

The Essential Living Skills for Successful Aging among Thai Urban Elders

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Abstract

The present study aims to investigate what constitutes essential living skills for successful aging in the urban areas of Thailand. A mix of qualitative and quantitative research methods were employed, in which the target group was the elderly who demonstrate good physical and cognitive health, have been living for more than five years in the two Nakorn-level municipalities in Nonthaburi Province, and regularly participate in activities held by senior clubs in the areas. In-depth interviews were initially carried out, from which data on different components of the urban elders' essential living skills were determined. This data was used when developing a questionnaire that was administered to 362 randomly selected individuals. The results of the survey questionnaire were subsequently analyzed using descriptive statistics. The study revealed that essential living skills for successful aging in the urban areas consisted of economic skills, health skills, cognitive and psychological skills, social interaction skills, and spiritual skills. When breaking down each category, the top-ranked skills were the ability to manage one's expenses to match income, the ability to avoid unhealthy habits, the ability to use reasoning when making a decision, the ability to understand or be aware of one's own and others' emotions, the ability to understand and have empathy for others' feelings, and self-esteem.

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Introduction

The growth of elderly populations has resulted in a major shift in the global demographic structure. Moreover, the rate of increase has become exponential: it is estimated that between the years 2000 and 2050, the world-wide elderly populations will increase by between 10 and 21 percent. From about 600 million in 2001, the number of elderly will grow to 1.2 billion in 2025, of which over 70 percent will live in developing countries. At the same time, the number of older adults in Thailand has steadily increased from 9.7 percent of the total population in 2003 to eleven percent in 2010, making the country now another with an “aging society”. In particular, those aged over 80 years old, and the late seniors, have increased both in number and proportion at a faster rate than all the other seniors groups. Thailand is therefore experiencing a rapid rate of aging, even among the elderly population itself. Such a phenomenon indicates that Thailand will likely have to deal with an ever larger elderly population over the next few years. It is a well-known fact that this segment of the population can make many contributions but they also have several limitations. According to the 2009 Thailand Elderly Situation Report, up to 55 percent of the Thai elderly suffered from chronic diseases, one-thirds had their own income or rely on their partners’, but almost half of those still felt the money was either inadequate or only adequate from time to time. Moreover, it was found that the proportion of elderly Thais who lived by themselves continued to rise: by 7.7 percent in 2007. Among this sub-population, 43.3 percent reported having problems, of which the most common was a feeling of loneliness (51.2 percent), followed by an absence of caregivers when falling sick (27.5%), having to earn a living by oneself (15.7%), having financial problems (5.2%), and having no one to do the household chores and others (0.4%). The proportion of late seniors who had to live by themselves in both municipal and non-municipal areas was higher than those in the middle- and early senior groups (National Statistics Office, 2007).

Besides the above-mentioned problems, most of the elderly, especially those living in the cities, have to cope with many social changes that come with modernization or urbanization spurred by the widespread media, that affect their daily life from rising from bed to their diet, work, relaxation and exercise and interpersonal relationships (Rattanawilakul, et al., 2008: 77). A study in 2009 found up to 34 percent of the elderly population lived in the cities, and that the proportion of these urban elderly had been increasing rapidly since 2004 (Prachuabmoh & Siriboon, 2010: 18-19).

Having a high population density, the urban area usually serves as a centre of development, be it in science and technology, economy, investment/marketplace competition, medicine, education, government offices, communications and transportation, public utilities, services and entertainment. Another key feature associated with the city is high population mobility, resulting in diversity within the populace and their occupations, and thus in large economic differences and a tendency for few social ties. Different from a rural social structure in Thailand, there has been an increase in social stratification and specialization in the urban society. As a result, the urbanites usually often have to rely on social units tasked with specialized functions. Moreover, their educational levels, income, and singlehood or divorce rates tend to be higher than their rural counterparts. Due to the high diversity in urban lifestyles that are typically hectic, individualistic, and highly competitive, the Thai seniors who live in the city have to adapt a lot in order to survive in a place where progress and diversity are the norms of the day. In this way, the concept of “successful aging” should be applied to develop those urban seniors to be able to lead their remaining years happily and in harmony with the rapidly changing society.

The concept of “successful aging” has been used as a strategy and indicator of self-efficacy. It bases on the premise that despite advancing age, it could never impede a person to become a successful ager. Indeed, if one can maintain his/her body and mind health, can take care of his/herself well, be self-reliant and have the capacity to cope with problems properly, in accordance with the surrounding conditions. According to this concept the focus is on the physical and psychosocial skills needed to create a balance between longevity, good health and happiness. One of the most widely accepted models on successful aging has been proposed by Rowe and Kahn, (1997: 433) who outlined three major characteristics: low probability of sickness or disability, high physical and cognitive functioning, and social and productive engagement.

