



STRENGTHENING THE HEALTH CARE SYSTEM ACCORDING TO THE FOUR PRINCIPLES OF BHĀVANĀ TO SUPPORT THE AGING SOCIETY

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Abstract

Background and Objectives: Taking care of the health of the senior citizens is an important matter. Family members play a very important role in caring for the senior citizens. They must understand the problems in order to take care of the health and environment of the senior citizens correctly and appropriately. In addition, applying the four principles of Bhāvanā as a guideline to support the aging society will help the senior citizens to be happy, have a better mental state, and be able to rely on themselves. The objectives of this research article are to study the health care system to support the aging society and apply the four principles of Bhāvanā in health care to support the aging society.

Methodology: The study employed a qualitative research method by collecting data from related documents and in-depth interviews. Key informants included two scholar monks, two representatives from Hospital, two Village Health Volunteers (VHV), two temple volunteers, four senior citizens, and four caregivers, with a total of sixteen people.

Main Results: The study results indicated that: 1) Health care system to support the aging society consisted of creating a network for healthcare systems to the senior citizens by creating a joint plan with the sub-district health promoting hospital, community, and senior citizens. The potential development of the health care network for senior citizens was conducted by workshop meetings to continuously follow up on the health care network for them. The establishment of schools for senior citizens was conducted through a meeting to appoint a committee to operate the care of senior citizens. It included network partners operating under the concept of promoting a lifelong learning process. Training to provide knowledge to caregivers of the senior citizens was a training program for caregivers. The senior citizen's caregivers were the mainstays to care for, follow up with, and visit senior citizens who were homebound and bedridden. The supervisor team provided supervision, evaluated performance, and organized a forum to exchange knowledge; and 2) The



application of the four principles of Bhāvanā in health care to support the aging society consisted of physical, moral, emotional, and wisdom development. For physical development, the senior citizens developed themselves through physical awareness by considering factors that affected health. For moral development, the senior citizens developed themselves by adjusting behavior to promote their health by using healthcare to create a healthy society. For emotional development, the senior citizens developed themselves by making their minds comfortable and being kind to community members. For wisdom development, the senior citizens developed themselves through continuous learning by acknowledging and passing on knowledge to community members.

Involvement to Buddhaddhamma: This research article is involved Applied Buddhism within the group of Buddhism for social benefits by applying the four principles of Bhāvanā for strengthening the aging society includes; physical development, which means having a supportive relationship for the physical environment of the senior citizens to have good physical health; moral development, which means having a supportive relationship with maintaining morality; emotional development, which means strengthening knowledge, thoughts, and understanding by developing a calm mind; and wisdom development, which means the search for knowledge of the senior citizens is always increasing.

Conclusions: Health care to support the aging society applied the four principles of Bhāvanā to help senior citizens be happy and able to rely on themselves. It started when senior citizens developed healthcare behaviors. Senior citizens maintained good health, were kind, and helped the community and society. They organized activities to promote the health of the senior citizens and the community in unity. They developed their comfort through continuous learning and inherited knowledge to community members.

Keywords: Strengthening, Health Care System, Four Principles of Bhāvanā, Senior Citizens

Introduction

Due to changes in the population structure of Thailand in 2023, Thailand can be comprised of a completely aging society by 20 percent of its whole population. It can affect the country's development and its growth in the long term. Thailand's government has regulated policies and measures to support the aging society. Along with concerns from all sectors about the situation, Thailand's government administers the aspect of senior citizens to drive the mentioned policies by contacting them with the changes in the situation. Past performance indicates that the problems in administering the aspect of senior citizens are caused collectively in terms of issues and target areas of the operation by isolated operation that lacks integration or operates with redundancy. Therefore, all sectors must collaborate with integration to execute policies in the aspect of senior citizens for its practice. Additionally, all sectors must have a mechanism to observe the current result from the general aspect of senior citizens, which is hard to see. It affects situation assessment and policy regulation at different levels (Ministry of Social Development and Human Security, 2018). Those early-mentioned problems affect health care to be more vital. The study reveals that senior citizens can take care of themselves at a moderate level. In addition, the study has found factors that



affect health care among senior citizens, which include personal attributes (Gender, Age, Education level, Marital status, General knowledge, Occupation), living conditions, and support from family and society (Boukeaw & Teungfung, 2016). The living conditions of senior citizens are the supporting factors in terms of housing insurance and safety. The policies in terms of senior citizens in Thailand emphasize senior citizens live among their families with caregivers in appropriate housing that is suitable and modified for their age and safety. However, it is found that senior citizens in one out of ten live alone, and one out of four live with their spouses. It is caused by changing the size of Thai families from an extended family to a nuclear family, and it is caused by economic conditions that make family members work outside the home. Therefore, living closely with family members can support senior citizens in being nurtured by people they trust and love, which makes them feel safe and convenient in their daily lives (Aekplakorn, 2014).

