

The Development Of Model Health Care Of The Elderly With Principles In Buddhists : Watsukhontharam Bangsai Distric Pranakhornsriayuthaya Province

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Abstract

This research is a particular experimental research. The purpose of this Point is mentioned for 1) The situation analysis and the condition of elderly health care 2) Assessment and development of the elderly health care model with the principle of Buddha Dhamma. There are divided for 4 periods of time. **1) Preparation periods.** The information data are collected with a screening test and to be involved with tools & equipment are composing with General information interview plus knowledge, practicing assessment form and doing my self-care with research group in Voluntary selection There are purposed in two groups as following as; first group that participates in planning activities, including Community leaders Public Health Official and 12 public health volunteers. There are a number of 25 elderly people in the sample group, thread data analysis, percentage, mean, and standard deviation, **2) Operation periods.** We are using the group chat for arrange and organize in the meetings by applying participatory planning processes. To conduct an analysis for elderly health care with the principle of Buddhism. **3) Assessment periods.** Assessment of elderly people health

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care with Buddhist principles and 4) Summary periods. The development of the model by comparing with the knowledge and practicing before and after. An Analysis of values with Paired t-test level 0.05 statistic.

The research has found and the report of the samples are female more than males, with an average age of 64.9 years, marital status (couple), primary school graduation. There have a major agricultural career, earn income starts from 4,001 baht or more than that. There are a number of 1-3 residents in the family who have got a patients with high blood pressure, there is a fast walking exercise that takes 20 - 30 minutes. They actually do not smoke, not consume any alcohol The health condition of the elderly found that 27.91 percent has chronic diseases in hypertension, high blood cholesterol, 25.58 percent, 12.09 percent of diabetes mellitus. There is a slight pain when standing down to weight and having mental health equal to the general population. Lack of knowledge and information, beneficial food, proper exercise, social activities, visits home from staff and also lack of opportunities to surf & relax. After participating in the theme development activities they are comparing with some knowledge. It has found that after the development of the model, having some more knowledge than before the development of the 9.70 percent in practicing, it is found that after the development of the self-practice than before the development of 14.20 percent. There are some different knowledge significantly at the level of .05, except for personal health care. The disease prevention it make "No difference" p - value> .05 and different practicing levels in all aspects with statistical significance at the level of .05 and overall blood test results (biochemistry), all totally the healthy is getting more better and stronger.

It could be seen that the elderly health care model are integrates with the Buddha Dharma principle to be integrated with the community's way. Impact of knowledge of the elder, having their own health care activities. Know how to prevent disease continuously, the results of healthy care is better and get a quality of life for the elderly.

Keywords ; Development in Elderly Health Care model with Buddhist Principles

Introduction

The aging situation of the Thai population in the past ten years. Right now from the situation report of the Thai elderly, it has found that the Thai population has been increased significantly in the past fifty years, with an increase of 3 percent per year, following currently the average to 0.5 percent per year. While the aging population has been increased dramatically the average in year 1960 or 16.5 percent of the population of 65.9 million people. It is estimated that in year 2021, Thailand is going to enter the "Elderly society completely"

According to Thailand country needs to prepare to cope with the rapidly aging population situation. The increasing proportion of elderly people will be increasing the burden of the state, society, community and families that have to take care of their health. And also the cost of living is including living places suitable for older people Therefore need to be prepared for resource mobilization, developing various forms such as systems for providing equal health services to the elderly who will be increasing the number of the year as in 2022 and 2031. Longevity is not an indication that most directly an elderly will live in a healthy life at the end of the destination. From the situation report of Thai elderly in 2016, reported that "many elderly people may be in a fragile state. Wondering one third of the elderly have lower income than the poverty line. While children who have been to be the main source of income for the elderly have decreased. The percentage of elderly people living alone or living together with the elderly alone is likely to increase. The number of elderly people in the dependency situation is about 4 hundred thousand people. The mental illness of it is called the Dementia is about six hundred thousand people. The elderly are in urban and rural areas with different economic status so it has inequality in accessing health services. Most of the problem is engaged to the fundamental of the elimination for transportation of the travelling

