The 5 Dimensions of Happiness Program in Elderly: A Case Study of Samut Songkhram Elderly Clubs in Samut Songkhram Province

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ABSTRACT

The research was a Quasi-Experimental Research that aimed to compare the five dimensions of happiness of the elderly: health, recreation, integrity, cognition and peacefulness before and after participating in the five dimensions of happiness program. The five dimensions programs were a happy stretching exercise, fun quizzes, funny fruits boost brain, telling a better story, playing with playdough. The target group in this research were 150 elderly from five elderly clubs in Samut Songkhram Province. The research tools were the 5 Dimensions of Happiness Program and Thai Happiness Indicator (THI-15) provided by the Department of Mental Health, Ministry of Public Health of Thailand. The results were proved by the descriptive statistics such as frequency, percentage, mean, standard deviation, Pair t-test, Pearson's Product Moment Correlation, and multiple regression analysis at the significance level of 0.05. This study indicated that the elderlies' average score after participation in the five dimensions of happiness program was higher than before participation. The elderly's happiness level was good, which meant to be upper than other ordinary people. The participants also agreed and satisfied with the overall activities in the five dimensions of happiness program. The research investigated the happiness comparison before and after participation that the activities brought five dimensions of happiness to the elderlies. The research disclosed that working time had a negative relationship with the five dimensions of happiness, in contrast to telling a better story that could describe the variance of the five dimensions of happiness accounted for 5.20%. We also recommended executive directors and staff related to the mental health promotion for the elderly to refer to these findings as a guideline to organize the activity for the elderly in their local community. This program can enhance the better-quality life for the elderly. Nonetheless, according to the limited time of the research, the future works should extend the time of activity to acquire the quality results and should study more with elderly in the different areas with different cultures so that the research results can be applied to create a sustainable five dimensions of happiness program for the elderly's sustainability.

INTRODUCTION

Presently, the world population's structure has been rapidly changed by referring to the aging index that compares the substitution structure of the elderly population (age 60 years and over) and the childhood population (under 15 years) (Benjanirat *et al.*, 2021; Moon *et al.*, 2020). An aging index less than 100 indicates several elderly populations that is less than childhood population. Nowadays, the world population tends to be aging, the aging index is more elaborated. If an aging index is less than 50, it means to a young society. An aging index is among 50-119.9, which means to an aged society (Srichamroen, 2020). A completed aged society means an aging index value between 120-199.9 (Thumcharoen *et al.*, 2018). A super-aged society means an aging index value 200 and over (Prasartkul, 2014).

Office of the Permanent Secretary for Ministry of Social Development and Human Security (2014) reported that Thailand has been a second top rank of ASEAN aging societies after Singapore and Thailand has been transformed to an aging society since 2005. Thai aged population has been calculated 10 per cent of the population (Suksatan & Ounprasertsuk, 2020; Teerawichitchainan *et al.*, 2019). When the population is up to 20 per cent, Thailand will be a complete age society by 2020. It also expects to super-aged society by 2020 when 60 aged population has 28 per cent of all population (Manasatchakun *et al.*, 2016). In 2014, according to elderly

report, top four Provinces of the highest aging index were Lampang (143.5), Lamphun (143.3), Prae (140.0) and Samut Songkhram (133.7) (Prasartkul, 2014). Emphasis on this numbers, an aging index of Samut Songkhram will be reached to 231.05 by 2025, and 286.28 by 2030 (Office of the Permanent Secretary for Ministry of Social Development and Human Security, 2014). Seeing that, Thailand pays attention to health promotion for the elderly to enhance the elderly to have better-quality lives and reduce other family members' dependency (Suksatan & Posai, 2020; Whangmahaporn *et al.*, 2018). On a minimum level, the local elderly club has an essential role in promoting and encouraging the elderly in the local community to have alternatives in managing the aging social problems. In the elderly club, the elderly members are full of helpfulness and hospitality. They shall learn and participate in activities for the elderly together. They are honorable and encourage each other. The goals to initiate the club for the elderly in the local community are to be the right place for the elderly to meet and join a group activity that is beneficial to themselves and others.

