

Holistic View on Successful Aging: Life Course and Current Factors Determining Successful Aging in Thailand

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Abstract

Population aging is a global phenomenon. In Asia, it is rapidly affecting many countries, which are less prepared compared to Western countries even though the proportion of older adults and aging adults is considerably higher. This makes understanding the implications and the factors leading to successful aging critical. This study provides a holistic view on successful aging taking into account the denotation, measurement, and predictors of successful aging following the continuity theory. The study adds to the concept of successful aging by examining the relationships between the life course factors, current factors and successful aging. Specifically, the criteria of “success” is expanded to include life satisfaction, well-being, and self-actualization. Data was obtained from older adults residing in Thailand using Structural Equation Modeling (SEM). The major findings show that resilience and mental health maintenance could positively influence successful aging. This leaves room for governmental units and related institutions to implement more effective policies, not only for the current older adults but also for preparing the next generations to age successfully. Understanding and preparing well for an aging population are the key factors in ensuring and increasing successful aging.

Keywords: Successful aging, older adults, life course factors, continuity theory

1. Introduction

Successful aging is becoming an important topic as more people realize it could help them prepare for their retirement, health maintenance, and possible adversities as well as enable them to lead better lives in the future. In Western countries, successful aging is a common concept that has been studied widely as they have been dealing with aging populations for a long time. However, aging populations in Asian countries is much more recent, and the change dynamic and fast-paced with people having less experience. The number of older persons in Asia is expected to double from 535 million in 2015 to 1.3 billion in 2050 (United Nations ESCAP, 2017a). Thailand is one of the fastest growing Asian countries facing population aging. ESCAP calculates that it will take Thailand only 22 years to move from an “aging society” to an “aged society” by 2024 (United Nations ESCAP, 2017b). This means that Thailand, which had more than 10 percent of its population above 60 years in 2002, is projected to rise to 20 percent by 2024. This rapid demographic change could have an impact on national expenditures, productivity and more. Reforms are needed in various aspects regarding older adults’ finance, social engagement, physical and mental health. This research aims to develop a holistic view of successful aging model in the context of Thailand.

While a bigger proportion of the population is expecting to lead a longer life, the increase in lifespan does not automatically point toward better and functioning health, happiness, or life satisfaction in later years. With the older segment of the population steadily growing at a faster rate compared to other groups in the population, society is starting to pay attention to this group and improving healthy lifestyles (Lee, 2011). According to the early work of Havighurst (1961), the term “successful aging” was first reflected as an important term in gerontology to define a good old age. People in Asian countries have a longer life expectancy but many of them are dealing with adversities in their later lives. For them the topic of successful aging is essential. This is especially true of Thailand, which needs to adapt swiftly to the rapid transformation. The attempt to identify the factors that are likely to ensure successful aging for older adults all the more relevant.

Research Questions and Objectives

Even though the Thai government has already started implementing plans for an aging society, the policies and commitment from all sectors – including older adults, families, private and public organizations – are still limited. The government expenditure concerning older people, such as the allowance for the elderly, government pension fund, and the social security fund, has been increasing in recent years with the tendencies to rise even more in the future (Thailand Development Research Institute, 2012). Although the government has already tried to solve the aging population issues by providing some financial support, wider variety of supports derived and based on the holistic view of successful aging are still needed. This leaves the gap for this research to investigate the factors that may cause older adults to have more opportunities and abilities to age successfully. The study contributes to the literature by studying the meaning, conceptualization and predictions under the subject of successful aging following the continuity theory.

The two main research questions are: (1) What are the important life-course factors, which can predict successful aging? (2) What are the important current factors determining successful aging in Thailand? The focus of this research is on both life-course and current factors of older adults, both of which can directly or indirectly influence successful aging. The target population of this study is older people residing in Thailand, where rapid economic development has given people longer life expectancy. The four main research objectives are:

1. to develop a model of successful aging in holistic view, including both life course factors and current socio-economic factors;
2. to apply the continuity theory to a successful aging model;
3. to understand and study older adults retiring in Thailand; and
4. to provide ideas for policy, project, or program recommendations regarding successful aging for use by governmental or private organizations.

