



# Quality of life development of the elderly through the management of nursing homes for supporting the aging society

Pattama Pasitpakakul<sup>a,\*</sup>, Somrak Chaisingkananont<sup>b,†</sup>

<sup>a</sup> Faculty of Liberal Arts, Rajamangala University of Technology Thanyaburi, Pathumthani 12110, Thailand

<sup>b</sup> Research Institute for Languages and Cultures of Asia, Mahidol University, Nakhon Pathom 73170, Thailand

## Article Info

### Article history:

Received 26 September 2024

Revised 06 January 2025

Accepted 11 March 2025

Available online 01 September 2026

### Keywords:

elderly care  
health interventions  
nursing homes  
quality of Life  
social support

## Abstract

This qualitative study examines the physical and social conditions within a nursing home in Bangkok—Nursing Home A—to determine their impact on the quality of life of the elderly. Utilizing structured interviews and observational techniques with 20 selected participants, the study scrutinizes the administrative and operational frameworks of these facilities, aiming to pinpoint exemplary practices and pinpoint potential enhancements for elderly care amid Thailand's demographic shifts toward an older population. The research indicates that well-managed facilities, tailored care approaches, and thorough training of staff substantially boost the satisfaction and general wellness of residents. Identified challenges include the necessity for improved physical accessibility and the constraints on resident autonomy due to stringent health safety measures. The research underscores the critical role of consistent involvement in physical, cognitive, and social activities in mitigating loneliness and mental decline. It advocates for infrastructural enhancements, broader wellness initiatives, augmented staff training, and the broader application of technology to elevate care quality and administrative efficacy. These findings enrich the ongoing dialogue on elderly care, providing a model for other entities to emulate and refine to enhance elder care quality.

© 2026 Kasetsart University.

## Introduction

Thailand has been an aging society since 2005 when the elderly population first exceeded 10 percent, meaning one in ten Thais was elderly. This trend has intensified,

particularly from 2006 to 2010, as noted by Chayowan (2008). Projections by the National Economic and Social Development Board indicate that in 2010, 12.9 percent of Thailand's 66 million people were elderly. By 2030, it's estimated that 25.8 percent of the population will be

\* Corresponding author.

E-mail address: [pattama@rmutt.ac.th](mailto:pattama@rmutt.ac.th) (Pasitpakakul, P.).

† Co-first authors.

<https://doi.org/10.34044/j.kjss.2026.47.3.04>

2452–3151/© 2026 Kasetsart University.

This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).

elderly, qualifying Thailand as a fully aged society. By 2038, the proportion of those over 65 will rise to 24.1 percent, placing Thailand into the category of a super-aged society.

The National Plan on the Elderly, 2nd Edition (2002–2021), is based on a philosophy of fostering an environment where the elderly are self-reliant, supported by family, community, and state social welfare. The plan aims to ensure the elderly enjoy good physical and mental health, financial security, and are integrated and valued within their communities. Research by the Health Promotion Department of the Ministry of Public Health identifies that the elderly face issues in health, economics, social integration, psychological well-being, familial support, and shifting values. Key challenges include social, economic, and physical aspects of their living conditions. Changing family dynamics and smaller household sizes mean fewer families can care for their elderly, leading to an increase in elderly living alone—from 3.6% in 1994 to 10.8 percent in 2017 (National Statistical Office, 2017).

Providing appropriate residential facilities for the elderly, funded by both state and private investments, is crucial. The economic standing of the elderly, often bolstered by savings, pensions, dividends, and other investment returns, underscores the need for well-designed elderly residences. As of June 30, 2017, there were 800 registered elderly care businesses, accounting for 78.88 percent of the market. These facilities vary, offering models where elderly do not own their homes but have life residency, and others tailored to their needs with emergency medical features and comprehensive on-site services. These developments aim to transform the traditional notion of elderly homes into one of investment in a high-quality lifestyle.

The challenges and importance of these issues have led researchers to examine the management of elderly homes, focusing on the physical and social environments, amenities, and activities that contribute to the health and wellness of the elderly. This holistic approach to well-being ensures that the elderly can live with dignity, independence, and remain integral and supportive members of their communities. As Thailand edges closer to becoming a fully aged society, enhancing the quality of life for the elderly through effective policy implementation and management of elderly care facilities is paramount for fostering their societal value and well-being.

---

## Literature Review

### *Physical and Social Environment*

The design and atmosphere of nursing homes are crucial in shaping the quality of life for elderly residents, significantly influencing their mental and physical well-being. Thoughtful facility layouts, combined with supportive social environments, can enhance both psychological comfort and physical health. Natural light, for example, regulates sleep patterns, improves mood, and boosts cognitive function (Figueiro et al., 2014). The choice between private and shared rooms also affects mental health—private rooms offer privacy and personal space, while shared rooms encourage social interaction and help prevent isolation (Ko et al., 2018). Accessibility features like wide corridors and handrails promote mobility and independence, reducing fall risks and fostering autonomy (Gitlin et al., 2006). Equally important is the social environment. Positive interactions between residents and staff can reduce stress, combat loneliness, and create a supportive community. Staff training in empathy and communication is vital for fostering respectful and positive relationships, which improve care quality and resident satisfaction (Zimmerman et al., 2005). Social activities, such as group exercises and social events, further promote mental and physical well-being by encouraging engagement and building social bonds (Cohen-Mansfield et al., 2003). The integration of physical design and social interaction creates an environment that supports the diverse needs of elderly residents. By balancing privacy with socialization, and combining accessible design with effective staff management, nursing homes can enhance the overall well-being of residents. As the demographics and needs of elderly populations evolve, continued research and adaptation in these areas are essential to creating supportive, life-enhancing nursing home environments.

