

The Model Development for Promoting Personnel's Quality of Life Under Institute of Physical Education

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Abstract

The objectives of the model development for promoting personnel's quality of life under Institute of Physical Education were 1) to study the management conditions of personnel's quality of life under Institute of Physical Education, 2) to develop a model for promoting personnel's quality of life under Institute of Physical Education and to analyze by each aspect, and 3) to compare the personnel's quality of life under Institute of Physical Education among 8 campuses. Data were collected from personnel among 8 campuses. Krescie and Morgan's formula was used to obtain the sample size of personnel under Institute of Physical Education, for a total of 226 respondents. Instruments used were a questionnaire and focus group discussion. The quantitative data were analyzed by frequency, percentage, means, standard deviation, and t-test. The qualitative data from the focus group discussion were analyzed by using content analysis. The results were as follows: 1. Results of studying the management conditions of personnel's quality of life under Institute of Physical Education, it was found that the existing practice was overall at a high level ($\bar{X}=3.74$) and the necessary conditions for promoting personnel's quality of life under Institute of Physical Education were overall at a high level ($\bar{X}=4.06$) and higher than the existing practice.

2. Results of a model development for promoting personnel's quality of life under Institute of Physical Education from the focus group discussion consisted of eight components as follows: physical aspect, mental aspect, emotional aspect, social aspect, intellectual aspect, environmental aspect, sufficiency economy aspect, and self-perception of health aspect, and all aspects were at the development level. The analysis results of comparison in pairs between the existing practice and the necessary conditions of activities in terms of physical aspect, mental aspect, emotional aspect, social aspect, environmental aspect, and self-perception of health aspect were different at statistically significance at .05 level but in terms of intellectual aspect and sufficiency economy aspect were not different. 3. Results of comparison in pairs between the existing practice and the necessary conditions for promoting personnel's quality of life under Institute of Physical Education by 8 campuses in each aspect, there were statistically significant differences at the .05 level.

Keywords: Model Development; Promote, Quality of Life; Personnel under Institute of Physical Education

Introduction

During this century, health promotion is a process that allows people to increase their abilities to control and improve their health. In order to reach a complete physical, mental and social states, personnel or groups of people must be able to identify what they want to achieve the requirement. As well as being able to adjust the environment or be able to adapt to the changing environment. Health is therefore not only a goal of ways of life, but it is also a benefit source of everyday life. Health is a positive concept that focuses on social benefits and personal benefit resources. Therefore, health promotion is not just the responsibility of the health care sector, but also focusing on lifestyle that affects health, which will ultimately lead to well-being. Therefore, the target of the Twelfth National Economic and Social Development Plan (2017-2021) (Office of the National Economic and Social Development Board Office of the Prime Minister Bangkok, Thailand, 2017) was Thai citizens to be high quality, disciplined, alert to learning, active in lifetime self-learning, knowledgeable, skillful, having good attitudes and values, physically, mentally, and spiritually healthy, having public mindedness, and be good Thai, ASEAN, and global citizens. Moreover, Health Promotion Foundation Act 2001 (Health Information System Development Office – HISD, 2005) stated in chapter 7 concerning protection of Thailand's health system that health promotion meant any act which was aimed at the fostering of a person's physical, mental and social condition by means of supporting personal behaviors, social condition and environments conducive to physical strength, a firm mental condition, a long life and a good quality of life. It was a process of empowering personal and community's capacity to have a livelihood leading to good health, under supportive environments. And it was a process that enables the people to control the determinants of health resulting in better health, i.e. control their own behaviors so that they were prepared to modify the environments conducive to good health. Moreover, World Health Organization (WHO) (2016) defined health promotion to enable people to increase control over their own health. It covered a wide range of social and environmental interventions that were designed to benefit and protect individual people's health and quality of life by addressing and preventing the root causes of ill health, not just focusing on treatment and cure.

Additionally, Statista Research Department (2018) referred a survey conducted by Cint, this statistic showed the results of on the number of hours spent on exercise / participating in sport activities in Thailand between 2016 and 2018. In 2018, 16.18 percent of respondents of

Thailand stated they exercise less than one hour per week. In accordance with a mission of Institute of Physical Education was to provide many faculties of education in physical education, sports, health, recreation, sports science, and health sciences. It was caused the institute's personnel to be alert concerning educational management and the development of teaching and learning to be more effective in accordance with the progress of academic and new technology by providing academic services to the community including many other additional works.

