Phenomenological Study of Changes Elderly Quality of Life in Pandemic Covid-19

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Abstract

The elderly are one of the clusters most vulnerable to Covid-19, and fact impacts the quality of life of the elderly in terms of health, social interaction, economy, lifestyle, and spirituality. This research aims to analyze the quality of life of the elderly during the Covid-19 pandemic. This research design is qualitative with a phenomenological study conducted in April-June 2020 in Bogor Regency. The sampling technique used purposive sampling with special criteria, age range 55-77 years, knowing the existence of Covid-19. The knowledge of the existence of Covid-19 helps informants understand different situations and conditions before and during the Covid-19. The number of respondents in this study was two elderly who met the criteria. The findings of this study have implications for the importance of maintaining the quality of life of the elderly during the pandemic by starting a healthy lifestyle such as paying attention to diet, getting enough rest, exercising, and maintaining interaction with family, neighbors, and the surrounding environment.

Keywords: covid-19, elderly, phenomenological study, quality of life

Abstrak

Lansia merupakan salah satu klaster yang paling rentan terkena Covid-19, dan fakta ini berdampak pada kualitas hidup lansia baik dalam aspek kesehatan, interaksi sosial, ekonomi, gaya hidup, dan spiritualitas. Tujuan penelitian ini adalah menganalisis kualitas hidup lansia di masa pandemic Covid-19. Desain penelitian adalah kualitatif dengan jenis studi fenomenologis yang dilaksanakan pada bulan April-Juni 2020 di Kabupaten Bogor. Teknik penarikan contoh menggunakan *purposive sampling* dengan kriteria khusus, rentang usia 55-77 tahun, mengetahui keberadaan Covid-19, karena pengetahuan adanya Covid-19 membantu informan untuk memahami situasi dan kondisi yang berbeda sebelum dan saat pandemi Covid-19. Jumlah responden dalam penelitian ini sebanyak 2 lansia yang memenuhi kriteria. Temuan penelitian ini berimplikasi pada pentingnya menjaga kualitas hidup lansia di masa pandemi, dengan memulai pola hidup sehat seperti memperhatikan pola makan, istirahat yang cukup, berolahraga, dan menjaga interaksi dengan keluarga, tetangga, serta lingkungan sekitar.

Kata kunci: covid-19, kualitas hidup, lansia, studi fenomenologi

Introduction

Covid-19, known as the novel coronavirus, first occurred in Wuhan, China, in December 2020. President Joko Widodo, in March 2021, confirmed that COVID-19 first entered Indonesia. Meanwhile, according to a team of experts from the Faculty of Public Health, University of Indonesia, it is estimated that Covid-19 has entered Indonesia since January 2020 (Wahyono, 2020). According to data on, as of June 23, 2021, there were 1.989.909 new positive cases, 1.792.528 recovered, and 54.664 died due to Covid-19 in Indonesia. Covid-19 has spread to more than 100 countries and caused 6400 deaths in various parts of the world, so that currently, Covid-19 is the most critical global health disaster. The spread and transmission of the virus to residents in almost all parts of the world is why WHO has designated Covid-19 as a pandemic (Kirana, Rahagukguk, & Lubis, 2020). The determination of Covid-19 as a pandemic is accompanied by the establishment of government policies such as social distancing, physical distancing, large-scale social restrictions, the implementation of community activities to the 2020 homecoming ban. This policy is an effort to suppress the spread of Covid-19. However, these policies can trigger changes in the quality of life and problems of alienation in the elderly during the pandemic.

Based on data from the National Socio-Economic Survey (2019), there is 9.38% of the elderly live alone, while several groups of the elderly are in the safe category, namely those who still live with their spouse (20.03%), with their family (27.30%), and living with three-generation (40.64%), and other groups (2.66%). However, the elderly group is often associated with vulnerable groups because most cases of death from Covid-19 occur in patients aged 80 years (Kemenkes, 2020). This is in accordance with the research results conducted by Siagian (2020), entitled "Searching for Vulnerable Groups Infected with CoronaVirus with the Discourse Network Analysis Method". The study results showed chronic disease sufferers, smokers, vape smokers, men, people with blood type A and the elderly group, including groups susceptible to being infected with Covid-19.