### *Management Systems*

Efficient management practices are essential for improving the quality of life and care in nursing homes. Key elements include person-centered care, comprehensive staff training, and responsive healthcare services, all of which contribute to operational efficiency and resident satisfaction. Person-centered care adapts services to meet the unique needs and preferences of

each resident, promoting autonomy and enhancing well-being by involving residents in their care decisions. Comprehensive staff training, especially in areas like dementia care and emergency response, ensures that caregivers are well-equipped to address complex health needs, which improves care quality and reduces staff turnover (Zimmerman et al., 2014). Proactive healthcare services, such as regular assessments and rapid response systems, further support residents' evolving needs. Technologies like telehealth and electronic health records enhance care precision and responsiveness (Grabowski & O'Malley, 2014). Leadership plays a vital role in creating a positive work culture through open communication, transparency, and staff empowerment, leading to better care delivery and employee morale (Caspar et al., 2018). Sound financial management and strategic resource allocation ensure facilities are well-equipped and staffed, enabling investment in advanced care technology and facility improvements (Harrington et al., 2017). Compliance with regulatory standards is another critical aspect, with regular audits ensuring adherence to national guidelines for safe and effective care (Castle & Ferguson, 2010). In conclusion, effective nursing home management balances operational efficiency, regulatory compliance, and resident-centered care to enhance both the daily experience and long-term health outcomes of residents. This comprehensive approach ensures that residents receive high-quality, personalized care in a well-managed, supportive environment.

### *Wellness and Activity Programs*

Structured wellness and activity programs play a vital role in enhancing the overall health and well-being of elderly residents in nursing homes by addressing their physical, cognitive, and emotional needs in a holistic manner. Physical exercises, such as strength training and aerobic activities, are fundamental for maintaining mobility and reducing risks associated with inactivity, including falls, cardiovascular diseases, and physical decline. Research by Cadore et al. (2020) demonstrates that even moderate regular physical activity can significantly improve strength and balance in older adults, which are critical factors in fall prevention—a common cause of injury among the elderly. Similarly, aerobic exercises have been shown to maintain or improve cardiovascular fitness, enhancing heart health and stamina in seniors (Vaz Fragoso & Gill, 2012). These physical improvements not only support independence but also contribute to a longer, healthier life. Cognitive stimulation

is equally essential in mitigating cognitive decline, which is often associated with aging. Activities such as puzzles, memory games, and digital applications specifically designed for cognitive training help maintain mental sharpness and improve executive functioning, which is crucial for daily living. Mowszowski et al. (2010) found that structured cognitive interventions enhance cognitive processing speed and executive functions, providing elderly individuals with a sense of accomplishment and mental clarity. Engaging in these activities can delay or even reverse certain aspects of cognitive decline, which is key to maintaining autonomy. Equally important is the social aspect of wellness programs. Social engagement in nursing homes, facilitated through group activities, social gatherings, and community-building exercises, plays a critical role in combating loneliness and depression—common psychological challenges faced by the elderly. Chen and Schulz (2016) found that social interactions significantly improve psychological well-being, fostering a sense of belonging and happiness among residents. Meaningful social engagement also encourages residents to form relationships, which contributes to a supportive community atmosphere, promoting mental and emotional health. The success of these wellness programs lies not only in their design but in their adaptability. Regular assessment and adjustment of activities ensure they meet the changing needs and abilities of elderly residents. For instance, programs might start with gentle physical activities and progressively increase in intensity as participants' strength and stamina improve. This adaptive approach allows all residents to engage safely and maximize their benefits. Incorporating these structured wellness programs into the daily routines of nursing home residents leads to sustained improvements in their overall health and well-being. By addressing physical, cognitive, and social needs, these programs contribute to a more fulfilling and active lifestyle, prolonging residents' independence and improving their quality of life. In conclusion, structured wellness and activity programs are indispensable in elderly care, offering a comprehensive and adaptive approach to ensuring that nursing home residents not only maintain their health but thrive physically, mentally, and emotionally.

---

### *Methodology*

This research is a qualitative study aimed at investigating the physical and social environments of a nursing home to improve the quality of life for the elderly,

and to study the management systems of nursing homes to enhance the quality of life for the elderly in support of Thailand's aging society. The research methodology is as follows:

### Key Informants

In this qualitative study, the target group was meticulously chosen using purposive selection to encompass a nursing home in Bangkok, Nursing Home A, exemplifying private sector management. The total sample of 20 individuals was segmented into three groups: one business operator or nursing home administrator, six staff members or caregivers, and thirteen elderly residents from the facility, providing a diverse range of perspectives as detailed in [Table 1](#). The study focused on gathering detailed insights into the administrative and operational challenges, the effectiveness of care practices, and the lived experiences of residents to assess overall satisfaction and quality of life. By employing structured interviews and observational methods, the research aimed to uncover themes related to job satisfaction, administrative efficiency, and resident well-being, with the goal of identifying areas for improvement in management and care practices within this nursing home. The methodological approach, including in-depth interviews and thematic analysis, was chosen to ensure comprehensive data collection and analysis, providing valuable insights into the operational dynamics and care outcomes in these settings, as supported by established qualitative research methods (Creswell & Poth, 2016; Patton, 2014).