As a result, teachers and personnel had to adjust a lot affecting they did not have enough time for practical behaviors health promotion, especially working out in various forms, playing sports, even though the Institute of Physical Education had a fitness room with exercise equipment as well as there were several sports fields. According to the survey results concerning exercise behaviors of 64 personnel under Institutes of Physical Education, it was found that only 16 personnel exercised regularly almost every day, accounting for 10.24 percent, regarding of 1450 students, only 305 students exercised and played sports regularly, accounting for 21.03 percent. In addition, it was found that they still had a little existing practice, personnel had inappropriate physical health such as gout disease, blood pressure, diabetes, dietary habits, unproductive drinking alcohol, and stress from routine work, so it was caused illness problems. Moreover, the study of the medical treatment report found that personnel had to spend a lot of money in medical treatment including working location and environment were not supporting to work. Even though there were health measures, but the lacking of driving seriously.

Similarly, among 8 campuses of Institute of Physical Education had already had a model of health promotion and health policy but there were still lacking of activities that covered the development of physical aspect, mental aspect, emotional aspect, social aspect, and intellectual aspect to use in the creation, as well as an environmental management that was suitable for services both internal and external service recipients in order to improve the personnel's quality of life and would be a master model of development the quality of life for society in the future. As this research mentioned above, the research team under Institute of Physical Education (Thailand National Sports University) realized on the importance of the development for promoting personnel's quality of life under Institute of Physical Education to improve health into action.

Research objectives

1. To study the management conditions of personnel's quality of life under Institute of Physical Education.
2. To develop a model for promoting personnel's quality of life under Institute of Physical Education and to analyze by each aspect.
3. To compare the personnel's quality of life under Institute of Physical Education among 8 campuses.

Research Methodology

Scope of Population and Samples

The population in this study were personnel under Institute of Physical Education, The samples consisted of 2 campuses in each region, they were obtained by simple random sampling method using drawing lots, for a total of 8 campuses as follows: Chiang Mai, Lampang, Suphanburi, Chon Buri, Krabi, Trang, Udon Thani and Maha Sarakham Campus in 3 faculties, which were Faculty of Sports and Health Sciences, Faculty of Liberal Arts, and the Faculty of Education, Krejcie and Morgan's formula (Krejcie, R. V. & Morgan, D. W., 1970) was used to obtain the sample size of personnel under Institute of Physical Education, for a total of 226 respondents.

Scope of Contents

The contents consisted of 8 aspects concerning the existing practice and the necessary conditions for promoting personnel's quality of life as follows: 1) physical aspect, 2) mental aspect, 3) emotional aspect, 4) social aspect, 5) intellectual aspect, 6) environmental aspect, 7) sufficiency economy aspect, and 8) self-perception of health aspect.

Scope of Area

Data were collected from Chiang Mai, Lampang Campus, Suphanburi Campus, Chon Buri Campus, Krabi, Trang Campus, Udon Thani Campus, and Maha Sarakham Campus.

Research Instruments

The instruments used were 1) a questionnaire concerning the existing practice and the necessary conditions for promoting personnel's quality of life in 8 aspects as follows: 1.1) physical aspect, 1.2) mental aspect, 1.3) emotional aspect, 1.4) social aspect, 1.5) intellectual aspect, 1.6) environmental aspect, 1.7) sufficiency economy aspect, and 1.8) self-perception of health

aspect, the Index of Item-Objective Congruence (IOC) of the questionnaire was used to check the content validity by three experts; and 2) focus group discussion.

Statistical Analysis

The quantitative data collecting from a questionnaire were analyzed by frequency, percentage, means, and standard deviation. The paired t-test was used for analyzing data in the form of matched pairs and among campuses. The qualitative data from the focus group discussion were analyzed by using content analysis. The data were summarized in tables and description.