Health care for senior citizens in the community is the primary task of the Sub-district Health Promoting Hospital (SHPH), which is the front line to upholding public health. The primary health care of the Sub-district Health Promoting Hospital (SHPH) includes initial screening for chronic diseases, preliminary examination, and health check-ups for assessing risks among senior citizens. These tasks are for senior citizens to receive early treatment and decrease complications and disease severity. The data in terms of health care for senior citizens in the community still has problems in terms of excessive data and data management for convenience and quality of health care planning among senior citizens. In addition, there is a problem with the availability of healthcare for senior citizens, which is commutation. The limitation with the physiques of senior citizens causes inconvenience to senior citizens commuting to nearby healthcare facilities. Moreover, their housing in the agricultural community usually distances them from each other. Thus, house visiting, and home care are considered important tasks. The problem coverage in healthcare data of everyone requires planning of service and maps to each house of senior citizens for convenience of commutation. From the problems, the tasks of caring the senior citizens require basic data to conduct a Comprehensive Geriatric Assessment (CGA) across all aspects. It is conducted to plan the service, which includes planning for the promotion of preventing and recovering health problems of senior citizens according to the context of each area. The assessment also requires spatial data for public healthcare service providers to support the service (Taburee, 2016). According to the health problems among senior citizens, all related organizations are aware of the importance of preparation and the requirement of support for senior citizens in different aspects. It includes a regular lifestyle, the promotion of physical health, mental health, socializing, wisdom for living conditions, and relationships in family and community. It is obvious that the health problems of senior citizens do not depend on a few diseases but also on their living conditions. Therefore, there should be a preparation for the public health service system to support the problems in the system that derive from the symptoms of chronic diseases, which includes basic social services (Institute for Population and Social Research, 2019). Prevention, healthcare, life-long learning, and life stability include warm families and communities that support and create a system of healthcare that supports an aging society.



The teachings in Buddhism teach people to know the truth of life and themselves by considering the problems to solve with principles and reasoning. The purpose is to develop a quality of life to be better, stabilized, and successful. The Buddha's teachings are called Buddhadhamma. The practitioner who practices according to Buddhadhamma would gain the condition of behavior or way of life, which means being virtuous. The four principles of Bhāvanā included: 1) Physical development implied body development and body supplements. The senior citizens developed their bodies according to their physical environment, which also included eating healthy foods according to the principles of nutrition; 2) Moral development implied the development of relationships between humans and the environment. The senior citizens followed the daily information with media technology to explore knowledge for promoting health and developing wisdom; 3) Emotional development implied elevating the mind to be happy, calm, supportive to good friends, merciful, ready to help others from suffering with wisdom, and having good mental health; and 4) Wisdom development implied the development of intuition to practice according to the truth until reaching the freedom and attachment in the mythology of the hypothetical world. The four principles of Bhāvanā help senior citizens to be happy with better mental health. They can help themselves, solve their problems, and make their quality of life better, which improves their lives in terms of physical, moral, emotional, and wisdom development.

The problems and reasons mentioned above make the researchers realize the importance of promoting the healthcare system according to the four principles of Bhāvanā to support an aging society. The number of aging people or senior citizens is increasing. Therefore, the researchers are interested in studying the healthcare system to support senior citizens, which includes the application of the four principles of Bhāvanā in healthcare for supporting the aging society. The purpose of the application is to give senior citizens a good quality of life by allowing them to apply for Buddhadhamma, which is suitable for their daily lives. The healthcare system is supposed to support the aging society in four aspects, which include physical, moral, emotional, and wisdom development for better quality of life.

Objectives

The objectives of this research article are to study the health care system to support the aging society and apply the four principles of Bhāvanā in health care to support the aging society.

Methodology

This research was conducted as a qualitative field research with an in-depth interview and the study of concepts and theories from documents.

Key informants

Key informants included two scholar monks in Nakhon Ratchasima Province, two representatives from Krachon Sub-district Health Promoting Hospital, Phimai District, Nakhon Ratchasima Province, two volunteers from Village Health Volunteers (VHV), two temple public health volunteers, and four senior citizens from Krachon Subdistrict Community, Phimai District, Nakhon Ratchasima Province. The sample, mainly based on age group, was purposively selected



and divided into two groups: The first group consisted of senior citizens aged 60-74 years, and the second group consisted of senior citizens aged 75 years and older. Moreover, the sample was chosen based on occupations: Senior citizens who did not have a career, the senior citizens who worked in agriculture, and the senior citizens who were pensioners. Caregivers of the senior citizens consisted of four people, explicitly selected from families with senior citizens aged 60-74 years and above 75 years and were divided into two groups with a total of sixteen people: A family where the senior citizens played a role in community activities and families with senior citizens who had health problems that required close care.