### Research Tools

The study utilized meticulously structured instruments for data collection, focusing on gathering comprehensive information across various dimensions. The primary tool

was a multi-part interview form, designed to capture a wide range of data. The first section collected general demographic and contextual information, establishing a foundation for deeper inquiry. The second section focused on the quality of life of elderly residents, exploring four key areas: physical, mental, social, and environmental well-being (Baltes & Baltes, 1990). This approach provided a holistic understanding of how these aspects contribute to overall resident welfare. The third section gathered suggestions for improvements in nursing home care and management, directly from those with lived or professional experience. In addition to the interviews, an observation form was employed to objectively assess the physical environment of the nursing homes. This tool allowed researchers to evaluate the actual living conditions and compare them with residents' reported experiences, adding validity to the qualitative data (Kawulich, 2005). Together, these structured interviews and systematic observations provided a comprehensive methodological framework, yielding multi-dimensional insights that can inform better practices and improve the quality of life for elderly residents in the nursing home.

### Data Collection

Data collection for the nursing home study was rigorously executed using a combination of document reviews, in-depth individual interviews, and observational methods. This integrated approach allowed for a comprehensive examination of both the theoretical and practical aspects of elderly care in the nursing home. The research team reviewed relevant literature and existing studies to build a foundational understanding, which was then enriched through direct observations in the nursing home to capture the actual conditions and interactions within these environments. To delve deeper into personal experiences and insights, in-depth interviews were conducted with various stakeholders, including

**Table 1** Reordered background and characteristics of key informants

| Group                               | No. of Participants | Average Age | Gender    | Work Experience (Years) | Key Characteristics                                                         | Purpose of Inclusion                                            |
|-------------------------------------|---------------------|-------------|-----------|-------------------------|-----------------------------------------------------------------------------|-----------------------------------------------------------------|
| Business Operator/<br>Administrator | 1                   | 45          | 1 F       | 15+                     | Responsible for overall management and operations                           | To gain insights into administrative and operational challenges |
| Staff Members/<br>Caregivers        | 6                   | 35          | 2 M, 4 F  | 5-10                    | Provide day-to-day care and support to residents                            | To understand care practices and job satisfaction               |
| Elderly Residents                   | 13                  | 75          | 3 M, 10 F | N/A                     | Residents living in the facility, providing insights into lived experiences | To evaluate satisfaction, well-being, and quality of life       |

caregivers and residents. These interviews provided nuanced perspectives on the daily operations and quality of life within the facilities. To ensure the reliability and validity of the collected data, triangulation was employed, corroborating information from different sources, times, and contexts. This methodological strategy, endorsed by scholars like Angrosino (2007) and Carter et al. (2014), helped to minimize biases and enhance the depth of the findings, providing a robust basis for subsequent analysis and conclusions.

### *Data Analysis*

Data analysis in the study was meticulously conducted through content analysis, a methodological approach that involves categorizing voluminous amounts of data to identify core consistencies and meanings. Specifically, the data obtained from interviews and observations were systematically sorted into distinct categories, which were then scrutinized for patterns and themes that could elucidate the underlying dynamics within the nursing home. To align with best practices for narrative data, thematic analysis was applied alongside content analysis to enhance the depth of interpretation. This approach involved identifying, analyzing, and reporting themes within the narrative data to capture patterns of meaning more effectively (Braun & Clarke, 2006). This categorization facilitated a comparative analysis where responses from various respondents were analyzed side by side to discern commonalities and deviations that could suggest deeper insights into the quality of care and resident satisfaction (Elo & Kyngäs, 2008). Further, the integration of thematic analysis allowed for a richer exploration of the participants' narratives, focusing on their lived experiences and perspectives, which provided contextually grounded insights. This approach allowed the researchers to construct logical connections between categories, enabling the identification of cause-and-effect relationships that were anchored in the established theoretical frameworks guiding the study. These connections were pivotal in framing the conclusions that captured the nuanced phenomena observed within the data. Ultimately, the findings were articulated through an analytical description that not only narrated the facts but also systematically explained and presented the data within the context of the predefined research framework, thus providing a coherent and comprehensive depiction of the outcomes (Hsieh & Shannon, 2005). By employing both content and thematic analysis, the study ensured that the narrative data were thoroughly analyzed, allowing for

a deeper understanding of patterns and themes related to care quality and resident satisfaction. This method of data analysis ensured that the results were both robust and replicable, offering valuable insights with implications for improving practices in nursing home management and care.

### *Ethical Considerations*

This study adhered to ethical principles by obtaining informed consent from participants, ensuring confidentiality and anonymity of their data, respecting autonomy, and minimizing harm or discomfort. Participants were treated with fairness, dignity, and respect, and cultural sensitivities were considered. Potential conflicts of interest were disclosed, and the study received ethical approval. These measures aimed to protect participants' rights and well-being while contributing valuable insights to the field of elderly care in Thailand.

