s better than asking for it from people. I don’t feel comfortable spending the money received from people. I am proud of myself, too.” Grandma Puifai said, “If I stay at home and do nothing, I don’t get to see anybody. I’m happy to be doing this (selling things) because I see people and earn some money as well.” The elderly are happy that they don’t need money from their...
children and they can be independent financially. Having a residence to live in is the next factor to help promoting a high quality of life of the elderly. The elderly in Ban Pa Kan Community have their own residences and they don’t need to rent. They are aware of their good living situation, to be located and also the owners. Being physically strong and healthy helps promoting a high quality of life of the elderly as well. The elderly in Ban Pa Kan Community can help themselves when getting to places. Additionally, the elderly are psychologically healthy. This is due to the fact that their family members don’t ignore them and take good care of them. As mentioned earlier, the houses of the elderly and the family members in Ban Pa Kan Community are closely situat. Therefore, it’s very convenient for the elderly and the family members to go to each other. Also, the elderly can conveniently interact among themselves. They don’t feel lonely when the family members go out to work and leave their grandchildren home with them, for they can still socialize with their elderly neighbors. This makes the elderly happy and cheerful. It reduces their stress, too, from taking the new role in the family. They used to take care of the others, but now the others are taking care of them. This situation is not easy for them to adjust themselves to, being less important in the family. The adjustment can affect their feelings and way of living. If the elderly succeed in doing so, they will live happily in the family.

**THE SUGGESTIONS OF THIS RESEARCH**

1. As for Ban Pa Kan Community, there should be more career opportunities for the elderly to earn themselves some money. The elderly could be grouped for particular career activities, in accordance with their skills. These activities might be tie and dye printing, basketry, dessert making, etc… This idea is to support the income and also the pleasure of the elderly. Taking part in the activities, they will have a chance talk to each other. As a result, they will not feel lonely and ever think that they are useless.
2. As for further studies, the suggestions are to investigate similar things in other area types and to examine other groups of people. This research only studied a semi-rural and semi-urban area. Therefore, the possibilities might be to study urban areas, suburban areas, etc… In terms of people, the possibilities might be children, patients, etc…

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