Public Welfare Management that Affects the Livelihoods of the Elderly

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Abstract

An increasingly aging society every year, but the government agencies have welfare policies for the elderly that are not enough to sustain their livelihoods. This research aims 1) to study the priority of public welfare management affecting the livelihoods of the elderly, 2) to study the influence of health welfare and social welfare on the livelihoods of the elderly. Using an integrated research methodology Quantitative Research, the sample includes elderly people over the age of 60. Sampling by layering method, the sample size was 20 times that of the variable, with 11 variables, a sample of at least 220 people, to comply with the analytical techniques and data accuracy, and to prevent loss, the researchers collected data from 400 samples, analyzing data using historical statistics and structural equation analysis. Qualitative research instruments are semi-structured interviews from 15 key informants. The results showed that 1) Public sector welfare management that affects the livelihoods of the elderly is of great importance 2) Key factors influencing the livelihoods of the elderly, sort of: health benefits, economic welfare, and social welfare. The findings are useful to the Department of Geriatrics to propose appropriate guidelines for public sector welfare for the elderly. Government policies must be implemented to build a lifetime of learning capacity. It emphasizes the development of the elderly to have the ability to be self-reliant.

Keywords


The Background and Importance of the Problem

The global population situation in today's society in particular, the population structure is constantly changing. Due to the decrease in birth rate as a result, the world's population is entering an aging society by the definition of the United Nations. The proportion exceeds 10% or the population aged 65 years and over. And when that proportion increased to 20
percent and 14 percent, respectively, the global population situation will be a completely aged society (Chompulnut Prompak, 2013)

According to 2037 projections, the working-age population aged 15 - 59 will fall to just 61 per cent, or about 41.84 million people. This is due to the proportion of the working-age population that is a major force in manufacturing and driving economic growth. Therefore, we must prepare for the next generation of aging society. Therefore, Thailand must prepare for future elderly solutions such as medical equipment, smart home communication, etc. Communities must be strong, have innovative initiatives to take care of all elderly (Bureau of Forecasting, Office of National Statistics, 2017).

The elderly continue to play an important role and role as a valuable human resource in the family. Because the elderly are socially funded individuals. Cultural capital and symbolic capital to carry out activities that benefit society, as well as the culture and values of Thai society that are taught by the experiences of the elderly, which can help promote their children to be good citizens, leaders and psychological centers. This reflects the need to improve the quality of life for the elderly to live happily and valuably, such as developing their potential to be productive. Health Promotion (Suwich Tirakoat and Weerapong Polnigongit, 2018).

Therefore, the government must focus on and prepare for the care of the elderly to have a systematic quality of life both physically and mentally for all elderly people. Under the proposed government policy, together drive Thailand 4.0 policy, including the state welfare management system, the 20-year national strategy (2018 - 2047), thailand's first national strategy in accordance with the Constitution of the Kingdom of Thailand. With the philosophical development of sufficiency economy, researchers are interested in studying public welfare management that affects the livelihoods of the elderly (Bharani Phuprasert, 2018).

Research Objectives

1. To study the priority of public welfare management that affects the livelihoods of the elderly.
2. To study the influence of economic welfare Health and social welfare benefits that affect the livelihoods of the elderly.
Research Methods

The researchers used a combination of quantitative research and qualitative research, focusing on studies, reviewing literature on public sector welfare management that affects the livelihoods of the elderly.

Quantitative research: The samples used in the research include seniors aged 60 and over who are in Bangkok. Calculate sample size based on multi-variable statistical analysis techniques using structural equation modeling (SEM), which proposed that a sample should be defined at about 20 times that of the observed variable (Grace J.B., 2008). The conceptual framework of the study defined 11 variables, so it calculated a sample size of 220 people to comply with the analytical techniques and data accuracy, and to prevent loss, the researchers collected data from 400 samples. Data collection uses a stratified random sampling method, calculated proportionally based on the percentage of the sample. Research tools are questionnaires. The researchers achieved a conformity index value from 0.6-1.00. The reliability statistics, which are higher than 0.70, are considered to be relatively reliable.

