



How to live longer: lived experience of older adults in Thailand

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ABSTRACT

Introduction: Thai population data across the country have revealed an increase in the number of older adults aged over 80 years. The data indicate that individuals exhibit good self-care practices in terms of lifestyle, effective emotional coping, and strong social support, which contributes to their ability to live longer than the average life expectancy. The primary objective of this study was to explore the experiences of older people regarding self-care practices aimed at surpassing the average life expectancy of Thai individuals.

Methods: This phenomenological descriptive qualitative research utilized a purposive sampling method to select ten participants who were aged 80 years and above and residing in five villages. The inclusion criteria required individuals to be able to communicate in the Thai language and express their agreement to participate in the research project. In-depth interviews utilizing open-ended questionnaires were conducted to explore the perspectives of older people on self-care practices that contribute to longevity among this population. Data were analyzed thematically using descriptive phenomenological analysis.

Results: This study identified four themes related to longevity in older adults as follows: food type choices, exercise as part of daily life, reduction of stress exposure, and dealing with illness.

Conclusions: The findings of the study can serve as guidelines for managing the healthcare system at the sub-district level. This can be achieved through a project that focuses on developing self-care practices to promote longevity among older adults in a community. Successful management of the health system can contribute to the sustainability of healthcare management at the sub-district level.

Keywords: food type choices, exercise as part of daily life, reduction of stress exposure, dealing with illness, life long

Introduction

Nowadays, advanced medical knowledge and modern technology are factors that effectively contribute to increasing the longevity of the population. Therefore, it is important to promote health among older adults, enabling them to remain self-reliant for as long as possible. This includes promoting physical and mental well-being, teaching

them how to utilize technology for independent living, fostering happiness in their solitary lives, and facilitating communication with other community members (Chanburee et al., 2020). The worldwide life expectancy for men is 68.9 years, while, for women, it averages at 73.9 years (World Data, 2021). In terms of neighboring countries with direct national borders with Thailand, including Myanmar, Cambodia, Laos, and Malaysia, the life expectancy for men is 62.5, 66.8,

66.2, and 72.7 years, respectively. For women, the figures are 69, 72.3, 70.1, and 77.4 years, respectively (World Data, [2021](#)). The life expectancy for Thai people is approximately 71.8 years for men and 78.6 years for women. On average, individuals aged 60 can expect to live an additional 20.1 years for men and 23.4 years for women. For those aged 65, the expected additional years of life are about 16.4 for men and 19.3 for women (Institute for Population and Social Research, Mahidol University, [2016](#)). Consequently, when comparing with the Thai population, it becomes evident that the life expectancy of Thai people is higher than that of three-quarters of neighboring countries for men and higher than that of all countries for women.

In 2017, the National Statistical Office conducted a survey on the Thai population nationwide and discovered that the number of individuals aged 60 years and above was 10,225,322, accounting for 15.45 percent of the population by age (National Statistical Office Thailand, [2017](#)). The northern region had the highest number of older adults, with 2,093,071 individuals, representing 20.47 percent of the population by age, surpassing all other regions (National Statistical Office Thailand, [2017](#)). The top five provinces with the highest proportion of older people are Chai Nat, Phrae, Uttaradit, Phichit, and Sing Buri provinces (National Statistical Office Thailand, [2014](#)). In Nong Muang Khai District, Phrae Province, the population is 17,803, consisting of 8,376 men and 9,427 women. Within Tamnak Tham Subdistrict, Nong Muang Khai District, the population is 3,336, and the number of older adults is 845 (25.52 percent of the population), with 350 men and 495 women (Tamnak Tham Subdistrict Development Project Report, [2017](#)). These figures indicate that Tamnak Tham Subdistrict has an older population of over 20 percent, classifying it as an aging society (Pho-Yen, [2019](#)).

In addition, various factors contribute to increased life expectancy in different countries, among them lifestyle, traditions, culture, genetics, education, the quality of public health, and medical services available (Piensriwatchara, [2010](#)). A study conducted on 100-year-old Japanese individuals identified nine factors associated with longevity: maintaining good chewing ability, consuming protein-rich foods, engaging in regular exercise, maintaining normal vision, getting sufficient sleep, waking up early, avoiding any history of injury, abstaining from alcohol consumption, and not smoking tobacco. When combined with positive perception and psychosocial conditions, these factors

contribute to a valuable life for older adults (Siriwanarangsana, [2014](#)).