The elderly are a group or population at risk because there is a decrease in biological function caused by the aging process (Stanhope & Lancaster, 2016). The decline in the health status of the elderly is identical to the decline in the physical health of the elderly, such as the emergence of various diseases, decreased body functions, the reduced balance of growth, and the risk of falling. Furthermore, the low immunity of the elderly is the main cause of the elderly being a vulnerable group to Covid-19 because the immune system of the elderly has decreased so that it cannot function like when they were young. The Central Statistics Agency divides the elderly into three categories: young elderly aged between 60-69 years, middle elderly aged between 70-79 years, and old elderly aged over 80 years (Sari et al., 2020).

As one of the countries with a high number of elderly people, the Covid-19 pandemic is a real problem for Indonesia. According to data from the Central Statistics Agency, in 2019, the percentage of elderly people in Indonesia reached 9.6% of the total population of around 25.64 million people (BPS, 2017). The vulnerability of the elderly from a health perspective is reflected in statistical data on the elderly who died from Covid-19 in many countries, including Malaysia (62.6%), Brazil (85%), Italy (95%), Spain (95%), China (80%), and United States (80%). Meanwhile, in Indonesia, data on the percentage of the elderly who died due to Covid-19 has not been found. However, available information shows that most of those who died were aged 60 years and over (Hakim, 2020).

The elderly, as one of the largest populations in the world and susceptible to disease, need to be a top priority in maintaining the quality of life. Furthermore, maintaining the quality of life during the covid-19 pandemic has become an important issue that needs attention. Therefore, the World Health Organization (2020) urges all people to maintain quality of life, including maintaining health, economy, social, and religion during the pandemic. According to WHO, quality of life is an individual's perception of one's situation in the context of the culture and value system that exists in society. Values and value systems are related to goals, expectations, and applicable standards. WHO summarizes four dimensions of quality of life: physical, psychological, social relations, and the environment (World Health Organization, 2012). In general, the meaning of quality of life is a very broad concept that is influenced by physical, psychological, independent, and social relationships with the environment.

According to Sutikno (2015), the age factor has a relationship with the quality of life in the elderly, such as increasing age will change the way of life such as feeling lonely and aware of death, living alone, changes in economic terms, chronic disease, weaker physical strength, mental changes, reduced psychomotor skills, psychosocial changes i.e. retirement, will lose income resources, lose partners and friends, and lose jobs and reduced activities. In addition, the condition of the elderly who generally face limitations, weaknesses, and disabilities, will reduce their quality of life. Therefore, the family has a very important role in caring for the elderly family so that the quality of life of the elderly is maintained (Yuliati, Baroya, & Ririanty, 2014).

The fact that the elderly who still live with their families and three generations cover 67.94 percent is very positive for the protection of the elderly, especially in terms of maintaining their quality of life (Hakim, 2020). Mufarrohah (2020), in his research on the quality of life during a pandemic found that the way people react to problems during a pandemic is different and to see the success of a family in dealing with changes that occur during a pandemic, family resilience is needed, and this has a positive impact on various dimensions of quality life, such as the dimensions of physical health, psychological health, social relationships, and the environment in the pandemic era.

Based on the phenomena described, it can be said that covid-19 greatly impacts the quality of life of the elderly. This study aims to see how the quality of life of the elderly before and during the covid-19 pandemic was. This study also wants to see what major changes are felt and affect the lives of the elderly through in-depth interviews.

Methods

Participants

The research is qualitative research with a phenomenological research design. According to Rahardjo (2018), the type of phenomenological researcher seeks to understand the meaning of events or symptoms and interactions with people or groups of people in certain situations. In addition, Husserl (1968) defines phenomenology as the study of how people describe things and experience them through their senses. In other words, Husserl's phenomenology is an attempt to understand experienced consciousness from the point of view of the person experiencing it himself. This type of phenomenological research was chosen to describe the differences in the quality of life of the elderly before and during the pandemic based on the perspective of the elderly who experienced changes in the quality of life due to the pandemic.

The research design uses a phenomenological approach that tries to explain or reveal the meaning of concepts or phenomena based on experiences or awareness in several individuals. The main purpose of the study of phenomenology is to reduce individual experience to get the essential (fundamental) related to the phenomena experienced. This type of phenomenological research helps researchers understand the symptoms and responses of the elderly in a pandemic situation so that researchers can see how the quality of life of the elderly is.