---

## **Results**

### *Physical and Social Environment*

The in-depth interviews conducted at Nursing Home A provide a comprehensive overview of the efforts to enhance the quality of life for its residents, showing a facility that is continuously evolving to meet the needs of its elderly population more effectively. Through these interviews, facility managers discussed ongoing structural modifications aimed at increasing accessibility and safety, noting,

“Some parts may need more leveling to facilitate the movement or walking of the elderly, because we have both strong individuals and those who need walkers or wheelchairs. If the floors are uneven, it poses a risk of accidents.”

This proactive approach is reflective of a broader commitment to making the living environment as safe and comfortable as possible.

Furthermore, the facility's dedication to maintaining a clean and pest-free environment is evident, with regular pest control measures and installations like mosquito screens, as one administrator explained,

“Rooms are equipped with mosquito screens to protect against mosquitoes and insects, and regular mosquito spraying is conducted.”

These measures are vital for preventing discomfort

and disease, underscoring the center's commitment to the well-being of its residents.

Social interaction is also a critical component of life at the center, with numerous activities designed to foster a sense of community among the residents. This aspect of their care is highly valued, with one resident expressing,

"Granny can do all activities, is satisfied, and never feels lonely. If a friend feels lonely, she comforts them... Friends in the same dorm help each other out a lot."

Such testimonials highlight the positive social environment fostered by the center, which is crucial for the emotional well-being of its residents.

However, the interviews also highlighted challenges, particularly relating to the restrictions imposed by necessary health and safety protocols. One resident described the impact of these restrictions on their independence, saying,

"Currently, you can't just go out; when you return, you have to be quarantined for several days to prevent the risk of spreading COVID-19... It affects our independence."

These measures, while essential for safety, evidently constrain the residents' freedom to engage with the community outside the center.

Overall, the findings from the interviews underscore the center's comprehensive approach to elder care, which involves not only enhancing physical infrastructure and safety protocols but also nurturing a supportive and active social environment. By continuously adapting and responding to feedback, Nursing Home A aims to strike an optimal balance between safety and quality of life, ensuring that it not only meets but strives to exceed the necessary standards for exceptional elder care.

### *Management Systems*

Based on the in-depth interviews conducted at Nursing Home A, the findings provide a comprehensive understanding of the facility's environment, its operations, and the overall satisfaction and challenges experienced by the residents.

#### *Resident satisfaction and facility adaptations*

The elderly residents generally reported high satisfaction with the living conditions, citing well-maintained facilities and responsive adaptations to their individual needs. One resident highlighted the comfort provided by environmental adjustments, saying,

"In the residence, there are no issues at all. I had problems before, but not anymore. We talk nicely. I don't like the fan. If it's on, it's only at speed one. Those who

like the fan stay over there."

This response illustrates the center's efforts to accommodate personal preferences and ensure comfort for all residents.

#### *Engagement and social interaction*

Activities and social interactions form a vital part of the residents' daily life, contributing to their emotional and psychological well-being. The center organizes a variety of activities that encourage social engagement and mental stimulation. An elderly resident shared their experience, stating,

"I can do all the activities. I am satisfied and happy, never lonely. If someone else is lonely, I console them. The staff are okay. You never really know what others think of you—some good, some bad, it's mixed. Activities like playing games, dominos, word and proverb games are enjoyable. The caretakers make it enjoyable or sometimes we do crafts. I like doing crafts; it's fun."

This highlights the role of activities in fostering a vibrant community spirit and reducing feelings of isolation among the elderly.

#### *Autonomy and movement restrictions*

While the center is commended for its care and facilities, restrictions on movement, especially due to safety protocols like those implemented during the COVID-19 pandemic, have posed challenges to resident autonomy. The limitations have affected residents' freedom to move independently within and outside the facility. A resident voiced their inconvenience,

"Now there are no toilets in each room. Getting to the toilet is not very convenient... which is currently being coordinated with the design department to evaluate for improvements using the center's budget before calling new people to come in."

This statement reflects the ongoing efforts to improve facilities while balancing safety concerns.

#### *Relationships between staff and residents*

The bond between caregivers and residents is crucial in creating a nurturing environment. The center employs a strategy of compassion and attentiveness, which is deeply valued by the residents. One poignant remark from a resident illustrates this relationship,

"Most move back home or are in a condition where their family is happy to take them back or go to another care place as appropriate. The room must then be returned to the center to call in the next case in line."

This comment underscores the transitional nature of the care provided and the importance of maintaining a

respectful and caring interaction.

#### *Professional care and staff development*

The center not only focuses on the well-being of its residents but also places a high emphasis on staff training and development. This ensures that the care provided is up-to-date and of high quality. Staff members, including social workers, nurses, and support personnel, receive ongoing training to enhance their caregiving capabilities. One staff member explained the importance of external training,

“We invite outside experts for training. Recently, a mental health center provided training on mental health care for ourselves and the elderly.”

