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APPENDICES

4

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Appendix 1

Limitation

- Outside factors that can not be controlled affect all the Family Health Leaders in the same way.
- 2. Measurement from evaluation program in FHL's knowledge and attitude by interview question is the trust answer.
- 3. The best way to evaluate the self health care behavior of thr Family Health Leaders could be to spend time with those family. However this is impractical due to the limited budget and time of the project. So we must rely upon the information the Family Health Leaders focus in the shedule interview.
- 4. The entire Family Health Leaders will be used to assess on them abilities.

Definitions

1. The Elderly means a person who is 60 years old or more.

2. Family Health Leader means the people who selected from Health Volunteers, Health Personal and Community Leader to training about self-health care in fiscal year 1999 and live in Kham Khuan Kaeo District, Yasothon Province.

For this study Family Health Leader means the people who passed the Family Health Leader training program curriculum trained by health personnel and live in Ban Nongwaeng Moo 1 Tambon Loahai, Kham Khuan Kaeo District, Yasothon Province.

3. Self Health Care means self health activities that there are food for the elderly; exercise in the elderly; oral care in the elderly; accident protection; social interaction and mental health.

The elderly tension analysis.

Date

In the last 2 months you have sign / behavior or your fell in which level.

Please insert the mark / in the blank level.

	0	1	2	3
Sign / behavior or your fell	Not at all	Some time	often	usually
1. Sleepless cause from worry or concern				
2. Annoyed, irritable				
3. Can not do any thing				
4. Bustle, whirl				
5. Do not want to see any once.				
6. Headache in only side or pain in both 2 side temple				
of the head.	-			
7. Fell not happy and melancholy and fell sad				
8. Fell hopeless				
9. Fell yourself not available				
10. Always fell agitated				
11. Fell not have concentration				
12. Fell exhausted till not want to do any things				
13. Fell mentally tried till not want to do any things				
14. Fell over palpitate of heart				
15. If unsatisfied you should shake of voice, hand				
shiver.				
16. Unconvinced when do any things				
17. Pain in muscle of occiput, muscle of shoulder or back				
pain.				
18. Lose self-confident in not conversantly situation.		-		
19. Dazed or head Dizziness.			 	
20. Decrease in sexual happiness.				

Result from the analysis

0-5 score

Your depress level is below the normal level. There was little gained from the theory. May because.

- You did not answer the questions truthfully.
- You did not understand the questions or you answer them in the incorrect order.
- You have a shortage of good influences, you are slow, you are heard the same story, and found it tiresome, you have no an excitement in your life.

6-17 score

You have the tension in the standard level. You will organize about tension in your routine. You always adapt yourself to the suitable variant situation. You so satisfied in yourself and your environment. You always have the happiness influence of life. You have the enthusiastic to challenge in the stimulant of your ability. You can organize in your suitable for appropriate. Your product of work is in the high level. This tension is the benefit for routine life and it is influence to the successful.

18-25 score

You have the tension in the little high from the standard level. You have not well being in your routine. You problems did not have the solved. Some time you don't know that you have the tension. Some time you know from the change of your emotion your body you're felling and your behaviors, but it is a little and you are still endured. If you have more time for solved your problem, some time you may organized your life and your tension. You should have the more entertainment for the life, such as exercise, hobbies, movies, and associated with your friends.

26-29 score

You have the tension in the middle high from the standard level. You have rater high tension. You have not happy about your emotion and oppose of the crisis of life. It tell you that you will be the crisis of life. This tension will effect to your work. You should solve by talk with your friend, consult with the close man and consult on the hotline mentally.

30-60 score

You have the tension in the more high from the standard level. You have high tension. You are in the serious crisis of life such as hard illness, chronic illness, disabilities, and serious loss in the family, economic problem. These problems should effect to physical and mental health sure. You may not happy, you diffuse, mistake decisions, hasty and some time you will have the accident.

In this tension is the serious tension. If this tension did not solved it will be a serious mental health. The tension will effect to individuals and your related, In this tension you must consult with the Hotline and Relaxant clinic that clinic cover on the country.

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Questionnaire for the Family Health Leaders.(FHLs.)

In the Family Health Leaders Training Program for Promoting

Self Health Care of the Elderly:

First Name Last Name.....

