Effect of Psychological and Social Factors on Aging Empowerment among Middle Adulthood in Bangkok

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Abstract
The purposes of this research were (1) to examine the level of Aging empowerment among middle adulthood in Bangkok, (2) to examine the relationship between psychological factors (attitudes towards Aging empowerment, internal locus of control and the knowledge about Aging empowerment) and social factors (social support and getting information through online social media) on Aging empowerment among middle adulthood in Bangkok; (3) to examine the effects of psychological and social factors that may predict Aging empowerment among middle adulthood in Bangkok. Participants were the 460 middle adulthood aged between forty five to fifty five years old in Bangkok, Thailand. Purposive sampling was used, and the instruments used to collect the data were questionnaires. Their alpha coefficients ranged from .70 to .93. The researchers used data analysis and descriptive statistics. There was an analysis of the relationship between variables by analyzing the Pearson correlation coefficient and predictive analytics capabilities with multiple regression analysis (Enter method).
The results of this research revealed that health, participation and the security level of overall Aging empowerment were at high level. Psychological and social factors had a significant positive relationship with Aging empowerment overall and each aspect except that internal locus of control had a negative relationship with Aging empowerment. Psychological and social factors could significantly predict 59.6% of Aging empowerment among middle adulthood between forty five and fifty five years of age in Bangkok.

Keywords: Aging empowerment; psychological factors; social factors
Introduction
The purposes of this research are the following; to investigate the level of Aging empowerment of middle aged population, the relationship between the psychological and social factors both overall and individual aspect and examining the psychological and social factors that can foretell aging empowerment both overall and individual in respond to the aging population in Bangkok. The background and significant of this research are the following;

Nowadays, the likelihood of aging population rise in Thailand is significantly increasing according to the national census in 2014 exemplified that the amount of aging population was 14.9% of the total population (National Statistical Office, 2014). In 2583/2040, estimate that older person or 80 years old upward person will increase fast almost triple the size more than people in other aged groups (Pramote prasardkul, 2015). Therefore, effect the overall population into the elderly society or population aging totally. It is necessary to be prepared before entering the stage of elderly.

The preparation can be done through the associated with the Active Aging Policy Framework of World Health Organization: WHO (2002). WHO states that Active aging is an important behavior for person who wish for wellbeing and long life expectation which will lead to healthy life, participation and security. These three are the main components of aging empowerment concept according to WHO. Including (1) Health is a completed ability to prevent and reduce risk factors of diseases, equality in maintaining, managing and freedom accessibility of medication for individual healthy life. (2) Security is an assurance of physical, social, financial, including appropriated caretaker and consistence living environment. (3) Participation is a cooperation within family and society which included economic, social and cultural aspects following the basic human rights and elderly’s needs. Participation can be both Financial and Non-financial benefits which encourage elderly’s will towards good action for society and will lead to qualitative post-retirement life.

Majority problem associated with aging is the preparation stage before post-retirement. Facing with aging is a crisis of middle aged because they are close to the retirement stage and problems usually occur so that it is essential to pay attention about preparation stage before post-retirement (Surakul Janeaobrom, 1991; Pranot Kaowchim, 1997).

In this research study, the researchers used Social Cognitive Learning Theory as a studied frame. Aging empowerment is a desirable behavior that will lead to 3 aspects of qualitative life. Theory of Bandura (1989) exemplifies that human behavior is influenced by (1) Person (2) Environment. Likewise, human behavior is not occurred and changed due to only environmental factor but also Human factor.

Aging empowerment is made up of many indicators such as Attitude towards aging empowerment. Related research studies found that Attitude towards aging can foretell Aging empowerment (Wilaiporn Wongkeenee et al., 2013). Studies about Internal locus of control illustrate the positive relationship with the post-retirement preparation (Thipaporn Thongsawang, 1998). Studies of Knowledge about aging empowerment also demonstrate that knowledge about post-retirement preparation for effective aging
empowerment consist of 3 aspects (Usa Porntong, 2010). Studies about Social support indicator depict that aging empowerment can be indicated by social support (Wilaiporn Wongkeenee et al., 2013) and getting information is one of indicators that can predict the index of aging empowerment (Kusul SoonthornThada & Kamolchanok kumsuwan, 2010).

This research study has focus on psychological and social indicators that effect towards aging empowerment of Bangkok’s middle aged population to evaluate which indicators have significant effect towards target group for the benefits of aging empowerment support.

