



MULTIDIMENSIONAL PATTERNS AND DETERMINANTS OF ELDERLY HAPPINESS IN RURAL TRANG PROVINCE, THAILAND: AN APPLIED BUDDHIST APPROACH TO PUBLIC POLICY

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Abstract

Background and Objectives: Many countries face rapid population aging and declining birth rates, and Thailand, now an aged society with 21.44% older adults, must increasingly prioritize elderly well-being. In Trang Province, which has the highest proportion of older adults among the Andaman coastal provinces, efforts to promote quality of life are challenged by post-COVID fear, isolation, and reduced community participation. Although active-aging policies exist nationally, there remains a gap in understanding the specific determinants that influence happiness among rural elderly populations in southern Thailand. Therefore, this study aimed to examine the patterns and determinants of happiness among older adults in Trang across five dimensions: Health, recreation, integrity, cognition, and peacefulness, to provide evidence-based guidance for improving well-being and supporting active aging in the province.

Methodology: This study employed a mixed-methods design to examine patterns and determinants of elderly happiness in Trang Province. Quantitative data were gathered from 524 older adults using multi-stage random sampling and analyzed with descriptive and inferential statistics. Complementary qualitative data from documentary review and in-depth interviews with elderly representatives were examined through content analysis to contextualize and deepen the quantitative findings.

Main Results: The study revealed that older adults in Trang Province, a rural area of Thailand, experienced a high level of happiness, consistent with the province's vision for its residents. Among the five dimensions of happiness, peacefulness was the most prominent, reflecting older adults' ability to recognize and manage their emotions effectively, achieve inner tranquility, and adapt to life circumstances with acceptance. Moreover, personal values emerged as the most influential factor, showing a significant positive correlation with overall happiness at the .01 level, indicating that stronger adherence to personal values is associated with higher levels of happiness among older adults in Trang Province.

Involvement to Buddhadhamma: The findings align with the framework of Applied Buddhism, which emphasizes integrating Buddhist teachings into daily life to achieve inner peace and



sustainable happiness. For the elderly, who possess accumulated life experience and resilience amid social change, this integration is particularly meaningful. Despite modest financial resources, many rural elderly practice moderation and contentment, embodying core Buddhist principles such as the Middle Way (Majjhimā-paṭipadā), mindfulness (Sati), moderation/contentment (Santuṭṭhi/Mattaññutā), and Buddhist happiness (Sukha). These practices enable them to transcend material limitations and cultivate happiness through acceptance, spiritual balance, and moral integrity. Thus, religiously grounded happiness serves as a key mechanism for maintaining psychological resilience and life satisfaction in later life.

Conclusions: The study highlights that applying Buddhist principles- the Middle Way, mindfulness, moderation, and contentment-together with strong personal values can foster spiritual stability, resilience, and lasting happiness among older adults, including those in rural areas. It emphasizes the need for government policies that support active aging, emotional well-being, and community engagement. Key strategies include promoting social connection, strengthening family and intergenerational relationships, and improving access to health promotion, recreational activities, and lifelong learning. Targeted initiatives for rural elders should focus on sustaining independence and meaningful participation. Overall, these measures form a comprehensive framework for enhancing happiness and quality of life in Thailand's aging society.

Keywords: Happiness, Later life, Multidimensional Patterns, Elderly, Trang

Introduction

At present, many countries are facing a situation in which the number of elderly people is steadily increasing, while the birth rate of newborns is clearly declining. This situation has led to changes in various dimensions. In the social dimension, it has affected population structure; In the political dimension, it has influenced policy formulation to address the needs of the elderly, who are becoming an increasingly significant voting base and may play a decisive role in determining future political leaders. In the economic dimension, it has affected the production of goods and services related to the elderly, as well as the declining number of working-age individuals. According to data from the Ministry of Social Development and Human Security (2025), as of July 31, 2025, Thailand had a total of 13,906,678 elderly persons, accounting for 21.44% of the total population. Therefore, Thailand has now entered a fully aged society, which refers to a society in which the population aged 60 years and over accounts for more than 20 percent of the total population (United Nations, Department of Economic and Social Affairs, Population Division., 2019).

For the elderly in Thailand, although they are officially defined as Thai nationals aged 60 years and over, advances in medical technology have contributed to a longer average life expectancy. Many individuals aged 60 and above, classified as elderly, remain physically healthy, capable of self-care, and able to contribute productively to society. Therefore, studying and paying attention to the elderly population is an important issue that all relevant government agencies must prioritize (Wataneeyawech & Onto, 2021). This is because today's older adults differ significantly from those in the past. Due to the progress in medical and public health technologies,



many elderly people, despite advancing in age, continue to enjoy good physical and mental health. They tend to lead health-conscious lifestyles, consume nutritious foods, maintain emotional well-being through religious or spiritual practices, and actively participate in activities organized by elderly groups or clubs. Furthermore, the average life expectancy of the population has also continued to rise (Taneerat & Tantasantisakul, 2022). In addition, the issue of life happiness is considered another important aspect of human well-being, especially for older adults, for whom happiness is deeply desired. As individuals reach the later stages of life, being able to live happily is something that all humans strive for. Therefore, if elderly people can achieve happiness in their lives, it will contribute to greater harmony and well-being within society, extending from individual and community levels to society at large and even to the global level (Can Oz et al., 2022).

