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RESEARCH ARTICLE

Effects of Community-potential Factors on the Quality of Life of Urban Elderly of Bangkok Metropolitan

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Abstract:

Background:

The population structure in Thailand has changed to an elderly society. The promotion of quality of life for the urban elderly is essential in order to prepare them to become sustainable community members.

Objective:

This study aimed at evaluating the effects related to the community-potential factors on the quality of life of urban elderly and developing the guidelines for the capacity of the community to enhance the quality of life of urban elderly.

Methods:

A mixed-method approach was utilized in two steps. In the first step, quantitative data were collected from 56 elderly people and their caregivers living in an urban area. This data were analyzed by descriptive statistics, Pearson's correlation coefficient, and stepwise multiple regression. In the second step, the qualitative data were also gathered with a semi-structured interview and community surveys from 36 key informants consisting of community leaders, elderly people, partner agencies, community representative groups, public-sector agencies, educational institutions, and people from the civil-society sector to form a focused group in order to analyze their strengths, weaknesses, opportunities, and threats (SWOT). Content analysis was carried out to analyze this data.

Results:

The levels of quality of life among the elderly living in the Chan-Kasem community were high. The community potential factors influencing the quality of life of the urban elderly were also high. Results of regression analysis showed that one variable factor affected the quality of life in the elderly (12.6%).

Conclusion:

Three guideline themes for determining the capacity of the community to enhance the quality of life of the urban elderly were found: 1) building a community network and a community learning process to generate a volunteer group in order to incorporate and solve the elderly's problems, 2) increasing the capacity and promoting the livelihoods of the elderly, and 3) constructing elderly awareness as a valuable human resource of the community.

Keywords: Community potential/capacity, Quality life of the elderly, Urban elderly, Guidelines for development, Effects of community-potential factors, Elderly community.

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1. INTRODUCTION

Thailand is currently undergoing a change in its population structure to a society of the elderly. This trend agrees with the assessment of the situation by the United Nations that the period from 2001 to 2100 will be the century of the elderly [1]. Whereas more than 10% of the entire population is now over 60 years of age and a very large part of the population is elderly, it has become essential that we be prepared to deal

with the situational changes that are about to occur. To do so, we must act upon a foundation of community participation toward solving the problems of the elderly in every dimension that may arise. In the past, the public sector directed its policy and resources into the community in a top-down development format. The result was that the community had no selfawareness of the nature of its problems and needs to be prepared to reach out to the elderly community with quality, understanding, and community awareness. It thus functioned on the basis that lacked a participatory dimension [2]. It became doubtful that the community even knew it was trending toward a "society of the elderly." Community members should have had the occasion to think about it and become involved through a process of discussing their ideas together, cooperating together, and sharing the results, particularly in the zones of the urban communities, where the elderly are living amid rapid economic, social, political and cultural change, with an overall impact on their lifestyle and quality of life [3]. This arrangement complies with the concept of developing community potential for the care of the elderly by Jaiyen (2014), who stated that developing the capacity of the community to care for the elderly is thus a matter of applying the specific features of the community to develop the wellbeing of the elderly in compliance with their needs and wants [4].

The present research focused on studying the Chan-Kasem community area, district of Bang Sue, Bangkok Metropolis. It is a community undergoing social, economic, and cultural change within a diverse population. There is a continual increase in the number of elderly, including both local and rural people, who have relocated to take up residence where they can pursue a livelihood. The population of the Bangkok Metropolis has been found to be quite diverse, forcing the researchers to examine the nature of the problem that is impacting the quality of life of the urban elderly in their communities. For instance, they lack income, savings, knowledge of the latest news, and education. They do not understand their own problems and have no sense of community involvement. Furthermore, the state of their families and communities is such that they do not even have the capacity, or are simply not prepared, to care for their elderly. These factors create problems of adaptation or simply living out one's life during old age. The majority of the people in the Chan-Kasem community have no residence of their own. Community residents live on the rented property or living units. Thus, the well-being of the elderly in their communities is at risk from the rapid changes in the state of the economy of the urban community [5].