Qualitative research collects information by in-depth interviews with key informants, divided into 1st group, executive level or representative, group 2 director or representative of private agencies and group 3 leaders of elderly groups in elderly clubs, to represent the population. Establish basic criteria as experienced, welfare-aware of the elderly. For at least 3 years, use the purposive selection method for 15 persons. Accurate and reliable data obtained through in-depth interviews The researchers used triangulation validation. In other remarks, it considers the consistency and differences in data from time sources, location sources, and individual sources.

According to the objectives of the research, the study was conducted. 1) The livelihood of the elderly, 2) health benefits and 3) Social welfare and analyzes the respondent's data using descriptive statistics to analyze frequency, percentage, average, standard deviation. The coefficient of variation (CV) and inferential statistics are used to analyze structural equation modeling (SEM) to test the relationship between phantom variables and observable variables and the relationship between independent variables and variables accordingly.

Findings

Part 1: Demographic Data Analysis Results.
In the study of demographic factors including gender, age, highest education, occupation, average monthly income and status, the results of the analysis were as shown in Table 1.

**Table 1 Shows the percentage of respondents' demographic factors, by gender characteristics**

<table>
<thead>
<tr>
<th>Demographic Factors</th>
<th>Amount</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>84</td>
<td>21</td>
</tr>
<tr>
<td>Female</td>
<td>316</td>
<td>79</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>below 30 years</td>
<td>184</td>
<td>46</td>
</tr>
<tr>
<td>31-40 years</td>
<td>160</td>
<td>40</td>
</tr>
<tr>
<td>41-50 years</td>
<td>28</td>
<td>7</td>
</tr>
<tr>
<td>over 50 years</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Highest education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Undergraduate</td>
<td>188</td>
<td>47</td>
</tr>
<tr>
<td>Bachelor's Degree</td>
<td>184</td>
<td>46</td>
</tr>
<tr>
<td>Master</td>
<td>28</td>
<td>7</td>
</tr>
<tr>
<td>Occupation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>General Hire / Company Employees</td>
<td>212</td>
<td>53</td>
</tr>
<tr>
<td>Government Officials / State Enterprise Employees</td>
<td>84</td>
<td>21</td>
</tr>
<tr>
<td>Trading/Private Business</td>
<td>104</td>
<td>26</td>
</tr>
<tr>
<td>Average monthly income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>below 15,000 Baht</td>
<td>212</td>
<td>53</td>
</tr>
<tr>
<td>15,001 – 25,000 Baht</td>
<td>160</td>
<td>40</td>
</tr>
<tr>
<td>25,001 – 35,000 Baht</td>
<td>28</td>
<td>7</td>
</tr>
<tr>
<td>Status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>single</td>
<td>132</td>
<td>33</td>
</tr>
<tr>
<td>married</td>
<td>240</td>
<td>60</td>
</tr>
<tr>
<td>separated/divorced</td>
<td>28</td>
<td>7</td>
</tr>
<tr>
<td>Sum</td>
<td>400</td>
<td>100</td>
</tr>
</tbody>
</table>

According to Table 1, an analysis of demographic factors of the sample showed that the majority of the 316 females were 79% of them under the age of 30, 184 of them 46 percent had the highest education, 188 undergraduates. 47% had 212 general hires/employees, 53% with an average monthly income of less than 15,000 baht, 212 people, 53% and 240 marital establishments, representing 60% of them.

Part 2: Analysis of social welfare data.

