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The Reality of the Life of Elderly Visitors to Parks in South Amman Municipality: A Qualitative Study

واقع حياة المسنين المرتادين للمتنزهات في بلدية جنوب عمان: دراسة نوعية

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Abstract

This study explores the lives of elderly individuals who frequent parks in South Amman Municipality using a qualitative approach. Through interviews with 21 elderly men and women, the study examines their daily experiences, challenges, and social participation. Findings reveal that while many engage in family activities, they spend prolonged periods at home, leading to loneliness and isolation. Some experience psychological distress, while nearly half lack health insurance, forget medication, and miss regular check-ups. Additionally, many find public spaces unsuitable, limiting mobility. The study concludes that improving elderly well-being requires raising awareness of health insurance inclusion, ensuring free transportation, promoting regular medical check-ups, integrating them into social clubs, enhancing elderly-friendly infrastructure, and increasing financial support through the National Aid Fund. These measures are essential for fostering social inclusion and improving the quality of life for elderly individuals in South Amman.

Keywords: quality of life , elderly individuals , South Amman

المستخلص

تستكشف الدراسة واقع حياة كبار السن الذين يترددون على الحدائق العامة في أمانة عمان الكبرى – جنوب عمّان، من خلال منهج نوعي يعتمد على المقابلات الفردية. أجريت المقابلات مع 21 من الرجال والنساء كبار السن، وهدفت إلى فهم تجاربهم اليومية، والتحديات التي يواجهونها، ومشاركتهم الاجتماعية. أظهرت النتائج أن العديد منهم يشاركون في أنشطة أسرية، إلا أنهم يقضون فترات طويلة في المنزل، مما يؤدي إلى الشعور بالوحدة والعزلة. كما يعاني بعضهم من ضغوط نفسية، ويُلاحظ أن ما يقارب نصف المشاركين يفتقرون إلى التأمين الصحي، ويغفلون عن تناول أدويتهم، ويتغيبون عن الفحوصات الدورية. إضافة إلى ذلك، أشار العديد إلى عدم ملاءمة الأماكن العامة لاحتياجاتهم، مما يحدّ من حركتهم وتنقلهم. وخلصت الدراسة إلى أن تحسين رفاه كبار السن يتطلب رفع الوعي بأهمية شمولهم بالتأمين الصحي، وتوفير وسائل نقل مجانية، وتعزيز إجراء الفحوصات الطبية الدورية، ودمجهم في الأندية الاجتماعية، وتحسين البنية التحتية الملائمة لكبار السن، وزيادة الدعم المالي عبر صندوق المعونة الوطنية. تُعدّ هذه التدخلات ضرورية لتعزيز الشمول الاجتماعي وتحسين جودة حياة كبار السن في جنوب عمّان.

الكلمات المفتاحية: جودة الحياة، كبار السن، جنوب عمّان]

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1. Introduction

The aging stage is of significant importance as it is filled with challenges, pressures, and new changes that require adaptation and adjustment—both internally and with the environment. Elderly individuals at this stage need support and assistance to face these challenges and work towards their adaptation and adjustment. This stage is also a continuation of the previous stages, as the changes affecting the elderly, the conflicts they face, and shifts in their status or even residence can have profound impacts. For instance, distancing from family and the original community, or resorting to a nursing home, can greatly influence their well-being, either positively or negatively.

If the elderly individual accepts their life as it is, successfully confronts these challenges, and meets their needs, they are likely to achieve psychological adjustment. Conversely, if the elderly fail to meet their needs and desires, struggle to handle conflicts and changes, and are unable to accept their reality, they may end up in isolation, weakened communication, and a lack of belonging. This can lead to feelings of anxiety and preoccupation with thoughts of death, resulting in disturbed psychological adjustment.

In essence, psychological adjustment is the cornerstone of human life, as it reflects an individual's ability to resolve their conflicts and tensions in an appropriate manner, fulfill their psychological and social needs, and strive to achieve adaptation and balance with environmental demands. (Baraka & Harqa, 2022).

Jordanian society has undergone economic, social, and health transformations over the past decades, significantly shaping the social and economic issues of the elderly, as well as the challenges they face. Among the most prominent of these transformations is the migration from rural areas to urban centers, accompanied by changes in the social structure, particularly in family composition and the status of the elderly within it. Additionally, there has been a noticeable rise in life expectancy due to continuous improvements in healthcare and medical services.

The challenges faced by the elderly became more pronounced as they found themselves within a new social system based on the nuclear family model, which necessitated their support and care. The shift from the extended family system to the smaller nuclear family has had a clear negative impact, exacerbating the problems faced by the elderly in Jordanian society. (Ratrout, 2001)

International reports by the United Nations indicate a significant increase in the global population of individuals aged 60 and above, rising from 214 million to 1.121 billion. The United Nations Housing Division further projects that by 2050, the number of people aged 60 and above will reach 2 billion. These growing elderly population, as highlighted in global studies, necessitates an increase in the number of trained social workers and nurses. (Abu Al-Fotouh, 2023)

Study Problem

Addressing the issues of the elderly has become a priority in Jordan, especially with the increasing number of senior citizens. According to the Department of Statistics, Jordan’s population was estimated at 11,516,000 by the end of 2023. The issue of the elderly is one of the most significant concerns in Jordanian society, as they form an integral part of it, with nearly every household including at least one elderly member. Despite their importance, this demographic remains one of the most underserved groups, lacking sufficient attention.

The elderly are a national treasure, possessing vast experiences, wisdom, and sound judgment that can serve as valuable lessons for present and future generations. However, the Annual Statistical Yearbook for 2023 by the Department of Statistics highlights the following

figures: the population aged 60–64 reached 201,860 (1.8%), and those aged 65 and above totaled 424,890 (3.7%).

Given these statistics, studying the realities of elderly life is of paramount importance. This stage of life involves numerous changes, such as retirement and the shift from extended family structures to nuclear families. These transitions bring about changes in roles and functions, significantly impacting their daily lives.

This study aims to explore this issue by addressing the following primary research question: **"How do elderly individuals who frequent the parks in southern Amman perceive and interpret their reality?"**

Study Objectives and Questions

This study aims to explore the realities of the lives of elderly individuals who frequent the parks in southern Amman. It seeks to answer the following research questions:

1. How do elderly individuals who frequent the parks in southern Amman interpret their social realities?
2. How do elderly individuals who frequent the parks in southern Amman interpret their psychological realities?
3. How do elderly individuals who frequent the parks in southern Amman interpret their economic realities?
4. How do elderly individuals who frequent the parks in southern Amman interpret their health realities?

Study Terminology

This section includes key terms used in the study:

1. The Elderly: "An individual who has completed the stage of maturity and transitions from growth to a gradual decline in the ability of body organs to perform their functions. This stage represents a biological reality that characterizes human development in the life cycle." (Al-Jazzar, 2017, p. 16)
2. Health Care: "A set of preventive services and measures provided by the Directorate of Primary Health Care and its affiliated institutions to all members of society, aiming to improve the community's overall health and prevent the occurrence and spread of diseases. It includes services that promote the general health level." (Al-Abed, 2018, p. 5)
3. Social Services: "A set of programs and activities that help the elderly adapt to the society they live in, including their relationships with family, friends, and the external community." (Al-Nashar, 2018)
4. Quality of Life: "The individual's position in life within the context of the culture and value systems in which they live, concerning their goals, expectations, standards, and concerns. It is a broad concept encompassing physical health, psychological state, level of independence, social relationships, personal beliefs, and interactions with environmental factors that affect them." (World Health Organization, 2012, p. 11)
5. Amman Municipality Gardens: "This project is part of the Greater Amman Municipality's (GAM) plan to expand urban green spaces as part of a strategy focusing on the environment and transforming the capital into a green, citizen-friendly city by 2020." (Al-Bitar, 2020)

Literature Review

Characteristics of the Elderly

Physical Characteristics:

Elderly individuals exhibit several distinguishing physical characteristics and changes. These include general weakness, reduced physical and sexual energy, diminished muscle

strength, rapid fatigue, reduced productivity, weak legs, neurological imbalances, slow motor performance, poor coordination, difficulty in maintaining balance, loss of control, trembling of limbs, vulnerability to diseases, skin sagging, dryness of extremities, and frequent complaints related to physical and sexual weakness and arteriosclerosis.