The 5 dimensions of happiness program is an activity to enhance the elderly's mental health which is developed to slow down physical problems of the elderly (Pereira *et al.*, 2015; Wongsawat *et al.*, 2015). It is a crucial developing psychological program that concentrates to medical, psychological, intellectual aspects (Division of Mental Health Promotion and Development, 2012). This program

is generated for mental health staff to contribute to the elderly in the local community. The 5 dimensions of happiness program consist of five activities as follows. Health (happy body) is an activity that focuses on physical conditions, daily life activities, and health risk behaviors of the elderly. Recreation (happy relax) is to build a pleasant lifestyle through activities that lead a happy mood (Capodieci *et al.*, 2018; Posai & Suksatan, 2021). Integrity (happy soul) is an activity to emphasize the ideas of life-changing, self-esteem, perspectives and perception for oneself and others, and staying away from depression and discourage (Lindayani *et al.*, 2020; Suksatan & Tankumpuan, 2021). Cognition (happy brain) is an activity to stimulate a brain memory, abstract thinking, communication, reasoning and problem-solving (Horne *et al.*, 2018). Peacefulness (happy peace) is an emotional activity to create a perception and understanding of self-feeling, and emotional controlling (Wongsawat *et al.*, 2015).

Several elderly clubs in Samut Songhram have reached fifty-two clubs where they have conducted the different elderly events in each area. The author realizes the importance of health promotion in the elderly by adopting the 5 dimensions of happiness program and studying the effectiveness when applying the 5 dimensions of happiness program for the elderly in this area. The author also expects that this study will benefit the executive directors and staff related to health promotion for elderly and elderly sustainability.

OBJECTIVES
1. To compare the five dimensions of happiness of the elderly before and after participating in the 5 dimensions of happiness program.
2. To study the level of agreement of the elderly towards the 5 dimensions of happiness program.
3. To study the satisfaction level of the elderly towards the 5 dimensions of happiness program.

METHODOLOGY

The research was quasi-experimental research employed a one-group pre-posttest design for achieving the result. The research population was the elderlies from five selected elderly clubs of all fifty-two in Samut Songkhram Province. They were selected by sample random sampling method.

Research tools were designed after detailed literature reviews from the theoretical study, research articles, and recent works, which consisted of an hour and a half action plan for the 5 dimensions of happiness program: a happy stretching exercise, fun quizzes, funny fruits boost brain, telling a better story, playing with playdough. Data were calculated by Index of Item – Objective Congruence (IOC) which equated 0.88, and 5 dimensions of happiness assessment following 15 Questions of Thai Health Indicator (THI-15) initiated by Department of Mental Health, Ministry of Public Health of Thailand. The 15 Questions of Thai Health Indicator had acceptable reliability equated 0.70. An opinion questionnaire and satisfaction survey for the 5 dimensions of happiness program had high reliability as 0.80. The researchers collected data manually both before and after conducting the 5 dimensions of happiness program. Descriptive statistics used in the research were frequency, percentage, mean, standard deviation. The researchers compared pre-program and post-program scores by pair t-test, and relationship among personal factors of age and working time by Pearson's Product Moment Correlation. Besides, the research referred to multiple regression analysis to describe the variance of the 5 dimensions of happiness program and its happiness at the statistical significance level of 0.05.

RESULTS

The majority of the participants were married female, aged between 66-70 years old. Most of them were farmers who earned income below 5,000 Baht a month. Those completed a primary school degree and had underlying health conditions such as hypertension, diabetes, heart disease, and cancer. They rode motorbikes as a personal vehicle for their travelling.

Table 1. Descriptive statistics of the Pre-5 dimensions of happiness program and Post-5 dimensions of happiness program (*N*=150)

Target group	MEAN	*SD*	Happiness level	t	*p*-value
				11.57	<0.01*
Pre-program	41.34	7.65	Fair		
Post-program	50.20	4.73	Good		

*p- value < 0.05

According to Table 1, the research found that almost half of the targeted elderly who participated in the 5 dimensions of the happiness program was fairly scored (M = 41.34, *SD* = 7.65). Half of the elderly had good happiness level after participation (M= 50.20, *SD* = 4.73). Statistically,

the 5 dimensions of happiness program were related to 5 dimensions of happiness of the elderly at a significance level of .05 (t = 11.57, *p* < 0.01).

Table 2. Descriptive statistics of level of agreement towards the 5 dimensions of happiness program (*N*=150)

List	M	*SD*	Level of agreement
1. Exercise keeps you healthy	4.03	0.68	Agree
2. Perform activities and move normally	4.02	0.72	Agree
3. Proud to share your experiences	4.12	0.66	Agree
4. Concentration leads to better memory	4.01	0.75	Agree
5. A practice of meditation gives you a sense of calm	3.99	0.71	Agree
6. Bring the activities from the 5 dimensions of happiness program into practice at home	3.94	0.75	Agree
7. Share the knowledge gained from the 5 dimensions of happiness program with other non-participants	3.95	0.76	Agree
8. The 5 dimensions of happiness program benefits the elderly club	4.13	0.65	Agree
9. Be satisfied with the 5 dimensions of happiness program	4.10	0.67	Agree
10. Be agreed with the implementation of the five dimensions of happiness program in the elderly club	4.16	0.66	Agree
Overall	**4.04**	**0.70**	**Agree**