2. Related Literature

Successful Aging

Historically, empirical research has focused on the negative aspects of aging such as death, disease, functional decline and disability (Strawbridge, Cohen, Shema, & Kaplan, 1996). The idea of people positively enjoying old age was wrong, and was denying the reality of aging (Cole, 1983). Later, Rowe and Kahn (1997) whose research differed from previous works in this area rebuilt the concept of successful aging. The widely-used model defined successful aging by three main factors: absence of disease, high degree of physical and cognitive functions, and active social engagement (Rowe & Kahn, 1998). Even though Rowe and Kahn's (1998) model was widely used, there were also critiques as the model mainly focused

on disease-free older age. P. B. Baltes and Baltes (1990) claimed that Rowe and Kahn's (1998) idea of current health state may be too idealistic. Sociological and psychological approaches look at 'successful aging' in a more meaningful way i.e., searching for the conceptions of well-being and also continued growth even in old age. The life course approach is considered to improve the model whereby aging is viewed as a process, which includes historical time, context and other developments into the model (Stowe & Cooney, 2014). Successful aging could be viewed as a dynamic process or as the outcome of one's development over the life course (Ryff, 1989a). To conclude, there are various definitions, concepts and measurements regarding successful aging. This is consistent with the explanation from Pruchno, Wilson-Genderson, and Cartwright (2010). However, even with numerous papers on successful aging, there is still no clear consensus on this topic. In this study, the researchers decided not to count on one specific model but to use a more holistic conceptual view that includes both life course and current factors to understand successful aging.

Continuity Theory

There are three main psychosocial theories relating to successful aging and social functioning. They describe how people develop in old age and include the disengagement theory, the activity theory, and the continuity theory (Havighurst, Neugarten, & Tobin, 1968). The main theory used in this study is continuity theory. The disengagement theory explains that it is normal and acceptable that older adults will withdraw from society (Cumming & Henry, 1961). The activity theory is also known as the normal theory of aging, or sometimes as the implicit theory of aging, or the lay theory of aging (Loue, 2008). The theory was developed by Havighurst in 1961. He proposed that successful aging occurs when older adults stay socially active. The aging process will be delayed and the quality of life will be improved when older adults maintain the social interactions such as personal relationships and activities (Schulz, 2006). The continuity theory explains that older adults will usually maintain the same activities, behaviors, relationships as they did when they were younger.

This theory stipulates that older adults will continue their lifestyles, which are related to their past experiences using an adaptive strategy (Atchley, 1971). Atchley (1989) proposed the continuity theory in 1989, explaining that people who grow older can successfully carry on their values, lifestyles and relationships from middle to later life. This theory is applied as the main theory in this study and is about the way older adults deal with changes they face when aging. As personality remains comparatively continual throughout aging and one's life course (Markson, 2003), scholars also explain in a similar way that people are motivated to adapt and continue their typical patterns of activity (Nimrod & Kleiber, 2007). Therefore, the researchers applied the continuity theory as a main theory in this study to reinforce the idea that what the older adults have attained in their life course, they will find ways to continue so they can experience successful aging. Even when faced with decline in health, they will develop activity patterns, which can help maintain or regain their health, leading to successful aging.

Happiness in Later Years: Life Satisfaction, Well-Being, and Self-Actualization

Finding the measurement of successful aging is not easy. A person who lives the longest is the most likely to have faced the most losses such as loss of friends or health. A person striving too much for self-sufficiency also loses social engagement (M. M. Baltes & Carstensen, 1996). So how to measure if a person ages successfully? The most commonly investigated definition of successful aging is happiness and life satisfaction over one's past and present life (Havighurst, 1961). As people lead their lives, individuals subjectively assess

their life's conditions as to feelings they have of satisfaction or dissatisfaction. Life satisfaction can be measured by the Satisfaction With Life Scale-SWLS (Pavot & Diener, 1993). Psychologists commonly used life satisfaction and appraisal of well-being to operationalize successful aging (M. M. Baltes & Carstensen, 1996). Both life satisfaction (Abbey & Andrews, 1986; Andrews & Withey, 2012) and well-being (Glass, 2003) are also most frequently proposed and studied for the component regarding quality of life. In 2011, Seligman discussed five core elements of well-being: PERMA (positive emotion, engagement, relationships, meaning and accomplishment) (Seligman, 2012). Seligman (2012) believes that these five elements can bring fulfillment, happiness and meaning to people. The scale from PERMA model of well-being will be used later to measure one of the aspects of successful aging.