This concept of successful aging consists of disengagement theory, which argues that older adults will invariably have to stop their regular work or disengage themselves from their social roles in order to accommodate the decline of their natural conditions; activity theory, which argues that successful agers should stay involved in various daily activities. However, gerontologists later see the theory as being too limited in explaining the current diversity among older people; the continuity theory which argues that most of successful agers tend to carry on regular activities from their middle-aged years well into their advancing years. Most of the indicators of successful aging are based on subjective views on various aspects of well-being, such as life satisfaction, happiness, morale, contentment and perception of quality of life, among others. (Bearon, 1996)

Becoming successful agers is a process of building a sense of identity for the elderly, an integral factor for their self-esteem. The successful ager tends to be one who has potentials and derives satisfaction from the environment he or she lives in. Thus successful urban elders should possess a set of skills or specializations that will facilitate or support them in living happily in spite of the changes around them. The required skills here refer to the so-called “life skills” defined by UNICEF (2011) as “psycho-social adaptability and positive behaviors that enable a person to cope efficiently with the wants and challenges in daily life”. In particular, the skills can be classified into three sub-groups, namely, the cognitive skills for analyzing and utilizing flows of information, personal skills for developing and managing oneself, and interpersonal skills for interacting and communicating with others in an efficient manner.

Thus the requisite skills for becoming a successful ager are based on the life skills that will enable the elderly to cope properly and efficiently with new situations. The concept of well-being seems to be the most fitting and approximates that of successful aging. According to Prawase Wasi (2000: 4), the elderly’s well-being covers physical, mental, social and spiritual health. The researcher combines the concept of “life skills” from UNICEF with the concept of well-being from Wasi as this study framework. In this study, the requisite life skills for successful agers in the urban areas of Thailand thus consist of physical, cognitive and psychological, interpersonal and spiritual skills.

One clear example is Nonthaburi province, officially a part of the Greater Bangkok Metropolis. In general, there is not much difference between Bangkok and Nonthaburi; the eastern part of the province can be considered a de facto part of Bangkok proper. Of the entire Bangkok metropolis, Nonthaburi has the highest number of elderly people, at 104,169 (National Statistics Office, 2010: 49-50), followed by Nakorn Pathom, Samut Prakarn, Pathum Thani, and Samut Sakhon. It also has the highest number and density of seniors living in the metropolitan areas.

The growing number of elderly makes it possible to project how support for this segment of the population will probably be inadequate. In Nonthaburi, a number of groups have been set up with the purpose of organizing activities for the seniors. According to the directory of organizations or clubs catered for the older adults in 2010, Nonthaburi had 106 clubs, with 18,484 members (Bureau of Empowerment for Older Persons, 2010: 47-57). These seniors' clubs are initiatives by the local elderly to organize activities that will benefit both the senior members as well as society at large. The seniors' clubs therefore provide a space for older adults who have potential and want to participate in activities that will benefit themselves, other members of the community, and/or society at large. For the senior citizens in Nonthaburi, the Ministry of Labour's Department of Employment has been organizing a programme to train the elderly in traditional handicraft making skills, which involves twenty people per year, while the Centre of Skill Development works on training of vocational skills for the elderly. However, such attempts to provide supporting grants for the development of the elderly's vocational skills, healthcare, and spiritual wellbeing, are still not sufficient to meet the demands of the older adults considering their large number, which will continue to grow substantially in the future.

Taking into account the rise of the elderly population in Thailand, a trend that is likely to continue into the future, and all the inevitable limitations of being an older adult, successful aging is an important factor for proper and peaceful adaptation to social change. Since more and more older adults will probably be living in the urban areas, life skills that will help them to live in the city productively become essential for realizing successful aging. Past research has suggested how the future senior citizens would probably have different socio-economic profiles and work experiences from those in the present. The proportion of older adults engaging in non-agricultural work will likely be higher, as will the diversity of their specialized skills and educational attainments. It is estimated that by the year 2020, most of the Thai older adults will likely have secondary or higher levels of education. The

expertise of the future generations of senior citizens will be more suited to the non-agricultural sector. With better education and economic status, they will probably be able to keep up with the flow of information in the society better than now. Their lifestyles will probably become different. That is, the future older adults may prefer privacy and independence rather than waiting for assistance from the state or from their families (Phuanjai Rattakorn, 2006). All the essential living skills for successful aging among the urban Thai elders thus become important and necessary concerns.

