

## The Impact of Communication on the Overall Quality of Life in Elderly Koreans

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### Abstract

*Background: Communication is important for the elderly to maintain existing social relationships while creating new relationships based on good communication skills to lessen psychological and emotional distress and lead a healthy life in advanced age. Aims: This study identifies the difference between the social network-based quality of communication life and the overall quality of life in the elderly and how much the quality of communication life affects the overall quality of life. Methods: This research includes a survey of the elderly aged 65 and over living in small cities of South Korea. Data sets of 201 elderly were analyzed. Results: This study found a significant correlation between the quality of communication life and the overall quality of life. Religion also influences the elderly's quality of communication life. The elderly's quality of communication life has 40% explanatory power of the overall quality of life. Conclusion: Consequently, senior citizens' quality of life will be improved through the enhanced quality of communication in addition to financial and health conditions by participating in various community activities similar to those provided by religion to increase opportunities for communication..*

**Keywords:** Social Network, Communication, Quality of life, Factor, Old ages.

## 1. Introduction

### 1.1 Background

It is well known that the elderly's quality of life is linked directly with how much they feel happy with their life and how much they can achieve their lifelong goals and people in a super-aged society tend to think that psychological health matters more than material things[1]. Therefore, loneliness which is psychological element that determines the subjective quality of life in senior citizens is an issue of great importance resulting from psychological and external stress in the upcoming super-aged society[2].

The senses of deprivation and isolation felt by losing their social position, encountering a change in social roles, and losing a spouse or friends as they get older and the society transforms often cause psychological problems including depression. Such problems resulted from the narrowing of social networks make them dependent and lead to various social conflicts[3, 4]. The elderly's psychological and emotional issues may be addressed by maintaining their existing relationships through social networks and further creating new relationships[5]. A social network is a social structure created by an individual while having a social life[6]. Their primary social partners are family members, relatives, friends, and neighbors. The secondary partners come from a religious life. It is a very important social network since it is subject to voluntary choice and

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offers comfort in psychological domains such as the senses of loss, isolation, loneliness, and fear[7, 8].

To maintain such social networks, good communication should take place. Communication is the most fundamental ability to psychologically adapt to the society[9]. Skinner pointed out that the elderly need to have regular opportunities to facilitate verbal interactions with others. A relationship is maintained and continued through communication both in private and public domains. Communication satisfies the desire for expression as well as the desire for performance in everyday life, for instance obtaining resources and maintaining personal relationships. For this reason, senior citizens need to retain such communication networks. Since their psychological independence particularly depends on having communication networks, the quality of communication life is directly associated with the overall quality of life in the elderly[10].

Consequently, it is important for the elderly to maintain existing social relationships at the same time creating new relationships based on good communication skills so as to lessen psychological and emotional distress and lead a healthy life of old age.

## **1.2 Purpose**

This study is aimed at identifying the difference between the social network-based quality of communication life and the overall quality of life in the elderly and how much the quality of communication life would affect the overall quality of life.

## **2. Materials and Methods**

### **2.1 Study Design**

This is a descriptive survey research with the aim to identify the quality of communication life as a factor affecting the quality of life in the elderly aged 65 and over living in small cities of South Korea.

### **2.2 Instruments**

#### **2.2.1 Quality of Communication Life**

Data of the quality of communication life was collected by adapting the Lee (2018) [9]'s Korean version of a questionnaire to better fit the survey of older adults. The questionnaire included questions on communication-related specific behaviors and communication skills. The survey consisted of 15 questions with two unsuitable questions excluded and Cronbach's  $\alpha$  was .812.

#### **2.2.2 Overall Quality of Life**

The overall quality of life was assessed by a single question "I am generally satisfied with my life" with five points given to the answer 'Very Satisfied', four points to 'Satisfied', three points to 'Good', two points to 'Not Satisfied', and one point to 'Unhappy'.

### **2.3 Subjects and Data Collection**

This study collected data by directly visiting about ten senior citizens' centers in small cities of South Korea and having one-on-one interviews. Subjects include old men and women aged 65 and over who were able to communicate, understood the purpose of this study to accept participation, and were able to understand and answer to questions. Data was collected from February to March, 2019.