Physiological degeneration is a continuous process that affects various organs, gradually impairing their ability to function effectively. This leads to weakened immunity and increased susceptibility to diseases common among the elderly, such as hypertension, diabetes, and rheumatism, which significantly impact their lifestyle and interactions with others. (Zein Al-Din, 2022) highlights these issues, and a study by Abbas (2022), titled *"The Status of the Elderly in Iraqi Families: Reality and Social Determinants,"* found that most elderly individuals suffer from chronic illnesses. Only a small portion of the sample sought medical consultation, often due to poor health conditions that prevented them from leaving their homes.

Psychological Characteristics:

Aging influences the emotional, psychological, and behavioral lives of elderly individuals. Increased feelings of loneliness and insignificance, often due to the loss of social roles and disconnection from the community, lead to emotional instability and anxiety. Psychological changes are closely linked to social changes and physical weaknesses experienced by the elderly, making them prone to fear and anxiety. Chronic illnesses, retirement, losing friends to death, and failing to adapt socially and personally contribute to conflicts with family members, particularly children and grandchildren. Elderly individuals may feel neglected, excluded from social gatherings, and unable to master new social skills required in various situations. This negatively impacts their mental health, causing tension, fear of illness and death, excessive concern for their health, difficulty adjusting to new changes, emotional sensitivity, and a struggle to accept aging. Elderly individuals may also exhibit withdrawal, depression, irritability, or persistent headaches. According to Shaari (2012), these emotions are a blend of life-long feelings influenced by the individual's adaptability to their environment and acceptance by those around them. Moreover, the loss of a life partner or the departure of children due to marriage and starting independent families leaves elderly individuals feeling isolated due to the absence of support or companionship. Additionally, elderly individuals tend to cling to the past, traditions, and customs they were raised with, often adopting a hostile stance towards anything new. This leads to ongoing conflicts with children and grandchildren, further exacerbating their anxiety. Aging increases their sensitivity to different situations, which can result in psychological, emotional, and social disorders, especially when coping with the loss of loved ones or a life partner. These factors contribute to poor adjustment and heighten emotional distress.

Economic Characteristics of Aging:

During old age, individuals tend to place greater importance on financial matters, exhibiting increased caution about saving money. This behavior stems from a desire to maintain independence and avoid reliance on others. However, this stage of life often coincides with a decline in income due to retirement or an inability to work, making it difficult for the elderly to meet their needs.

Since older adults are more susceptible to illnesses, they require more frequent medical care and doctor visits. Without additional financial resources, their situation may become even more challenging. (Al-Safti & Mazloum, 2017).

Social Characteristics of Aging:

Socially, old age is marked by retirement, where individuals cease performing their job roles due to reaching the age limit. Retirement is a significant life event with profound impacts,

as it results in the loss of social roles and associated changes. One of these is a reduction in income, often by half, accompanied by a shrinking social network as the elderly withdraw from active social participation due to physical frailty. This withdrawal is often mutual, as advancing age limits the elderly's physical abilities, and they tend to prefer isolation and solitude. Factors such as children's preoccupation with work, marriage, or travel, or the loss of a life partner further intensify their sense of loneliness. Physical weakness may also prevent them from visiting friends, leaving them with increased free time. Consequently, the elderly may feel like consumers rather than contributors to society (Al-Safti & Mazloum, 2017).

Cognitive Characteristics of Aging:

Cognitively, aging is associated with a relative decline in mental activity due to biological changes in the body. Short-term memory tends to weaken, and attention and perception diminish, as the ability to learn and acquire new information declines. Additionally, elderly individuals may experience brain cell atrophy, further impairing their memory. They are also at risk of brain-related diseases such as dementia and Alzheimer's, which significantly reduce their motivation to learn and negatively affect their overall performance.

Needs and Problems of the Elderly

The elderly have become a significant demographic group with a clear impact on the population structure of societies, especially in developed ones. The growing interest in addressing their needs is not only because they represent an increasing proportion of the population, but also because they have a tangible influence on society's structure and dynamics. Therefore, developing and improving services for the elderly is considered essential and vital to meet their needs, including social, psychological, economic, and health needs. If these needs are not met, they can create numerous problems. For example, one of the social needs of the elderly is to build healthy and meaningful social relationships with others, which is considered an essential part of the aging experience. Due to the lack of societal response to their needs and the lack of opportunities for participation in social life and decision-making, as well as the difficulty in adapting to rapidly changing technological and cultural shifts, they may experience increased feelings of isolation and loneliness. Social isolation is one of the major social problems faced by the elderly, as they may find themselves deprived of social interaction and the support they need. They may also struggle to integrate into local communities due to reduced mobility, especially as the number of friends and acquaintances decreases over time due to retirement and reduced social activities, which negatively affects their mental health, self-confidence, and social participation. These problems can be exacerbated by factors such as the marriage of children or the death of a spouse, leading to the elderly losing their position within the family and social withdrawal, which can be mutual between the elderly and society. This is partly due to societal attitudes toward interacting with the elderly (Mazid, 2019). Hence, there is a need to support and enhance social relationships with others and to create social and recreational institutions for elderly individuals who do not find comfort at home. These institutions can organize activities for them, utilize their free time, and meet their needs, such as participating in group trips, theater performances, and cinema, as well as bridging the generational gap. Many studies have emphasized the importance of developing life skills for the elderly, such as cooperation, participation, decision-making, and communication skills, to help them achieve their goals and enhance their ability to integrate into their community (Abu al-Futuh, 2023). A study by Visaetsilapanonta & Promtong (2023), titled "Social Interaction of Japanese Seniors in Chiang Mai, Thailand," found that the elderly regularly interact with people in the community through daily life and social activities, including face-to-face conversations, due to the cultural nature of the community and laws that highlight respect for this group in society.

The psychological needs of the elderly are of paramount importance as they seek to achieve happiness and social and human connections. These needs include feelings of security, appreciation, affection, love, and the enhancement of their emotional well-being. It is essential to meet the elderly's psychological needs by providing appropriate psychological care, guiding the family and social environment in dealing with them lovingly and appropriately, and attending to small details, such as holding their hands, speaking kindly to them, listening to them, and providing appropriate psychological support through healthcare services, including counseling and psychotherapy for elderly individuals suffering from mental disorders or mental illnesses. Failure to meet these needs can negatively impact their psychological state and expose them to various psychological problems, such as anxiety disorders (fears and phobias), personality disorders like introversion, emotional disorders, and obsessive-compulsive disorders. Elderly individuals may also suffer from psychological issues such as depression, anxiety, isolation, and loneliness, often due to life changes like the loss of a partner or retirement. These problems increase early mortality rates and reduce their overall quality of life (Zain al-Din, 2022). A study by Jennifer Yeh & Liu (2003), titled "The Impact of Social Support on Cognitive Function in Older Adults," highlighted that social and psychological support for the elderly enhances their quality of life.