Adress Moo 4 Tambon Kaennoi

Kumkhuankaeo District ; Yasothon Province.

Part A

<u>Explanation</u> Please writes your answer in the blank or ticks the symbol \checkmark in O the correct. Your data will not be passed to any other organization.

	Codin	ıg
A1. Your age	A1	
A2. Gender ① Male ② Female	A2	
A3. Marriage Status ① Single ② Couple ③ Divorce ④ Widow	A3	(eee)
A4. Your Education O Did not attended school ① Primary Education	'A4	
② Secondary Education (1-3) ③ Secondary Education (4-6)		
$\textcircled{4}$ More than Secondary Education (4-6) $\textcircled{9}$ Others \ldots		
A5. What is your Jobs $①$ No Job $②$ My Job is \ldots	A5	
A6. Total income per month Baht	A6	
A7. Source of Income $\textcircled{1}$ From my work $\textcircled{2}$ from my family	A7	
③ From pension ④ Other source		
A8. The member of people in your family	A8	
A9. Status in your family ① Leader ② Member	A9	

Part B: Knowledge of Health Promoting of the Elderly

Knowledge	Your Opinion			
Kliowieuge	Agree	Uncertain	Don't Agree	Coding
B1. Body Mass index in the elderly is 18.5-24.9	_		-	•••
kilogram per mate square.	3	2	1	B1
B2. The elderly with Diabetic Mellitus should				
control blood sugar to not more than 150 milligram	3			B2
per 100 ml of blood over a 6 months period.				
B3. The elderly with hypertension should control				
blood pressure to not more than 150/90 mm. Hg.	3	2	1	B3
Over a 6 months period.				
B4. The elderly must have at least 18 good teeth				
either real teeth and false teeth.	3	2	1	B4
			<u>i</u>	
B5. If the elderly have friends in the community	3	2		
this help them maintain better mental health.		.		B5
B6. Some of the elderly suffer from having no				
appetite so they should only eat twice a day.	3	2	1	B6
B7. We should give Pepsi, Coke, Sponsor, Ranger,			0	
and Coffee, as this will make them stronger.	3	2	1	B7
B8. The most suitable exercises for the elderly are			0	
physical exercises such as fast walking, riding a	3	2	1	B8
bicycle and traditional dancing (such as tai chi) etc.				
B9. The food suitable for the elderly must be easy				
to eat, and have low fat content such as fish chicken	3	2	1	В9
and vegetable.				

Appendix 2				
Knowledge	Your Opinion		Your Opinion	
	Agree	Uncertain	Don't Agree	Coding
B 10. The elderly should eat 3-4 eggs per week and		_	_	
they should not eat the yoke.	3	2	1	B10
B 11. The elderly suffering for Diabetic Mellitus	0		0	
can eat normal fruit but they should avoid the very	3	2	1	B11
sweet fruit such as durian, etc.				
B 12. The elderly are usually tired so they don't				
think it necessary to exercise.	3	2		B12
B 13.Exercise makes the body healthiness. Making				
the heart and lungs work so they become stronger. It	3	2		B13
delays bone decay, it stimulate the mind defeating				
depression, It encourages normal digestion and				
sleep patterns.				
B 14. The elderly should exercise once per week,				
and only for one hour each time.	3	2	1	B14
B15. The most suitable tooth brushes for the elderly				
are hard because the remove plaque.	3	2	1	B15
B16. The elderly should clean their teeth twice a				
day using toothpaste with fluoride.	3	2	1	B16
B17. When the elderly wear sandals they must wear				
socks to protect against dust and dirt	3	2	1	B17
B18. The elderly are valued and important				B18
members of the family so they should have a	3			
bedroom upstairs.				
B19. The elderly should have a routine such as a	0			
bath time, set meal times and times for exercise.	3	2		B19

Appendix 2	ID [75
Knowledge		Your Opi	nion	
	Agree	Uncertain	Don't Agree	Coding
B20. For the elderly those take medicine every day.			_	
It they forgot to take today's medicine, they should	3	2	1	B20
take double tomorrow.				

