

The Behaviour in Health Care of Monks in Nakhon Sawan Province, Thailand

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Abstract

The study on “The Behavior in health care of Monks in Nakhon Sawan Province” had three objectives: 1) to study the behavior in the health care of the monks in Nakhon Sawan Province, 2) to compare the behavior in the health care of the monks in Nakhon Sawan Province by classify on the personal factors: year, degree of the general education, degree of the Dhamma education, the Sanghastatus, knowledge in the health care and the seven Sappaya (things favorable to mental development), and 3) to suggest the ways for changing the behavior in the health care of the monks in Nakhon Sawan Province.

This research applied the Mixed Methods Research consisting of the qualitative and quantitative research. The sample was 362 monks in Nakhon Sawan Province. The tools of the research were questionnaire with 0.8326 of the reliability and in-depth interview. The analysis of data used Statistical Package for Social Science. The statistics for analysis data used Frequency, Percentage, Mean, Standard Deviation, t-test, and F-test or One-Way ANOVA and Least Significant Difference: LSD.

Results of the Research

1. The level of the behavior in the health care of the monks in the four dimension found that the behavior in the health care of the monks in the physical dimension: the nutrition and the exercise was at the middle level ($\bar{X} = 3.24$) and ($\bar{X} = 3.27$). The behavior in the health care of the monks in the mental dimension: the emotion (strain) was at the middle level ($\bar{X} = 3.50$). However the behavior in the health care of the monks in the social dimension: the living in the society and the environmental health was at the high level ($\bar{X} = 3.73$) and ($\bar{X} = 4.14$). The behavior in the health care of the monks in the conduct to the Dhamma principles was at the high level ($\bar{X} = 4.00$).

2. The comparison of the behavior in the health care of the monks in Nakhon Sawan Province by classify on the personal factors found that the monks having the different age degree of the general education, Sanghastatus, knowledge in the health care, and Sappaya had the different in the health care at 0.05 of statistical significance. Thus, the hypothesis was accepted. However, the monks having the different degree of the Dhamma education had no the different behavior in the health care. Thus, the hypothesis was denied.

Keywords: Behaviour; Health Care of Monks; Nakhon Sawan Province

Introduction

Fundamental element for human life is traditionally called the Four Necessities including Food, Clothing, Housing (Shelter), and Healthcare. These 4 Necessities directly impact the humans' living since each necessity would eventually impact humans' health. The first vital component for most humans to live happily in this world is having the good health. The Buddha said to one Indian priest named Makantiya that "... Health is the Greatest Gift...". (P.A. Payutto, 2008). As such, the health care is one of the critical factors for human life because the fact that when people have good physical health and mental health, they could do best on their job, live their life well, and be able to achieve what they plan for. (Meesang, 2013)

A monk is one component of the Three Jewels of Buddhism which consist of Buddha, Dharma, and Sangha. The monks, known as Sangha, have then been much respected by Buddhist; the monks follows what the Buddha taught, as well as advice others to live and to act as per the Buddha doctrines. In accordance to information as of December 31, 2013 from the Office of National Buddhism, in Thailand, there were 289,131 monks or Buddhist priest and 60,528 Buddhist novices.

From the health examination project for Buddhist priest and Buddhist novices nationwide, in accordance with the celebration of 84-years-old of King Rama IX on December 5, 2011, the results of the health check during the project period (November 2010 – February 2011) showed that from total 90,250 monks joining this project, only 45.08% monks had good health while more than 50% were risky for being unhealthy and sick in the future; and 30.57% were having top 5 sicknesses including high cholesterol, high blood pressure, Diabetes Mellitus, lung trouble, and Cardiovascular diseases. For the health check of monks in Nakhon Sawan Province during December 1, 2010 to 30 April 2011, which was part of the health check project in regards with the King Rama IX celebration, the summary pointed out that there were 55% or 4,197 monks joining the health check project; 2,841 monks or 68% had good health; 787 monks or 18.75% were risky for having sickness in the future; 310 monks or 7.38% were just found having sickness; and 260 monks or 6.19% were still found having sickness. Top 3 illnesses for monks in Nakhon Sawan province included high cholesterol, high blood pressure, and Diabetes Mellitus. Top 10 illness sasses consisted of high cholesterol, high blood pressure, Diabetes Mellitus, obesity, Dental Caries, Dermatitis, lung trouble, Tuberculosis or Respiratory Diseases, Parasite, Thalassemia, and Anemia.