Results

The results of the study indicated as follows:

1. Results of studying the management conditions of personnel's quality of life under Institute of Physical Education were divided into 2 parts as follows:

Part 1: Results of studying the management conditions of personnel's quality of life under Institute of Physical Education concerning the existing practice and the necessary conditions from 226 respondents of 8 campuses in 3 faculties, which were Faculty of Sports and Health Sciences, Faculty of Liberal Arts, and the Faculty of Education as shown in Table 1:

Table 1: Mean and standard deviation concerning the existing practice and the necessary conditions of activities by 226 respondents of 8 campuses under Institute of Physical Education in each aspect.

Management conditions	n	\bar{X}	S.D.	Interpret
1. Physical aspect.				
- The existing practice of activities.	226	3.33	.86	Moderate
- The necessary conditions of activities.	226	3.84	.71	High
2. Mental aspect.				
- The existing practice of activities.	226	3.79	.55	High
- The necessary conditions of activities.	226	4.12	.64	High
3. Emotional aspect.				
- The existing practice of activities.	226	3.77	.54	High
- The necessary conditions of activities.	226	4.08	.54	High
4. Social aspect.				
- The existing practice of activities.	226	3.98	.60	High
- The necessary conditions of activities.	226	4.31	.53	High

Management conditions	n	\bar{X}	S.D.	Interpret
5. Intellectual aspect.				
- The existing practice of activities.	226	3.87	.79	High
- The necessary conditions of activities.	226	3.89	.48	High
6. Environmental aspect.				
- The existing practice of activities.	226	3.72	.68	High
- The necessary conditions of activities.	226	4.16	.62	High
7. Sufficiency economy aspect.				
- The existing practice of activities.	226	3.82	.67	High
- The necessary conditions of activities.	226	3.75	.77	High
8. Self-perception of health aspect.				
- The existing practice of activities.	226	3.73	.70	High
- The necessary conditions of activities.	226	4.03	.62	High

From table 1, results of studying the management conditions of personnel's quality of life under Institute of Physical Education in terms of the existing practice in 7 aspects were at a high level and one aspect was at a moderate level, and the necessary conditions for promoting personnel's quality of life under Institute of Physical Education was higher than the existing practice.

Part 2: Results of personnel's quality of life under Institute of Physical Education concerning the existing practice and the necessary conditions from 226 respondents of 8 campuses in 3 faculties, which were Faculty of Sports and Health Sciences, Faculty of Liberal Arts, and the Faculty of Education as shown in Table 2:

Table 2: Mean and standard deviation of personnel's quality of life under Institute of Physical Education concerning the existing practice and the necessary conditions by 226 respondents of 8 campuses under Institute of Physical Education.

Personnel's quality of life	n	\bar{X}	S.D.	Interpret
1. The existing practice of personnel's quality of life.	226	3.74	.51	High
2. The necessary conditions of personnel's quality of life.	226	4.06	.45	High

From table 2, results of studying the management conditions of personnel's quality of life under Institute of Physical Education in terms of the existing practice was at a high level ($\bar{X}=3.74$), and the necessary conditions for promoting personnel's quality of life under Institute of Physical Education were overall at a high level ($\bar{X}=4.06$).

2. Results of a model development for promoting personnel's quality of life under Institute of Physical Education from the focus group discussion consisted of eight components, as follows: physical aspect, mental aspect, emotional aspect, social aspect, intellectual aspect, environmental aspect, sufficiency economy aspect, and self-perception of health aspect and all aspect were at the development level. The analysis results of comparison in pairs as shown in table 3:

Table 3: The analysis results of comparison in pairs between the existing practice and the necessary conditions of activities of personnel under Institute of Physical Education by 8 campuses in each aspect.

	Comparison in pairs	t	df	Sig.
Physical aspect.	The existing practice and the necessary conditions of activities.	-9.64	162	.00*
Mental aspect.	The existing practice and the necessary conditions of activities.	-8.04	186	.00*
Emotional aspect.	The existing practice and the necessary conditions of activities.	-8.55	199	.00*
Social aspect.	The existing practice and the necessary conditions of activities.	-8.86	185	.00*
Intellectual aspect.	The existing practice and the necessary conditions of activities.	-.38	190	.70
Environmental aspect.	The existing practice and the necessary conditions of activities.	-8.46	183	.00*
Sufficiency economy aspect	The existing practice and the necessary conditions of activities.	1.00	183	.31
Self-perception of health aspect	The existing practice and the necessary conditions of activities.	-6.32	180	.00*

From table 3, the analysis results of comparison in pairs between the existing practice and the necessary conditions of activities in terms of physical aspect, mental aspect, emotional aspect, social aspect, environmental aspect, and self-perception of health aspect were different at statistically significance at .05 level but in terms of intellectual aspect and sufficiency economy aspect were not different.