#### *Comprehensive health services*

Maintaining the health of elderly residents is a priority, and the center facilitates comprehensive healthcare services to meet this goal. Regular health assessments and specialized medical treatments are provided by external professionals. A resident discussed the healthcare logistics,

“If they are sick, they must go according to the hospital where they have rights. Here in Bangkok, it’s different from the provinces; you can’t just go to any nearby hospital.”

In conclusion, the in-depth interviews at Nursing Home A reveal a complex but well-managed facility that strives to balance care quality, resident independence, and safety. The personal accounts of the residents and staff reflect a collective effort to foster a supportive and engaging community for the elderly.

### *Wellness and Activity Programs*

This study examines the comprehensive care initiatives targeted at improving the physical, emotional, and social well-being of the elderly, as implemented by Nursing Home A. These programs are designed to enhance the quality of life for the elderly through structured activities, specialized services, and environment management.

#### *Physical well-being initiatives*

Nursing Home A conducts simple morning exercises to energize its elderly residents. These activities stimulate circulation and promote overall vitality. Additionally, the center has introduced the HAPPY HOME program, offering muscle relaxation massages to alleviate muscle tension, improve circulation, and facilitate relaxation. Regular grooming services such as haircuts, nail

trimming, and skin care are provided by the building managers and caregiver staff to maintain hygiene and appearance.

#### *Environmental and emotional well-being*

The center’s environment is deliberately designed to impact the mood positively. It features lush green spaces where the elderly can relax and engage in light physical activities like planting, which fosters a communal spirit and enhances emotional well-being. The landscape is regularly maintained to ensure areas for relaxation are attractive and comfortable. Social workers organize spiritually enriching activities, including reading religious texts, chanting, and listening to religious talks, which contribute significantly to mental peace and contentment.

#### *Social interaction and activities*

To combat loneliness and enhance social interactions, the center permits family visits and engages external agencies to host recreational activities and cater meals. These social gatherings provide enjoyable experiences and are crucial for maintaining the emotional health of the residents.

#### *Nursing home a residential project for the elderly: best practice*

Nursing Home A operates under a condominium-like management structure with a juristic person responsible for the common areas and coordination among residents. The facility is equipped with advanced security and safety features, including CCTV and comprehensive fire protection systems. Specialized healthcare services are available within the project, such as Thonburi Bamrungmuang Hospital, which offers treatments for age-related diseases and conditions like Alzheimer’s and stroke. The project provides amenities tailored for the elderly, including exercise pools, gyms, and wheelchair-accessible facilities. It supports a range of social activities facilitated through karaoke rooms, outdoor activity courts, and meditation spaces. Safety and emergency services are bolstered by a smart tracking system and 24-hour nursing support. For those residing in the nursing home section, Nursing Home A ensures regular medical oversight and nursing care. Activities are specifically designed to aid cognitive and sensory development, encouraging social interaction and emotional engagement, which are essential for the holistic well-being of the elderly.

The elderly care programs at Nursing Home A represent comprehensive approaches to supporting the elderly in various aspects of their lives. By integrating physical health services, emotional support activities,

and secure residential facilities, these programs provide a robust framework for elderly care that can be replicated and adapted by other similar institutions aiming to enhance the lives of the elderly.

### *Comprehensive Activity Guide for Promoting Wellness in the Elderly*

As individuals transition into their senior years, maintaining a healthy lifestyle with balanced nutrition and consistent physical activity is crucial. However, cognitive exercises are equally important in mitigating the risks associated with cognitive decline, which can be a consequence of conditions such as Alzheimer's, Parkinson's, and stroke-related dementia. The International Alzheimer's Association emphasizes the critical need for dementia awareness and estimates that by the year 2050, over 131.5 million individuals worldwide might be living with this condition. In nations like France, Germany, and Japan, there is an increasing recognition of the benefits that cognitive engagement through games and toys offers in preventing dementia among the elderly. Toys designed for the elderly should focus on enhancing cognitive abilities such as observation and problem-solving, which help mitigate memory degradation and encourage social interaction. These toys are characterized by their straightforward designs and the use of universal symbols to ease comprehension and usage. Based on these observations, the proposed activity kit includes:

**Hand Exercise Balls:** These balls are designed to improve hand muscle flexibility and nerve function, reduce stiffness, and activate brain connections. Regular use can decrease common age-related issues like muscle weakness and numbness in fingers, providing a way to divert attention from stressful situations and aiding relaxation through repetitive squeezing.

**Music Boxes:** Equipped with simple mechanisms, these music boxes play gentle, soothing tunes that aid in emotional and mental relaxation. The auditory stimulation from these boxes can significantly enhance mood, creating a serene and uplifting environment for the elderly.

**Educational QR Plates:** These are accessible information sources featuring QR codes, which seniors can scan using smartphones to access valuable tips and information on topics including sleep improvement techniques, physical exercises, nutritional advice, and proper medication usage. This tool aims to promote self-care and empower the elderly with knowledge to manage their health better.

**Cognitive-Stimulating Toys:** Designed to foster

mental agility, these toys challenge the mind through puzzles and other problem-solving activities that enhance cognitive functions. They also facilitate social interactions among seniors, thus improving their social ties and emotional health. This type of engagement is critical in maintaining not only mental sharpness but also in cultivating a supportive community among the elderly.