In according to the above information, the root cause of such sicknesses was likely from health care behaviors especially the improper food consumption behaviors such as sweet food preferable, and high-salty and high-fat food selection beyond the optimal standard for a human body. The monks would take and accept foods offered by people; they could not avoid to be surrounded by unhealthy foods given, which would finally harm the monks' health. In addition, in accordance to the Discipline, so called Vinaya Pitika, which the monks have followed, the monks shall not have much work out. and, there are no suggestions regarding proper exercises to the monks. (P.A. Payutto, 2009)

Given the above mentioned background, the researcher is very interested studying on self-care for of the monks in Nakhon Sawan province. The study would provide an appropriate guideline for the monks' self-care as well as enhance the health care understanding of the monks.

Objectives of the Study

- 1) to study behaviors on the health care of the monks in Nakhon Sawan province
- 2) to compare the behavior in the health care of the monks in Nakhon Sawan Province by using personal variables including age, degree of the general education, degree of the Dhamma education, the Sangha status, knowledge in the health care, and the Sappaya 7 (seven conditions favorable to mental development)
- 3) to propose suggestions for the health care of the monks in Nakhon Sawan province.

Methodology

This research applied Mixed Methods Research using quantitative research method and qualitative research method. For the quantitative research method, data had been gathered via the questionnaire which was provided to 6,271 monks from 792 Buddhism temples in Nakhon Sawan province. Subject to the sample size table of Krejcie and Morgan, at the confidence level of 0.05, the sample size for this research would be 362 samples. The sample was randomly selected via the Multi-stage Sampling method. The data analysis had been processed with available software widely adopted for a research in the field of Social Science. The software would calculate and provide Frequency, Percentage, Mean, Standard Deviation, T-Test, F-test, and One-Way Analysis of Variance. Via the software, the comparison of each couple of personal variables continued upon the framework of Least Significant Different (LSD). In part of the qualitative research, the researcher made an in-depth interview with key informants chosen through Purposive Sampling; the sampling for this interview would comprise of 12 monks in Nakhon Sawan province: 3 monks as Ecclesiastical District officers (head of district), 3 monks as the Ecclesiastical Chief of Village (head of village), 3 monks as the Abbots, and 3 monks having no ecclesiastical official.

Results of the Research

The research of Behavior in Health Care of Monks in Nakhon Sawan Province could be summarized as follows:

1.1 Personal Factors

From 362 monks answering the questionnaire, their average age was 42.28 years and their Sangha status was 7 years in average. 37.3% of the monks passed the elementary education as their highest education in the normal system; 43.4% had not completed or had not pursued the elementary level of the Dhamma Scholar; 85.4% had no ecclesiastical official. In view of the weight measurement, 44.8% had Body Mass Index (BMI) over a standard; on the other words, 44.8% were overweight and obese being risky having the cardiovascular diseases, diabetes, high blood pressure, and some types of cancer. It was found that 47% smoked and from this group, 75.3% had 10 cigarettes per day which would potentially cause a severe illness in the future since cigarette is one of the addicted drugs producing poisonous smoke injuring both smokers and nearby people. From total monks giving feedback on the questionnaire, 30.4% were having chronic disease, or a personal health problem being persistent and long-lasting. The chronic disease, as per the results from questionnaire, included high blood pressure (10.22%), a bad headache or migraine (7.18), diabetes (6.63%), gastric disorder (6.63%), high cholesterol (5.8%), cardiovascular disease (4.14%), kidney failure (3.59%), gouty arthritis (3.31), and paralysis (1.66%). These chronic diseases would normally last long and were caused from unhealthy behaviors such as smoking, eating too much (overweight), having stress, lacking of sufficient exercise, and having unhealthy food leading to nutrition problem.

4.2 Health-Care related Variables in the study

The research presented results from the questionnaire that 53.6% were well educated in health care, 35.1% had medium knowledge on the health care, and 11.3% had low knowledge on the health care. Six variables had been studied in this research under the Health Care Factor.

