Factors Correlated Quality of Life of the Elderly People in Residential Homes for the Elderly

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ABSTRACT

The purpose of this study was to explore factors correlated quality of life of the elderly in residential homes for the elderly in Nakhonratchasima Province. The factors included age, income, marital status, level of education and a number of relatives. The sample was about 100 elderly people who living in residential homes for the elderly in Nakhonratchasima Province, have good conscience and normal perception communicate .Data were collected using a structured interview with Likert type scales with 5 categories. Index of Congruence was 0.81 and Cronbach's alpha coefficient was 0.859. Data were analyzed with descriptive statistics and Pearson's Correlation Coefficient. The results showed that the elderly are satisfied in the quality of life in Physical quality of life is medium level. Psychological, the social relationship, environment and overall quality of life is good level. Education is positively related to quality of life in psychological (r= .224, P <.05) and a number of relatives are positively related to quality of life in psychological and interpersonal relationships (r =.224 and r = .253, P <.05) factors such as gender, age, marital status , education level, income, number of relatives not correlate significantly with the overall quality of life.

Keywords: quality of life, the elderly, residential homes for the elderly.

1. INTRODUCTION

The population structure of Thailand tends to the elderly society as same as many countries around the world. Thailand elderly population increased at a higher rate and will be more. In the past Thailand have the elderly increased 5 percent in1950 to10.1 percent in 2000 that showed for double increase, and is expect to 2015 have the proportion of elderly for 15.6 percent, in 2025 for 21.5 percent, in 2033 for 25 percent, respectively. To addition with the development of public health progress effect to the average age of the elderly have longer age for 8.8 years by men average age 71.8 years and women average age 80.6 years, including the elderly dependency ratio will increase compared to the working age population in 27 years from May 2008, for 1 elderly will have the only 2 people of working age to take care and will be decreased in the future. That meant Thailand will beexactly elderly social and effect to the society and economy of Thailand.

In many countries are entering to the elderly society, there are important policies to take care of elderly people in the welfare of the elderly, the medical care, arranged the resident home for elderly who have no one to take care and have a project for quality of live in elderly, especially increaser of poor elderly in the future.

In Thailand, about one in three elderly residents in the Northeast part, and is likely to increase from 29.9 percent in 1994 to 33.6 percent in 2007 (Pramote Prasartkul , 2000) Nakhonratchasima is large province, there are the second most population country. Found that

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most elderly work in the agricultural sector with little or lack of education and lack of preparation to the elderly. Physical deterioration that makes the elderly has health and mental problems. The changing of economic and social effect to some of elderly was neglect if these elderly could not be adapted to take care of themselves that would become more a burden on society (National Economic and Social Development Board, 2007). The careless of elderly and abandoned alone, some part of them must be live in residential homes for the elderly. So that Nakhonratchasima province has 2 the residential homes for the elderly including The Thamapakorn WatMuang residential homes for the elderly and The Thamapakorn Phokhang residential homes for the elderly, they care for the elderly who have no dependents, homeless or disable live with their family. In 2012 there are elderly people in residential homes for the elderly for 100 people, including mental disorders elderly and elderly who do not help themselves. (Nakhonratchasima, Provincial Administration Organization, 2012).

Due to, the researchers realized to the importance of the elderly in the residential homes for the elderly, would like to study the quality of elderly life in the residential homes for the elderly for both the residential homes for the elderly as for use the background information is helpful and evaluation of development projects to improve the quality of life of elderly people in further.

2. THE PURPOSE OF RESEARCH

- 2.1 Study of the quality of life of elderly people who living in The Thamapakorn Wat Muang residential homes for the elderly and The Thamapakorn Phokhang residential homes for the elderly in Nakhonratchasima Province .
- 2.2 Study of correlation between factors and quality of life of elderly people who living in residential homes for the elderly in Nakhonratchasima Province .
- 2.3 Study of the relationship between various factors that affect to quality of life of elderly people who living in residential homes for the elderly in Nakhonratchasima Province .
- 2.4 Study of the cause of the elderly determine to rest in the residential homes for the elderly in Nakhonratchasima Province.

