HEALTH STATUS OF THE ELDERLY LIVING IN PHIMAI DISTRICT, NAKHON RATCHASIMA, THAILAND

Abstract At present, Thai government focused on developing the quality of life of elderly issue. This research aimed to explore the health status of the elderly living in Phimai District, Nakhon Ratchasima, Thailand. The collection of data using questionnaire (Barthel ADL index) from 1,081 elders. Analyses of research data employed descriptive statistics and Chi-square. The research conducted during May - October 2014. The results showed that; the most elderly were in ability group (86.22%), 11.10% were in semi-disability group and 2.68% were in disability group. The relationships between sex, age and health status was statistically significant (p<0.05). Therefore, the elderly health service providers should work towards maintaining and enhancing well-being of the elderly.

Index Terms— Health status, Elderly

I. INTRODUCTION

The elderly were regarded by society of Thailand as a "Matriarch" and "the wisdom of the community" because of their life- long experience in the society. They are respected by their children and the community. A presents in the boom in medical technology, easy access to medical services, the elderly can get information about their own healthcare. The aging population had increased steadily from 13.2 % in 2010 to 32.1 % in 2060 it is estimate that the elderly population will be the proportion of the population aged children equal to the proportion of the population aged, in 2015, only three countries have a high aging population Singapore, Thailand and Vietnam, but the next 25 years is to see that all ASEAN countries are highly social age [1].

Health status of elderly is important, as a factor of well-being, health problems resulting from the transition process in the body because physical and mental condition. Retirement from work, reduce social role, less attention from children often result to the feeling of workless, hopeless, paranoid and other psychological and physiological problems. [2]. Common physical health problems in older people that could be an obstacle to daily activity of elderly were problems of vision, which could lead to accidents and falls. From the year 2011 found 47.4 %. The issue tends to increase with age. Elderly women are more likely than men to suffer such problems, and those who live in urban areas are more likely to experience problems than in rural areas. Another problems that was hearing loss founded about

15 %. Increased with age, females more than males, including living in rural areas than in urban areas [1].

Nakhon Ratchasima province is a large area, with population 2,601,167, males population 1,286,164 (49.4 %) and females population 1,315,003 (50.6 %) of these, the elderly population 335,698 (12.9 %). The result of the survey of Social Development and Human Security Office.Nakhon Ratchasima, in 2012 founded the problem of the elderly, were poor and had an obligation (32.8 %), unable to access the services or activities in various areas (40.0 %), and elderly were disability (22.1 %) [3].

In Phimai district Nakhon Ratchasima Province has a total population of 119,368 with the aging population of 15,537 (13.0 %). The municipality center of Phimai is sub-district into 15 communities with a population of 8,750, 1,404 (16.1 %) is the elderly [4]. There is no clear and reliable data from Phimai District Public Health Center as too elderly care and physical health problems, disability and semi-disability and it is sub sequent problems. Likewise, relevant – socio-economic data is not available, hence, the researcher are interested in this story in order to ascertain the data and information for long term care and health promotion to the potential target groups elderly. this descriptive research aimed to explore the health status of the elderly living in Phimai District, Nakhon Ratchasima, Thailand, to make a preliminary data in order to bring the results to health service providers for planning towards maintaining and enhancing well-being of the elderly.

II. MATERIALS AND METHODS

A. Research areas and Research design

This descriptive research was performed in Municipality of Phimai sub-district, Phimai district, Nakhon Ratchasima, Thailand. It is located in the northeast region of Thailand which approximately 319 km from Bangkok; capital of Thailand, and 60 km from Nakhon Ratchasima. This municipal was covered 2.16 km², 2,684 family, and 8,750 population.

B. Population, sample size, and sampling

The 1,081 elderly samples were purposely selected from 1,404 elders. The research was conducted during May - October 2014.

C. Instrument

This research used questionnaire developed by the researcher from Barthel's Activity of Daily Living (ADL) index, consisted of 10 items: Feeding (0,1 and 2 score), Grooming (0 and 1 score), Transfer (0,1,2 and 3 score), Toilet use (0,1 and 2 score), Mobility (0,1,2 and 3 score), Dressing (0,1 and 2 score), Stairs (0,1 and 2 score), Bathing (0 and 1 score), Bowels (0,1 and 2 score), and Bladder (0,1 and 2 score). The interpretation of ADL was composed to three levels; "Ability" if total score equal or higher than 12, "Semi-disability" if total score equal 5-11 and "Disability" if total score equal 0-4.

