

PSYCHOEDUCATION TO ENHANCE SELF-EFFICACY AND THE QUALITY OF LIFE THE ELDERLY IN BANGNANGLEE SUB-DISTRICT, AMPHAWA DISTRICT SAMUTSONGKHAM PROVINCE

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ABSTRACT

The Psychoeducation to enhance self-efficacy and the quality of life in the elderly in Bangnanglee Sub-district, Amphawa District, Samut Songkhram Province was investigated, aiming 1) to examine the quality of life of the elderly on knowledge domain, perceived self-efficacy and mental health. 2) to compare the quality of life of the elderly on knowledge, perceived self-efficacy and mental health in Bangnanglee Sub-district, Amphawa District, Samut Songkhram, 3) to examine the effectiveness of Psychoeducation to enhance the performance and quality of life for the elderly in Bangnanglee Sub-district, Amphawa District, Samut Songkhram. In this study, the samples included a total of three hundred and one elderly aged 60 years up, residing in Bangnanglee Sub-district, Amphawa District, Samut Songkhram District, Samut Sakhon Province. of overall 301 subjects, 175 subjects are male and 126 subjects are female. The purposive sampling method was adopted to divide the sample into two groups; experiment group of 30 persons and control group of 30 persons. The elderly samples participated in the Psychoeducation to enhance the quality of life came from three villages; each included ten persons. Data collection was conducted using the questionnaires. The statistics implemented included percentage, mean, standard deviation, and Pairs t - test for statistical tests.

Results

1. Post-experimentally, the elderly participating in Psychoeducation to enhance the self-efficacy and the quality of life through the group process gained better knowledge than those in normal mental health group at statistically significant level 0.01

2. Post-experimentally, the elderly participating in Psychoeducation to enhance the self-efficacy and the quality of life through the group process perceived higher self-efficacy than those in normal mental health group at statistically significant level 0.01

3. Post-experimentally, the elderly participating in Psychoeducation to enhance the self-efficacy and the quality of life through the group process reported more positive attitude and improved mental health than those in normal mental health group at statistically significant level 0.01

Keywords-Psychoeducation, enhanced self-efficacy, process group, the quality of life of the elderly

INTRODUCTION

The scientific and medical breakthrough brings about the longer and healthier physical being to mankind. However, because the enormously growing number of population on the planet, it is fearful that this may lead to the insufficient foodstuffs. The success of the contraception measures taken decreases the number of the world population [9] . The UN study of the tendency and change in the universal population structure showed that world population aged of 60 years up will increase by 580 million people, and nearby half of these numbers are Asian people (280 million people). The growth rate of the world population estimates 52 percent approximately, the growth rate of the 60-year old or higher elderly increases by 102 percent. The structure of the current generation is covered by the new age group of the older adults [4] The

United Nations estimates that the ratio of the elderly worldwide will be 5.9 percent in 1980, and to 9.7 percent in the 2025; namely; increased by 3 percent in Asia in , and 10 percent in 2025 [3] which the unprecedented increase has been a worrisome phenomenon for countries around the world, because such a significant change would affect the social and economic structure inevitably. Regarding to the Public Health Plan No. 11. Thailand has been facing the significant changes in different contexts; it is considered both opportunity and threat against the national development. The availability of personnel and system has been necessary to the adaptation, future changes, and seeking knowledge wisely in the globalization, the developed immunity to all segments based on the philosophy of sufficiency economy. In the realm of social change, today's developed countries have becoming an aging society. To ensure the desirable health of the elderly and self-care of family members, community involvement in care-giving, and health promotion for the elderly, as well as exposing the elderly to partake in promoting personal health, family, and community, the General Welfare Service for the elderly has been established with the participation of the family and the elderly on health comprehensively. [6]

A survey of the mental health of the aged people in four different regions of Thailand demonstrated the mental health problems of the elderly by regions; the depression in the elderly was identified mostly in South, 15.5 percent while low self-esteem in the elderly was identified mostly in North, 10.9 percent. The commonly found mental health problems in the elderly included depression, anxiety, and feeling of hopelessness. The investigation of the mental health of the aged people in four different regions of Thailand 2014 demonstrated that mental health problems in the elderly that are mostly found include depression, 87 percent, fatigue, 22.6 percent, non-refreshing waking up, 20.6 percent [7]. Consistent with the survey of the mental health of the aged people in Thailand 2014, found that feelings most frequently occurred with the elderly included feeling of non-appetite (4.0 percent), followed by the anxiety (3.4 percent), and frustration (2.9 percent), which the feeling increases with the growing age. The proportion of elderly women is larger than the elderly men, because females are more sensitive emotionally than men [1]