3. Results of comparison in pairs between the existing practice and the necessary conditions for promoting personnel's quality of life under Institute of Physical Education among 8 campuses as shown in table 4:

Table 4: Results of comparison in pairs between the existing practice and the necessary conditions for promoting personnel's quality of life under Institute of Physical Education by 8 campuses in each aspect.

Personnel's quality of life	t	df	Sig
Between the existing practice and the necessary conditions for promoting personnel's quality of life	-6.70	95	.00*

From table 4, results of comparison in pairs between the existing practice and the necessary conditions for promoting personnel's quality of life under Institute of Physical Education by 8 campuses in each aspect were different at statistically significance at .05 level.

Conclusion

Even though the management conditions of personnel's quality of life under Institute of Physical Education of 8 campuses in the different context in terms of the existing practice was at a high level but the necessary conditions were overall at a high level and was higher than practical conditions. It was shown that all personnel required to be promoted quality of life. The policy must be monitored into more action to promote personnel's quality of life in physical aspect, mental aspect, emotional aspect, intellectual aspect, social aspect, environmental aspect, economic aspect, and self-perception of health. The administrators must support morale such as annual health check-up services, a health network with hospitals, and an additional budget for health care for the institutes' personnel including providing opportunities for studying trips both domestic and abroad which was lead to the development of a health promotion model for the personnel under Thailand National Sport University.

Discussion

According to the model development for promoting personnel's quality of life under Institute of Physical Education, the researcher had selected the important issues for discussion as follows:

1. Concerning the management conditions of personnel's quality of life under Institute of Physical Education, the existing practice was at a high level ($\bar{X}=3.74$) and the necessary conditions for promoting personnel's quality of life under Institute of Physical Education were overall at a high level ($\bar{X}=4.06$) and higher than the existing practice. This might be because personnel under the Institute of Physical Education had the self-spirituality of physical education, the term of physical education was related to physical, emotional, mental, and social including using activities as interaction among the institutes' personnel. Most of them did physical exercise, sports playing, sports coaching, sports referee regularly, resulting they were in good physical health. But they still needed to be promoted consistently to reduce blood pressure, diabetes, obesity, heart attack problems, and self-perception of health, as Jariyawat Kompayak (2006) stated that that factors related to health promotion behaviors included knowledge of health promotion and health perception and Sudyod Chaomsahai (2014) confirmed that the Institute had a health promotion policy both providing knowledge, organizing health promotion activities, and having a health network for institute's personnel. Therefore, the institute's personnel must be aware and realized the importance of health and to be models for promoting quality of life.

2. Concerning the model development for promoting personnel's quality of life under Institute of Physical Education consisted of eight components as follows: physical aspect, mental aspect, emotional aspect, social aspect, intellectual aspect, environmental aspect, sufficiency economy aspect, and self-perception of health aspect and all aspect were at the development level. In accordance with Health Promotion Foundation Act (B.E. 2544) (Royal Thai Government Gazette, 2001) defined in section 3 that health promotion as any acts which aimed at the fostering of a person's physical, mental, and social condition by means of supporting personal behaviors, social condition, and environments conducive to physical strength, a firm mental condition, a long life and a good quality of life.

3. Concerning the analysis results of comparison in pairs between the existing practice and the necessary conditions of activities in terms of physical aspect, mental aspect,

emotional aspect, social aspect, environmental aspect, and self-perception of health aspect were different at statistically significance at .05 level but in terms of intellectual aspect and sufficiency economy aspect were not different, the researcher discussed eight components of the model as follows:

3.1 Concerning physical aspect, the existing practice of personnel activities was at a moderate level ($\bar{X}=3.33$). This might be because personnel under Institute of Physical Education had a lot of workload, rarely did exercise, did not often use Sports Science Centers for working out, and had little knowledge of nutrition. As we can be seen from the other 6 campuses, courses concerning health education, physical education, and health promotion were not provided yet, except Chiang Mai campus and Chonburi campus, which might be due to the lack of personnel in charge of health education and health promotion in order to provide knowledge involving with nutrition, nutrient, drinking alcoholic beverages which were harmful to health, etc. Therefore, causing the personnel of the Institute of Physical Education to have physical practice at a moderate level consistent with the finding of Komthon Phromsophi (2016) stated that the health promotion in adolescence, a career age, building a family, the physical and mental maturity, often neglected their own health.

