Chapter **3**

Results

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Chapter 3

Results

The survey results are described in line with three aspects related to the preparedness of motorcycle taxi drivers for old age: (1) health, (2) socio-economic participation, and (3) security.

1. Health

Health Status

Almost half of the motorcycle taxi drivers have chronic diseases, the women more than men. The most common are hypertension, allergies, and diabetes. Three-fourths see a physician regularly, exercising their entitlement to health security benefits (gold card) and social security. Most say their illnesses are work-related, e.g. body aches and pains and allergies. About one-fourth (28.5%) have met with traffic accidents. They all say that the three most common work-related problems are dust pollution, traffic congestion, and accidents, which are partly solved by using protective equipment. All use a safety helmet and more than half (53.8%) use facial masks. One-third (33.8%) use sunglasses.

Health-related Self-care

Motorcycle taxi drivers take greater care of their mental than physical health. Nearly all say they understand that they cannot avoid unfavourable events, so they are ready to live with them and follow and observe religious teachings. More than 90% of motorcycle taxi drivers adopt mental health practices, including maintaining a positive outlook, controlling their emotions, participating in religious ceremonies, praying, and giving alms.

To promote physical health, more than 90% of the motorcycle taxi drivers said they regularly eat more fish, vegetables, and fruit. More than 80% said they try to get sufficient rest. About three-fourths follow healthcare advice. About half, however, do not have annual health check-ups or exercise 30 minutes a day at least 3 days a week. Women (66.7%) are more likely than men (43%) to have annual health check-ups and to seek knowledge about personal healthcare (83.3% for women, 72% for men). Some respondents engage in risk behaviours. Nearly three-fourths said that they prefer sweet, fatty, and salty food. Drinking is generally recognised as a risk behaviour, but more than half of the men said they drink alcohol. Group interviews showed that the main purpose of visiting doctors is to get medical certificates rather than consult about health. The certificates are required to apply for and renew motorcycle taxi licenses (Table 3.-1).

Men (94.0%) fare better than women (73.3%) in 'letting it go', not becoming stressed, and not overthinking. Women carry double burdens of family care and income earning (Table 3-1).

The questionnaire included a question about health services that respondents had used or received so far: general treatment, health information, and advice on occupational safety and health. More women than men received such services. Fewer than 50% of respondents receive healthcare and disease prevention services.

The main health providers are health centres, whilst the providers of occupational safety and health services are BMA district offices and motorcycle vendors. The important sources of health information are radio and television.

Recommendations on Preparedness

Motorcycle taxi drivers suggested that health services, including health inspection and education, would be much more accessible if they were provided at motorcycle taxi stands. Motorcycle taxi drivers also suggested that a system or scheme should be established to cover the cost of treatment of victims of work-related accidents.

Factors Related to Preparedness in Terms of Physical and	Female (n	i=30)	Male (n=	100)	Total (n=130)		
Mental Health	Number % Number % N		Number	%			
Service used or received							
- Healthcare and disease prevention	10	33.3	36	36.0	46	35.4	
- General treatment	28	93.3	84	84.0	112	86.2	
- Treatment for underlying diseases	14	46.7	31	31.0	45	34.	
- Advice on occupational safety and health	23	76.7	58	58.0	81	62	
- Aid in time of accidents*	2	6.7	26	26.0	28	21.	
- Aid in time of emergency illness*	2	6.7	3	3.0	5	3.	
- Health-related information	26	86.7	82	82.0	108	83.	
*Asked only of respondents who had accidents or illnesses re	quiring emerg	ency car	e.				
urrent practices							
- Have physical check-up	20	66.7	43	43.0	63	48.	
- Have check-up for specific diseases	13	43.3	31	31.0	44	33.	
- Seek knowledge on health	25	83.3	72	72.0	97	74.	
- Do 20–30 minutes daily exercise at least 3 days/week	14	46.7	45	45.0	59	45.	

Table 3.1. Factors Related to Preparedness in Terms of Health

- Always keep body moving	30	100.0	100	100.0	130	100.0
- Eat healthful foods	27	90.0	90	90.0	117	90.0
- Eat fish, vegetables, and fruit regularly	27	90.0	96	96.0	123	94.6
- Take Nutritional supplements	9	30.0	33	33.0	42	32.3
- Take energy drinks	11	36.7	74	74.0	85	65.4
- Consume sweet, fatty, and salty foods	27	90.0	69	69.0	96	73.8
- Smoke cigarettes	4	13.3	30	30.0	34	26.2
- Drink alcohol	7	23.3	60	60.0	67	51.5
- Try not to be stressed	23	76.7	92	92.0	115	88.5
- Observe and practice religious teachings	30	100.0	97	97.0	127	97.7
- Practice religious activities	28	93.3	94	94.0	122	93.8
- Pray	19	63.3	53	53.0	72	55.4
- Pay respect to Buddha	26	86.7	83	83.0	109	83.8
- Give alms to monks	26	86.7	71	71.0	97	74.6
- Merit-making	27	90.0	90	90.0	117	90.0
- Meditate	3	10.0	11	11.0	14	10.8
- Be mindful	29	96.7	99	99.0	128	98.5
- Accept that some problems cannot be solved	30	100.0	99	99.0	129	99.2