In short, the quality of life of the elderly requires an integration of well-being physically, mentally, and socially. To achieve this, it calls for the mutual responsibilities between the elderly, family, and society through the measures such as self-help and family help, public service, political and community service which all have engaged on the main goals, to improve the aging people's quality of life as much as possible. Samutsongkham, as to the census registration during the past 10 years (2010 - 2014), contained almost 194,057 populations. The number of the population tends to decrease while the number of house has been growing. In addition, it found that number of female people is greater than that of male. In 2014, it numbers a total of 194,189 populations (93,316 male and 100,873 female); and 65,497 houses. The population pyramid is similar to that of Thai populations. The majority of people include working age; the elderly population amount to 16.4 percent of the total population of province, and female is greater than male. The survey indicated that the many elderly have facing health problems; e.g sick of diabetes, high blood pressure, gastric disease, arthritis, and bronchitis respectively. The illness has usually been neglected for a long time, they usually intake of the traditional medicines or buy drugs themselves. Mental health problems commonly reported included anxiety, depression, and loneliness [8]. Thus, the researcher is of the interest to investigate the effectiveness of the Psychoeducation to enhance the self-efficacy and quality of life for the elderly in elderly in Bangnanglee Sub-district, Amphawa District, Samutsongkham Province, and to determine which the level of the mental health the elderly is how they perceive their performance to improve the quality of life, and to examine the effect of the Psychoeducation on the elderly. The results of this research is expected to benefit the agencies involved in the protection and promotion of mental health services for older people properly, consequently that the elderly have a long life and in good health corresponding to the National Economic and Social Development Plan No. 11.

OBJECTIVE OF THE STUDY

1. To examine the quality of life of the elderly on knowledge of perceived self-efficacy and mental health in Bangnanglee Sub-district, Amphawa District, Samutsongkham
2. To compare the quality of life of the elderly in terms of knowledge, perceived self-efficacy and mental health in Bangnanglee Sub-district, Amphawa District, Samutsongkham
3. To examine the effectiveness of Psychoeducation to enhance the performance and quality of life for the elderly in Bangnanglee Sub-district, Amphawa District, Samutsongkham.

METHODOLOGY

Instrument

Questionnaires are decided by research

Part 1: general data of elderly (14 items)

Part 2: perceived data of elderly (22 items)

2.1 Interview of knowledge about psychoeducation of the elderly, the researcher-developed interview under the operational definition and the literature review - 10 items

2.2 Interview of self-efficacy enhancing the quality of life of the elderly, the researcher-developed interview under the operational definition and the literature review - 5 items

2.3 Interview of the aging people's mental health, the researcher-developed interview under the operational definition and the literature review - 7 items

Scoring and Interpretation

Questionnaires about knowledge in psychoeducation to enhance self-efficacy and quality of life for seniors, and mental health - the 5-point rating scale is adopted [2].

Methodology

Design : The purposive sampling was adopted to divide the sample into two groups; experiment group and control group. Ethical Considerations; Prior to implementation, approval to conduct the study was obtained from the Research Ethics Committee of the primary investigator's academic institution used as a study site. All potential subjects received written and verbal explanations about; the nature of the study; voluntary participation; what study involvement would entail; anonymity and confidentiality issues; and the right to withdraw from the study, at any time, without repercussions. These consenting to taking part in the study were asked to sign a consent form.

Study population and sampling ; The target population consisted of the elderly, with 30 in both the experimental and control groups, the samples included a total of three hundred and one elderly aged 60 years up, residing in Bangnanglee Sub-district, Amphawa District, Samutsongkham District, SamutSakhon Province. of 301 subjects, 175 subjects are male and 126 subjects are female. The purposive sampling method was adopted to divide the sample into two groups; experiment group of 30 persons and control group of 30 persons. The elderly samples participated in the Psychoeducation to enhance the quality of life came from three villages; each included ten persons. Data collection was conducted using the questionnaires... The statistics implemented included percentage, mean, standard deviation, and Pairs t - test for statistical tests.

Table 1

compared to the quality of life the elderly for knowledge about psychoeducation between the group process perceived psychoeducation program to normal group.

(n = 30)

	n	\bar{X}	S.D.	t	Sig. (2-tailed)
knowledge about psychoeducation of the elderly				-2.804*	.009
Control group	30	3.87	.681		
Experiment group	30	4.40	.814		

*p<0.01

At show in table 1. significant different was found, between the experimental and control group the knowledge about psychoeducation of the elderly. There also significant different in knowledge about psychoeducation between the group process perceived psychoeducation program to normal group.

Table 2

compared to the quality of life the elderly for perception of self efficacy between the group process perceived psychoeducation program to normal group

(n = 30)

	n	\bar{X}	S.D.	t	Sig. (2-tailed)
perception of self efficacy				-2.183*	.037
Control group	30	3.83	.950		
Experiment group	30	4.23	.504		

*p<0.01

At show in table 2. significant different was found, between the experimental and control group the perception of self efficacy. of the elderly. There also significant different in perception of self efficacy between the group process perceived psychoeducation program to normal group.