Therefore an elderly healthy in Thailand has some problem of a tendency to deteriorate in many ways. Following at the same time, partly due to the limited access to health services, especially for households that the elderly always live alone. Then, another problem that has found what to more have difficulty traveling. We should accept for what we've got right as well as the world is lacking of Thai healthy service system and the whole world is apt to care for acute conditions. In terms of equality in accessing the services of the elderly, it is found that Households with older people living alone for further more increasing. Elderly people in these households have less access to make a better service than the elderly in households with relatives or care. They are including access to the public transport services that require for higher costs, so that for the correspond into the elderly of the second and the

third groups that have been living in the countryside. The economic situation has a farming career. They are having with a lower income than the poverty life. The main source of income from children continues to decrease and the most of the elderly are focus on income and working. The lack of bus service in this area is more several than in other areas.

Sukhon Tharam Temple, Thep Mongkhon, Bang Sai District, Phra Nakhon Sri Ayutthaya Province is a charity organization in Buddhism, we are mentioned for the situation of elderly people with differences between elderly patients and general adult patients. Therefore, they are efforts with various organizations, including schools, healthy in hospitality promotion hospitals, volunteers, village and representatives from local administrative organizations. Planning elderly care (Healthy aging) integrated in both physical, mental, social, self-reliant. They are having a good quality of life as potential. They are having a smooth transition from age to age. According to the National Elderly Plan No. 2 (2002 - 2021) aimed at "the elderly as the principle of society" will aim to create a society for people of all ages to be prepared and have full benefits of Physical, mental, intellectual. They are being a society that promotes and accepts the elderly to play an economic, social, cultural, community and family role, contributing to the bond between different ages. In this society for the elderly live equally, with dignity, full pride, independence, participation and receiving care in opportunity. Therefore, the research team to conduct research which has been funded by research from Mahachulalongkornrajavidyalaya University seeks options "The development of the health care model of the elderly with Buddhist principles" because the principle of Buddhism can be integrated with the principles of modern medicine effectively. The way of teachings of Buddhism can develop the mind to have the power to create balance or the eye, which is the balance or fit between the 5 organic elements, namely faith, persistence, consciousness, concentration and wisdom (Somdej Phra Buddha Kosa Chan (P.Payutto Pr.), Characteristics of Buddhism, (Bilingual Version), Bangkok: Charoen Dee Mang Kong Printing, 2015, Page 11-12.) They can control the desirable emotions and undesirable in the right way. In additional, this community has long been dealing with a good charity that is more valuable and good behavior of the community. Most people are likely to make a being merit, polite, gentle, love peace, having grateful with their parents, teachers and wisdom and independence. The way of life is important to the community as a foundation of knowledge and belief in Buddhism. Development of alternative health care for the elderly to have good health. As the proverb says, "Thammasajisukhetti" translates as "Dharma practitioner. It is a happy "that is to confirm

to make more practice in every day, the impact will be enhance the development of physical and mental health effectively.

Research Objective:

1. The purpose and elements of situation analysis as an elderly and healthy care conditions for the elderly in the public community area Sukhumtharam, Thep Mongkhon, Bang Sai District, Phra Nakhon, Sri Ayutthaya Province
2. To develop the health care model of the elderly with the principles Of Sukhumtharam Temple, Thep Mongkhon, Bang Sai District, Phra Nakhon Sri Ayutthaya Province
3. With an assessment of the health care model of the elderly with the way of the Buddhist principles of Sukhumtharam Temple, Thep Mongkhon, Bang Sai District, Phra Nakhon Sri Ayutthaya Province

Research Design & Method

This research is a participatory experimental research. (Participatory Action Research-PAR) is combined with an action research based on the principles of the Buddhists (Principles in Buddhists based Action Research-BAR) on the database. An elderly is divide by 4 things to improve the quality of life, composing of 4 dimensions: physical, social (Precepts and minds are divided into 4 phases:

1. Pre Research Phase:

In the following of the week 1-3, is gather basic information of the community, coordinate and elderly relationships. Public Health Volunteers, Community Leaders, Members of Thep Mongkhon district and Administrative Organization Representative of the Hospitality. They are willing to participate in the project and analyze of the current health Record personal data, candidate acceptance forms, interview and specialize based on the participation.