Trang Province, which has the largest proportion of older adults among the Andaman coastal provinces, reported 127,255 elderly residents as of April 30, 2025, about four times the number in Ranong. In response to this demographic shift, the province has adopted a vision to become "A City of Good Quality of Life and Sustainability," emphasizing quality of life as a foundation of happiness (Ministry of Interior, Trang Provincial Office, 2025). Yet environmental changes and the prolonged impacts of COVID-19 have heightened fear and anxiety among older adults, who are medically vulnerable and often reluctant to leave home or receive vaccinations. These conditions have contributed to a decline in the happiness of the elderly and reduced social participation. As prior studies note, sustained fear and limited engagement undermine active aging and significantly affect overall well-being (Klangrit et al., 2025).

Therefore, to develop and enhance the happiness of older adults—an important approach to promoting active aging—relevant government agencies have integrated and coordinated their efforts to develop various dimensions of elderly well-being. This work aims to help older adults achieve a state of active and fulfilling aging. Given the significance of this issue, the researcher is interested in studying the patterns of happiness and approaches to fostering it among older adults. The goal is to promote elderly individuals with potential and well-being, examining not only the patterns and determinants affecting their happiness but also providing policy recommendations for developing strategies to enhance elderly well-being in rural Trang Province, thereby supporting happiness among older adults in Trang and other regions.

Objectives

This study aimed to examine the patterns and determinants of happiness among older adults in Trang across five dimensions: Health, recreation, integrity, cognition, and peacefulness, to provide evidence-based guidance for improving well-being and supporting active aging in the province.



Methodology

Research Context

This study employed a mixed-methods approach. Initially, the researchers conducted quantitative research using survey methods. Questionnaires were used as a research tool to gather data on happiness patterns and the determinants affecting elderly happiness in Trang Province. The sample group consisted of 524 elderly (Both Male and Female) residing in Trang Province. A multi-stage random sampling method was used, including: Stage 1: Stratified Random Sampling. Stage 2: Quota sampling based on 10 districts in Trang Province. Stage 3: Simple Random Sampling.

The researcher used Taro Yamane's formula to determine the sample size, ensuring a 95 percent confidence level, an allowable error margin not exceeding 5 percent, and a significance level of 0.05. Based on this calculation, the required sample size for this study was 399 participants from the total population; However, the researcher collected data from 400 participants, as shown in Table 1.

Table 1 The Population and Sample Size for Data Collection

District	Number Of Elderly (Persons)	Number Of Sample (Persons)
- Mueang Trang District	33,404	105
- Kantang District	15,907	50
- Yan Ta Khao District	13,998	44
- Palian District	13,362	42
- Sikao District	6,045	19
- Huai Yot District	19,088	60
- Wang Wiset District	7,635	24
- Nayong District	9,544	30
- Ratsada District	5,090	16
- Hat Samran District	3,181	10
Total	127,254	400

Data as of April 30, 2025

However, the minimum sample size was calculated at 400 using Yamane's formula. To enhance the statistical power and make sure the multiple regression analysis was strong, the researcher collected more data, which led to 524 usable responses. This larger sample size effectively reduces the standard error of the regression coefficients and provides a more reliable estimation of the model.

The study aims to analyze the relationship between determinants affecting the happiness of older adults and their overall state of happiness in Trang Province, Thailand. The conceptual framework (Figure 1) is grounded in the Department of Mental Health's Model of Happiness Indicators for Older Adults, which defines happiness as a multidimensional construct encompassing five interrelated dimensions: Physical health, recreation, integrity, cognition, and peacefulness. These dimensions collectively reflect both objective and subjective aspects of well-being in later life.



The independent variables refer to the determinants that influence the happiness of older adults. These determinants include self-perceived health status, mental capacity, family relationships, spiritual development, financial situation, participation in social or community service, social life and friendships, personal freedom, personal values, use of social media, and sexual relationships. These determinants are hypothesized to contribute differentially to the levels of happiness among older adults, depending on their demographic background, lifestyle, and social context.

The dependent variable is the happiness of older adults, measured using the Department of Mental Health's (DMH) five-dimensional model: 1) Health (Suk Sabai), covering physical and economic well-being; 2) Recreation (Suk Sanuk), involving active lifestyles and emotional joy; 3) Integrity (Suk Sa-nga), reflecting altruism and self-confidence; 4) Cognition (Suk Sawang), encompassing cognitive skills and mental clarity; and 5) Peacefulness (Suk Sa-ngob), representing emotional stability and inner harmony. These dimensions correspond to the Buddhist concepts of *kāyika-sukha*, *cetasika-sukha*, *saṅgaha-sukha*, *sīla-sukha*, and *paññā-sukha*.