The last indicator for successful aging in this study is self-actualization. According to Baltes and Silverberg (1994), self-actualization is also used as one of the measurements of successful aging. According to Maslow's (1943) hierarchy of needs model; there are five levels of human's motivational needs; physiological, safety, love, esteem and self-actualization. Maslow (1954) believed that a person has a potential to satisfy these needs. The lower levels of basic needs have to be fulfilled before reaching the higher levels. The highest level of the model is self-actualization which is the need for personal growth and finding a meaning of life that is important to the person (Maslow, 1962). In this study, the measurements of life satisfaction, well-being and self-actualization will be used to represent 'successful aging'. All these indicators are not focused on measuring how long people can live but rather on how much life is added to their years. It is about how an older person can live happily, with wellness and continue to be true to themselves throughout their lives.

3. Methodology

Research Model

This research aims to test seven hypotheses (H1-H7) as shown in Figure 1. Each hypothesis states the direction of each exogenous variable influencing the endogenous variables as follows:

H1: Personal-achievement profile has a positive relationship with current behavior and status.

H1a: Personal-achievement profile has a positive relationship with current health behavior.

H1b: Personal-achievement profile has a positive relationship with current financial well-being.

H1c: Personal-achievement profile has a positive relationship with current social engagement.

Identifying H1: The better the personal achievement profile in education, career, income and social engagement, the more significantly it relates to current health behavior, financial well-being and social engagement.

H2: Resilience has a positive relationship with current behavior and status.

H2a: Resilience has a positive relationship with current health behavior.

H2b: Resilience has a positive relationship with current financial well-being.

H2c: Resilience has a positive relationship with current social engagement.

Identifying H2: The better the resilience, the more significantly it relates to current health behavior, financial well-being and social engagement.

H3: Resilience has a positive relationship with health maintenance.

H3a: Resilience has a positive relationship with physical health maintenance.

H3b: Resilience has a positive relationship with mental health maintenance.

Identifying H3: The better the resilience, the more significantly it relates to physical and mental health maintenance.

H4: Current behavior and status have a positive relationship with health maintenance.

H4a: Current health behavior has a positive relationship with physical health maintenance.

H4b: Current financial well-being has a positive relationship with physical health maintenance.

H4c: Current social engagement has a positive relationship with physical health maintenance.

H4d: Current health behavior has a positive relationship with mental health maintenance.

H4e: Current financial well-being has a positive relationship with mental health maintenance.

H4f: Current social engagement has a positive relationship with mental health maintenance.

Identifying H4: The better the current health behavior, financial well-being and social engagement, the more significantly it relates to physical health maintenance and mental health maintenance.

H5: Personal-achievement profile has a positive relationship with successful aging.

H5a: Personal-achievement profile has a positive relationship with life satisfaction and well-being.

H5b: Personal-achievement profile has a positive relationship with self-actualization.

Identifying H5: The better the personal achievement profile in education, career, income and social engagement, the more significantly it relates to life satisfaction, well-being and self-actualization.

H6: Resilience has a positive relationship with successful aging.

H6a: Resilience has a positive relationship with life satisfaction and well-being.

H6b: Resilience has a positive relationship with self-actualization.

Identifying H6: The better resilience, the more significantly it relates to life satisfaction, well-being and self-actualization.

H7: Health maintenance has a positive relationship with successful aging.

H7a: Physical health maintenance has a positive relationship with life satisfaction and well-being.

H7b: Physical health maintenance has a positive relationship with self-actualization.

H7c: Mental health maintenance has a positive relationship with life satisfaction and well-being.

H7d: Mental health maintenance has a positive relationship with self-actualization.

Identifying H7: The better the physical maintenance and mental maintenance, the more significantly it relates to life satisfaction, well-being and self-actualization.