The elderly also have significant economic needs arising from low income and reduced productivity. Some believe that the expenses of the elderly decrease with age, but in reality, their needs, particularly health-related, increase. They may need costly medications and specialized diets, as well as regular visits to medical centers, and hospitals, and the purchase of medical devices like hearing aids, glasses, crutches, and wheelchairs. Many elderly individuals require various surgeries, which places a financial burden on those who rely on pension assistance from children and relatives, or income from personal assets. To alleviate economic challenges, it is essential to meet these needs through a system that ensures economic security and provides an income that keeps pace with the rising costs of goods and services while enabling their participation in development processes and benefiting from their expertise in their fields. Training them for jobs that match their physical and mental abilities is also important. It should be noted that the number of elderly people seeking economic assistance is steadily increasing, primarily due to a lack of financial resources after retirement, whether compulsory or voluntary. As a result, they lose a large portion of their income, leading to reduced income and increased financial burdens, which deepens their sense of economic insecurity and increases their anxiety (Abu al-Futuh, 2023). It is crucial to emphasize the importance of elderly participation in social security services, as they provide support and protection after retirement by offering a stable income for a dignified life. A study by Al-Abed (2018) titled "The Reality of Elderly Care: A Field Study on a Sample of Elderly in the Taqert District, February" found that the majority of elderly individuals had benefited from social security services.

Health needs are a priority that must be addressed, especially as the elderly age and their physical strength decline. The elderly require specialized healthcare that suits their changing health conditions, such as medications and frequent medical visits. Many face challenges in accessing these services due to a lack of medical advice and the availability of hospitals, clinics, and medical centers to care for them, along with the need to expand healthcare coverage (Al-Huwail, 2014). Aging is a major factor in the deterioration of physical capabilities, leading to several health issues, including chronic diseases such as heart disease, diabetes, and respiratory disorders, along with muscle weakness and reduced mobility. This negatively impacts their ability to perform daily activities, increases the risk of falls and injuries, and reduces the body's ability to resist external influences, affecting their psychological state and exposing them to other psychological problems, such as anxiety disorders, personality disorders, emotional disorders, and obsessive-compulsive disorder (Zain al-Din, 2022). A study by Abbas (2022),

titled "The Status of the Elderly in Iraqi Families: Reality and Social Determinants," found that elderly individuals suffered from chronic illnesses and consulted a doctor when ill, either alone or with someone else. However, a small portion of the sample did not visit a doctor due to a lack of money, the absence of someone to accompany them, their inability to leave home due to health issues, or a lack of desire to seek medical attention, preferring to wait until symptoms subside.

Theoretical Framework

Theories Explaining Aging

Role Theory:

This theory suggests that problems arise when an individual fails to perform one or more of their social roles or when there is a conflict between these roles. Role theory views society as a collection of complexes, interconnected relationships among its members. It includes several key concepts, such as role integration, where behavior matches the social expectations of the individual's environment, role conflict, which occurs when roles are incompatible with each other, and role changes throughout life stages, especially in adolescence and old age, which is the focus of this study.

This theory explains aging by asserting that an individual's ability to adapt during the aging process depends on their capacity to accept changes in their social roles during this stage. Older adults often face a range of role-related issues, such as the loss of roles they once played in their lives, such as retirement from work. In many cases, most older adults cannot regain new roles to replace the ones they have lost. (Shaari, 2012)

Role theory can be used to understand how social roles affect the quality of life of the elderly. For instance, it can analyze the role of elderly individuals within their family and community and how this role changes as they age. The role an individual plays can significantly impact their sense of value and life satisfaction. In Jordanian culture, the elderly are considered a source of wisdom and experience, which can enhance their sense of respect and appreciation.

Role theory can also be applied to develop programs and services that support the elderly in maintaining their social roles or adopting new ones that match their current abilities. These programs could include activities that enhance social participation and integration, such as volunteer work or involvement in community groups. By providing the necessary support to help the elderly maintain or find new roles, their sense of belonging and contribution can be improved, which positively affects their mental and physical health.

Crisis Theory:

This theory seeks to explain certain psychological and emotional disturbances that occur in older adults due to retirement and the withdrawal of social roles associated with work, leading to a decline in social status and position within their environment. Psychologists note that this stage of life is sensitive, often triggering crises and psychological, emotional, and social disturbances due to the withdrawal of many roles and responsibilities by society after retirement or due to physical and health conditions, leading to poor adjustment, anxiety, and feelings of inferiority (Salem et al., 2015).

Crisis theory focuses on how individuals cope with challenges and crises they face in different stages of life. This theory can be applied to aging and the elderly to develop support strategies that help them adjust to significant life changes, such as retirement, loss of a partner, or health decline. Psychological and social support programs can be created to help older adults cope with these crises by offering counseling, support groups, and workshops focused on developing skills to adapt to new circumstances.

This theory can also be used in the design of comprehensive healthcare and social policies that consider potential crises elderly individuals might face. For instance, individual case

studies can be developed for each elderly person, offering immediate medical and social services when a health or social crisis occurs. Additionally, training for nursing aid and professionals in elderly care can focus on how to manage crises and provide effective and timely support, thereby enhancing the elderly's ability to cope with significant life challenges and contributing to an improvement in their quality of life and psychological and social stability.

Methodology

This study adopted a qualitative approach, as it is considered the most suitable method to achieve the study's goals, aiming to gain a deep and accurate understanding of the reality of the study (Al-Mahmoudi, 2019). The qualitative method is the best way to explore the reality of the elderly's lives in all aspects and to understand their perspectives and reactions. It is considered the most appropriate approach for researching new issues that have not been extensively studied, as it contributes effectively to obtaining in-depth and detailed information that helps in understanding the studied issue clearly and comprehensively (Al-Khayyat, 2010).

The qualitative method allows both the researcher and the participants to ask and answer questions freely. Participants have the opportunity to narrate their stories, share their experiences, and express their feelings without restrictions. In return, the qualitative approach allows the researcher to follow up on participants' discussions by asking for clarification on specific points or even introducing new questions at the moment. The researcher also has the opportunity to observe participants' expressions and reactions, providing enough space to understand the details on a deeper level (Information and Research Center, King Hussein Foundation, 2016). However, there are many criticisms of the qualitative approach, including that it requires a significant amount of time and effort from the researcher, as well as high costs compared to other methods, especially if the study sample is large. Additionally, the results derived from the qualitative approach cannot be easily generalized (Al-Mahmoudi, 2019).

Population:

The study population consists of all the parks in the southern region of Amman, totaling 36 parks.

Sample:

The study was conducted on a sample of elderly individuals who frequented parks in Southern Amman, numbering 21 elderly participants (12 females and 9 males). This sample was purposefully selected from the following parks: (Al-Dabbat Park, Zahran Park, Salah al-Din Park, Shoura Park, Zahra Al-Mostanda Park, Al-Shabab Park, Al-Yasmine Park, and South Abdoun Park).

The sample was distributed according to gender, age, health status, educational level, marital status, number of children, work status, and social security status. The sample consisted of 9 males and 12 females. The vast majority of participants suffer from chronic illnesses, with ages ranging from 72 to 77 years. Nine of the elderly participants have an education level below secondary school, and 11 are widowers, while 9 are married. All participants have children, except for one male participant who is unmarried. The majority (18 participants) are not working, and 14 of them are not covered by social security.

Study Tool: Based on the study's objectives, which aim to explore the reality of life for elderly individuals visiting parks in Southern Amman, and due to the use of the qualitative approach to explore the topic in-depth, an interview guide was developed to collect the statements from participants and observe their reactions and expressions. The in-depth interview allows the researcher to define the topic and leave space for the participant to express their opinions without interruption. In-depth interviews are typically conducted with a small number of participants as they suit qualitative research (Soumia, 2018).