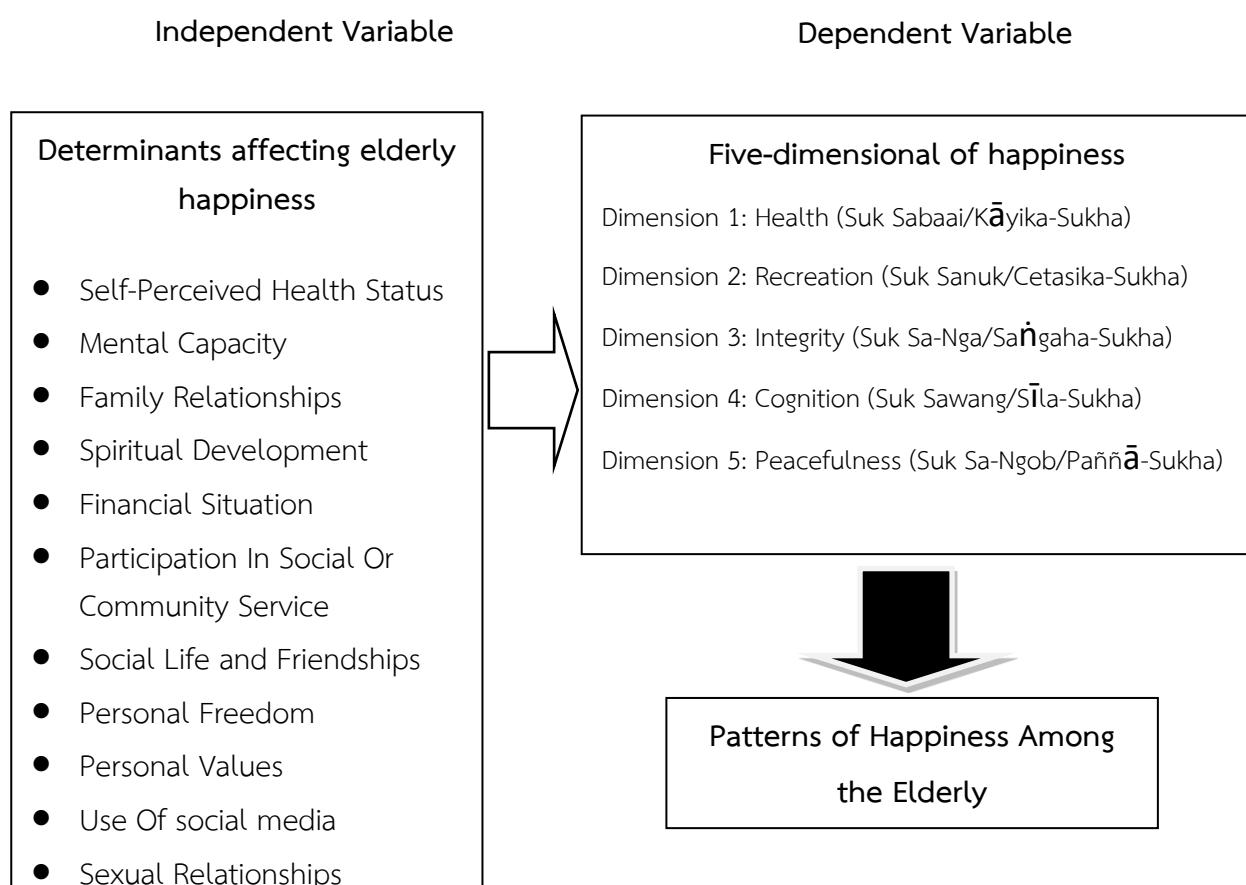


Figure 1 Conceptual framework of the study



Research Instrument

Concepts, theories, and relevant research results were considered to form and develop a conceptual framework and research instrument. The tools used in the study were a questionnaire and semi-structured interviews.

For content validity, the researcher submitted the questionnaire to three experts to evaluate the relevance and appropriateness of each item and ensure that all questions adequately covered the research content. The assessment yielded an IOC value of 0.99.

Data Collection

Initially, quantitative research was carried out, using the survey research method through a questionnaire, as a large sample was required in order to generate a comprehensive summary of information, including the opinions of people in the sample. Subsequently, qualitative research was conducted by delving into important findings from the quantitative research and further analyzing information from members of the target group who were specifically selected as elderly people playing a significant role in community and social activities, with 30 key informants.

For data collection, the researchers ensured that all ethical guidelines and principles for human research subjects were strictly followed. Before initiating data collection, the researchers went through the Human Research Ethics Review process in order to seek approval from the Center for Human Research Ethics Committee, Social and Behavioral Sciences, Prince of Songkla University. Once approval was granted, the questionnaire and interview form could be distributed to collect data (Certification Code: PSU IRB 2023-LL-Cm032).

With regard to the rights and confidentiality of informants, a research invitation letter was distributed with details about data collection and an informed consent form if the informants agreed to participate. This was to ensure that the privacy and confidentiality of informants were protected. Upon the completion of data analysis, the raw data provided by informants were destroyed immediately; This was carefully handled, as it is a fundamental right of informants to be protected.

Data Analysis

In this research, the researcher verified the completeness of the collected data before coding it (Codebook) and analyzing it using a statistical software package. The data analysis utilized: Descriptive statistics, frequency, percentage, mean, and standard deviation; To analyze general characteristics and happiness patterns among the elderly; Inferential statistics, Pearson's correlation coefficient and multiple regression analysis; To study the determinants affecting elderly happiness in Trang Province. Following the quantitative research, the study incorporated qualitative research using documentary research and in-depth interviews with key informants, including elderly club leaders or representatives. These individuals play a significant role in community and social activities, providing valuable insights into approaches for enhancing elderly happiness in Trang Province. The interview data were analyzed using content analysis.



Results and Discussion

1. General Characteristics of Respondents

The demographic and socioeconomic analysis of the respondents (N = 524) revealed that the majority of the elderly are female (60.9%), while males comprise 39.1%. Most are between 61-65 years of age, representing 49.2% of the sample, followed by 66-70 years old (29.2%), 71-75 years old (12.6%), and 76 years and over (9%). The majority are Buddhist (81.1%) and are married, totaling 388 persons or 74%. Most have completed primary education (Grades 1-6), accounting for 42.8%. A large proportion of the elderly are unemployed in any occupation (34.5%), farmers (25.4%), and self-employed (24%). The largest income group earns between 5,001-10,000 baht per month (38.6%), and not more than 5,000 baht (35.5%). Most elderly persons live with their family, children, or relatives, 316 persons or 60.3%, and with their spouse (30.7%). The majority are not members of any club (470 persons or 89.7%) and reside outside the municipal areas (51.0%). Most receive government living allowances (496 persons or 94.7%) and health care benefits from the state (522 persons or 99.6%). Additionally, the majority are debt-free (449 persons or 85.7%) as shown in Table 2.

