An <u>Day-to-day</u>Residents Daily Life Behavio<u>ur</u> of Elderly Residents Sharing Bedrooms at a Taiwanese Nursing OrganizationConnotation through Shared Bedroom Style - By the Case of Taiwan Nursing Organization

AbstractABSTRACT

The purpose of This the study is aims to explore into the behaviour of elderly residents sharinged bedrooms with different other residents at a Taiwanese nursing organization,. It examines to observe the time amount of daily life spent on their day-to-day behaviour, and examine the differences and the connotations of their behaviour. It takes 47 residents in one nursing home in Taiwan as observation object to investigate. The study employs the behavioural observation method to observe the behavior of residents in the organization and keep records. As per this method, It classifies the observation behaviours are classified into six types: basic-behavior, quiet-behavior, social intercourse-behavior, recuperation-behavior, mobile behavior, and leaving the bedroom, these six kinds of behavior. It probes into the tation of daily life. These behaviours are studied in the context of according to two types of shared-room styles: The study result indicates that two-person bedrooms and six-person bedrooms. Residents sharing two-person bedrooms were found to exhibit anall have the reaction of the increase inof quiet behavior and leaving bedroom and decrease of basic behavior and social intercourse behavior, this withdrawal behaviour; Hhowever, they are more active than thein shared bedroom, two-person bedroom with few residents act more frequently than that of sharing six-person residents bedrooms, in terms of basic behavior and **Comment [A1]:** The title of a paper should ideally be brief but also descriptive. I have deleted some words and restructured this title. If you agree with the revised version, remember to use it when quoting the title elsewhere.

Note that 'day-to-day' is the idiomatic expression used to refer to anything that people do on an ongoing basis in their daily lives.

Comment [A2]: I have made changes to all the headings and subheadings of the manuscript in accordance with the journal guidelines.

Comment [A3]: The abstract should ideally just provide an overview of the study. Keep it brief by providing such details in the body of the paper.

Comment [A4]: Please check if the revised term is appropriate.

Comment [A5]: This is implied from the 'behavioural observation method'.

Comment [A6]: For now, it is sufficient to mention the overall kind of behaviour exhibited, i.e. withdrawal behaviour. The sub-types can be specified later. social intercourse behavio<u>u</u>r. Thus, <u>the study finds that the</u> number of roommates <u>residents</u> in shar<u>inged a</u> bedroom will-influence<u>s the day-to-day</u> daily life behavio<u>ur of the residents</u>.—

Keywords:

Introduction Introduction

In 2008, The ratio of elderly people constituted 10.3% of Taiwan's population, and this figure of Taiwan in 2008 is 10.3%, it is predicted that it will slated to reach 14% in-by 2018. In the such a situation of rapid population transitiongrowth, the importance of long-term elderly care <u>has</u> becomes more prominent<u>critical</u>. Owing to this need, There is the gradual change of medical institutions <u>have evolved</u> in terms of attribute into the concept of organizational accommodations, <u>Meanwhile, there is the gradual change of the organization from providing not only</u> medical care to diversity design of satisfying the but also services to improve the physical fitness and health condition of their residents in different stage. <u>-To this end</u> This change also is shown in the respects of organization rooms have evolved from being mere from one way fashion monitoring ward units into the intimate accommodation room-spaces providing privacy and a variety of facilities (Chia-Hui, W., and Nai-Wen, K., 2005). This The change of this concept calls for that more attention shall be shows that greater attention is now being given to the residents' life quality of life problem of residents living in the organization.

According to <u>Mmany studies</u>, lay stress on that private bedrooms is are better than shared bedrooms, advocating the proving of because they promote the residents' independence, dignity, and privacy-of residents. Existing documents studies rarely discuss whether the behaviour of residents in shared bedrooms is the demand of private bedroom taking

Comment [A7]: The journal requires 3-8 keywords. I have suggested some here:

elderly residents, Taiwan, nursing home, behavioural study, nursing organization

Comment [A8]: Consider citing the source where this information is taken from. Also, add this source to the reference list.