The present study thus focuses on what constitute essential living skills for successful aging among urban elder Thais. A qualitative research method is employed to identify such skills among the older adults who participated in activities with the seniors' clubs in the municipal areas of Nonthaburi province. Next, their responses are compared quantitatively, between the randomly sampled groups. Then research objective is to study what constitute essential living skills for successful aging among Thai urban elders.

Research Questions

A review of existing body of knowledge and research on successful aging as well as on other relevant disciplines has yielded the following questions:

1. What constitutes successful aging in the urban areas?
2. What are considered to be essential living skills for successful aging among urban Thai elders?

Research Methodology

The present study on the development of essential living skills for successful aging among the Thai urban elders has employed a mix of qualitative and quantitative research methods. To investigate what constitute the essential living skills for successful aging among the Thai urban elders, the researcher has selected two seniors' clubs in two Nakorn-level municipalities of Nonthaburi as target groups: 1) the Elderly Club of Phranangkla Hospital and 2) the seniors' club of Pak Kret Hospital. Only two of which clubs that have attained the standard "quality seniors' club" accreditation issued by the Department of Health. The target group consisted of Thai older adults aged 60 and up of both genders, whom members of the seniors' clubs have been participating in the activities held by the clubs regularly and with enthusiasm and who have maintained good health, physical and cognitive functional capacity, and productive engagement with life, and their age groups were broken

down into early seniors (60-69 years old), middle seniors (70-79 years old), and late seniors (80 and up).

A study of what constitute essential living skills for successful aging consists of two steps. Here, the first step was to identify the essential living skills through in-depth interviews with individuals who qualified as successful aging, on which essential living skills they possessed and thought were essential for successful aging in the urban areas, in accordance with the conceptual framework distilled from the literature review. The guidelines for in-depth interviews consisted of a semi-structured set of questions. Examination of the validity of the research tools, the guidelines for the interviews that were gleaned from a review of relevant documents, theories, and past research on life skills and successful aging, and of the content was done through consultation with five experts.

The second step was to examine the validity of the indicators of essential living skills gleaned from the in-depth interviews, which were compiled and turned into a questionnaire, and then used with the selected sample group in a quantifiable survey. The sample populations were randomly drawn from 1,670 registered members of the Elderly Club of Phranangkla Hospital and from 1,460 registered members of the seniors' club of Pak Kret Hospital. In total, 355 individuals were selected; the sample size was calculated according to Yamane's formula (1973: 729). Questions on the essential living skills for successful aging in the urban areas, consisted of five components, namely, 1) economic, 2) health, 3) cognitive and psychological, 4) social interaction and 5) spiritual aspects. The data collected were scored, by basing on the Likert Scale, from 1 – 5 (least essential to most essential). However, instead of using 5 scales the medians were re-arranged into new three interval scales, i.e., very much, moderate, and little, of which the range for each of the intervals equals the maximum value subtracted by the minimum value, and the width of each interval = $(4/3) = 1.33$, the mean 3.68-5.00 is regarded as very much, the men 2.34-3.67 is regarded as moderate and the mean 1.00-2.33 is regarded little. The EPSS program was used in analyzing data including the following statistics 1) frequencies distribution and percentage (for general information) and, mean () and standard deviation (S.D.) (for the different components of essential living skills).

Research Findings

A series of in-depth interviews were conducted with the elderly informants, of which the results were subsequently compiled and analyzed in order to

1. Identify the definitions of the terms ‘successful aging’ and ‘successful aging in the urban areas’

1.1 The terms ‘successful aging’ that the interview informants refers to is: “the individuals who have good health and can live independently, are reasonable, have enough income and do not suffer financially, feel content with life, have an understanding family, participate in various social activities, gain social acceptance, and contribute to the society.”

1.2 The terms ‘successful aging in the urban areas’ that the interview informants refers to is: “the individuals who have good health, are reasonable, have enough income, feel content with life, have an understanding family, participate in various social activities, gain social acceptance, and contribute to the society, have the ability to deal with different people, remain active in keeping themselves up to date with current situations, can adapt to changes and are self-disciplined.”

2. Identify the area of essential skills required for successful aging in the urban areas. From the interviewed data, the elderly informants defined five aspects as essential skills for successful aging in the urban areas, namely 1) economic skills 2) health skills 3) cognitive and psychological skills 4) social interaction skills and 5) spiritual skills, as following definitions:

2.1 Economic skills refer to the ability to generate income prior to reaching old age so that one can continue to have a regular flow of income, which means that they must know how to manage their income to cover expenses, and if possible, to be able to help others when needed. Moreover, they should cultivate the feeling of contentment and refrain from greed or desires to take advantage of others.