Table 2 revealed the level of agreement towards the 5 dimensions of happiness program. As a result, the majority agreed with the list of opinions in the 5 dimensions of happiness program (M = 4.04, *SD* = 0.70). By each list, sort by descending average score, most of the participating elderlies agreed with implementing the 5 dimensions of happiness program (M = 4.16, *SD* = 0.66). The elderlies agreed that the 5 dimensions of happiness program benefited the elderly club (M = 4.13, *SD* = 0.65), which was subsequent of proud to share their experiences (M = 4.12, *SD* = 0.66). The majority were also satisfied with the 5 dimensions of happiness program (M = 4.10, *SD* = 0.67); besides, they were counted in a question stated that the exercise kept them healthy (M = 4.03, *SD* = 0.68). Followed by most of them could perform activities and move normally (M = 4.02, *SD* = 0.72). They also agreed with the concentration led to better memory (M = 4.01, *SD* = 0.75). As a result, they agreed that meditation gave them a sense of calm (M = 3.99, *SD* = 0.71). Most participants agreed to share the knowledge gained from the 5 dimensions of happiness program with other non-participants (M = 3.95, *SD* = 0.76). Even though they agreed to bring the activities from the 5 dimensions of happiness program into practice at home, the score was the lowest (M = 3.94, *SD* = 0.75).

Table 3. Descriptive statistics of the satisfaction level towards the 5 dimensions of happiness program (*N*=150)

List	M	*SD*	Satisfaction level
1. Gain knowledge and fun	4.09	0.68	Satisfied
2. Participating in the activities	4.09	0.63	Satisfied
3. Period of time	4.03	0.72	Satisfied
4. Knowledge from activities	4.02	0.65	Satisfied
5. Recognizing and understanding the importance of activities	4.02	0.67	Satisfied
6. Recognizing and understanding the activity details	4.05	0.68	Satisfied
7. Recognizing and understanding the participatory process in the activities	4.04	0.74	Satisfied
8. Action and attention to the activities	4.10	0.72	Satisfied
9. Utilizing the knowledge from the activities	4.10	0.67	Satisfied
10. Developing the knowledge gained from the activities	4.12	0.66	Satisfied
overall	**4.06**	**0.68**	**Satisfied**

Table 3 presented the descriptive statistics of the satisfaction level towards the 5 dimensions of happiness program. Overall, the research found that most were satisfied with the 5 dimensions of happiness program (M = 4.06, *SD* = 0.68). By descending score, each list, most of the participants were satisfied with developing the knowledge gained from the activities (M = 4.12, *SD* = 0.70) Followed by, they were satisfied with the action and attention to the activities (M = 4.10, *SD* = 0.72), and utilizing the knowledge from the activities respectively (M = 4.10, *SD* = 0.67). The elderlies gain much knowledge and fun (M = 4.09, *SD* = 0.68). A greater number of participants

was also satisfied with participating in the activities (M = 4.09, *SD* = 0.63). They were satisfied with recognizing and understanding the activity details (M = 4.05, *SD* = 0.68) followed by period of time (M = 4.03, *SD* = 0.72). Besides, elderlies who participated in the program were satisfied with knowledge from activities (M = 4.02, *SD* = 0.65). The lowest satisfaction level was pointed to recognizing and understanding the importance of activities (M = 4.02, *SD* = 0.67).

Table 4 showed the relationship between personal factors of age, working time and the 5 dimensions of the happiness tested by Pearson's Product Moment Correlation. The research investigated that age and working time had negative indicators with the 5 dimensions of happiness which reported variance of the 5 dimensions of happiness; the older age and longer times, the lower happiness level in five dimensions of happiness.

Table 4. Relationship between personal factors of age, working time and the 5 dimensions of happiness (*N*=150)

Measure	5 dimensions of happiness	*p*-value
Age (years old)	-0.104	0.041*
Working time (year)	-0.120	0.018*

* *p*-value < 0.05

Table 5 reported that telling a better story could explain the variance of the 5 dimensions of happiness, and it calculated 5.20% which implied the elderlies who participated in the telling a better story activity were

related to the 5 dimensions of happiness because they were proud of themselves to share their own and others' appreciation.