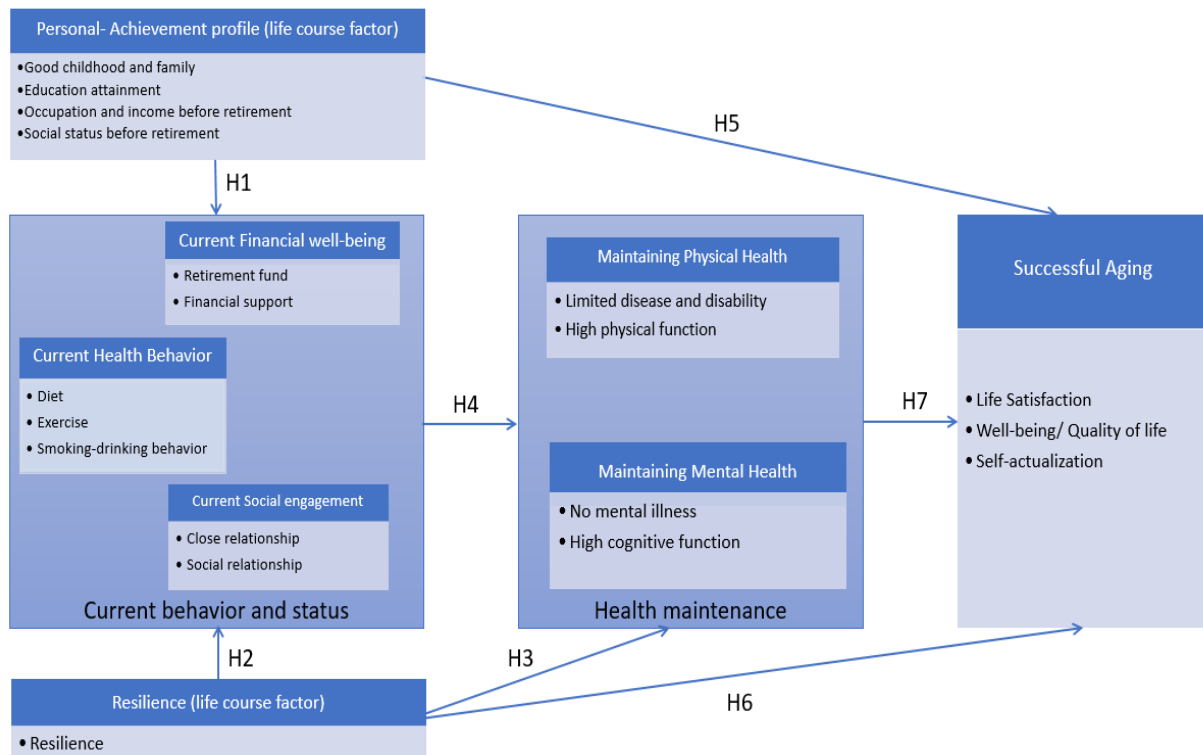


Figure 1: Research Model

This research studies life course factors and current factors that could influence the successful aging directly and through health maintenance of older adults in Thailand, thus, quantitative approach is justified. Survey questionnaires were used to collect data. The survey questionnaires were provided in close-ended questions so that the collected data can be converted into statistical numbers. Before distributing the questionnaires, the subjects would be asked a few questions in order to make sure they were eligible according to the above criteria. The questionnaires were distributed to older adults in Thailand who are at least 60 years old residing in Bangkok or greater Bangkok and selected major provinces. The quota sampling technique was used in this study as they were distributed in six major provinces in Thailand. This technique allowed researchers to sample subgroups that are interesting to the study. The target samples are from various backgrounds, especially the older adults who are still active with the ages around 60-69 years old.

The research was conducted at the research participants' houses, workplaces and other public places during June to November 2018. The sample size of this research calculated according to Yamane (1964) is 400 sets of survey questionnaires, in order to achieve 95% confidential level and 5% precision or significant level. The response rate of 80 percent was higher than the expectation. From approximately 650 questionnaires distributed, 520 fully-completed questionnaires were used as samples of this research study. The data was analyzed by the Statistic Package for Social Sciences- Amos program. Before the structural equation modeling; the exploratory factor analysis was used to reduce the number of questions from 84 to 48 questions. The factor loading ranged between 1.007 and 0.379, thereby satisfying the validity for large sample size. Validity and Reliability analyses were completed to ensure that the questions in the questionnaire were content-related and appropriate for the measurement of this study. The questions were hypothetically constructed as they rely on the main hypotheses. For reliability analysis, the researchers assessed Cronbach's Alpha analysis, which resulted from 0.745 to 0.965, and since it is greater than 0.7, it is considered reliable.