D. Statistical analysis

Descriptive statistical and Chi-square were analysed with SPSS software.

III. RESULTS

A. Profile of Samples

Table 1 showed that the most of samples were female (63.92%), 60-69 years old (53.28%),

TABLE 1 Profile of samples

Characteristic	Value	Percentage	
Sex			
Male	390	36.08	
Female	691	63.92	
Age			
60-69	576	53.28	
70-79	341	31.54	
≥ 80	164	15.17	

B. ADL of elderly

Table 2 showed that the most elderly were in ability group (86.2%), 11.1% were in semi-disability group and 2.7% were in disability group.

TABLE 2 ADL of elderly

ADL level	Value	Percentage
Ability	932	86.22
Semi-disability	120	11.10
Disability	29	2.68

C. Relationship

Table 3 showed the relationship between sex, age and health status was statistically significant) p<0.05.(

TABLE 3 Relationship between sex, age and health status of samples

	Health status				
Characterist ic	Ability	Semi- disabilit y	Disabil ity	Chi- square	Sig.
Sex				6.22	0.0 45*
Male	349	35	6		
Female	583	85	23		
Age					
60-69	549	22	5	136.94 9	0.001
70-79	284	48	9		
≥ 80	99	50	15		

IV. DISCUSSION

The results show that the most elderly in the Municipality of Phimai sub-district are female (63.92%), similar to the health status of the elderly in Thailand [7]. In 2012, the annual report of elderly state in Thailand find that the female elderly has 55.1 % in 2010, up to 56.8% in 2040, especially the elderly in the aged late (>80 years), females tend to increase drastically 13.9% in 2010, up to 21.3% in 2040. The females live are longer than males, the most of them living alone since her husband has died or the grandchildren are going to work/to school. Consequently, the female who living alone may have trouble performing daily activities, lack of care giver. In addition, semi-disability group and disability group are 13.78%, this group want to perform a daily activities significantly, similar to previous study [5]. Wandera and others had study on factors associated with self-reported ill health among older Ugandans: A cross sectional study, the results show that self- reported ill health was positively associated with being a woman and among the oldest

The relationships between sex, age and health status was significantly statistically)p<0.05. (These results indicate that sex and age has significant influence to daily activities, difference from previous study [6]. Chang-Xiang Chen and others had study on the correlation between socioeconomic status and health self-management in the elderly, the results show that the health self-management behaviours of elderly people differed with the area of residence, education level, and personal monthly income. An ordered probit model show that behaviours are better in elderly people who live in urban areas, who are educated to college level or higher, and with higher monthly incomes (p < 0.05).

V. CONCLUSION

Although,the finding of this research shows that the most elderly are in ability group, but semi-disability group and disability group are 13.78%, this group want to perform a daily activities significantly, and the relationship between sex, age and health status are statistically significant. Therefore, the elderly health service providers should work towards maintaining and enhancing wellbeing of the elderly.

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REFERENCES

[1] Wipan Prachupmao. Editor. "The Report of Thailand elderly state 2012," Nontaburi: SS Plus Media, 2013, pp. 12-37.

- [2] Rosarin Gray and others. "The Elderly Care: Happiness and Stress," Bangkok: Amarin Printing and Publishing, 2013, pp. 18-22.J. Clerk Maxwell, A Treatise on Electricity and Magnetism, 3rd ed., vol. 2. Oxford: Clarendon, 1892, pp.68–73.
- [3] Social Development and Human Security Office. Nakhon Ratchasima. "The survey of social situations in Nakhon Ratchasima 2012," Nakhon Ratchasima: s.n., 2013, pp. 15.
- [4] The Municipality of Phimai sub-district. "Annual Report 2013," Nakhon Ratchasima: s.n., 2014, pp. 22.
- [5] Wandera, S.O., et al., "Factors associated with self-reported ill health among older Ugandans: A cross sectional study," Arch. Gerontol. Geriatr. (2015), http://dx.doi.org/10.1016/j.archger.2015.05.006
- [6] Chang-Xiang Chen, Li-Na Feng and Shu-Xing Li. "The correlation between socioeconomic status and health selfmanagement in the elderly," International Journal of nursing science, vol. 1, 2014, pp. 410-415.