Practices related to preparedness for old age

- Exercise 30 minutes a day						
at least 3 days a week	15	50.0	45	45.0	60	46.2
- Eat healthful foods	27	90.0	96	96.0	123	94.6
- Eat food from the 5 food groups	28	93.3	98	98.0	126	96.9
- Reduce risk behaviour,						
e.g. smoking cigarettes, drinking alcohol	28	93.3	56	56.0	84	64.6
- Have health check-ups	21	70.0	44	44.0	65	50.0
- Seek knowledge on healthcare	25	83.3	70	70.0	95	73.1
- Do not overwork	24	80.0	72	72.0	96	73.8
- Let it go, do not be stressed	22	73.2	94	94.0	116	89.2
- Be optimistic	30	100.0	99	99.0	129	99.2
- Control emotions	29	96.7	100	100.0	129	99.2
- Do activities with family	30	100.0	95	95.0	125	96.2
- Do activities with community	24	80.0	53	53.0	77	59.2
- Pray, give alms, meditate	30	100.0	94	94.0	124	95.4
- Join religious activities	30	100.0	95	95.0	125	96.2

2. Socio-economic Participation

Action Taken with Regard to Socio-economic Participation

All the motorcycle taxi drivers want to continue working into their advanced years. Nearly all (96.2%) want to continue for at least 5 more years and more than half (61.5%) want to do so as long as possible. The motorcycle taxi drivers do not want to switch to other work, partly because of their income and partly because of their age. For those older than 45 years, no other work offers independence and generates so much income.

Those who state that they earn sufficient income for their daily living constitute 85.4%, but almost everyone (97.7%) says that they can financially support family members. To build their capacity to participate in the economy, more than half say that they try to learn how to use new information and communication technology (ICT) tools. Women are more likely to work on improving their ICT skills than men (76.7% vs. 63.0%). Almost all respondents have made efforts to take care of their family members by improving their living conditions and offering moral support and advice. Only 20% of respondents said they participated in community activities for the public good; women participate significantly more than men (66.7% vs. 47.0%) (Table 3.2).

As members of a stand, all motorcycle taxi drivers receive information on services related to work. More than half (60.8%), and more women than men, have received education and/or additional training on their current work, whilst few (9.2%) have received training for new occupations. A constraint on training of women is that they must look after their families. The training that motorcycle taxi drivers want most is in English and Chinese conversation because it can help them better serve an increasing number of tourists and visitors (Table 3.2).

The sources of work information are the head of the stand or members of the stand committee and BMA district offices. The major sources of education and training information are BMA district offices and motorcycle vendors, whilst the main vocational development agencies are BMA's vocational training schools.

Preparedness for Ageing through Socio-economic Participation

More than 95% of the motorcycle taxi drivers said they are diligent, persevere, and keep in good health, with almost 90% keeping abreast of information on their occupation or on income generation. Yet, only 61.5% are interested in information on work-related skills development. These practices are all related to their current occupation, whilst far fewer respondents try to find information on work to supplement their income (45.4%), possible career change (33.1%), and vocational training (6.2%). Female respondents are more likely to keep up with changing occupational trends or income generation (100.0% of females, 83.0% of males), seek information to develop vocational competence (73.3% of females, 58.0 of males), and join vocational training (13.3% of females, 4.0% of males). Male drivers are more engaged in seeking information on possible career change (38.0%)

of males, 16.7% of females) and looking for supplementary work (53.0% of males, 20.0% of females) (Table 3.2).

In family relationships, more than 90% of motorcycle taxi drivers give care, advice, and moral support to family members; model filial piety; provide financial and material assistance to family members; teach children how to show gratitude; and participate in family activities. Women and men have similar rates of practice. (Table 3.2)

In community relationships, more than 70% of motorcycle taxi drivers maintain relationships with peers, follow community news, and help with community work such as funerals and weddings. More than half the motorcycle taxi drivers help with public work. Less than half organise community groups. More women than men foster community relationships to prepare for ageing (Table 3.2).