2. Research Phase

The fourth week, this group has been divided by 3 as; the elderly, community leader and government agency groups. AIC attempts to study and analyze problems with reflects the current condition of the elderly community. This organization will attend to solve and develop health care models to fix up with an elderly community practical activities to cover all 4 dimensions, physical, social, mental and intellectual. So let set up the design & format to recover of the health care specialist of the elderly with the principles of Buddhism, is presented at the network partners together.

Following the week no. 5, to make a summarize and presentation of the results from the participatory planning process. Presenting of the overall well-being for the aged group to listen and get to know of the healthcare sample Providing knowledge for this to combine the principles of Buddhism, are including the physical strength of 5 and 4 prayers. 4 Guidelines for practice, both meditation. Show up the presentation of the video as well as concerned to the Subject: Meditation Therapy, k1- k5 Presenting (draft) health care model of the elderly with the principle of Dhamma for consideration of this fundamental

The following week no. 6 to 7 orderly, using an interview form and get into the validation from experts and also get into another group of the health care development for the elderly. Using for the guideline into the elderly group is not involved with the sample conduct interviews. Performed and activity of the schedule in 2 week time, by assessment form plus the tools & equipment then apply to the next sample group

Next then the following week 8 up to week 20, take this form of the health care for the elderly with the Buddhist principles for directly using the sample group to make sure they are catch up with this activity step by step.

3. Timing Assessment (Evaluation Phase)

In the 20th week, the assessment of the elderly health care with the principle of Buddhist Dhamma No. 1, to assessment with the knowledge level and the practice level, according to the principles of the body, the prayer and the mind. The wisdom of prayer, sample interview, information, obstacles, conducting a review and improvement of activity schedule. Then proceeded to the development of the elderly health care model with the principle of Buddhism in accordance with the potential of the elderly

In week 21-43, the sample group follows to the special group must be improved the procedure

In week 33, perform physical health care assessment (biochemistry operations Blood Collection at the Fingertip of No. 1)

In the 43 week, get into the knowledge level by assessment form and also practice will be next one either. Following the level 2, must show up the physical health test (chemical biology practice Blood Collection at the Fingertip II)

4. Summary of analysis result (Conclusion Phase) are as follows.

The research of the project report results according to the overall health status of the sample group. They need into do some comments and suggestions from all groups participating as a party, organizing practice activities in 4 dimensions: body, prayer, sacrament, prayer, mind and wisdom. The reason to remove a lesson to be used as a guideline for the

development of the health care model of the elderly with the principles of Buddhism then make a guide to the health care of the elderly with the principle of Buddhism

Population and sample

These residence groups as presented as surviving in villages as no. 2 and no. 3, Thep Mongkhon, Bang Sai District, Phra Nakhon Sri Ayutthaya Province, has a number of 1,149 elderly, 215 persons, average at 19.1 percent of the total population are divided into 2 groups.

1) The elderly group is willing to participate in this research project, which is the first sample of 25 people

2) Community leaders and representatives from more variety groups intend to do this participate for this set up into 12 people in each group.

Research tool methods

Research tools based on the tools of Mr. Wachirawut Polboonpirom and Miss Kwandao Gumrat are working together to relevant documents and research based on the conceptual framework of research and dealing with an interview for all 3 groups, set up in each document for 5 sets. Working into groups as a researcher interview and assistant to be the volunteers included (Wachirawut Polboonpirom, 2012.)

Platform no. 1 is using for the elderly who apply to participate in the research project. There are 4 parts: general information, knowledge assessment form and self-practice in developing of the health care model of the elderly with Buddhist principles and get into the questions

Platform 2 -3 is using for an interview into the elderly who is applied to participate in the research project. Following in the Group Discussion Guideline for the pre elderly and the improvement of the elderly health care group are learning and practicing with the principle of Buddhism

The topic of no. 4-5. Following the procedure to do some interview the volunteers first and community leaders and Government organization representatives. In this Group Discussion Guideline for representatives of community leaders and related government agencies before - after improving the elderly health care model with the principle of Buddhism

Research tool quality inspection divided into 2 parts.