Four main factors are associated with enabling older adults to be healthy and strong, live life in society, and have a long life: firstly, food is a big issue in our daily lives, eating foods that are natural and have no toxins will help in longevity (Chernoff, [2001](#)). Secondly, the exercise factor is the body's movement which helps relax muscles, prevents joint stiffness, and stimulates the circulatory system so appropriate exercise will help longevity (Piercy et al., [2018](#)). Thirdly, the stress reduction factor is an important factor related to physical and emotional well-being. Older adults who are aged 80 years old and above who spend time close to nature, enjoy growing vegetables, living together as a large family, and eating with family regularly has a positive effect on mental health and reduces stress (Krajangchom et al., [2014](#)). Fourthly and very important, the healing factor is that when older adults are having health problems they should seek medical consultation, self-practice by following their doctor's advice, take their prescription medication, follow up on time to see a doctor, and have access to public health services easily. These factors allow an older adult with diseases to be able to reduce suffering (Hao et al., [2020](#)).

These are the main factors that influence older people's longevity. Therefore, it is crucial to establish a community health promotion system that encourages individuals to adopt healthy behaviors and self-care practices. This can lead to increased longevity and improved quality of life as individuals transition into older adulthood. Health promotion is an essential role for nurses, encompassing various aspects: 1) physical health promotion focuses on adequate hydration, consumption of all five food groups, engaging in aerobic exercise for 15-30 minutes or more, practicing deep breathing exercises, and ensuring 6-8 hours of sleep per day. 2) Mental health promotion aims to enhance psychological well-being by fostering a positive mindset, emotional stability, maintaining a bright mood, practicing mindfulness, and developing stress management techniques such as optimism and positive thinking. 3) Social health promotion involves encouraging individuals to actively participate in creating suitable physical and social environments that support their well-being, both physically and mentally, and 4) Intellectual or spiritual health promotion can be achieved by adhering to religious and cultural principles that promote well-being, as well as reducing and avoiding risky behaviors that could negatively impact

health (Pattarateeranon et al., [2021](#)). The researcher is interested in studying the care of older adults, focusing on their lifestyle, self-care practices, and social support, as these factors contribute to increased longevity and the potential to surpass the average life expectancy. Nurses can utilize this information to provide appropriate health promotion strategies for individuals transitioning into older adulthood, ultimately enhancing their quality of life and life expectancy. The primary objective of this study was to explore the experiences of older people regarding self-care practices aimed at surpassing the average life expectancy of Thai individuals.

Materials and Methods

Study design

This qualitative research with descriptive phenomenology (Wojnar & Swanson, [2007](#)) and by in-depth interview method. The participants were older males and females living in Phrae province aged 80 years old and above who were not suffering from serious illnesses such as paralysis, were independent, being fully conscious, can communicate by speaking, reading, and writing in Thai, and willing to participate in this research. The researcher selected 1-2 older adults who fulfilled the inclusion criteria in five villages from Tamnak Tham Subdistrict, Nong Muang District, Phrae Province. The total participants in this research was 10 older people.

Instrument

The instruments in this study consisted of general information forms, semi-structured interview guidelines, a voice recorder, and field notes. The interview used open questions and consisted of 10 questions that aim to explore the factors that contribute to longevity in older people. The questions were based on Kiatisevi's ([2013](#)) conceptual framework of the main factors that contribute to the health and longevity. The instrument has been verified for content validity by three experts including two geriatric nursing instructors and a geriatric doctor. The created open-ended questionnaire was examined for content coverage, checked for language clarity, and improved according to suggestions from experts. After that, an experiment was conducted with 10 similar older adults who were used in the study to test their understanding of the meaning and clarity of the language. Questions were revised before applying to the actual in-depth interview.

Data collection

The in-depth interview process in the study lasted 60–90 minutes for each participant and ended when the data were saturated. The researcher used field notes and observation methods in a notebook according to the structured interview form, documented the atmosphere, facial expressions, behavior, and non-verbal responses of participants during the interview process and a voice recorder was used for the whole duration of the interview. After all the interviews were completed, the researcher made an appointment with the participants for the next meeting for data validation.