3. THE SCOPE OF RESEARCH

- 3.1 Studyonthe opinions of elderly people who living in The Thamapakorn WatMuang residential homes for the elderly and The Thamapakorn Phokhang residential homes for the elderly to quality of life divide in 4 parts including physical quality, psychological, social relationships and environment.
- 3.2 Population used in the study were elderly people who living in The Thamapakorn WatMuang and The Thamapakorn Phokhang residential homes for the elderly, they were good conscious ,normal perception and understanding in Thai language.

4. MOTHODOLOGY

The study of the quality of life of the elderly in the residential homes for the elderly in Nakhonratchasima Province is Descriptive Research purposes to study the quality of life of the elderly people and study relationships between the factors of age, income, marital status, level of education and number of relatives with the quality of life of the elderly people who living in the residential homes for the elderly.

5. POPULATION AND SAMPLE

Population used in this study were elderly people who living in The Thamapakorn Wat Muang and The Thamapakorn Phokhang residential homes for the elderly, they were good conscious, normal perception and understanding in Thai language for 100 people.

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6. THE RESEARCH TOOLS

The research tools were adapted from the Quality of Life assessment of WHOQOL-BREF-THAI into the interview form of the quality of life of elderly people who living in residential homes for the elderly in Nakhonratchasima Province is aquery in the Check List and Rating scale for 5 level of Likert scale divide in 5 parts as below.

- Part 1 The Personal Information of elderly.
- Part 2 The quality of life of Physical quality of the elderly assessment.
- Part 3 The quality of life of Psychological of the elderly assessment.
- Part 4 The quality of life of The Social relationships of the elderly assessment.
- Part 5 The quality of life of Environment the elderly of assessment.

7. TOOL AND QUALITY TESTING

The Content Validity was the consistency Index of Congruence: IOC is the sum at 0.81 and the Reliability of Cronbach's alpha coefficient at the 0.859.

8. DATA ANALYSIS

Data analysis by SPSS for Windows program, general and preliminary data analysis of the variables were descriptive statistics including percentage, mean and standard deviation, and analysis of the correlation coefficients of the variables and the dependent variable by Statistical analysis of Pearson's Correlation Coefficient.

Table 1 Quantity and Percentage of Samples divide from Personal Information

Personal Information	Quantity(n=100)	Percentage	
Male	19	19	
Female	81	81	
Age (Year)			
60 – 69 Year	20	20	
70 - 79 Year	37	37	
More than 80	43	43	
Marital Status			
Single	18	18	
Married	8	8	
Widowed, Separated	74	74	
Education			
No Education	21	21	
Elementary	68	68	
Secondary	9	9	
Diploma	1	1	
Other	1	1	

Table 1 Quantity and Percentage of Samples divide from Personal Information (cont.)

Personal Information	Quantity (n=100)	Percentage	
Income (Baht)			
No income	25	25	
1- 1,000	67	67	
1,001 - 2,000	3	3	
2,001 - 3,000	4	4	
More than 3,000	1	1	
Source of Income			
Working	7	7	
Descendant, Relatives	21	21	
Welfare Allowance	3	3	
Saving Deposit	1	1	
Domination	43	43	
Relatives			
All	71	71	
None	29	29	
Reason to decide to rest in The Senior			
Housing			
Family Problem	11	11	
Poor, Homeless	21	21	
No one to take care	54	54	
Willingness	14	14	

9. RESULTS

9.1 Thepersonal information.

This study, almost half of sample older than 80 years,81 percent were female, and the majority of samples (74 percent) of marital status was widowed, separated and the majority of samples (68 percent) of education is graduated at the elementary level.

The majority of samples (67 percent) have income in range 1-1,000 baht per month, source of income for 47 percent from donations. The majority samples (71 percent) have descendant and relatives, andmore than half (54 percent) of elderly decided to living in the residential homes for the elderly because no one to take care as Table 1.

9.2 The level of the quality of lifeof elderlyin Physical quality, Psychological, Social relationships, Environment and Overall quality of life.

Table 2 Mean and standard deviation of the quality of life of the sample(n = 100).