Part C Attitude to the Elderly

Attitude	Your Opinio		Your Opinion			
	Agree	Uncertain	Don't Agree	Coding		
C1. When there are more elderly in the community						
the community can not developed because the	3	(2)	1	C1		
elderly are a dependent group in the community.						
C2. We must respect the elderly and give them the						
more care.	(3)	2	1	C2		
C3. The government should invest more in facilities	_		- 'c			
for the elderly in every province because now there	3	2	1	C3		
are more and more the elderly and people have little						
time for taking care of them.						
C4. Neglected or abandoned elderly are a problem	.0.					
for both individuals and society.	3	2	1	C4		
C5. Even though there are other agencies and or the	_					
organizations to support the elderly, they still need	3	2		C5		
support, the love, respect, and appreciation from the						
family and others in the community.						

Appendix 2	
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Appendix 2	ID L			
Attitude		Your Opi	0	
Attitude	Agree	Uncertain	Don't Agree	Coding
C6. It is pointless for the elderly to attend seminars or have continuous education because they haven' t long to live away.	3	2	1	C6
C7. We must respect the seniority of the elderly, and give them the simply gift of a special day such as Songkran day, new years day, and their birth day.	3	2	D	C7
C8. The elderly should not have sexual intercourse.	3	2	1	C8
C9. What do you think about this "When I am old I want you to serve me, I want to see you when I am sick, when I die you should be the one to shut my eyes, you are my son and my	3	2	I	С9
daughter. C10. The elderly should go to religious ceremonies on only the most important religious days, because it is expensive and takes a lot of time.	3	2	D,	C10
C11. The elderly have worked hard when they were young so they should not work hard (mentally or physically) when they were old.	3	2	1	C11
C12. The elderly may have taken a lot of medication when they were younger so if they get sick we must advise them to increase their medication for increased effectiveness	3	2	1	C12
medication for increased effectiveness. C13. Meat and beans are nutritious so the elderly should eat more meat and beans.	3	2	1	C13

endix	2
CHURN	_

Appendix 2	ID			11
Attitude	Your Opinion			
Attituut	Agree	Uncertain	Don't Agree	Coding
C14. The elderly have different genetics and live in	_			
difference environments so they require different	(3)	2	1	C14
nutrition.				
C15. The elderly should take more vitamins to				
make their heart stronger and more effective.	3	2	1	C15
C16. Many of the elderly have anorexia, so we must				
give them more fruit or food that they like so they	3			C16
will eat more.				
C17. We should take more care of the elderly				
concerning their food, they should eat a little at each	3			C17
meal but take 4-5 meals per day.				
C18. People must prepare for being the elderly so				
they will be healthier both physically and mentally	3		1	C18
when they are old.				
C19. We must give the elderly more nutrition				
because they usually eat little. Giving them half a	3	2		C19
glass of milk or half an orange can do this.				
C20. The baby should drink the mothers milk, the		_	_	
elderly must drink whisky instead of milk.	3	2		C20

Appendix 2

Explanation

Regularly

Note 1) Question 1,2,3,4,5,6,8,9,10,11,13,14,18 and 19 regularly means at least once per day on at least 4 days in the week.

Note 2) Question 7 and 20 regularly means twice per years.

Note 3) Question 12 regularly means you twice per week at least 2 week in the month.

Note 4) Question 15 means regularly means once every month at least month at least 6 month of the year.

Occasionally

Note 1) Question 1,2,3,4,5,6,8,9,10,11,13,14,18 and 19 Occasionally means you do this at

least 1 time less than 4 days in the week.

Note 2) Question 7, and 20 Occasionally means once per years.

Note 3) Question 12 Occasionally means once per week

Note 4) Question 15 Occasionally means once a month but less than 6 month of the year.

Practice	Y			
	Regularly	Occasionally	casionally Never	
D1. You advise the elderly to eat the fruit as past of the				
meal and drink 6-8 glass of water per day.	3	(2)	1	Dl
D2. You usually give the elderly the same food as the				
another members of the family.	3	2		D2
D3. You provide the suitable clothing for the elderly				
wear when they exercise.	3	2	1	D3
D4. You take the elderly to the temple or to visit a				
friend's home by car, even though that place is not far	(3)			D4
from their home.				