It can be observed from the aforementioned data that the elderly in the Chan-Kasem community will be experiencing problems in receiving care from their community if there are no proper preparatory measures in place for a community management system that will promote a sound quality of life for these elderly that would be consistent with the role of the community and the way of life of the community residents. The objective would be an improved quality of life and wellbeing for the elderly. The researchers examined the problems and perceived the importance of developing the community's potential to enhance the quality of life of the elderly in their urban communities by setting future guidelines for the care of the elderly and expanding the guidelines for solving problems affecting other communities of Thailand. The nation would be better able, as a result, to generate sustainable economic and social security for the future. Therefore, in this study, we focused on studying the impact of community potential factors on the quality of life of the elderly and how potential development approaches of the community to enhance the quality of life of the elderly could increase community potential by using concepts related to the elderly and community participation.

1.1. Research Objectives

This study consisted of mixed-method research on the quality of life and community potential in caring for the elderly. The purpose of the research was to find strategies for developing the community's potential in caring for the elderly, with the following objectives:

(1) To analyze the effect of community potential factors on the quality of life of the urban elderly.

(2) To formulate guidelines for developing the capacity of the community to enhance the quality of life of the urban elderly.

1.2. Theory and Conceptual Framework of the Research

The basic information of the community, including conditions and problems of community potential development in strengthening the quality of life of the elderly in urban communities, perspectives of leaders/people in their community, and whether they wanted the community to care about their quality of life, was studied. In addition, the researcher examined the policies, plans, or projects that have been designed to enhance the quality of life of the elderly, as well as the existing strengths, weaknesses, opportunities, and obstacles in enhancing their quality of life. The need to enhance the quality of life of the elderly included reviewing the literature related to the research, as described below.

1.3. The Concept of an Elderly Person

The concept of an elderly person, as defined by the United Nations, refers to a person older than 60 years of age [6]. The Elderly Person Act 2003 sets the official definition of an elderly person in Thailand, whereby an "elderly person" would refer to an individual of Thai nationality over 60 years of age. People in this age group are regarded by the Thai society of today as members of "the society of the elderly." More than 10% of these people are elderly according to the criteria of the United Nations, and not only has there been an increase in the elderly population, but the lifespan of these elderly is also trending upward [7].

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1.4. Quality of Life of the Elderly

The World Health Organization [8] states that the quality of life of the elderly consists of their awareness and sense of satisfaction in carrying on with their lives, which they are able to do in a manner compatible with these four areas, namely their physical health, psychological well-being, social relationships, and environment, as based on quality-of-life measurement tools [9]. These items indicate the factors relevant to one's quality of life, such as health, hygiene, education, the state of the environment, resources, income, buildings, and housing. This finding is supported by Power and Bollinger [10], who stated that a better quality of life for the elderly would depend on developing their quality of life in all four of these areas simultaneously. Furthermore, it was found that the quality of life for the elderly is based on the concepts of health promotion [11], participation [12], environmental management [13], and social support [14].

1.5. Elderly Care Concepts

Caring for the elderly means enabling them to live each day freely with happiness and the quality they desire [15]. It can be done by developing the capacity of their communities in accordance with the concept of the holistic-health potential of Dossy and Keegan [16], who identified six areas of development of this potential that must be considered, namely, personnel, work management, public utilities, condition of the environment, a culture-based society, and economy and thrift, all of which are essential in enhancing their quality of life in their communities.

1.6. Human Resource Development for the Elderly

In managing the elderly as a resource, we should examine the entire process in accordance with basic principles [17] by evaluating them as human capital that impacts the nation's development. Then, we must educate them further so they will have the knowledge and ability to perform their duties with responsibility. This perspective is in agreement with Becker [18], who explained that human capital is a matter of providing education, training, public utilities, and developmental measures.