Research tools

In-depth interviews were created from literature reviews, documents, and relevant research by conducting in-depth interviews with experts and people who had experience in healthcare system for senior citizens. It was an in-depth structured interview with open-ended question style to conduct an in-depth interview on the healthcare system for senior citizens to support the aging society and the application of the four principles of Bhāvanā in care system to support the aging society, which had the following steps to create tools. In first step, the study analyzed related theoretical concepts to analyze principles, concepts, theories, and various findings related to the application of the four principles of Bhāvanā in healthcare system to support the aging society (Thanakwang & Soonthornhadha, 2006); (World Health Organization: WHO, 2002). The primary Source was the Thai Tipiṭaka Mahachulalongkornrajavidyalaya Edition, 1996, and secondary sources included books, textbooks, documents, journals, theses, articles, and other academic works, including reliable electronic data related to the study subject. In second step, the study used conclusions obtained from the analysis to synthesize various ideas related to research to use as a guideline for creating the structured interview. In third step, the study created a structured interview and test for its content validity by means of finding the coefficient of consistency (Index of Item-Objective Congruence: IOC) (Cronbach, 1990). Checking the validity of the content was done by taking the interview to the experts to consider whether each question in the interview was consistent with the behavioral objectives. If it was in accordance, the expert would give a value of "+1," if it was in accordance but if the expert thought that the interview was not in accordance with the objective, the value would be given as "-1," and in the case where the expert was not sure that the interview form was consistent with the objective or not, they would give a value of "0." In forth step, the study used the interview form to interview people with experience in health care of senior citizens.

Data collection

The researchers collected qualitative data with these steps:

1. The researchers collected data with documentary analysis, which was the study of data and knowledge related to the four principles of Bhāvanā.

2. Six steps of in-depth data collection through an interview with scholar monks in Nakhon Ratchasima province as follows:

Step 1: The researchers studied the healthcare system for senior citizens;



Step 2: The researchers studied guidelines, principles, concepts, and theories that related to the four principles of Bhāvanā;

Step 3: The researchers created research tools, which included an in-depth interview form that in accordance with the framework of data from literature review to be taken as the guideline for making questions in the interview. Then, three experts checked the research tool for validity and accuracy from consistency of content and language use;

Step 4: The researchers studied the data with field study to interview with in-depth interview from 16 key informants. The researchers collected documents and interview data about principles for the application of the four principles of Bhāvanā in the healthcare system to support the aging society;

Step 5: The researchers analyzed and synthesized all data from field study that was conducted with in-depth interview and all documents. The results of the research were concluded with content analysis, which was in accordance with the conceptual framework of the four principles of Bhāvanā;

Step 6: The researchers presented the guidelines for the application of the four principles of Bhāvanā in the care system to support the aging society in order to conclude it as the recommendations for the application of the four principles of Bhāvanā in the care system to support the aging society.

Data Analysis

In this research, the researchers analyzed qualitative data with these following details:

1. The researchers analyzed and integrated documents and related research, which included analysis of data and knowledge in terms of theoretical study, related research that concerned the healthcare system for senior citizens and the four principles of Bhāvanā in the healthcare system to support the aging society.

2. The researchers analyzed data from in-depth interview with scholar monks in Nakhon Ratchasima province and people who had experience in healthcare system for senior citizens. The interview form was the structured interview, which had open-ended questions. The researchers classified data from the number of respondents who responded each question from each group, then classified each aspect in each group of issues to gain data accordingly to the objectives of the research.

Results and Discussion

1. The healthcare system to support aging society indicated the healthcare system to support the aging society in the area within Krachon Subdistrict, Phimai District, Nakhon Ratchasima Province, consisted of: 1) Network building of care system for senior citizens, was included planning to make solutions with Krachon Subdistrict Health Promoting Hospital, public health volunteers of the village, caregivers of senior citizens, and communities. It consumed the mutual resources of the network in the area, which had been well supported by the operation. The operation was conducted to integrate the Health Security Fund's plan and the development