1) Analysis of tool quality to get to know the tool quality. By dividing the analysis for the quality of the tools as following as;

(1) To do the test (P), the difficulty value is between 0.2 -0.8

(2) Measurement form, the power to distinguish (r) get the power 0.2 onward

(3) All knowledge measurement forms, the confidence (Reliability) by Kuder's method is divided into all knowledge By using the KR-20 formula, in case of the instrument started of the score of 0-1, the correct answer is to get 1 point, the wrong answer can be 0 it is not get to the point, find out of the following or reliable value from 0.87

2) Analyzing the quality of tools for practicing with Conbrach's Method by searching the coefficients of alpha (Alpha Coefficient) obtained from coefficients ranging from 0.83

Data analysis is divided into 2 types.

1) Quantitative data

(1) General information of the sample group using the statistics. Presented in the form of a table as frequency, percentage, mean, standard deviation and lowest-highest value

(2) Knowledge level information. The health care of the elderly with Buddhist principles, changing from data analyzing into the score values and compare differences. The average score is using the pattern improvement of the Paired t-test statistics

2) Qualitative data

This information is obtained from group discussions such as in-depth interviews and observation of participation behavior. Then follow up the categories according to the issue interpret the information obtained according to the perceptions of the informants. Analyze content from the content (Content Analysis), summarize, link the relationship and reasoning in the research issues

This research is a participatory experimental research. The following purpose as well as;

1) Analyzing some situation may be occurred and also health care conditions 2) Business development and evaluation of the elderly health care for the Buddhist principles such as between 60 - 69 years, therefore are belonging into two groups as no. 2 and no. 3, as a collecting quantitative data from interviewers using some diversity tests, analyzing thread data, percentage values, average values and standard deviations. Comparing knowledge levels and practice of the elderly with Buddhist principles before and after the form improvement. Analysis of values by paired t-test and qualitative data study by organizing group meetings according to the participatory planning process, 3 groups: As the following as; the elderly group

is acquired by voluntary participation in the project and some sample groups of a number of 25 persons are included for volunteers, community leaders, related government agency representatives. They are required by specific number of 12 persons, collecting data and analyze data with content analysis, the reason for taking care of an elderly people with a modern life in Buddhist way.

Research methods are broadly classified as:

1. The primary purpose of basic research as an elderly has found with female status and the average age is 64.9 years, with marital status (couple), primary school education. They are mainly involved with agriculture. They usually earn income from their career starts from 4,001 baht or getting more income over than that. There are approximately between 1 up to 3 persons in each family, finding of problem solving with a patient as high blood pressure. They need to do some exercise with brisk walking pace takes time approximate 20 - 30 minutes. They are not involved with any smoking and plus reject any alcoholic.

2. Therefore this elderly health care situation has found commonly is average 27.91% with a plus chronic diseases in hypertension, 25.58% of patients with hyperlipidemia, 12.09% of patients with diabetes mellitus. This special group can run their exercise or acting by their own. There are some slight pain especially when they are standing down to weight. They have mental health equal to the average person. They have a problem of the transportation, lack of knowledge and getting more some information without learning to get some knowledge. That's why they have some more problem of healthy life as well as lack of proper exercise, lack of participation in social activities, no occupation, missing children, lack of home visits from the staff and also the final point is they are lack of opportunities to surf & relaxation.

3. The results of the evaluation of the health care model of the elderly with the Buddhist principles. The experiment with the sample in phase 1, knowledge level, at a high level, 79.4 percent. Practice Phase 1 has an average practice level of 61.2 percent. Phase 2 has a regular practice level of 75.4 percent.

4. Testing hypothesis "Learning from participating in the project and the results of practice in the health care of the elderly with Buddhist principles. "Choose the Paired t-test statistic. The test results are as follows.

1) The comparison of the average level of health care knowledge of the elderly with the principles of Buddhism during the pre-model and post-model improvement showed up. There are significant differences at the level of .05 except for health care. Personal and disease prevention "No difference" $p - \text{value} > .05$

2) The comparison of the average level of practice in health care of the elderly with the principles of Buddhism during before and after the pattern improvement showed that all aspects are significantly different at the level of .05.