1.7. The Concept of Community Participation

Participation theory 5, a theory of Raphiphat [19], includes the mass-motivation theory, the morale-raising theory for the people of a nation, the theory of creating a feeling of nationalism, the leadership-creation theory, and the administrative and method theory. It functions by creating the voluntary needs of a person. These characteristics generate cooperation and sustainable participation. These findings are verified by Jai-aree [20], who stated that participation is a process of building consciousness to incentivize the people into realizing that they have a participatory role in the development and problem-solving of their community in a way that returns authority to the people at a foundational level, so that they may then assume their role in the activity of development.

The researchers studied concepts, such as the concept of an elderly person, quality of life of the elderly, elderly care concepts, human resource development for the elderly, and the concept of community participation, and synthesized them as a conceptual framework of research, as shown in Fig. (1).



Fig. (1). Conceptual framework of research.

2. MATERIALS AND METHODS

This study is a form of integrated research. Purposive sampling was selected as the mode of research. It involved the Chan-Kasem community in the Bangkok Metropolis since it is majorly based on the elderly society. It is located at the heart of the Bangkok Metropolis, which has made progress in many areas, whether in access to technology, communications, physician care, or, importantly, in its disposition toward developing the capacity of the community to enhance the quality of life of its elderly at one level. It has community leaders with fortitude. For instance, the community has the desire to develop, and it embodies some solid activities related to caring for and assisting the elderly.

2.1. The Population, Sample Group, and Informants

The sample group submitted its responses on an evaluation form pertaining to the quality of life of the elderly and the community's potential for enhancing the quality of life of the elderly. A total of 78 elderly individuals were included, who were able to speak and communicate, and were capable of helping themselves. Nearby caregivers were also included who had attained the legal majority. All were able to read. However, due to the coronavirus disease 2019 (COVID-19) situation, the elderly traveled to the outlying provinces, where they stayed for such a long time that the researchers could compile their data from only 56 respondents.

Major informants included community-leader groups, groups representing the elderly, community-representative groups, government agency groups, educational institutions, and the civil-society sector. These groups consisted of 36 people from outside the Chan-Kasem community who took part in the activity of developing the capacity of the community to enhance the quality of life of its elderly. They were chosen by the purposive-sampling technique.

2.2. Instruments

The research tools used were based on literature reviews and were peer-reviewed prior to use.

1) A questionnaire on the quality-of-life level of the elderly and the community's potential to enhance the quality of life of the elderly in their community. It was in the form of a fivevalue estimator questionnaire consisting of three parts. Part 1 consisted of personal information; part 2 contained 90 questions on the community's potential to enhance the quality of life of the elderly; and part 3 contained 78 questions on the quality of life of the elderly.

To examine research tools, their content correctness (IOC: Index of item-objective congruence) was checked by three experts. A trial was conducted on the urban-community elderly who had similar contexts. It was found that the questionnaire on the quality-of-life level of the elderly had an IOC value between 0.67 and 1.00, with a reliability of 0.933. Also, the questionnaire on the capacity of the community to enhance the quality of life of the elderly had an IOC value between 0.67 and 1.00, with a reliability of 0.948.

2) A semi-structured interview form pertaining to the community context.

3) A line of questioning on issues during group

conversations and/or organizing a discussion forum, focusing on analysis issues, strong and weak points, opportunities, limitations, and strategies for developing a passive strategy, a proactive strategy, a remedial strategy, and a defensive strategy.

4) Participant and non-participant observation form.

5) A field record, which is a tool that the researchers use to record their field observations and their supplementary notes from interviews.

2.3. Data Compilation

The researchers applied for a research ethics review from Kasetsart University, IRB Study code KUREC-SS63/214. This research was conducted while adhering to the principles of human ethics. The research objectives were explained in detail so that the participants would understand and voluntarily enter the research and actively participate in it. The details of the data compilation are as follows:

2.4. Research Data Collection and Data Analysis

2.4.1. Step 1:

For the purpose of analyzing the impact of the community's potential on the quality of life of the urban elderly, quantitative data were collected by the use of a questionnaire. A total of 56 elderly or elderly caregivers were queried on the quality of life of the elderly and the capacity of their community to enhance their quality of life. Data were collected using a questionnaire and analyzed by descriptive statistics, correlation-matrix analysis, and stepwise multiple regression.