The data collection location was carried out in Bogor Regency, West Java Province. West Java Province was deliberately chosen based on the consideration that the island of Java is included in the largest elderly population according to BPS data based on the 2020 population census. West Java has an elderly population over 60 years old, reaching more than 10 percent with worrying conditions, especially for elderly women. Furthermore, the average length of schooling for the elderly in West Java only reaches 5.38 years or only attends grades 3 and 4 of elementary school (Kurniawan, 2020). Furthermore, Bogor district was chosen because of the availability of Informants who were needed according to the specific criteria in this study, namely: age range 55-77 years; never heard or knew about covid-19, because knowledge related to pandemic helped Informants to understand the different situations and conditions before and during the pandemic. The stages of this research consist of preparation, data collection, data processing, data analysis, and report writing starting from April to June 2020.

The Informants used in this study were as many as two elderly people who had met the informant's specific criteria. The data used in this study are primary data and secondary data. The primary data is collected from family characteristics and the identity of the Informants. Two researchers as data users collected primary data. The Informants selected by the researcher are people who have been known before, so it does not take a long time to make a report card. Researchers already know brief information about Informants from interactions carried out before the study. Furthermore, the researcher asked the informants' willingness to participate in the study. If the informants were willing, the researchers asked whether they agreed to meet to collect data using the main method, namely interviews. The secondary data it collects is BPS data on elderly population statistics and data on the condition of the elderly in West Java.

Measurement

This study uses data collection methods with informants as primary data obtained through interviews with the elderly. This study measures the quality of life of the elderly during the covid-19 pandemic. Quality of life is an individual's perception of the level of quality of life he experiences as a whole, including health, social relationships and activities, freedom, home environment and neighbors, psychological and emotional well-being, financial situation, as well as religion and culture, where the elderly who are respondents are the elderly. Young people aged 60-69 years who are going through the covid-19 pandemic. The covid-19 pandemic is an infectious disease caused by the coronavirus which was only discovered in early 2019.

The interview technique used is a semi-structured interview. According to Sugiyono (2013), semi-structured interviews are interviews which in practice, are more free when compared to structured interviews. The interview is the primary method in collecting data in this research. The goal is to find problems more openly by asking the interviewer for their opinions and ideas. It can be concluded that semi-structured

interviews are interviews conducted with a clear question framework as a guide in the interview. Still, at the time of implementation, it is flexible.

The questions used were open-ended questions consisting of eleven questions based on six dimensions of quality of life, such as:

1. How are you currently? Does your condition affect your decision to work?
2. How is your relationship with family, friends and people around you? Are there any wishes or hopes that you want regarding the people closest to you?
3. How are your daily activities lately? Do you feel happy and enjoy life?
4. How is the situation in your home environment? Is it safe and comfortable to live in?
5. How about the health facilities in your home environment? Is it easy to reach?
6. What do you think about the current pandemic condition? Does it make you tired and easily stressed?
7. Can you do whatever you want? Tell me!
8. How do you fulfill your daily needs (eat, drink, buy soap, etc.)?
9. Can you afford to buy what you want? How or why?
10. Do you participate in religious activities or cultural rituals around you?
11. How does this activity affect your life?

Analysis

Data analysis is the process of systematically searching and compiling data obtained from interviews, field notes, and other materials to be easily understood. The findings can be informed to others. Data analysis is done by organizing the data, breaking it down into units, synthesizing it, arranging it into a pattern, choosing what is important and what will be studied, and making conclusions that can be told to others (Sugiyono, 2013). According to Sugiyono (2013), activities in data analysis are divided into 3, namely:

1. Data reduction
   Reducing data means summarizing, choosing the main things, focusing on the important things, looking for themes and patterns. The data that has been reduced will provide a clearer picture and make it easier for researchers to conduct further data collection and look for it when needed.
2. Data presentation
   Presentation of data can be done in brief descriptions, charts, relationships between categories, flowcharts, and the like. It will be easier to understand what happened by presenting the data and planning further work based on what has been understood.
3. Withdrawal conclusion/verification
   The initial conclusions put forward are still temporary and will change if no strong evidence is found to support the data collection stage.