1.0

Practice	Your Practice			
Fractice	Regularly	Occasionally	Never	Coding
D5. You get the elderly to change their clothes twice a day.	3	2	1	D5
D6. You clean the house and around the house every day.	3	2	1	D6
D7. You take the elderly to have an examination them selves at the health center or the hospital at least twice a year.	3	2	(1)	D7
D8. The members of your family eat brown rice (milled but unpolished rice).	3	2	1	D8
D9. You prepare milk for the elderly to drinking.	3	2	(1)	D9
D10. You prepare cigarettes, the betel palm and the piper betel for the elderly.	3	2	1	D10
D11. You reprimanded the elderly if they talk about sexual intercourse.	3	2	1	D11
D12. You always talk to the elderly at least twice per week.	3	2	1	D12
D13. You advise the elderly to always wear a safety belt in a car or to wear a helmet when riding motorcycle.	3	2	1	D13
D14. You take the elderly whisky or another stimulant drink such as Lipoviton-D, Sponsor, Krating Deang and Ranger.	3	2	0	D14

Appendix 2

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Practice	Your Practice			
Ггасисе	Regularly	Occasionally	Never	Coding
D15. You give money to the elderly at least once a month.	3	2	1	D15
D16. You take the elderly away from their village to another place for recreation at least once per year.	3	2	1	D16
D17. You advise the elderly to take their personal ID card and their welfare health card when they go to the	3	2	1	D17
health center or the hospital. D18. You advise the elderly to do their hobby when				
they have free time, A hobby such as reading the newspaper or entertainment magazine, growing plant,	3			D18
watering the garden, etc.				
D19. You give the elderly only 2 meals per day.	3	2	1	D19
D20. You plan some activities for the elderly on important day at least twice per year such important	3	2	1	D20
day as birthdays, New Year Day or Song Kran day.				

Appendix 3 ID

Survey format for the elderly Quality of life

In the Family Health Leaders Training Program for Promoting

Self Health Care of the Elderly:

The elderly.

First Name......Last Name.....

Adress Moo 4 Tambon Kaennoi Kumkhuankaeo District ; Yasothon Province.

Part A

Explanation Please writes your answer in the blank or ticks the symbol \checkmark in O the correct.

Your data will not be passed to any other organization.

	Codin	g
A1. Your age	A1	
A2. Gender ① Male ② Female	A2	
A3. Marriage Status ① Single ② Couple ③ Divorce ④ Widow	A3	
A4. Your Education O Did not attended school $\textcircled{1}$ Primary Education	A4	
② Secondary Education (1-3) ③ Secondary Education (4-6)		
$\textcircled{4}$ More than Secondary Education (4-6) $\textcircled{9}$ Others \ldots		
A5. What is your Jobs $①$ No Job $②$ My Job is \ldots	A5	
A6. Total income per month Baht	A6	
A7. Source of Income $\textcircled{1}$ From my work $\textcircled{2}$ from my family	A7	
③ From pension ④ Other source		
A8. The member of people in your family	A8	
A9. Status in your family ① Leader ② Member	A9	

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	Indicators	Pre –intervention	Pre -intervention
1.	Body Mass Index (BMI.)	WeightKg.	WeightKg.
		High CM.	High CM.
2.	Individuals routine	O Yes	O Yes
	activities.	O No	O No
3.	Received treatment when	O Yes	O Yes
	they got sick.	🗖 Paid	🗖 Paid
		None Paid	None Paid
		O No received	O No received
4.	They can access the health	O Community Primary	O Community Primary
	sector when they got sick.	Health Care	Health Care
		O Health Center	O Health Center
		O Government Hospital	O Government Hospital
		O Private Hospital	O Private Hospital
		O Alternative Medicine	O Alternative Medicine
		O Drug Store	O Drug Store
		O Others	O Others
5.	They have health	O Yes	O Yes
	examination every year.	O No	O No
6.	They usually exercise.	O Yes	O Yes
		O No	O No
7.	There is a rehabilitation	O Yes	O Yes
2	center in the community.	O No	O No