A key advantage of interviews is that they are the best way to gather information, as they allow for the collection of non-verbal cues such as gestures, body movements, and eye contact. Interviews rely on a progressive questioning style. However, one drawback is that interviews require a lot of time and effort from the researcher, and some questions may cause embarrassment for certain participants (Information and Research Center, King Hussein Foundation, 2016).

Procedures

The literature on the topic and previous studies related to the lives of elderly people visiting gardens were reviewed. This was an opportunity to derive a conclusion that would study the social, psychological, health, and economic lives of the elderly. Based on this, the research title "The Reality of Life for Elderly People Visiting the Gardens of South Amman Municipality" was adopted.

After determining the title, the interview tool was developed to align with the study objectives and answer the direct interview questions. Based on the interview guide, it was reviewed by a group of specialized researchers, and their feedback was considered to make the necessary adjustments. The study then focused on identifying the gardens in South Amman, reaching the participants, and conducting the interviews. At the start of the interviews, the researcher introduced herself, explained the research title and objectives, and emphasized the measures in place to ensure the confidentiality of the information provided. It was stressed that no information identifying the participants would be included and that the interviews would only be used for scientific research purposes. The interviews were recorded manually and transcribed immediately after completion to avoid data loss.

During the interviews with the elderly, the focus was on building a professional relationship that fostered trust and comfort. Skills were used to help the participants speak freely, such as active listening, releasing negative emotions, and asking and rephrasing questions to encourage participants to share their thoughts on the topics. Ethical considerations were adhered to, including objectivity and avoiding bias in favor of personal opinions. The participants' names or locations were not mentioned, as any names used in the research are fictitious and do not refer to real participants.

Field Access Mechanism:

1. Interviews began by introducing the researcher, the study title, objectives, and the interview duration. It was emphasized that the information would remain confidential using codes to ensure that names would not be repeated, and no personal information identifying the participant would be included.
2. Data documentation was done based on confidentiality and privacy principles through direct intervention, by writing notes and transcribing them immediately after the interview, as the use of recording tools was rejected.
3. During the interviews, the focus was on building a professional relationship that created trust and comfort through various skills, such as releasing negative emotions, active listening, and guiding participants through the questions (from general to specific). Rephrasing questions and simplifying them using colloquial language was done to ensure clarity.
4. Participants were assured that they had the right to withdraw from the interview at any time without providing reasons.
5. At the end of the interview, the researcher reminded participants that the interview was nearly complete, reiterated confidentiality, and reassured them that the collected data would remain confidential.

Ethical Considerations: Several ethical practices were considered during the field study with participants:

1. Emphasizing the building of a professional relationship with the participants.
2. Ensuring the confidentiality and privacy of the participants' personal information.
3. Informing participants that their involvement was voluntary and that withdrawing from the interview would not affect them negatively in any way.
4. Using pseudonyms/fictitious names and avoiding including any identifying information when analyzing the data.

Data Analysis Method: After completing the data collection from the elderly participants, each interview was transcribed into a separate file (Transcript). Notes taken during the interviews were also referred to. Each transcript was read several times to ensure a good understanding of its content. Then, the process of identifying commonalities and differences in the participants' experiences and thoughts began, linking and analyzing them within accepted scientific methods. The goal was to extract the main ideas derived from the study's results. An inductive thematic analysis method was used to analyze the collected data, focusing on uncovering the social, psychological, health, and economic aspects of the elderly participants' lives.

Study Domains:

- **Human Domain:** Elderly people visiting the gardens in South Amman Municipality.
- **Spatial Domain:** Interviews were conducted in some gardens in South Amman Municipality.
- **Temporal Domain:** The study was conducted from 5/8/2023 to 20/8/2023, with each interview lasting about 1 - 1:300 hour.
- **Study Challenges:** The main challenges faced by the researchers during the preparation of this study were:
- Some elderly participants were unwilling to participate in the interviews.
- Many elderly participants refused to continue with the interviews.

Study Results and Discussion

The study reached a set of results that clarify the reality of the lives of elderly individuals who frequent parks in the southern part of the Greater Amman Municipality, based on answers to the following study questions:

First Question Result: How do elderly individuals who frequent the parks in the southern part of Greater Amman Municipality interpret their social lives?

1. Relationship between the elderly and their children and grandchildren: The relationship between the elderly and their children and grandchildren is generally good. (17) elderly individuals stated that their relationship with their children and grandchildren is excellent, with no conflicts between them. Case (12) said: "***It's excellent, may God bless them all and open doors for them wherever they go***." However, (3) elderly individuals mentioned that their relationship with their children and grandchildren is strained and characterized by conflicts. Case (2) said: "***All my children don't like me to visit them, except for one who has money, but his wife doesn't want me to come***."

As for the nature of the activity's elderly individuals engage in with their children and grandchildren, (14) elderly individuals said that their children are settled in Jordan and regularly visit them, participating in various activities. Case (20) stated: "***They don't fall short; they spend time together playing and playing football***." Case (14) said: "The grandchildren play and jump, they enjoy spending time together." However, (2) elderly individuals complained about their grandchildren holding onto their phones during visits. Case (5) said: "***We don't do***

anything; we just sit there while they keep holding onto their phones." Meanwhile, (4) elderly individuals mentioned that their children live abroad, and when they visit during holidays, they engage in outdoor activities like playing or sitting at home to talk. Case (3) said: "***I miss the days I didn't see them; I just want to hold them***."

Thus, the vast majority of elderly individuals are visited regularly by their children and grandchildren and engage in family activities, unlike a few who complain about being estranged from their children. This indicates the love and respect elderly individuals receive from their families, which enhances their sense of acceptance and self-confidence, and increases their sense of security. This aligns with the findings of (Abbas,2022), who concluded that elderly individuals feel comfortable and reassured among their family members. The study by (Visaetsilapanonta & Promtong,2023) indicated that elderly individuals interact with society through their daily lives, social activities, and daily face-to-face conversations.

2.Elderly Participation in Family Events:

When asked about their participation in family events, (8) elderly individuals reported that they consistently participate in family gatherings to this day. Case (12) said: "***Of course, it's a duty; if there's a wedding or celebration, we congratulate, or if there's a funeral, we perform our duty***." Case (6) confirmed this, saying: "***Yes if they invite you, you must go***." Case (10) added: "***Of course, I really enjoy participating in the celebrations of my neighbors.***"

However, (9) elderly individuals reported that they do not participate in family events. Case (11) mentioned: "***I don't always participate, depending on my health***." Fear of illness was also a factor. Additionally, (3) elderly individuals noted obstacles that prevent them from attending events, such as inadequate facilities for easy movement. Case (1) explained: "***Honestly, I rarely go because I can't go up the stairs. Even my children, if they don't have an elevator, I can't go to their house***." Another reason for not attending was the family's lack of interest in their participation, as mentioned by Case (5): "***I don't go with them, and they don't take me either. I've stopped asking because I can't go up and down the stairs***." Some also noted that living far from their family members prevented them from participating in gatherings, as Case (4) explained: "I don't have anyone living here. We were in Syria and came here after the war, and then my children got married and moved abroad."