2.2 Health skills stem from the awareness of the significance of health which prompts the elderly to seek pertinent knowledge from various sources (e.g., public media, the hospitals) on how to take care of themselves, how to treat or alleviate the symptoms of sickness, to select foods that are appropriate to their age and health conditions, to avoid any unhealthy habits, and to regularly follow the exercise regimen of their choice.

2.3 Cognitive and psychological skills refer to the ability to take care of their cognitive and psychological functioning capacity, be it through reading books regularly, following current events, developing analytical thinking, attending lectures or training on various subjects as part of a Non-Formal Educational programme, practice various brain-boosting activities such as crossword puzzles and computer games, participating in various social activities like volunteering as well as applying religious teachings to train their mind when dealing with daily problems.

2.4 Social interaction skills refer to the abilities that will enable the elderly to participate in the social activities regularly and with satisfaction, which usually entail being able to cooperate with others, to be accommodating and optimistic, to accept interpersonal differences and try to understand others, to have a sense of sacrifice and know how to forgive and let go, and not to be selfish or try to exploit others.

2.5 Spiritual skills refer to having self-esteem, self-confidence as well as empathy for others.

Results of questionnaire survey on essential living skills for successful aging in the urban areas, the questionnaire developed by the researcher based on the in-depth interviews was tested on 362 members of the Phranangkla Hospital's Elderly Club and the Pak Kret Hospital's senior's club who demonstrated good physical and mental health, and have been regularly participating in the club activities. The questionnaire was tested for reliability using Cronbach's alpha coefficient (α). The total alpha coefficient for the whole questionnaire was .924. The data show that the elderly respondents valued five skills as being 'very essential' for successful aging in the urban areas: health skills, spiritual skills, social interaction skills, and cognitive and psychological skills. Specifically, health skills were deemed to be the most essential, whereas economic skills were moderately essential. (as shown in Table 1). However, the ability to manage one's expenditure to match with their income (one of the indicators under the economic skills category) was considered to be highly essential as well.

Table 1 Overall essential living skills (Mean and Standard Deviations)

Aspects of life skills	Mean	Standard Deviation
	(\bar{X})	(S.D.)
Economic skills	3.58	0.81
Health skills	4.36	0.53
Cognitive and psychological skills	4.04	0.59
Social interaction skills	4.04	0.61
Spiritual skills	4.09	0.59
Overall	4.02	0.48

When breaking down the various indicators under each category, it was found that for the economic skills, the ability to manage one's expenses to match with their income received the highest score, followed by the ability to generate income to cover expenses. For health skills, the ability to avoid unhealthy habits received the highest score, followed by the ability to select foods that are appropriate for one's age and health conditions. For cognitive and psychological skills, the ability to use good reasoning when making a decision received the highest score, followed by the ability to handle stress or anxiety within a proper timeframe and to discern information and situations realistically. For social interaction skills, the ability to understand and be aware of self's and others' emotions received the highest score, followed by the ability to collaborate with other members in the community/society and to handle different situations in daily life appropriately. For spiritual skills, the ability to have understanding and empathy for others and self-pride received the highest score, followed by the ability to realize the essence of religious teachings.

Conclusion, Discussion and Recommendations

The definitions “successful aging” given by the Western and Thai researchers overlaps in three areas, namely, 1) the health aspect, 2) the cognitive and psychological aspect, and 3) the engagement with life aspect. However, the present study also identified two additional aspects, the economic and family aspects. Economic status is important because it enables individuals to meet their needs in accommodation, clothing, food, medical treatment, and for other activities. Taking into account the elderly’s limited job opportunities and reduced income as well as the absence of a welfare system in Thailand, the need to prepare one’s personal finances in order not to become a burden on others in old age becomes a salient point. This may be why the economic aspect was cited as one factor for successful aging in the urban areas. On the other hand, Western countries usually have some kind of welfare system in place for the elderly. Thus, the definitions of successful aging (notably Rowe and Kahn’s three-component model discussed earlier) may not place as much importance on the economic aspect. The findings of the present study coincide with previous research in Thailand which also identified factors related to the elderly’s quality of life as including the family’s income (economic status) and availability of welfare service (Angkinan, 2002; Kumanjan, 2000; Thongsawang, 2003; Wangjeen & Fonglam, 2003).

The family aspect was also identified as another major factor for successful aging in the urban areas. Here, the term ‘family’ refers to the spouse and children who have understanding of, and provide support and assistance for the elderly, which is one of the primary characteristics of Thai and other Oriental societies. By comparison, in the Western societies, the elderly tend to live on their own, either with their own spouse or in a senior’s home, rather than sharing their house with extended relatives. Despite the social change, a number of the Thai elderly continue to be taken care of by their own offspring, or if they have to work and cannot afford the time, then by live-in care-givers, instead of being sent to live on their own in the senior’s homes as happens in the West.