Recommendations on Preparedness

Motorcycle taxi drivers attach importance to management of influential figures, illegal stands, and GrabBike, which have a direct impact on their income and work security. Other issues they focus on are fixing the location of motorcycle taxi stands, training for alternative occupations when they cease their current work, and promoting their employability in old age if they return to their original domicile.

Factors Related to Preparedness in Terms of Socio-economic Participation		n=30)	Male (n=100)		Total (n=130)	
		%	Number	%	Number	%
Service used or received						
- Development of capacity for new occupations	4	13.3	8	8.0	12	9.2
- Additional learning and/or training	22	73.3	57	57.0	79	60.8
- Information related to present occupation	30	100.0	130	100.0	130	100.0
Practices to improve the quality of current life						
- Earn sufficient income for daily consumption	26	86.7	85	85.0	111	85.4
- Be thrifty	30	100.0	96	96.0	126	96.9
- Be able to financially support family members	30	100.0	97	97.0	127	97.7
- Learn to use new ICT devices	23	76.7	63	63.0	86	66.2
- Help with family activities	28	93.3	96	96.0	124	95.4
- Give support to family members, such as moral support	29	96.7	98	98.0	127	97.7
- Participate in activities designed for the public good	20	66.7	47	47.0	67	51.5
- Participate in community cultural and traditional activities	23	76.7	50	50.0	73	56.2
- Chat or exchange views with neighbours	28	93.3	88	88.0	116	89.2
Practices related to preparedness for old age						
- Keep healthy	29	96.7	96	96.0	125	96.2

Table 3.2. Factors Related to Preparedness in Terms of Socio-economic Participation

- Work hard	30	100.0	100	100.0	130	100.0
- Seek information to develop occupational competency	22	73.3	58	58.0	80	61.5
- Seek supplementary work	6	20.0	53	53.0	71	54.6
- Seek information that is useful for career change	5	16.7	38	38.0	43	33.1
- Attend training programmes	4	13.3	4	4.0	8	6.2
- Seek friends or networks to support present occupation	15	50.0	50	50.0	65	50.0
- Follow information on changes related to occupation or earnings	30	100.0	83	83.0	113	86.9
- Maintain close relationships with family members	29	96.7	100	100.0	129	99.2
- Give moral support to family members	29	96.7	99	99.0	128	98.5
- Give financial support to family members	30	100.0	97	97.0	127	97.7
- Join activities with family members	27	90.0	92	92.0	119	91.5
- Teach children how to show gratitude	29	96.7	96	96.0	125	96.2
- Model filial piety	29	96.7	99	99.0	128	98.5
- Maintain relationships with peers in the community	28	93.3	81	81.0	109	83.8
- Regularly follow community information	29	96.7	79	79.0	108	83.1
- Help with various community events, e.g. funerals or weddings	25	83.3	74	74.0	99	76.2
- Assist others in the community	19	63.3	59	59.0	78	60.0
- Help with community activities for the public good	20	66.7	49	49.0	69	53.1
- Join community groups	17	56.7	44	44.0	61	46.9

3. Security

Actions Taken with Regard to Security

Of the motorcycle taxi drivers, 78.5% have a financial plan for their future, whilst only 69.2% (80% for females, 66% for males) have savings or property for this purpose. More than 95% think it is important to maintain good family relationships to prepare for old age, model filial piety, and teach their children how to show gratitude to their parents (the motorcycle taxi drivers); 86.2% have prepared for future accommodation.

Nearly every motorcycle taxi driver with domicile in the upcountry (97.3%) keeps contact with family members back home; 80.7% want to return home. The connection with the original domicile is part of long-term security, and women more than men maintain more contact with their families back home.

Less than half of the motorcycle taxi drivers have received assistance for financial, family, and health problems. However, few (19.2%) have received advice on housing problems and even fewer have received assistance for housing problems. People who are pivotal in supporting motorcycle taxi drivers' life security include family, relatives, and friends, who are the main advisors and main assistance givers. Some motorcycle taxi drivers have sources of assistance other than family, e.g. informal loan sources, specialised financial institutions, and commercial banks. However, when it comes to housing, only 10.8% (all men) say that they have used or received housing loans from financial institutions.

The motorcycle taxi drivers all attach greater importance to savings with savings groups than to long-term investments such as Social Security Fund . This is the case even when they can afford to contribute to any of the three social security scheme options.⁶ Unlike savings groups, the social security scheme cannot provide access to loans. With regard to accident insurance, the Road Accident Victims Protection Act guarantees greater security for them. One-third (33.1%) of the motorcycle taxi drivers have life insurance. More men are insured against accidents than women, whilst women are more likely to take measures to ensure financial security other than savings (Table 3.3).