1) **Food Consumption Variable:** level of nutrition knowledge of the monks could be grouped into 3 levels containing high (49.7%), moderate (29.3%), and low (21%). Most of the monks having low level of the nutrition knowledge did not know 2 main things. First is that people should not have salt more than 6 grams (or 1 teaspoon) per day, and the second is that people should not consume sugar over 40-45 grams (6-8 teaspoons) per day as well as should not drink sugar-added beverages more than 2 glasses per day (at 250 ml. per glass).

2) **Exercise / Work out Variable:** a knowledge level for the exercise or work out of the monks could also be categorized to 3 levels: high (47%), moderate (28.7%), and low (24.3%). A majority of the monks did not recognize that the blood pressure could be controlled at the standard level making the heart strong by doing some exercises that are not too hard and not too little allowing some sweats or perspirations, and at a stage that they could talk with others given that each exercise should be done at least 30 minutes per round.

3) **Emotional Factor or Stress Variable:** a level of knowledge on emotional or stress management of the monks would be separated to 3 levels: high (55.5%), moderate (27.1%), and low (17.4%). There were 2 issues that the monks were less likely to understand. The first issue is about stress categories and its nature. Stress could be categorized into 3 types: 1. low stress which would be gone within short time or around one hour, 2. moderate stress which might last several hours, many hours, or several days (but less than a week), 3. high stress which tended to exist for a week, a month, or even a year or over. The second issue involved with short-term and lower-level stress which would be beneficiary driving enthusiastic while working.

4) **Living Condition Variable:** 68% had high level of knowledge on living when 16.3% and 15.7% had moderate and lower level of knowledge on their living, respectively.

5) **Environmental Health Variable:** 88.9% knew lots of environmental health when 9.1% and 5% knew this factor moderately and less, respectively. There was no topic relating to the environmental health that the monks did not know.

6) **Behaving under Dharma doctrines Variable:** 78.5% had high understanding while 11.9% had moderate knowledge and 9.7% knew only little. There was no topic regarding the Dharma factor that the monks did not know.

Results from this research presented that most of the monks answering the question farewell knew the health care or self-care; furthermore, 53.6% of the monks had a high level of understanding on the health care. Additionally, the monks moderately understand how to healthily consume foods (49.7%), how to do some exercises (47%), and how to handle emotions and stress (55.5%). The questionnaire responders responded that they had high level of understanding on living conditions (68%), environmental health (88.9%), and behaving as per Dharma doctrines (78.5%). Consequently, it is important to provide knowledge and have them understand on the self-care for the variables like food consumptions, doing exercise, and emotions (stress); and topics that the monks might not well understand should be properly focused. Moreover, although the monks knew well on some variables: living conditions, environmental health, and behaving as per Dharma doctrines, it was still necessary to continuously provide the health care information to the monks, given that the information should be aligning with the precepts.

Health Care Behaviors of the monks

According to the study of health care by the monks in Nakhon Sawan province, the summary could be made in 4 dimensions.

1) **Physical Dimension:** The first element was food consumption which was found that the monks moderately took care of the health via the eatery; in additions, 57.8% of the monks often had high fiber foods and 53.9% drank tea or coffee. The second element concerned the exercise which could be summarized that the monks moderately took care of the health by doing some exercises; the exercise activity almost all monks (81.5%) had done was walking in the morning during the daily alms round to collect food (so called pindapata) at least 30 minutes a day when 81% of the monks did exercises by sweeping around the temples as well as cleaning parsonages or their dwelling accumulating 30 minutes per day.

2) **Mind/Emotion Dimension:** Stressful or emotional element had been stated under the framework of this dimension. The monks had been able manage this element moderately. Top 2 behaviors the monks mostly expressed were taking a relax (66%) and controlling or managing emotion when others improperly acted or spoke with (60.5%).

3) **Social Dimension:** The first component was social living conditions where the monks showed high level of the health care; 58.3% had adopted the Devout Temperament (saddhācarita or faithful-preferable behavior, and 56.3% had expresses the Intellectual Temperament (buddhicarita or preferring-intelligence-analysis behavior). The research secondly pointed that, in part of the environmental health the monks demonstrated a high level of such health care. Specifically, behaviors regarding this environmental health which were often seen comprised of cleaning the parsonages (80.1%), doing the garbage and managing wastewater or stagnant water (79.5%), cleaning canteen or dining hall (79%), daily cleaning restrooms (76.3%), and cleaning bedding set (74.9%) such as sleeping sheet, blanket, pillow, sleeping bed, and mosquito net.

