

Factors Affecting Satisfaction of Thai Senior Citizens Living with their Children

*Madee Kanchanakitsakul**

Introduction

The achievement of an effective National Family Planning Program in 1970, the consequences of the social and economic developments, together with the advances in public health services cause rapid decline in both fertility and mortality in Thailand. These phenomena highly affect the age-structure of the population. The rapid decline in fertility has brought about a decrease in the number and proportion of young citizens, while the slow decline of mortality is bringing about an increase in the number and proportion of senior citizens (Siriboon, 1995). The changing in the age-structure of population has affected the dependency ratio as well.

Traditionally in Asia, care for the senior citizens has been a family responsibility (Westley, 1998). There is an expectation that the fertility decline in Thailand would be a negative impact upon family supports for the senior citizens especially being supported by children. In Thai society, although there is at least one child to live with them (Chayovan, 1995), the most important issue is the quality of living, that is, how well their children take care of them. And the satisfaction of senior citizens living with their children is a way to reflect the quality of living.

Globalization has affected greatly both socio-economic and cultural changes. These changes cover not only urban areas but also rural areas. In addition, it has also affected family structures, faiths, values, and living arrangements of Thais, especially

* Candidate, Ph.D. in Demography, Faculty of Graduate Studies, Mahidol University, Salaya, Phutthamonthon, Nakhon Pathom 73170

senior citizens who are familiar with the old pattern. It is difficult for senior citizens to adjust themselves to any situations in a modern society (Boonyanupong, 1991a).

In the past, the disharmony between senior citizens and the young was not found because the young strictly obeyed the senior citizens which is hardly found in this present time (Boonyanupong, 1991b). Hence, the senior citizen's problem in the family is a special issue that should be attended and studied because the roles and relationships in the family have tremendous effects on the mental health of senior citizens (Kingeaw, 1997). Since the positive mental health can also indicate the quality of life, therefore, living arrangements, living satisfaction, and factors affecting the satisfaction of senior citizens living with their children are issues attended and examined in this study.

Objectives of the Study:

This study has three main objectives as follows:

1. To study living arrangements of senior citizens
2. To investigate satisfaction of senior citizens living with their children
3. To examine factors affecting the satisfaction of senior citizens living with their children

Research Methodology

The analysis employed data from the 1994 Survey of the Elderly in Thailand, conducted by the National Statistical Office (NSO). It is a national survey using a two-stage stratified sampling. The data are collected in May 1994. This nationally representative survey covers the population aged 50 and higher as well as successfully completes interviews for 14,439 persons (NSO, 1996), but this study emphasizes on the population aged 60 and higher answering the questionnaire by themselves. Hence, there are only 6,233 cases employed in this study. This study intends to analyze three

main parts; living arrangements, living satisfaction, and factors affecting satisfaction for senior citizens living with their children.

Living arrangements are focused on the types of senior citizens' living arrangements grouped by co-residents with senior citizens. They are children, spouse, grandchildren, and others. There are sixteen types: living alone; living with spouse only; living with grandchildren only; living with others only; living with spouse and grandchildren; living with spouse and others; living with grandchildren and others; living with spouse, grandchildren, and others; living with children only; living with children and spouse; living with children and grandchildren; living with children and others; living with children, spouse, and grandchildren; living with children, spouse, and others; living with children, grandchildren, and others; living with children, spouse, grandchildren, and others. These types of living are divided to probe into two sections; living with children and living without children.

The living satisfaction scores consist of nine indicators; happiness, warmth, accommodation, loneliness, confined dwelling, confusion arising from living with others in household, earning obedience of the children, children complaint, and neglected. These indicators are derived from the questionnaires of the survey. There is one mark for answer 'yes' in the positive indicators and 'no' in the negative indicators. On the contrary, there is zero mark for answer 'no' in the positive indicators and 'yes' in the negative indicators. The highest score of satisfaction is nine. The lowest score of satisfaction is zero.

