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A Study on Community Senior Citizen Center as the Senior Health Care Center Vitalization Plan Measures

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Abstract

Purpose. This study aims to explore Situations and Problems of the Community Senior Citizen Center as the senior health care and the Elderly's Leisure status. Then, aims to arrange Activation Vitalization Plan of the senior's leisure in Community Senior Citizen Center.

Methods. The literature and data used in this study was based on a questionnaire survey, mostly from Gyeongki-Do Community Senior Citizen Center Branch and statistical research data. Literature review and analysis frequency was by reference to the paperback and academic papers related to the senior health welfare.

Results. First, the period of the seniors with the Community Senior Citizen Center as health facilities has appeared in 6-10years(32.8%), followed by the response showing that more than 10years(32.4%). Therefore, it reveals that the senior live in the same region in the long term. Second, the number of days that the senior health care the Community Senior Citizen Center has been used by the senior was over 5days. This result was supported by 608people(61.7%). Both men and women replied that they use the health center more than five days. Third, the number of the senior who responded that they use the Community Senior Citizen Center as health facilities 629people(63.9%). They replied that they use the facilities mostly afternoon. The senior use the facilities all day appeared to 263people(26.7%).

Conclusions. It seems like that there needs to be a variety of personalized programs that can be added to increase the life satisfaction of the senior participation in leisure programs for the Community Senior Citizen Center as senior health facilities in the future. Additionally, the government needs to require a wide range of financial support for the Community Senior Citizen Center as senior health care and devise the strategies that will lead the health center for the senior need to be actively utilized.

Key Words : Health Care, Senior Citizen Center, Senior Leisure, Vitalization Plan

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1. Introduction

South Korea is already in progress rapidly of becoming early aging society. According to the "2015 indicator of South Korea society" published by National Statistical Office show that more than 65-year-old Korean population is 13.1%, 24.3% in 2030, 32.3% in 2040. This percentage is expected to continue to increase to 40.1% in 2060¹⁾.

Currently, leisure time in Korea has been increased than ever before. This trend has become particularly noticeable in old age group. In the past, traditional society tends to regard a leisure as a luxury leisure or recreational activities, but the current society that emphasizes the knowledge and information firmly believes that everyone deserves to enjoy their leisure.

The Senior who retired from their jobs have excessive pastime so the leisure time can be tedious time rather than an enjoyable and fruitful leisure time. Such persistent inaction can lead the senior to consider their life boring and painful life and it also can cause the isolated lifestyle.

The loss of economic power and anxiety caused by the body's aging, health anxiety, loss of roles in the family and society, and the emotional distress like loneliness and alienation are important factors in causing a loss of value to the lives of the senior. Therefore, many seniors are living in dull life because of the dissatisfaction with their lives and emotional social stress about their lives.

These seniors gathered in the Community Senior Citizen Center and spend leisure time in Korean chess, chess, Monarch, gambling, drinking, TV watching and more. Some Community Senior Citizen Centers tend to exclude the common senior as they were dominated by the certain group of seniors which hinder these centers work as part of a whole community facilities for

the other senior²⁾.

The leisure of seniors in Community Senior Citizen Center that is accessible to the local citizens needs to be vitalized solving the problems of insufficient facilities and programs utilization as it is turned away by local seniors.

On the one hand, there is a rampant view that regard the Community Senior Citizen Center as a counterproductive place for idle seniors instead of being considered a place which provides the senior with various productive information.

The Community Senior Citizen Center is very diverse ranging from 30 to over 40 years old ones that were built in 1970's as a part of New Community Movement to the facilities being built these days. Also, the space of the Community Senior Citizen Center is average 20-30 per Square meters which shows that the most of the Community Senior Citizen Centers are having difficulty accommodating more than 15 senior people. Although the centers are built for information exchange and the leisure of the senior, it seems hard to keep up with the operation without the assistance of volunteers because the senior who utilize these centers are older than 75 years old³⁾.