3.2 Concerning mental aspect and emotional aspect, the existing practice of personnel activities were both at a high level ($\bar{X}=3.79$) and ($\bar{X}=3.77$). This might be because personnel under Institute of Physical Education had good happy mental health, worked with confidence, without anxiety, having self-esteem, to be able to live happily and cheerfully both in the family and in the campus. Their ways for relaxing in free time activities might sing, play sports, play computer games, line, and internet in accordance with current digital age. As the results, engaging in communication technology activities affecting to mental health, and emotional well-being. However, the institute's policies and health networks had still promoted personnel's quality of life under Institute of Physical Education to be better.

3.3 Concerning social aspect, the existing practice of personnel activities was at a high level ($\bar{X}=3.98$). This might be because personnel under Institute of Physical Education had continuously interacted with the community, such as allowed the people in community to use sports stadium, sports referee, organizing sports competitions in the province, providing fitness test in community, work out activity, organizing aerobic exercise activity regularly available within and outside campus, also serviced to the community. Which corresponds to Pender, J. N. (2016) stated that Interpersonal influences were cognition-concerning behaviors,

beliefs, or attitudes of the others. Interpersonal influences included: norms (expectations of significant others), social support (instrumental and emotional encouragement) and modeling (vicarious learning through observing others engaged in a particular behavior). Primary sources of interpersonal influences were families, peers, and healthcare providers.

3.4 Concerning intellectual aspect, the existing practice of personnel activities was at a high level ($\bar{X}=3.80$). This might be because personnel under Institute of Physical Education were always learning new technologies, being aware of correct problems, being mindful, creative in their work, learning, and promoting, and brain-based development by using technology media, modern communication tools, to be suitable with one's own intelligence. Accordingly, Carmen, M. and Navas, O. (2017) found that some of the major benefits and savings achieved through the use of technologies in the area of health, like increased efficiency and quality of patient care, reduced administrative and operational costs, improved primary health care and optimized access to health care.

3.5 Concerning environmental aspect, the existing practice of personnel activities was at a high level ($\bar{X}=3.72$). This might be because personnel under Institute of Physical Education the context of each campus might be similar, with sports stadiums, gymnasiums, swimming pools, classrooms, media, an appropriate sports science center and exercise equipment but the area and location might be different. Some campuses were in the city, some campuses were far from the city center. The environment might therefore be different depending on the context and the administrators' policy to care for the environmental aspect in order to give the personnel morale at work. In accordance with National Health Act, B.E. 2550 (2007) (Royal Thai Government Gazette, 2007) chapter I: right and duties in respect of health, in section 5: A person shall enjoy the right to live in the healthy environment and environmental condition.

3.6 Concerning sufficiency economy aspect, the existing practice of personnel activities was at a high level ($\bar{X}=3.82$). This might be because personnel under Institute of Physical Education with different contexts, some campuses were located in the cities as tourist cities such as Chiang Mai, Krabi, Trang, Chonburi etc. Therefore, some parts of the institute's personnel had additional income, excluded from receiving a salary and paying some debt. They were satisfied with the status of government officials which were security for life, to be able to saved money, and had money to solve financial problems. Some campus personnel had additional income from sports referee. Additionally, Watabe, A. et al. (2016) found that

without this, countries would struggle to ensure healthy lives and well-being of their populations, and would likely face serious escalation of healthcare costs.