Findings

Characteristics of the Elderly

Informants are young, elderly aged 60 - 74 years. Informant A is 62 years old and does not live with his pregnant family members but with other people's families who have known him for a long time. Informants no longer have dependents because their children are independent, married and living separately. The informant's husband has been away

for a long time. Meanwhile, Informant B is 74 years old and lives with his biological child. Informant B's education is grade 3 elementary school. Informant B had been abandoned by her husband about 14 years ago. Informants A and B both already have grandchildren and do not live alone.

Categorization of Respondent's Answers

The quality of life of the elderly has changed in several aspects of health, psychological, level of dependence, social relationships, environment, spiritual or personal beliefs. The results show that during a pandemic, many elderly are better maintain the health of the body with sufficient rest, taking vitamin or make a concoction of herbs, exercise and of course, complying with health protocol (using masks, wash hands with soap, avoid the crowd and of course to remain home course). Regulations related to avoiding crowds and staying at home make people experience changes in social interaction, level of religiosity, and lifestyle. More details can be seen in Table 1.

Table 1. Theme based on examples of informant expressions

Emergent Theme	Descriptions	Sample of response
Health	More concerned about health, healthy lifestyle, immediately seek treatment when sick.	"...since this pandemic there are some special things, especially health issues, I live an orderly life, what time should I sleep, what time should I think about problems, what time should I rest, what time should I eat" "…but to maintain health, you have to maintain your eating pattern, you can eat this but it is limited and picky about foods that can make you sick, when you try a little…" "The current activity because there is a pandemic is the first time to maintain health according to government regulations. Because from being healthy, we can do activities…" "… even if we don't exercise, we just go for a walk and relax while working, like sweeping the yard, we can also exercise at home…" "Health facilities are affordable, very easy. Because I live with my son, he can take me straight away if I need to see a doctor."
Social Life	Reducing activities outside the home, closer to family, elderly living alone further away from family.	"…the gathering has decreased a lot, meaning less people, not as much as before the pandemic" "…so I can see my children and grandchildren more often because they have more activities at home."

Table 1. Theme based on examples of informant expressions (continue)

Emergent Theme	Descriptions	Sample of response
Religiosity	Worshiping at home, praying depply, boosts immunity by maintaining the level of religiosity.	"If there is a pandemic, everything comes from God, so we leave everything to God, God gives disease with a purpose, He loves his servants so that they return to the right path..." "So for me, we take part in this good study, we are stronger, more confident, more resigned, more confident in everything, all from and because of Allah" "…yeah, it's still stable, there's God, we ask God for anything, that's all, unexpected events are God's will too, like around us there are people who die without getting sick". "...there should be introspection, if there is a disease or pandemic, maybe this is a disaster, repent immediately, that's it." "...always pray that everything will be fine, hopefully all of Mimi's grandchildren will be healthy, their sustenance will be expanded, those who are in school may be successful, those who don't have jobs..."
Interaction During the Pandemic	Online interaction, getting used to using mobile phones.	"…all online, rather than directly online are more…" "...so learning to use cellphones again, because nowadays we don't have anything to do with cell phones, we also use cellphones for shopping..."
Lifestyle	Changes in lifestyle improve the quality of life of the elderly, care about health, maintain relationships, and adapt better during pandemic.	"…most of the elderly are at home, not a worker or anything, so this pandemic doesn't significantly affect their activities or social activities, maybe it's just that they don't congregate too often, for now it's like normal life again, so in my opinion from My eyesight has not changed significantly…"

Physical Health of the Elderly Before and During Pandemic

Based on the results of the interview, Informant B had a cough for two months. Initially, the informant felt that he had only caught a cold. This happened because the informant slept in a room with excessive wind ventilation. In addition, Informants feel that they need time to adapt to the new environment in their daughter's home. However, the cold he experienced did not subside until finally, the informant coughed for approximately four months. Their children assisted informants to go to several hospitals to treat the cough. Still, it was difficult to recover until finally, the informant tried to use herbal medicine, which turned out to be effective to treat his illness.

Unlike Informant A, he has never experienced excessive complaints or pain before or during the pandemic. Several striking things were seen during the pandemic: the change in the two Informants to focus more on maintaining health. According to Informants A and B, maintaining health is very important to carry out various activities. Informants felt that they had limitations in their activities when they were sick or after

being sick, especially during a pandemic. Both Informants pay more attention to health by maintaining a healthy diet, resting time, and getting a little exercise. In addition, both Informants more maintain their diet, drink herbal medicine, and consume vitamins.