Table 5. Regression coefficients of predicted variables and statistics of the 5 dimensions of happiness program towards the 5 dimensions of happiness by multiple regression analysis (*N*=150)

Measure	Unstandardized Coefficients		Standardized Coefficients	t	*p*-value
	B	Std.Error	Beta		
Constant	5.851	.098		59.879	.000
1. Happy stretching exercise	.004	.021	.010	.176	.861
2. Fun quizzes	.047	.027	-.102	-1.734	.084
3. Funny fruits boost brain	.000	.022	-.022	-.037	.970
4. Telling a better story	.070	.019	.227	3.759	.000*
5. Playing with playdough	.012	.025	.027	.483	.629

p-value <0.05, R^2=0.052, Adjusted R^2 = 0.040, F=4.176

CONCLUSION AND DISCUSSION

This research studied the 5 dimensions of happiness program in the elderly: a case study of Samut Songkhram elderly clubs in Samut Songkhram Province. The research found that most participated samples were female age among 66-70 years old with married. They were farmers who earned a monthly income below 5,000 Baht. Most of them finished a primary school degree and had underlying health conditions such as hypertension, diabetes, heart disease, and cancer. Several elderlies attended the program by motorbike. These results were consistent with Ounprasertsuk *et al.* (2020) who studied health quality of life of Samut Songkhram elderly and found the same direction that majority were 60-69 aged married female. Most of them had an education background at a primary school level and being an unemployed person. They earn not much a month which was up to 5,000 Baht. As a result of gender and age at 66-70 years old, those were healthy enough to participate in all activities, the comparison of happiness scores before and after participation tended to be good. It reported that almost half of the participants were fairly scored (M = 41.34, *SD* = 7.65) before participation in contrast to after participation half of them had good happiness level (M= 50.20, *SD* = 4.73). According to t valued 11.57 and p-value equated 0.00, these values mean that after participating in the 5 dimensions of happiness program, the elderlies were happier than before. This report was coincident with Namkrachang (2016) who studied the effectiveness of the program for developing five dimensions of happiness in elderly: a case study of elderly in Krawan Sub-district, Khunhan District, Srisaket Province. The author proved that when

comparing happiness scores between pre-program and post-program, the post-program indicated the higher happiness score with a significance level of 0.05 (Namkrachang, 2016). Besides, a result of brain assessment for recognition and perception tested by Mini-Mental State Examination (MMSE-Thai 2002) showed that the elderlies had higher average brain scores after participation than before participation with a significance level of 0.05 because the activities were singing and dancing which influenced elderlies with higher happiness. Moreover, according to the happiness level before and after participating in the 5 dimensions of happiness program, the research revealed that the majority were strongly happier than before participating in the program. Also, the happiness level was good and higher than ordinary people. The results were not related to Khangthong *et al.* (2017). They studied happiness and life satisfaction of elderly in Nong Khon Subdistrict, Ubon Ratchathani Province and indicated that happiness and satisfaction levels of elderly in Nong Khon Subdistrict, Ubon Ratchathani were exactly as ordinary people (Khangthong *et al.*, 2017).

Overall, the majority agreed with activities about the level of agreement of the elderly towards the 5 dimensions of happiness program. The highest score of each opinion showed that most of them were agreed with developing the knowledge gained from the activities. The results were related to Somsri and Mokmoon (2018) who studied the 5 dimensions of happiness for the elderly: a case study of the elderly in the elderly clinic, Nakhonphanom Hospital. The authors reported that most participants agreed with the activities because the program encouraged the elderlies to

recognize themselves. When the participants shared their experiences, most of them followed and adapted for their daily lives. In each group activity, giving a reward or appreciation affected the elderlies because they were joyful and felt like part of the activity (Somsri & Mokmoon, 2018).

Apart from the satisfaction level, most of the participants were satisfied with the 5 dimensions of happiness program (M = 4.0, *SD* = 0.68) followed a hypothesis. This result was in relevance with Karnchanasubsin (2018) who studied the 5 dimensions of happiness program of Department of Mental Health that affected elders' mental health at Phochai Subdistrict, Wapi Pathum District, Mahasarakham Province and revealed that most of the attendants were satisfied with the 5 dimensions of happiness program, according to descending score of recreation, peacefulness, health, integrity, and cognition, respectively (Karnchanasubsin, 2018). The highest score was telling a better story due to pride of experience sharing and gaining knowledge and fun, which would be developed for an elderly club.

RECOMMENDATIONS
The research recommended referring the findings as a guideline to organize the activity for the elderly in their local community, which targeted the elderly in pride of themselves, to share their experiences and learn, among others. Besides, the future works should study in the different dimensions of areas and cultures to adopt the five dimensions of happiness program towards the various group of the elderly.

RESEARCH LIMITATION
According to the limited time of this research, this study repeated only two testing times, which should extend more for accurate results. The research also trialed in an area so that it would instead be preferred to work more in the different forms of cultures to apply the research results for the elderly's sustainability.

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