

social intercourse behaviour. Thus, ~~the study finds that the~~ number of ~~roommates-residents in~~ shared a bedroom ~~will~~ influences ~~the day-to-day~~ daily life behaviour ~~of the residents.~~ —

Keywords:

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

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

~~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 ~~transition~~ growth, the importance of long-term elderly care ~~has~~ becomes ~~more prominent~~ critical. Owing to this need, ~~There is the gradual change of~~ medical institutions ~~have evolved in terms of attribute~~ into the concept of organizational accommodations. ~~Meanwhile, there is the gradual change of the organization from~~ providing not only 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. ~~To this end, 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.

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.

~~According to M~~many studies, ~~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

advantage of time concept. ~~This 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.~~

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.

~~Concepts and existing literatures concerning environment and the elderly~~ **Theories regarding the elderly and their environment**—

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

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, ~~Two~~ definitions of the influence of the environmental ~~one~~ of ageing ~~are have been~~ widely accepted by researchers. ~~The First, was provided by Lawton and Nahemow (1973), who proposed put forward~~ the ecology model (also known as the Competence-Press Model). According to ~~This~~ theory, among the elderly, ~~considers 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 influenced 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 the through resources around them available to them~~ (Lawton, 1998a, 1998b, 1999).—

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'.

~~The Second, definition was put forward by Kahana (1982), put forward who proposed the Pperson-Eenvironment Ccongruence mModel and argued that if there was were no~~

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 psychologically state ~~would be influenced~~.

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.

~~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.~~

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

~~We will now explore how residents are influenced by their environment, specifically, their bedrooms.~~ Existing documents studying ~~Studies on~~ the relationship between person and environment from the perspective of ~~organization bedrooms in medical institutions mentioned have proposed~~ that privacy, control, individualization, and private space ~~was are~~ important to residents. ~~In the assessment content of organization physical environment, 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). ~~Thus, the importance can be seen of private bedrooms is evident.~~

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'.

Privacy

~~Previous~~ factors influencing residents at institutions are the option ~~literatures pointed out that in existing documents that residents of a private room or their relatives being allowed to can visit the residents all express their satisfaction~~ (Chaudhury et al., 2005; Ulrich & Zimring, 2004). ~~Furthermore, The study by Sumeragi et al. (2002) pointed out that residents living in private rooms had a higher degree of satisfaction degree over private bedroom.~~ Duffy ~~et. et al.~~ (1986) conducted a study on the residents and ~~design of~~ managers of nursing homes ~~and their residents concerning the investigation of preference organization. It was and~~

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. —

Comment [A37]: It's important to clearly show what's meant by 'rooms conducive to social interaction'.

Mosher-Ashley & Lemay (2001) pointed out that ~~one matter~~ residents ~~with shared rooms~~ wished to change ~~was to~~ ~~change~~ private rooms. Terakawa (2004) ~~conduct the study~~ on residents ~~of the organization who had shifted~~ from shared ~~room~~ to private rooms. ~~Their~~ Results showed that residents who ~~formally formerly~~ disliked private rooms began to ~~prefer~~ ~~them like private room~~ after eight months ~~later~~. This ~~result~~ ~~showed~~ 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~~ ~~showed~~ that residents ~~ultimately~~ preferred private rooms ~~or wished they occupy private room~~. ~~Moreover, residents preferred private room maybe make decision by referring to his former experience.~~ —

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

~~Westin, A.F. (1967) mentioned proposed that for most people, privacy implies~~ ~~mean~~ four key points ~~to person~~: (1) ~~First, communication, which implies~~ ~~P~~protection ~~of and secrecy with~~ ~~regard to personal~~ 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 ~~powerlessness~~ ~~helplessness~~; (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 nurture~~ ~~recognizing selfhood would be of great help to~~ individualism ~~feeling and independence among the elderly.~~ —

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, its 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.

~~Sorting out literatures according to this theory, there was bad situation to~~ ~~Another finding~~ supporting privacy is the existence of ~~negative~~ communication between residents ~~of shared~~ ~~sharing~~ bedrooms ~~and their roommates~~. Inoue et al. (1997) pointed out that ~~Compared with~~

~~the~~ residents of private rooms, ~~they pointed out that residents those~~ living in multiple-occupancy rooms would ~~naturally obviously~~ refused to ~~be in contact with~~ others while ~~doing the acts of sleeping or doing something personal and quiet action~~ (Inoue et al. 1997). ~~Morgan et al and Stewart~~ (1999) pointed out that two-person rooms provided ~~lesser~~ ~~fewer opportunities for~~ social interaction and ~~their~~ residents ~~living in two person room~~ may ~~have quarrel~~ clash with ~~one another~~ roommates (Sumeragei et al. 2002). Bitzan (1998), ~~however, presented a put forward the~~ positive results picture, stating that ~~there were the stable feeling between residents in sharing rooms and their roommates positively interact with one another. Thus, we can conclude that while E evidence largely showed that points to negative communication between residents sharing rooms and their roommates were mainly negative, a but feeling supportive relationship may also exist between them couldn't be denied.~~

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 of both authors need to be mentioned.