This activity guide serves as a foundation for enriching the lives of the elderly by focusing on holistic approaches to health and well-being, integrating physical, mental, and social elements to enhance their quality of life during the golden years.

**Table 2** provides a structured overview of the main results related to the research objectives, organized into five key themes: physical environment enhancements, social interactions, resident autonomy and safety, staff development, and health and wellness programs. Each theme includes detailed findings, such as structural modifications to improve accessibility, activities fostering social engagement, and wellness initiatives targeting holistic well-being. Supporting evidence from participant interviews highlights real-life examples, such as the impact of uneven floors on safety and the role of social activities in reducing loneliness. Additional insights emphasize the significance of balancing safety protocols with autonomy and the value of ongoing staff training in enhancing caregiving quality. The implications underscore the need for accessible infrastructure, vibrant community engagement, and comprehensive care models to improve elderly residents' quality of life, offering a replicable framework for similar facilities. This detailed analysis aligns with the research objective of understanding and improving nursing home care practices.

---

## **Discussion**

Nursing Home A exemplifies how the integration of both physical and social enhancements can significantly improve the quality of life for elderly residents. Structural modifications like leveling floors not only boost safety and mobility for those using aids but also contribute to a sense of independence and comfort (Gitlin et al., 2006). Additionally, proactive measures such as pest control and the installation of mosquito screens further underline the facility's commitment to maintaining a healthy and secure living environment. However, while these physical enhancements are commendable, they reveal an over-reliance on structural adjustments

**Table 2** Summary of main results

| Theme                                   | Key Findings                                                                                                                                                                    | Supporting Evidence                                                                                                                               | Additional Insights                                                                                                                                    | Implications                                                                                                                                          |
|-----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Physical Environment Enhancements       | Structural modifications include leveling uneven floors, installing ramps for wheelchair access, and pest control measures to ensure cleanliness and safety.                    | “Some parts may need more leveling to facilitate the movement or walking of the elderly... Floors that are uneven pose a risk of accidents.”      | Managers highlighted the need for regular inspections and redesigning spaces to accommodate residents with varying mobility needs.                     | Enhancements improve safety, reduce risks of accidents, and create a more accessible environment for residents.                                       |
| Social Environment and Interactions     | Organized group activities such as games, crafts, and community events foster social interaction and reduce loneliness among residents.                                         | “Granny can do all activities, is satisfied, and never feels lonely... Friends in the same dorm help each other out a lot.”                       | Residents emphasized the importance of companionship and mutual support, which significantly improves their emotional well-being.                      | Encourages a supportive and vibrant community, improving emotional health and reducing isolation.                                                     |
| Resident Autonomy and Safety            | Strict health protocols, including quarantine requirements, limit residents’ ability to move freely within and outside the facility, impacting their sense of independence.     | “Currently, you can’t just go out; when you return, you have to be quarantined... It affects our independence and freedom.”                       | The necessity for a balance between health safety and resident autonomy was evident, as residents value their independence highly.                     | Calls for innovative approaches to maintain safety without compromising resident independence.                                                        |
| Staff Development and Professional Care | Regular training for staff in areas like mental health care and caregiving skills is conducted with the help of external experts, ensuring continuous professional development. | “We invite outside experts for training. Recently, a mental health center provided training on mental health care for ourselves and the elderly.” | Staff members expressed appreciation for the training, noting that it equipped them to handle complex caregiving challenges more effectively.          | Fosters a skilled workforce capable of delivering high-quality care and addressing diverse resident needs.                                            |
| Health and Wellness Programs            | Wellness initiatives include morning exercises, massages, grooming services, and cognitive games to improve overall health and promote mental stimulation.                      | “HAPPY HOME program offers massages for relaxation, educational QR plates for self-care tips, and group games for cognitive engagement.”          | Programs that integrate physical, cognitive, and social activities were noted as effective in improving the residents’ quality of life and well-being. | Provides a model for comprehensive care that integrates health, mental well-being, and social engagement, which can be adopted by similar facilities. |

rather than addressing the broader systemic challenges, such as the financial and administrative constraints that often limit such upgrades in other facilities. Social interactions, facilitated through diverse activities, are crucial for combating loneliness and enhancing mental health (Cohen-Mansfield et al., 2003), demonstrating the positive impact of a vibrant social environment on overall well-being. Nonetheless, the reliance on social activities to offset systemic deficiencies, such as limited autonomy due to restrictive health protocols, raises critical questions about the sustainability of such initiatives without broader policy support. The COVID-19 pandemic introduced challenges, especially in maintaining a balance between ensuring safety and preserving residents’ autonomy and freedom. This delicate balance highlights the persistent tension in elderly care settings, where regulatory requirements may inadvertently undermine the very principles of person-centered care they aim to support.

