FUNCTIONAL FOODS CONSUMPTION OF THE OLDER PERSON IN URBAN AREAS

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Abstract

This paper examines changes to the urban life of older person and functional food in three urban areas: KhonKaen, UdonThani and NakhonRachasima. All three were the subject of regional urban in the Northeast of Thailand, drawing on quantitative as well as qualitative data. In a sample of 397 men and women between 60 and 90 years of age. It was found that functional food consumption are governed by health beliefs such as risk perceptions, outcome expectancies, and optimistic self-beliefs. On the basis of these findings, effective healthy aging policies need to promote familial support and to provide elders with opportunities to interact with friends in the community. Psychological well-being and health-promoting behaviors should also be facilitated to enhance healthy aging.

Key words: Functional foods, Older person, Urban society, Healthy ageing.

Introduction

Half of the world’s population will live in urban areas by the end of this year and about 70 percent will be city dwellers. Urbanization refers to the increasing number of people that live in urban areas. It predominantly results in the physical growth of urban areas, be it horizontal or vertical. The United Nations projected that half of the world's population would live in urban areas at the end of 2008. By 2050 it is predicted that 64.1% and 85.9% of the developing and developed world respectively will be urbanized. (International Herald Tribune, 2008) Urbanization will lead to a rapid expansion of infrastructure and especially transportation usage. It is related Era of change as environmental, public utility, social change, economy, politics, governance and lifestyle. That changes under globalization. Whether it is the technology, communication, knowledge and development of human. Development is aim to stabilize both the economy and global competitiveness. Northeast of Thailand is a sector that has urban development and growth urbanization rapidly. There been studied the growth of urban, government projects and investment found that Nakhon Ratchasima, Khon Kaen and Udon Thani are growth and metropolis of the Northeast. There are center of transport, economics and population, are require a plan developed in all dimensions for quality urban society and support the development of national. (Department of Public Works and Town & Country Planning, 2008)

Recent developments in the "people" are important as well. Development plans of the country geared to people-centered development. And aims to create a better quality of life. National Economic and Social Development tenth plan with the direction of development to strengthen social capital, economic capital, natural resources and environment, is strengthened continuously. As well as the National Economic and Social Development eleventh plan to focused on developing a better quality of life in a balanced society. To advance to the “social living together happily with equality, fairness and immune to change” (Office of The National Economics and Social Development Board,)

Population structure in Thailand of current has changed. The number and proportion of older people increases rapidly. Thailand is enter to the “Population Aging”. People aged 60 years and over increased by more than 10 percent of the total population and the elderly are the groups that need to be taken care of by society be economic, social, or health. Human development of the health care is basic in development another. Current lifestyle of people has changed. Health care has focused on food consumption and Functional food. Functional food is nutrition solution and slow down the degeneration of the body. (Verbeke, 2005) Social development to achieve quality. Seniors need to be healthy, both physical and mental health. Older person need to be self-reliant economic, residential management and has a good relationship.

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The situation of the elderly and vulnerable in health therefore “Functional food” plays an important role in the health of the elderly. Functional food is food and beverage with the addition of certain nutrients as natural extracts, reduce the disease risk. One factor current functional food are popular because urban living and lifestyle be daily food consumption behavior change, hastiness, lack of exercise combined with environment the degraded. These are in poor health and diseased for example obesity (fat) stress and cancer (National Food Institute, 2009) The intention of this paper is to describe the functional foods consumption and classification of the older person in urban area in the northeast of Thailand.

Objectives

This research attempts to answer with regard to study functional foods consumption and classification of the elderly in urban areas.

Methodology

This research process is mixed method research comprise quantitative research and qualitative research. Study personal characteristics that affect functional foods consumption, functional foods categories popular of the elderly and context of the elderly in urban areas.

Quantitative research tools is questionnaire. Questionnaire focused on the collection of statistical data of the elderly in urban areas. Study area in Khon Kaen Municipality, the Municipality of Nakhon Ratchasima and Udon Thani municipality 397 samples. Analysis and the relationship of a personal nature, social support and motivation towards functional foods consumption among the elderly in urban areas. Include the type and characteristics of functional foods to the elderly in urban consumption.

Qualitative research tools are depth interviews and focus group of the elderly and seniors organizations in municipalities and three provinces.( Khon Kaen Municipality, the Municipality of Nakhon Ratchasima and Udon Thani municipality) This analysis is the process of urbanization to functional foods consumption, consumption trends and health care among the social changes in globalization.