Comment [A9]: It is unnecessary to call these 'attributes'. Such extraneous phrases make a sentence unnecessarily wordy.

Comment [A10]: Please see if this phrase can be replaced with a clearer term such as 'well-organized accommodation facilities'.

Comment [A11]: I'm not sure what is meant by this phrase. Does 'stage' refer to stages in the residents' lives or stages in the evolution of medical institutions? Please clarify this.

Comment [A12]: Include such transitional words and phrases that show how one fact is related to or leads into the next. This makes for a more cohesive and clearer read.

Comment [A13]: The meaning of the terms 'fashion monitoring ward' and 'intimate accommodation room' is not quite clear. The sentence has been revised to convey that the rooms in medical institutions are not merely wards but private, comfortable rooms. Please check whether this change conveys your intended meaning.

Comment [A14]: 'Quality of life' is the more commonly used term.

Comment [A15]: Consider including citations for some of these studies.

advantage of time concept. Theis paper study bridges this research gap by explores into examining the shared bedrooms with different residents, to observe the time spent by residents on amount of daily life day-to-day behaviour, and to examine the differences and the connotations of their behaviour.

Concepts and existing literatures concerning environment and the elderly regarding the elderly and their environment

In this section, we will examine some theories about the elderly and their interaction with their environment. [Kurt Lewin (1951)] put forward_proposed the function concept that according to which B (Behaviour) = F (Person, Environment), This implies and it studied first-that human behaviour is the result of an interaction between individuals and their surrounding environment. Furthermore, tTwo definitions of the influence of the environmental onof ageing are have been widely accepted by researchers. The Ffirst, was provided by Lawton & and Nahemow (1973), who proposed put forward-the ecology model (also known as the Competence Ppress Mmodel-). According to Tthis theory, among the elderly, eonsiders that the adjustment competence to adjust of the elderly is the constant interactive result of a constant interaction between body, psychology, and the environment. Thus, disability-disabled elderly people are subjected to the influence of -by their environment by far while the aged with health are rarely limited by the environment and they much more than healthy elderly people are, as the latter have the capacity to look for a suitable development environment for themselves using thethrough resources around them available to them (Lawton, 1998a, 1998), --

<u>The Ssecond</u>, definition was put forward by Kahana (1982), put forward who proposed the Pperson-Eenvironment C congruence m Model and argued that if there was were no **Comment [A16]:** It is not clear what is meant by behaviour 'is the demand of private bedroom'; furthermore, the 'time concept' mentioned in this sentence is unclear. Please explain your intended meaning so that I can revise the sentence accordingly.

Comment [A17]: I have added this text to strengthen the significance of this study.

Comment [A18]: After the introduction, please consider adding the 'Methods' section to describe the sampling and other details of the study. Thereafter, the results and analysis can follow as is.

Comment [A19]: It is not necessary to mention 'existing literature'.

Comment [A20]: Please cite this study in the reference list.

Comment [A21]: Please cite this study in the reference list.

Comment [A22]: 'Disabled' is the adjective form of the noun 'disability'.

Comment [A23]: Please check whether the edit conveys your intended meaning. Comment [A24]: Please cite this study in the reference list. Comment [A25]: Please cite this study in the reference list. congruence between the needs of the elderly and their environment pressure, there would be the behavior of the aged they would failing to adapt to it well and this would influence their and body physical and psychologicaly state would be influenced.

The above concepts studied the interaction between environment and person. When the elderly fail to adapt to the environment, the change of body and psychology will be influenced, and interactive relationship between environment and the elderly is put forward. We will now explore how residents are influenced by their environment, specifically, their bedrooms. Exsiting documents studying Studies on the relationship between person and environement from the perspective of orgnization bedrooms in medical institutions mentioned have proposed that privacy, control, individualization, and private spapee was are important to residents. In the assessment content of orgnization physical environemnt, attention was also given to Emphasis has also been laid on psychological factors such as dignity, selection, and personality self expression at the level of psychology (Bowie et al. 1992; Moos and Lemke 1996; Lawton 2001; Sloane et al. 2002) at the importance can be seen of private bedrooms is evident.