The quality of life	Possible Interval	True Interval	Mean	SD	Interpret
Overall	1-5	2.26 - 4-42	3.41	.47	Good
Physical quality	0-5	0.89 - 4.67	2.62	.74	Medium
Psychological	1-5	2.5 -5	3.78	.55	Good
Social relationships	1-5	1.71 -4-43	3.28	.62	Good
Environment	1-5	2.5 - 5	3.75	.59	Good

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9.3 The result of analysis of the relationship between various factors and quality of life of the elderly.

The result analysis of the relationship between variables including gender, age, marital status, level of education, income, number of relatives and overall quality of life that addition physical quality, psychological, interpersonal relationships and environment of sample using the Pearson's product moment correlation coefficient found that the independent variables were gender, age, marital status, level of education, income, number of relatives not correlate significantly with the overall quality of life. However, when analyzing the relationship between the independent variables and quality of life in each part, but found that the level of education is positively correlate to psychological statistically significant (r = .224, r = .22

Table 3 The result analysis of the relationship between gender, age, marital status, level of education, income, number of relatives and quality of life in each part.

variables	1	2	3	4	5	6	7	8	9	10	11
1. Gender	1										
2.Age	.080	1									
3. Marital status	143	082	1								
4.Level of	130	291**	179	1							
Education											
5. Income	009	242*	.002	.474**	1						
6. Number of	085	126	.063	$.202^{*}$.112	1					
Relatives											
7. Overall quality	012	128	064	064	.162	.185	1				
of life											
8.Physical quality	.009	120	.125	.067	.088	.027	.678**	1			
9.Psychological	185	088	103	$.224^{*}$.183	$.224^{*}$.812**	.345**	1		
10. Interpersonal	030	152	080	.162	.144	.253*	.744**	.317**	.515**	1	
relationships											
11. Environment	.182	037	161	.130	.080	.089	.786**	.288**	.557**	.569**	1
	•			•	•			*P < .	.05, **	P < .01	

10. RESULTS AND DISCUSSION

10.1 The personal information.

This study, almost half of sample older than 80years(43 percent),81 percent were female, and the majority samples (74 percent) of marital status was widowed, and the majority samples(68 percent) of education was graduated at the elementary level.

The majority samples (67 percent) have income in range 1 - 1,000 baht per month, source of income for 47 percent from donations. The majority samples (71 percent) still have descendant and relatives, and more than half of samples (54 percent) determine to rest in the residential homes for the elderly because no one to take care and followed by poor and homeless for 21 percent.

The result of this study, the reason for elderly determine to rest in the residential homes for the elderly because no one to take care, homeless, poor, do not have relatives and some of them have relative, but they had a problem and unhappy with family all of that reasons consistent with Phirome Chareonphol (2010).

10.2 The quality of life of the elderly

The results showed that the elderly satisfied for the quality of life in Physical quality was medium level and the quality of life in Psychological, Social relationships, Environmental and Overall quality of life were good level.

10.2.1 Quality of life in Physical quality was medium level. That was content most of population was female made quality of life in physical quality was medium, consistent with studied of Chirachan Khanatha (2005) found that gender was a factor indicative to the differences in the physiology of the personality, males could participate in health promotion more than females. In addition, in this study, majority of population in the elderly of the middle-aged (43 percent) that which started illness, there was deteriorating physical,had restrictions on access to participate in health promotion and elderly who do not have relatives that made they have careless to encouragement and support in health promotion activities consistent with the research on the health related quality of life in rural communities and the residential homes for the elderly in India found that elderly with a average of quality of life in physical were 49.0 of Varma. (Varma, 2010)