In addition, the researcher applied epoche or bracketing by ignoring all personal assumptions related to the phenomenon under study when digging research data, putting aside his personal knowledge, understanding, and trying fully to position himself as a participant and see things from the participant's perspective.

Data analysis

Statistical analyses for this study were conducted the data were analyzed using descriptive phenomenological analysis by Wojnar and Swanson ([2007](#)), which consists of four steps. First, bracketing involves field recording and conducting a critical review from the perspective of an experienced person in the subject matter. Second, the analysis involves seven steps (Colaizzi): transcribing, extracting important text, determining the meaning of the text, grouping the meaning of the text, collecting duplicate findings, annotating, coding the information, and linking issues. A triangular review is conducted to confirm their reliability and consistency. Third, intuiting is the researchers' insight, which is enhanced by a substantial amount of information obtained through attentive listening. In-depth critiques are used to foster mutual understanding. Finally, describing involves presenting the findings to everyone and writing about the experience for a wider audience.

Ethical consideration

This study has been approved by the Human Ethics Committee Naresuan University COA No.355 / 2019, IRB No. 0105/62, dated 7 August 2019 - 7 August 2020.

Results

Participants in this study were two males and eight females; there were five people aged between 80-84 years old, three people aged between 85-90 years old, and two people aged above 90 years old; most of them

were educated at primary school level, most of them do not work, and have an income from subsistence allowance (government), most of them do not have enough income to spend so must rely on children, all of them have chronic diseases that require continuous medication such as dyslipidemia, hypertension, and diabetes mellitus. All of them do not engage in alcohol drinking and smoking. Findings from this study revealed four essential themes from the interviews as follows:

Theme 1: Food type choices

From the interview, the older adults had cooking styles that focus on preparing their food by mainly boiling, currying, and steaming. They avoid cooking with frying, stir-frying, grilling, and broiling. If they bought food that was cooked by grilling or broiling, they will cook them again by boiling it. The ingredients used for cooking were mostly vegetables that are grown by themselves without the use of pesticides, chemical fertilizers, or other toxins, such as lettuce, morning glory, Chinese broccoli, horse tamarind, ivy gourd, acacia, sponge gourd, eggplant, long beans, pumpkin, etc. They also eat fish, eggs, and local fruits such as bananas, papaya, and ripe mangoes. They avoid ingredients such as meat, coconut milk, and monosodium glutamate (MSG). Some desserts are eaten infrequently such as banana in coconut milk, pumpkin in coconut milk, green beans in syrup, etc. Their eating pattern is eating all three meals a day. Most of the older adults' eating patterns in the past up to the present day are eating vegetable curries such as lettuce curry, jackfruit curry, and mixed vegetable curry. In addition, chili paste with fresh or boiled vegetables is a menu that everyone likes to eat the most. Chili paste is an easy menu with herbal ingredients such as chilies, garlic, onions, basil leaves, lemon, or tamarind. Most of them like to eat fruit in the evening. Some elderly will increase protein by adding one boiled egg or drinking one cup of fresh milk after a meal. Most of them will drink one cup of water immediately after waking up in the morning before washing their face, brushing their teeth, or showering, which makes defecation easier and feels comfortable.

As P1 (female, 82 years old) said, *"I have eaten three meals for a long time. I focus on eating vegetables, eating fish, and not buying cooked food. Most of the time I cook at home by boiling, steaming, not deep frying or stir-frying."*

In a similar manner, P2 (female, 90 years old) said, *"I eat one egg every day, I only eat egg whites, I do not eat egg yolk. Since childhood, I have regularly eaten*

chili paste, boiled vegetables, and vegetable curry with fish, if have bananas, eat another one banana (Nam Wa bananas). I cook at home, focus on boiling and steaming, do not use MSG at all, for dessert such as banana or pumpkin in coconut milk sometimes."