2.4.2. Step 2:

The results from step 1 were compiled through a focus group involving 36 community representatives and network partners. They analyzed the strong and weak points, opportunities, and threats by performing a SWOT analysis and TOWS analysis by conducting interviews in the form of a semi-structured questionnaire. Upon reaching conclusions, they then organized a data-recovery forum. Details from the recovered data included topics, such as the quality-of-life level of the elderly and the increasing trend in the number of elderly in the community, as well as strategies for developing the potential of the community to enhance the quality of life of these elderly. The qualitative data were analyzed by content analysis.

3. RESULTS

3.1. Quality-of-life Level of the Elderly in the Chan-Kasem Community

The quality of life of elderly of the Chan-Kasem community was at a high level ($\overline{X} = 3.62$, S.D. = 0.68). After considering each aspect, it was found that the physical aspect of the quality-of-life level was at a moderate level ($\overline{X} = 3.38$, S.D. = 0.64), the psychological aspect ($\overline{X} = 3.90$, S.D. = 0.56), the social aspect ($\overline{X} = 3.59$, S.D. = 0.70), and the environmental aspect were at a high level ($\overline{X} = 3.83$, S.D. = 0.68), and the economic aspect of the quality-of-life level was at a moderate level ($\overline{X} = 3.40$, S.D. = 0.81), as shown in Table 1.

Quality-of-life Aspect	X	S.D.	Quality-of-life Level
Psychological	3.90	0.56	High
Environmental	3.83	0.68	High
Social	3.59	0.70	High
Economic	3.40	0.81	Moderate
Physical	3.38	0.64	Moderate
Overall	3.62	0.68	High

Table 1. The quality-of-life level of elderly of the Chan-Kasem community, as based on the viewpoints of the elderly (N=56).

Table 2. The potential of the Chan-Kasem community in enhancing the quality of life of its elderly, as based on the viewpoints of the elderly (N=56).

Aspect of Community Potential	X	S.D.	Potential Level
Work management	3.74	0.78	High
Personnel/networking	3.70	0.75	High
Public utilities	3.70	0.65	High
Socio-cultural	3.63	0.62	High
Environmental	3.43	0.67	Moderate
Economic	3.00	0.83	Moderate
Overall	3.53	0.71	High

3.2. The Potential of the Chan-Kasem Community to Enhance the Quality of Life of its Elderly

The overall potential of the Chan-Kasem community in enhancing the quality of life of its elderly was at a high level ($\overline{X} = 3.53$, S.D. = 0.71). Altogether, there are six aspects in the development of community's potential, namely the personnel/networking aspect, which was at a high level ($\overline{X} = 3.70$, S.D. = 0.75), the work management aspect, which was at a high level ($\overline{X} = 3.74$, S.D. = 0.78), the public utilities aspect, which was at a high level ($\overline{X} = 3.74$, S.D. = 0.78), the public utilities aspect, which was at a high level ($\overline{X} = 3.70$, S.D. = 0.65), the environmental aspect, which was at a moderate level ($\overline{X} = 3.43$, S.D = 0.67), the socio-cultural aspect, which was at a high level ($\overline{X} = 3.63$, S.D. = 0.62), and the economic aspect, which was at a moderate level ($\overline{X} = 3.00$, S.D. = 0.83), as shown in Table **2**.

3.3. A Study on the Relationship among the Community-Potential Factors Affecting the Quality of Life of the Urban Elderly

An analysis of this relationship was performed using Pearson's product correlation coefficient in order to study the relationship between independent variables and dependent variables of the community's potential. The independent variables of community potential concerned the personnel/networking aspect (X₁), work management aspect (X₂), public utility aspect (X₃), environmental aspect (X₄), socio-cultural aspect (X₅), and economic aspect (X₆), while the dependent variable pertained to the quality of life of the elderly (Y).