4. Research Findings and Hypothesis Testing

From 650 questionnaires distributed, 520 were fully completed, returned, and used as representative of the population for this study. The research found that the larger numbers of the respondents are female. In terms of genders: 62.7% are female, 37.3% are male. The proportion is higher in the woman group. The biggest age segment is the 60-64 years old at 52.30%, while another group of 65-69 years old is also a large segment at 27.88%. Regarding the marital status; 69.2% are married, 17.7% are divorced or widows and only 13.1% are single.

This shows that a large number of older adults in Thailand still live with their spouses and children as well as living in a big family and constitutes 54.5%. Other 38.5% live with someone such as their lovers, friends or siblings. Only 6.9% reported that they live alone. In terms of the highest level of education achieved, the largest group of 41% received degrees from higher vocational school and bachelor degree. Regarding the occupation, the largest group of 31.7% is government officials or office employees, and the second largest group of 20% is traders, technicians, or farmers. After retirement, 35.4% retired at home but 24.2% still work full-time. And lastly, the largest segment (25.2%) have monthly income of 15,000-30,000THB and 22.3% have the estimated family income of 50,001-100,000THB per month.

For the structural model (figure 2), Personal-achievement profiles (PROFILE) and resilience (RES) were the exogenous variables. Five groups were partial exogenous and endogenous variables including health behavior (HEALTH), financial status (FN), social engagement (SOC), physical health maintenance (PH_MAIN), and mental health maintenance (M_MAIN). The remaining two variables, life satisfaction and well-being (SA1) and self-actualization (SA2) were the endogenous variables.

Life satisfaction and well-being were grouped together (SA1) because of their high correlation. Much of the literature also defines well-being as life-satisfaction. Examples include the life satisfaction index (LSI), which was developed as part of Kansas City study of Adult Life (Neugarten, Havighurst, & Tobin, 1961) and measured a person's own assessment of his or her psychological well-being (Ryff, 1989b). The inter correlations of Ryff's (1989b) new measurement of well-being and the prior life satisfaction were also significantly positive.