		Option 1	Option 2	Option 3			
Contribution by a me	mber (/month)	THB70 (US\$2.31)	THB100 (US\$3.3)	THB300 (US\$9.9)			
Contribution by the s	tate (/month)	THB30 (US\$0.99)	THB50 (US\$1.65)	THB150 (US\$4.95)			
Protection	Work injury/sickness	?	?	?			
Coverage	Disability	?	?	?			
	Death	?	?	?			
	Child allowance	-	-	?			
	Old age	-	?	?			

⁶ Social Security Fund, as prescribed in the Social Security Act, Section 40, provides three options:

Respondents Who Take Measures to Ensure Financial Security other than		Female (n=30)		le 00)	Total (n=130)	
Having Savings	n	%	n	%	n	%
Taking any of following financial security measures:	29	96.7	85	85	114	87.7
- Bank deposit	20	66.7	63	63	83	63.8
- Membership in cremation welfare fund	15	50.0	59	59	74	56.9
 Membership in social security scheme under the Social Security Act, Section 39* 	11	36.7	22	22	33	25.4
- Membership in community savings group	7	23.3	9	9	16	12.3
- Membership in social security scheme under the Social Security Act, Section 40	1	3.3	12	12	13	10.0
- Joining in chit funds**	3	10.0	3	3	6	4.6
- Membership in National Savings Fund***	0	0	1	1	1	0.8

Table 3.3. Practices to Ensure Financial Security

n = number.

* Under the Social Security Act, Section 39, former members of the Social Security Fund can retain their membership by contributing THB432 (US\$14.26) per month. The benefit package covers sickness, disability, maternity, child allowance, old age, and death.

** The chit fund is a traditional way of fundraising. It involves at least three people. Each person chips in money. The one who takes the money has to pay interest.

*** The National Savings Fund is a voluntary pension fund for self-employed workers. People aged 15–60 years are eligible to apply. The minimum contribution is THB50 (US\$1.65) per month, up to THB13,200 (US\$435.60) per year. The amount is matched fully or in part by the government up to a prescribed limit.

Source: Nirathron, Baribanbanpotkate, Pattanasri, and Sawatsuntisuk (2020).

Preparedness for Financial Security

Nearly every motorcycle taxi driver takes measures to ensure economic security: 60% try to avoid additional debt, economise, and save, or are involved in community activities such joining a community savings group and cremation welfare fund, whilst only 36.9% are members of the Social Security Fund.

Almost all the motorcycle taxi drivers (90.0%) want to have a single house. More want to live with their children (85.4%) than with their spouses (73.8%). Whether they want to return to their original domicile or not, they prepare for old age by fostering good relationships with people in their original domicile, regularly keeping up with information on housing and providing financial and material assistance to family members in the original domicile. The number of those who say they have savings or property as a financial plan for old age is lower for men (66.0% of males, 80.0% of females) (Table 3.4).

Factors Related to Preparedness in Terms of Financial Security	Female (n	=30)	Male (n=100)		Total (n=130)	
Factors Related to Preparedness in Terms of Financial Security	Number	%	Number	%	Number	%
Service used or received						
- Advice on financial, family, and health problems	19	63.3	35	35.0	54	41.5
- Assistance for financial, family, and health problems	19	63.3	41	41.0	60	46.2
- Advice on housing problems	4	13.3	21	21.0	25	19.2
- Assistance for housing problems	0	0.0	13	13.0	13	10.0
- Access to housing loans	0	0.0	14	14.0	14	10.8
Practices to improve the quality of current life						
- Plan financially for the future	25	83.3	77	77.0	102	78.5
- Have savings or property as a financial plan for old age	24	80.0	66	66.0	90	69.2
- Teach children how to show gratitude	29	96.7	97	97.0	126	96.9
- Model filial piety	30	100.0	99	99.0	129	99.2
- Maintain close relationships with family members	30	100.0	99	99.0	129	99.2
- Plan for future housing	27	90.0	85	85.0	112	86.2

Table 3.4. Factors Related to Preparedness in Terms of Financial Security

Practices related to preparedness for old age					
- Thrift	30 <i>100.0</i>	97	97.0	127	97.0
- Not incurring debt	30 100.0	99	99.0	129	99.2
- Joining community savings groups and/or a cremation welfare fund	19 36.7	59	59.0	78	60.0
- Joining the Social Security Fund and/or National Savings Fund	15 <i>50.0</i>	33	33.0	48	36.9