From the relationship between the independent variables $(X_1 \dots X_6)$ and the dependent variable (Y), it was found that the six independent variables had the following effect:

X1 had a very low-level positive relationship with Y

(r=0.154), with a statistical significance of 0.001. X_2 had a lowlevel positive relationship with Y (r=0.239), with a statistical significance of 0.001. X_3 had a positive relationship with Y (r=0.254), with a statistical significance of 0.001. X_4 had a lowlevel positive relationship with the quality of life of the elderly (Y) (r=0.355), with a statistical significance of 0.005. X_5 had a low-level positive relationship with Y (r=0.261), with a statistical significance of 0.001, and X_6 had a low-level positive relationship with Y (r=0.308), with a statistical significance of 0.005.

From the internal relationship among the independent variables, it was found that the six independent variables were internally related as follows:

1) X_1 had a high-level positive relationship with X_2 (r=0.828), with a statistical significance of 0.005, and a moderate-level positive relationship with X_4 (r=0.489).

2) X_2 had the highest-level positive relationship with X_2 (r=0.769), with a statistical significance of 0.005, and a moderate-level positive relationship with X_4 (r=0.620), with a statistical significance of 0.005.

3) X_3 had the highest-level positive relationship with X_4 (r=0.785), with a statistical significance of 0.005, and a highlevel positive relationship with X_5 (r=0.622), with a statistical significance of 0.005.

4) X_4 had a high-level positive relationship with X_6 (r=0.648), with a statistical significance of 0.005, and a high-level positive relationship with X_5 (r=0.628), with a statistical significance of 0.005.

5) X_5 had the highest-level positive relationship with X_6 (r=0.708), with a statistical significance of 0.005.

These values are displayed below in Table 3.

-	X ₁	X ₂	X ₃	\mathbf{X}_4	X ₅	\mathbf{X}_{6}	Y
X_1	1	-	-	-	-	-	-
X2	0.828**	1	-	-	-	-	-
X ₃	0.618**	0.769**	1	-	-	-	-
X_4	0.489**	0.620**	0.785**	1	-	-	-
X ₅	0.576**	0.700**	0.622**	0.628**	1	-	-
X ₆	0.661**	0.713**	0.730**	0.648**	0.708**	1	-
Y	0.154	0.239	0.254	0.355**	0.261	0.308*	1

Table 3. Results of a study on the interrelationship of the community potential factors affecting the quality of life of the urban elderly.

Note: ** Correlation is significant at the 0.01 level. * Correlation is significant at the 0.05 level.

Table 4. Predictive-variable analysis of the overall quality of life of the elderly and factor classification by multiple stepwise regression.

Model	R ² chang	b	beta	S.E.	t	<i>p</i> -value
X_4	0.126	0.300	0.355	0.108	2.786	0.001
Constants (a)=2.576, R=0.355, R ² =0.126						

3.4. Community-potential Health Factors that Affect the Quality of Life in the Chan-Kasem Community

A stepwise multiple regression analysis was performed using six predictive variables. These variables included the community-potential aspects of personnel/networking, work management, public utilities, environment, socio-culture, and economy. It was found that the variable with a joint predictive capacity was the environmental aspect of community potential, with a predictive capacity of 12.6%. This equation contains variables capable of predicting the overall quality of life, with a statistical significance of 0.001, as shown in Table **4**.

The predictive equation in its raw form: $\widehat{\gamma} = 2.576 + (0.300) x_4$

The predictive equation in its standard score form: $\hat{z}=0.355{+}z\,x_4$

3.5. Guidelines for Developing the Community Potential of Enhancing the Quality of Life of the Urban Elderly

The Chan-Kasem community had some outstanding strong points, consisting of 1) the location of the community in the heart of the city, 2) strong community leaders with foresight, who were accepted by the people both in and outside the community, 3) ongoing learning activities that were being conducted within the community's cultural setting for the care of the elderly, and 4) forming a group of sturdy public health volunteers with the role of caregivers for the elderly and providing information to the caregivers. There were also some significant weak points, consisting of 1) the lack of guidelines for the caregivers of the elderly, 2) the lack of maintenance of public areas, and 3) residential areas that are not appropriate for the elderly.