Table 2 General Characteristics of Respondents

Demographic Characteristics		(n = 524)	Percentage (%)
Sex	1. Male	205	39.1
	2. Female	319	60.9
Age	1. 61-65 years old	258	49.2
	2. 66-70 years old	153	29.2
	3. 71-75 years old	66	12.6
	4. 76 years and over	47	9.0
Religion	1. Buddhist	451	81.1
	2. Muslim	70	13.4
	3. Christian	3	0.6
Marital status	1. Single	37	7.1
	2. Married	388	74.0
	3. Widowed	79	15.1
	4. Divorced/Separated	20	3.8
Education	1. Below primary education	42	8.0
	2. Primary education (Grades 1-6)	224	42.8
	3. Lower secondary education (Grades 7-9)	75	14.3
	4. Upper secondary education (Grades 10-12)	66	12.6
	5. Vocational	50	9.5
	6. Diploma	34	6.5
	7. Bachelor's degree or above	33	6.3

**Table 2** General Characteristics of Respondents (Continued)

Demographic Characteristics		(n = 524)	Percentage (%)
Occupation	1. Unemployed	181	34.5
	2. Self-employed	126	24.1
	3. Daily wage worker	54	10.3
	4. Farmer	133	25.4
	5. Retired government officer	13	2.5
	6. Former state enterprise employee	7	1.3
	7. Former private company employee	10	1.9
Monthly Income	1. Not over 5,000 Baht	185	35.3
	2. 5,001-10,000 Baht	202	38.6
	3. 10,001-15,000 Baht	92	17.6
	4. 15,001-20,000 Baht	31	5.9
	5. More than 20,000 Baht	14	2.6
Living situation	1. Living alone	43	8.2
	2. With spouse	161	30.7
	3. With family/children/relatives	316	60.3
	4. With friends/acquaintances/employer	4	0.8
Membership in clubs or associations:	1. Not a member	470	89.7
	2. Member	54	10.3
	- Religious club	8	1.5
	- Sports/Recreational club	20	3.8
	- Volunteer club	10	1.9
	- Income-generating club	3	0.6
	- Elderly club	13	2.5
Place of residence:	1. Outside the municipality	267	51
	2. Within the municipality	257	49
Receiving government living allowance support	1. Not received	28	5.3
	2. Received	496	94.7
	- Old-age allowance	370	70.6
	- Pension	8	1.5
	- State welfare card	5	1.0
	- Old-age allowance and state welfare card	104	19.8
	- Old-age allowance and disability allowance	4	0.8
	- Old-age allowance, disability allowance, and state welfare card	5	1.0
Receiving government health care benefits	1. Not received	2	0.4
	2. Received	522	99.6
	- Universal Coverage Scheme (Gold Card)	431	82.2
	- Civil Servant Medical Benefit Scheme	22	4.2
	- Social Security Scheme	3	0.6
	- Gold Card and Civil Servant Medical Benefit Scheme	42	8.0
	- Gold Card and Social Security Scheme	24	4.6

**Table 2** General Characteristics of Respondents (Continued)

Demographic Characteristics		(n = 524)	Percentage (%)
Debt status:	1. Debt-free	449	85.7
	2. In debt	75	14.3

Discussion

The demographic and socioeconomic profile of the elderly respondents reflects broader aging patterns in Thailand. The predominance of females aligns with national statistics showing women's longer life expectancy (National Statistical Office of Thailand, 2024). Most respondents fall within the "Younger-old" group (60-69 years), suggesting potential for continued social engagement and productive aging (World Health Organization, 2021). The fact that the majority are Buddhist and married highlights the ongoing role of religion and family as key sources of emotional and social support in Thai culture (Whangmahaporn et al., 2018). Conversely, low educational attainment indicates historical inequalities in access to education, especially in rural areas, which limit economic opportunities and access to digital information (Chanyawudhiwan & Mingsiritham, 2022).

Economically, most elderly participants earn less than 10,000 baht per month, revealing persistent income insecurity common among rural older adults. Nonetheless, the near-universal access to government living allowances and healthcare benefits reflects effective state welfare coverage (Ministry of Social Development and Human Security, 2025). The high proportion of individuals living with family underscores the continuing strength of intergenerational support, although limited participation in elderly clubs suggests restricted community engagement. Overall, the findings depict a population that is economically modest but socially supported, sustained by family networks, religious values, and state welfare systems that collectively contribute to their well-being in old age.

2. Patterns of Happiness among the Elderly in Trang Province

The overall happiness level among elderly individuals in Trang Province was found to be high ($\bar{x} = 4.13$, S.D. = 0.481). The highest-scoring happiness dimension was Peacefulness, followed by Cognition, Recreation, Integrity, and Health, respectively.

Table 3 Results for the Patterns of Happiness Among the Elderly in Trang Province

Patterns of Happiness	Average (\bar{x})	Stand. Dev.	Intervals
Dimension 1: Health (Suk Sabai/Kāyika-Sukha)	4.01	0.622	High
Dimension 2: Recreation (Suk Sanuk/Cetasika-Sukha)	4.15	0.619	High
Dimension 3: Integrity (Suk Sa-Nga /Sañgaha-Sukha)	4.12	0.595	High
Dimension 4: Cognition (Suk Sawang/Sīla-Sukha)	4.18	0.614	High
Dimension 5: Peacefulness (Suk Sa-Ngob/Paññā-Sukha)	4.23	0.527	High
Overall	4.13	0.481	High



Discussion

The assessment of the patterns of happiness among older adults in Trang Province reveals a high overall happiness level, which is analyzed by dimension below:

Dimension 1: Health (Suk Sabaai/Kāyika-sukha)

Happiness within this dimension is high. This phenomenon can be attributed to the fact that, while aging involves a natural decline in bodily efficiency and increased susceptibility to illness, older adults respond by becoming more proactive in maintaining their health. They demonstrate a strong interest in learning about disease prevention and treatment to remain active within their families. Moreover, the COVID-19 pandemic has heightened awareness of self-care, as older adults are categorized as a high-risk group. These findings are consistent with Krause et al. (2019), who argue that quality of life among the elderly integrates physical, social, cognitive, and psychological dimensions into a holistic state of well-being.