and rehabilitation center for senior citizens. The inside of the network had the appointment of a committee to supervise the association of senior citizens to review the roles of the committee and the association of senior citizens; 2) The development of potential in the healthcare system for senior citizens held the operation meeting to promote the potential of the committee to develop the quality of life for senior citizens and the association of senior citizens with lessons learned from other areas that were successful in creating a health system for senior citizens. Moreover, the network kept supervising the healthcare system and also discussed the problems in the operation of caring for the senior citizens, which included the senior citizens with chronic diseases, bedridden conditions, and health in order to protect and care for the senior citizens healthy and happy; 3) The institution of a school for senior citizens included the meeting for the institution through the appointment of a committee for operating the caring of senior citizens with the network. The location of school for senior citizens was located at Talad Pladu Temple in Krachon Subdistrict, Pimai District, Nakhon Ratchasima Province. The school operated once a month, and the school for senior citizens operated under the concept of promoting life-long learning for potential senior citizens. The purpose of the school was to allow the senior citizens to learn and develop themselves. It could have led to the development of quality of life among senior citizens, which depended based on the concept that suggested: "The potential and worthy senior citizens should have been promoted and supported to participate in making benefit to society and promoting the learning of senior citizens by connecting with their experiences. The scope of this issue indicated that it must have made the senior citizens to be able to apply the knowledge in present life. It increased the union in terms of networking or community." The operation of the school for senior citizens involved the integration from all sectors under the concept of "Thinking, Doing, Creating" and taking part in the operation. Learning management made senior citizens happy, thus developing the skills to take care of themselves for a good quality of life. In terms of benefits that senior citizens received from the school, it included the terms of physical health that made senior citizens healthy and active, which decreased the risk of disease and dependency on other people. In terms of mental health, it decreased their loneliness, which made them active, proud of themselves, and realize their self-worth, abilities, and positive thoughts of themselves. In terms of socializing, they had good relationships with people of their age and differences in age, as well as acceptance from their peers. In terms of wisdom, they became aware and understanding of what was happening, able to adapt and live their lives according to their age. In terms of the economy, they learned vocational skills, which made them able to make a living and create jobs that could have helped them to be beneficial for the community and society. The school for senior citizens was the area for learning and transferring experience, local wisdom, and cultures to be sustained as the uniqueness of the community. The school for senior citizens was the "Stage" that gave opportunities to senior citizens to participate in making benefit to the community and society, which might have included motivation in participating as the volunteer within the community; 4) The training seminar to give knowledge to senior citizens was the training for recovering the knowledge to caregivers of senior



citizens. The area would have received the budget for conducting training from the Health Insurance Fund and support from Krachon Health Promoting Hospital. The network was involved with the support in terms of food and beverage at the time of the training seminar. The training included practicing writing the plan for visiting and the guidelines for the visiting of senior citizens; 5) The caregivers of senior citizens were the participating leaders in caring for and supervising the visiting of home-bound and bedridden patients. The caregivers of senior citizens wrote the plan for visiting and supervising the visit of home-bound and bedridden patients. After the completion of the training, the caregivers conducted the screening of the senior citizens in the Krachon Subdistrict to screen them with the assessment for Activities of Daily Living (ADL). The guidelines for caring comprised the manager of the healthcare system, which included officers from Krachon Health Promoting Hospital and public health volunteers of the village to join the assessment for Activities of Daily Living (ADL) and plan the caring system. The senior citizens who depended on caregivers joined the planning session by writing the plan of participatory caring and the system, which they also participated in visiting the senior citizens according to the plan for everyone's necessities. The plan emphasized the recovery of body condition and the prevention of side effects from diabetes and hypertension by consuming less sweet, high-fat, and salty foods. The plan involved giving knowledge in terms of cultivating herbs for cooking and the relaxation of senior citizens. The manager of the visiting system was involved in the plan to assess the care of home-bound senior citizens. In addition, the caregivers of senior citizens and the manager of the care system held meetings for consultation to plan the care and improve the guidelines for the care process; 6) The team of caregivers who supervised the assessment of the result included officers from Krachon Health Promoting Hospital. They supervised the operation of caring for the senior citizens by visiting the senior citizen of caregivers, the operation of the school for senior citizens, the meeting of the committee of life quality development for senior citizens, and the association of senior citizens; and 7) The stage for exchanging knowledge, lesson learned, returning lesson with target group, which include community leaders, public health volunteers of the village, public health volunteers of the temple, and the officers from Krachon Health Promoting Hospital. The researchers brought the results of the community participatory operation and concluded the results of the operation. The healthcare system to support senior citizens conformed to the research of Suprani Boonmee, who conducted the research on "Development of an Elderly Care Model with Participation of Community Network in Ban Nonphuey Tambol Health Promoting Hospital, Sanom District, Surin Province." The results indicated that the factors of success in the development of an elderly care model with participation of a community network in terms of lessons learned from the operation of participants conveyed the factors of success. It indicated the participation of the community network in the participatory planning of shareholders with the development of the model. The exchange of problems and creating guidelines for solving problems together conducted the writing sessions to write the plan or project for requesting sufficient budget and materials for appointing a committee of the operation. It included assigning missions, classifying responsibility, building mutual ownership, volunteering



service for visiting, and helping the senior citizens to build strength by exercising with the promotion from the community network without using a budget (Boonmee, 2019). It also conformed to the research from Homsombat et al. (2021), who conducted the research on "Elderly School: Enhancing Potentials of Elderly in Aging Society." The results indicated that the school for senior citizens operated under the concept of strengthening the life-long learning process for developing the potential of the senior citizens, which gave senior citizens the opportunity to develop their self-care. It led to the development of quality life for senior citizens based on the concept that suggested potential and worthy senior citizens. The concept suggested that senior citizens should have been promoted to participate in making benefits for society and learning with their experience. The content of learning should have been practical for the current lifestyle. It should have raised the opportunity to form a union as a network or community. It should have been a space for senior citizens to show their potential. The learning should have been conducted by transferring the accumulated experience to the others to inherit the local wisdom for the community. It caused the senior citizens to live their lives with self-worth. They could have made the benefit for society and have been happy in the late stage of their lives. The important roles of schools for senior citizens in the development of potential for senior citizens include: 1) Promoting lifelong learning of senior citizens; and 2) Promoting senior citizens to be healthy in the physical, mental, emotional, and social aspects. The framework of integrative curriculum with Buddhist innovations for developing the life quality of senior citizens in physical, mental, emotional, intellectual, social, economic, and environmental aspects. It was depicted in Figure 1.