Factors affecting satisfaction of senior citizens have two main sections examined. The first section is to study factors affecting satisfaction of senior citizens living in urban or rural areas. The second section is to investigate the significant factors to explain the senior citizens' satisfaction living in urban, and rural areas. There are differences in activities found more in urban than rural areas such as infrastructure, public health, and educational services of urban and rural areas (Juntarodjana, 1998).

Hence, significant factors affecting the senior citizens' satisfaction may be different in area of residence¹. Three models implemented in order to find the answers are the aggregate, urban, and rural models. The variables investigated are sex, age, education, marital status of senior citizens, health status, income sufficiency, need to be cared for by children, and status in the family, marital status of children and support from children.

Both descriptive and inferential statistics are used for data analysis using the Statistical Package for Social Sciences (SPSS). The descriptive statistics are used to explain the general characteristics of the samples such as frequency, mean, standard deviation (S.D.), percentage, and cross-tabulation to demonstrate the distribution of living arrangements and satisfaction levels. The inferential statistics, which are correlation and multiple regression analysis, are used to examine the relationship between independent and dependent variables.

Results of the Study

1. General Characteristics of Senior Citizens

More than half of respondents are females (55.8%), with age-group 60-64 years old (37.2%), followed by the aged 65-69 (26.1%), 75 and higher (19.1%), and 70-74 (17.6%) group. About three-fifths of respondents are currently married and live with their spouses. The largest proportion of respondents living without spouse presence is widow (31.8%), followed by married and no spouse presence (2.4%), separate (1.9%) and divorce (0.9%), remaining (2.5%) of respondents are single. Almost seven-tenths of respondents have received some education and the common education is primary (61.5%). More than three-fifths of respondents have sufficient income or have savings, over three-tenths of those have insufficient or no income. In terms of status in family that consists of head of household and owner of the dwelling, slightly over two-fifths of respondents are qualified in both cases. More than one-fourth of respondents are either

head of household or owner of the dwelling, about three-tenths of respondents are not. Almost one-fourths of respondents have poor and very poor health conditions. Approximately two-fifths of respondents have good and very good health and more than three-tenths of respondents have fair health.

The majority of respondents have dwelled with married children. There is a remarkable difference between urban and rural areas. In other words, living with married children is found more in rural areas. It implies that the pattern of families in urban areas tends to be nuclear families, while the pattern of extended families is more common in rural areas.

A large numbers of respondents still need to be cared for by their children. This may reflect the expectation of senior citizens about the filial duty that their children should treat them as norms of the Thai society. It should be noted that cases of no need are found more in urban than rural areas. This may be since the urban respondents have higher standard of living than the rural because partly, the urban respondents have better health status, income sufficiency, and educational levels than respondents living in the rural areas. Consequently, the urban respondents may have received less care than the rural.

In terms of area of residence, however, there are statistical differences between urban and rural areas in marital status of senior citizens, educational level, income sufficiency, status in family, health status, marital status of children, and need to be cared for by their children, *except* sex and age (see Table 1).

Table 1 Percentage distribution of demographic, socio-economic, and intergenerational characteristics of senior citizens by area of residence

Characteristics	Urban	Rural	Total
Sex			
Male	43.1	45.3	44.2
Female	56.9	54.7	55.8
Total	100.0	100.0	100.0
Sex ratio	75.9	82.8	79.3
(Cases)	(3095)	(3138)	(6233)
			p = .087
Age (years)			
60-64	36.3	38.2	37.2
65-69	26.8	25.5	26.1
70-74	18.0	17.2	17.6
75 and higher	19.0	19.2	19.1
Total	100.0	100.0	100.0
Mean	68.3	68.2	68.3
(Cases)	(3095)	(3138)	(6233)
			p = .356
Marital Status of senior citizens			
Single	3.2	1.8	2.5
Married and spouse presence	57.6	63.3	60.5
Married and no spouse presence	3.0	1.8	2.4
Widowed	32.6	30.9	31.8
Divorced	1.4	.4	.9
Separated	2.1	1.7	1.9
Total	100.0	100.0	100.0
(Cases)	(3093*)	(3135*)	(6228)
			p < .001
Educational levels			
None	27.2	33.1	30.2
Primary	58.7	64.2	61.5
Higher than primary	14.1	2.7	8.3
Total	100.0	100.0	100.0
(Cases)	(3118*)	(3071*)	(6189)
			p < .001