In the study of social welfare, including being valued to society. Having supplementary activities, the results of the analysis are as table 2.
Table 2 Social Welfare Deviations

<table>
<thead>
<tr>
<th>Social Welfare</th>
<th>(\bar{x}) S.D.</th>
<th>Comment level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Being valued in society</td>
<td>4.02 .14</td>
<td>moderate</td>
</tr>
<tr>
<td>2. Having supplementary activities</td>
<td>4.89 .28</td>
<td>highest</td>
</tr>
<tr>
<td>3. Participation in society</td>
<td>3.56 .19</td>
<td>moderate</td>
</tr>
<tr>
<td>4. Social Acceptance</td>
<td>4.69 .19</td>
<td>highest</td>
</tr>
<tr>
<td><strong>Sum</strong></td>
<td>4.29 .20</td>
<td>highest</td>
</tr>
</tbody>
</table>

According to Table 2, the results of the analysis of social welfare data showed that all four areas had the highest level of opinion levels (\(\bar{x} = 4.29\), S.D. =.20). When considering each aspect, the highest average side was the presence of auxiliary activities (\(\bar{x} = 4.89\), S.D. =.28).

Part 3: Health Benefits Data Analysis.

Table 3 Health Benefit Standard Deviations

<table>
<thead>
<tr>
<th>Health Benefits</th>
<th>(\bar{x}) S.D.</th>
<th>Comment level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Having a mental disorder</td>
<td>4.34 .12</td>
<td>highest</td>
</tr>
<tr>
<td>2. Physical ailies</td>
<td>4.94 .23</td>
<td>highest</td>
</tr>
<tr>
<td>3. Memory changes</td>
<td>4.01 .15</td>
<td>high</td>
</tr>
<tr>
<td><strong>Sum</strong></td>
<td>4.43 .17</td>
<td>highest</td>
</tr>
</tbody>
</table>

From table 3, the overall analysis of health benefits data has the highest level of opinion level (\(\bar{x} = 4.43\), S.D. =.17). It was found that physical ailation has the highest level of opinion (\(\bar{x} = 4.94\), S.D. =.23).

Part 4: Analysis of the living data of the elderly

Table 4 Aging Living Standards and Deviations

<table>
<thead>
<tr>
<th>The livelihoods of the elderly</th>
<th>(\bar{x}) S.D.</th>
<th>Comment level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Medical Treatment</td>
<td>4.36 .25</td>
<td>highest</td>
</tr>
<tr>
<td>2. Finance &amp; Living</td>
<td>4.24 .18</td>
<td>highest</td>
</tr>
<tr>
<td>3. Housing</td>
<td>4.04 .19</td>
<td>moderate</td>
</tr>
<tr>
<td>4. Having family activities</td>
<td>3.70 .34</td>
<td>moderate</td>
</tr>
<tr>
<td><strong>Sum</strong></td>
<td>4.09 .24</td>
<td>high</td>
</tr>
</tbody>
</table>

According to Table 4, most of the data analyzed for the livelihoods of the elderly had a high level of opinion level (\(\bar{x} = 4.09\), S.D. =.24). Medical treatment was found, has the highest comment level (\(\bar{x} = 4.36\), S.D. =.25).

Part 5: Analysis of conformity data, structural models of public sector welfare management affecting the livelihoods of the elderly.
Table 5 shows the correlation values between public sector welfare management variables affecting the livelihoods of the elderly

<table>
<thead>
<tr>
<th></th>
<th>y1</th>
<th>y2</th>
<th>y3</th>
<th>y4</th>
<th>x1</th>
<th>x2</th>
<th>x3</th>
<th>x4</th>
<th>x5</th>
<th>x6</th>
<th>x7</th>
</tr>
</thead>
<tbody>
<tr>
<td>y1</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>y2</td>
<td>0.944</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>y3</td>
<td>0.826</td>
<td>0.851</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>y4</td>
<td>0.747</td>
<td>0.806</td>
<td>0.834</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>x1</td>
<td>0.857</td>
<td>0.798</td>
<td>0.821</td>
<td>0.808</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>x2</td>
<td>0.889</td>
<td>0.856</td>
<td>0.802</td>
<td>0.851</td>
<td>0.834</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>x3</td>
<td>0.829</td>
<td>0.625</td>
<td>0.869</td>
<td>0.87</td>
<td>0.863</td>
<td>0.808</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>x4</td>
<td>0.844</td>
<td>0.662</td>
<td>0.759</td>
<td>0.786</td>
<td>0.815</td>
<td>0.883</td>
<td>0.761</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>x5</td>
<td>0.88</td>
<td>0.841</td>
<td>0.891</td>
<td>0.787</td>
<td>0.763</td>
<td>0.729</td>
<td>0.74</td>
<td>0.854</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>x6</td>
<td>0.844</td>
<td>0.85</td>
<td>0.713</td>
<td>0.811</td>
<td>0.822</td>
<td>0.877</td>
<td>0.869</td>
<td>0.739</td>
<td>0.751</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>x7</td>
<td>0.847</td>
<td>0.835</td>
<td>0.897</td>
<td>0.808</td>
<td>0.87</td>
<td>0.859</td>
<td>0.827</td>
<td>0.764</td>
<td>0.83</td>
<td>0.832</td>
<td>1</td>
</tr>
</tbody>
</table>