4) **Spiritual Dimension:** This dimension mainly involved with behaving as per the Buddha's doctrines. The study showed that the monks highly had such health care in line with the doctrines. Some of the behaviors which could be always noticed included positive thinking and forgiving (80.4%), strictly behave within the Disciplines (75.4%), making a sacrifice or always giving to others (69.1%). making donations (monetary and non-monetary) for the public (64.3%), and doing meditation (62.4%).

This study on the behavior in health care of the monks in Nakhon Sawan province could be summarized in 4 dimensions. Firstly, physical dimension in part of food consumption was in a moderate level which the monks had the health care of; in other words, most of the monks did not pay much attention to a good nutrition on the foods consumed which might was caused by lacking knowledge or understanding of the right nutrition or food selection such as the limitation of sugar or salt per day. Another cause would be from a social factor when Buddhists offered unhealthy foods or alms to the monks. In the light of physical dimension in part of doing exercise, the monks had only presented moderate level of the health care; most of the monks would do some exercises via normal monastic activities such as walking in to morning for the alms, cleaning temples, cleaning residence when other types of exercises were merely few. This would be due to the fact that there was no vivid working-out area specially set for the monks. The second dimension was Emotional Dimension which the monks generally did not manage their stress and/or emotions well as per the moderate level of the result upon this dimension. One key reason was that the monks might have lots of activities in a temple which required the monks to communicate with many people and many other monks without enough rests. The third dimension was the social dimension which the monks showed a high level of the self-care. Almost all monks

simply followed the Devout Temperament (*saddhācarita*), and the Intellectual Temperament (*buddhicarita*) meaning that they had strong faiths in Buddhism, suitably used intelligence and analysis thinking, learned and memorized well. In addition to the third dimension, the environmental health level was in a high level which represented that the monks were always taking good care of the environments in the temples keeping everything clean anytime. The fourth was spiritual dimension which referred to living as per the Buddhism percepts, of which the health care behavior was in a high level. Most of the monks had positive thinking, keep giving, understanding others, doing mediation, and strictly following the percepts and disciplines.

Guidance for Changing Health Care Behaviors of the Monks in Nakhon Sawan Province

This guidance would employ a self-care principle would be ligning with the country strategy of making Healthy Thais together with creating Healthy (strong)Country, given that the goals would comprise of 4 dimensions: physical, emotional, social, and spiritual. Moreover, the guiding framework simply follows 6 components: Eat, Exercise, Emotion, Environmental Health, Drugs related, and Causes of Ruin (physically and mentally). Another idea for developing such guidance is using 5 elements consisting of Eat, Exercise, Emotion, Smoking, Alcohol and Drugs as per a policy launched by the Ministry of Public Health. All of the previously mentioned concepts must be following the Dharma doctrines as well as the monastic precepts and not conflicting with the Disciplines. Upon these conceptions and criteria, the guiding framework could significantly assist the monks to be physically and emotionally healthy having no illness being a good model for Thai people and best delivering the Buddha's doctrines to Thais plus creating peace to the people, communities, and the country. To elaborate more, the 6 dimensions would then be explained with details as follows:

Physical Dimension

1. Food Consumption

The monks should have a completed Five Food Groups every day and there should have a variety of food for each food group in order for the body to be supplied with sufficient nutrition. For each single day, about a half of all foods consumed should be vegetables and fruits; additionally, the monks should avoid fat, too salty, and too sweet foods, and keep monitor the weight to be in standard. The obesity condition could potentially lead to diabetes, high blood pressure, cardiovascular diseases, and some types of cancer. Smoking should be forbidden as the cigarettes are considered as one kind of drugs. The smoke contains lots of poisons being injurious to health of both the smokers and other surrounding people. Although some Buddhists may provide the cigarettes to the monks, it is possible that further smoking behavior can be prohibited since this action would follow the Discipline.