**Literature Review**

The research study was concentrated on level of aging empowerment, relationship between psychological and social factors that can predict aging empowerment of Bangkok’s middle aged population by using the Active aging framework of WHO (WHO, 2002). Documentation and references about active aging or aging empowerment of WHO (WHO, 2002) were also used which can be recognized globally. Three aspects for successful aging empowerment consist of wellbeing, social participation and security.

Factor related to aging empowerment can be illustrated as the following: Psychological factors which consists of Attitude towards aging empowerment, Internal locus of control, knowledge about aging empowerment. Social factors which contains Social support and getting information through online social media by using internet. If individual has positive attitude towards aging empowerment, internal locus of control and knowledge about aging empowerment then the development of aging empowerment in person can be done when reach to the post-retirement stage. Moreover, if individual gets social support in various ways such as emotional, exceptional, social participation and getting information through online social media by using internet then good aging empowerment can be established.

The review of documentation, references and Social Cognitive Learning theory by Bandura (1989), the researchers specify the concept of this research study to match with the framework within this research as following;

<table>
<thead>
<tr>
<th>Psychological factors</th>
<th>Social factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Attitude towards Aging empowerment</td>
<td>1. Social support</td>
</tr>
<tr>
<td>2. Internal locus of control</td>
<td>2. Getting information through online Social media by using Internet</td>
</tr>
<tr>
<td>3. The knowledge about Aging empowerment</td>
<td>Aging empowerment</td>
</tr>
<tr>
<td>1. Health</td>
<td>1. Health</td>
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<tr>
<td>2. Participation</td>
<td>2. Participation</td>
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</table>
Methodology and Methods

Population and target group

The methodological of this research is consist of the predictive relationship method in respond to the aging empowerment. The target of this investigation is middle aged population between 45 to 55 years old whose works are in Bangkok. The size of sample group was calculated from the table guideline by Krejcie and Morgan (1970) which can provide 95% trustworthy result and accuracy no less or more than 5%. To prevent the information lost during the collection, the researchers instead calculate the accuracy of data to 20% (Kanit Kaimook, 2003). Therefore, the amount of sample group in this research is 460 people, selected by the purposive sampling method within the population target stated in the beginning of this paragraph.

The methods used in data collection

The method used in this data collection consist of 7 parts; (1) Individual questionnaire, (2) Aging empowerment questionnaire that improved from Active aging questionnaire by Supranee Tangwong et al. (2009) which built on the principle of active aging of WHO (WHO, 2002) – having the content validity equal to 0.89, (3) Attitude towards aging empowerment questionnaire – created by the researchers which has the content validity equal to 0.63, (4) Internal locus of control questionnaire developed from the Internal locus of control questionnaire by Poonnaphat Tullayasatien (2007) which has the content validity equal to 0.67, (5) Questionnaire about the knowledge of aging empowerment which researchers created it up and has the content validity equal to 0.92, (6) Questionnaire about social support that researcher formed following the concept of Cobb (1976) – having the content validity equal to 0.76 and (7) Getting information through online social media by using internet questionnaire which also developed by the researchers and has the content validity equal to 0.86.

Each questionnaire has 5 levels of rating scale; messages contain both positive and negative aspects. The examining quality of questionnaires were done following the Index of Item of Objective Congruence: IOC from 3 expertise and try out with the 100 outsiders out of the target group to prove the reliability by using the method of Cronbach’s Alpha Coefficient. Then, published the result for the practical usage. The data analysis of basic variable used in this study was done by the Pearson’s Product Moment Correlation Coefficient and the scrutiny of Predictive of Aging empowerment was done by the used of Enter Multiple Regression Analysis.

Conclusions and Discussion

(1) The sample group has a high average result in Aging Empowerment’s percentage of 3.77. Moreover, the average of good health, the participation in Society, stability and security are also high – 3.65%, 3.66% and 4.01% in order. According to Bangkok’s development in every fields; result in more successful accessibility in Public utility, Education, technology and medication. These effect the improvement of Bangkok population’s life quality and significant of high Aging empowerment level (Bangkok Department of City Planning, 1999).
(2) Analytical outcome of relationship between psychological and social factors and aging empowerment both overall and each aspect found that psychological and social factors have positive connection with aging empowerment suggestively at statistic level of .01 except Internal locus of control and Aging empowerment which has negative relationship both overall and each aspect \((r = -0.88, -0.058, -0.149, -0.016)\). The result of this study has similarity to the one by Ladawan Noileiou (2008) which found that Internal locus of Control has negative relationship towards quality of life and each aspect. Internal locus of Control is an individual believe and has an impact on developing habit of aging empowerment. The believe is a driven force that encourage the behavior in respond to individual believe, although the believe doesn’t lie on the linear of reality base on the concept of Aging empowerment (Rotter, 1966).