These results indicate that the majority of elderly individuals no longer participate in family gatherings, either due to health reasons that make movement difficult, the lack of environmental accommodations to facilitate their mobility or a feeling of separation from family activities because they fear being a burden on their families, which increases their sense of isolation. However, a portion of elderly individuals still engage in family events and activities, which strengthens family bonds and improves their mental health. This also aligns with social norms that emphasize family duties. This result is consistent with the findings of the study by (Visaetsilapanonta & Promtong ,2023), titled "Social Interaction of Japanese Elderly in Chiang Mai, Thailand," which concluded that elderly individuals regularly interact with people in their community through daily life and social activities, including face-to-face conversations, due to the nature of the community's culture and the laws that show respect for this age group in Thai society.

3.Elderly Participation with Family When Hosting Guests:

When asked if they engage with their family during guest visits, (17) elderly individuals responded that they sit with the guests and do not prefer to stay alone. Case (1) said: "***Of course, I sit with them, serve them, and chat with them.***" Case (12) added: "***Of course, I sit with them and socialize***." However, (2) individuals stated that they prefer not to sit with guests and relatives, opting instead to stay alone. Case (17) mentioned: "***No, I don't like to burden them***." Two other responses stood out as they mentioned that no one visits them. Case (14) said: "**I**

don't see anyone except my daughter; I'm not close with my husband's family." Case (7) stated: "**I don't see anyone; I go out late**."

The study showed that the majority of elderly individuals prefer spending time with relatives and sitting with them, which highlights their desire for face-to-face communication and interaction. They enjoy sharing their experiences and stories and value social engagements over solitude. This finding aligns with the study by (Jennifer Yeh & Liu,2003), which emphasizes the importance of social support for the elderly and the positive impact that social activities have on improving their quality of life and boosting their morale.

4. Assistance with Household Tasks for the Elderly:

When asked if they have someone who helps them with household tasks, (19) elderly individuals responded that they receive assistance from family members, such as their children, grandchildren, or their children's spouses. For example, Case (4) said: "***My son's wife, may God bless her, does everything, and I arrange my room and help her***." Case (19) added: "***Yes if I need anything, I ask my children***." However, two elderly individuals stated that no one helps them with household tasks, and they do everything themselves. Case (13) said: "***No one helps me; I do what I can. I'm very clean, and even if you lived next to me, you wouldn't come to help***." Case (12) said: "***No, there's no one; I do everything myself, even the garden at my house, I plant it, and I fix everything if it breaks in the house***."

The study's findings show that the majority of elderly individuals have someone to assist with household tasks, whether it is their children, grandchildren, or even domestic workers, while a small number do everything on their own. The elderly often receive care and attention from their children, particularly as they age, highlighting the changing roles within the family. Children, in turn, provide support in various forms, from physical help to emotional care. This finding aligns with the study by (Abbas,2022), which highlights the position of the elderly within the family, emphasizing that most elderly people carry out their tasks or visit the doctor either independently or with others, and they feel comforted and secure among their family members, with home healthcare being provided. Conversely, role theory suggests that an individual's ability to adapt to old age depends on their acceptance of changes in their social roles during this stage of life. Elderly individuals often face role-related challenges, losing many of the roles they once played, and these roles are usually hard to regain. Previously, they could perform all household tasks without needing help, but with aging and role changes, their children now assist them in various ways.

This study found that elderly individuals still feel responsible and believe they have a role in life, with the ability to contribute again and a purpose to live for. This differs from the findings of (Al-Kandari & Douglas E.,2014), who suggest that elderly individuals can renew their lives by engaging in different activities such as walking, which is closely tied to their overall health. The more active elderly individuals are, the better their physical and mental health tends to be.

Second Question Result: Interpretation of the Elderly's Psychological Reality Based on Their Time Spent in Parks in South Amman Municipality

1.How the Elderly Spend Their Time and Participate in Recreational Activities with Family:

Seventeen elderly individuals mentioned that they spend their day at home either doing household chores or following the news. Occasionally, their children visit, or they spend their day alone due to family members being busy. For instance, Case (1) said: "***Most of my time is at home, I go and come to my children's place but not every day***," and Case (5) stated: "**I spend most of the time alone; everyone is busy with their own life, no one is free**." Some expressed feelings of loneliness, like Case (18) who said: "**Loneliness has destroyed me, I'm disconnected from people now**." One elderly individual works, which occupies much of their

day; Case (7) said: "***I work for about 10 hours, then I go home, barely see my daughters and sleep. My relationships with my family and my wife's family have been light for a while***."

Four elderly individuals mentioned that they live with their children, interact with neighbors, or visit the mosque, which helps prevent feelings of emptiness and loneliness. For example, Case (15) said: "***I live with my son, and most of my time is spent with my grandchildren and his wife***," and Case (9) said: "***I sometimes visit my neighbor to drink coffee***."

The study's findings show that the majority of the elderly prefer to stay at home and avoid going out during the day. When they do go out, it is typically for short periods and not far from home. This can be explained by the Activity Theory, which suggests that elderly individuals should seek alternatives for four key roles that were prominent before the end of middle adulthood—loss of work, reduced income, declining health, and changes in family structure. If an elderly person can compensate for these lost roles, they achieve successful aging. Aging is not a time for complete withdrawal from social life but rather an opportunity for new social roles. The theory also explains the isolation of the elderly due to a shrinking social world when they retire, lose a companion or friend, and face physical decline, making it increasingly difficult for them to meet their needs. This result aligns with the findings of Jennifer Yeh & Liu (2003), which indicate that social activities for the elderly improve their quality of life. Travel, for instance, brings them closer to their families and makes them feel valued.

Additionally, recreational activities are a key aspect that helps improve the elderly's mental health and strengthens their relationship with their children, reducing isolation. Nine elderly individuals mentioned they continue participating in recreational activities. Case (12) said: "***Of course, there is nothing better than family gatherings and sitting with relatives. Going out for a bit with my in-laws lifts my spirits***," and Case (15) said: "***They don't leave me alone; even though I don't like to go out, I go for my grandchildren's sake***." Case (11) mentioned that the love of children and not being able to refuse their requests makes them participate in activities: "***I'm not always in the mood to go out, sometimes I don't feel like it, but I go to please them***."

However, some indicated that they do not always participate in recreational activities. Eight elderly individuals confirmed this, such as Case (11), who said: "***Not always because I am a homebody***," and Case (1), who said: "***I go out, but not always***," while Case (6) expressed: "***No, I don't go anywhere with them; my wife, may she rest in peace, was my companion, and we used to go everywhere together. Now that she's gone, I don't have anyone to enjoy with***."

Based on these responses, it is clear that the majority of elderly individuals engage in recreational activities with their families. These activities have a positive impact on their mental and physical health, help reduce anxiety and strengthen social interaction and family bonds. This finding aligns with (Al-Kandari & Douglas E. ,2014), who affirm that elderly individuals can renew their lives by engaging in activities such as walking, which is strongly linked to their overall health. The more active elderly people are, the better their physical and mental health tends to be.

2.Elderly Comfort in Their Living Environment:

When asked about their living conditions, 15 elderly individuals shared their feelings of comfort regarding their homes and proximity to services. Case (10) stated: "***My grandson and I live alone in the house, so there's no one to disturb or cause noise***," while Case (4) mentioned: "***No, they respect that I need to sleep, and I usually stay up late.***" Case (13) shared: "***The neighborhood is quiet, and my grandson sleeps early because of school***," and Case (7) said: "***Thank God, the neighborhood is quiet***."

On the other hand, 4 elderly individuals expressed discomfort due to various reasons, including noisy children or the distance from essential services. Case (14) mentioned: "***Sometimes the neighbors' children make noise, you know how loud they can be***," while Case

(15) said: "***It's far from the hospital, and I need it every week, but it's difficult to move around.***"

This indicates that as elderly individuals age, they become more attached to their homes, and it becomes harder for them to leave. The findings highlight the elderly's needs, especially their requirement to live in areas close to essential services such as healthcare centers and marketplaces, which are crucial for meeting their needs quickly. The study also found that a significant portion of the elderly enjoy a quiet living environment, either due to the calmness of the area they live in the infrequent visits from their children and grandchildren or even living alone. This could indicate neglect by their children in terms of visitation and providing the proper care they need.