In a similar manner, P9 (male, 92 years old) said, *"Since I was 40 years old, I have practiced by focusing on boiled vegetables and chili paste in the evening. After I wake up in the morning without having to brush my teeth to drink one cup of water. I feel that it will be easy to defecate, I feel comfortable."*

In a similar manner, P10 (female, 91 years old) said, *"Today, we must try to control which diet is good and which is not good. I will choose what to eat and eat three full meals, focusing on eating a lot of vegetables. To help with bowel movement. I eat desserts occasionally like banana or pumpkin in coconut milk."*

Theme 2: Exercise as part of daily life

The older adults in Tamnak Tham Subdistrict exercise regularly, consistently, and done together in the older adults' school. Wherein the Tamnak Tham Subdistrict Administration Organization has the policy to carry out training activities to promote knowledge and exercise for the older adults such as retro dance and Kongka dance. The older adults exercised with Kongka dance every Wednesday, for approximately 10 - 15 minutes. Exercising at home by themselves was an uncertain practice, which depends on their convenience and the situation of each person. If they exercised at home, it would take about 20-30 minutes including walking, swinging arms, dancing, weaving bamboo baskets, pulling out the grass in the garden, planting vegetables, and gardening. The feeling an older adult mostly agreed with was that, after exercise, the body will be able to move better, and sweating will feel comfortable. Most of the older adults were interested in exercising together at the older adults' school very much because it enabled them to meet with the people in the village where by they can socialize with each other.

As P3 (female, 80 years old) said, *"I exercised at home by swinging my arms for 20-30 minutes and every Wednesday by doing a Kongka dance with three songs. I think exercise makes me sweat and makes the body comfortable."*

In a similar manner, P5 (male, 86 years old) said, *"Some days, I pull the grass in the garden at home which is like exercising. Some days, I walk for about 20-30 minutes. Every Wednesday, when I come to the*

elderly school, I can do Kongka dance with three songs. After exercising I can sweat, it makes me feel comfortable."

In a similar manner, P7 (male, 83 years old) said, *"I will weave bamboo baskets in my free time. Every Wednesday when I go to the elderly school, I do Kongka dance with three songs which allow my body to move, have good mobility, and feel comfortable because I sweat."*

Theme 3: Reduction of stress exposure

From the interview, it was found that the stress reduction of the older people consisted of letting things go, resting, waiting for stress or other issues to pass, and go-to stress relief activities by themselves such as reading books, reading Dharma books, watching television, singing, or dancing alone. In addition, when stress occurs, they will go out to meet with trusted neighbors or will go to school for older adults every Wednesday to talk with other people to relieve stress. The Kongka dance also helps relieve stress and participating in various product creation activities such as basking weaving helps to enjoy the activities and make them forget the stress that occurs.

As P1 (female, 82 years old) said, *"I'm not stressed often but sometimes I think about my disease. If stress occurs, I will relax by reading the book. Some days, I just rest and relax, I do not think about anything, or I go to the elderly school to meet with friends and talk to each other."*

In a similar manner, P5 (male, 86 years old) said, *"I sometimes think about my children, I am worried about money is not enough, since I have income only from subsistence allowance (government). But it's ok, I just sleep and relax, let it go. Every Wednesday I go to the elderly school to meet and talk with other elderly and will forget about stress."*

In a similar manner, P10 (female, 91 years old) said, *"I will read Dharma books. Sometimes let the uncomfortable things pass by themselves without doing anything."*

Theme 4: Dealing with illness

When the older people in Tamnak Tham Subdistrict have little illnesses such as headaches, stomachaches, or muscle pain, they will take care of themselves by buying and using medication by themselves. If the symptoms do not improve, they will go for treatment in the hospital. Those older adults who have chronic diseases, regularly take medication, and even sometimes forget to take medication but there was

appropriate management. They regularly visit a doctor for an appointment to follow up on symptoms.

As P1 (female, 82 years old) said, *"I go to the doctor. The doctor makes an appointment whenever I go to the hospital. Taking medicine as the doctor said can't be absent."*

In a similar manner, P4 (female, 85 years old) said, *"I don't have any diseases, no diabetes mellitus, hypertension, or dyslipidemia at all. Therefore, I do not need to see a doctor. Whenever I have a little pain in the body just take paracetamol"*

In a similar manner, P6 (female, 85 years old) said, *"If I am ill but not serious, I take care of myself first. If it is not better, I will go to see the doctor. "*

In a similar manner, P9 (female, 92 years old) said, *"I often forget to take the medicine. Therefore, I have prepared the medicine before meals so I will not forget to take it; after eating I will take my medicine immediately. I always go to see the doctor for an appointment."*