Dimension 2: Recreation (Suk Sanuk/Cetasika-sukha)

Happiness in the recreation dimension is also high, stemming from increased participation in activities that foster social bonds. Research indicates that higher levels of happiness are correlated with lower mortality rates; Even marginal increases in happiness can positively affect life expectancy. Consequently, policies that promote happiness may contribute to longevity (Chei et al., 2018). Recreation plays a vital role in enhancing vitality and reducing depression, stress, and anxiety. Kim et al. (2021) identifies a significant link between sports participation and social capital, which is divided into cognitive components (trust and safety) and structural components (community connections). Older adults who participate regularly in sports report higher levels of happiness and better mental health than non-participants. Moreover, active participation in later life facilitates the cultivation of a revitalized sense of self and social worth, consequently augmenting confidence and pride. These findings are consistent with Hwang and Sim (2021), who suggest that older adults who feel secure and trusted within their communities experience higher levels of well-being due to stronger social ties.

Dimension 3: Integrity (Suk Sa-nga/Saṅgaha-sukha)

The study indicates that older adults in Trang Province report high levels of happiness, which stem partly from their involvement in volunteerism and community-oriented activities. Participants perceive these roles as requiring significant physical and mental readiness, which in turn reinforces their sense of capability. However, some individuals face constraints, such as declining health, income-related responsibilities, or caregiving duties, that limit their ability to participate. These results align with Mathews (2024), who asserts that acknowledging personal value facilitates the conversion of older adults' responsibilities into psychological strengths.

Furthermore, participation in socially beneficial activities supports both cognitive and emotional well-being. Group engagement, community projects, and health-promoting behaviors help mitigate social isolation and enhance overall functional capacity (Altman et al., 2020). This conclusion is further supported by Becker and Trautmann (2022), who observe that happiness in later life generally increases, particularly when older adults reside in contexts characterized by strong



health systems and robust social support. Collectively, this evidence highlights the importance of creating environments that foster meaningful engagement, provide comprehensive social support, and ensure accessible healthcare as key strategies for enhancing happiness and quality of life in later adulthood.

Dimension 4: Cognition (Suk Sawang/Sīla-sukha)

The overall happiness of older adults in Trang Province is high and is attributed to their cognitive competencies, including memory, reasoning, communication, planning, and abstract problem-solving. The self-efficacy of older adults is directly related to their sense of well-being; Individuals who perceive themselves as capable of managing daily tasks tend to feel more valuable and purposeful. This sense of utility is further enhanced when older adults apply their knowledge and skills to resolve unexpected problems or contribute to their families and communities. Many older adults report a sense of pride when serving as advisors or mentors (An et al., 2020).

Moreover, these behaviors reflect robust mental health, which is characterized by four key attributes: 1) A healthy psychological state; 2) The absence of illness; 3) Adaptability; and 4) Engagement in altruistic activities (Macdonald & Hülür, 2021). These findings suggest that cognitive competence and the performance of meaningful social roles contribute significantly to overall happiness and psychological well-being among the elderly in Trang Province.

Dimension 5: Peacefulness (Suk Sa-ngob/Paññā-sukha)

The overall happiness of older adults in Trang Province is at a high level and is attributed to the extensive life experiences accumulated during this stage of life. Many older adults seek spiritual support through religious practices, such as visiting temples and listening to Dhamma. This finding aligns with Segura et al. (2023), who identify the self-dimension related to health as one of three key dimensions, self, society, and culture, in promoting the potential of older adults. Integrating these dimensions with community strengthening enables families and communities to participate in sustainably enhancing older adults' capabilities. This conclusion is also consistent with the study by Sukontamarn et al. (2023).

The findings regarding elderly happiness align with qualitative results, wherein older adults assert that "True Happiness Comes from Inner Peace; When the Mind Is Calm, The Body Naturally Follows with Positive Well-Being, As Reflected in the Teaching That the Mind Leads and the Body Obeys." The most critical factor in achieving happiness in later life is satisfactory physical and mental health, which enables older adults to contribute meaningfully to their communities and society. Conversely, older adults with poor physical or mental health, chronic illnesses, or those who are bedridden, dependent, or disabled may face significant challenges in attaining happiness (Taneerat & Tantasantisakul, 2022).

Therefore, interventions that promote older adults' well-being are essential. These include health education, appropriate nutrition, regular age-appropriate exercise, annual health check-ups, safe home environments, and preventive healthcare. Equally important is the promotion of mental health, including mindfulness or meditation approaches, acceptance of physical and social



changes, the development of coping strategies, fostering love and warmth within families, and engagement in hobbies or meaningful leisure activities. Older adults perceive these determinants as crucial to enhancing their happiness and overall quality of life (Wan & Jiang, 2024).

3. Determinants Affecting the Happiness of the Elderly in Trang Province

The overall mean score for the study of determinants affecting the happiness of older adults in Trang Province was at a high level ($\bar{x} = 3.43$, S.D. = 0.491). Among the affecting determinants, personal values had the highest mean score ($\bar{x} = 4.04$, S.D. = 0.586), followed by mental capacity ($\bar{x} = 4.01$, S.D. = 0.623), and family relationships ranked third ($\bar{x} = 3.88$, S.D. = 0.759). The subsequent determinants, in descending order of mean score, were personal freedom, self-perceived health status, participation in social or community service, spiritual development, social life and friendships, financial situation, use of social media, and sexual relationships, respectively.