According to Table 5, most variables have a high level of correlation with a correlation coefficient between 0.6 and 0.9. When the correlation coefficient is used to analyze the causal influence, the results of the analysis are as shown in Figure 1.

![Causal relationship model](image)

Chi-Square=24.04, df=29, P-value=0.72684, RMSEA=0.000

Figure 1 A causal relationship model of public sector welfare management that affects the livelihoods of the elderly

According to Figure 1, the causal relationship model of public sector welfare management affecting the livelihoods of the elderly is accurate. Because models are consistent with
empirical data, they are not necessary. Chi-square is insignificant, p > 0.05, RMSEA = 0.000.

Table 6 Empirical harmonization index of causal relationship model of public sector welfare management affecting the livelihoods of the elderly

<table>
<thead>
<tr>
<th>Harmony Index</th>
<th>Good criteria.</th>
<th>Value obtained</th>
<th>Results of the hearing</th>
<th>summarize</th>
</tr>
</thead>
<tbody>
<tr>
<td>chi-square-Sig.</td>
<td>&gt;0.05</td>
<td>0.727</td>
<td>Passed</td>
<td>Good</td>
</tr>
<tr>
<td>RMSEA</td>
<td>&lt;0.05</td>
<td>0.000</td>
<td>Passed</td>
<td>Good</td>
</tr>
<tr>
<td>NFI</td>
<td>&gt;0.90</td>
<td>0.984</td>
<td>Passed</td>
<td>Good</td>
</tr>
<tr>
<td>CFI</td>
<td>&gt;0.90</td>
<td>1.000</td>
<td>Passed</td>
<td>Good</td>
</tr>
<tr>
<td>SRMR</td>
<td>&lt;0.05</td>
<td>0.018</td>
<td>Passed</td>
<td>Good</td>
</tr>
<tr>
<td>GFI</td>
<td>&gt;0.90</td>
<td>0.989</td>
<td>Passed</td>
<td>Good</td>
</tr>
</tbody>
</table>

According to Table 6, chi-square values greater than 0.05 indicate that the model corresponds to empirical data. Found to meet all criteria.

Table 7 Influences on Causal Relationship Models of Public Sector Welfare Management Affecting the Livelihoods of The Elderly

<table>
<thead>
<tr>
<th>Result variables</th>
<th>$R^2$</th>
<th>Influences</th>
<th>variable</th>
<th>Social Welfare</th>
<th>Health Benefits</th>
<th>The livelihoods of the elderly</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Benefits</td>
<td>0.98</td>
<td>Direct</td>
<td>0.99</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Indirect</td>
<td>0.99</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Sum</td>
<td>0.99</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>The livelihoods</td>
<td>0.91</td>
<td>Direct</td>
<td>0.99</td>
<td>0.02*</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>of the elderly</td>
<td></td>
<td>Indirect</td>
<td>0.99</td>
<td>0.02*</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Sum</td>
<td>0.99</td>
<td>0.02*</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

*p<0.05

According to Table 7, the causal relationship model of public sector welfare management affecting the livelihoods of the elderly has a positive influence on the variance. Social welfare can jointly explain the variability of health welfare variables and the livelihoods of the elderly by 98% and 91% respectively.