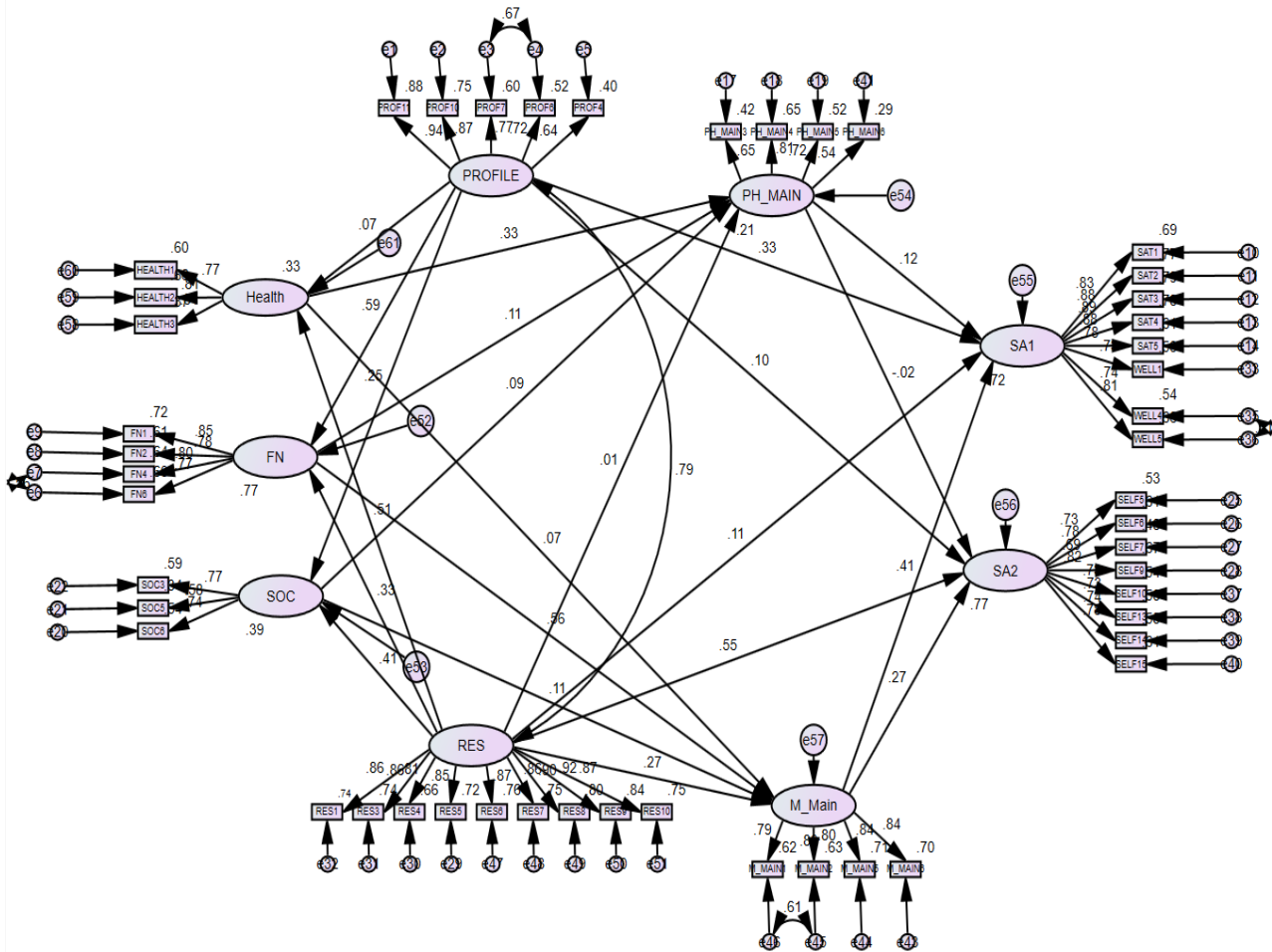


Figure 2: Structural Model

The model fit considered many literatures discussing the cut-off and the standard of the covariance-based model. According to Hair, Black, Babin, and Anderson (2009) and Awang (2012), a CFI of more than 0.9 means satisfactory fit. For TLI, scholars considered TLI of at least 0.9 to be satisfactory fit (Awang, 2012; Forza & Filippini, 1998). As far as the NFI is concerned, Awang (2012) explained that the NFI needs to be at least 0.9 to be satisfactory. However, Forza and Filippini (1998) considered a NFI between 0.8 to 0.9 to be an acceptable fit. According to Awang (2012), the RMSEA should be less than 0.08. From the statistic results, the model solution is considered good model-fit considering incremental fit (TLI rho2 = 0.914, and CFI = 0.920) and absolute fit (RMSEA = 0.056 < 0.06).

Baseline Comparison	IFI Delta2	TLI rho2	CFI	RMSEA
Default Model	0.920	0.914	0.920	0.056
Saturated Model	1.000		1.000	-
Independence Model	.000	.000	.000	0.191

Hypothesis 1

H1: Personal-achievement profile has a positive relationship with current behavior and status.

H1	Sub-hypotheses	Endogenous Variables	Estimate	P	Significantly support H	Result
H1a	Personal-achievement profile	Current health behavior	0.051	0.354	Not supported	Partially supported
H1b		Current financial well-being	0.606	***	Supported	
H1c		Current social engagement	0.262	0.001	Supported	

The research findings in this study indicate that personal-achievement profile is the exogenous variable that significantly affects the current financial well-being and current social engagement (H1b: estimate = 0.606, $p < 0.05$ & H1c: estimate = 0.262, $p < 0.05$). However, there is no relationship between personal-achievement profile and current health behavior. This concludes that there is partial relationship between personal-achievement profile and current behavior status.

Hypothesis 2

H2: Resilience has a positive relationship with current behavior and status.