Discussions

The self-care experiences of older people aged 80 and over begin with a crucial factor of food type choices, which plays a vital role in promoting growth and strength. Older adults predominantly consume foods derived from nature, with a focus on vegetables containing non-toxic substances, as well as fish, eggs, and milk. When it comes to cooking, they primarily utilize homegrown vegetables, avoiding the use of pesticides, chemical fertilizers, and other toxins. Commonly used vegetables include lettuce, morning glory, Chinese broccoli, eggplant, long beans, and pumpkin. These ingredients are safe, devoid of chemicals, and abundant in protein and vitamins. Protein, as a significant nutrient, aids in repairing the body's wear and tear, while the vitamins present in vegetables contribute to strengthening the immune system (Plodpluang et al., [2017](#)). In addition, most older people prefer boiling as the cooking method over frying, grilling, or stir-frying. This choice is made because frying or grilling can result in pollution from incomplete combustion, leading to the formation of Polycyclic Aromatic Hydrocarbons (PAHs). Prolonged exposure to PAHs during cooking can have adverse health effects, including an increased risk of cancer (Chaiklieng et al., [2021](#)). According to studies conducted by Krajangchom and Champawan ([2014](#)) and Supma and Sakdiworaphong ([2014](#)), older adults aged 80 and above traditionally adopt a simple lifestyle

when it comes to their eating habits. They prioritize easily accessible vegetables, often found in dishes like mixed vegetable curry or chili paste with boiled vegetables. These specific menus are highly favored by the elderly as they offer a low-fat diet that has been passed down through generations. Food plays a significant role in their daily lives and contributes to their longevity. Similarly, Japanese individuals who live longer tend to avoid high-fat foods and instead focus on obtaining protein from fish, while maintaining a diet rich in fruits and vegetables. They adhere to consuming three balanced meals in moderation. The food they consume should be fresh, clean, non-toxic, and free from chemical processes. These dietary choices are believed to contribute to a longer life (Chernoff, 2001; Pienriwatchara, 2010; Bootsri1 et al., 2017).

In addition, older adults are aware of the importance of exercise. They incorporate physical activity into their daily lives through various activities like weaving bamboo baskets, tending to the garden by pulling out grass, and planting vegetables. Furthermore, they regularly engage in exercise at home, which includes activities such as walking, swinging their arms, or dancing for about 20-30 minutes per day, 2-3 times per week. Older adults are recommended to participate in a minimum of 150 to 300 minutes per week of moderate exercise, or 75 to 150 minutes per week of vigorous activity, or a combination of both intensities. Moderate physical activities include walking, weightlifting, and lower-intensity exercises, while vigorous exercises encompass activities like running, cycling, and swimming. Research has found that surpassing the recommended amount of exercise can contribute to a longer life span. (Piercy et al., 2018) Moreover, the Tamnak Tham Subdistrict Administration Organization has developed a system of care for older people since 2010. This system is called the "older adult school" and it encompasses concrete development and actions such as promoting exercise, providing knowledge about healthcare, and organizing various activities for the participants' well-being. There is a coordination mechanism between the subdistrict older adult club, the subdistrict administration organization, the primary healthcare center, and the village headman. They work together to promote exercise by organizing retro dance sessions once a month and Kongka dance sessions that last 10 to 15 minutes every Wednesday at the school (Tamnak Tham Subdistrict Development Project Report, 2017). This system enables older individuals to engage in regular exercise that harmonizes with their lifestyle. According

to Kassis et al. (2023), longevity in humans can be attributed to genetics by only 20–30 percent, while the remaining 70–80 percent is influenced by the environment. Physical activity has age-appropriate effects that lead to improvements in body structure and muscle function among older adults. Additionally, exercise promotes muscle and bone mass, increases bone density, and, when performed moderately and consistently, it enhances immunity, reduces illness rates, and decreases body inflammation (Kassis et al., 2023). Furthermore, aerobic exercises, such as dancing accompanied by music and involving multiple participants, have been shown to increase cognitive performance, stimulate memory, enhance attention, and facilitate cognitive learning (Klimova et al., 2020).