Table 1 (Continued)

Characteristics	Urban	Rural	Total
Income sufficiency			
No income	0.8	1.0	0.9
Insufficient	27.8	39.7	33.8
Sufficient	67.4	56.8	62.1
Have saving	3.9	2.5	3.2
Total	100.0	100.0	100.0
(Cases)	(3093*)	(3137*)	(6230)
			p < .001
Status in family			
Head of household	20.8	17.3	19.0
Owner of the dwelling	5.3	7.4	6.4
Both	41.1	44.4	42.7
Neither	32.8	30.9	31.9
Total	100.0	100.0	100.0
(Cases)	(3022*)	(3065*)	(6087)
			p < .001
Health status			
Very poor	1.6	1.9	1.8
Poor	20.7	22.8	21.7
Fair	35.0	37.2	36.1
Good	35.5	31.9	33.7
Very good	7.2	6.3	6.8
Total	100.0	100.0	100.0
(Cases)	(3094*)	(3137*)	(6231)
			p = .007
Marital status of children			
Married	47.2	55.5	51.4
Unmarried	37.7	29.2	33.5
Both	15.1	15.3	15.2
Total	100.0	100.0	100.0
(Cases)	(2156)	(2130)	(4286)
			p < .001
Need to be cared for by children			
Need	95.6	98.4	97.0
No need	4.4	1.6	3.0
Total	100.0	100.0	100.0
(Cases)	(2152*)	(2130)	(4282)
			p < .001

(*) missing cases excluded

Support from children is an intergenerational factor investigated as well. The finding still confirms the norms of filial obligation that remained constant in Thai society since most of the respondents have received the support from their children. Support in medical care payment ranks highest. Every aspect of support is at a high percentage. The order of percentage on each aspect of supports is in the same way in both urban and rural areas (as presented in Table 2).

Table 2 Percent of respondents having received supports from children by types of supports and area of residence

Types of supports	Urban	Rural	Total
1. Medical care payment	99.6	99.5	99.6
2. Accompany	96.8	97.7	97.2
3. Housework	94.1	96.0	95.0
4. Providing food	94.6	95.2	94.9
5. Money	88.5	91.1	89.8
6. Take care when sick	85.6	88.7	87.2
7. Work	84.2	89.4	86.8
8. Providing clothes	82.5	82.8	82.7

2. Living Arrangements of Senior Citizens

Nearly three-tenths of respondents have lived without children². The major living arrangement of respondents having lived without children in both urban and rural areas is the type of spouse only (47.2%). There are differences in arrangements of living between urban and rural areas. The spouse and grandchildren type is found more

in rural than urban areas. This may reflect the rural-urban migration of rural senior citizens' children for better economic opportunities.

Table 3 Percentage distribution of living arrangements of senior citizens living *without* children by area of residence

Living arrangements	Urban	Rural	Total
1. Alone	0.4	0.1	0.2
2. Spouse only	45.9	48.4	47.2
3. Others only	12.6	10.7	11.6
4. Grandchildren only	9.2	4.2	6.5
5. Spouse and grandchildren	14.7	22.4	18.9
6. Spouse and others	4.5	3.4	3.9
7. Grandchildren and others	10.3	7.7	8.9
8. Spouse, grandchildren, and others	2.4	3.2	2.9
Total	100.0	100.0	100.0
(Cases)	(739)	(862)	(1601)
			p < .001