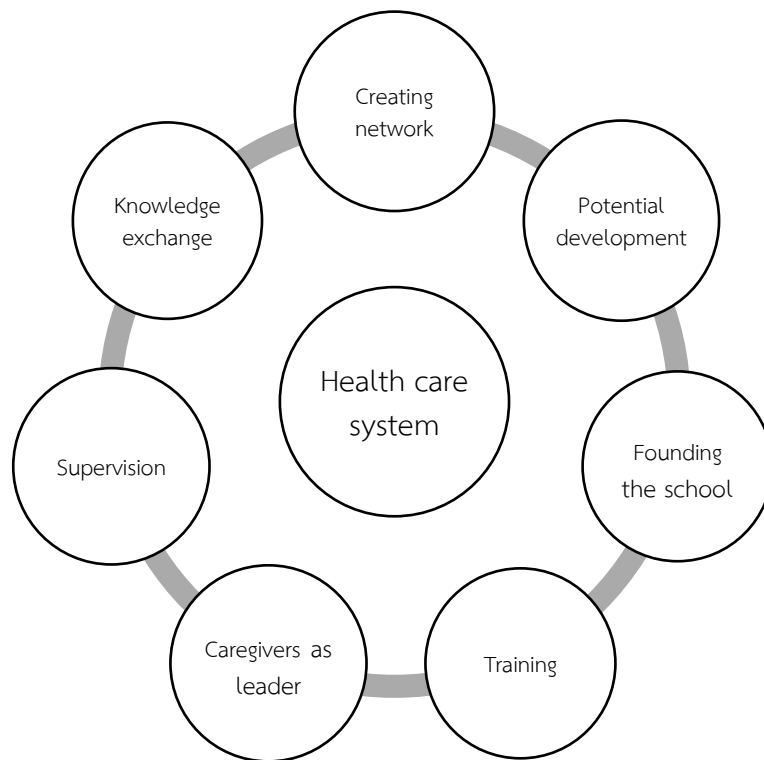


Figure 1 The health care system to support aging society



2. The application of the four principles of Bhāvanā in caring for the health of senior citizens indicated that the four principles of Bhāvanā, which included physical, precept, mind, and wisdom, were the Buddhist principles that could have been applied in caring for the health of senior citizens. The four principles of Bhāvanā consisted of: 1) Physical development implied the senior citizens developed themselves through physical senses, which emphasized physical activities that related to the result on the health within the eye, ear, nose, tongue, and body called Indriya. There was taking care of themselves constantly by acting according to Buddhist principles. The practitioner took consciousness through all five senses to know causes and effects continuously, which became the physical development. It included the habit of eating that promoted healthiness from eating fewer sweet foods, foods with high fat, and salty foods. It also included developing the residence to be clean with good air conditioning, which made fresh air in the residence. It included being conscious of taking drugs according to the advice from doctors, which helped make the senior citizens to be the role model. It expanded the activities for developing the health of senior citizens to be the best example in the community. It included conducting activities for exercising that were suitable for daily life. The activities for developing physical health or activities for developing the physical according to the four principles of Bhāvanā emphasized all kinds of training that created activities for caring for the health of senior citizens. It could have been applied to caring for the health of senior citizens in every community, even though each community was different. The conducted activities that could have been applied to all communities were considered senior citizens trying to take care of themselves by regularly exercising, being active, maintaining their residences, and doing daily activities. It must not have made senior citizens have difficulty, but it should have made their quality of life better without being a burden to their offspring. The small gathering to conduct physical activities made senior citizens use their free time to be beneficial; 2) Moral development implied senior citizens developing themselves by adjusting their behaviors to promote their health from taking care of themselves to be an example of a good health society. It began with keeping precepts and promoting the senior citizens in the community to join meditation in the temple on every Buddhist holy day and Buddhist holidays by participating in timely Buddhist sermons that were conducted by the temple or community. In addition, senior citizens could have chosen to listen to online Dhamma. They could have donated, learned how to sacrifice, let go, been generous, and helped the community as much as possible. The senior citizens developed themselves to be according to morality by keeping precepts, taking account ethics, restraining from harming themselves and others and refraining from drinking alcoholic beverages and intoxication. It included participating in social activities to demonstrate the example of the community by helping community members and making a living in legal ways. The occupations that demonstrated the local wisdom that senior citizens were the example for conducting activities that were beneficial to the community. It involved gathering community members to join the activities in the community to build unity with innovations in the community. It could have brought the budget from the Health Security Fund to conduct health-promoting activities for