Table 4 Results for Determinants Affecting the Happiness of Elderly in Trang Province

Determinants	Average (\bar{x})	Stand. Dev.	Intervals
Self-perceived health status	3.71	0.790	High
Mental capacity	4.01	0.623	High
Family relationships	3.88	0.759	High
Spiritual development	3.56	0.838	High
Financial situation	3.35	0.928	Medium
Participation in social or community service	3.60	0.819	High
Social life and friendships	3.54	0.906	High
Personal freedom	3.76	0.822	High
Personal values	4.04	0.586	High
Use of social media	2.09	1.252	Low
Sexual relationships	1.61	1.043	Very Low
Overall	3.43	0.491	High

Discussion

The study of the determinants influencing happiness among the elderly in Trang Province revealed that, overall, happiness was at a high level. Personal values had the highest mean score among the factors that contributed, followed by mental capacity and family relationships.

When examined in detail, the results indicate that personal values play a particularly significant role in determining happiness among older adults. This may be because older individuals have accumulated a wide range of life experiences, both positive and negative, and their perceptions of happiness are therefore shaped by intrinsic personal factors such as optimism, forgiveness, empathy, and self-care. Recently, older adults had increasingly placed importance on maintaining their health and overall well-being. This finding is consistent with the study by Mathews (2024), which explored the transition from "Productive Aging" to "Happy Aging" in Japan's aging society. Mathews observed that values related to happiness among the Japanese elderly are gradually shifting away from traditional social standards, such as job stability or the role of a



full-time homemaker, toward a greater emphasis on participation in meaningful activities, including work, learning, and social engagement.

This transition highlights the concept of "Happy Aging," which emphasizes granting older individuals the autonomy to choose their paths toward happiness, free from conventional social expectations. Emphasizing personal happiness and respecting diverse ways of aging can contribute to a more profound understanding of how individuals may live meaningful lives in later adulthood while avoiding rigid societal norms. Therefore, enabling older adults to define and pursue happiness according to their values and preferences represents a crucial approach to fostering genuine well-being in old age.

Regarding mental capacity determinants, the findings indicate that the happiness of older adults is influenced not only by feelings of sadness, illness, loneliness, anxiety, or poor quality of life, but also by various factors that can have an important impact on their well-being, such as financial capacity, family support, and positive mental health. These findings suggest that happiness among the elderly results from the integration of multiple dimensions. According to Segura et al. (2023), who examined factors associated with happiness among older adults in five major cities in Colombia, the results suggest the need for comprehensive elderly care, including strengthening social support, providing financial assistance, and promoting mental health. Social support and robust familial connections are critical elements in augmenting the well-being of older adults. Moreover, the study recommends the development of public policies that focus on mental health and well-being among the elderly, thereby enabling them to live fulfilling and joyful lives in later adulthood.

For family relationship determinants, the findings indicate that older adults in Trang Province place a high level of importance on family relationships. Spending time with family members and engaging in shared activities are highly valued, as is participation in community activities, such as campaigns against drug abuse. This finding is consistent with the study by Sukasukont (2020), which classified the lifestyles of older adults into seven groups: 1) Family-oriented and moral group; 2) Self-confident and socially aware group; 3) Conservative and developmental group; 4) self-caring activist group; 5) Enthusiastic and achievement-oriented group; 6) Self- and environmentally caring group; and 7) Hobbyist and democracy-loving group. Among these groups, the family-oriented and moral group was the most prominent, highlighting the significance of family ties and moral values among older adults.

Similarly, Jingmark et al. (2020) found that the majority of older adults participated in village-level community activities, such as Songkran and Elderly Day celebrations, accounting for 72.4% of respondents. The study also revealed that, over the past year, most older adults attended temples, churches, or mosques more than 12 times annually. In addition, more than half of the participants were members of social welfare groups, including funeral assistance associations, elderly associations, and housewives' groups. These findings are consistent with the research by Sirisuwan et al. (2021), which indicated that older adults and their families place importance on maintaining and transmitting local cultural traditions. They also tend to hold strong



beliefs in reincarnation and the afterlife. Moreover, Taneerat & Tantasantisakul (2022) found that family remains the top priority for older adults in terms of life satisfaction and social welfare needs.

Other determinants, such as personal freedom, self-perceived health status, and participation in social or community service, also showed moderate to high influence on happiness, suggesting that autonomy, physical well-being, and community engagement remain vital to maintaining life satisfaction (World Health Organization, 2021). Spiritual development, as well as social life and friendships, also played meaningful roles, reaffirming the multidimensional nature of happiness that encompasses emotional, social, and spiritual dimensions (Ryff & Singer, 2008). Conversely, financial situation, use of social media, and sexual relationships received lower mean scores, possibly reflecting generational norms and limited economic and technological engagement among older adults in rural areas (Sakdapat et al., 2025).

In general, these results show that the happiness of older people in Trang Province is more affected by internal and relational factors, like moral values, mental health, and family ties, than by material or external factors. This pattern is consistent with Thailand's cultural context, where harmony, self-satisfaction, and spirituality are enduring pillars of well-being in later adulthood.

4. Correlation Between Determinants Affecting and Elderly Happiness

The analysis of the relationship between determinants affecting the happiness of older adults and their overall state of happiness in Trang Province revealed a significant positive correlation at the .01 level ($r = .529$, $p = .000$). When considering each factor individually, the results indicated that: Personal values had the strongest positive correlation with the state of happiness among older adults, statistically significant at the .01 level ($r = .524$, $p = .000$). Personal freedom showed a positive correlation with the state of happiness, also statistically significant at the .01 level ($r = .517$, $p = .000$). Mental capacity demonstrated a positive correlation with the state of happiness, statistically significant at the .01 level ($r = .413$, $p = .000$). However, the analysis further revealed that one factor-sexual relationships-showed a negative correlation with the state of happiness among older adults, though this relationship was not statistically significant ($r = -.081$, $p = .063$).