H2	Sub-hypotheses	Endogenous Variables	Estimate	P	Significantly support H	Result
H2a	Resilience	Current health behavior	0.388	***	Supported	Supported
H2b		Current financial well-being	0.369	***	Supported	
H2c		Current social engagement	0.456	***	Supported	

The research findings in this study indicate that resilience is the exogenous variable that significantly affects current health behavior, current financial well-being, and current social engagement (H2a: estimate = 0.388, $p < 0.05$ & H2b: estimate = 0.369, $p < 0.05$, & H2c: estimate = 0.456, $p < 0.05$). This study proves that resilience is significantly positive towards current behavior and status of the older adults. This concludes that resilience can significantly affect all current behavior status.

Hypothesis

3

H3: Resilience has a positive relationship with health maintenance.

H3	Sub-hypotheses	Endogenous Variables	Estimate	P	Significantly support H	Result
H3a	Resilience	Physical health maintenance	0.009	0.905	Not supported	Partially supported
H3b		Mental health maintenance	0.266	***	Supported	

The research findings in this study indicate that resilience is the exogenous variable that significantly affects mental health maintenance (H3b: estimate = 0.266, $p < 0.05$). However, there is no relationship between resilience and physical health maintenance. This concludes that there is a partial relationship between resilience and health maintenance.

Hypothesis 4

H4: Current behavior and status have a positive relationship with health maintenance.

H4	Sub-hypotheses	Endogenous Variables	Estimate	P	Significantly support H	Result
H4a	Current health behavior	Physical health maintenance	0.324	***	Supported	Partially supported
H4b	Current financial well-being		0.075	0.213	Not supported	
H4c	Current social engagement		0.061	0.188	Not supported	
H4d	Current health behavior	Mental health maintenance	0.091	0.057	Not supported	
H4e	Current financial well-being		0.499	***	Supported	
H4f	Current social engagement		0.100	0.005	Supported	

The research findings in this study indicate that current health behavior is the only variable that significantly affects physical health maintenance (H4a: estimate = 0.324, $p < 0.05$). However, there is no relationship between current financial well-being and current social engagement towards physical health maintenance. The finding is in contrast for mental health maintenance. The result indicates that current financial well-being and current social engagements are the variables that significantly affect mental health maintenance (H4e: estimate = 0.499, $p < 0.05$ & H4f: estimate = 0.100, $p < 0.05$). Nevertheless, there is no relationship between current health behavior and mental health maintenance. This concludes that there is a partial relationship between current behavior status and health maintenance.

Hypothesis 5

H5: Personal-achievement profile has a positive relationship with successful aging.

H5	Sub-hypotheses	Dependent Variables	Estimate	P	Significantly support H	Result
H5a	Personal-achievement profile	Life satisfaction and well-being	0.295	***	Supported	Partially supported
H5b		Self-actualization	0.078	0.056	Not supported	

The research findings in this study indicate that personal-achievement profile can significantly affect only life satisfaction and well-being (H5a: estimate = 0.295, $p < 0.05$). However, there is no relationship between personal-achievement profile and self-actualization. This concludes that there is a partial relationship between personal-achievement profile and successful aging.

Hypothesis 6

H6: Resilience has a positive relationship with successful aging.

H6	Sub-hypotheses	Dependent Variables	Estimate	P	Significantly support H	Result
H6a	Resilience	Life satisfaction and well-being	0.104	0.078	Not supported	Partially supported
H6b		Self-actualization	0.449	***	Supported	

The research findings in this study indicate that resilience can significantly affect only self-actualization (H6b: estimate = 0.449, $p < 0.05$). However, there is no relationship between resilience towards life satisfaction and well-being. This concludes that there is a partial relationship between resilience and successful aging.

Hypothesis 7

H7: Health maintenance has a positive relationship with successful aging.