Privacy

<u>KPrevious ey factors influencing residents at institutions are the option literatures pointed out</u> that in exsisting documents that residents of <u>a</u> private room or <u>their</u> relatives <u>being allowed</u> tocan visit the residents all express their satisfaction (Chaudhury et al., 2005-; Ulrich & and Zimring, 2004). <u>Furthermore</u>, <u>The study by Sumeragei</u> et al. (2002) pointed out that residents living in private rooms had <u>a</u> higher <u>degree of satisfaction</u>_<u>degree</u> over private bedroom. Duffy <u>elt.et al.</u> (1986) conducted <u>a study on</u> the <u>residents and design of</u> managers of nursing homes and their residents concerning the investigation of preference orgnization. It was and **Comment [A26]:** The word 'pressure' seems to refer to an oppressive condition causing harm to the elderly. However, given the context, you appear to be referring to the elderly being comfortable in *their environment*. Please check this change.

Comment [A27]: Sometimes, using the active voice instead of the passive voice has a stronger impact.

Comment [A28]: This sentence is only repeating what is mentioned in the previous paragraph. Therefore, I have deleted it.

Comment [A29]: This transitional sentence shows the relationship between the previous and subsequent facts.

Comment [A30]: Isn't this the same as 'privacy' If they are different concepts, you will have to explain how they are different. Alternatively, consider deleting 'private space'.

Comment [A31]: It is unclear whose importance is evident. If you are referring to the importance of private rooms, please delete this sentence, since a final conclusion such as this should not be presented before describing the study in full.

Comment [A32]: Since this section includes a detailed explanation of each point, dividing the content into subsections would improve readability.

Comment [A33]: In the reference list, this has been spelt as 'Sumeragi'. Please use the right spelling.

Comment [A34]: 'Degree of satisfaction' is the more commonly used term.

Comment [A35]: I assume that 'private rooms' and 'private bedrooms' refer to the same thing. Therefore, it is unclear why you have mentioned that the residents of private rooms are more satisfied than those of private bedrooms. Please revise this sentence for clarity.

Comment [A36]: Since this study is specifically about elderly citizens and their behaviour in medical institutions, is it necessary to cite a study on managers? Please consider removing this reference altogether. found that managers preferred rooms supporting conducive to social interaction (shared rooms) while residents preferred private rooms.—

Mosher-Ashley & and Lemay (2001) pointed out that one matter residents with shared rooms wished to change was to change private rooms. Terakawa (2004) conduct the studiedy on residents of the organization who had shifted from shared room to private rooms. Their Rresults showed that residents who formally formerly disliked private rooms began to prefer themlike private room after eight months later. This result showsed that the style kind of room wining the satisfaction of residents are satisfied with maybe come from depends on their individual experience. This also evidence showsed that residents ultimately preferred private rooms. Moreover, residents preferred private room maybe make decision by referring to his former experience.

Westin, A.F. (1967) mentioned proposed that for most people, privacy impliesmeant four key points to person: (1) First, communication, which implies Pprotection of and secrecy with regard to personalover information-relevant to privacy or personal privacy; (2) second, self_control, which is we can the ability to decide one's our feelings by our selection independently, if we fail to select; in the absence of which a person experiences a there would be sense of powerlessnesshelplessness; (3), Third, the free expression of personality, to decide matters relevant to one concerning relevant privacy or personal privacy; and (4) fourth, the freedom to make-openly express one's individual feelings and individual feeling would be expressed in the private privacy of one's room; Thus, if privacy was recognized as an important aspect of living, it would help nurturerecognizing selfhood would be of great help to individualism feeling and independence among the elderly.

<u>Sorting out literatures according to this theory, there was bad situation to Another finding</u> <u>supporting privacy is the existence of negative communication between residents of shared</u> sharing bedrooms-and their roommates. Inoue et al. (1997) pointed out that Ccompared with **Comment [A37]:** It's important to clearly show what's meant by 'rooms conducive to social interaction'.