### **2.4 Data Analysis**

Collected data was analyzed using the SPSS 22.0 statistics program. First, the percentages of frequency were identified for social networks. Second, the average standard deviation was calculated for the quality of communication life and the overall quality of life. Third, t-test and ANOVA were used to analyze the social

network-based quality of communication life and the overall quality of life; and Scheffe's post hoc test was conducted. Fourth, Pearson's correlation coefficients were produced for the relationship between the quality of communication life and the overall quality of life. Fifth, simple regression analysis was conducted for the factors affecting the overall quality of life

## 2.5 Ethical Issues

This study was carried out after approval IRB(WKUIRB-201810-SB-071). We were giving full explanation to subjects about the purpose of data collection, guaranteed anonymity, and the possibility of withdrawal and receiving their prior consent.

## 3. Results

### 3.1 Subjects' Social Networks

Subjects' social networks are as shown in Table 1. 124 people have spouses (61.7%) with 119 living with family (59.2%) and 67 living alone (33.3%). Major conversation partners are neighbors in 104 (51.7%), family members in 71 (35.4%), and friends in 26 (12.9%). 126 people have a religion (62.70%).

**Table 1. Subjects' Social Networks**

		<b>N=201</b>	
<b>Variables</b>		<b>n</b>	<b>%</b>
<b>Spouse</b>	<b>Yes</b>	<b>124</b>	<b>61.7</b>
	<b>No</b>	<b>77</b>	<b>38.3</b>
<b>Live with</b>	<b>Family</b>	<b>119</b>	<b>59.2</b>
	<b>Alone</b>	<b>67</b>	<b>33.3</b>
	<b>Others</b>	<b>15</b>	<b>7.5</b>
<b>Major Conversation Partner</b>	<b>Family</b>	<b>71</b>	<b>35.3</b>
	<b>Friend</b>	<b>26</b>	<b>12.9</b>
	<b>neighbor</b>	<b>104</b>	<b>51.8</b>
<b>Religion</b>	<b>Yes</b>	<b>126</b>	<b>62.7</b>
	<b>No</b>	<b>75</b>	<b>37.3</b>

### 3.2 Subjects' Quality of Communication Life and Overall Quality of Life

Subjects' quality of communication life and overall quality of life are as shown in Table 2. The overall quality of communication life scored  $4.12 \pm 0.77$  on average with sub-questions such as roles and self-consciousness scored  $4.18 \pm 0.88$ , confidence and autonomy in communication scored  $4.10 \pm 0.87$ , participation in daily activities scored  $4.08 \pm 0.88$ , and interactions with others scored  $4.02 \pm 0.90$ . The overall quality of life

scored  $4.04 \pm 1.18$ .

**Table 2. Subjects' Quality of Communication Life and Overall Quality of Life**

**N=201**

Variable	Mean $\pm$ SD	Range	Mean $\pm$ SD	Range
Quality of Communication Life	70.09 $\pm$ 13.10	24~85	4.12 $\pm$ 0.77	1.14~5
Confidence and autonomy in communication	20.50 $\pm$ 4.37	6~25	4.10 $\pm$ 0.87	1~5
Role and Self Consciousness	12.53 $\pm$ 2.65	3~15	4.18 $\pm$ 0.88	1~5
Participation in daily activities	16.34 $\pm$ 3.51	4~20	4.08 $\pm$ 0.88	1~5
Interactions with others	12.07 $\pm$ 2.69	3~15	4.02 $\pm$ 0.90	1~5
Overall quality of life	4.04 $\pm$ 1.18	1~5	4.04 $\pm$ 1.18	1~5

### 3.3 Subjects' Social Network-based Quality of Communication Life and Overall Quality of Life

Subject's social network-based quality of communication life and overall quality of life are as shown in Table 3. There was a significant difference in the quality of communication life according to the presence of a spouse ( $t=2.814$ ,  $p=.006$ ) and a religious life ( $t=2.814$ ,  $p=.006$ ). As for sub-questions, there was a difference in confidence and autonomy in communication according to a religious life ( $t=3.309$ ,  $p=.001$ ), in roles and self-consciousness according to the presence of cohabiting family ( $F=3.261$ ,  $p=.040$ ) and a religious life ( $t=2.937$ ,  $p=.004$ ). Moreover there was a significant difference not only in participation in daily activities according to the presence of a spouse ( $t=3.575$ ,  $p<.001$ ), cohabiting family ( $F=3.334$ ,  $p=.038$ ), and a religious life ( $t=3.602$ ,  $p<.001$ ), but also in interactions with others according to the presence of conversation partners ( $F=4.908$ ,  $p=.008$ ) and a religious life ( $t=2.406$ ,  $p=.018$ ). There was also a significant difference in the overall quality of life according to a religious life ( $t=3.6934$ ,  $p<.001$ ).