H7	Sub-hypotheses	Dependent Variables	Estimate	P	Significantly support H	Result
H7a	Physical health maintenance	Life satisfaction and well-being	0.158	***	Supported	Partially supported
H7b		Self-actualization	-0.021	0.545	Not supported	
H7c	Mental health maintenance	Life satisfaction and well-being	0.408	***	Supported	
H7d		Self-actualization	0.225	***	Supported	

The research findings in this study indicate that physical health maintenance is the variable that significantly affects life satisfaction and well-being (H7a: estimate = 0.158, $p < 0.05$). However, there is no relationship between physical health maintenance towards self-actualization. The finding is different for mental health maintenance. The result shows that mental health maintenance is significantly positive towards life satisfaction and well-being as well as self-actualization (H7c: estimate = 0.408, $p < 0.05$ & H7d: estimate = 0.225, $p < 0.05$). This study proves that mental health maintenance can significantly affect all aspects of successful aging. This concludes that there is a partial relationship between resilience and successful aging. Apart from answering research questions, there are other beneficial findings from our detailed study. Eight questions in the questionnaires measured the successful aging in terms of life satisfaction and well-being; moreover, the other eight questions were used to measure successful aging in term of self-actualization.

For life satisfaction and well-being, the respondents rated themselves as having the highest score in having the sentiment of being joyful, positive, content and satisfied with their lives with the score of 4.63 and 4.58 out of 6. Conversely, they rated themselves lowest when asked if they have any desires to change anything if they could live their lives over with the score of 4.01 out of 6. From these findings, we conclude that even though older adults feel quite satisfied and content with their lives, there is still a clear sign that change is needed. For self-actualization, the respondents rated themselves as having the highest score in terms of being loved and the ability to accept their own weaknesses with the score of 4.68 and 4.66 out of 6. Conversely, they rated themselves lowest in terms of the attempt to analyze and simplify complex task with the score of 4.18 out of 6. From these findings, it can reflect that the older adults perceived themselves as being loved, can give love and also can accept their flaws; however, their endeavors in completing the complicated job are not high.

5. Summary and Concluding Remarks

The growth of aging population in Asian countries is rapid and dynamic. A large proportion of people are in or entering into this older age group whereby the interest of successful aging is raised. While having a good old age is relevant to everyone especially the older adults, there were limited numbers of researches in Thailand who studied about successful aging, therefore, this research was conducted to fill the gap. With various definitions of successful aging and uni-dimensional models in the academic field, the definition of successful aging remains unclear and still lacks the insight from older people. Due to the mentioned reasons, this research explores the holistic view of successful aging including both life course and current factors in the context of Thailand.

The four main objectives of this research are to:

- 1) to develop a model of successful aging in holistic view including both life course factors and current socio-economic factors;
- 2) to apply continuity theory to successful aging model;
- 3) to understand and study older adults retiring in Thailand as Thailand was used as the center of this study;
- 4) to give the idea for policy, project, or program recommendations regarding successful aging for governmental or private organizations.

The research findings show that current behaviors and status are partially and significantly affected by the personal-achievement profile. The current financial well-being and current social engagement are positively influenced by personal-achievement profile. This means the older adults' good life history can affect present stages. Moreover, current behavior and status of older adults is significantly influenced by resilience. Resilience has significant positive relationship on the current health behavior, current financial well-being, and also social engagement. For health maintenance, only mental health maintenance is significantly influenced by resilience. Mental health can also be significantly affected by current financial well-being and current social well-being. Physical health is significantly affected by current health behavior. Lastly, personal-achievement profile can significantly lead to life satisfaction and well-being whereas resilience can significantly lead to self-actualization. For health maintenance, physical health maintenance can only lead to life satisfaction and well-being. However, mental health maintenance can lead to life satisfaction, well-being and self-actualization.

From our results, important factors such as resilience and mental health maintenance can positively influence successful aging. This study supports the important issue that older adults in Thailand can age successfully if they have sufficient support in their life courses which could bring them better current status and health maintenance. However, such improvement provide good opportunities for responsible governmental units, and/or institutions to implement more effective programs for older adults. The idea to start preparing for a good old age when a person starts getting older has to be changed. Successful aging does not happen overnight. Policy makers should see the potential of promoting resilience as the way to help older adults cope with the difficulties in later stage of their lives. Also, the policies which promote good mental health maintenance could provide more tendencies for older adults to access all aspects of successful aging. As this research focuses only on quantitative aspects; this could be the limitation of the research, but at the same time leaves the gap for additional research to explore a more qualitative view. Additional research could also apply in larger-scaled perspective to increase the tendency of successful aging.

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