(3) The result of analysis can foretell the building of aging empowerment in overall which found that attitude towards Aging empowerment, Internal locus of control and the knowledge about Aging empowerment can predict the building of Aging empowerment significantly at Statistic level of .01 and .05 by the Psychological and Social indicators in overall 59.6. The result of this study shares the similarity to the one by Wilaiporn Wongkeenee et al. (2013) which found that attitude towards aging and knowledge about aging can predict active aging. Furthermore, the research’s outcome of Ladawan Noileiou (2008) also discovered that Internal locus of control has negative predictive value against the qualitative life behavior. This may be related to the fact that Internal locus of control is an individual believe which influence towards the development of aging empowerment habit of a person. Believe is a favor indicator that drives individual to behave in a way that may not lay on the reality concept of aging empowerment (Rotter, 1966) (Shown in Table of content 1).

Table 1: Multiple regression coefficients to normal in raw score (B) and standardized \((\beta)\) constants and standard error in prediction of the predictive Aging empowerment in overall.

<table>
<thead>
<tr>
<th>Variables</th>
<th>B</th>
<th>(\beta)</th>
<th>t</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attitude towards Aging empowerment</td>
<td>.178</td>
<td>.144</td>
<td>3.885</td>
</tr>
<tr>
<td>Internal locus of control</td>
<td>-.070</td>
<td>-.068</td>
<td>-1.962</td>
</tr>
<tr>
<td>The knowledge about Aging empowerment</td>
<td>.541</td>
<td>.590</td>
<td>12.076</td>
</tr>
</tbody>
</table>

\(R = .772, R_{\text{square}} = .596, F = 123.748, S.E_{\text{-est}} = .354, a = .795\)

(3.1) Analytical result of predictive aging empowerment in relation to deal with positive health found that the knowledge about aging empowerment and the access of information through online social media by using internet can predict the coping of aging empowerment both health aspect well expressively at statistic level of .01 and .05. This result associate correspondingly with the one conducted by Panicha danguborn, Sujittra Junthawong, & Prayong Nakean (2013) which found that the knowledge of aging empowerment can predict the quality of elderly life. Also, the study’s result from Kusul SoonthornThada & Kamolchanok kumsuwan (2010) found that the accessibility to the information is an indicator to the active aging (shown in the table of content 2).
Table 2: Multiple regression coefficients to normal in raw score (B) and standardized ($\beta$) constants and standard error in prediction of the predictive health.

<table>
<thead>
<tr>
<th>Variables</th>
<th>B</th>
<th>$\beta$</th>
<th>t</th>
</tr>
</thead>
<tbody>
<tr>
<td>The knowledge about Aging empowerment</td>
<td>.522</td>
<td>.470</td>
<td>7.723</td>
</tr>
<tr>
<td>Getting information through online Social media by using Internet</td>
<td>.160</td>
<td>.158</td>
<td>2.611</td>
</tr>
</tbody>
</table>

R = .612, R square = .375, F = 50.302, S.E. = .534, a = .903

(3.2) The analytical result of ability to foretell the aging empowerment in relation to the engagement within the society found that attitude towards aging empowerment, Internal locus of control, knowledge about aging empowerment and social support can predict the progress of aging empowerment within society meaningfully at the statistic level of .01 and .05. This share the similarity with the result from Wilaiporn Wongkeenee et al. (2013) which stated that attitude towards aging and the knowledge about aging can predict the active aging. Therefore, the study by Ladawan Noileiou (2008) also demonstrates that Internal locus of control has a predictive value of negative against the qualitative life behavior in relation to the engagement within society. Perhaps the Internal locus of control is an individual believe which drives one to behave in a certain way within the social circle. The believe is an indicator to individual choice of habit interacting within the society even though some believe doesn’t associate with the reality according to the concept of aging empowerment in relation to the engagement within society (Rotter, 1966). Likewise, the research outcome from Chayanee Mier (2009) found that the support from social and family can predict the level of social engagement activity of elderly (shown in the table of content 3).