	Indicators	Pre-intervention	Pre -intervention
8.	The Elderly Health Problems		
	8.1 hypertension	O No	O No
		O Yes	O Yes
		Have treatment	Have treatment
		Have no	Have no
		treatment	treatment
		O Don't Know	O Don't Know
	8.2 Diabetes mellitus	O No	O No
		O Yes	O Yes
		Have treatment	Have treatment
		Have no	Have no
		treatment	treatment
		O Don't Know	O Don't Know
	8.3 Rheumatoid and arthritic	O No	O No
	pain.	O Yes	O Yes
		Have treatment	Have treatment
		Have no	Have no
		treatment	treatment
		O Don't Know	O Don't Know
	8.4 Asthma	O No	O No
		O Yes	O Yes
		Have treatment	Have treatment
		Have no	Have no
<u>.</u>		treatment	treatment
		O Don't Know	O Don't Know

	Indicators	Pre intervention	Pre -intervention
	8.5 Semi-Paralysis.	O No	O No
		O Yes	O Yes
		Have treatment	Have treatment
		Have no	Have no
		treatment	treatment
		O Don't Know	O Don't Know
	8.6 Other Problems	O No	O No
		O Yes	O Yes
		Have treatment	Have treatment
		Have no	Have no
	•••••	treatment	treatment
		O Don't Know	O Don't Know
9.	Urinary : evacuation problems		
	9.1 Don't have problem with	O No Problems	O No Problems
	Urinary.	O Have problems	O Have problems
	9.2 Don't have problem with	O No Problems	O No Problems
	Evacuating.	O Have problems	O Have problems
10.	Don't have a problem sleeping.	O Sleepnight	O Sleepnight
		O Sleepless	O Sleepless
11.	Don't have a problem walking.	O Normal	O Normal
		O Abnormal	O Abnormal
12.	Don't have a problem with their	O No Problems	O No Problems
	eyesight.	O Have Problems	O Have Problems
		Not Clear	Not Clear
		Can't see	Can't see
13.	Have more than 20 good teeth.	O Normal	O Normal
		O Abnormal	O Abnormal

	Indicators	Pre -intervention	Pre -intervention
14.	Don't have a problem with their hearing.	 No Problems Have Problems Not Clear 	 No Problems Have Problems Not Clear
15.	They get suitable food.	Deaf O Yes O No	Deaf O Yes O No
16.	They received adequate drinking water and adequate domestic water supply.	O Adequate O Inadequate	O Adequate O Inadequate
17.	Good mental health.	O Normal O Abnormal	O Normal O Abnormal
18.	There is a suitable room for the elderly in the house they live in.	O Suitable O Unsuitable	O Suitable O Unsuitable
19.	There is the suitable toilet and suitable bathroom.	O Suitable O Unsuitable	O Suitable O Unsuitable
20.	There are no nuisances.	O No have Nuisance O Have Nuisance	O No have Nuisance O Have Nuisance
21.	Received the accepted by others.	O Received O No Received	O Received O No Received
22.	There are activities with other people in the community or at	O Get the member group	O Get the member group
	least that they must be a member of a social group.	O No get the members group	O No get the members group
23.	There is a person to consult when they have any problems.	O Have O No Have	O Have O No Have
24.	They live in a genial or friendly family.	O Yes O No	O Yes O No

	Indicators	Pre -intervention	Pre -intervention
25.	They have adequate income	O Adequate	O Adequate
	every month.	O Inadequate	O Inadequate
26.	They are not addicting to	• No Addict	O No Addict
	alcohol.	O Addict	O Addict
27.	They are not addicting to	O No Addict	O No Addict
	tobacco.	O Addict	O Addict
28.	They usually enjoy religious	O Yes	O Yes
	activity in the community.	O No	O No
29.	They receive (and benefit from)	O Yes	O Yes
	information about improving	O No	ΟΝο
	their lives.		
30.	They have the health welfare	O Yes	O Yes
	card so they don't pay when they	O Other Health Welfare	O Other Health Welfare
	are sick or they receive free	O No have	O No have
	attention because a relative		
	works for the government sector.		
31.	They live safety in the	O Safety	O Safety
	community and their assets are	O No safety	O No safety
	safe.		
32.	There is social welfare for the	O Yes Received	O Yes Received
	elderly.	O No Received	O No Received