community members. The members of the association of senior citizens must have conducted themselves within the precepts and Buddhist doctrines by distributing the budget to take effect in the recovery and development of the health of senior citizens; 3) Emotional development implied senior citizens developing themselves by calming themselves, participating in meditation retreats, chanting the Dhamma to calm themselves, and diligently training themselves to be according to the morality. It might have begun with practicing how to let go of the defilement and the attachment to develop the emotional states of senior citizens for them to be sacrificial and voluntary in religious activities, which included merit-making. It included participating in activities according to their readiness and circumstances. The activities included paying homage, morning chanting, evening chanting, making merit in different temples, inviting family members to release animals, joining meditation sessions on Buddhist holy days, and listening to Buddhist sermons on Buddhist Holidays. The senior citizens were considered an example of emotional development. They could practice meditation and mindfulness and wish happiness to all creatures in order to be an example of development. They could have learned meditation to give advice to senior citizens or community members who were interested in emotional development. Additionally, the senior citizens who were the example preferred inviting other senior citizens in the community to develop their emotions, and most of all, activities were conducted with Buddhist monks within and outside the community. It affected the association of senior citizens to develop their mental health to be able to face the truth of health problems, physical suffering, mental suffering, and transformation in nature. It also suggests others understand nature and elevate the emotional well-being of community member; and 4) Wisdom development implies senior citizens developing themselves through constantly learning with sensing and transferring knowledge to community members in order to make others join the training about healthcare. It included arranging the environment for the senior citizens to be appropriate for the awareness and choices for activities in their daily life in order to create benefits for themselves, their offspring, the community, and society. For example, senior citizens in terms of healthcare would have joined with public health officers to conduct health-promoting activities in the community. The senior citizens who had local wisdom conducted activities to transfer knowledge and cooperated with the development of community innovations to show the local wisdom of senior citizens. It helped the senior citizens to see their self-worth according to their age, which affected the wisdom development of community members in the way of health communication within formal and informal methods. The health communication of senior citizens in a formal way seemed like conducting activities with lecturers to promote the health of senior citizens. It included transferring knowledge and experience that showed local wisdom, applying local resources to promote the health of senior citizens, and conducting activities with Buddhist monks to do healthcare for Buddhist monks and community members. The health communication in an informal way seemed like telling personal experience. It included learning from other lives, which could have been learned from the behaviors according to the four principles of *Bhāvanā*. It conformed to the research from Phrakru Suthee



Kumpeerayarn (2019), who conducted the research on "A Study on Guidelines for the Development Way of the Quality of Life for the Elder in Accordance with the Bhavana 4: Case study of Elder in ban Huai hoi, That Thong Sub- District, Phu Khiao District, Chaiyaphum Province." The results indicated that the four principles of Bhāvanā were the principles for personnel development within the development framework, which included personal development to be conscious and attentive by living within the framework of social norms, mental training, wisdom training, and being reasonable. The four principles of Bhāvanā included the principles for self-development in terms of happy daily life and socializing. The problems of the development included: 1) The growth of the new generation's economy; 2) The cultural exchange in the new generation; and 3) The diseases from the aging body. It caused problems and obstacles to the daily life of senior citizens so much due to the decline in strength from the aging body, which affects their way of life. The guidelines to solve the problems for senior citizens in order to make them develop their awareness in their lives included training for simple eating, simple living, being aware, doing no harm, not stealing, being modest, soft speaking, being true to their words, being in gratitude, not holding grudges to others, having positive thoughts, and having no harmful thoughts. The senior citizens conducted themselves in the community for their happiness through emotional development, going to the temple, chanting, meditating, being mindful at work, being mindful in speeches, being mindful in thought, making their mind happy, using intelligence with reasoning, being active while speaking, doing, and thinking, which used wisdom to solve the problems. It brought wisdom development to be used in daily life with happiness. It also conformed to the research of Piewstri, who conducted the research on "The Development of Health Care Behaviors of the Elderly by using the 4 Bhavana Principles in Nong Phueng Subdistrict, Saraphi District, Chiang Mai Province." The result indicated that the development of health care behaviors of the elderly by using the four principles of Bhāvanā included: 1) Physical development implied body development and body supplements. The senior citizens developed their bodies according to their physical environment, which also included eating healthy foods according to the principles of nutrition; 2) Moral development implied the development of relationships between humans and the environment. The senior citizens followed the daily information with media technology to explore knowledge for promoting health and developing wisdom; 3) Emotional development implied elevating the mind to be happy, calm, supportive to good friends, merciful, ready to help others from suffering with wisdom, and having good mental health; and 4) Wisdom development implied the development of intuition to practice according to the truth until reaching the freedom and attachment in the mythology of the hypothetical world. The senior citizens took care of their health according to the principles of modern medical practice and brought the Buddhist principle that was called the principle of a millionaire's heart that included "Uh Ah Ka Sa", which was abbreviated as "Hard to find, treat well, bond with good friends, and live sufficiently" in daily life (Piewstri, 2020). It depicted in Figure 2.