From a TOWS matrix analysis, five strategies emerged, namely 1) promoting careers that can generate an income for the elderly and other people of the community for selling in the market, 2) building cooperation with the relevant agencies to organize activities aimed at promoting the quality of life the elderly and their caregivers, 3) promoting the work of health service volunteer groups who provide valid information to the people in the community on anti-COVID-19 preventive measures, 4) building cooperation between the relevant agencies and the community in maintaining the suitability of public areas to the lifestyle of the elderly, and 5) developing guidelines and elderly-care knowledge through the relevant agencies, both within and outside of the community, as mentioned in Table **5**.

4. DISCUSSION

4.1. Quality-of-Life Level of Elderly in the Chan-Kasem Community

The overall quality of life of elderly of the Chan-Kasem community was at a high level. When each aspect was taken into account, it was found that the physical and economic aspects were at moderate levels. The reason for these generally high levels is that a majority of the people had relocated from other provinces to unite with their families, where they found happiness in a good environment. They have a kinship system in which they care for one another. Nonetheless, the economic and physical factors were at only moderate levels since the elderly and their caregivers are advanced in age, and their physical condition has been deteriorating further, so they can no longer earn the same income that they once had when they were younger. Although the elderly may see themselves as enjoying a good quality of life, they still face the same kind of problems; it all depends on the satisfaction level of an individual. These findings comply with the quality-of-life concept of the WHO [21], providing its own meaning to the quality of life by referring to it as a perception of satisfaction and personal status while living out one's life in society.

Table 5. SWOT and TOWS MATRIX data on the factors of community potential toward the quality of life of the urban elderly.

Internal Factors (External Factors)	Strengths - The community is located in the heart of the city nearby to stores dispensing popular items that they can buy that are familiar to them. - It has strong community leaders with foresight, who are accepted by the people both within and outside the community. - It features ongoing learning activities that are being conducted within the community's cultural setting for the care of the elderly. - Forming a group of sturdy public health volunteers with the role of caregivers for the elderly and providing information to the caregivers.	Weaknesses - Lack of guidelines for the caregivers of the elderly. - Residential areas that are not appropriate for the elderly in terms of sanitation, roads, and lighting.
Opportunities - There are both public and private-sector agencies, as well as educational institutions, providing training, knowledge, and ongoing career development.	 S-O Strategies Promotion of careers with the capacity to generate an income for the elderly and other people of the community for selling in the market, such as bread making, alcohol gel, and sandalwood flowers. Building cooperation with the relevant agencies to organize activities aimed at promoting the quality of life of the elderly and their caregivers. 	W-O Strategies - Building cooperation between the relevant agencies and the community in maintaining the suitability of public areas for the lifestyle of the elderly, such as by coordinating work with the Bang Sue District Office in maintaining the roads and electrical power.
Threats - The COVID-19 situation put community residents out of work. They lacked income, and the economy was in a recession. - Those of working age were forced to find work outside the community. There was a shortage of caregivers for the elderly.	S-T Strategies - Promoting the work of health service volunteer groups who provide valid information to the people in the community on anti-COVID-19 preventive measures, such as wearing masks, washing their hands, and getting vaccinated.	W-T Strategies - Since the elderly make up a fragile group who are easily at risk of COVID-19 infection, the proper measures need to be put in place to prevent COVID-19, including the development of guidelines and elderly-care knowledge through the relevant agencies, both within and outside of the community.

4.2. The Potential of the Chan-Kasem Community to Enhance the Quality of Life of its Elderly

The overall community's potential to enhance the quality of life of its elderly was at a high level, while the environmental and economic aspects were at descending moderate levels. Whereas community leaders and community members view the elderly as a valuable resource, there is a state of readiness in all parts of the community to support the resettlement of the elderly. Nonetheless, the elderly still must depend on themselves economically; only then will they be able to enjoy a good quality of life. Moreover, for the community to be capable of caring for its elderly, it must have a sound economy as its basis. These considerations are in line with the agingfriendly city concept of the WHO. There are eight aspects of this WHO concept, namely buildings and territory, mass transit, residences, social participation, earning respect, holding down a job, modern communication, and the attentive care of the community [22]. According to the quality-of-life development concept for the elderly by the WHO [21], the economic aspect of quality-of-life must be developed as a fundamental living factor.