In the context of older individuals, the accumulation of stress throughout life contributes to a weakened immune system and the development of chronic diseases (Renzaho et al., 2014). Furthermore, stress can have an impact on colonic motility and the composition of intestinal microbes, leading to a reduction in lactobacillus levels and an increase in the adhesion of pathogenic bacteria (Conlon et al., 2014). Therefore, stress management is crucial to mitigate the detrimental effects of stress and promote the overall physical and mental well-being of older adults. Given that older people have experienced stress throughout their lives, it becomes especially important to minimize stress exposure in this population (Kassis et al., 2023). The reduction of stress exposure for older adults consists of conversations with friends, dancing in older adults' school every Wednesday, letting things go, reading Dhamma books as well as exercising. According to Supma and Sakdiworaphong (2014), the importance of positive emotions, stress avoidance, and engaging in enjoyable activities for older adults is related to longevity. Regular participation in community events and cultivating a positive attitude, self-esteem, and adaptability are key factors in maintaining a positive mental state. For those who don't participate in community activities, finding relaxation at home through activities like watching TV or reading is suggested. Positive emotions and mental well-being not only benefit their psychological health but also have a positive impact on their physical health.

Effectively managing illnesses is crucial for older individuals to achieve a long life. This involves dealing with chronic diseases that require ongoing medication, such as dyslipidemia, hypertension, and diabetes mellitus. When older people experience mild illness, they typically prioritize self-care. However, if symptoms

persist without improvement, they go to a hospital for examination and treatment by healthcare professionals. Additionally, they can take care of themselves by consistently adhering to medication for chronic diseases, regularly monitoring their bodies for any abnormal symptoms, and scheduling regular check-ups with their doctors for continuous follow-up. According to Han et al. (2022), self-management significantly enhances the quality of life and longevity of older individuals with chronic diseases. This includes self-monitoring of symptoms, adherence to medication plans, regular professional follow-ups, and the development and adherence to a lifestyle aimed at maintaining their overall health. In addition, all older adults who participated in the interview do not smoke or drink alcohol. Older adults who do not smoke or drink alcohol can have a longer life as they avoid the harmful chemicals found in tobacco and alcohol. Smoking and drinking alcohol contribute to a decline in the energy production process and cause severe damage to brain cells. Smoking accelerates the aging process by increasing the number of free radicals in the body. Additionally, smoking raises the risk of emphysema, lung cancer, hypertension, and heart disease. On the other hand, alcohol consumption increases the chances of developing cirrhosis and liver cancer (Piensriwatchara, 2010). Furthermore, accessing public health services is crucial for older adults. When facing health problems, they consult a doctor promptly, follow the doctor's instructions, take prescribed medications, and regularly visit the doctor to monitor chronic diseases. By doing so, they can effectively control and reduce the impact of chronic diseases. In terms of life expectancy, women experience an increase of 6 percent and 8 percent at ages 65 and 85, respectively, due to adequate access to healthcare. In comparison, men generally experience even greater increases in life expectancy, with a rise of 10 percent and 14 percent at the same age ranges (Hao et al., 2020).

The results of this study were based on a one-sided perspective of older adults. It is important to acknowledge that the longevity of older individuals is influenced by various environmental factors. This limitation highlights the need for further studies to explore the viewpoints of individuals involved in the development of care systems for older adults, including community leaders, healthcare professionals, village health volunteers, and families of older people.

Exceeding the average life expectancy is a frequent occurrence; however, attaining a lengthy and healthy life necessitates careful planning prior to reaching old

age. The findings of this study can serve as guidelines for managing the healthcare system at the sub-district level. This can be accomplished through a project that emphasizes the development of self-care practices aimed at promoting longevity among older adults within the community. Successful management of the healthcare system can contribute to the sustainability of healthcare services at the sub-district level.

Conclusions

The research findings indicate that food, exercise, reduction of stress exposure, and dealing with illness are key factors contributing to the long lives of older adults in Phrae Province, Thailand. Consequently, it is crucial for the families and healthcare providers of older adults to support them in adopting healthy eating habits, engaging in regular exercise, volunteering in activities that benefit the community, practicing meditation for mental calmness, effectively managing illnesses, and ensuring swift access to healthcare services. Therefore, those responsible for the well-being of older individuals including family members, government agencies, and healthcare professionals, should promote these factors to enhance the older adults' quality of life and longevity. Family members should encourage older adults to embrace healthy eating, engage in suitable exercise, actively participate in community activities, and receive appropriate medical care.

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