Adapted from the Medical Department, Ministry of Public Health, Thailand

The Summary of the elderly Quality of life

	Indicators	Pass	Not Bass
1.	Body Mass Index (BMI.)	18.5-24.99 Kg/m ²	<18.5 Kg/m ² or
			>24.99 Kg/m ²
2.	Individuals routine activities.	O Yes	O No
3.	Received treatment when they	O Yes	O No received
	got sick.	🗖 Paid	
		None Paid	
4.	They can access the health sector	O Community Primary	O Drug Store
	when they got sick.	Health Care	
		O Health Center	
		O Government Hospital	
		O Private Hospital	
		O Alternative Medicine	
5.	They have health examination	O Yes	O No
	every year.		
6.	They usually exercise.	O Yes	O No
7.	There is a rehabilitation center in	O Yes	O No
	the community.		
8.	The Elderly Health Problems	initia Aptantiqu	
	8.1 hypertension	O No	O Yes
		O Yes	Have no treatment
		Have treatment	O Don't Know
	8.2 Diabetes mellitus	O No	O Yes
		O Yes	Have no treatment
		Have treatment	O Don't Know
	8.3 Rheumatoid and arthritic	O No	O Yes
	pain.	O Yes	Have no treatment
		Have treatment	O Don't Know

Appendix 3 ID

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	Indicators	Pass	Not Pass
	8.4 Asthma	O No	O No
		O Yes	O Yes
		Have treatment	Have treatment
	8.5 Semi-Paralysis.	O No	O No
		O Yes	O Yes
		Have treatment	Have treatment
	8.6 Other Problems	O No	O No
i		O Yes	O Yes
		Have treatment	Have treatment
9.	Urinary : evacuation problems		
	9.1 Don't have problem with	O No Problems	O Have problems
	Urinary.		
	9.2 Don't have problem with	O No Problems	O Have problems
	Evacuating.		
10.	Don't have a problem sleeping.	O Sleepnight	O Sleepless
11.	Don't have a problem walking.	O Normal	O Abnormal
12.	Don't have a problem with their	O No Problems	Not Clear
	eyesight.		Can't see
13.	Have more than 20 good teeth.	O Normal	O Abnormal
14.	Don't have a problem with their	O No Problems	Not Clear
\sim	hearing.		🗖 Deaf
15.	They get suitable food.	O Yes	O No
16.	They received adequate drinking	O Adequate	O Inadequate
	water and adequate domestic		
	water supply.		

	Indicators	Pass	Not Pass
17.	Good mental health.	O Normal	O Abnormal
18.	There is a suitable room for the elderly in the house they live in.	O Suitable	O Unsuitable
19.	There is the suitable toilet and suitable bathroom.	O Suitable	O Unsuitable
20.	There are no nuisances.	O No have Nuisance	O Have Nuisance
21.	Received the accepted by others.	O Accepted	O No Accepted
22.	There are activities with other people in the community or at least that they must be a member of a social group.	O Get the member group	O No get the members group
23.	There is a person to consult when they have any problems.	O Have	O No Have
24.	They live in a genial or friendly family.	O Yes	O No
25.	They have adequate income every month.	O Adequate	O Inadequate
26.	They are not addicting to alcohol.	O No Addict	O Addict
27.	They are not addicting to tobacco.	O No Addict	O Addict
28.	They usually enjoy religious activity in the community.	O Yes	O No

	Indicators	Pass	Not Pass
29.	They receive (and benefit from) information about improving their lives.	O Yes	O No
30.	They have the health welfare card so they don't pay when they are sick or they receive free attention because a relative works for the government sector.	O Yes O Other Health Welfare	O No have
31.	They live safety in the community and their assets are safe.	O Safety	O No safety
32.	There is social welfare for the elderly.	O Yes Received	O No Received

Note : The Indicators from the Medical Department, Ministry of Public Health, Thailand. 1999

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Curriculum for the Family Health Leader Training Program for

Promoting Self-Health Care of the Elderly.

General Objective of Training: To develop and implement a health promotion program for the elderly focusing on the Family Health Leader.