Table 5 Results for the Correlation Between Affecting Determinants and Elderly Happiness

Determinants	Patterns of Happiness											
	Health		Recreation		Integrity		Cognition		Peacefulness		Overall	
	r	p	r	p	r	p	r	p	r	p	r	p
Self-perceived health status	.247**	.000	.124**	.005	.257**	.000	.174**	.000	.205**	.000	.258**	.000
Mental capacity	.251**	.000	.298**	.000	.383**	.000	.366**	.000	.388**	.000	.413**	.000
Family relationships	.384**	.000	.312**	.000	.306**	.000	.312	.000	.247**	.000	.387**	.000

**Table 5** Results for the Correlation Between Affecting Determinants and Elderly Happiness (Continued)

Determinants	Patterns of Happiness											
	Health		Recreation		Integrity		Cognition		Peacefulness		Overall	
	r	p	r	p	r	p	r	p	r	p	r	p
Spiritual development	.284**	.000	.268**	.000	.173**	.000	.142**	.001	.139**	.001	.250**	.000
Financial situation	.423**	.000	.344**	.000	.283**	.000	.252**	.000	.173**	.000	.368**	.000
Participation in social or community service	.273**	.000	.333**	.000	.384**	.000	.248**	.000	.253**	.000	.359**	.000
Social life and friendships	.348**	.000	.303**	.000	.325**	.000	.321**	.000	.283**	.000	.391**	.000
Personal freedom	.481**	.000	.401**	.000	.413**	.000	.431**	.000	.362**	.000	.517**	.000
Personal values	.306**	.000	.425**	.000	.493**	.000	.412**	.000	.501**	.000	.524**	.000
Use of social media	.219**	.000	.166**	.000	.100*	.022	.105*	.016	.052	.235	.160**	.000
Sexual relationships	.069	.113	-.025	.572	-	.001	-.097*	.027	-	.000	-.081	.063
Overall	.504**	.000	.441**	.000	.432**	.000	.397**	.000	.356**	.000	.529**	.000

Note: *** Statistically significant at the .05 and .01 levels, respectively.

Discussion

The analysis of the relationship between determinants influencing the happiness of older adults and their overall level of happiness in Trang Province revealed a statistically significant moderate positive correlation ($r = .529$, $p < .01$). This finding indicates that as personal, social, and psychological determinants improve, levels of happiness among older adults tend to increase correspondingly. The result is consistent with the conceptual framework proposed by Diener et al. (2018), which posits that subjective well-being in later life is multidimensional, arising not only from material and physical conditions but also from personal values, autonomy, and social relationships.

Among the examined determinants, personal values showed the strongest positive correlation with happiness ($r = .524$, $p < .01$). This highlights the importance of internal value systems, such as optimism, forgiveness, empathy, and self-care, as critical contributors to well-being in old age. Similarly, Mathews (2024), in his study on "Happy Aging" in Japan, found that older adults who embrace self-reflection, acceptance, and life satisfaction tend to experience greater happiness, even amid social and physical decline. Ryff & Singer (2008) further emphasized that maintaining



internalized life philosophies and a sense of purpose is essential for sustaining psychological well-being, particularly in later life when external roles and responsibilities diminish.

The determinant of personal freedom also demonstrated a strong positive relationship with happiness ($r = .517$, $p < .01$). This finding emphasizes the significance of autonomy and the capacity for independent decision-making in improving life satisfaction among older adults. According to Deci and Ryan's (2000) Self-Determination Theory, autonomy is a fundamental psychological need that promotes motivation, self-worth, and emotional fulfillment. In the context of aging, maintaining independence in decision-making, whether related to daily living, health care, or social participation, enables older adults to feel more valued and competent, thereby contributing to their happiness (Jivraj et al., 2020).

In addition, mental capacity was found to be positively correlated with happiness ($r = .413$, $p < .01$), indicating that mental strength, cognitive functioning, and emotional resilience play vital roles in sustaining happiness among older adults. These findings are consistent with Segura et al. (2023), who examined determinants of happiness among older adults in Colombia and concluded that psychological well-being, family support, and financial stability are key factors in maintaining happiness in later life. Similarly, Huppert (2009) noted that mental resilience enables older adults to adapt effectively to change and loss, thereby maintaining a sense of purpose and well-being despite external challenges.

One determinant, sexual relationship showed a negative but non-significant correlation with happiness ($r = -.081$, $p = .063$). This result may be interpreted within the Thai cultural context, where discussions of sexuality among older adults are often limited or considered sensitive. According to Liang et al. (2025), in many Asian societies, sexual expression in later life is frequently underacknowledged, with happiness instead being derived from family harmony, spiritual fulfillment, and health stability. Therefore, while sexual relationships may contribute to happiness in other cultural contexts, their relative insignificance in this study likely reflects cultural norms that emphasize non-material and spiritual dimensions of happiness.

Overall, these findings affirm that happiness among older adults in Trang Province results from a complex interaction between internal and external determinants. The strongest predictors, personal values, autonomy, and mental capacity, reflect the growing importance of psychological and social empowerment among aging populations. Consequently, promoting programs that enhance self-esteem, decision-making capacity, and emotional resilience may serve as key strategies for improving happiness and overall quality of life among older adults in Thailand's aging society.