The monks shall follow the Buddha's teaching of Moderation in Eating. Though the precept indicates that the monks shall not deny what people have offered, the monks should consider the front edible food if each of them is beneficiary not harming the health, not addicting to its tastes, and selecting appropriate portion for eating which could just maintain the body living.

2. Exercise

The monks may do some exercises compatible with the precepts such as walking in the morning for the alms, sweeping temple areas, and walking meditation and it could take 30-60 minutes per day.

Emotion (Stress) Dimension

The monks shall control their emotion and act suitably because they have been highly respected by the public. The monks could merely go after what the Buddha taught including Exhortatory Patimokkha or the 3 Fundamental Principles of doing well, not to do any evil, and purifying mind. These principles could be enhanced via praying, and doing meditation which practice the mind to be enlightened, controllable, and relaxed.

Society Dimension

Social living condition

The monks shall be able to adapt to the changing society while maintaining the Discipline performing as Sangha and suitably helping each other. Upon this social living, the 4 principles of Sangahavattthu or bases of social solidarity shall be adopted. The first principle is Dana which means giving, donating, being generous, helping each other, and providing knowledge and advice. (P. A. Payutto, 2009). The second principle is Piyavaca representing pleasant speech or kind words incurring love and harmony. The next principle is Atthacariya involving doing good, rendering services, and useful conducts. (Vareesangthip, 2009). The fourth principle is Samanattata which relates to equality manner or treatment to any level of people, and to behaving appropriately in every circumstance.

1. Environmental Health

It is important that the monks would keep belongings and surroundings clean, do the garbage, and make the environments in the temple pleasant; for example, planting flowers and growing trees which would bring freshness plus create shady and pleasant atmosphere to the monks. According to this environmental health, the Japanese concept of 5 S may be deployed in the temples. The 5 S concept covers 1.Seiri (clearing up and categorized useful ones and not-useful ones), 2.Seiton (organizing and bringing things to proper places convenient for further usages), 3.Senso (cleaning), 4.Seiketsu (set standardization for the first 3 S and encouraging for deployment), and 5.Shitsuke (training and set as a discipline for everyone). (The Pail Text Society's, 1925)

Spiritual or Wisdom Dimension (behaving or living in accordance with the Buddha's doctrines)

The monks shall be the good model for lay-people in light of all senses: Body, Speech, and Mind.

The monks shall behave and live as per the Buddha's taught including praying and doing meditation in order to practice or train the mind creating Sati, Concentration or Samaathi (Jhana), and Understanding (Panya). By just adopting any teachings of the Buddha to daily life, both physical health and mental health are going to be good. Some of the teachings consist of the Four Path of Accomplishment, the clarity of consciousness or awareness, the four foundations of mindfulness, the Five Power, the Five Sense-Faculties, the 7 Enlightenment Factors, and the noble Eightfold Path. (Ven. Nyanatiloka, 1980).

It is necessary to practice and understand own mind, as well as apply the sublime states of mind 4 including Metta or loving-kindness, Karuna or compassion, Mudita or sympathetic joy, and Upekkha or neutrality and understand in reality and Karma (everything has its own causes) while teaching lay-people to firstly complete the 5 Precepts.

Furthermore, by studying the doctrines and necessary Buddhism activities, the monks shall be able to teach lay-people and guide them to live well in their daily life.

Suggestion / Recommendation

In regards to the study in the Behavior in Health Care of Monks in Nakhon Sawan Province, the researcher would like to propose and recommend the guidance which should be further adopted for policy setting by concerning parties as the following.

1. Recommendation: policy setting

1) To facilitate a learning cycle to adjusting health care behaviors of the monks by having a monk as the leader

2) To encourage the temples to participate in health care project in order to create self-care to the monks and to people in nearby communities by having the Office of National Buddhism, Nakhon Sawan Branch as the leader

2. Recommendation: action plan

1) To develop and improve health care services, annual checkup, chronic disease checking, and continuing visit ill monks thoroughly in the province by having Nakhon Sawan Public Health Office as the leader

2) To promote the right understanding to lay-people when offering the alms or donating necessity to the monks giving healthy foods and beverages to the monks avoiding cigarettes and other unhealthy ones. The leader should be representatives from the Local Government.

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