Table 3: Multiple regression coefficients to normal in raw score (B) and standardized ($\beta$) constants and standard error in prediction of the predictive participation.

<table>
<thead>
<tr>
<th>Variables</th>
<th>B</th>
<th>$\beta$</th>
<th>t</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attitude towards Aging empowerment</td>
<td>.149</td>
<td>.103</td>
<td>2.377</td>
</tr>
<tr>
<td>Internal locus of control</td>
<td>-.191</td>
<td>-.159</td>
<td>-3.930</td>
</tr>
<tr>
<td>The knowledge about Aging empowerment</td>
<td>.484</td>
<td>.452</td>
<td>7.878</td>
</tr>
<tr>
<td>Social support</td>
<td>.200</td>
<td>.145</td>
<td>3.111</td>
</tr>
</tbody>
</table>

R = .667, R square = .445, F = 67.104, S.E. = .485, a = .989

(3.3) The analysis outcome of empowerment aging in relation to the safety and security displayed that attitude towards and knowledge about aging empowerment can significantly foretell the aging empowerment correlated to the safety and security aspects at statistic level .01 and .5. In the same way of research result by Wanchai Kaewsumalee (2009) which depicted that attitude towards the preparation before post-retirement can encourage the confidential in post-retirement financial. This is supported by the research outcome by Somnuk UaJirapongpan & Pun Kawaen (2015) in which the knowledge about financial management has a positive implicant toward the financial ability and management of individual (shown in the table of content 4).
Table 4: Multiple regression coefficients to normal in raw score (B) and standardized (β) constants and standard error in prediction of the predictive security.

<table>
<thead>
<tr>
<th>Variables</th>
<th>B</th>
<th>β</th>
<th>t</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attitude towards Aging empowerment</td>
<td>.325</td>
<td>.231</td>
<td>5.749</td>
</tr>
<tr>
<td>The knowledge about Aging empowerment</td>
<td>.617</td>
<td>.592</td>
<td>11.166</td>
</tr>
</tbody>
</table>

R = .724, R square = .525, F = 92.540, S.E. est = .437, a = .494

**Suggestion about the utilization of research result**

The overall of Aging empowerment can be strengthened by institutes and organizations related to the middle aged and elderly directly. Also, family members should give extra concern towards the adjustment of attitude toward the empowerment aging of person to ensure positive attitude in coping with aging. The reduction of Internal locus of control can be done by always given them chances to listen and express their opinions among others via many ways such as online channel and the establishment of activities in various organizations. These will essentially help to ensure that elder can learn and adjust their personal believe to match with the reality as much as possible, gain understanding others, reduce their Internal locus of control, help elderly develop good attitude towards aging empowerment. Moreover, providing training about aging empowerment knowledge in organizations can be done in numerous ways such as given away leaflets and beneficial information.

Developing Aging empowerment in various aspects; Qualitative health can be developed by providing knowledge about aging empowerment, internet and social media accessibility so that elderly can receive online information. In addition, providing the essential of internet and social media usages training may be established for elderly. Social engagement in middle aged and elderly can be done by adjusting their attitude towards aging empowerment for better coping with aging, reduction Internal locus of control can be done by providing knowledge about aging empowerment and provide social support and appreciation to encourage better self-esteem and self-value. Setting up each elderly a role in activity establishment to reassure their abilities will encourage their will in attending furthermore social activities, this will lead to the better aging empowerment. For greater view in security and safety aspects, adjusting attitude, providing training towards aging empowerment and can be done similarly to the development of aging empowerment in overall. These will ensure qualitative life when they reach to their elderly stage.

**Suggestion for next research**

(1) Conduct further study in other Indicators which may have possible association to the aging empowerment that can help better understanding to encourage various supportive ways about aging empowerment.

(2) Conduct experiential research or creating a supportive aging empowerment program by the used of indicators from this research to investigate if there are improvement in aging empowerment and better coping in post-retirement or not.
(3) Conduct study from other target groups for example early adulthood or Elderly, also other target groups with mixed aged for diverse information and research result close to reality.

(4) Study about indicators that affect towards aging empowerment of population in other areas and comparing the results between the indicators of city and urban to truly understand which indicators effect the aging empowerment of Thai citizens.

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