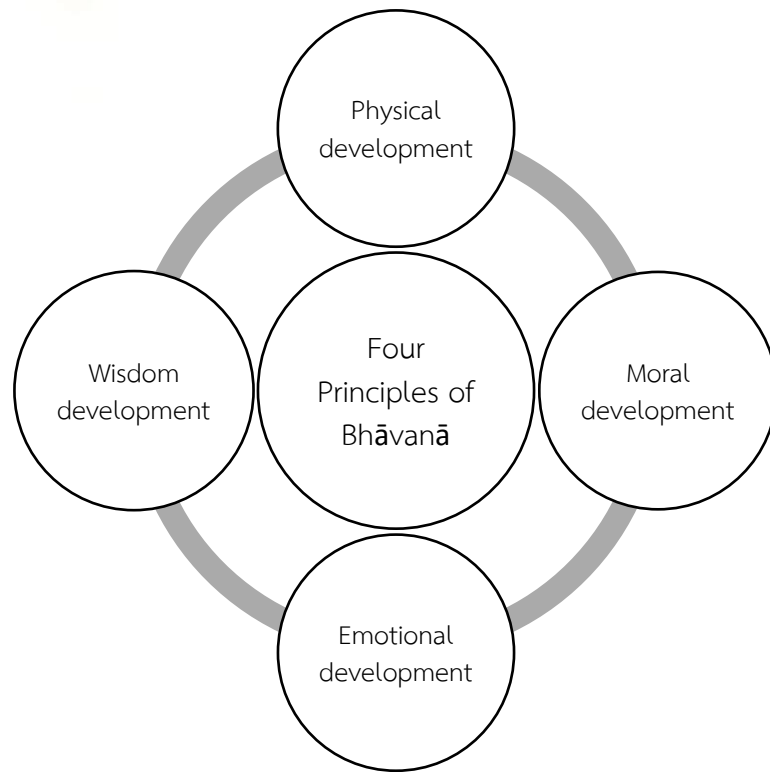


Figure 2 The application of the four principles of Bhāvanā

Originality and Body of Knowledge

From research results and data analysis, the researchers gain new knowledge about strengthening the health care system according to the four principles of prayer to support an aging society, as shown in Figure 3.

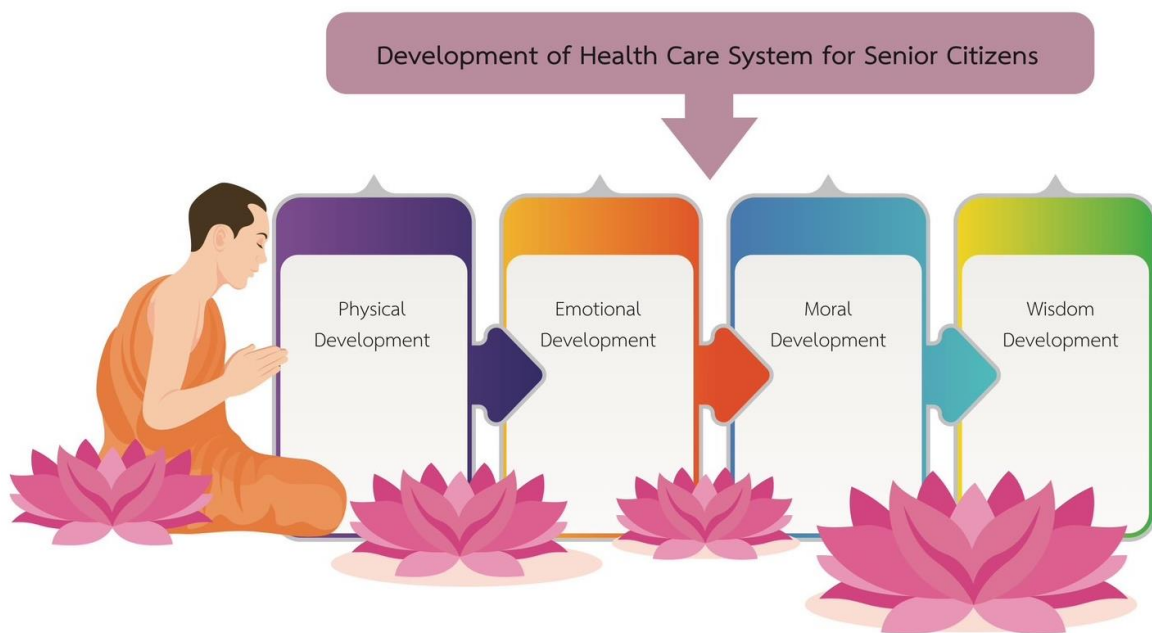


Figure 3 Development Health Care System for the Senior Citizen Using the Principles of Physical, Emotional, Moral and Wisdom