5. Blood test results (Biochemistry, blood penetration from fingertips at the second times). Overall health of the elderly has been improved such as; renal functions (Creatinine) and good fat (HDL-C). It has been changing to the most normal conditions, gout (Uric acid), liver function (AST) & (ALT) sugar (FBS), normal value at the end of activity participation 100%, 96.0 , 88.0, respectively. At the same time, the unusual value is reduced, including bad fat (LDL-C), cholesterol (Cholesterol). (Triglyceride) has an unusual value, is decreasing with an unusual value, decreasing at -57.0, -26.5 -13.3, respectively.

6. Participatory experimental research leads to the acquisition of the elderly health care model with the principle of Buddhism. It can be summarized as follows

1) Community participation is enhancing elderly health care. By relying on formal groups to help drive, such as public health volunteers, community leaders and temples together to organize activities for the elderly only. It is important day activities for fitness activities.

2) Health care services. The community needs to adjust behavior to reduce the chance of redundant disease. Then the prevention of the occurrence of disease in phase 1, concrete actionable activities, such as studying the health encourage needs in this group and plus all dimensions of systematic health

3) Knowledge management for health promotion in the community. The knowledge is the satisfies the health needs of the elderly and opportunities for the elderly to access knowledge that supports appropriate health decisions by themselves.

4) Elderly health care with Buddhist principles

At the present time, the problem of infectious diseases is a problem in Thailand. This is the most common cause of life changing behavior for look after themselves for people to achieve good health, especially for elderly people who have accumulated long-term living habits. Accustomed to living, being adapted requires adjusting the concept that "All things are natural that change as normal." The elderly are the age of decline. Both physically and

mentally being awareness for acceptance learning, being fit or having a balance of life. There are integrated as follows;

(1) Using the physical of principle 5 according to the concept of Somdej Phajajosa (P.Payutto) said that "... to reach the aims of Buddhism should practice many ways. It must be harmonized together, organic 5, the dharma practitioner will emphasize the word that the eye is balanced, both faith, persistence, consciousness, concentration and wisdom. The practice must be fit together between persistence and meditation. Then the fit between faith and wisdom with a consciousness as a control . " Somdej Phra Buddha Kosa Chan (P.Payutto P.A.) 2015:11-12)

(2) Using the 4 main principles of consisting satisfied, loving, willing, and always on the job. Dedication and desire to do the best work. Perseverance is working or do one thing for the best, mindfulness, empathy and focus on the things that do. There is a steady concentration in the task of discrimination, which is a contemplative investigation, examining. The researching is composing inventing and knowing how to improve work and progress. (Mental health / religion >4 baht virtues and practices, [online] 11 April 2018)

(3) Use the principle of prayer 4, as a development path for the elderly to practice according to the daily activity schedule. In order to achieve a healthy development coming for of 4 areas, including physical development, example; physical development with exercise such as walking, jogging, walking, meditation, healing Living with a supportive environment. Consumption of four factors corresponds to the true value. The development of the sacrament is physically and verbal development. They can stay and work in a social relationship with other people appropriately, helping care. Mental development is called a self-development for quality and integrity as a good mental health. The development of intelligence is to develop oneself to think, consider, diagnose, solve problems and perform. Think carefully and consideration as something concerned in their live.(Somdej Phra Buddha Kosa Chan (P.Payutto), [Online] 2 February 2018,)

Discussion of the research results to purpose into:

The development of the elderly health care model with Buddhist principles. It is a participatory experimental research aiming to get a model that is consistent with the way of life of the elderly who are bound to Buddhism. The researcher has selected Buddhist principles such as Physical Education 5 to raise awareness when it is entering the elderly age, physical condition will deteriorate. Retreated by age, the requirement effort (the principle of 4) to overcome boredom, giving or not giving up on various obstacles. The development of 4