Comment [A38]: It is unclear if the residents began to prefer private rooms after living in a shared room for 8 month or after living in a

private room for 8 months. Please clarify this.

Comment [A39]: Try to avoid the repetition of facts previously mentioned.

Comment [A40]: Since this paragraph provides a definition of 'privacy' in a way, please consider making it the first paragraph of this subsection.

Also, please cite 'Westin (1967)' in the reference list.

Comment [A41]: While I have edited this phrase for improved readability, it's meaning is not quite clear. Did you perhaps mean 'the ability to keep one's true feelings to oneself'? If so, please revise accordingly.

Comment [A42]: The explanation of this point seems very similar to that of the first point, i.e. communication. Please look into this and let me know if either description needs to be revised.

Comment [A43]: The original sentence was not entirely clear. Please check that the edited sentence conveys your intended meaning.

<u>the</u>_residents of private rooms, they pointed out that residents those_living in multiple-occupancy rooms would <u>naturallyobviously</u> refused to <u>be in_contact with_others</u> while doing the acts of sleeping <u>or doing something personaland quiet action</u> (Inoue et al. 1997). Morgan et aland Stewart, (1999) pointed out that two-person rooms provided lesser fewer opportunities for social interaction and <u>their</u> residents living in two person room-may have_quarrelelash with <u>one_anotherroommates</u> (Sumeragei et al. 2002). Bitzan (1998), however, presented aput forward the positive results picture, stating that there were the stable feeling between residents in-sharinged rooms and their roommatespositively interact with one another. Thus, we can conclude that while Eevidence largely showed that points to negative, a but feeling-supportive relationship may also exist between themeouldn't be denied.

Control

In the section of With regard to self_control, residents sharing rooms may clash-points with each otherbetween residents and roommates can be seen. There would be problems for **r**<u>R</u>esidents living sharing in two-person rooms would have problems related toto ensure their space and privacy protection, etc. (Sumeragei et al. 2002). Other problems include decisions to haveBesides, on and off of televisions orand radios on or off and or their volume, inconsistence of bed time and sleeping time, deciding whether curtains shall should be drawn or notshut, whether shut or not of the a door facing the corridor should be closed or not, and lights turned on or off or not of the light, all of which would probably be related to different or inconsistent sleeping times decoration or not, etc, were included (Foltz-Gray, 1995; Harris et al., MeBride, Ross, & Curtis, 2002; Kaldenberg, 1999; Kane et al., Baker, Salmon, & Veazie, 1998; Ulrich & and Zimring, 2004). Willcocks, Peace, and Kellaher (1987) onee mentioned that the residents' degree of satisfaction degree would be lowered if residents they Comment [A44]: The meaning of the term 'quiet action' is not very clear. Please check whether you agree with my change. Comment [A45]: In 2-author works, the names

Comment [A45]: In 2-author works, the names of both authors need to be mentioned.

Comment [A46]: I have reordered the text here to indicate that the decisions to be taken are a result of inconsistent sleeping times and that inconsistent sleeping times itself is not the decision.

Comment [A47]: Please cite this study in the reference list.

failed were unable to control their living environment. Thus, When there was a private space in-bedroom, residents would enable them to freely express their personality, to prove have their own space, Aand control over living their environment, which, in turn, would improve their quality of life quality.

Individualization and private space

to literatures concerning indivaduation of privacy and feeling, One example of a researcher who studied individualization and private space is Guhe. He studied the all individual objects and keepsakes of residents at long-term care organization bedroominstitutions. The study It is showed that their possessions includedaverage possessings 32 personal objects accounted for (74%) and 11 decorative objects (26%).for viation accounting for 26%. When dementia is serious, possessings of residents would have the tendency of decrease and put forward the uncontinuity situation of previous living condition and organization environement. This is also an important point of difference between residents of shared and private rooms. Inoue et al. (1997) put forward concerning the difference between residents of shared rooms and private room found that, residents of private rooms continue to live as they did before entering the institution according to their living habit and tend to have there are more possessings possessions in their room than that residents of shared bedrooms do. Tachibana et al. (1997) investigated this phenomenon and found thaton the possessing of residents in of private rooms and found that residents would gradually took bring more of their possessing possessions into their bedrooms, and the more possessions they had, residents having more possessing would the more they tended to personalise manage and arrange their bedrooms, and to be able to freely engage inconduct their preferred leisure activities. Thus, over time, The result showed that though the elderly live in bedroom when first moved to the organization, they need time to residents adapt to develop their bedroom

Comment [A48]: Please provide the year in parentheses. Also, make sure you cite this study in the reference list.