Local governments have a poor budget plan and don't have a decent operating system which lead them to run the centers by hiring unqualified instructors and volunteers. Therefore, it is hard to expect to see the effective operation of the centers and high-quality programs and events. There problems of old age can be summarized by the end of poverty, health, loneliness, the loss of roles respect, etc. Therefore, the loss of roles in the society becomes the societal problems that need to be addressed in our society as the senior have no place to relieve their tedium.

In addition, there are many existing research literature research fields examining the reality of elderly leisure utilization, but there are still needs

to explore the senior leisure Activation Plan, to identify the problems, analyze the active elderly leisure plans, to propose the concrete plans to policy-makers who are in charge of building, operating the senior centers, and applying to support the installation and operation of facilities for the senior leisure⁴⁾. In reality, all those needs are not met yet.

The purpose of this study aims to explore the current status and problems in the community citizen senior center for the senior Health Facilities and provide the plans for vitalizing the Community citizen senior center. In addition, this study has the significance as it provides the basis data for improving the quality of the senior centers in response to the aging trend of the population. Therefore, this study will be used to investigate the status and problems in order to vitalize the senior centers.

2. Subjects and Methods

2.1. Research Methods

This study will be dedicated to explore the current status and problems of how the senior health care the community citizen senior center and to provide the way of activating the senior leisure suggesting policy options for addressing the issues.

2.2. Research Subjects and Analysis

The documents used in this study and the data were mostly based on questionnaire. Also, it explores the statistics and study materials that were issued by the internet, National Statistical Office, Ministry of Health and Welfare, Cheon-an City Hall. Additionally, this paper references the data, study paper, and various media that have been published for literature review and frequency

analysis.

3. Results

3.1. Status of the National Senior Health Leisure Welfare Facilities

According to Table 1 the number of community senior centers is 51,287 and the number of the senior classrooms that have been installed 819 which is as little as 62%. Although the table does not contain the exact status of the senior classroom or college for the senior, the data implies that the situation of senior classroom installation and operation are also very poor in the Cheon-an area.

Table 1. National Senior Health Leisure Welfare Facility Status

Community citizen senior center	report	50,682
	not-report	605
Sub Total		51,287
Senior Welfare Center		2
Senior class		819
Senior retreat		3
Total		51,531

3.2. Status and operation status of the headquarters in Gyeongki-do

The number of the Community Senior Citizen Center, as shown in Table 2 above is 630, there are 573 of grandmother rooms. The number of the senior is 30,240 as the senior population is 7.6% and the personnel per facility seems to be in very cramped conditions as each facility accommodates 48 people.

Table 2. The Community Senior Citizen Center 51,287 and the senior population, the number of people per facility

Divison	Total
Community Senior Citizen Center	630
Grandma room	573
Members	30,240
senior population	42,064
senior population %	7.6%
Number of people Per facility	48

3.3. Participation Status of senior Health Facilities

3.3.1. The Use term of the Community Senior Citizen Center as senior health facilities

Period of utilization of the Community Senior Citizen Center, as shown in Table 3 the above, appeared 6-10 years (32.8%), followed by a response by more than 10 years (32.4%) that elderly people living in long-term in ons region. For men, the respondents appeared more than 10 years, the highest 35.7%. This shows that a man living in a longer period than women in the region as 34.1% women respondents appeared to live in one region 1-5 years.

Table 3. The Use term of the Community Senior Citizen Center as senior health facilities (per year)

Division	under 1 year	1 to 5 years	6 to 10 years	over 10 years	No answer	Total
Total	48 4.9%	293 29.7%	323 32.8%	319 32.4%	2 0.2%	985 100%
Man	23 4.4%	137 26.0%	178 33.8%	188 35.7%	1 0.2%	527 100%
Woman	25 5.5%	156 34.1%	145 31.7%	131 28.6%	1 0.2%	458 100%

3.3.2. The use days of the Community Senior Citizen Center as senior health facilities (per weekly)

The days of utilization of the Community Senior Citizen Center, as shown in Table 4 above, showed 608 people (61.7%) responds that they use the center over five days and both male and female respondents replied that they use the center over 5 days which means they utilize the center every day. 255 seniors(25.9%) answered that they use the center 3 to 4 days, and 119 respondents(12.1%) said that they use the center 1-2 days.