Table 6 Result for Analysis of the Determinants Affecting the Happiness of Elderly in Trang Province Across All Dimensions

Determinants	B	SE	Beta	t	p
Constant	1.870	.133	-	14.110**	.000
Mental capacity	.080	.034	.103	2.347*	.019
Family relationships	.072	.027	.114	2.714**	.007
Financial situation	.066	.020	.128	3.285**	.001
Personal freedom	.167	.025	.285	6.806**	.000
Personal values	.223	.034	.272	6.599**	.000
Sexual relationships	-.055	.016	-.119	-3.467**	.001

R = 0.658, R² = 0.433, F = 65.816, Sig of F = 0.000

Note: *** Statistically significant at the .05 and .01 levels, respectively.

From Table 6, the analysis of determinants affecting the happiness of older adults across all dimensions in Trang Province indicated that mental capacity, family relationships, financial situation, personal freedom, personal values, and sexual relationships were statistically significant at the .05 and .01 levels. The relationship between these determinants and overall happiness can be represented by the following multiple regression equation:

$$\begin{aligned} \text{Elderly Happiness (All Dimensions)} = & 1.870 + 0.080(\text{Mental Capacity}) + 0.072 \\ & (\text{Family relationships}) + 0.066(\text{Financial Situation}) + 0.167(\text{Personal Freedom}) \\ & + 0.223(\text{Personal Values}) - 0.055(\text{Sexual Relationships}) \end{aligned}$$

The results suggest that personal values exert the strongest positive influence on the overall happiness of older adults, followed by personal freedom and mental capacity, whereas sexual relationships demonstrate a negative but statistically insignificant effect.

Originality and Body of Knowledge

The results of this study indicate that promoting happiness among older adults requires active engagement by the elderly themselves, particularly through the cultivation of personal values that nurture well-being. Central to this process is the application of religious teachings and principles in everyday life, which enables older adults to experience happiness across multiple interrelated dimensions grounded in Buddhist concepts. These dimensions include *kāyika-sukha* (Physical Well-being), *somanassa* (Mental Joy), *sīla-sukha* (Moral Integrity), *paññā-sukha* (Wisdom and Cognitive Fulfillment), and *upekkhā-sukha* (Inner Peace and Equanimity). Together, these dimensions reflect a holistic understanding of happiness that integrates physical, psychological, moral, cognitive, and spiritual aspects of well-being. Furthermore, the promotion of such holistic happiness among older adults necessitates integrated collaboration across multiple sectors, including health, social welfare, community, and religious institutions, to create supportive environments that sustain well-being in later life.



To ensure that older adults can attain happiness in accordance with these indicators, it is essential to develop interconnected strategies at all levels, including 1) Individual-level strategies (Lifestyle Development), 2) Organizational-level strategies (Management and Program Implementation), and 3) Societal-level strategies (Policy Formulation). Each strategic level should emphasize participation from all sectors and focus on enhancing the well-being and quality of life of older adults. Moreover, these multi-level strategies should be integrated throughout every stage of the human life course, ensuring that happiness and well-being are sustained as individuals age (Figure 2).

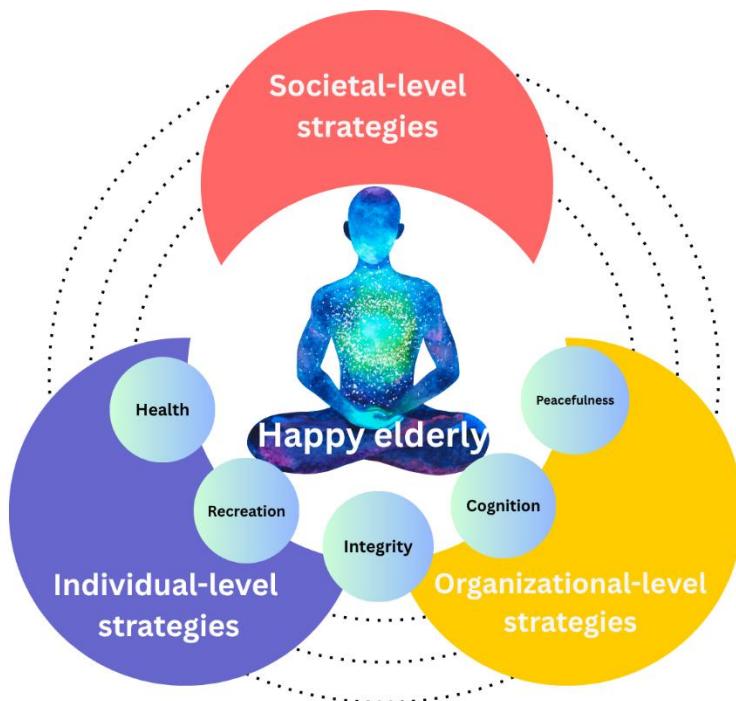


Figure 2 Strategies for Promoting the Happiness and Well-being of Elderly

Conclusions and Recommendations

Thailand's transition into an aged society, most evident in Trang Province, which has the highest proportion of older adults along the Andaman coast, requires focused measures to counter post-pandemic isolation and declining social interaction. This study found that happiness among Trang's elderly is generally high, largely driven by peacefulness and personal values consistent with Applied Buddhist principles. In the short term, local governments, health agencies, and community organizations should expand community-based social programs, provide mindfulness and value-based activities through temples and community centers, and improve access to health and recreational services. Progress can be assessed through participation rates, reduced loneliness, and improved emotional well-being within one year. Long-term strategies include incorporating Buddhist-informed value development into provincial aging policies, investing in infrastructure that supports active aging, and strengthening partnerships across health units, temples, and local



administrative bodies. Expected outcomes include higher life-satisfaction levels, broader program accessibility, and increased independent living over three to five years.

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