About 73 percent of respondents have lived *with* one of their children at least³. This indicates that the co-residence between senior citizens and their children is prominently a significant phenomenon in Thai society. The majority of respondents being in these living arrangements are in the type of living with children, spouse, grandchildren, and others (see Table 4). It is obviously different between urban and rural areas. The children and spouse type is found mostly in urban areas, while the children,

spouse, grandchildren, and others type is found mostly in rural areas. That is to say, the urban senior citizens seem to live in nuclear families composing of parents and children in a household. On the other hand, extended families seem to be distinguishable living arrangements of rural senior citizens. This corresponds with the previous examination as demonstrated in Table 1). This is supported by Ogawa (1992) who suggested that urbanization has tended to lead to an increase in nuclear families and a decrease in traditional extended families.

Table 4 Percentage distribution of living arrangements of senior citizens living with their children by area of residence

Living arrangements	Urban	Rural	Total
1. Children only	9.3	7.2	8.3
2. Children & spouse	22.6	18.0	20.3
3. Children & grandchildren	7.7	7.2	7.5
4. Children & others	3.3	2.9	3.1
5. Children & spouse & grandchildren	9.8	12.0	10.9
6. Children & spouse & others	4.7	3.9	4.3
7. Children & grandchildren & others	20.5	20.9	20.7
8. Children & spouse & grandchildren & others	21.9	27.8	24.9
Total	100.0	100.0	100.0
(Cases)	(2156)	(2130)	(4286)
			p < .001

3. Living Satisfaction

Satisfaction of senior citizens living with their children is a way to reflect the quality of living especially quality of children's practice towards their old-age parents. There is high percentage in every positive indicator and low percentage in every negative indicator (see Table 5). It implies that the senior citizens have got a respect from new generation or their children. The neglected is found at least in negative indicators. This may indicate that senior citizens' children have constantly behaved this way towards them. The children complaint is found the most in positive indicators. It is probably that senior citizens' children have better education than their old-aged parents, consequently, there is a greater intellectual and value gap between the generation (Cowgill, 1979 cited in Week, 1981). Happiness is the highest degree of positive indicators, followed closely by warmness, accommodation, and earning obedience of the children, respectively. Children complaint is the lowest degree of negative indicators, followed by loneliness, confined dwelling, confusion living with others in household, and neglected, respectively. There are no remarkable differences in degrees of these indicators between urban and rural areas since the satisfaction scores are in the same line.

Table 5 Percent of respondents answering 'yes' to question by indicators and areas of residence

Indicators	Urban	Rural	Total
1. Happiness	98.4	97.8	98.1
2. Warmness	97.9	97.6	97.8
3. Accommodation	95.0	94.7	94.9
4. Earning obedience of the children	94.9	94.5	94.7
5. Children complaint*	15.1	15.4	15.2
6. Loneliness*	13.7	13.1	13.4
7. Confined dwelling*	11.2	10.9	11.0
8. Confusion arising from living with others in household*	7.6	6.8	7.2
9. Neglected*	3.5	3.7	3.6

* negative indicators

Every type of living arrangements has received a high score of satisfaction in both urban and rural areas (as shown in Table 6). Namely, there is no difference in average score of satisfaction between each type of living arrangements. Overall, type of children and spouse is the highest average score. Nevertheless, there are differences in orders of average scores for each living arrangement. The highest average score is found in arrangement of living with children, spouse, and others in urban areas, meanwhile, children, spouse, and grandchildren type is the living arrangement having the highest score in rural areas. A finding observed is that spouse presence seems to affect a high score. Therefore, arrangements of living with spouse presence may have an effect on satisfaction of senior citizens in this study.