Considering the importance of variables caused by influence, social welfare directly influences the health welfare and livelihoods of the elderly equally, equal to 0.99, and social welfare has an indirect influence on the livelihoods of the elderly, delivered through health benefits equal to 0.02.
Discussion

Social Welfare As you age, older people may feel that their self-worth is decreasing. As a result, it is possible to withdraw from social activities. In line with the theory of regression from the disengagement theory society, the elderly must always have activities. In line with the theory of co-activity, The Activity theory is a social activity that helps to enrich and build the self-confidence of the elderly. Promote good human relations by interacting with others. Participation in community and social activities Having a common interest without compulsion. In line with Meléndez, et al 2019, participation in the social activities of each elderly person varies according to physical condition. Socioeconomic conditions.

Health Benefits Health is important for quality of life because of physical and mental well-being. Young civil servants in retirement are considered elderly people who need to develop their feelings. Because with retirement, this feeling diminishes. Therefore, some people will continue to be satisfied by finding other jobs instead, such as planting trees. It must be accepted that the physical performance changes naturally. The body has reduced strength and must accept death without fear. It corresponds to the theory of Robert Peck theory and Jung's theory (Jung, s theory of individualism) Physical changes are changed and progress slowly, starting to change the structure and function of tissue cells in all systems of the body. At different rates and durations of each individual. Psychological and emotional changes, psychological conditions are closely related to physical conditions as the body changes with increasing age, emotions and minds will also change. Personality changes in the elderly, born out of the perception of various changes. As you get older, you're going to have Facing feelings of loss in the age of the elderly and gaining social acceptance. Complies with Sonthaya Maneerat, Samphan Maneerat and Tiwawan (2018) Social change in addition to the physical and psychological changes that the elderly will have to experience, the company also has to make changes to its mental and mental health. Social change is one thing that older people can't avoid. As older people interact with other people and society, they start from middle age. Due to the loss of the same role that used to be consistent with Chawalit Sawatphol (2018) The role of the elderly is to experience deterioration in health and rely on the help of others and comply with Pan, & Chee (2020) Roles Socially, in families that have had to be lost, there is a sense of psychological pressure to rely heavily on others due to physical conditions that are unfavorable to perform the activities they want.

The livelihoods of the elderly Start by adapting Understanding learning Change attitudes Accept the changes in physical changes. Changes in job functions. Social acceptance older people should have an education about the supplementary work or hobbies that can generate
income, and they should be prepared in every way. For example, the psychological aspect must be prepared to have a positive attitude, not to see yourself as worthless, a burden on the family. Physically, you need to be prepared by exercising and regularly checking up regularly and leisure activities need to be prepared by doing what you like. planting trees playing sports with a group of friends traveling in the right places and not causing self-harm. Complies with Wanida Durongritthichai, Kamolthip, Klantrathi and Noppanat Champasath (2018) each elderly person has different adaptive behaviors. Each aspect of adaptation has been always relevant and unique in individuals, something that can be observed, monitored or measured by the behavior expressed by a person. Decisions about the effectiveness of adaptive behavior must also take into account the self-assessment or perception of the person and the circumstances surrounding the moment. In line with ROY, 2009, a person's adaptive behavior is classified as critical to the adaptation system, which can be appropriate adaptation behavior if the behavior is the response of a person who encourages stability according to the goals of adaptation, or it may be inappropriate adaptation behavior if the behavior is a response that appears to the contrary. However, both appropriate adaptation behaviors and inappropriate adaptation behaviors will be reversed as a system for maintaining appropriate adaptation or for further appropriate adaptation.

**Recommendations for the Next Research**

This study found that in the survey to collect the data, when it was analyzed, it was found that the samples should be more clearly segmented by determining the number of samples at each age range, income, gender, in order to obtain more specific information, able to go to welfare needs urgent necessity of the elderly. In addition, those who will do the next research or who are looking for a model to manage public sector welfare for the elderly in the economy. In terms of the need for society, further research should be done on the model that will be created as a model for assessing the livelihoods of the elderly in order to achieve a more inclusive policy.

**References**