Table 4. The use days of the Community Senior Citizen Center as senior health facilities

Division	1 to 2days	3 to 4 days	More than 5 days	No answer	Total
Total	119 12.1%	255 25.9%	608 61.7%	3 0.3%	985 100%
Man	71 13.5%	162 30.7%	292 55.4%	2 0.4%	527 100%
Woman	48 10.5%	93 20.3%	316 69.0%	1 0.2%	458 100%

3.3.3. The use hours of the Community Senior Citizen Center as senior health facilities

The hours of utilization of the Community Senior Citizen Center, as shown in Table 5 above, was 629 people (63.9%) responded that the use of most the afternoon, when using the center all day appeared to 263 people (26.7%). While 67.9% of male respondents utilize the center, 59.2% female respondents used the center in the afternoon.

Table 5. The use hours of the Community Senior Citizen Center as senior health facilities

Division	A.M	P.M	All day	No answer	Total
Total	91 9.2%	629 63.9%	263 26.7%	2 0.2%	985 100%
Man	53 10.1%	358 67.9%	116 22.0%	0 0%	527 100%
Woman	38 8.3%	271 59.2%	147 32.1%	2 0.4%	458 100%

3.3.4. The reason of using the Community Senior Citizen Center as senior health facilities

577 people (39.5%) replied that they go to the center to spend the time while 246 people (16.8%) were responding that they use the center because it is beneficial. 223 people(15.3%) responded that they use the center to participate in the program. Both men and women are to spend time with friends. 72.8% of the senior people who live alone or with one's spouse only visit the center to find companies.

Table 6. The reason of using the Community Senior Citizen Center as senior health facilities

Division	spent time with friend	Have no place to go	Recreation Benefit	enjoy playing the game	To participate program	Total
Total	577 39.5%	199 13.6%	246 16.8%	217 14.8%	223 15.3%	1,462 100%
Man	315 44.1%	96 13.4%	146 20.4%	74 10.3%	84 11.7%	715 100%
Woman	262 35.1%	103 13.8%	100 13.4%	143 19.1%	139 18.6%	747 100%

3.4. Status of the program

3.4.1. Program operation Status

As shown in Table 7 above, showed, Hangeul education 177, Sex education 139, Recreation 126. Enforcement agencies is City Senior Branch 270, Health Authority, etc 81.

Table 7. Programs operation Status

Program operation Status	Division	Total
	Collaboration	59
	Sisterhood relationship	40
	Recreation	126
	Performing in Arts	28
	Sex education	139
	Korean Studies	40
	Hangeul education	177
	Sing, Health, Others	74
Enforcement agencies (organizations)	City Senior Branch	270
	Public Health Center	245
	Health Authority, etc	81
	Grand Total	630

3.4.2. Status of the Community Senior Citizen Center offer program

Programs provided by the Community Senior Citizen Center, as shown in Table 8 above, were health-related up to 400 patients (28.4%), 341 people (24.2%) also responded in health care. However, there are 175(12.4%) responded that they think there are no program to participate. Therefore, we will need to operate a variety of programs to train senior leaders.

Table 8. The Community Senior Citizen Center offer program Status

Division	Total	Man	Woman
Health Medical treatment	341 24.2%	157 21.4%	184 27.3%
Health relation	400 28.4%	176 24.0%	224 33.2%
Recreation relation	196 13.9%	101 13.8%	95 14.1%
Culture education	79 5.6%	46 6.3%	33 4.9%
Hobby relation	46 3.3%	28 3.8%	18 2.7%
Volunteer	91 6.5%	63 8.6%	28 4.2%
Income business	79 5.6%	62 8.5%	17 2.5%
Etc	175 12.4%	100 13.6%	75 11.1%
Total	1,407 100%	733 100%	674 100%

3.4.3. Status of desired program for Community Senior Citizen Center Activation

As shown in Table 9 above, desired program of Community Senior Citizen Center for center vitalization was related to the health program as 225 people (34.2%) responded. The number of people who wished to have recreation is 195 people (29.1%). However, there is no one who showed the interest in volunteer and this indicated that many people who are older than 70 are interested in their self-health management rather than volunteering. Thus, it seemed that the future plan needs to combine personalized health care treatment and education.