Table 6 Average satisfaction score and S.D. of senior citizens by living arrangements and area of residence

Living arrangements	Urban		Rural		Total	
	Score	S.D.	Score	S.D.	Score	S.D.
1. Children only	8.19	1.38	8.05	1.59	8.13	1.47
2. Children & spouse	8.53	0.92	8.40	1.08	8.48	1.00
3. Children & grandchildren	8.07	1.48	7.93	1.60	8.00	1.54
4. Children & others	8.46	0.89	8.02	1.50	8.26	1.23
5. Children & spouse & grandchildren	8.28	1.16	8.51	0.86	8.41	1.01
6. Children & spouse & others	8.58	0.87	8.27	1.24	8.44	1.06
7. Children & grandchildren & others	8.27	1.18	8.32	1.26	8.29	1.22
8. Children & spouse & grandchildren & others	8.38	1.28	8.49	0.98	8.44	1.13

4. Factors Affecting Living Satisfaction

As the differences in activities on each area of residence, the significant factors explaining the satisfaction may have a difference between urban and rural areas. Three models implemented in order to find the answers are the aggregate, urban, and rural models. All of entered variables can explain only about 9 percent of the variation in the satisfaction. This is because there are other more important factors affecting satisfaction. In aggregate model, support from children are the strongest explanation

followed by sufficient income, spouse presence, good health, need to be cared for by children, and education (see Table 7).

Table 7 Standard scores (Beta) co-efficient of factors affecting satisfaction of senior citizens living with their children for the aggregate

Variables	Beta co-efficient
Sex	
Male (reference category)	
Female	-.0010
Age	-.0130
Marital status of senior citizens	
No spouse present (reference category)	
Spouse present	.1194***
Education	.0338*
Health status	
Poor health (reference category)	
Good health	.1145***
Income sufficiency	
Insufficient income (reference category)	
Sufficient income	.1648***
Need to be cared for by children	
No need (reference category)	
Need	.0344*
Status in family	.0030
Marital status of children	
With unmarried children (reference category)	
With married children	-.0139
Support from children	.1651***
Area of residence	
Rural (reference category)	
Urban	-.0060
Cases	4121
R ²	.0883

*** P < .001, ** P < .01, * P < .05

The result indicates that the significant factors affecting satisfaction are different between urban and rural areas. In urban model, sufficient income is the strongest explanation followed by support from children, good health, spouse presence, and living with married children. For rural model, supports from senior citizen's children is the best explanation followed by sufficient income, spouse presence, good health, and need to be cared for by children (see Table 8). The effects on senior citizens' satisfaction of these factors are significantly positive, except for that of marital status of children which is negative. That is to say, the senior citizens having support from children, spouse presence, education, good health, sufficient income, and need to be cared for by their children are more likely to have higher satisfaction than those living with opposite direction of these factors. Meanwhile, the senior citizens living with married children are more likely to have lower satisfaction than those living without married children.

Considering the married children, its negative effect is statistically significant in the urban model only. Although the income sufficiency is the best explanation in urban areas, the financial support of children to their old-aged parents is also at a high level. Therefore, a possible reason is due to the additional roles of senior citizens' married children. Namely, marriage of children may have affected the pattern of practices to take care of their old-aged parents especially in urban areas where there are hasty conditions. Moreover, the educational service is more active in urban than rural areas (Juntarodjana, 1998). Consequently, an intellectual and a value gap between senior citizens and their children may have negative effect on the satisfaction (Cowgill, 1979 cited in Week, 1981).