**Table 3. Subjects' Social Network-based Quality of Communication Life and Overall Quality of Life**

**N=201**

Variable		Quality of Communication Life M $\pm$ SD	t/F	p	Confidence and Autonomy in communication M $\pm$ SD	t/F	p	Role and Self-consciousness M $\pm$ SD	t/F	p
Spouse	Yes	4.24 $\pm$ 0.69	2.814	.006	4.21 $\pm$ 0.82	2.293	.023	4.30 $\pm$ 0.75	2.308	.023
	No	3.92 $\pm$ 0.85			3.92 $\pm$ 0.93			3.98 $\pm$ 1.05		
Live with	Family	4.21 $\pm$ 0.73	1.882	.155	4.17 $\pm$ 0.86	0.937	.393	4.31 $\pm$ 0.75	3.261	.040
	Alone	3.99 $\pm$ 0.84			4.00 $\pm$ 0.91			3.98 $\pm$ 1.03		
	Others	4.04 $\pm$ 0.73			4.00 $\pm$ 0.82			3.98 $\pm$ 1.03		
Major Conversation Partner	Family	4.25 $\pm$ 0.62	1.840	.162	4.21 $\pm$ 0.74	1.593	.206	4.33 $\pm$ 0.65	2.894	.058
	Friend	4.18 $\pm$ 0.84			4.29 $\pm$ 0.78			4.42 $\pm$ 0.79		
	Neighbor	4.02 $\pm$ 0.83			4.01 $\pm$ 0.96			4.06 $\pm$ 0.98		

Religion	Yes	4.28±0.61	3.567	.001	4.26±0.77	3.309	.001	4.33±0.73	2.937	.004
	No	3.85±0.96			3.83±0.97			3.93±1.05		
Variable		participation in daily activities M±SD	t/F	p	Interactions with others M±SD	t/F	p	Overall quality of life M±SD	t/F	p
Spouse	Yes	4.26±0.79	3.575	<.001	4.11±0.82	1.731	0.086	4.14±1.12	1.415	.159
	No	3.80±0.95			3.88±1.00			3.88±1.31		
Live with	Family	4.21±0.83	3.334	.038	4.06±0.86	0.241	.786	4.15±1.02	1.394	.251
	Alone	3.86±0.91			3.99±0.97			4.31±1.12		
	Others	4.07±0.94			3.91±0.90			3.89±1.31		
Major Conversation Partner	Family	4.23±0.68	1.755	.176	4.14±0.78	4.908	.008	4.15±1.02	1.762	.174
	Friend	4.17±0.82			4.47±0.77			4.31±1.12		
	Neighbor	3.98±1.00			3.87±0.95			3.89±1.31		
Religion	Yes	4.27±0.74	3.602	<.001	4.15±0.80	2.406	.018	4.281±1.07	3.693	<.001
	No	3.79±1.01			3.82±1.01			3.63±1.29		

\*p<.05, \*\*p<.01

### 3.4 Relationships between Subjects' Quality of Communication Life and Overall Quality of Life

The relationships between subjects' quality of communication life and overall quality of life are as shown in Table 4. A significant static correlation was found in the relationship between subjects' quality of communication life and overall quality of life ( $r=.636$ ,  $p<.001$ ). As for sub-questions, a significant static correlation ( $r$  value) was also found in the overall quality of life with roles and self-consciousness ( $r=.635$ ,  $p<.001$ ), confidence and autonomy in communication ( $r=.586$ ,  $p<.001$ ), participation in daily activities ( $r=.509$ ,  $p<.001$ ), and interactions with others ( $r=.489$ ,  $p<.001$ ).