No.	Subject	Specific objectives	Content	Methods	Materials
1.	Introduction	1. Trainees should know the objective	1. Introducing the trainers and teamwork.		
		of this training.			
£.		2. To know the expectation of the	2. Trainers inform the training objectives.	Ice Breaking	Training Schedule
		trainees.		Activities	Document
		3. To agree with this training	3. Organization and Schedule		
			4. Participate in organization		
			5. Trainers explain the handbook for training.		
2.	Introduction	Knowledge	Experience		
	and value for	1. To explain gerontology.	1. The trainer asks the trainees to write about		
	the elderly.		and explain their experience with the		
			elderly.		
			2. Trainees write about their then the trainees		
			read another experience to the group.		

Appendix 4

No.	Subject	Specific objectives	Participatory Learning / Content	Methods	Materials
		2. To explain the importance of the	3. An elderly person well known in the		Key Elderly
	*	elderly.	community talks to group about their		
			experience.		
		3. To explain the problems of the elderly	3. Trainees talk about the problems for	Discussion	None
		i	the elderly that they know about.		
			4. The elderly talk about their	Lecture	Key Elderly
			individual problems.		
	Having the right	Attitude	5. Trainees write about their feeling	Group Discussion	Paper
	attitude whit the	4. To explain the feelings to the elderly	toward the elderly.	VDO connecting	
	elderly			the problems of the	
			1 4+0	elderly	
		Practice	Reflex and discussion	Group Discussion	Paper
		5. To explain to the needs of the elderly	6. Divide the trainees into groups of 5		
			to 6 people. Then everyone in each	*	
			group writes about what they think are		
			the needs of the elderly.		

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No.	Subject	Specific objectives	Participatory Learning / Content	Methods	Materials
		6. To explain how to take care of the	Experimental and Application	Group	Paper
		clderly.	7. Trainces write about how they take care of	Discussion	
			the elderly.		
		I	Understanding and Conceptualization	Presentation	Transparency
		The second se	8. The trainers summarize to the group the		
			content of 1-6.		
			9. The trainers present various problems of the	Presentation	Transparency
			elderly.		
		Module 1	: Nutrition for the elderly		
3.	Nutrition for the	Knowledge	Experience		
	elderly.	1. To explain the importance of food for	1. The trainees talk about the importance of	Question	None
		the elderly.	food for the elderly.		
			2. The elderly who have good health talk about	Lecture	Key Elderly
			their diet.		
		2. To explain the problems whit the	Reflex and discussion	Discussion	None
		elderly eating.	The trainees talk about the problems of the food		
			for the elderly.		
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Appendix 4

		Module 1: N	utrition for the elderly (Continue)		
No.	Subject	Specific objectives	Participatory Learning / Content	Methods	Materials
		Attitude	4. The trainees in each group write about talk	Group Discussion	Paper
		3. To explain in the elderly nutrition needs.	about the problems of the food for the elderly.		ands in-b
		4. To explain how to give beneficial food to	5. The trainees write a suggested menu for the	Group Discussion	Paper
		the elderly.	elderly for each day in the week.		
,		Practice	Understanding and Conceptualization	Lecture	Handbook
		5. To set the menu for the elderly.	6. The trainers summarize to the group the		
			content 1-5 and present the menu for the		
			elderly.		
			Experimental and Application	Practice	Food Raw
			7. The trainees practice to cook for the elderly		Material
			at their home.		

Module 1: Nutrition for the elderly (Continue)

Module 2: Exercise in the elderly

No.	- Subject	Specific objectives	Participatory Learning / Content	Methods	Materials
4.	Exercise for the	Knowledge	Experience	Demonstration	V.D.O Tape
	elderly.	1. To explain the importance and the	1. Introduce the content by showing V.D.O		
		benefit of exercise in the elderly.	about exercise for the elderly.		

Nu.	Subject	Specific objectives	Participatory Learning / Content	Methods	Materials
			2. The trainces talk about importance exercise for the elderly and its.	Discussion	None
			3. The elderly which good health talks about how they exercise.	Lecture	Key Elderly
		Attitude 2. To explain their attitude toward the elderly problems whit exercise.	Reflex and discussion 4. The trainces talk about their attitude and the elderly problems with exercise.	Discussion	None
		3. To explain a method of exercise for the elderly.	 Understanding and Conceptualization 5. The trainces write about the exercise necessary everyday for the elderly. 6. The trainces summarize to the group the content 1-5. 	Lecture Group Discussion	Paper
		Practice 4. To explain how to do appropriate exercise with the elderly.	Experimental and Application 7. The trainees see the V.D.O again and practice some of the exercises.	Demonstration and Practice	V D (Playing
		5. The muscle ability testing.	8. The trainees practice how to do the muscle ability testing in the elderly	Practice	V D (Playing