10.2.2 The elderly have quality of life in Psychological was high level, consistent with Warishsara Chantharangsiworakul (2010) found that elderly could handle stress well. Elderly have increased resistance to stress as the effect of aged range and many forms through life experiences that makes them able to control mind and emotions better than other aged range (Sirima Wonglamtong, 1999) consistent with the results of this research, which most of elderly was widowed, divorced, separated and the most of elderly have likely same reason to determine to restin the residential homes for the elderly because they have no one to take care, they have family problems. (Nakhonratchasima Provincial Administration Organization, 2011). That made them has the resistance to stress including the residential homes for the elderly always provide singing together activities. Besides the most of elderly was Buddhist so there are teachings of Buddhism could adapt into the daily life and reduces stress, to make the mindcalm, release that can reduce the stress occurs in the elderly aged (Oman & Reed, 1998). The residential homes for the elderly was next to the temple that made the elderly could give food offering to Buddhism monk, make a merit, always made religious activity and there are provide the room for prayer before bed including provides the weekly schedule for teachings of Buddhism video all of that consistent with Patthana Sirikulpipath (2001). The listening to lectures by guest lecturer and listening video of the elderly at the residential homes for the elderly in the Wassanavest residential homes for the elderly, Ayutthaya Province not significantly different in statistically, because there are person who palliative care on elderly in last period and when mortality have a person to organizing their burial that made the elderly are confident that there is a person take care on their death.

10.2.3 The elderly have quality of life in social relationships was good level. Due to, the residential homes for the elderly provide activities and co working with other agencies in many festivals such as The New Year party, To pour water on the hands of revered elders and blessing on Songkran Day, Miss Songkran Contest, Day of Older Person event, Sporting events between elderly all of that consistent with Phirome Chareonphol(2010)was studied about the social problems of coexistence of the elderly in the welfare house in NakhonPathom Province.

10. 3 The relationship between prediction factors and the quality of life in each part. The analysis result of the relationship between variables including gender, age, marital status, level of education, income, number of relatives and overall quality of life feature physical quality, psychological, interpersonal relationships and environment of sample group by using the Pearson's correlation coefficient. Found that the independent variables were gender, age, marital status, level of education, income and number of relatives not correlate significantly with the overall quality of life. However, when analyzing the relationship between the independent variables with quality of life in each part, but found that the level of education is positively correlate to psychological statistically significant (r = .224, P <.05), the number of relative positively correlate with psychological and interpersonal relationships statistically significant (r = .224 and r = .253, P <.05), respectively.

10.3.1 Thelevel of education was positively correlate to psychological statistically significant (r = .224, P < .05), the elderly people with higher education will have the skills to seek information as well as source useful more than the elderly with lower education and they are Copyright © 2014 Society of Interdisciplinary Business Research ($\underline{\text{www.sibresearch.org}}$)

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able to understand the nature of others people that madethey able to live vigorously, be creative in useful things and made opportunity to meet new things that cause they have a good mental (Somphan Hinchiranan, 1998).

10.3.2 The number of relatives were positively correlate with psychological statistically significant (r = .224, P < .05) consistent with the study of Rungthip Pangchai (1999) found that having the spouse andrelatives will get support emotional, material or things that encouraged the elderly and took prided in themselves rather than others. They also always could communicative with their relatives, can release problem in their heart with the person in their family and this elderly groups, most elderly of this group could help themselves, could work with occupational health that made they were exercised, have social relationships, have income, was recognized in social and have self esteem all of that consistent with the research of Nikpour and colleagues (Nikpour, 2010).

10.3.3 The number of relatives were positively correlate with interpersonal relationships statistically significant (r = .253, P < .05) consistent with Rattanaphan Chottiwanich (1998) found that family relationships are positively correlate with satisfaction in life statistically significant(p < .001)described as the elderly who had relatives, have the skills to coexist with other person, have a social, participate activity, to share their learning with each other that cause they were recognized by the society and enhance the role of the elderly (Chutidej Chiandon, and colleagues 2011). They also always could communicative with their relatives, could release problem in their heart with the person in their family without mistrust others, and could travel to different locations by themselves. The most elderly of this group could help themselves; have motivated to earn income from occupational health under the help of the residential homes for the elderly for the cost of travel to their relatives that consistent with the concept of Morrow and Wilson (Morrow and Wilson, 1996).

11. RECOMMENDATIONS

11.1 These were basic information about the quality of life of the elderly in the residential homes for the elderly in Nakhonratchasima Province to contribute towards the planning commission is share between academic services, Nursing Faculty of Vongchavalitkul University and Vocational Provincial Administrative Organization in the projects to enhance the quality of life of the elderly.

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