Psychology of the Elderly Before and During Pandemic

Informant B's previous residence was located on the river bank with the condition of the building being quite old so that it leaked when it rained and there were many rats in the house. As a result, informants feel uncomfortable and worried when it rains. Finally, the informant chose to live with his daughter, which was supported by the decision of the children to feel comfortable leaving their parents.

Most elderly do not have or do not feel any significant changes psychologically, both before and during the covid-19 pandemic. They prefer to leave everything to the almighty, as for the concerns felt by Informant B because one of their children is a family affected by covid-19. Informants A and B claimed to be happier than before because their children gave more attention and helped informants maintain health by providing supplements or vitamins sufficient for physical needs. As for the anxiety and worries they experienced, they did not last long, and they preferred to leave all destiny or provisions that must be lived to the creator.

Elderly Social Relations Before and During Pandemic

The interview results showed that during the pandemic, the Informants felt a change in the intensity of meeting their grandchildren and children. During the pandemic, grandchildren and their children visit more often. According to Informants, this happens because their children spend more time working from home. Informants admitted that they felt happier and more entertained when their children and grandchildren visited. Unlike before the pandemic, Informants are more often alone and rarely visit their homes so that Informants are more worried and miss their children and grandchildren.

Elderly Environment Before and During Pandemic

Before the pandemic, the social relationship of the elderly with the surrounding environment can still be well maintained, one of which is because the elderly live together with their families. Therefore, the relationship between the elderly and their social environment is very good. If something is not good, then they will solve it amicably. However, even if it doesn't improve, the two Informants will leave all problems to the creator.

Both Informants attended the recitation near their homes. According to the Informant, attending the recitation can increase the informant's knowledge, which the informant tries to practice in his daily life. Informants also feel that seeking knowledge is an obligation that must be done. This recitation activity helps Informants be more patient in living their old age and helps Informants increase their knowledge in their old age.

Discussion

Based on the analysis results, it is known that the elderly are susceptible to disease. According to Banerjee (2020), the elderly are more at risk of various forms of infection and decreased immune quality. The elderly in general also have diseases that can recur at any time, thus increasing the likelihood of being hospitalized. Furthermore,

a pandemic period that makes the elderly have to stay at home often makes the elderly lack social contact with the surrounding environment. This hurts the mental health of the elderly. A study conducted by Seethaler, Just, Stötzner, Bermpohl, & Brandl (2021) found that the elderly with mental disorders and depression experienced an increase in mental illness during the pandemic, one of which was due to reduced social contact with the surrounding environment. Although the pandemic greatly affects the physical and psychological health of the elderly in general, the elderly are more aware of their healthy lifestyle and seek treatment immediately when they feel a complaint.

Based on the analysis results, during a pandemic, the quality of life of the elderly in the dimensions of psychological and emotional well-being shows that the elderly have good emotional regulation. The gratitude shows that the elderly have. On the other hand, the elderly feel grateful because the pandemic was still much to be thankful for, as they can gather sustenance to meet their daily needs. According to Erikson, the elderly are at the stage of integrity versus despair (Santrock, 2012). This stage is the development experienced by the elderly in late adulthood. Erikson revealed that the elderly reflect on the life experiences they have experienced at this stage so that the result is between positive feelings or negative feelings.

Elderly, who can integrate their past, positive emotions will arise in the elderly. Conversely, the elderly who do not integrate their experiences well will experience hopelessness, so the elderly will have negative feelings. According to Tajabadi and Dehghani (2021), gratitude positively affects life satisfaction. This means that the greater the gratitude, the higher the life satisfaction. Furthermore, gratitude also affects psychological well-being. According to Sadoughi and Hesampour (2020), there is a positive relationship between gratitude to God and psychological well-being. This means that the greater the gratitude, the higher the psychological well-being. According to the results, it was also found that the elderly were closer and more serious in studying religion. According to Momeni and Rafiee (2018), the proximity of the elderly to their religion can predict the life satisfaction of the elderly. It means that the closer the elderly to their religion, the life satisfaction of the elderly will also increase. Another research found that religiosity is very important as a life compass that directs their lives towards goodness (Sytsma *et al.*, 2018).