Control

~~In the section of With regard to self-control, residents sharing rooms may clash points with each other between residents and roommates can be seen. There would be problems for Residents living sharing in two-person rooms would have problems related to ensure their space and privacy protection, etc, (Sumeragei et al. 2002). Other problems include decisions to have Besides, on and off of televisions and radios on or off and or their volume, inconsistency of bed time and sleeping time, deciding whether curtains shall should be drawn or not shut, 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., -McBride, Ross, & Curtis, 2002; Kaldenberg, 1999; Kane et al., -Baker, Salmon, & Veazie, 1998; Ulrich & and Zimring, 2004). Willcocks, Peace, and Kellaher (1987) one mentioned that the residents' degree of satisfaction degree would be lowered if residents they~~

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, ~~And control over living their~~ environment, ~~which, in turn,~~ would improve ~~their quality of life quality.~~ ———

Individualization and private space

As to literatures concerning individualization 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 bedroom institutions. The study It is showed that their possessions included average possessions 32 personal objects accounted for (74%) and 11 decorative objects (26%) for appreciation accounting for 26%.~~ When dementia is serious, possessions of residents would have the tendency of decrease and put forward the uncontinuity situation of previous living condition and organization environment. ~~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 possessions possessions in their room than that residents of shared bedrooms do. Tachibana et al. (1997) investigated this phenomenon and found that on the possessing of residents inof 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 ineonduet 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 possessions' 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.'

~~new living space and personalise it such that it as the place to show reflects~~ their personality and feelings. ~~All t~~These results ~~indicatepointed out~~ that ~~the residents in~~ shared bedrooms ~~find~~ ~~ithave~~ more difficulty ~~to make their rooms a reflection of their unique personalitiesin~~ ~~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. _____

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.

References

Comment [A52]: The references have been edited in conformance with the sample references provided in the formatting guidelines.

Bitzan, J. 1998. Emotional bondedness and subjective well-being. *Journal of Gerontological Nursing*, **24**, 8–15.

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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**, 95–104.

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Chaudhury, H., Mahmood, A., and Valente, M. 2005. Advantages and ~~D~~disadvantages of ~~S~~single-~~V~~ersus ~~M~~multiple-~~O~~ccupancy ~~R~~rooms in ~~A~~acute ~~C~~care ~~E~~nvironments. *Environment and Behavior*, **37**, 760-786.

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Chia-Hui, W., and Nai-Wen, K. 2005. Architectural ~~E~~evolution of ~~L~~long-term ~~C~~care ~~F~~acilities. *Taipei City Medical Journal*, **2**, 311-319.

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Duffy, M., Bailey, S., Beck, B. and Barker, D.,-G. 1986. Preferences in ~~N~~nursing ~~H~~home ~~D~~esign: A ~~C~~omparison of ~~R~~esidents, ~~A~~administrators, and ~~D~~esigners. *Environment and Behavior*, **18**, 246-257.

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Fleming, I., Baum, A., and Weiss, H. 1987. Social density and perceived control as mediators of crowding stress in high-density residential neighbourhoods. *Journal of Personality and Social Psychology*, **52**, 899-906.

Comment [A53]: Please cite this study in the main text.

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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.

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Gifford, R. (2005). Chapter 7: *Crowding*, Japanese translation of Environmental Psychology: Principles and Practice. Tokyo: Kitaohji Shobo, 260-307.

Comment [A54]: Please cite this study in the main text.

Harris, P., McBride, G., Ross, C., & Curtis, L. 2002. A place to heal: Environmental sources of satisfaction among hospital patients. *Journal of Applied Social Psychology*, 32, 1276-1299.

Comment [A55]: If this is from an edited book, please mention the name of the book as well as the editor name(s).

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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 (Part 3). *Summaries of technical papers of Annual Meeting Architectural Institute of Japan*, E-1, 123-124.