**Table 4. Relationships between Subjects' Quality of Communication Life and Overall Quality of Life**

**N=201**

Variable	Quality of Communication life	Confidence and Autonomy in Communication	Role and Self-consciousness	Participation in daily activities	Interactions with others
	r(p)				
Overall quality of life	.636(<.001)**	.586(<.001)**	.635(<.001)**	.509(<.001)**	.489(<.001)**

\*p<.05, \*\*p<.01

### 3.5 Factors Affecting Subjects' Overall Quality of Life

The results of simple regression analysis to see factors affecting subjects' overall quality of life were as shown in Table 5. Autocorrelation of dependent variables was reviewed to verify the relevance of applying regression analysis. As a result, no autocorrelation was discovered by getting 1.927 for the Durbin-Watson test. Factors affecting subjects' overall quality of life were found to be the quality of communication life ( $\beta=.636$ ,  $p<.001$ ) with 40.1% overall explanatory power ( $F=134.261$ ,  $p<.001$ ).

Table 5. Factors Affecting Subjects' Overall Quality of Life

N=201

	Unstandardized Coefficients $\beta$	Standardized Coefficients $\beta$	t	p	Adjusted R <sup>2</sup>	F	p
(Constant)	-.036				.401	134.261	<.001**
Quality of Communication Life	.989	.636	11.587	<.001**			

\*p&lt;.05, \*\*p&lt;.01

#### 4. Discussion

This study investigated what impact is given on the elderly's overall quality of life by the quality of communication life which is a social and psychological factor that influences the quality of life in senior citizens and the results are as follows:

First, this study found that there was a significant correlation between the quality of communication life and the overall quality of life. Out of four areas in the quality of communication life, interactions with others scored the lowest. The results represented the cultural traits that Koreans are not used to getting into conversation with strangers other than people they are close to such as family members or friends. It may compromise the elderly's interactions with others and expansion of social relationships. Therefore, it is expected to ultimately enhance the quality of life by increasing opportunities for communication through better interactions with others to maintain and expand their social networks to improve the quality of communication life.

Second, a religion is an important variable that may influence the elderly's quality of communication life. A religious life is believed not only to offer psychological comfort that it encourages them to live a valuable life, ethical life, and exemplary life, but also to help them create a social network that can give a sense of belonging while preventing a sense of isolation and provide psychologically-needed resource systems. It is because a religious life is not the primary given social networks such as family, friends, and relatives, but the relationship in which senior citizens will voluntarily participate and will be maintained through efforts based on self-esteem and a sense of fellowship[11].

Third and lastly, the elderly's quality of communication life has 40% explanatory power of the overall quality of life. It means that 40% of the elderly's quality of life is related to the quality of communication life. Consequently, senior citizens' quality of life will be improved through the enhanced quality of communication in addition to financial and health conditions by participating in a variety of community activities similar to a religious life to increase opportunities for communication.

#### 5. Conclusion

The elderly may have social isolation in the modern society, due to the physical aging of the elderly, the change of social role after retirement, and the loss of social status. Accordingly, it should be understood that social networks that are closely related to the elderly can mitigate psychological isolation. In addition, since it affects the quality of life of communication according to the social network of the elderly, it can be said that it is time to have an interest and understanding of the social network of the elderly. Analyzing and approaching the overall quality of life and subareas according to the factors of social network will affect the basic understanding of the quality of life of elderly communication and the basic data of the future rehabilitation of the elderly. Religious older people in the social network should be recognized as the main and important network that affects both the overall quality of life and the quality of the communication life. The overall

quality of life and the quality of life of communication, which did not show significant scores, were considered to be factors that affect the overall quality of life in spouses who are closely related to the elderly, their partners, their partners, and their conversation partners. Attention also needs to be paid to the results of the domain.

This study examines the communication quality of life and the self-esteem of the elderly according to the characteristics of social networks for the elderly. It is meaningful to understand the relationship between social relations and self-esteem, and to take a concrete approach.

The quality of communication life is an important fact that determines the overall quality of life in the elderly. Therefore, senior citizens' healthy ageing without psychological distress will be ensured by maintaining and creating good communication-based social networks.

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