According to the elderly informants interviewed in this study, successful aging in the urban areas refers to the aging individuals who have enough income to support themselves without posing a burden on others, have good health and live independently, are reasonable and open to others' ideas, have an understanding family and social acceptance and contribute to the society occasionally, stay up-to-date by following the current situations, can adapt themselves to the changing environment, and have self-discipline. It should be noted that the target elderly have mostly completed undergraduate degrees, are retired government officers or staff at either state enterprises or private companies, and have enough income (from pension) and savings to support themselves and even to help out their offspring or to make social contributions every now and then. Such qualifications seem to fit the general profile of an increasing number of the elders living in the urban areas, at present and in the future, most of whom engaging in the non-agricultural sector.

Considering the characteristics of the city, with advancement in communications and transportation technologies, high congestion and competition among the population living in the centre of public health service, education and other businesses, it becomes apparent how the original five major components of successful aging are not adequate. Three additional aspects have thus been added. First, the elders should keep themselves up-to-date with the current situations, being aware of the ever changing world and the economic, social and cultural diversity and sophistication among the population, some of whom may try to lure them of their properties. Next, they should be adaptable to the urban ways of life, the increasing traffic congestion and competitive or hectic lifestyles. Finally, they should cultivate self-discipline which is a crucial qualification for those who live in a bigger society, such as queuing when seeking public services in mass transit, medical care, financial institutions, shopping centres, entertainment venues or museums.

Considering the Essential living skills for successful aging in the urban areas. Initially, the present study used a model that outlined four aspects of the essential living skills for successful aging for the Thai urban elders, namely, the health skills, the cognitive skills, the social interaction skills, and the spiritual skills. However, the present study identified the economic skills as an additional essential aspect. This issue is poignant especially for the elderly whose physical, social and cultural characteristics prompt them to have limited opportunity to gain an increasing income. At any rate, the elderly respondents identified economic skills as being moderately essential, but less essential than all the other aforementioned living skills. A study by Mattana Pananiramai (2012) found a gap in consumption levels between the urban and rural populations. An average person in the city spent 103,137 baht per year, while her/his rural counterpart spent 67,456 baht per year, or a difference of 35 percent.

The elderly respondents identified the health skills as being the most essential for successful aging in the urban areas. For one thing, health is a prerequisite for everyday living. Since physical deterioration is generally inevitable in the aging process, the elderly who are skillful in taking care of their own health will be able to live independently and happily. The elderly respondents also viewed the other skills, spiritual, social interaction and cognitive/ psychological, as being likewise essential and important. After all, every individual needs both the personal skills (health, cognitive/psychological, and spiritual) and social interaction skills in adapting to other family members, the community and the society.

In order to enhance the applicability of the findings from the present study, the different organizations within the public and private sectors as well as state enterprises and local communities should be made more aware of the importance of the need to develop the quality of life of the elderly, and have clear policies and strategies for achieving the goals. They should pool their resources to organize a series of activities to train individuals in the essential living skills before they reach retirement age. Various media agencies, be they public or privately owned, should also be encouraged to play a bigger role in mobilizing the elderly to engage in their self-development, toward successful aging. Every sector should have greater awareness of the importance of the elderly, the common benefits of improving the quality of living of this segment of the population, and the long-term ramifications of negligence of this important issue.

Considering how old age is an inevitable phenomenon that everybody must face sooner or later, the relevant authorities, i.e., the Ministry of Education and the Ministry of Social Development and Human Security, should try to incorporate the development of essential living skills for successful aging into the curriculum in every level of schooling as well as in the informal educational programmes. There should also be an opportunity available for adults prior to reaching the retirement age to acquire these skills by themselves in a practical, realistic manner. The content of the curriculum should be broad and comprehensive, covering cultivation of important skills such as the ability to manage expenses to meet their income needs, to avoid unhealthy habits, to make a decision in a reasonable way, to understand and be aware of self's and others' emotions, to understand and have empathy for others' feelings, as well as to cultivate self-esteem. The persons or organizations in charge of such tasks should also strive for the development of every aspect of the life skills, and not only the health and economic skills as has been the common practice.

The elderly themselves should be aware of the importance of continued developing of essential living skills, be they economic, physical health, cognitive and psychological capacity, social interaction or spiritual. They should stay active and keep up with current information, and participate in the activities organized by public or private organizations. Such efforts should enable them to be able to deal with social change in a productive and satisfactory manner.

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