From the body of knowledge depicted in Figure 3, it can be concluded that the application of Buddhist principles is the basis of the development because Buddhist principles are a part of the personal practice of senior citizens. The four principles of *Bhāvanā*, which include physical, moral, emotional, and wisdom. It is the Buddhist principle that helps senior citizens be happy, have better mental health, and be able to depend on themselves. Senior citizens practice moral conduct by loving-kindness in helping society and the community. Senior citizens can develop themselves through learning, which they can apply to their personal development according to the provided circumstances that create strength in society and community.

Conclusions and Recommendations

In conclusion: 1) The health care system supported the aging society in the community. It included creating a network of care systems for the senior citizens with community participation and networks that cooperated to create plans. It included the development of the network's potential to care for the senior citizens in the area continuously. The community cooperated to give importance to the senior citizens and established a school for them by focusing on giving knowledge and lifelong learning so the senior citizens could have been self-reliant; and 2) The application of the four principles of *Bhāvanā* in health care supported an aging society. The four principles of *Bhāvanā*, which consisted of physical, moral, emotional, and wisdom development, were applied in taking care of the health of the senior citizens. In terms of physical development, senior citizens developed themselves physically to be healthy and were able to lead happy lives. In terms of moral development, senior citizens developed themselves by adjusting their behavior to promote their mental health. In terms of emotional development, senior citizens developed themselves by training their minds to be mindful and intelligent. In terms of wisdom development, senior citizens developed themselves through continuous learning with proper and appropriate supervision. In terms of policy recommendations, government agencies' proactive policies in the health care system should have been improved to elevate the policy to be more concrete action and promote and provide opportunities for senior citizens. There were guidelines for learning in the application of religious principles. Buddhism in the health care system was comprehensive and had access to a greater variety of learning. In terms of suggestions for use, there should have been a development of the health care system for the senior citizens by educating the senior citizens, family members, and communities, as well as caring for and promoting the health of the senior citizens with network and community participation, which created understanding and being able to change the behavior of the senior citizens correctly and appropriately. In terms of suggestions for further research, it indicated that: 1) The further research should have created and developed a model to encourage the senior citizens to learn new innovations to be used in their daily lives to have a good quality of life; and 2) The further research should have applied other Buddhist principles that met the needs of the senior citizens.



References

- Aekplakorn, W. (2014). The 5th Report of National Health Examination Survey B.E. 2557 (2014). Health Systems Research Institute.
- Boonmee, S. (2019). Development of an Elderly Care Model with Participation of Community Network in Ban Nonphuey Tambol Health Promoting Hospital, Sanom District, Surin Province. *Academic Journal of Community Public Health*, 5(4), 38-49.
- Boukeaw, P. & Teungfung, R. (2016). Health Care and Health Status of Thai Aging. *Journal of the Association of Researchers*, 21(2), 94-109.
- Cronbach, L. J. (1990). *Essentials of Psychological Testing* (5th ed.). Harper Collins Publishers.
- Homsombat, P., Phrabaidika Suphot Tabaselo, Fangkham, B. & Sornsakda, S. (2021). Elderly School: Enhancing Potentials of Elderly in Aging Society. *Journal of Educational Innovation and Research*, 6(2), 540-551.
- Institute for Population and Social Research. (2019). Thai Health Report B.E. 2562 (2019). Institute for Population and Social Research.
- Ministry of Social Development and Human Security. (2018). Department of Older Persons Strategy for 20 Years B.E. 2561-2580 (2018-2037). Samlada Printing.
- Phrakru Suthee Kumpeerayarn. (2019). A Study on Guidelines for the Development Way of the Quality of Life for the Elder in Accordance with the Bhavana 4: Case study of Elder in Ban Huai Hoi, That Thong Sub-District, Phu Khiao District, Chaiyaphum Province. *Journal of Graduate MCU Khonkaen Campus*, 6(1), 58-72.
- Piewstri, S. (2020). The Development of Health Care Behaviors of the Elderly by Using the 4 Bhavana Principles in Nong Phueng Subdistrict, Saraphi District, Chiang Mai Province. [Unpublished master's dissertation]. Mahachulalongkornrajavidyalaya University.
- Taburee, W. (2016). Health Care System of the Elderly in the Community Contacting Unit of Naresuan University Hospital. Naresuan University.
- Thanakwang, K. & Soonthorndhada, K. (2006). Attribute of Active Ageing Among Older Persons in Thailand: Evidence from the 2002 Survey. *Asia-Pacific Population Journal*, 21(3), 113-135.
- World Health Organization: WHO. (2002). *Active Ageing: A Policy Framework*. World Health Organization.