In addition, during the pandemic, the social relationships between the elderly and their families, neighbors, and friends will not diminish. The social relationship of the elderly with the surrounding environment can still be well maintained, one of which is because the elderly live with their families. Healthy social relationships between the elderly and the surrounding environment, such as families, make the elderly have a fairly good quality of life, compared to the elderly living in orphanages (Putri, Fitriana, & Ningrum, 2015). According to Yusselda and Wardani (2016), the higher the emotional support provided by the family, the higher the quality of life of the elderly. Healthy relationships also emerge as a result of high levels of social interaction. According to Sanjaya (2012), high social interaction was negatively correlated with feelings of loneliness experienced by the elderly. This means that the higher the interaction of the elderly, the less the feeling of loneliness in the elderly.

According to Levkovich, Shinan-Altman, Essar Schvartz, and Alperin (2021), optimism and social support effectively overcome challenges and prevent depression. The perceived vulnerability of the elderly may mediate optimism and social support with depression and a lower quality of life. Other research also showed that the elderly experience higher levels of depression and loneliness than the pandemic

(Krendl & Perry, 2021). Then, during this pandemic, the elderly are also experiencing economic difficulties. This indicates a negative impact on the economy of elderly households. According to the OECD or Organization of Economic Cooperation and Development, Indonesia's economic growth decreased by 0.2 percent, from 5.0 percent to 4.8 percent (Sumarni, 2020). According to Li and Mutchler (2020), the elderly experience a high rate of virus infection and a high level of economic risk. Social Security, which works as the basis of economic security for the elderly, is often insufficient, especially the crisis that arose during the pandemic. Low economic support also affects mental health. According to Sultana et al. (2020), low family income and no input from anywhere has a significant positive effect on mental health. In addition, the risks arising from the impending financial crisis due to covid-19 and facing financial problems can trigger stress and problems that lead to depression.

The analysis results also show that simple and balanced living habits and not extravagant are factors that support the quality of life of the elderly. According to Marcelina (2020), research on optimizing the quality of life of the elderly during a pandemic can be applied, among others, by paying attention to physical activity, diet and nutrition, and social psychology. Based on Dunn's research (2017), health can be improved with positive emotions, which can be done in two ways: through healthy behavior and changing the body's biophysiological resources and processes and gratitude, which can trigger positive emotions. In addition, forgiving the mistakes of others is also important in improving the quality of life of the elderly. According to Rey and Extremera (2016) research, forgiving behavior can improve the quality of life of the elderly. Great attention to the elderly, both from the elderly themselves, their families, and the surrounding environment, is very much needed by the elderly in times of crisis.

This study has explained several phenomena that occur in the quality of life of the elderly during the pandemic. So many impacts of the pandemic affect the lives of the elderly, especially changing the lifestyle of the elderly. However, this research is limited to examining only from the point of view of the elderly themselves. At the same time, in the process of collecting data, the researchers experience limitations in terms of communication because the elderly tend to answer the same questions for different questions. It would be better if the data collection involved other family members so that the interviews with the elderly could be confirmed again.

Conclusion and Recommendation

Conclusion

The covid pandemic affects the quality of life of the elderly. In terms of physical health, the pandemic does not affect the physical health of the elderly because the elderly, since the pandemic, have become increasingly aware of their health, for example, by maintaining their diet, rearranging their lifestyle, and immediately seeking treatment when experiencing complaints. On the psychological aspect, the pandemic also doesn't really affect the psychological health of the elderly, and even the elderly are happier because their families pay more attention to them. Then, on social interaction, the pandemic affects the intensity of the elderly meeting their children and grandchildren (who do not live in the same house). Since the pandemic, the elderly are increasingly being visited by their families. Furthermore, the pandemic has quite affected activities in

the elderly environment on an environmental aspect. Since the pandemic, religious events and other activities have been reduced due to avoiding crowds.

Recommendation

They were referring to the findings that indicate that the health of the elderly is the main aspect that must be considered. It is hoped that families who have the elderly can continue to pay attention to the health of their elderly both physically and psychologically. The happiness of the elderly must also be considered because when the elderly are happy, the physical health of the elderly will also have a positive effect. Suggestions for further research are expected to examine the point of view of the elderly who live alone or do not live with their families. According to previous studies, the elderly who do not live with their families tend to poor quality of life. Further research can examine the driving or inhibiting factors that make the quality of life of the elderly less good if they do not live with their family.

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