This mirrors broader concerns in elderly care facilities, as highlighted by Grabowski and O’Malley (2014), where stringent health protocols sometimes limit residents’ independence. Nursing Home A’s approach aligns with established research on person-centered care, where adaptive environmental controls and engaging social activities are central to improving residents’ satisfaction and well-being (Caspar et al., 2018; Zimmerman et al., 2014). The facility’s emphasis on maintaining positive staff-resident relationships and investing in ongoing staff development also echoes best practices for enhancing care quality and reducing staff turnover (Harrington et al., 2017). However, a critical limitation is the potential mismatch between staff training initiatives and the practical challenges faced by caregivers, such as heavy workloads and emotional burnout, which are not sufficiently addressed in the current model. In addition to these physical and social supports, the wellness

programs at Nursing Home A highlight the importance of structured physical, cognitive, and social activities. These initiatives are in line with research showing that tailored physical exercises improve strength, balance, and cardiovascular health in the elderly (Cadore et al., 2020; Vaz Fragoso & Gill, 2012). Furthermore, cognitive and social activities aimed at reducing loneliness and stimulating mental function reflect studies emphasizing their role in sustaining emotional and cognitive well-being (Chen & Schulz, 2016; Mowszowski et al., 2010). Yet, these programs risk becoming less effective without continuous feedback mechanisms and resource allocation to maintain and innovate such activities over time. The facility's innovative model, combining condominium-style living with advanced healthcare services and security, ensures comprehensive care that addresses both preventive and emergency needs. Nevertheless, while this model provides a template for comprehensive elderly care, its scalability and affordability for broader application remain uncertain, particularly in resource-limited settings. This holistic approach, paired with regular program assessments, ensures that Nursing Home A can continually adapt to the evolving needs of its elderly residents, maximizing the benefits of its wellness and care initiatives.

---

### Recommendations

To enhance the quality of life for elderly residents in a nursing home, it is recommended that facilities prioritize the physical safety and comfort of their environments through infrastructural modifications such as leveling floors and ensuring accessible facilities. Additionally, expanding wellness programs to include a variety of physical, cognitive, and emotional activities tailored to individual capabilities can significantly benefit residents. Continuous and comprehensive training for caregiving staff is essential to improve proficiency in delivering person-centered care, with a focus on communication skills and emergency response. Furthermore, increasing opportunities for social interaction within and outside the nursing home can combat loneliness and promote mental health. Integrating technology like telehealth services and electronic health records can enhance care delivery and management. Regular assessments of resident satisfaction should inform continuous refinements in care practices, while management practices should focus on transparency, quality assurance, and creating an empowering work culture. Lastly, strengthening connections with the community and encouraging family

involvement can enhance the support networks for residents, fostering a greater sense of belonging and community engagement.

---

### Conclusion

In conclusion, this comprehensive qualitative study of two nursing homes in Bangkok, representing both private and public sectors, highlights the vital impact of physical, social, and managerial factors on the quality of life for elderly residents. Regular exercise routines and wellness initiatives effectively boost physical health, while thoughtfully designed environments promote emotional and mental well-being. Social activities foster community engagement and mitigate loneliness, playing a crucial role in residents' emotional health. Additionally, person-centered management practices and continuous staff training are essential for delivering high-quality care and ensuring adaptability to the evolving needs of an aging population. These findings underscore the importance of integrating health services, engaging activity programs, and responsive management systems to improve elder care. The study offers a scalable framework that aligns with Thailand's vision for a compassionate society, ensuring elderly individuals thrive in their environments.

---

### Conflict of Interest

The authors declare that there is no conflict of interest.

---

### Research Funding

This project was supported by the Fundamental Fund for the fiscal year 2023 under Project Code FRB66E0905. The funding was provided by Thailand Science Research and Innovation (TSRI).

---

### Author Contribution

PP conceptualized the research framework, developed the theoretical foundation, and conducted the literature review on factors contributing to child abuse in Thailand. PP and SC designed the methodology, oversaw data collection and analysis, and interpreted findings on the aftermath of violent exploitation. Both authors collaboratively drafted and revised the manuscript,

with PP managing journal correspondence and the final revision. Both PP and SC approved the final manuscript for submission.

## Acknowledgments

The authors gratefully acknowledge the financial support from Thailand Science Research and Innovation (TSRI) under Project Code: FRB66E0905, which played a crucial role in the successful completion of this study. They also sincerely thank the participants, including both the residents and staff of the nursing home, for their valuable cooperation and insights. The participants' willingness to share their experiences has greatly contributed to the depth and richness of this research.