Table 8 Standard scores (Beta) co-efficient of factors affecting satisfaction of senior citizens living with their children by area of residence

Variables	Urban	Rural
Sex		
Male (reference category)		
Female	.0214	-.0266
Age	-.0031	-.0263
Marital status of senior citizens		
No spouse presence (reference category)		
Spouse presence	.1074***	.1312***
Education	.0441	.0048
Health status		
Poor health (reference category)		
Good health	.1445***	.0863***
Income sufficiency		
Insufficient income (reference category)		
Sufficient income	.1740***	.1534***
Need to be cared for by children		
No need (reference category)		
Need	.0198	.0609**
Status in family	-.0081	.0116
Marital status of children		
With unmarried children (reference category)		
With married children	-.0540*	.0246
Support from children	.1642***	.1682***
Cases	2064	2047
R ²	.0981	.0881

*** P < .001, ** P < .01, * P < .05

In addition, the finding also indicates that need to be cared for by children has a statistically positive significant effect on satisfaction in the rural and aggregate models. This may be because the rural senior citizens have lower standard of living than the urban and it is an expectation of members in Thai society including senior citizens.

When the rural senior citizens have greatly received support from their children, the positive satisfaction has occurred due to their need met with success. Education is able to explain the satisfaction in the aggregate model only. This may be possible since the majority of senior citizens have some education affecting the capability to adjust to situation in the persons (Nuchsangplee, 1989).

Conclusion

The large majority of Thai senior citizens have lived *with* their children. The most common arrangement of living is to live with a spouse, children, grandchildren, and others. Nearly 30 percent have living *without* children and the most important arrangement of living is to live with their spouse only. There are differences in types of living between urban and rural areas. That is to say, the majority of urban senior citizens have lived within nuclear families, while the majority of rural senior citizens have lived within traditional extended family.

Earning obedience of the children aspect is the least found in negative feeling indicators, while the happiness aspect is the most found in positive feeling indicators. However, the senior citizens in both urban and rural areas have a high living satisfaction score. That is to say, area of residence factor has no effect on satisfaction in this study.

Significant factors explaining the satisfaction in the aggregate model in declining order of importance are support from children, income sufficiency, marital status of senior citizen, health status, need to be cared for by children, and education. Although area of residence does not have any effect on satisfaction score, factors affecting satisfaction score are different between senior citizens living in urban and rural areas. Namely, significant factors explaining the satisfaction in urban areas are, in declining order, income sufficiency, support from children, health status, marital status of senior citizens, and marital status of children. Significant factors explaining the

satisfaction in rural areas are, in declining order, support from children, income sufficiency, marital status of senior citizens, health status, and need to be cared for by children. The effects on senior citizens' satisfaction of these factors are significantly positive, except marital status of children. These findings indicate that the senior citizens having support from children, spouse presence, education, good health, sufficient income, and need to be cared for by their children seem to have higher satisfaction than those living with opposite direction of these factors. Meanwhile, the senior citizens living with married children are more likely to have lower satisfaction than those living without married children.

Recommendations

As a result of the above findings, they bring to the recommendations that should be noteworthy as follows:

1. The result indicates that the senior citizens who received the support from their children strongly tend to have higher satisfaction than those who do not receive the support. Thus, this traditional filial duty of children (support from children) should be continuously sustained by socialization.

2. The result signified that the senior citizens living with spouse presence are more likely to have higher satisfaction than those living without spouse presence. Senior citizens' spouse seem to be the close-friend of senior citizens because they can yield the consolation, encouragement, assistance, and help decrease tension (Kuramasuwan, 1989). The social participation may be a way of approaching some friends who are in the same cohort with senior citizens. They may play the roles of yielding the consolation, encouragement, assistance, and helping decrease tension to senior citizens. Consequently, the related organizations should be concerned with this issue and create activities to draw them for social participation.

3. The result indicates that living in urban areas does not have a significant statistical effect on satisfaction of senior citizens living with their children, but there are differences in significant factors to explain the satisfaction in each area. Therefore, the next studies should not emphasize on the satisfaction. The studies should focus on other factors affecting satisfaction in each area.

Notes

1. Area of residence is divided as urban areas (municipal areas and sanitary district) and rural areas (non-municipal areas and outside sanitary district)
2. Calculated from the total number of cases in Tables 3 (P. 149) and Table 4 (p. 150), i.e. $1,601 + 4,286 = 5,887$ cases.
3. same as notes 2.

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