Results and discussion

The elderly in urban context

From the collection of general information of the respondents. The elderly male 207 (52.1%) and female 190 (47.9%). The elderly be maximum age 90 years and mainly 60 years old accounted for 18.4%. Mainly graduate in elementary education 79.6% and the number of family members about 3 people. Mainly revenue about 10,000 baht per month accounted for 50.6% and another group revenue about 20,000 per month accounted for 17.6%. Do private business accounted for 35.5% of the main income comes from occupation and support from descendant accounted for 65.2% and 34.8%. The mostly elderly functional foods choices mainly because of the main support of the family is up to 49.1% and the other social support including television, newspapers and the internet in the medium levels. Mainly are motivated to functional foods consumption in most levels.

The consumption of functional food and reviews in various fields most likely at a high level. Such as functional food consumption behaviour the highest level is 76.1%. The opinions of elderly for functional food improve their health mainly in the high level 44.1%. Functional foods consumption of the elderly in urban area correlated with social support and motivation from family, peers and social values such as descendant support to consumption to health. Personal characteristics, gender, age, income, education levels are correlated with functional foods consumption of the elderly in urban area statistically significant at the 0.01 level.

Functional foods are nutrient that helps the body to a certain point, the better or reduce the risk of certain diseases. The main reason for the popularity of the elderly consumer choice including personal reason and urban environment changes. The urbanization cause many changes whether are economic, environment, daily life, behavior and channels in food consumption different types of seniors. Current diet ingredients in the cooking, it can not produce itself and unknown origin nutrition makes it and risky. The elderly have the time to manage change. Especially those who operators private business or work in the private sector mainly ready-
made meals and buy food outside the home. Take care of independently of the elderly by dietary nutrition. Functional foods consumption as an alternative to health care of the elderly.

**Functional foods classification of the elderly in urban areas**

Elderly popular choice the most consumed in the form of drinks / liquids to 60.2% of the elderly Mainly popular functional foods consumption in group 1 type of nutrition and health most high level accounted for 76.1% and followed by the group 2 used in the prevention and treatment of disease accounted for 23.9%. Decision functional food consumption of the elderly from the family suggested to 58.9%. And there is reason to maintain a healthy accounted 76.1% for the prevention and treatment of disease accounted for 23.9%.

Noted that the main reasons for functional food choices consistent with functional food popularity of the elderly. Mainly are consumed 2-3 times in a week accounted for 55.2% and buy functional foods more than 1 time in a month accounted for 59.7%.

Functional food be able to keep protective health. Functional foods consumption meaning and implications of the nutrients needed to sustain life for quality of life in urban area. (Sikorski, 2007) Environment and population going to urbanization, broader communication are affected for health of elderly and functional food consumption of the elderly in urban area. Therefore we need to focus on the health care of the elderly. Quality of life is healthy and good mental health of the elderly in urban area.

Population aging has widely discussed implications for social planning, health care, labor force structural changes, and entitlement programs. Development is the quality of life of the elderly. To the aging society in the future it is important. The results of this study found that the results of this study support and The change in the same direction. And increase of the aging population. Will see that there are seniors who have opinions on the issue of population structure changes with increasing number of elderly in highest level accounted for 82.1%.

Preparing The aging society Most seniors are reviews on food consumption Health and think positive food consumption Health is a good way of self-care. (Verbeke, 2005) Health care is balanced with three aspects health care consuming the right foods, exercise and healthy mood.

The perspectives of Latin America as a potential producer and consumer of functional foods will depend largely on the level of information and income of the population. In Latin American scientific and regulatory communities, the functional foods concept has been associated with foods having health benefits beyond those of basic nutrition but is not defined officially in the emerging regulatory codes. Future prospects will be the aging society. (Dwyer, 2001) This study found that older people aware of this change. And health care start by food consumption But the urbanization is have limited the time, nutrition and environment. Functional food is an important health care.(Taylor, 2010) Elderly in Khon Kaen, Udon Thani and Nakhon Ratchasima functional food consumption is in health care important.

Preparing a healthy body or consistent with the lifestyle in the city. Which was prepared with the pace of aging society are happy and healthy under the expansion of the current urban.

**Recommendation**

This study proposes an approach to improve the quality of life of the elderly under the concept of the elderly is a person of value. Accordance with the health system. The second main issues are feedback for social development policies of the government support knowledge about functional food consumption. And strengthening the concept of holistic health. Developed in four dimensions: physical, emotional, social and intellectual. Can lead to further study in the "Inclusive Innovation" and family to manage food. On the basis of these findings, effective healthy aging policies need to promote familial support and to provide elders with opportunities to interact with friends in the community. Psychological well-being and health-promoting behaviors should also be facilitated to enhance healthy aging.

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