## References

- Angrosino, M. (2007). *Doing ethnographic and observational research*. SAGE Publications.
- Baltes, P. B., & Baltes, M. M. (1990). Psychological perspectives on successful aging: The model of selective optimization with compensation. In P. B. Baltes & M. M. Baltes (Eds.), *Successful aging: Perspectives from the behavioral sciences* (pp. 1–34). Cambridge University Press. <https://doi.org/10.1017/CBO9780511665684.003>
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. <https://doi.org/10.1191/1478088706qp063oa>
- Cadore, E. L., & Izquierdo, M. (2018). Muscle power training: a hallmark for muscle function retaining in frail clinical setting. *Journal of the American Medical Directors Association*, 19(3), 190–192. <https://doi.org/10.1016/j.jamda.2017.12.010>
- Carter, N., Bryant-Lukosius, D., DiCenso, A., & Blythe, J., & Neville, A. J. (2014). The use of triangulation in qualitative research. *Oncology Nursing Forum*, 41(5), 545–547. <https://doi.org/10.1188/14.ONF.545-547>
- Caspar, S., & O'Rourke, N. (2008). The influence of care provider access to structural empowerment on individualized care in long-term-care facilities. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 63(4), S255–S265. <https://doi.org/10.1093/geronb/63.4.S255>
- Castle, N. G., & Ferguson, J. C. (2010). What is nursing home quality and how is it measured? *The Gerontologist*, 50(4), 426–442. <https://doi.org/10.1093/geront/gnq052>
- Chayowan, N. (2008, November 20–22). *The situation of the elderly in Thailand*. [Training workshop document]. Training workshop on the development of local projects for the elderly according to the National Plan on the Elderly, Krung Sri River Hotel, Phra Nakhon Si Ayutthaya, Thailand.
- Chen, Y. R. R., & Schulz, P. J. (2016). The effect of information communication technology interventions on reducing social isolation in the elderly: a systematic review. *Journal of medical Internet research*, 18(1), e18. <https://doi.org/10.2196/jmir.4596>
- Cohen-Mansfield, J., Marx, M. S., & Guralnik, J. M. (2003). Motivators and barriers to exercise in an older community-dwelling population. *Journal of Aging and Physical Activity*, 11(2), 242–253. <https://doi.org/10.1123/japa.11.2.242>
- Creswell, J. W., & Poth, C. N. (2016). *Qualitative inquiry and research design: Choosing among five approaches*. Sage publications.
- Elo, S., & Kyngäs, H. (2008). The qualitative content analysis process. *Journal of Advanced Nursing*, 62(1), 107–115. <https://doi.org/10.1111/j.1365-2648.2007.04569.x>
- Figueiro, M. G., Plitnick, B., Lok, A., Jones, G. E., Higgins, P., Hornick, T. R., & Rea, M. S. (2014). Tailored lighting intervention improves measures of sleep, depression, and agitation in persons with Alzheimer's disease and related dementia living in long-term care facilities. *Clinical Interventions in Aging*, 9, 1527–1537. <https://doi.org/10.2147/CIA.S68557>
- Gitlin, L. N., Winter, L., Dennis, M. P., Corcoran, M., Schinfeld, S., & Hauck, W. W. (2006). A randomized trial of a multicomponent home intervention to reduce functional difficulties in older adults. *Journal of the American Geriatrics Society*, 54(5), 809–816. <https://doi.org/10.1111/j.1532-5415.2006.00703.x>
- Grabowski, D. C., & O'Malley, A. J. (2014). Use of telemedicine can reduce hospitalizations of nursing home residents and generate savings for medicare. *Health Affairs*, 33(2), 244–250. <https://doi.org/10.1377/hlthaff.2013.0922>
- Harrington, C., Choiniere, J., Goldmann, M., Jacobsen, F. F., Lloyd, L., McGregor, M., Stamatoopoulos, V., & Szebehely, M. (2012). Nursing home staffing standards and staffing levels in six countries. *Journal of Nursing Scholarship*, 44(1), 88–98. <https://doi.org/10.1111/j.1547-5069.2011.01430.x>
- Kawulich, B. B. (2005). Participant observation as a data collection method. *Forum: Qualitative Social Research*, 6(2), 43. <http://nbn-resolving.de/urn:nbn:de:0114-fqs0502430>
- Hsieh, H. F., & Shannon, S. E. (2005). Three approaches to qualitative content analysis. *Qualitative Health Research*, 15(9), 1277–1288. <https://doi.org/10.1177/1049732305276687>
- Ko, M., Wagner, L., Spetz, J., & Chapman, S. (2018). Nursing home implementation of health information technology: Review of the literature finds inadequate investment in preparation, infrastructure, and training. *Inquiry: The Journal of Health Care Organization, Provision, and Financing*, 55, 0046958018787040. <https://doi.org/10.1177/00469580187878902>
- Mowszowski, L., Batchelor, J., & Naismith, S. L. (2010). Early intervention for cognitive decline: can cognitive training be used as a selective prevention technique? *International Psychogeriatrics*, 22(4), 537–548. <https://doi.org/10.1017/S1041610209991748>
- National Statistical Office. (2017). *Revealing the Survey Results of the Elderly Population in Thailand, 2017*. <https://www.nso.go.th/nsoweb>
- Patton, M. Q. (2014). *Qualitative research & evaluation methods: Integrating theory and practice*. Sage publications.
- Vaz Fragoso, C. A., & Gill, T. M. (2012). Respiratory impairment and the aging lung: a novel paradigm for assessing pulmonary function. *Journals of Gerontology Series A: Biomedical Sciences and Medical Sciences*, 67(3), 264–275. <https://doi.org/10.1093/gerona/glr198>
- Zimmerman, S., Sloane, P. D., & Reed, D. (2014). Dementia prevalence and care in assisted living. *Health Affairs*, 33(4), 658–666. <https://doi.org/10.1377/hlthaff.2013.1255>
- Zimmerman, S., Williams, C. S., Reed, P. S., Boustani, M., Preisser, J. S., Heck, E., & Sloane, P. D. (2005). Attitudes, stress, and satisfaction of staff who care for residents with dementia. *The Gerontologist*, 45(Suppl 1), 96–105. [https://doi.org/10.1093/geront/45.suppl\\_1.96](https://doi.org/10.1093/geront/45.suppl_1.96)