This finding contrasts with the study by (Visaetsilapanonta & Promtong ,2023), which suggested that elderly individuals in certain societies regularly engage with others in their community through daily interactions and social activities, including face-to-face conversations. This is attributed to the culture and societal norms that show respect for the elderly, suggesting a different dynamic of interaction and support in some regions.

Result of the Third Question: How do elderly visitors to the parks of South Greater Amman Municipality interpret their health conditions?

1.**Elderly individuals and their visits to hospitals and taking medications:**

When asked about where they go when they fall ill, the majority of the elderly (19 individuals) answered that they go to the hospital or medical clinic when needed. Case (1) said: *"**My children always take me to the Islamic Hospital immediately**."* Case (4) said: *"**I go to the clinic, and if necessary, I go to the hospital***. "Two elderly individuals stated that they have grown used to their pain and do not go to hospitals. Case (6) said: *"**Honestly, I've gotten used to the pain. I've been sick for 8 years—it's unreasonable to go to the hospital every time I'm in pain. Plus, my car isn't always available for me to go**."*

When asked about their first action upon feeling pain, 10 elderly individuals stated that they use herbs or take vitamins. Case (8) said: *"**Sometimes if my stomach hurts, I prepare sage tea**."* Case (4) said: *"**I got used to treating myself with herbal drinks. We've aged, honestly, and illness has worn me out**."* Case (11) said: *"**I drink herbal tea, and if I don't improve, I take medication."** 9* elderly individuals stated that they endure the pain and take medication, and if the medication doesn't alleviate the pain, they then visit the clinic or hospital. Case (12) said: *"**I endure it until the next day. If the pain persists, I will visit the doctor**."* When asked about taking medications on time, 8 elderly individuals confirmed they do take their medications as prescribed. Case (12) said: *"**Yes, of course**."* Case (1) said: *"**Of course, one's health is their greatest asset**."* Case (8) said: *"**I don't like taking medication, and if the doctor prescribes something, the maid gives it to me**."* Case (4) said: *"**I take blood pressure medication and cancer medication—may God grant us health and recovery**."* 13 elderly individuals mentioned that they only take their medication if they remember or if someone reminds them. Case (5) said: *"**It depends. If someone is around to remind me, I take it; if not, I don't. Honestly, I don't like medication**."* Case (6) said: *"**Sometimes I remember, and sometimes I don't. I often forget to take it because I'm busy working on the pickup truck**."* Regarding attending medical appointments, 12 elderly individuals stated that they are committed to their appointments because they suffer from various chronic diseases. Case (12) said: *"**I'm committed because I have psoriasis and visit the dermatologist regularly—almost every month**."* Case (1) said: *"**Absolutely, I even have an appointment on Sunday for my knees**."* Case (11) said: *"**Yes, I go for a check-up every two months**."* On the other hand, 9 elderly individuals stated they do not have specific appointments to attend. Case (10) said: *"**Thank God, I don't have any scheduled appointments**."* Case (13) said: *"**I don't follow up, and I don't go to appointments**."* Case (3)

said: *"**I don't have appointments. When necessary, I go to Hayat Hospital."*** When asked about regular medical check-ups, 7 elderly individuals stated that they undergo periodic check-ups. Case (4) said: *"**Honestly, I don't like doctors, but ever since I got cancer, I've started doing regular check-ups**."* Case (15) said: *"**Yes, for the heart**."* However, 14 elderly individuals said they do not undergo regular check-ups, either because no one takes them for such tests or because they do not feel the need. Case (7) said: *"**No, I don't go looking for problems**."* Case (8) said: ***"No, I live alone with my maid, and there's no one to take me. Even if I want to go, it would be a hassle with a taxi, and I'd have to wait a long time**."* Regarding owning medical devices, 14 elderly individuals stated that they own medical devices. Case (5) said: *"**Yes, my son—may God bless him—bought it for me**."* Case (2) said: *"**Yes, I have one. My son got it for me, but he doesn't always have the time to help me use it**."* Case (4) said: *"**I have a blood pressure device, and I check it occasionally when I get a headache**."* Seven elderly individuals mentioned that they do not own medical devices. Case (9) said: *"**I don't have one because no one knows how to use it**."* Case (11) said: *"**No, I don't have one, but I check my sugar level at the pharmacy**."*

It appears that the majority of the elderly seek hospitals or medical clinics when they feel ill. They also tend to use herbal remedies at the onset of illness, as they consider herbal treatments an alternative to specialized medical care due to the difficulties associated with hospital visits, whether financial or physical. The majority of respondents confirmed that they are committed to regular appointments because they suffer from various chronic illnesses, and these appointments help monitor their health, avoid complications, and ensure they receive regular medication. However, most elderly individuals do not undergo regular medical check-ups due to difficulties in transportation, high costs, or a lack of awareness about the importance of these check-ups. Additionally, the majority of respondents mentioned owning medical devices, which helps them manage their health conditions and saves time and effort in visiting medical clinics. These findings can be explained through Crisis Theory, which emphasizes that aging leads to a decline in health and physical capabilities, making it increasingly difficult for the elderly to meet their needs and face challenges (Al-Shaari, 2012). These results are also consistent with Abbas's study (2022), which concluded that most elderly individuals suffer from chronic diseases and seek medical care when needed, either alone or accompanied by others. A minority do not visit doctors due to financial constraints, lack of companionship, inability to leave the house, or unwillingness to seek care, choosing instead to endure symptoms until they subside.

2.The Elderly and Health Insurance:

(12) elderly individuals stated that they have governmental or military insurance. Case (5) said: *"**I have military insurance at the Medical City because my son is in public security**."* Case (3) said: ***"I have government insurance for those over 60**."* One elderly individual mentioned having private insurance. Case (10) said: *"**I have private insurance**."* On the other hand, (9) elderly individuals reported not having any health insurance. Case (12) said: *"**I don't have insurance, but I have the UNRWA relief card**."* Case (1) said: *"**I don't have health insurance**."* Case (6) said: *"**I don't have insurance, but I have an exemption**."*

Regarding the question, "How do you get to the hospital?": The study revealed that the majority of the sample group have health insurance, whether governmental, military, or private. This reflects the importance of enrolling elderly individuals in health insurance services to ensure they receive the necessary medical care and are protected from the financial burdens associated with medical treatment. Most elderly respondents also noted that they use a car to reach the hospital. Facilitating elderly access to hospitals is crucial to ensuring they receive the medical care they need, as these obstacles can significantly impact their ability to obtain medical services. This finding aligns with the results of the Abbas study (2022), which concluded that a small proportion of respondents do not visit the doctor when ill, either due to a lack of funds for consultations or other barriers.