4.3. A Study of the Relationship among the Community-Potential Factors Affecting the Quality of Life of the Urban Elderly

From the interrelationship of the community-potential factors affecting the quality of life of the urban elderly, it was found that the relationship of community-potential variables to community-potential factors subdivides into six aspects. These

aspects include the community potential in the personnel/networking aspect, work management aspect, publicutilities systems aspect, environmental aspect, socio-cultural aspect, and economic aspect. These relationship aspects were at a very high positive level. It could thus be observed that each factor had its own effect in improving the quality of life.

4.4. Community-potential Health Factors that Affect the Quality of Life in the Chan-Kasem Community

The community-potential factors affecting the quality of life of the urban elderly contain a variable with a joint predictive capacity, namely the environmental aspect of community potential, showing that the environment has an influence in promoting the quality of life of the elderly. This conclusion is supported by Chiaochan [23]. The elderly realize that the environment has an impact on the way they live their lives. For instance, they are aware of the fact that they live in freedom, are not being held captive, and are safe and secure in life.

4.5. Guidelines for Developing the Community Potential of Enhancing the Quality of Life of the Urban Elderly

The formulation of guidelines for developing the potential of the community to enhance the quality of life of the elderly was accomplished through a process of community participation. The researchers and research participants in the community held a meeting to enhance the understanding of the research objectives and construct a partnership network by use of a focus group / SWOT-analysis TOWS-matrix process. The purpose was to analyze the community's potential to enhance the quality of life of its elderly, build cooperation leading to a study of their problems, grasp the significance of their problems, and answer research questions jointly. It was found that the strong points of the Chan-Kasem Community were its leaders, who were able to energize its people to participate in various activities. There was also a long-term community work base, along with the Chan-Kasem community; those of advanced age were gathered into an Association of Elderly Persons, which was an important force in the work of the community. Moreover, they assembled with network partners and community leaders to summarize what they had learned in managing activities that would develop their economic potential. It was found that the elderly and others in the community were very interested in taking part in the activities. There were 36 cases of activity participation. It was found that the elderly who participated learned to build careers and received an average increase in their incomes of 1,000 -1,500 baht per person from the program for developing the qualityof-life enhancement potential of their community. The Association of Elderly Persons and Community Fund received an increase in income from their merchandise sales, resulting in an economic turnover in the community. The Community Council has put together a quality-of-life communitydevelopment plan for its elderly in terms of income promotion. They will include in the annual work plan for the Chan-Kasem community with the Bang Sue District Office and the Electrical Power Development Fund for Sustainable Community Development. They constitute the main sector of activitiesbudget oversight. The researchers have organized a forum for the presentation of strategies with the related sectors in order to construct guidelines for developing the community with the aim of enhancing the quality of life of elderly in the Chan-Kasem community. Researchers arrived at three guidelines corresponding to the strong points, weak points, opportunities, and strategies, as described below:

4.6. Guideline 1

Constructing a community network and community learning process to form volunteer groups and build participation with external agencies in order to develop community structures suitable to the problems of the elderly.

Organizing activities to enhance the quality of life of elderly include the following actions: promotion of economic potential, participation of the elderly in the research from the onset of the community-context data collection, a joint summary of the formulation phase, and testing of the data. Participants will present information in a community forum to create activities in which the community will be engaged in expressing opinions and deciding what activities to perform in order to enhance the quality of life of its elderly. In addition, participants will monitor and evaluate the activity results in accordance with the concept of Oakly and Marsden [24], who observed that development that starts with the involvement of the people in their communities would achieve results that are more successful than any development scheme that involves only outsiders in their activities.