Comment [A49]: My edit here is intended to clarify the meaning of the terms 'average possesings' and 'objects for appreciation accounting'. Please check whether the edited sentence retains your intended meaning.

Comment [A50]: The meaning of this sentence is not entirely clear. Consider revising it as follows: However, in the case of elderly residents with serious dementia, the number of possessions was fewer and their living conditions in the organization were markedly different from their former way of life.' <u>new living space and personalise it such that it as the place to show reflects</u> their personality and feelings. All t<u>T</u>hese results <u>indicatepointed out</u> that <u>the residents in shared bedrooms find</u> <u>ithave</u> more difficulty to make their rooms a reflection of their unique personalities in showing the personality of residents than private room. Even private rooms will reflect the residents' personalities only also need time to show individual feature gradually.

References

Comment [A52]: The references have been Bitzan, J. 1998. Emotional bondedness and subjective well-being. Journal of Gerontological edited in conformance with the sample references provided in the formatting guidelines. Nursing, 24, 8-15. Formatted: Font: Bold Bowie, P., Mountain, G. and Clayden, D. 1992. Assessing the environmental quality of longstay wards for the confused elderly. International Journal of Geriatric Psychiatry, 7, Formatted: Font: Bold 95--104. Chaudhury, H., Mahmood, A., and Valente-, M. 2005. Advantages and Ddisadvantages of <u>Ssingle-V</u>ersus <u>Mm</u>ultiple- Θ_{0} ccupancy <u>Rrooms</u> in <u>Aacute</u> <u>Care</u> <u>Ee</u>nvironments. Environment and Behavior, 37, 760-786. Formatted: Font: Bold Chia-Hui, W.-, and Nai-Wen, K. 2005. Architectural Eevolution of Llong-term Care Ffacilities. Taipei City Medical Journal, 2, 311-319. Formatted: Font: Bold Duffy, M., Bailey, S., Beck, B. and Barker, D._-G. 1986. Preferences in Nnursing Hhome Design-: A Comparison of Rresidents, Aadministrators, and Designers. Environment and Behavior, 18, 246-257. Formatted: Font: Bold Fleming, I., Baum, A., and Weiss, H. 1987. Social density and perceived control as mediators Comment [A53]: Please cite this study in the main text. of crowding stress in high-density residential neighbourhoods. Journal of Personality and Social Psychology, 52, 899-906. Formatted: Font: Bold Foltz-Gray, D. 1995. Intimate strangers. When roommates clash, caregivers can ease the tension--or make it worse. Contemporary Long Term Care, 18, 34-37. Formatted: Font: Bold

Comment [A51]: The paper ends very abruptly Please go through my notes in the Letter from the Editor and give the paper some structure. For example, this paper should end with a Conclusion

section.