3.7 Concerning self-perception of health aspect, the existing practice of personnel activities was at a high level ($\bar{X}=3.73$). This might be because some campuses had health Health-check-up-package for personnel annually, such as Lampang campus, some campuses had health promotion policies, a health network, health protection, and health care. Some institutes' personnel had congenital disease, blood pressure, high cholesterol, might be due to lack of exercise, unhygienic food consumption, chubby, physical education teachers lacked health care knowledge, nutrition, dietary food to lose weight, and no health services for personnel. Similarly, WHO (as cited in Kaleta, D, et, al. 2009, p. 112) definition of health and diseases endorses the usefulness and necessity of performing subjective health assessment which took into consideration not only the state of somatic but also mental health. Furthermore, self-perception of one's own health reflected the capability to function in a definite social and organizational situation and was regarded as a prognostic indicator of prevalence of various chronic diseases, affecting their prognosis. Individuals with low values of self-perceived health status might more frequently use medical services and had higher absence from work as compared to those with opposite attitude towards their health.

4. Results of comparison in pairs between the existing practice and the necessary conditions for promoting personnel's quality of life under Institute of Physical Education by 8 campuses in each aspect were the different level of statistical significance at .05. This might be because personnel's quality of life under Institute of Physical Education of 8 campuses were different in a variety of aspects: different management, different policies, different budget, different context, different area and location.

Reference

Carmen, M. and Navas, O. (2017). The use of New Technologies as a Tool for the Promotion of Health Education. *Procedia - Social and Behavioral Sciences*, Volume 237, 21 February 2017, Pages 23-29.

Health Information System Development Office – HISo. (2005). *Thailand Health Profile 2005-2007: Chapter 7 Protection of Thailand's Health System*. Retrieved March 19, 2019, From
https://www.hiso.or.th/hiso/picture/reportHealth/THF2007/THP2005_8eng.pdf.

Jariyawat Kompayak. (2006). *The Factors relating to the health promotion behavior of families in the community of Mahanaak Canal Sub district by Pomprapsattruei area*. Bangkok.

Kaleta, D, et, al. (2009). *Factors Influencing Self-perception of Health Status*. Retrieved March 12, 2019, From
https://www.researchgate.net/publication/40728100_Factors_Influencing_Self-perception_of_Health_Status.

Kamtorn Promsophi. (2007). *Health behavior*. Retrieved March 12, 2019, From
[www.http://snr.ac.th/elearning/kamtorn/profile.htm](http://snr.ac.th/elearning/kamtorn/profile.htm).

Krejcie, R. V. & Morgan, D. W. (1970). Determining Sample Size for Research Activities. *Educational and Psychological Measurement*, 30(3), pp. 607-610.

Office of the National Economic and Social Development Board, Office of the Prime Minister Bangkok, Thailand. (2017). *Twelfth National Economic and Social Development Plan (2017-2021)*. Retrieved March 12, 2019, From
<http://plan.bru.ac.th/แผนพัฒนาเศรษฐกิจและสังคมแห่งชาติ-ฉบับที่-12>.

Pender, N.J. (2016). *Pender's Health Promotion Model*. Retrieved March 12, 2019, From
<https://www.nursing-theory.org/theories-and-models/pender-health-promotion-model.php>.

Royal Thai Government Gazette. (2001). *Health Promotion Foundation Act, B.E. 2544 (2001)*. Retrieved March 12, 2019, From
<http://web.krisdika.go.th/data/law/law2/%A1109/%A1109-20-9999-update.htm>.

Royal Thai Government Gazette. (2007). *National Health Act, B.E. 2550 (2007)*. Retrieved March 12, 2019, From
<http://web.krisdika.go.th/data/law/law2/%CA71/%CA71-20-9999-update.pdf>.

Statista Research Department. (2018). *Thailand: How many hours a week do you exercise/participating in sport activities?*. Retrieved March 12, 2019, From
<https://www.statista.com/statistics/562572/thailand-number-of-hours-spent-on-exercise-participating-in-sport-activities>.

Sudyod Chomsahai. (2003). *The model of health promotion for the personnel of the institute of physical education*. Institute of Physical Education, Chiang Mai campus

Watabe, A. et al. (2016). *Analysis of health promotion and prevention financing mechanisms in Thailand*. [Retrieved March 12, 2019, From <http://ihpptaigov.net/DB/publication/attachinter/294/Full-text.pdf>

World Health Organization (WHO). (2016). *What is health promotion*. Retrieved March 12, 2019, From <https://www.who.int/features/qa/health-promotion/en>