3.The Nature of Elderly Diet and Personal Needs:

(17) elderly individuals responded regarding the nature and type of food they eat, stating that they eat everything they prepare themselves or that is prepared by their children or spouses. However, they avoid certain foods due to specific health conditions. Case (1) said: *"**I eat everything in moderation, but the most important thing for me is my morning cup of tea with milk and a rusk, and then I have breakfast**."* Case (8) said: *"**Thank God, but I don't eat much because I live alone; there's no one to encourage me**."* Case (5) said: *"**I eat whatever they cook**."* (4) elderly individuals reported adhering to a healthy diet to protect themselves from illnesses. Case (20) said: *"**I don't eat fats, I follow specific diets, and I stick to three main meals every day**."* Case (10) said: *"**Thank God, I always eat healthy, beneficial, and nutritious foods, and I avoid meat, chicken, and sugar because I'm afraid of getting sick**."* When asked about their personal needs, such as glasses, dentures, bed linens, and other personal items, (12) elderly individuals stated they regularly renew their personal items. Case (12) said: *"**Yes, whenever I need to, I renew my glasses, and my teeth are excellent.**"* Case (1) said: *"**I don't wear glasses or have dentures, but I regularly change my bed linens and other items**."* However, (9) elderly individuals said they do not renew their personal items. Case (8) said: *"**No, the helper does everything when I ask her, but she doesn't always remember**."* Case (2) said: *"**I don't buy anything new unless it breaks—you see how the situation is**."* Case (13) said: *"**As you can see, I don't wear glasses, and half of my teeth are gone**."*

The results show that the majority of elderly individuals eat whatever is prepared by themselves or their families, while only a few are committed to a healthy diet. It is crucial to provide elderly individuals with a healthy and balanced diet to maintain their physical health stability. With age, their nutritional needs change, and they may develop chronic illnesses that require adherence to a specific diet. This often necessitates adjustments to their eating habits and the type of food provided to meet their needs effectively. Additionally, the majority of elderly individuals stated they regularly renew their personal items. Renewing personal necessities for the elderly is essential to ensure their well-being and facilitate their daily activities. This aligns with the *Activity Theory*, which explains that the physical decline of the elderly increases the difficulty of meeting their needs independently (Shaari, 2012).

Result of the fourth Question: How do elderly people visiting the South Amman Municipality parks perceive their economic reality?

revealed that 10 elderly women reported having never worked throughout their lives, as they were housewives with no retirement income. For example, Case (8) stated, "***I don't work, but my children send me money***," and Case (3) said, "***I don't work and have no pension***." Three women mentioned they rely on their late husband's pension or other sources, as Case (14) said, "***The late husband's pension barely covers the rent***," while Case (13) explained, "***I receive a pension inherited from my late father***." Two women indicated they had worked previously but did not have a retirement pension; Case (10) said, "***I didn't complete my job as a teacher, so I don't have a pension, but my children send me money***," and Case (4) added, "***I used to work with needlework and at the corniche***." On the other hand, eight elderly men reported they were not currently working. Among them, four stated they were retired with a pension, such as Case (18): "**I finished my service, and I have a private pension**," while Case (19) said, "***I retired due to my age***." Another man mentioned retiring voluntarily because of health issues, as Case (21) explained, "***I retired by choice because I have a slipped disc and couldn't continue working***." One elderly man said he was still working, as Case (7) stated, "***I've been driving a taxi for a long time***." The findings highlighted that most elderly people are unemployed, relying on their children's financial support or national assistance. They are among the groups most exposed to economic deprivation due to limited work opportunities and weak financial resources. Others depend on their retirement pensions, with retirement marking a new phase that brings future uncertainty and reduced income, leading to economic insecurity amidst

increasing financial burdens. This contrasts with the findings of Al-Abed (2018), which emphasized that elderly individuals benefit from social security services. According to Activity Theory, to cope with the loss of work, individuals must find alternative goals to maintain their morale. Successful compensation for lost roles enables a person to achieve positive adaptation in old age. The results also showed that all elderly men either work or used to work, indicating that men's years of employment surpass women's. Women are more accepting of not working, as societal roles impose work as a lifelong identity for men. Consequently, men are more significantly affected by retirement, which creates economic and social challenges. Based on Role Theory, gender roles vary across societies; in Arab communities, men work more due to religious and social expectations, making retirement—whether mandatory or due to illness—a significant identity shock. Women, however, are accustomed to household routines, which partially compensate for their loss of external work, allowing them to adapt to caring for themselves and their families. For men, retirement can cause anxiety, particularly among workaholics, impacting their adaptation to new lifestyles and social relationships. This aligns with Ali and Hassan's (2021) study, which found a gendered relationship between work and elderly nursing aid, revealing that 74% of elderly workers are men and 26% are women, reflecting men's traditional responsibility for family support in Eastern societies. The results also highlighted that most elderly individuals are currently unemployed due to illnesses and employers' reluctance to hire them. Those who do work do so to meet life's demands. Living standards significantly influence various aspects, including health, which affects their ability to work, social relationships, and economic status. Elderly individuals often seek work due to the lack of someone to meet their needs, and insufficient care can result in economic abuse.

4. Elderly Pension and Its Sufficiency as a Source of Income

When asked about the sufficiency of their income sources, nine elderly individuals confirmed that their income was insufficient to meet their needs. For instance, Case (11) said, "***No, it barely covers a quarter of what's needed, and by the first week it's all gone because of medicine costs and home expenses***." Case (9) mentioned, "***The rent I get doesn't suffice, and there are days when only God knows how I manage but thank God***." Twelve others stated that their income was sufficient to meet their basic needs. Case (1) replied, "***Thank God, we're fine***," while Case (8) said, "***My children send me money every month, and thank God it's enough***," and Case (5) added, "***Thank God, it's enough, and I saved some money from the past, plus my children help me***," and Case (10) said, "***My children send me money, and thank God it's enough, and even more***." The study revealed that the majority of the elderly do not have a pension and rely on their property or children to meet their needs. This indicates that in Arab society, children show special care for their elderly parents through both financial and emotional support. This aligns with the findings of Jennifer Yeh & Liu (2003), which emphasized the importance of social support for elderly people in improving their quality of life and preventing problems resulting from economic hardships. It is worth noting that economic issues arise from the elderly's inability to satisfy their needs and desires, leading to other problems. The lack of a stable income significantly affects other areas, especially psychological well-being. The elderly's feelings of need and inability to fulfill their desires exacerbate mental and physical health issues. Therefore, elderly individuals need to save throughout their lives or join social security, as social security should be a fundamental pillar in society for every individual, providing benefits during old age when they are unable to work. The main goal of social security is to provide social and economic protection for individuals.

5. Elderly Control Over Their Income and Spending Methods:

When asked who controls their income, all 21 elderly participants responded that they are the ones in charge of their income, regardless of its source—whether it's from a pension, money sent by children or siblings, rental income, private work, or if a relative receives it on their

behalf but they have the freedom to manage it. For instance, Case (19) said, "***Yes, but priority is always for the house and the children***." Case (3) stated, "***I manage the household expenses***," while Case (13) said, "***I buy the groceries and spend on the house***," and Case (10) remarked, "***Of course, I manage everything***."

The majority of elderly participants (11 out of 21) reported spending a large portion of their income on basic necessities such as food and drinks, utility bills (electricity and water), or household needs. Case (8) said, "**I spend it wherever I want, and I buy what I need and what I'm missing**," and Case (9) stated, "**Bills and food, or repairs for the house, expenses for those living with me**." Additionally, 7 elderly participants mentioned spending their income on medical treatment and medication, while 2 stated that they support their children and grandchildren. Case (6) explained, "***What I make goes for bills, medication, and doctor's visits, and now that my son and his family have moved in with me, the expenses have increased, but thank God, things are manageable***." Some also mentioned having children in university, so part of their income goes to pay tuition fees. One unique response was from an elderly person who does not spend their income but saves it. Case (5) said, "***I save it, but when my eldest grandson comes, I ask him to take me to the bank to deposit the money my children give me along with my pension, I prefer to go with someone other than him***."