main principles of prayer, 1) physical exercise, walking exercise or jogging, walking, meditation and healing. At the same time, how to choose food that is suitable for age, it is not persecuted, respect the rules in the community. 3) Spirit, pray, develop your mind to be full, by entering the temple, listening to Dharma, meditation, praying, resting enough. 4) Wisdom praying to develop oneself to be aware of the social change. The research team organized a participatory planning meeting to study the condition of elderly health and jointly create an elderly health care model with the principle of Buddhism. Providing knowledge and guidelines for the practice of self-care for the elderly. Prepare a schedule for practicing activities until the end of the project. Conducted an assessment of knowledge and practice and conducted a biochemical examination (blood collection at the fingertips). The project was held for 43 weeks. There are 27.91 percent of elderly people with chronic diseases in hypertension, 25.58 percent of patients with hyperlipidemia, 12.09 percent of patients with diabetes, having the ability to perform daily activities and self-healing. The slight pain while is standing down to weight and having mental health equal to the average person. In accordance with the health situation of the elderly, stating that "... the public health survey by physical examination. Diseases that are frequently found in the elderly include high blood pressure, diabetes, arthritis / osteoarthritis. Emphysema / bronchial emphysema. Coronary artery Myocardial infarction and paralysis .. "the research report of Srisuda Wongwisetkun and the faculty on the elderly health promotion model by participating in the Bang Phlat district of Bangkok has found that the health problems of the elderly in Bang Phlat District are dealing with high Blood Pressure , high blood fat, diseases of the muscles and joints and diabetes and found that some older people have more than one chronic disease, such as diabetes and hypertension. High blood pressure is coming with the high blood fat diabetes in combination with high blood fat. High blood pressure together with diabetes and high blood cholesterol It can be explained by the theory of the elderly about the change of the elderly of Kulaya Tantiva. (Kuliya Tantiva, page 18-41,) It is coming slowly when the middle age has passed away, the body will begin to change the structure and function of the tissue cells. Firming down Muscle reduces strength, lacks energy, lack of sensitivity in response to stimuli. The ability is working together in the nervous system and muscle regression. This change occurs in all systems of the body. It is a different rates and periods "

The evaluation of knowledge and practice of the elderly, Phase 2, found that the elderly with an average knowledge of 89.1 percent and an average of 75.4 9 percent, respectively, comparing the average level of knowledge and level. The practice of health care

for the elderly with the principles of Buddhism during the pre-model improvement and after the improvement of patterns showed that the average level of knowledge. Differing significantly at the level of .05 except personal health care and disease prevention. "Not different" $p - value > .05$ while the level of practice is different in all aspects with statistical significance at .05 level, consistent with the research results of Chureewan Maneesaeng and the faculty on the effectiveness of health promotion. Participatory model for elderly health in Pathum Thani Province. It is found that the elderly after participating in the participatory health promotion program, knowledge, awareness and expectations of self-practice. Self-care behavior is higher than before joining the project with statistical significance at .05 level. The comparison of health promotion behavior before and after Participating in the project found that there is a significant difference ($P < .05$) after joining the project. (Chureewan Maneesaeng and Faculty,(Online) 2017/09/13) The elderly have food consumption behavior, exercise and stress management is at a good level, which is higher than before joining the project

At the end of the project of the research team summarizes the elderly health care with the principles of Buddhism as follows: 1) Community participation in health for the elderly 2) Health care services and avoiding risk task 3) Knowledge for health care in communities

Summarize:

The nature of aging people with physical deterioration, walking or sitting for a long time, It can be easily disinfected. The ability for daily activities are deduction and hearing is an obstacle. At the same time, there will be many combined health problems resulting in the need to take many medications. As well slowing down the degeneration of the body and mind by using Buddhist principles to teach their desire for physical development such as exercise by walking, jogging, cycling, dancing, blackjack etc. It should avoid exercising that is very strong. Develop intelligence at physical knowledge of social.

Physical health, good mental health by practicing in accordance with the principles, it will encourage older people to slow down their own deterioration. It can last long genes with valuable traces.

Suggestion

1) Policy level

The results of this research have found alternative health medicine. In the participation of the community on the basis of the Dharma Method it can be used as a policy to link Thai traditional medicine and alternative medicine into a systematic health system. It can be combined with the original work. It has been cooperated with the community to apply for health care of the elderly in other communities with similar contexts

2) Operational level

(1) Patterns and results can be applied to health care for the elderly in other communities with similar contexts.

(2) Agencies at all levels can practice an elderly database for the benefit of health and society.

3) Upper research station

(1) The synthesized form produces good results for the community. An additional research should be done in the context of older families with beds.

(2) In case of any measure / community that has strong participation in health promotion. It should expand the role of the community in the treatment of the elderly who has been lie down in the bed. This is a high blood pressure patients

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