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Module 2: Exercise in the elderly

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Appendix 4

No.	Subject	Specific objectives	Participatory Learning / Content	Methods	Materials
5.	Oral Health Self-	Knowledge	Experience	Demonstration	Key
	Care in the elderly.	1. To explain the importance	1. The trainees talk about the importance and the benefit	Lecture	Elderly
		and the benefit of oral health.	of the oral health.		
		2. To explain the oral problems	Reflex and discussion		Key Elderly
		and their attitude to the oral	2. The trainees talk about the oral health problems in the	Lecture	
		health.	elderly.		
			3. An elderly person has good teeth talk about their oral		
		(4)	hygiene.		
		3. To explain how to care the	4. An elderly person who has good teeth talk about how to	Lecture	None
		oral health.	care their teeth.		
			5. The trainees summarize to the group the content 1-4.	Lecture	
			Understanding and Conceptualization Experimental	Demonstration	Model tooth
		Practice	and Application	and Practice.	brushing.
		4. To practice correct tooth	6. The trainees demonstrate the correct brushing method.		
		brushing.	7. The trainees practice the correct brushing method.		
		5. To explain how to take care	8. The trainers demonstrate the care of false teeth.	Lecture	Poster
		of false teeth.			

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Module 3: Oral Health Self – Care in the elderly

Module 4: Accidental Protection in the elderly.

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No.	Subject	Specific objectives	Participatory Learning / Content	Methods	Materials
6.	Accidental	Knowledge	Experience	Lecture	None
	Protection in the	1. To explain the importance of the	1. The trainees talk about the importance of the		
	elderly.	accident prevention in the elderly	accident prevention in the elderly		
		Attitude	Reflex and discussion	Discussion	None
		2. To explain the common accident of	3. The trainees talk about the common		Picture
		the elderly.	accident of the elderly.	Lecture	
			Understanding and Conceptualization	r	
ĺ			4. The trainees write about how to prevent		
			accidents happening to the elderly.		
		3. To explain how to prevent	5. The trainers summarize to the group the	Discussion	None
		happening to the elderly accidents.	contents of 1-4.		
		Practice	Experimental and Application	Practice	None
		4. Can plan a suitable environment	7. The trainees tell the trainees how to plan the		
		for an elderly person at home.	environment for the elderly in their home.		

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Appendix 4

No.	Subject		Specific objectives	Participatory Learning / Content	Methods	Materials
7.	Social interacti	ion	Knowledge	Experience	Lecture	VDO. Playing
	and Mental		1. To explain the elderly mental	1. The trainers explain about the elderly mental health		
	Health		health problems.	problems.		
				2. The trainers explain about the burden of the elderly to		
				the social.		
			Attitude	Reflex and discussion	Discussions	None
		2. 7	To explain cause of the mental	3. The trainees write about cause of the mental health		
		heal	th problem in the elderly.	problem in the elderly.		
			Practice	3. The trainees write about how to practice for the good	i	
			3. To explain how to have the	mental health in the elderly.		
			mental health in the elderly.	Understanding and Conceptualization		
				5. The trainers summarize to the group about the practice		
				in diet mental health family and the social.		
			4. To explain the social	6. The trainers explain about the social interaction of the		
			interaction of the elderly.	elderly.		
				Experimental and Application	Practice	
				7. The elderly have the concentrate at their home every week.		

Module 5: Social interaction and Mental Health

CURICULUM VITAE

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Name :	Pantong Junsawang
Date of Birth :	27-05-1968
Sex :	Male
Nationality :	Thai
Marital Status :	Married
Education Background :	Bachelor of Public Health
	(Public Health Administration), 1992
	Sukhothai Thammathirat, Open University
	Nonthaburi, Thailand.
Present Position :	Public Health Academic, Level 6
Organization :	Kham Khuan Kaeo District Public Health Office,
	Yasothon Province, Thailand.

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