	main text.
Principles and Practice. Tokyo: Kitaohji Shobo-, 260-307.	Comment [A55]: If this is from an edited book please mention the name of the book as well as the
Harris, P., McBride, G., Ross, C. , & and Curtis, L. 2002. A place to heal: Environmential	editor name(s).
sources of satisfaction among hospital partients. Journal of Applied Social Psychology, 32,	Formatted: Font: Bold
1276-1299.	
Inoue, Y., Toyama, T., Otaki, K., and Ohar, K. 1997. A study on the difference of	
personalization between single bed room and plural beds room-: A study on nursing home	
with single bed room (pPart_3). Summaries of technical papers of Annual Meeting	Comment [A56]: Consider revising this as follows:
Architectural Institute of Japan. E-1, 123-124.	The difference in personalization between
Kane, R., Baker, M., Salmon, J., & M. Veazie, W. 1998. Consumer Perspectives on Private	single bed rooms and multiple bed rooms: A study on a nursing home with single bed rooms
	Formatted: Font: Bold
Versus Shared Accommodations in Assisted Living Settings. Washington, DC: The Public	
Policy Institute.	
Kaldenberg, D. 1999. The influence of having a roommate on patient satisfaction. <i>The</i>	
Satisfaction Monitor, 3-4.	
Keen, J. 1989. Interiors: Architecture in the lives of people with dementia <i>International</i>	Comment [A57]: Please cite this study in the main text.
Journal of Geriatric Psychiatry, 4, 255—272.	Formatted: Font: Bold
Kellaher, L. A. 1986. <i>Determinants of quality of life in residential settings for old people</i> . In	Comment [A58]: Please cite this study in the main text.
Judge, K. and Sinclair, I. (eds.), Residential Care for Elderly People. Majesty's Stationery	Formatted: Font: Italic
sudge, R. and Sinetan, I. (cus.), Residential Cure for Elacity reopie. Indjesty's Stationery	Formatted: Font: Not Italic
Office, London, Her Majesty's Stationery Office.	Formatted: Font: Not Italic
Kumsuek, Y., Koji, S. and Jun, U. 1994. The D aily <u>Living Aactivities Oof Tthe Aaged Lin</u>	Comment [A59]: Please include the page range here if relevant
Kunisuek, 1., Koji, S. and Jun, O. 1994. The $\underline{B}_{\underline{a}}$ any $\underline{E}_{\underline{i}}$ ving $\underline{A}_{\underline{a}}$ cuviues $\underline{O}_{\underline{i}}$ i $\underline{F}_{\underline{i}}$ in $\underline{A}_{\underline{a}}$ ged $\underline{F}_{\underline{i}}$	Comment [A60]: Please cite this study in the
Rrecuperation Ffacilities: A Sstudy Oon Tthe Rrationalization Oof Rrecuperation	main text.
	Comment [A61]: Perhaps you could revise this as follows:
Eenvironment Ffor the Aaged Architectural Institute of Japan, 466, 37–46.	Day-to-day activities of the aged in recuperation facilities
Lawton, M.P., Fulcomer, M. and Kleban, M. 1984. Architecture for the mentally impaired	Formatted: Font: Bold
	Comment [A62]: Please cite this study in the main text.
elderly. Environment and Behavior, 16, 730-757.	Formatted: Font: Bold
Lawton, M. P. 2001. The physical environment of the person with Alzheimer's disease.	

Gifford, R. (2005). Chapter 7: *Crowding*, Japanese translation of Environmental <u>pP</u>sychology:

Comment [A54]: Please cite this study in the

Aging and Mental Health, 5, 56–64.	Formatted: Font: Bold
Moos, R. H. and Lemke, S. 1996. Evaluating Residential Facilities-: The Multiphasic	Comment [A63]: Please cite this study in the main text.
Environmental Assessment Procedure. Sage, London.	main text.
Morgan, D. G. and Stewart, N.J. 1998. Multiple Occupancy Versus Pprivate Rrooms on	Comment [A64]: Please cite this study in the main text.
Ddementia Ccare Uunits, Environment and Behavior, 30, 487-503.	Formatted: Font: Bold
Morgan, D. G. , and Stewart, N.J. 1999. The physical environment of <u>Ss</u>pecial <u>Cc</u>are <u>Uu</u>nits:	
<u>nN</u> eeds of residents with dementia from the perspective of staff and family caregivers.	
Qualitative Health Research, 9, 105-118.	Formatted: Font: Bold
Mosher-Ashley, P. , & and Lemay , E. 2001. Improving residents' life satisfaction. <i>Nursing</i>	
Homes and Long-Term Care Management Magazine, 50 , 50-54.	Formatted: Font: Bold
Sloane, P. D., Mitchell, C. M., Weisman, G., Zimmerman, S., Long Foley, K. M., Lynn, M.,	
Calkins, M., Lawton, M. P., Teresi, J., Grant, L., Lindeman, D. and Montgomery, R. 2002.	
The <u>Tt</u> herapeutic <u>Ee</u> nvironment <u>S</u> screening <u>S</u> survey for <u>Nn</u> ursing <u>Hhomes</u> (TESS-NH): <u>aA</u> n	
observational instrument for assessing the physical environment of institutional settings for	
persons with dementia. Journal of Gerontology-: Social Sciences, 57, 69-78.	Formatted: Font: Bold
Sumeragi, T., Koga, T., Kojima, T., Munakata, J. , and Hirate , K. 2002. A <u>Sstudy of the</u>	
$\frac{1}{2}$ we will be the second state of $\frac{1}{2}$ we have the second state of $\frac{1}{2}$ we have the second state of $\frac{1}{2}$ and $\frac{1}{2}$ we have the second state of $\frac{1}{2}$ and	
<u>Wwelfare Ffacility for the Aaged</u> , (Part <u>4)</u> . Summaries of technical papers of Annual	Comment [A65]: Consider the following revision:
Meeting Architectural Institute of Japan, E-1, 929-930.	A study of the residents at a welfare facility for the aged: User evaluation of a welfare facility for the aged
Tachibana, H., Toyam, T., Takahashi, T. , and Koga, T. 1997. A <u>Sstudy Oon Ppersonalization</u>	Formatted: Font: Bold
<u>Hin Pprivate Rroom Oof Nnursing Hhome Ffor Tthe Eelderly</u> . Journal of <u>aA</u> rchitecture,	Comment [A66]: Perhaps you could say 'A study on personalization in private rooms at a
<u>P</u> lanning and <u>e</u> Environmental <u>eEngineering</u> , Transactions of AI, 500 , 133-138.	nursing home for the elderly'. Formatted: Font: Bold
Terakawa, Y. 2004. The Relationship Between Environment and Behavior at the Institutional	
Setting for the Elderly. Paper presented at the annual conference of the Environmental	

Design Research <u>SAss</u>ociation, Albuquerque, NM.

Tuija, T., Simo, N., Jaana, L., Hannu, R. and Marjo-Riitta, J. 2003, Physical activity and

social status in adolescence as predictors of physical inactivity in adulthood. Preventive

Medicine.; 37, 375-381.

Ulrich, R., and & Zimring, C. 2004. The Role of the Physical Environment in the Hospital of

the 21st Century: A Once-in-a-Lifetime Opportunity., Center for Health Design, CA: Center

for Health Design.

Willcocks, D., Peace, S. and Kellaher, L. 1987. Private Lives in Public Places: A

Research-Based Critique Critique of Residential Life In Local Authority Old People's

Homes. Tavistock, London.

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-	Comment [A67]: Please cite this study in the main text.
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Comment [A68]: This reference appears incomplete. Please check and revise suitably.

Comment [A69]: If this is a reference to a book, please provide the name of the publisher and inclusive page numbers. However, if this is a reference to a paper presented at a conference, please provide the name of the conference.

Also, please cite this study in the main text.

						Comment [A70]: Please see my notes in Letter from the Editor.	
Table 1. Socio-demograp	bhic and healt	h characteristic:	s of the study sample				
Characteristic			Characteristic				
	%	Ν		Mean	s.d.		
Age group							
65-69	6.4	3	Age	79.7	7.5		
70-74	12.8	6	ADL score	33.6	31.3		
75-79	10.6	5	IADL sore	23.4	7.7		
80+	70.2	33	Length of residence in institution (months)	27.1	15.6		
Gender							
Female	55.3	26	Measures of frailty:				
Male	44.7	21	Stroke	40.4	19		
			Heart disease	44.7	21		
Eduction level			Dimecia	36.2	17.0		
Illiterate	57.4	27	SD	23.4	11.0	B	
Elementary school	29.8	14	Other chronic diseases	27.7	13.0		
Junior high school	6.4	3					
Senior high school	6.4	3					

Notes : ADL = Activities of Daily Living. IADL = Instrumental Activities of Daily Living. SD = standard deviation.

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