The interviews revealed that all elderly participants manage their income and expenses themselves, meaning they play a key role in the family structure. This highlights the importance of independence for the elderly, as it allows them to feel that their health and capabilities enable them to control their daily lives and needs. Being in control of their income helps fill the gap caused by retirement or the loss of work and fosters their sense of involvement in social life. Despite the fact that their income may not be enough to meet all their needs, it is clear that elderly individuals prioritize spending on their basic life requirements or those of family members. The pension may not suffice with the rising cost of living, which increases over time. Therefore, attention should be given to the importance of support from children and relatives as a source of income for the elderly to avoid economic problems. Additionally, providing work for the elderly is crucial. The absence of a stable income can significantly impact their psychological well-being, as they may feel the inability to fulfill their needs and desires, which can exacerbate mental and physical health issues. This aligns with the study by Jalali et al. (2023), which emphasizes the importance of economic support in enhancing social participation and meeting needs. It underscores the necessity of granting them independence and avoiding the feeling of losing their social status, allowing the elderly to accept themselves. Failure to accept oneself, and the way one views oneself, can be one of the main reasons for the problems one faces due to aging and the emptiness that comes with it.

Conclusion:

The study found that the social, psychological, health, and economic realities of older adults vary across different aspects of their lives. **Socially**, the vast majority maintain good relationships with their children and grandchildren, with no significant conflicts reported. About half of the participants are actively involved in family events and regularly host guests, though most do not engage in recreational activities. Many elderly individuals also receive help from family members, such as children, grandchildren, or the spouses of their children. **Psychologically**, more than half of the participants spend most of their time alone and in isolation. Despite this, a group of participants reported that their lives are generally calm and stable. The vast majority of older adults also expressed feeling comfortable in their living environment. From a **health** perspective, the majority visit hospitals when ill. However, a small number do not consult a doctor due to their inability to leave home because of their health condition. Additionally, half of the older adults do not have health insurance, and the vast majority do not undergo regular medical check-ups. **Economically**, around half of the elderly

women in the sample reported that they had never worked in the past. Half of the older adults stated that their income is insufficient to meet their needs. However, all older adults confirmed that they have full control over their income and expenditures. The majority of older adults indicated that they spend a large portion of their income on their basic needs.

Recommendations:

1. **Develop infrastructure and provide environmental facilities** such as wheelchair ramps and improved access to buildings and public spaces to enhance the mobility and independence of older adults, addressing the physical limitations highlighted in the health findings. Additionally, providing free or subsidized transportation services will facilitate their access to healthcare, social activities, and other essential services, thereby reducing isolation and improving their quality of life.
2. **Provide free health insurance without any deductions** to ensure that older adults, especially the half who currently lack coverage, can access necessary healthcare without financial burden. Furthermore, increasing financial support for older adults can help them better meet their basic needs and alleviate the economic difficulties reported in the study.
3. **Promote health awareness campaigns** focusing on the importance of regular medical check-ups to improve health outcomes and prevent diseases among older adults.
4. **Conduct further studies in different regions** to gain a broader understanding of the social, psychological, health, and economic realities of older adults across various areas.
5. **Collaborate with organizations and the private sector** to create employment opportunities for capable older adults, thereby improving their income and strengthening their economic independence, which addresses the issue of insufficient income found in the study.

References:

Abbas, Z. (2022). The status of the elderly in the Iraqi family: Reality and social determinants. *Journal of Sustainable Studies, 4*(1), 2225–2248.

Abu al-Futouh, W. (2023). The needs of the elderly in light of technological changes and a proposed program from the perspective of general practice to deal with them. *Journal of the Faculty of Social Work, University of Fayoum.*

Akmal, N. (2003). *The effectiveness of relaxation programs in reducing anxiety and improving quality of life among a sample of elderly* (Master's thesis, University of Minya).

Al-Abid, I. (2018). *The reality of healthcare for the elderly: A field study of a sample of elderly people in the Tagert area* (Unpublished Master's thesis). Qasdi Merbah University - Ouargla, Algeria.

Al-Hawail, J. (2014). *The rights of the elderly in light of international human rights norms and agreements, and their preservation within the family and community.* Doha, Qatar.

Ali, B., & Hassan, H. (2021). Social factors of elderly work: A field study. *Journal of the Faculty of Education, 1*(45), 583-620.

Al-Jazzar, Sh. (2017). *The rights of elderly people in institutional care facilities between care and abuse: Dar Al-Diyafa and Samir Shama Homes as a model* (Unpublished Master's thesis). University of Jordan, Amman, Jordan.

Al-Kandari, Y. Y., & Crews, D. E. (2014). Social support and health among elderly Kuwaitis. *Journal of Biosocial Science, 46*(4), 518–530.

Al-Khayyat, M. (2010). *Fundamentals of quantitative and qualitative research in social sciences.* Al-Raya Publishing and Distribution House.

Al-Mahmoudi, M. (2019). *Scientific research methods* (3rd ed.). Dar Al-Kitab.

Al-Nashar, S. (2018). The reality of health and social services provided to elderly women in the social care home in Riyadh. *Arab Journal of Social Sciences, 14*(4).

Al-Safiti, W., & Al-Mazloom, H. (2017). *Elderly care between theory and practice.* Dar Al-Thaqafa.

Al-Shaari, S. (2012). *Social care for the elderly according to Islamic law* (1st ed.). Dar Al-Hekma Publishing and Distribution.

Baraka, M., & Harqa, S. (2022). *Psychological adjustment and self-esteem among elderly residents in elderly homes* (Master's thesis, University of Guelma, Algeria).

Bitar Company. (n.d.). *Greater Amman Municipality Public Parks Project.* Retrieved February 2025, from https://bitarconsultants.com

Department of Statistics, Jordan. (2023). *Jordan Annual Statistical Book, 2023.* Retrieved from https://dosweb.dos.gov.jo/databank/yearbook/YearBook_2023/Population.pdf

Jalali, M. T., Sarikhani, Y., Askarian, F., Marzaleh, M. A., Najibi, S. M., & Delavari, S. (2023). Factors facilitating and inhibiting the social participation of the elderly in health-oriented activities in Shiraz, Southern Iran. *BMC Geriatrics, 23*(175), 1-7

King Hussein Foundation Information and Research Center. (2019). *Training guide: Scientific research methods.* Jordan.

Mazid, R. (2019). The needs of the elderly and their classifications. *Journal of Damascus University, 35*(1), 349-364.

Promtong, T., & Visaetsilapanonta, P. (2023). Social interaction of Japanese elderly in Chiang Mai, Thailand. *Pertanika Journal of Social Science and Humanities, 31*(1), 81-97.

Ratrout, F. (2001). The social images of cultural conflict in the family structure prevalent in Jordanian society. *Paper presented at the Arab Family and 21st Century Challenges Symposium,* University of Jordan, January 11.

Salem, S., Youssef, S., & Sid, A. (2015). *Social work practice with the elderly* (1st ed.). Dar Al-Misara Publishing and Distribution.

Soumia, E. (2018). *Designing and building scientific research tools* (1st ed.). Hussein Ben Bou Ali University, Institute of Physical Education and Sports, Algeria.

World Health Organization. (2012). *Definition of quality of life.* Retrieved from https://iris.who.int/bitstream/handle/10665/77932/WHO_HIS_HSI_Rev.2012.03_eng.pdf?sequence=1

Yeh, S. C., & Liu, Y. Y. (2003). Influence of social support on cognitive function in the elderly. *BMC Health Services Research, 3*(9), 1-9.

Zainuddin, S. (2022). Economic and social care for the elderly: A comparative study. *International Scientific Conference on the Rights of the Elderly – Between Reality and Aspirations, Faculty of Law, University of Tanta.*