Table 3

compared to the quality of life the elderly for mental health between the group process perceived psychoeducation program to normal group.

(n = 30)

	n	\bar{X}	S.D.	t	Sig. (2-tailed)
Mental health				-5.682*	.000
Control group	30	3.00	1.017		
Experiment group	30	4.20	.407		

*p<0.01

At show in table 3. significant different was found, between the experimental and control group the mental health of the elderly There also significant different in mental health between the group process perceived psychoeducation program to normal group.

CONCLUSIONS

The results showed as follows.

Sex - the samples totaled of 301 people, mainly were female; representing 126 people (41.9 percent), male, representing 175 people (58.1 percent).

Age - the samples were mainly aged between 71-75 years, representing 86 persons (28.6 percent), followed by 76-80 years (82 percent), representing 82 people (27.2 percent), and 66 - 70 years old, and representing 78 people (25.9 percent) respectively.

Marital status - the samples mainly were married, alive and stay together, representing 140 people (46.5 percent), followed by married and the spouse passed away, representing 65 people (21.6 percent), single, representing 55 people (18.3 percent), respectively.

Location - the samples mainly stayed in Bangnanglee Sub-district, representing 300 people (99.7 percent), followed by other parts in Samutsongkham, representing 1 people (0.3 percent).

Income - the samples mainly were unemployed, representing 125 people (41.5 percent), followed by income ranged 7,000Baht or lesser, representing 114 people (37.9 percent), 10,000-15,000Baht, representing 33 people (11.0 percent), respectively.

Source of income - the samples earned income from children's support, representing 163 people (54.2 percent), followed by monthly salary, representing 53 people (17.6 percent), earning, but not regular income, representing 41 people (13.6 percent), senior's financial support, representing 40 people (13.3 percent), respectively.

Child's visit - the samples were mainly visited by children, representing 294 people (97.7 percent). 296 samples (98.1 percent) had religious practice and belief. 286 samples (95.0 percent) participated in society, 209 samples (69.4 percent) had no anomaly in eye sight, 92 samples (30.6 percent) had usually muscle ache, 96 samples (29.9 percent) had recurrent muscle ache, 169 samples (56.1 percent) had underlying diseases, 132 samples (43.9 percent) had no any underlying diseases, 228 samples (75.7 percent) did not smoke, and 260 samples (86.4 percent) did not had alcohol drink.

As note in table 1, 2, 3 the mean score of the knowledge about psychoeducation, perceived self-efficacy and mental health of the elderly were significant different at 0.01, between the experimental and control group

In conclusion, the effectiveness of Psychoeducation to enhance the self-efficacy and the quality of life through the group process for the elderly has affected the behavioral change for perceived self-efficacy and mental health the quality of life the elderly in Bangnanglee Sub-district, Amphawa District, Samutsongkham improved consequently.

DISCUSSION

The study took psychoeducation to enhance self-Efficacy and the quality of Life the elderly in bangnanglee sub-district, amphawa district samutsongkham province. The elderly have attitude to perceived Psychoeducation of knowledge group ($X = 4.40, S.D. = 0.814, t = -2.804$), better than normal group ($X = 3.87, S.D. 681, t = -2.804$) perceived self-efficacy ($X = 4.23, S.D. = 504, t = -2.183$) better than normal group ($X = 3.83, S.D. = 0.950, t = -2.183$) and mental health ($X = 4.20, S.D. = 0.407, t = -5.682$) better than normal group ($X = 3.00, S.D. = 1.017, t = -5.682$) Analyse the result to compare the group took psychoeducation to enhance the performance and quality of life for the elderly with normal group find that increase the

elderly took Psychoeducation to Enhance Self-Efficacy and the Quality of Life will change the behavior to knowledge enhance self-efficacy and mental health ($t = -2.804^*$) probably psychoeducation to enhance the performance and quality of life for the elderly with adaptation self-efficacy theories from Bandura (1977). The results revealed the researcher used Bandura Program appeared to have an impact on the elderly and has affected the behavioral change for perceived self-efficacy and mental health, improve well-being the quality of the elderly in Bangnanglee Sub-district, Amphawa District, Samutsongkham . The findings reveal that the significant different the knowledge about psychoeducation, perceived self-efficacy and mental health of the elderly. Since the elderly in the control group did not have the same the knowledge about psychoeducation, perceived self-efficacy and mental health of the elderly as the elderly in the experimental group , it was possible that the control group elderlys were more likely to inappropriately practice their elderly compared to in the experimental group. The effect of knowledge, through self - efficacy, on self management behavior was stronger than the direct effect of knowledge about psychoeducation on self-management behavior could suggest the importance knowledge about psychoeducation and mental health of the elderly in enhancing self - efficacy with in turn, more strongly influences self- management behavior . Even through knowledge about education can self management behavior, having self-efficacy can enhance influence that knowledge about psychoeducation [5].

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