Table 9. Status of desired program for Community Senior Citizen Center Activation

Division	Total	Man	Woman
Health Medical	137	65	72
Hand Acupuncture	20.9%	19.9%	21.8%
Health relation	225	117	108
Gymnastics	34.2%	35.8%	32.7%
Recreation relation	195	96	99
Singing classes	29.7%	29.4%	30%
Education	56	23	33
Hangul computer	8.5%	7%	10%
Hobby relation crafts	13	3	10
	2%	0.9%	3%
Volunteer	0	0	0
	0%	0%	0%
Income business	22	16	6
	3.3%	4.9%	1.8%
Etc	9	7	2
	1.3%	2.1%	0.6%
Total	657	327	330
	100%	100%	100%

3.5. Status of Financial support

3.5.1. The necessity of charges for using Community Senior Citizen Center as senior health facilities

The need for charges in using Community Senior Citizen Center, as it is shown in the Table 10 above, seems to be necessary. 269 (40%) people said that the charges must be needed while 108(16%)people responded that the expense is not needed at all. Therefore, the result implied that the elements areas that require personal expense need to be improved considering the senior with no income

Table 10. The necessity of charges in using Community Senior Citizen Center as senior health facilities

Division	Absolutely need	Kind of need	Don't need	Total
Total	269	298	108	675
	40%	44%	16%	100%

3.5.2. The range of charge in Community Senior Citizen Center as senior health facilities(Weekly)

The range of charge in Community Senior Citizen Center used during weekly, as shown in the above Table 11, is 263people less than ₩10,000(39%), ₩20,000~₩30,000, 246 people (36%), ₩40,000~₩50,000, 94people (14%), and ₩50,000 or more were 72people (11%). Thus, it appears that the support of expense is needed as the charge is related to the attendance.

Table 11. The range of charge in Community Senior Citizen Center as senior health facilities(Weekly)

Division	Under 10,000	20,000~30,000	40,000~50,000	Over 50,000	Total
Total	263	246	94	72	675
	39%	36%	14%	11%	100%

(₩=Won)

3.5.3. The purpose of charge use in Community Senior Citizen Center as senior health facilities

The purpose of charge used in Community Senior Citizen Center, as shown in the above Table 12, is 374people for Fellowship(56%), Community Senior Citizen Center operations support 169people(25%), Volunteer work 41 people(6%), gambling 91 people(13%). Therefore, the total amount of expenses for supporting Community Senior Citizen Center operation (25%) need to be fully assisted.

Table 12. The purpose of charge use in Community Senior Citizen Center as senior health

Division	Operations				Total
	For Fellowship	Community Senior Citizen Center	Volunteer	Gamb-ling	
Total	374 56%	169 25%	41 6%	91 13%	675 100%

4. DISCUSSION

It is necessary to develop a variety of personalized program that can increase the life satisfaction with the senior health care center as the center.

Considering that Senior Citizen Center as the health facility for the senior has very simple leisure activity program, Community Senior Citizen Center need to provide the programs such as volunteering for young people that contribute significantly to the senior, interest, curiosity, emotional edification, hobbies, health, recreation, relaxation and socializing, education and counseling, which is income the sectional program of collaboration⁵⁾.

Especially, smooth program operation and a program that invokes laughter and sensibility

needs to be developed to prevent recreational program participation of older age group rates from being decreased.

There should also be a focus on the development programs of Community Senior Citizen Center as senior health facility and specialized faculty and placement. The programs should be aimed for the recovery from the loneliness and sense of loss that come with old age as it provides personalized expertise as a format of mentor and mentee. It should ensure a Community Senior Citizen Center can be used as the cultural space of meeting.

If we are operating the program that encourage the engagement with senior residents and their families and ensure residents to be able to live with empathy, the center might serve as a cultural space to reduce the gap between generations. In particular, the personalized service is needed in order to meet the complex needs of the senior. Various services such as leisure, health care service, and volunteer program need to be integrated and provided in order to vitalize the center.