4.7. Guideline 2

Expanding capacity and promoting careers for the elderly, the caregivers of the elderly, and the people of the community

The researchers studied the community and then went on location to build a relationship with the community residents and involved agencies. They acquired their information by grouping with the community and network partners and focusing on community-analysis issues. The subject of enhancing the quality of life can be summarized by noting that the elderly and the people of the community have been in economic distress during the COVID-19 era. Community residents have become unemployed. The elderly are lacking in income, both from the work they do and the income they receive from their children and grandchildren. They are under a load of stress that has affected both their bodies and minds. They are inclined, for that reason, to a group seeking an income for their families and the community. This situation is reflected by the findings of the WHO [22], which stated that a city that is friendly to the elderly would offer civic participation and employment with numerous options so that the elderly can then voluntarily participate in activities that generate income or in activities that generate pride, as they are compensated for their employment. Their work must be both fair and appropriate. Both the researchers and the community participated in organizing workshops with the participation of lecturers from the network partners providing instruction and setting up the OTOP senior group. They aimed to group together to create products. They searched for distribution sources for their products, which would bring income into the community and result in an improved quality of life for the elderly.

4.8. Guideline 3

Generating awareness of community residents so they may see the importance of the elderly in their status as a precious human resource of their community.

The sustainability of development originates from the community's cooperation in developing its potential to enhance the quality of life of its elderly residents. It is important for community leaders to focus their attention on development and for the community to instill an awareness, love, and belief that they are themselves the owner of the community. The community would then work well with government-sector agencies, both internally and externally. There would be rolebased factors that would contribute toward the successful development of improved community potential. This reasoning harmonizes with the quality-of-life concept of Thomopoulou [25], who stated that the quality-of-life level of elderly could not be viewed in only one aspect. Developing the quality of life of elderly requires consideration of many aspects combined together, with a cause-and-effect relationship similar to the concept of human-resource development pertaining to the elderly by Swansburg [26], who stated that human behavioral changes would lead to a change and development of human resources pertaining to the elderly.

CONCLUSION

The results showed that the impact of community potential factor on the quality of life of elderly in urban areas that had the greatest effect was economic. Moreover, if the needs of the elderly were not addressed, this impact would also lead to other problems. The research findings showed that economic wellbeing relies on the power of community, awareness, participation, networking, and strengthening the community's potential to become a learning center for the elderly.

When the elderly and the community perceive their weaknesses and strengths, they can then develop effective strategies to solve their problems. Therefore, it is essential to develop guidelines to expand community potential to enhance the quality of life of the elderly in urban areas. They must act by participating in community activities to enjoy a better quality of life, resulting in the sustainable development of the community's potential to enhance the quality of life of its elderly.

RESEARCH LIMITATIONS

Determination of the format of the activities should be based on the actual nature of the problems being experienced by the elderly and the community. It should not be focused on the problems that the researchers themselves prefer to correct. Those working on enhancing the quality of life of the elderly should have a positive attitude toward working with them. They are to be valued and placed at the very center of the action taken to meet their needs in the performance of their activities, which should be suited to their physical condition.

RECOMMENDATIONS FOR FUTURE RESEARCH

It can be observed from the present research that with good networking partners and cooperation from the people of the community, the work plan for developing the community's potential to enhance the quality of life of the elderly will proceed very quickly. Consequently, the research guidelines to be drawn from this study consist of building a strong community core that will bring about a sustainable and longlasting development of community potential.

LIST OF ABBREVIATION

SWOT = Strengths, Weaknesses, Opportunities, and Threats

ETHICS APPROVAL AND CONSENT TO PARTICIPATE

The researchers applied for a research ethics review from Kasetsart University, IRB Study code KUREC-SS63/214.

HUMAN AND ANIMAL RIGHTS

No animals were used in the studies that are the basis of this research. All the humans were used in accordance with the ethical standards of the committee responsible for human experimentation (institutional and national) and with the Helsinki Declaration of 1975, as revised in 2013 (http://ethics.iit.edu/ecodes/node/3931).

CONSENT FOR PUBLICATION

Informed consent was obtained from all participants of this study.

STANDARDS OF REPORTING

COREQ guidelines were followed.

AVAILABILITY OF DATA AND MATERIALS

Not applicable.

FUNDING

None.

CONFLICT OF INTEREST

The authors declare no conflicts of interest, financial or otherwise.

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Declared none.

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