Comment [A56]: Consider revising this as follows:

The difference in personalization between single bed rooms and multiple bed rooms: A study on a nursing home with single bed rooms

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Kane, R., Baker, M., Salmon, J., & Veazie, W. 1998. *Consumer Perspectives on Private 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. *The Satisfaction Monitor*, 3-4.

Keen, J. 1989. Interiors: Architecture in the lives of people with dementia. *International Journal of Geriatric Psychiatry*, 4, 255-272.

Comment [A57]: Please cite this study in the main text.

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Kellaher, L. A. 1986. *Determinants of quality of life in residential settings for old people*. In Judge, K. and Sinclair, I. (eds.), *Residential Care for Elderly People*. Majesty's Stationery Office, London, Her Majesty's Stationery Office.

Comment [A58]: Please cite this study in the main text.

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Kumsuek, Y., Koji, S. and Jun, U. 1994. The Daily Living Activities of the Aged in Recuperation Facilities: A Study on the Rationalization of Recuperation Environment for the Aged. *Architectural Institute of Japan*, 466, 37-46.

Comment [A59]: Please include the page range here if relevant

Comment [A60]: Please cite this study in the main text.

Comment [A61]: Perhaps you could revise this as follows:
Day-to-day activities of the aged in recuperation facilities

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Lawton, M. P., Fulcomer, M. and Kleban, M. 1984. Architecture for the mentally impaired elderly. *Environment and Behavior*, 16, 730-757.

Comment [A62]: Please cite this study in the main text.

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Lawton, M. P. 2001. The physical environment of the person with Alzheimer's disease.

Aging and Mental Health, **5**, 56–64.

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Moos, R. H. and Lemke, S. 1996. *Evaluating Residential Facilities: The Multiphasic Environmental Assessment Procedure*. Sage, London.

Comment [A63]: Please cite this study in the main text.

Morgan, D. G. and Stewart, N. J. 1998. Multiple Occupancy versus Private Rooms on Dementia Care Units, *Environment and Behavior*, **30**, 487-503.

Comment [A64]: Please cite this study in the main text.

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Morgan, D. G.; and Stewart, N. J. 1999. The physical environment of Special Care Units: Needs of residents with dementia from the perspective of staff and family caregivers. *Qualitative Health Research*, **9**, 105-118.

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Mosher-Ashley, P.; and Lemay, E. 2001. Improving residents' life satisfaction. *Nursing Homes and Long-Term Care Management Magazine*, **50**, 50-54.

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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 Therapeutic Environment Screening Survey for Nursing Homes (TESS-NH): An observational instrument for assessing the physical environment of institutional settings for persons with dementia. *Journal of Gerontology: Social Sciences*, **57**, 69–78.

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Sumeragi, T., Koga, T., Kojima, T., Munakata, J.; and Hirate, K. 2002. A Study of the Viewpoint of the Residents of Welfare Facility for the Aged: User's Evaluation of Welfare Facility for the Aged (Part 4). *Summaries of technical papers of Annual Meeting Architectural Institute of Japan*, **E-1**, 929-930.

Comment [A65]: Consider the following revision:
A study of the residents at a welfare facility for the aged: User evaluation of a welfare facility for the aged

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Tachibana, H., Toyam, T., Takahashi, T.; and Koga, T. 1997. A Study On Personalization in Private Room of Nursing Home For The Elderly. *Journal of Architecture, Planning and Environmental Engineering: Transactions of AI*, **500**, 133-138.

Comment [A66]: Perhaps you could say 'A study on personalization in private rooms at a nursing home for the elderly'.

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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 Association, 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.

Comment [A67]: Please cite this study in the main text.

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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.

Comment [A68]: This reference appears incomplete. Please check and revise suitably.

Willcocks, D., Peace, S. and Kellaher, L. 1987. Private Lives in Public Places: A Research-Based Critique of Residential Life In Local Authority Old People's Homes. Tavistock, London.

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.

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Comment [A70]: Please see my notes in the Letter from the Editor.

Table 1. Socio-demographic and health characteristics of the study sample

| Characteristic | | | Characteristic | Mean | s.d. |
|--------------------|------|----|---|------|------|
| | % | N | | | |
| 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 score | 23.4 | 7.7 |
| 80+ | 70.2 | 33 | Length of residence in institution (months) | 27.1 | 15.6 |
| Gender | | | Measures of frailty: | | |
| Female | 55.3 | 26 | Stroke | 40.4 | 19 |
| Male | 44.7 | 21 | Heart disease | 44.7 | 21 |
| Education level | | | Dimecia | 36.2 | 17.0 |
| Illiterate | 57.4 | 27 | SD | 23.4 | 11.0 |
| 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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