In a study of Jae-mo Lee, pleasant green environment and atmosphere will vitalize the utilization of the center and change the misconception of leisure and the solidarity program between local area and the families should be increased⁶⁾.

Meanwhile, subsidy of the government to Community Senior Citizen Center as the health facility should be improved and should be supported depending on the size differential, plant and equipment, members, staff utilization, activity program, and operational capabilities.

Also, the appropriate level of Community Senior Citizen Center as the health facility operating costs should be ensured to reduce the amount of individual member fees and this will secure the financing possible⁷⁾.

In particular, the joint efforts of local organization and administrative organization should be proceeded with active intervention by securing the funding and exercising the evaluation in order to encourage productive competition.

And a Community Senior Citizen Center as the health facility of our country needs the improvement in awareness of the senior leisure culture. To break the stereotypes of the senior, training family members and youth are needed on regular basis and variety of experiences should be provided to the senior. Since social protection for the senior is needed and social security systems that can support situation is also insufficient, the awareness of the need to switch over the through mass media and education. Since one of the main purpose of local self-government system is minimizing regional disparity among the regions, the local governments should take full responsibilities for improving the quality of the life of the senior⁸⁾.

In this time, the improvement of the awareness the leisure in Community Senior Citizen Center as the health facility can be truly meaningful. In addition to the national policy action plan, the various action plans that reflect various needs of the senior will further improve the life satisfaction of the senior.

5. Conclusion And Suggestion

This study examines the Activation Plan of the Community Senior Citizen Center as senior welfare facilities.

The main challenge of the senior's welfare in 21st century is the problem of the senior in leisure service activation. Therefore, the Community Senior Citizen Center as the health facility that can provide personalized program for a variety of program expansion needs to be increased. Also, a variety of creative programs need to be devel-

oped in order to increase the life satisfaction for recreation programs participation of senior.

Especially the Community Senior Citizen Center as the health facility will be improvement needs to be improved as it realizes the advancement of expansion and modernization. In reality, an aging senior culture, it is not an exaggeration that facilities for the senior needs to be improved gradually as the society becomes industrialized and urbanized.

In addition, the professional staff and training and placement, and programs development of Community Senior Citizen Center should be focused. Since the Community Senior Citizen Center is a major recreation but the need for the center is not well recognized, problems should be prevented in advance to place a lot of expertise in project implementation⁹⁾.

Activation is required to induce an active financial support expansion and improved delivery system for Community Senior Citizen Center as the senior Health Facilities. The efforts of senior welfare authorities is important, but the effort for operating the community Senior Citizen Center as health facility more efficiently should be proceeded as it recognizes the importance of leisure.

The Community Senior Citizen Center as the health facility needs the awareness of the elderly leisure culture. Wisdom that can induce the government's interest and support is needed and all effort for restoration of the senior culture and realization of desirable senior culture seem to be necessary.

The government should promote the activation of Community Senior Citizen Center as the health facility as it selects the desirable center and promote the exemplary cases of the senior center management seeking the vitalization of the senior center. Also, the government needs to raise the image of the senior center so as to encourage continuous development of senior center

vitalization.

Depending on regional characteristics, various programs need to be developed with consistency and 'fun senior center' vitalization should be proceeded through active promotion. To improve the senior health, the senior needs to be guided to participate in various competition in order to prepare better plans for their lives as they learn active and proactive life style.

The senior centers should encourage the senior who are willing to volunteer to sustain active life by developing the programs of the Community Senior Citizen Center such as volunteer program and placing specialized faculty¹⁰⁾.

Finally, a limitation of this study was the fact that the research on Community Senior Citizen Center as the health facility was limited to the related members. There was a limit to present the health facility status of the whole country. In subsequent studies and research, first, the whole country needs to be subject of the study. Second, because of the distinction between urban and rural areas was vague and a wide range of regional differences are unclear which led this study inaccurately to identify the differences between individual characteristics and population. But It is shown that the result of the study of the Community Senior Citizen Center as the health facility has many suggestions in providing directions for the improvement and the outcome of the study would be improved if the shortcomings are supplemented in next study.

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